PEER REVIEW TEAM REPORT

Santa Monica College
1900 Pico Boulevard
Santa Monica, CA 90405

This report represents the findings of the Peer Review Team that conducted a focused site visit to Santa Monica College from September 26, 2023 to September 27, 2023. The Commission acted on the accredited status of the institution during its January 2024 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Dr. Keith Flamer
Team Chair

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Santa Monica College
Peer Review Team Roster
TEAM ISER REVIEW

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Superintendent/President
College of the Redwoods

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Superintendent/President
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Santa Monica College
Peer Review Team Roster
FOCUSED SITE VISIT

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College of Marin

ACADEMIC MEMBERS
Dr. Margarita Pillado
Associate Professor/Curriculum Committee Chair
Los Angeles Pierce College

Summary of Focused Site Visit

INSTITUTION: Santa Monica College

DATES OF VISIT: September 26-27, 2023

TEAM CHAIR: Keith Flamer

This Peer Review Team Report is based on the formative and summative components of the comprehensive peer review process. On March 23, 2023 the team conducted Team ISER Review (formative component) to identify where the college meets Standards and to identify areas of attention for the Focused Site Visit (summative component) by providing Core Inquiries that the team will pursue to validate compliance, improvement, or areas of excellence. The Core Inquiry is appended to this report.

A three-member peer review team conducted a Focused Site Visit to Santa Monica College on September 26-27, 2023 for the purpose of completing its Peer Review Team Report and determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and U.S. Department of Education regulations.

The team chair and vice chair held a pre-Focused Site Visit meeting with the college CEO on September 13, 2023 to discuss updates since the Team ISER Review and to plan for the Focused Site Visit. During the Focused Site Visit, team members met with approximately twelve faculty, administrators, classified staff and students in formal meetings, group interviews and individual interviews. The team held one forum, which was well attended, and provided the College community and others with the opportunity to share their thoughts with members of the Focused Site Visit team. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement. The team thanks the College staff for coordinating and hosting the Focused Site Visit meetings and interviews and ensuring a smooth and collegial process.

Major Findings and Recommendations of the
Peer Review Team Report

Commendations

None.

Recommendations to Meet Standards:

None.

Recommendations to Improve Quality:

None.

Introduction

Santa Monica Junior College opened its doors on the second floor of Santa Monica High School with 153 students on September 10, 1929. Evolving missions led to new names: "Santa Monica City College" and eventually "Santa Monica College (SMC)." A pioneer of the American community college movement, the College fulfills the educational needs of the broadest possible cross-section of its community, which extends beyond its district boundaries to the students and employees who come to the College from the surrounding Los Angeles County region, from across the nation, and from all parts of the world.

Over the last six academic years, the total annual course enrollments decreased by 9.7%, the total number of students served annually by the College (unduplicated headcount; credit and noncredit combined) decreased by 13.9%, and the total annual total Full Time Equivalent Students (FTES) has steadily decreased by 15.2%. While the pandemic likely contributed to the decline in the number of students enrolled at the College, the credit headcount has been steadily decreasing, even before the pandemic.

The course enrollment, student headcount, and FTES data suggest that the College is not immune to the steady enrollment decline experienced in higher education nationally. The steepest year-over-year decline in enrollment, headcount, and FTES occurred between 2019- 2020 and 2020-2021, which highlights the disproportionate impact of the COVID-19 pandemic on enrollments.

The only growth during this period has been in noncredit course enrollments. However, when compared to the decline in credit FTES, the six-year decline in noncredit FTES is disproportionately larger, 24.3%, despite the additions of noncredit course offerings over the last few years.

The College operates on a 38-acre campus at 1900 Pico Boulevard, with seven satellite campuses, including the new Early Childhood Lab School, which successfully opened during the pandemic. Thanks to Bond Measure V and Measure S, the Malibu campus began offering classes in Spring 2023, which furthers the services the College can offer Malibu residents. Moreover, the College has secured three federal grants since the last accreditation. The College's National Science Foundation (NSF) and Title VI Hispanic Serving Institution STEM grants have built an equity-focused community of practice that improves STEM faculty's ability to close racial equity gaps and implement more innovative, student-centered practices and policies. Along these lines, a second Title VI HSI grant supports the College's efforts to develop and implement students care teams, a dedicated group of practitioners dedicated to supporting specific cohorts of students within an area of interest (AOI), which enhances the implementation of the College's Guided Pathways work.

Eligibility Requirements

1. Authority

The team confirmed that the College is authorized to operate within the California Community College system as a two-year public institution of higher education by the Accrediting Commission for Community and Junior Colleges (ACCJC). It operates as an educational institution and awards degrees under the authority of the Board of Governors of the California Community Colleges and is locally governed by a seven-member elected Board of Trustees.

The College meets the Eligibility Requirement.

2. Operational Status

The team confirmed that the College is operational and provides educational services to approximately 41,789 student headcount with approximately 90% enrolled in credit courses and 10% in noncredit courses. Santa Monica College has been in continuous service since 1929, originally called Santa Monica Junior College. All courses are published online, posted on the College's website and in the College catalog.

The College meets the Eligibility Requirement.

3. Degrees

The team confirmed that the majority of courses the College offers lead to a degree and/or transfer. Many students are enrolled in degree applicable courses. The College offers approximately 56 Associate of Arts and Associate of Science Degrees and 22 state-approved Associate Degrees for Transfer to the CSU System. The College catalog lists all requirements for all associate degrees. The Associate Degrees for Transfer require a minimum of 60 CSU-transferable semester units with an overall average grade of "C" or higher. Students enrolled full time could complete the requirements in two academic years. In addition, the College offers a 120-unit baccalaureate degree in Interaction Design.

The College meets the Eligibility Requirement.

4. Chief Executive Officer

The team verified that the College has a chief executive officer who was appointed by the governing board. The chief executive officer is responsible for administering the policies adopted by the governing board and executing all its decisions. The college president does not serve as a member of the board nor as the board president.

The College meets the Eligibility Requirement.

5. Financial Accountability

The team confirmed that the institution annually undergoes and makes available an external financial audit by a certified public accountant. The audit includes Title IV federal requirements.

The College meets the Eligibility Requirement.

Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies

The evaluation items detailed in this Checklist are those which fall specifically under federal regulations and related Commission policies, beyond what is articulated in the Accreditation Standards; other evaluation items under ACCJC standards may address the same or similar subject matter. The peer review team evaluated the institution's compliance with Standards as well as the specific Checklist elements from federal regulations and related Commission policies noted here.

Public Notification of a Peer Review Team Visit and Third Party Comment

Evaluation Items:

X	The institution has made an appropriate and timely effort to solicit third party comments in advance of a comprehensive review visit.
X	The institution cooperates with the review team in any necessary follow-up related to the third-party comment.
X	The institution demonstrates compliance with the Commission *Policy on Rights, Responsibilities, and Good Practice in Relations with Member Institutions* as to third party comment.

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The team confirmed that the College solicited third-party comments via the website.

Standards and Performance with Respect to Student Achievement

Evaluation Items:

X	The institution has defined elements of student achievement performance across the institution and has identified the expected measure of performance within each defined element. Course completion is included as one of these elements of student achievement. Other elements of student achievement performance for measurement have been determined as appropriate to the institution's mission. (Standard I.B.3 and

	Section B. Presentation of Student Achievement Data and Institution-set Standards)
X	The institution has defined elements of student achievement performance within each instructional program and has identified the expected measure of performance within each defined element. The defined elements include, but are not limited to, job placement rates for program completers, and for programs in fields where licensure is required, the licensure examination passage rates for program completers. (Standard I.B.3 and Section B. Presentation of Student Achievement Data and Institution-set Standards)
X	The institution-set standards for programs and across the institution are relevant to guide self-evaluation and institutional improvement; the defined elements and expected performance levels are appropriate within higher education; the results are reported regularly across the campus; and the definition of elements and results are used in program-level and institution-wide planning to evaluate how well the institution fulfills its mission, to determine needed changes, to allocating resources, and to make improvements. (Standard I.B.3, Standard I.B.9)
X	The institution analyzes its performance as to the institution-set standards and as to student achievement and takes appropriate measures in areas where its performance is not at the expected level. (Standard I.B.4)

[Regulation citations: 602.16(a)(1)(i); 602.17(f); 602.19 (a-e).]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The College defined six elements of institution-wide student achievement performance and identified expected performance measures and stretch goals for each. Course completion is one of the six elements. The College defined performance elements and measures for license exam pass rates for its three programs requiring licensure. The College defined performance elements and measures for job placement rates for career education programs. The College reports performance on measures of institution-set standards in its Institutional Effectiveness Update. The College's Strategic Plan analyzes its performance as to institution-set standards and student achievement. The team reviewed the template for the 2020-2021 Annual Program Review, Instructional (NonCE) and found that results of student achievement performance on institution-set standards are used in program-level planning.

Credits, Program Length, and Tuition

Evaluation Items:

X	Credit hour assignments and degree program lengths are within the range of good practice in higher education (in policy and procedure). (Standard II.A.9)
X	The assignment of credit hours and degree program lengths is verified by the institution and is reliable and accurate across classroom-based courses, laboratory classes, distance education classes, and for courses that involve clinical practice (if applicable to the institution). (Standard II.A.9)
X	Tuition is consistent across degree programs (or there is a rational basis for any program-specific tuition). (Standard I.C.2)
X	Any clock hour conversions to credit hours adhere to the Department of Education's conversion formula, both in policy and procedure, and in practice. (Standard II.A.9)
X	The institution demonstrates compliance with the Commission *Policy on Credit Hour, Clock Hour, and Academic Year*.

[Regulation citations: 600.2 (definition of credit hour); 602.16(a)(1)(viii); 602.24(e), (f); 668.2; 668.9.]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The College is compliant with the policy on institutional degrees and credits. AA/AS degrees require a minimum of 18 units in the major/area of emphasis, general education coursework, and electives total at least 60 semester units. Certificate programs usually require less than two years of full-time study. The Interaction Design Baccalaureate degree requires a minimum of 120 semester units to complete.

Credit hours and degree program lengths are verified by the College, and is accurate across classroom-based courses, laboratory classes, distance education classes, and for courses that involve clinical practice (if applicable to the institution). Units are determined using the commonly accepted Carnegie unit methodology. The academic year is divided into two semesters of 16 weeks plus a week of final exams and two intersessions (summer and winter). The College operates on a "compressed calendar" with the approval of the state Chancellor's Office. When a course is offered in fewer than 16 weeks, the total instructional hours remain the same as the "semester equivalent." That is, the number of hours of instruction per week is

increased when the course is offered in fewer weeks. The Curriculum Committee approval process ensures that units and hours are reviewed, confirmed, and approved by faculty.

Tuition is consistent across degree programs (or there is a rational basis for any program specific tuition – out of state, international, etc.). Enrollment and tuition fees are described in the college catalog and apply to all credit courses and degree programs. The College does not award credit based on the clock-to-credit hour conversion formula. The institution demonstrates compliance with the Commission Policy on Institutional Degrees and Credits.

Transfer Policies
Evaluation Items:

X	Transfer policies are appropriately disclosed to students and to the public. (Standard II.A.10)
X	Policies contain information about the criteria the institution uses to accept credits for transfer, and any types of institutions or sources from which the institution will not accept credits. (Standard II.A.10)
X	Transfer of credit policies identify a list of institutions with which it has established an articulation agreement.
X	Transfer of credit policies include written criteria used to evaluate and award credit for prior learning experience including, but not limited to, service in the armed forces, paid or unpaid employment, or other demonstrated competency or learning.
X	The institution complies with the Commission *Policy on Transfer of Credit*.

[Regulation citations: 602.16(a)(1)(viii); 602.17(a)(3); 602.24(e); 668.43(a)(11).]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The College provides very clear policies on transfer of credit, develops, and implements a fair process for considering transfer of credit, and makes these policies known to students, the public, and other institutions through the College catalog and the College website. Transfer policies are disclosed to students and the public, and are listed in Administrative Policies 4100, 4235, and 4236. Policies and procedures are also provided in the College catalog and available from Admissions and Records, as well as the Counseling Department. The College has established "pre-evaluation" services for students matriculating to the College with coursework from other institutions of higher education. For continuing students coming from other colleges and

universities, the College's policy is to grant credit for most courses taken at other accredited institutions of higher education, based upon thorough review of the student transcript(s) as well as related information as needed.

Counselors and Enrollment Services evaluators, in consultation with the appropriate department chair or faculty leader, review courses when there are questions regarding course equivalency from other institutions. In these instances, students are requested to provide course descriptions, syllabi, and other relevant documents to ensure alignment of learning outcomes. Records are maintained electronically so that counselors and evaluators can immediately access the evaluation decisions.

Distance Education and Correspondence Education

Evaluation Items:

For Distance Education:	
X	The institution demonstrates regular and substantive interaction between students and the instructor in at least two of the methods outlined in the Commission *Policy on Distance Education and Correspondence Education*.
X	The institution ensures, through the methods outlined in the Commission *Policy on Distance Education and Correspondence Education*, regular interaction between a student and an instructor or instructors prior to the student's completion of a course or competency.
X	The institution demonstrates comparable learning support services and student support services for distance education students. (Standards II.B.1, II.C.1)
X	The institution verifies that the student who registers in a distance education program is the same person who participates every time and completes the course or program and receives the academic credit.
For Correspondence Education:	
	The institution demonstrates comparable learning support services and student support services for correspondence education students. (Standards II.B.1, II.C.1)
	The institution verifies that the student who registers in a correspondence education program is the same person who participates every time and completes the course or program and receives the academic credit.
Overall:	
X	The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings. (Standard III.C.1)
X	The institution demonstrates compliance with the Commission *Policy on Distance Education and Correspondence Education*.

[Regulation citations: 602.16(a)(1)(iv), (vi); 602.17(g); 668.38.]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the Institution does not meet the Commission's requirements.
	The college does not offer Distance Education or Correspondence Education.

Narrative:

All courses, certificates and degree programs offered for credit and noncredit, including those offered via distance education, are subject to a rigorous curriculum approval process upon inception. Course authors must prove that the distance education course will promote robust interaction between the students and content, between the students, and between the students and the faculty member. In addition, the course author must prove that all objectives and learning outcomes will be achieved and are appropriately assessed. The Chair of the Institutional Effectiveness Committee also reviews the proposed Student Learning Outcomes (SLO's) to ensure that they are measurable and support the Institutional Learning Outcomes. A library review ensures that any required library resources are available or can be acquired, and the Disabled Student Services program reviews proposed instructional materials for accessibility.

There is an accurate and consistent application of the policies and procedures for determining if a course is offered by distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student's grade) or correspondence education (online activities are primarily "paperwork related," including reading posted materials, posting homework and completing examinations, and interaction with the instructor is initiated by the student as needed). Courses offered through distance education follow the same processes and procedures as their on-ground counterparts, and the student learning outcomes are the same for credit hour assignments and degree program lengths are within the range of good practice in higher education (in policy and procedure).

The assignment of credit hours and degree program lengths is verified by the institution and is reliable and accurate across classroom-based courses, laboratory classes, distance education classes, and for courses that involve clinical practice.

Student Complaints

Evaluation Items:

X	The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.
X	The student complaint files for the previous seven years (since the last comprehensive review) are available; the files demonstrate accurate implementation of the complaint

	policies and procedures.
X	The team analysis of the student complaint files identifies any issues that may be indicative of the institution's noncompliance with any Accreditation Standards.
X	The institution posts on its website the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities. (Standard I.C.1)
X	The institution demonstrates compliance with the Commission *Policy on Representation of Accredited Status* and the *Policy on Student and Public Complaints Against Institutions*.

[Regulation citations: 602.16(a)(1)(ix); 668.43.]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The team reviewed and verified that the College has clear policies and procedures to address student complaints. Students have access to the policies and procedures within the college catalog as well as on the website. The team reviewed complaints that had been made since the last accreditation visit. The College follows through on the complaints and resolves them in a timely manner.

The College posts on its website the names of associations, agencies and government bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints. The team has found the institution meets the Commission's requirement.

Institutional Disclosure and Advertising and Recruitment Materials

Evaluation Items:

X	The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies. (Standard I.C.2)
X	The institution complies with the Commission *Policy on Institutional Advertising, Student Recruitment*, and *Policy on Representation of Accredited Status*.

X	The institution provides required information concerning its accredited status. (Standard I.C.12)

[Regulation citations: 602.16(a)(1))(vii); 668.6.]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The team reviewed all elements of this component and found that the College meets the Commission's policy requirements. The institution provides accurate and timely information to students and the public about its programs, locations, policies, and accreditation status.

Title IV Compliance

Evaluation Items:

X	The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the U.S. Department of Education (ED). (Standard III.D.15)
	If applicable, the institution has addressed any issues raised by ED as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements. (Standard III.D.15)
X	If applicable, the institution's student loan default rates are within the acceptable range defined by ED. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. (Standard III.D.15)
X	If applicable, contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required. (Standard III.D.16)
X	The institution demonstrates compliance with the Commission *Policy on Contractual Relationships with Non-Accredited Organizations* and the *Policy on Institutional Compliance with Title IV*.

[Regulation citations: 602.16(a)(1)(v); 602.16(a)(1)(x); 602.19(b); 668.5; 668.15; 668.16; 668.71 et seq.]

Conclusion Check-Off:

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:
The College contracts with an external certified public accounting firm to perform an annual audit. The audit is posted on the College's website and is submitted in a timely manner to the necessary agencies. A component of this audit includes testing for federal programs, including Title IV, to ensure compliance with federal requirements to ensure the continuous receiving of federal funding. The College complies with the Eligibility requirement.

Standard I

Mission, Academic Quality and Institutional Effectiveness

I.A. Mission

General Observations:

The College's strong commitment to its mission is evident in its detailed mission statement, which is published widely in various digital and print publications. The mission statement is comprehensive, describing the College's purposes and commitments, its provision of a safe, inclusive, and dynamic learning environment, the variety of programs and support services offered, and its commitment to student learning and achievement. The College's practice is to review the mission statement every five years, with its most recent review in 2017. Hence, the College acknowledges the mission statement should be revised to align with its current efforts, and further emphasize its commitment to racial equity and preparing students for the workforce—this is clearly demonstrated in its more recent planning efforts. The College's practice of using data to inform its decisions is evident in the charge and work systems of two college committees central to its planning work system: the District Planning and Advisory Council (DPAC) and the Institutional Effectiveness Committee (IEC). In addition to this annual activity, the college uses data in its 5-year planning process to develop new strategic initiatives. Given the timing of this self-evaluation, the Peer Review Team will need to follow up on the progress of two ongoing efforts: Review of the College mission statement, and the re-design of its annual program review and planning process to strengthen the budget allocation component.

Findings and Evidence:

The College provided its statements of Vision, Mission, Institutional Learning Outcomes, and Supporting Goals, board-approved in 2015, to the Peer Review Team. Its broad educational purposes, intended student population, degrees and credentials offered, and institutional commitment to student learning and achievement are communicated, demonstrating compliance with this standard (I.A.1, I.A.4, ER.6).

With respect to the use of data to monitor progress on its mission, the College's Academic Senate Joint Institutional Effectiveness Committee (IEC) and Office of Institutional Research (IR) prepare an Institutional Effectiveness (IE) Report and Dashboard each year. These are presented in the fall to the District Planning and Advisory Council (DPAC), which is charged with making recommendations to the Superintendent/President on matters pertaining to budget, facilities, human resources (as appropriate per collective bargaining agreements), instruction, student services, and technology planning. DPAC prepares an annual report which includes a summary of its discussion topics and actions. Based on review of the DPAC annual report from 2019-20, enrollment data are discussed, as are action plans emerging from its program review processes, budget data, student equity plan, and a variety of operational topics critical to institutional planning. However, discussion of the IE Report for 2019-20 was not found on the summary of discussions in the DPAC Annual Report from 2019-20. For the 2020-21 year, it was

clear from the Academic Senate Goals and Objectives and 2021-2022 Annual Action Plans discussions on October 28, 2020, that student achievement data were used, given the objectives of "Close the gap in student outcomes for black and brown students..." as well as the Action Plans stated for improving performance in three student achievement areas. IE Reports were provided to the team for 2020-21 and 2021-22, as was a screen shot of the data dashboards. Based on the evidence provided, objectives and action plans are developed around student achievement data—specifically, closing racial equity gaps. This supports the College's improvement plan to revise its mission statement to include its commitment to racial equity (I.A.2).

The College's use of data in planning is supported by the evidence. There is a widely available dashboard for delivering student achievement data to users across the College; and an Institutional Effectiveness Report with recommendations for improvement was presented to DPAC along with a Program Review Planning Summary in the fall of 2020. Institutional planning systems are comprehensive and include several entities (DPAC, IEC, IR) with specific roles and defined charges. Furthermore, program review procedures require program-level plans to specify how proposed action plans connect with institutional priorities. This annual program planning is integrated into its participatory governance system with evidence of discussions aimed at aligning program requests with institutional priorities. The College has revamped its program review processes to include revised templates prompting for input on effectiveness and data. The College has identified strengthening connections between decision-making, planning, and resource allocation as an area they want to improve upon (I.A.2).

A sample Annual Action Plan for 2020-21 indicates 'Close Gaps in educational outcomes' along with the College's other strategic initiatives are required to ensure alignment and support of institutional objectives. This, along with the sample 'Program Review Prompt' provided, supports compliance with this standard, suggesting the specific evidence of use of data to monitor progress on meeting students' educational needs are available at the individual program level (I.A.3).

Conclusions:

The College meets the Standard.

I.B. Assuring Academic Quality and Institutional Effectiveness

General Observations:

The College deploys several approaches to assuring continuous improvement of academic quality and institutional effectiveness. Strategies include charging a participatory governance committee with monitoring institutional effectiveness, robust professional development offerings, dedicated spaces for specific conversations about equity, and ongoing processes embedded in department and institutional operations.

Sustained, substantive, and collegial dialogue around student learning outcomes assessment primarily occurs within instructional departments and is documented in the Annual Program Review process. To address student equity, in addition to being included in Annual Program Review, the College offers dedicated professional development events on topics such as student perceptions of racial climate on campus (results from the National Assessment of College Campus Climate Survey), the 'Equity Speaks' series, and multiple sessions during its Flex Day (I.B.1).

In addition to annual review processes, ongoing business processes and work systems supporting continuous improvement of academic quality and institutional effectiveness include discussion at regular department meetings, and student learning outcomes assessment which are managed on the College's mProfessor platform. On an annual basis, section-level learning assessments are recorded in Precision Campus which enables trend analysis across various student demographics and other attributes (I.B.1, I.B.2, ER.11).

College performance on institutional effectiveness (IE) metrics and related institution-set standards are evaluated and discussed by the Institutional Effectiveness Committee (IEC) pursuant to its charge. In addition to monitoring the College's progress on IE, the IEC also evaluates and refines as needed the institution-set standards. How well the College is performing on its key IE metrics is published annually in its Institutional Effectiveness Report, which is presented to various participatory governance and planning entities, as well as the governing board (I.B.3, ER.11).

Evidence of the College's use of assessment data, as well as other quantitative and qualitative data, to organize and align its processes in support of student learning and achievement is found in its Annual Program Review processes. Examples provided were Computer Science & Information Systems (CSIS) and the Design Technology department, both of which made strategic changes based on assessment results aimed at benefiting students. CSIS students received these changes positively, and the program posted year-over-year increases in completions (I.B.4).

The Annual Program Review also serves as a vehicle to track the College's performance on student learning and achievement across key demographic and programmatic variables. Disaggregation of student learning outcomes assessments and achievement data are managed through the College's Precision Campus platform and are widely available to institutional decision makers. Examples were provided of programs that analyzed disaggregated data by gender and by ethnicity, then developed and deployed alternative strategies to address gaps. To further strengthen its processes, the team encourages the College to continue reinforcing the connections between decision-making, planning, and resource allocation (I.B.5).

The College has created structures to ensure that student learning and achievement data are disaggregated by subpopulations of students. Additionally, the College uses the data to identify gaps (I.B.6).

The self-identified improvements in its planning and resources allocation systems are recorded in the proceedings of the DPAC pursuant to its charge. As a participatory governance entity representative of all College constituents, DPAC collaborates with the Academic Senate (through its Program Review and Student Affairs Joint Committees). These committees evaluate the College's planning-related policies and practices to ensure they remain effective (I.B.7).

In addition to the IE Report, other strategies for broadly communicating the College's IE performance include Research Advisory Group meetings. Results of college-level assessment and evaluation are shared, discussed, and inform the institutional research priorities developed by this entity (I.B.8).

The DPAC serves as the College's central, deliberative hub for its program review and planning systems and specifies connections between program review and allocation requests for resources—including the prioritization of faculty hires—as well as clarifying its role in the College's master planning cycle (I.B.9, ER.19).

Conclusions:

The College meets the Standard.

I.C. Institutional Integrity

General Observations:

The College is committed to high quality education programs and prides itself in having more than 60 years of compliance with ACCJC required self-evaluations, concerns, and recommendations. The College assures the clarity, accuracy, and integrity of information related to its mission, learning outcomes, programs, student support services and accreditation status to students and the public. It strives to be true to its mission and espouses equity throughout services provided to meet the needs of their diverse population. Whether through its online resources and other investments in technology, the College is striving to improve the accuracy of course sequences, maps, and navigation of their website. Areas of improvement have been identified, ranging from the curriculum development and approval process to a more systematic approach to change management of catalog information and website navigation, to updating its ethics policies and making them more accessible.

Findings and Evidence:

The College assures the clarity, accuracy, and integrity of information provided to students and prospective students, personnel, and all persons or organizations related to its mission statement, learning outcomes, educational programs, and student support services as well as its accreditation status. The team reviewed the Catalog, website, currIQunet and found that the mission, vision, fees, program, and course outlines, and learning outcomes were published. The College's mission, course and program descriptions, and program sequences are published in its catalog, online, and in currIQunet. Information on student support services is located in the Special Programs and Support Services Catalog. The College's mission was revised in 2017 changing pathways to career training due to the large demand in the technology industry. The

mission statement indicates they provide a safe, inclusive, and dynamic learning environment, and that students learn to contribute to the local and global community; the mission is published on their website and catalog (I.C.1, ER.20).

The College provides an online and print (for purchase) catalog for students and prospective students with precise, accurate, and current information on all facts, requirements, policies, and procedures. The catalog is updated annually, and a review process is also established and in place.

The College is currently seeking assistance from Modern Campus to improve the catalog. The accreditation status is located on their website and included in the catalog. The College identified gaps in course sequence maps and has developed a committee to clarify the catalog updating process (I.C.2, ER.20).

The College documents assessment of student learning and evaluation of student achievement to communicate matters of academic quality to appropriate constituencies, including current and prospective students and the public. Assessment of expected learning outcomes are evaluated annually which in turn drives change at the College's senate, DPAC and program levels to improve academic quality and enhance their mission. The College's Institutional Research dashboard contained easy to find data pertaining to program and individual courses; however, there were few details on academic quality.

College regularly assesses course and program learning outcomes (PLOs) collecting data through their SLO portal then compiling it in Precision Campus where it can be filtered and disaggregated. The College is piloting an additional (indirect) way of assessing their PLOs by surveying graduates to determine the extent they have met each outcome (I.C.3, ER.19).

The College describes its programs in terms of purpose, content, course requirements, and expected learning outcomes. Curriculum changes are initiated by faculty in the department and approved by the Curriculum Committee. The Articulation Officer records these changes as they occur and updates all relevant digital and print documents. Maps identify appropriate "Gateway Courses," Program Requirements, General Education courses, and Electives. The College's Articulation Officer, Curriculum Committee, and faculty are all involved in making changes and updates to course and program content/requirements The College Catalog includes descriptions of courses and programs along with sequences (maps), credits, and prerequisites. The team verified that all programs listed on the website of the 2023-24 catalog include a section describing expected learning outcomes. The courses contain a section of course-level learning outcomes (I.C.4).

The College regularly reviews institutional policies, procedures, and publications to assure integrity in all representations of its mission, programs, and services. There is regular review of policies and regulations which are updated and aligned with the College's mission, programs, and services. To ensure the regular review of Board policies and regulations, the College contracted with the Community College League of California (CCLC), which is focusing its effort to include templates for diversity, equity, accessibility and all inclusion and accessibility-related issues. The college developed a matrix indicating transition from former College

numbers/titles to CCLC templates. For transparency, information is also stated on the Board Policy Manual webpage on which policy is updated and which is pending. Various Academic Senate Joint committees are responsible for reviewing and updating the policies and regulations relevant to their scope and function (I.C.5).

The College accurately informs current and prospective students regarding the total cost of education, including tuition, fees, and other required expenses, textbooks, and other instructional materials. There are several venues that address and publish costs to students both online and in print. Fees for residents and non-residents were easily located on their main website under the Cashier's Office tab (I.C.6).

To ensure institutional and academic integrity, the College uses and publishes governing board policies on academic freedom and responsibility. The College's Academic Freedom Statement provides faculty and staff with specific guidance to ensure an atmosphere of intellectual freedom and is currently being reviewed by the Academic Senate's Professional Ethics and Responsibilities Committee (PERC). After it is reviewed it will be added to the faculty handbook. This is published under the "Please Note" section of the college catalog with Spanish and Korean versions. The College provides opportunities for faculty discussions on academic freedom and equity (I.C.7).

The College established and published clear policies and procedures that promote honesty, responsibility, and academic integrity. These policies apply to all constituencies and include specifics relative to each, including student behavior, academic honesty, and the consequences for dishonesty. Students click on an honor code agreement box when they register for classes. Links to the College's policies and regulations are publicly available on the Board of Trustee's website. Students are informed about the College's policies on student academic honesty and student behavior in several ways, such as the printed schedule of classes and the Catalog webpage. The College notes the Managerial Code of Ethics, located on the Academic Senate website, is over twenty years old and needs to be updated.

College policy relating to expectations that faculty act honestly and with integrity is clearly articulated in their Faculty Handbook, Administrative Regulation 5220, Ethics Statement; this expands upon Board Policy 1230, Code of Ethics, Board Policy 5210, and Academic Freedom. To inform faculty of these policies, the Faculty Handbook, which is distributed to all new full-time and part-time faculty by Human Resources, addresses such issues as academic integrity, ethical behavior, and the respectful and equitable treatment of the College's diverse student population. The College also produced a Model Syllabus (I.C.8).

College faculty are able to distinguish between personal conviction, professionally accepted views, and present data and information fairly and objectively. The Conflict-of-Interest policy ensures private interests do not conflict with work tasks. The course outlines set guidelines for what is expected to be taught in each course which is reviewed by the department, Curriculum Committee, and academic administrators. The College has faculty and professionalism forms to ensure course content is consistent and policies are followed. The College promotes an environment where "instructors and students must be free to investigate, to form conclusions, and express judgments and opinions" (I.C.9).

The College requires conformity to specific codes of conduct of staff, faculty, administrators, or students but does not seek to instill specific beliefs or world views. The College's specific beliefs and world views are incorporated in its statements of Vision, Mission, Supporting Goals, and Institutional Learning Outcomes. The College's core values are shared during new student orientation, new faculty and staff orientation, and course registration. When a student sets up their Corsair account, they are prompted to "affirm their commitment to the College's Honor Code by reviewing the statement and selecting "I accept" (I.C.10).

I.C.11—Not applicable since the College is not operating in a foreign country.

The College prides itself in having more than 60 years of continuous compliance with ACCJC self-studies, responses to concerns, and recommendations. The College complies with Eligibility Requirements, Accreditation Standards, Commission policies, guidelines, and requirements for public disclosure, institutional reporting, team visits, and prior approval of substantive changes. When directed to act by the Commission, the institution responds to meet requirements within a period set by the Commission. It discloses information required by the Commission to carry out its accreditation responsibilities. (I.C.12, ER.21).

The College advocates and demonstrates honesty and integrity in its relationships with external agencies, including compliance with regulations and statutes as is evident in their audit report, reporting hotline, Grant Management Handbook, and Board Policy 6324. It describes itself in consistent terms to all its accrediting agencies and communicates any changes in its accredited status to the Commission, students, and the public. The College instituted a confidential reporting hotline for complaints about unethical, illegal, or unsafe situations. The College is independently audited to ensure compliance with federal programs. The College also maintains compliance with other accreditation entities such as the California Board of Nursing and The State of California Board of Barbering and Cosmetology (I.C.13, ER.21).

The institution ensures that its commitments to high-quality education, student achievement and student learning are paramount to other objectives, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests. The College provides a high-quality education and values the contributions of the local community, governing bodies, and accrediting organizations. Student achievement and learning take priority over other objectives. The Peer Review Team examined Policies 2160, 2161, and 2163 which the College reviews annually. Finally, the Citizens' Bond Oversight Committee ensures fiscal responsibility (I.C.14).

Conclusions:

The College meets the Standard.

Standard II

Student Learning Programs and Support Services

II.A. Instructional Programs

General Observations:

The College offers programs in fields of study that align with its mission, are appropriate to higher education, and lead to student achievement of learning outcomes, degrees, certificates, employment, career preparation/advancement, and transfer. The College has processes in place that allow for continual program improvement, ensuring that students are provided opportunities to successfully complete high-quality, innovative educational programs that prepare them for career or transfer.

Findings and Evidence:

The College offers a wide range of instructional programs which are consistent with their mission and appropriate to higher education. College materials describe programs (i.e., College catalog) offered by the College, and these fields of study are consistent with the mission of the College. The Academic Senate Joint Curriculum Committee facilitates ongoing quality assurance of the College's course and program offerings. The role and duties of the committee are to ensure all instructional offerings, including online and in-person, are consistent with the College's Mission, appropriate to higher education, and are focused on student achievement of stated learning outcomes at both the course and program level. Curriculum committee members are trained in state requirements for community college curriculum and adhere to state regulations.

The College meets this standard with the curriculum approval process ensuring that each course or program, credit and noncredit, in-person and online is offered in a field of study consistent with the institution's mission, is appropriate to higher education, and culminates in student attainment of identified student learning outcomes, and achievement of degrees, certificates, employment, or transfer to other higher education programs (II.A.1, ER.9, ER.11).

The faculty demonstrate collective ownership over the design and improvement of the learning experience through systematic and inclusive program review. The regular program review process at the College specifically solicits department-wide reflection on course success and retention rates, as well as racially disaggregated student success and retention rates by course. The faculty-driven curriculum development and approval process incorporates multiple review milestones requiring participation by full-time and part-time faculty. The College sustains a broad range of professional development activities to promote continuous improvement of courses, programs, and services. The Professional Development Committee holds two annual professional development days in addition to on-going faculty professional development events such as webinars or workshops (II.A.2).

Faculty engage in the assessment of student learning outcomes as part of their six-year program review cycle. The team reviewed samples of course syllabi and course outlines of record to demonstrate evidence of student learning outcomes being communicated to faculty and students. The College strives to create and sustain an academic environment that is high-quality, innovative, and responsive. The identification and assessment of learning outcomes at the course, certificate, degree, and institutional levels are all part of this process. All College courses have a Course Outline of Record and include student learning outcomes (SLOs), assessed annually, as a required component to be assessed. Similarly, each degree and certificate of achievement program includes a statement of the degree or certificate learning outcomes in the program overview (II.A.3).

The College offers multiple paths from pre-collegiate to collegiate level coursework through both credit support courses and noncredit coursework, allowing students to select the level of support that meets their needs. The team found that the College has created pathways that support students in their pursuit of advancing and succeeding in college level curriculum. Course numbering and course descriptions published in the college catalog differentiate pre-collegiate courses from collegiate courses. In addition, student learning objectives and student learning outcomes, as articulated in the course outlines of record and on individual course syllabi, clearly distinguish pre-collegiate coursework from collegiate coursework in both credit support classes and noncredit preparation classes (II.A.4).

The College offers degrees and programs that align with those common to American higher education. The College's instructional programs have helped it maintain its reputation as a transfer preparation and career readiness College. All of the College's programs feature high-quality instruction and appropriate breadth, depth, rigor, sequencing, time to completion, and synthesis of learning. The Academic Senate Joint Curriculum Committee validates course advisories, co-requisites, and prerequisites by reviewing the exit skills of a course and the entrance skills required to succeed in the subsequent course. Noncredit courses also undergo careful review both in the College's curriculum approval process and again through the California Community Colleges Chancellor's. Office approval process. For all its courses and programs, including those delivered online, the College's faculty ensure the appropriate breadth, depth, and rigor by engaging in thorough discussion of course hours, units, and detailed course objectives and learning outcomes for each course in the program. In a typical instructional program, sequencing is determined using similar processes as for breadth, depth, and rigor. The process of determining prerequisites for courses within an area of emphasis requires both faculty expertise and reliance on accepted practices within each specific discipline. Some programs are heavily sequenced using courses that share and relate to one another as prerequisites (II.A.5, ER.12).

The College provides its students with schedule options that allow for the completion of certificates and degree programs within a timeframe that is consistent with established expectations for higher education. The College has identified and articulated specific planning goals to meet the needs of their community. Data is used to inform their scheduling decisions, meeting student demand while striving to reach their identified enrollment goals (II.A.6, ER.9).

The College uses a variety of delivery modalities, teaching methodologies, and learning support services to deliver courses that reflect the diverse and changing needs of their student population. The College is undertaking an extensive professional development effort to close racially inequitable achievement gaps for students across all course delivery methods. In the past year, students were surveyed and indicated they prefer online courses (54%), which assisted in the development of the course schedule. The success rates for online courses continue to stand out and course quality is reflective of that. For the past 7 years, equity gaps have closed between online and on-ground classes for Black, Latinx, Native American, and Pacific Islander students. The College will continually monitor and reinforce change through planning efforts as needed (II.A.7).

The College has its placement policies and procedures compliant with state law both in their regular operations as well as in terms of the protocols in place to evaluate them over time. Following the passage of AB705 in 2018, the College no longer administers department-wide assessment and placement exams in English, ESL, and Math**.** Prior to AB705, the College administered ACCUPLACER and COMPASS placement exams, the College now offers students guided-self placement modules compliant with AB 705. The College's course catalog does include courses with pre-requisites, and for each pre-requisite the college provides a student the means to challenge that pre-requisite either through proof of prior course credit or through direct assessment of prior learning, typically by means of a challenge exam (II.A.8).

The College awards course credit, degrees, and certificates based on the students' attainment of learning outcomes, reflecting generally accepted norms or equivalencies in higher education. Credit hour assignments and degree program lengths are within the range of good practices typical in higher education for courses, laboratory classes, distance education classes, and courses that involve clinical practice. Student learning outcomes (SLOs) are identified in the Course Outlines of Record and are articulated to the students via each course syllabus. Course-level SLOs map up to the program-level, allowing the College to assess student-attainment of learning outcomes through the completed course assignments, integrating SLOs into the awarding of course credit, degrees, and certificates (II.A.9, ER.10).

The College offers a comprehensive website, which includes the complete catalog, schedule of classes, and special program information. The course descriptions in the catalog and schedule of classes include accurate transfer information for UC and CSU, as well as IGETC areas and C-ID numbers. The College now has 139 courses approved via the C-ID process, which facilitates the mobility of students pursuing Associate Degrees for Transfer without penalty. To ensure students have access to current information regarding transfer requirements, the General Counseling/Transfer Services Center provides transfer information for public and private institutions located in California, as well as national and international institutions. The articulation website lists CSU and UC general education requirements for transfer, the College's articulation agreements, and pre-professional advising and education plan information. MyEdPlan allows students to integrate educational planning with transfer planning and develop a path to facilitate program completion and/or transfer (II.A.10, ER.10).

The College includes learning outcomes in communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, and the ability to

engage diverse perspectives in addition to program-specific learning outcomes. The College's institutional learning outcomes (ILOs) are aligned with the College's mission and, as part of the curriculum approval processes, all courses and programs must demonstrate alignment with the ILOs (II.A.11).

The College's Curriculum Committee approves, and recommends coursework for local general education patterns, carefully considering the philosophy and criteria, ensuring that their degree requirements align with the established Board Policies and Administrative Regulations, as well as state-level legislation and transfer institution requirements (II.A.12, ER.12).

The College offers degree programs that analyze the results of their course level student learning outcome assessments for the past decade. Each department has refined the process to ensure that the data they collect and analyze provide the most relevant and useful information about their courses and their effectiveness in achieving student outcomes (II.A.13).

Graduates completing career-technical certificates and degrees at the College demonstrate technical and professional competencies that meet employment standards and other applicable standards and preparation for external licensure and certification. The College monitors student achievement data and external licensure and certification rates, but also analyzes these data with advisory board members, prompting continued conversation about expected technical and professional competencies and standards in each of the career-technical program areas (II.A.14).

The College makes appropriate arrangements for students to complete their education when programs are eliminated or when the requirements are significantly changed through college, or departmental processes (II.A.15).

The College meets this standard by offering instruction and programs in a wide variety of fields and delivery modes. The College's program review process scrutinizes each of these programs, regardless of mode, where programs show how they are continuing to improve student outcomes. Degrees, certificates, and for-credit coursework all undergo rigorous process of review by the Curriculum Committee (II.A.16).

Conclusions:

The College meets the Standard.

II.B. Library and Learning Support Services

General Observations:

A comprehensive library and learning support services are of sufficient quality, currency, depth, and variety and are available to students regardless of location or means of delivery. The College routinely relies upon the expertise of faculty to select and maintain materials to support student learning. Data on usage and student success are compiled and used to improve library and learning support services, including tutoring, library collections, computer laboratories, and

more. Through annual planning and cyclical program review, the College evaluates library and learning support service programs, collections, contracts, and services.

<u>Findings and Evidence:</u>

The College supports student learning and achievement through library and other learning support services to students and the broader campus community. The library provides facilities and resources to support the campus community across the curriculum. Facilities include 21 study rooms, seating for 1300, and 220 computers for student use. Resources include access to faculty librarians, staff, and technical support, as well as nearly 50 databases, e-books, and over 80,000 print books (II.B.1, ER.17).

The College relies upon the expertise of librarians in the selection and maintenance of educational materials to support student learning. Librarians use a variety of methods to engage faculty in the selection of appropriate educational resources. Educational equipment and learning spaces are provided to support student learning. The College also meets the standard by purchasing and maintaining appropriate, effective, and accessible materials and accompanying equipment in support of student learning. Oversight of those activities is provided by faculty librarians, professional staff, and discipline faculty, in alignment with their mission (II.B.2).

The College meets the standard by regularly evaluating the library and learning support services. Annual and six-year Program Review are the vehicles by which the College assesses and reviews these programs and integrates program needs into the budgeting process through reporting to the DPAC. Resource allocation is guided by student needs that are highlighted in those reports. This planning process ensures the College takes into consideration the results of regular assessment and targets necessary areas of improvement in library and learning support service programs (II.B.3)**.**

There is a high level of collaboration between the library and other institutions and agencies. When relying upon or collaborating with other institutions or agencies, the College documents these instances through formal written agreements. Contracts are reviewed and renewed on a regular basis and scheduled evaluations inform the selection process (II.B.4, ER.17).

<u>Conclusions:</u>

The College meets the Standard.

II.C. Student Support Services

<u>General Observations:</u>

The College provides a comprehensive array of services that supports student success and aligns with the College's mission, Educational Master Plan and Student Equity Plan. Student support services are accessible to students at all campus locations and for both credit and noncredit students. Student Services programs complete an annual plan and a comprehensive program review every six years. The College follows a resource allocation process that includes a review

of student outcomes data. The College offers athletics and a variety of co-curricular programs that support the college mission. Both credit and noncredit counseling departments provide timely, useful, and accurate information regarding academic requirements and pathways. The College regularly evaluates practices and follows established policies for the release of student records.

<u>Findings and Evidence:</u>

The annual and comprehensive program review process is in place to ensure student support services engage in regular assessment and evaluation activities for planning and continuous improvement efforts. The questions in the program review template prompt student service programs to describe the results of data by evaluating the quality and effectiveness of the program and analyze the insights drawn from the data to inform future actions and planning. The team reviewed surveys, studies, and program evaluations as evidence of the College's commitment to quality counseling, services, and support for students. The College conducted a longitudinal study of the STEM Scholars Program to track progress and achievement. The College regularly evaluates the quality of its student support services in person and online for students taking credited and non-credit courses. Every six years the College conducts a comprehensive evaluation for every student service area with an annual review. (II.C.1, ER.15).

The College has identified and assessed learning support outcomes and provides appropriate student support services to achieve those outcomes. Using a program review process, disaggregated student achievement and survey data are reported and used as the basis for plans to improve student support programs and services. For example, the structure of a financial aid workshop was modified based on student survey data to increase the number of submitted applications. As a result of survey feedback, the College created an online self-service booking system in Corsair Connect and provided virtual express counseling. In 2019, the Counseling Department began using the self-service counseling appointment booking system which was especially useful during the pandemic. The Counseling department regularly assesses its services via a survey administered to students participating in counseling services each term. The College's Pearl Chatbot went live in 2020 which assists students in website navigation. The College also initiated a communication outreach plan to target students with housing and food insecurity. Due to diminished participation in tutoring as cited in EOPS' program review, the College transitioned to an on-line tutoring platform, Smarthinking, which provides access to tutoring 24/7. This was recently launched and supplements in-person tutoring (II.C.2, ER15).

The College assures equitable access to all students and provides appropriate, comprehensive, and reliable services in all their six locations to include the main campus and satellites both online and in-person. Comprehensive and equitable student support services are provided to all students including ones that target special populations. The College's website was redesigned in 2020 making it more user friendly on mobile devices. Many events and services were moved online during the pandemic and there is 24/7 online counseling in addition to in-person. The College made strides in helping students succeed remotely such as Chromebooks and internet access. The College provides onboarding services, online orientations for new students, and special orientations for international, racially marginalized, and non-credit workforce development students. The new Student Services Building has created a one-stop-shop

environment that has improved the way counseling services collaborate across programs. The DREAM Program provides support services to undocumented students, the RISING Program assists in transitions into college after incarceration, Peer Navigators connect with first-year students within the same Area of Interest (II.C.3, ER.15).

The College provides athletic and other co-curricular programs that are well suited to its mission and that contribute to the social and cultural dimensions of the students' educational experience. Athletic programs (18 sports teams) are conducted in accordance with sound educational policy as evidenced by service projects, course success, transfer data and compliance with California Community College Athletic Association (CCCAA) eligibility criteria. The College takes pride in the numerous programs that are related to their Institutional Learning Outcome #5 and supports their mission. Their programs meet the social and cultural dimensions such as their Study Abroad Program, Service Learning, Internship Program, Earth Week, Persian New Year, Club Row, Sukko, their award-winning newspaper, the Corsair, Global Motion and Synapse. The College has established Board Policies that govern Student Organizations, BP 5400, and Associated Student Finances, BP 5420 (II.C.4).

The College provides counseling to 22 unique student programs and services to support the development and success of students. The department has 34 full-time academic counselors and 123 part-time academic counselors. Regular training is provided to the entire counseling staff in conjunction with bi-monthly department meetings. Trainings cover changes to certificate/degree and transfer requirements as well as academic policies and procedures. Equity-minded practice is a top priority for the Counseling Department. Through new student orientations, educational plans, and workshops, counseling and advising programs orient students to ensure they understand the requirements related to their programs of study and receive timely, useful, and accurate information about relevant academic requirement, including graduation and transfer policies (II.C.5).

The College has adopted and adheres to admission policies consistent with its mission. Administrative Regulation 5010 describes the admissions eligibility for students. The College has an "open door policy" that allows anyone 18 years of age or older or who has a high school diploma to enroll in the College. The College defines and advises students on clear pathways to complete degrees, certificates, and transfer goals. The College created program maps to serve as a critical baseline tool for Counseling faculty when developing educational plans with students. The maps help to bring clarity to program completion timelines. Also, the college catalog contains all programs and requirements for graduation and transfer (II.C.6, ER 16).

The College admits any student who has the capacity and motivation to benefit from higher education. The College does not impose testing requirements as a condition of admissions. With the AB 705 requirements the College uses high school coursework, high school grades, and high school grade point average or guided self-placement to determine placement into English, Math and English as a Second Language courses. The College regularly evaluates assessment and placement instruments and accesses practices to validate their effectiveness while minimizing biases (II.C.7).

The College maintains student records permanently, securely, and confidentially. Board Policy 3310 discusses Records Retention and Destruction. Administrative Regulations (AR) 5040.4 describes the method and location for archiving student records. Records are securely backed up through a variety of technologies regardless of the form in which those files are maintained. Processes are in place for the release of student information and are found on the College's website as well as within the student Corsair Connect portal (II.C.8).

Conclusions:

The College meets the Standard.

Standard III

Resources

III.A. Human Resources

General Observations:

The College provides Human Resources services through their District Human Resources (HR) department and with a Personnel Commission process to provide adequate hiring of faculty, staff, and administrators to help the College meet its mission. The Personnel Commission is not governed by the College, and is responsible for classification, promotion and merit-based principles provided to the classified employees of the College. Human Resources is responsible for all the recruitment and hiring of academic personnel, as well as collective bargaining matters, and the evaluation of all employees and staff development for all employees.

Findings and Evidence:

The College assures the integrity and quality of its programs and services by selecting highly qualified individuals who have the appropriate education, training, and experience to provide and support programs and services. Criteria, qualifications, and procedures for selection of personnel are clearly and publicly stated and Board Policies and Administrative Regulations are relevant to hiring practices. Job descriptions are directly related to institutional mission and goals and reflect position duties, responsibilities, and authority. Job announcements are created from position descriptions or classifications and are posted on the College's website (III.A.1).

The College employs qualified faculty to meet the instructional and counseling needs of its students. Faculty qualifications include knowledge of the subject matter and requisite skills for the service to be performed. The College adheres to carefully crafted hiring processes in evaluating faculty candidates to ensure that they appropriate degrees, professional experience, discipline expertise, level of assignment, teaching skills, scholarly activities, and potential to contribute to the mission of the college. Faculty job descriptions include development and review of curriculum as well as assessment of learning (III.A.2, ER.14).

The College adheres to the qualifications outlined in California Code of Regulations 53420: Minimum Qualification for Educational Administrators. The College ensures that administrators and other employees responsible for educational programs and services possess qualifications necessary to perform duties required to sustain institutional effectiveness and academic quality. For classified managers, the job classifications are developed by the Personnel Commission to reflect the qualifications and experience necessary for the position as indicated by the scope of the assignment and departmental goals (III.A.3).

The College adheres to California Code of Regulations, specifically title 5, sections 53400-53430, which state that all faculty, administrators, and other employees must possess degrees and/or credits from accredited institutions recognized by U.S. accrediting agencies. Either the

Office of Human Resources or the Personnel Commission verifies that individuals proposed to be hired have eared the required degree for the position and/or discipline; verification includes copies of official transcripts, and confirmation of the granting institution's accreditation status. Applicants who have earned degrees outside of the United States, the Office of Human Resources and/or the Personnel Commission verify and show degree equivalency (III.A.4).

The College assures the effectiveness of its human resources by evaluating all personnel systematically and at stated internals. Faculty are evaluated in accordance with applicable provisions of the collective bargaining agreement. Classified personnel are evaluated in accordance with applicable provisions of the collective bargaining agreement between the District and California School Employees Association.   The evaluation of administrators and managers is set form in Board Policy 7150 and Administration Regulation 7150.   The College has written criteria for evaluating all faculty, classified personnel, and administrators, including performance of assigned duties and participation in institutional responsibilities and other actives appropriate to their assignment.   The evaluation processes seek to assess effectiveness of personnel and encourage improvement as outline in evaluation forms. The actions taken following evaluations are formal, timely, and documents areas of improvement (III.A.5).

III.A.6 – Effective January 2018, Standard IIIA.6 is no longer applicable. The Commission acted to delete the Standard during its January 2018 Board of Directors meeting.

The College uses multiple processes to determine appropriate staffing levels for each program and service. Processes include program review, enrollment data and trends, labor market projections, equity data and initiatives, and new programs/directions the department is implementing and relevant to the College's Vision, Mission, and Goals. In Fall 2021, the percentage of Full Time Equivalent Faculty to Full-time Faculty was 49.40%. The College maintains a sufficient number of qualified faculty, which includes full-time faculty and part-time and adjunct faculty, to assume the fulfillment of faculty responsibilities essential to the quality of educational programs and services to achieve its institutional mission and purpose (III.A.7, ER.14).

The College integrates its part-time and adjunct faculty in the life of the institution via orientation, evaluation, professional development, department meetings and social activities. All newly hired and rehired part-time faculty meeting with a Human Resources Specialist. All faculty members must complete required documents and review orientation materials. Evaluation of part-time faculty is guided by contract between the District and the Santa Monica Faculty Association. Part-time faculty are required to fulfill flex credit prorated based on the number of credits they teach and are strongly encouraged to participle in all professional development activities. The College provides opportunities, such as part-time faculty volunteer to serve as Academic Senate representatives and on Academic Senate committees, for integration of part time and adjunct faculty to the life of the institution (III.A.8).

The College maintains a sufficient number of staff with appropriate qualifications to support the effective education, technological, physical, and administrative operations of the institution. All student-support programs and administrative units submit an annual program review report and

undergo a comprehensive program review every six years to address staffing needs within the area (III.A.9, ER.8).

The College maintains a sufficient number of administrators with appropriate preparation and expertise to provide continuity and effective administrative leadership and service that support the institution's mission and purpose. The College uses program review, in conjunction with the Personnel and Budget Augmentation Request (PBAR) process, to assess whether the College employs a sufficient number of administrators. Administrators are also provided professional development opportunities and training to help ensure they provide effective leadership and services (III.A.10, ER.8).

The College has clear and established personnel policies and procedures as outlined in its board policies, administrative regulations, and collective bargaining agreements. The policies and procedures are fair and are administered equitably and consistently. All board policies and administrative regulations are available online through the College's Board Manual webpage (III.A.11).

The College, through its policies and practices, creates, and maintains appropriate programs, practices, and services that support its diverse personnel. The College prioritizes its appreciation of, attention to, and services for individuals from all backgrounds and experiences as expressly stated in the Mission Statement, Institutional Learning Outcomes, and Supporting Goals. The Office of Human Resources conducts a biannual assessment of the race and ethnic make-up of the college personnel to regularly assess its record in employment equity and diversity consistent with its mission (III.A.12).

The College upholds a written code of professional ethics for all its personnel, including consequences for violations. Board Policy 3050: Institutional Code of Ethics applies to all college employees and is supported by Administrative Regulation 3050: Institutional Code of Ethics which articulates the College's ethical expectations of faculty under their right of Academic Freedom and Responsibilities, as well as professional codes of ethics established by the Academic Senate and the Management Association. If case of an ethical violation, the employee meets with their supervisor to discuss allegations, and a report placed in their personnel file (III.A.13).

The College is committed to the professional development of all employee groups. The College hired a full-time Professional Development Coordinator position to coordinate the various professional development opportunities for all faculty, classified professionals, and supervisors. The Academic Senate Professional Development Committee (PDC) is responsible for planning the institutional professional development days and approving funds to individual faculty for their training or professional development activities. The College plans for and provides all personnel with appropriate opportunities for continued professional development, consistent with the institutional mission and based on evolving pedagogy, technology, and learning needs. The College systematically evaluates professional development programs through post-activity evaluation feedback. The results of the evaluations are the basis for the improvement of future professional development activities (III.A.14).

The College maintains personnel files for all employees. Personnel files are stored either electronically or in a file room within the Human Resources Office. The College makes provisions for the security and confidentiality of personnel records. Electronic systems are secured using password protection and physical location locked during non-business hours. The College provides employees with access to their files in accordance with the California Education Code, Title 3, Section 87031, Administrative Regulation 7145: Personnel File and Board Policy 7145: Personnel Files (III.A.15).

Conclusions:

The College meets the Standard.

III.B. Physical Resources

General Observations:

The College demonstrates that they provide adequate facilities to support the mission, vision, and values of the institution.   The College spans 64 acres and includes 40 buildings. The College operates under the 2010 Facilities Master Plan (FMP), and the 2016 FMP Update. A new FMP is scheduled for 2024. The FMP provides guidance for the campus for the facilities planning process at the College, including current projects, future projects and expansions, and sustainability components.

Findings and Evidence:

The College provides access through ensuring there is sufficient parking, including disabled parking, and the College has a partnership with the City for public transit. The College also works with the County Metro Go Pass system and is a partner with the Expo Light Rail with a dedicated station named for the College. The College has extensive Safety and Risk Management department which instituted three new programs to deal with Pandemic-related safety protocols (Lockout/Tagout, Bloodborne Pathogen Exposure Control, and Personal Protective Equipment Program). An Emergency Operations Team (EOT) of senior administrators along with those with positions at the campus in Safety and Security were put into place to deal directly with Covid-19 issues both with the campus and larger Los Angeles Public Health community. The EOT took the lead in ensuring site specific safety plans for all programs and services offered at the campuses. Programs at the College that utilize hazardous materials follow industry standard Safety Data Sheets, and the College has a comprehensive Hazard Mitigation Plan for the handling, preparation, and disposal of hazardous materials. The College maintains security through the employment of its own Police department (SMCPD), which trains with the City of Santa Monica for emergency response and preparedness. SMCPD has a consistent interface with faculty and students through the offering of training in these areas. Clery documentation is met through the appropriate notification processes (III.B.1).

The College has also engaged in numerous sustainability projects through the implementation of a College Sustainability department, and through numerous actions across campus pointed toward sustainable practices including zero waste events, water refilling stations and water-saving solutions, organic garden, green cleaning program, and the development of a Center for

Environmental and Urban Studies. Surveys are conducted periodically to assess practices and policies around College Services that are provided (III.B.2).

The Facilities Maintenance and Operations area is developing a Total Cost of Ownership Plan to improve maintenance and custodial services throughout District sites. Association of Physical Plant Administrators (APPA) standards are the basis for this planning project. The FMP is the guiding document for planning around finance and management of capital projects for Facilities replacement and improvement throughout all sites in the College District (III.B.3).

Facilities planning and evaluation is coordinated through the DPAC Facilities subcommittee recommendations to the Facilities Planning Office. Facilities Management utilizes a work order system to manage specific internal requests. The Program Review process is utilized to close the loop on the effectiveness of each area in conjunction with their interface with Instructional and Student Service areas. Program Review is also utilized to evaluate the effectiveness of the Offices themselves through the self-evaluation process. Total Cost of Ownership is seen by the College as the vehicle for ensuring long range capital improvements effectively support institutional improvement (III.B.4).

Conclusions:

The College meets the Standard.

III.C. Technology Resources

General Observations:

The College demonstrates that they provide sufficient technological services to support the mission, vision, and values of the institution. The College provides technology support through a centralized Information Technology department (IT). Support, Services, Hardware, and Software are all managed by IT. The department has a replacement plan, provides necessary updates, and is currently evaluating the College's Technology Master Plan (TMP) to maintain currency and support College programs and services. All College sites are managed for technology access and provided technology training. Protocols are in place to ensure appropriate use by all members of the campus community.

Findings and Evidence:

A five-year staffing plan was developed through a program review and peer benchmarking processes. The College was identified to have higher levels of IT Full-Time Equivalents than peer institutions. The College has a Service Level Agreement (SLA) in place to close the loop on services provided relative to timeliness and effectiveness following the Continuous Quality Improvement (CQI) model. WiFi access for students was recently evaluated and improvements were made at various access points. All campus personnel have College standard networked desktops. Software is standardized through the use of Microsoft Office and Adobe Suites. COVID-19 was managed through the use of Citrix Workspaces to allow work-at-home capability. In 2021, to meet faculty demands, laptops were included in the option for distribution through the College's Technology Equipment Refreshment Plan (TERP). Chromebooks were

supplied to students during COVID-19 to ensure teaching and learning could continue. The College migrated to Canvas for Distance Education Learning platform in 2016. Student services functions are supported through a combination of homegrown IT software systems and commercially available products including Ellucian/Banner and WebISIS (III.C.1).

The DPAC recently published a Technology Assessment that has driven the most updated TMP, and the need to update the plan annually to maintain reliable technological infrastructure. The Facilities Master Plan (FMP) utilizes the TMP for infrastructure-based decision-making. The College is currently going through an upgrade of older Oracle Forms to a modern web-based solution. Homegrown Web ISIS systems are planned to be replaced by a "commercially viable" Enterprise Resource Planning system (ERP). The College maintains a refresh cycle for both infrastructure and equipment through the technology and equipment replacement plan (TERP). The cycle is 5-7 years. Access, Safety, and IT Security are available to all District sites. The College indicates a proactive approach to evaluating and proactively predicting possible threats to IT security infrastructure (III.C.2).

The College provides an equal level of access, safety, and security to all locations by applying the District's IT SLA, and established technology purchasing standards. The College is responsive to technology security threats as well as proactive in attempting to predict new threats to safety and security (III.C.3).

IT manages technology training services for faculty and staff and based on a Technology Assessment done in 2019 added a help ticket process for student technology issues. The College utilizes the Vision Resource Center provided by the California Community College Chancellor's office for professional development content (III.C.4).

Appropriate teaching and learning use of technology is managed through Board Policy and Administrative Procedures processes (III.C.5).

Conclusions:

The College meets the Standard.

III.D. Financial Resources

General Observations:

The College demonstrates that they have sufficient resources to support programs and services through the maintenance of adequate reserves. The College ensures fiscal responsibility and stability through its planning and budgeting practices. Financial decisions are linked back to the College mission, strategic goals and planning documents, and the overall Institutional Learning Outcomes for decision-making. Liabilities risks to the College are evaluated, audited, and planned for as part of the annual planning process.

Findings and Evidence:

Current reserves exceed 22%. Average reserves exceeded 16% for last five years. A SERP was offered in 2020, which resulted in projected $8M savings over 5 years with the retirement of 97 staff members. Savings identified were converted into remote learning resources early in pandemic. All through shared governance planning processes (III.D.1, ER.18).

The College demonstrates a process by which ongoing needs to meet the College's mission, vision, and values can be accommodated through the DPAC. Final approval is through District leadership team. DPAC is the shared governance group charged with meeting the standards for adequate planning and budgeting based on the College's mission. Fiscal services division provides regular feedback loop to the community on budget status. This is through publication on website. Internal control systems follow Generally Accepted Accounting Principles (III.D.2).

All constituent groups participate in the institutional planning and budget development process. Public discussion of the budget at the open board meetings, including a preliminary presentation of the coming year's budget three months before a vote to adopt it, allows a generous timeframe for public input as well as thoughtful consideration by all members of the college community. Quarterly budget reports are disseminated to constituent groups and to the public via presentations and the Fiscal Services website (III.D.3).

The College's reserves contribute to both sufficient cash flow and appropriate risk management. Recent state funding deferrals were accommodated by the utilization of TRANS in 2020. Indication of appropriate planning and risk management recency (III.D.4).

The College has two foundations and a third auxiliary organization (The Broad Stage) associated with their Performing Arts Center. The College also manages approximately $10M in grants monies annually along with a robust Financial Aid services program for students. No audit findings to date with any of these organizations.

The state's move to delayed allocation of resources in 2020 led to developing of TRANS process for fiscal solvency and resulted in the College eliminating all Certificate of Participations using local Redevelopment funds. This was sound financial practice at the time and resulted in not needing to dip into reserve funds and eliminating outstanding College liabilities.

The College has appropriate control mechanisms which are documented and explicit. These controls enable the dependable and timely dissemination of financial information and are regularly updated. An internal financial control structure is in place for every step and for every type of transaction. The Budget Office disseminates dependable and timely information to the Board of Trustees and constituent groups (III.D.5).

To ensure accuracy, the College's budgets are aligned with the revenue estimates provided by the CCC Chancellor's Office and Los Angeles County Office of Education. Financial documents are accurate and credible as evidenced by the monthly distribution and analyses, as well as annual audits, which as previously mentioned have resulted in an unqualified opinion for the last 15 years (III.D.6).

The College's responses to external audit findings are comprehensive, timely, communicated appropriately, and fully transparent (III.D.7).

The College's financial team is in a constant state of assessment and reassessment of financial practices, including internal controls which has led to improved collaboration, communication, and improvement to practices. The College maintains compliance with annual state and federal auditing requirements (III.D.8).

Sufficient cash flow and reserves are held to maintain stability and support strategies for appropriate risk management. The College has contingencies in place for cash flow to ensure business continuity (III.D.9)

The College has effective financial management practices in place to guide its management of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations, and institutional investments and assets (III.D.10).

The College demonstrates a commitment to maintaining short- and long-term financial solvency through effective financial planning processes and strategies, linking financial decisions with the mission, supporting goals, strategic initiatives, and institutional learning outcomes (III.D.11)

The College has taken measures to effectively address its largest liabilities and financial obligations, including OPEB, compensated absences, and STRS/PERS, with long-term budget needs and the current budgetary condition as a top priority (III.D.12).

Action is taken to ensure that locally incurred debt continues to have a minimal effect on the overall College budget by identifying specific revenue streams to meet its obligations. In the unlikely event the College is unable to generate the necessary revenue to pay such debt, reserves would be used to avoid taking funds from the operating budget (III.D.13)

The College has a financial oversight system in place that guards against fraud, ensures fiscal responsibility, and helps to ensure financial integrity so that financial resources are used for the purposes intended by the respective funding sources (III.D.14)

Approximately $50 million in federal financial aid is distributed each year. The College diligently adheres to Title IV of the Higher Education Act, which is reflected in annual audits that do not reflect any material weaknesses or significant deficiencies (III.D.15).

California Education Code and federal regulations are incorporated in board policy pertaining to purchasing, procurement, and other operating procedures. Contracts are reviewed and prepared by the College's Purchasing Office only after the appropriate division vice president has reviewed requests which helps to maintain integrity (III.D.16).

Conclusions:

The College meets the Standard.

Standard IV

Leadership and Governance

IV.A. Decision-Making Roles & Processes

General Observations:

The College has a leadership and governance structure that starts with strategic planning and Board of Trustee annual goals that are then implemented through a DPAC, Academic Senate Joint Committees, Master Plans, and Presidential taskforces. Participation by all constituents is evident and the Academic Senate has a process to report to the Board of Trustees if they don't come to an agreement with DPAC or the CEO.

Findings and Evidence:

At the highest level, the College has a current Five-Year Strategic Plan that defines SMC's strategic initiatives and objectives from 2017-2022 with a new plan being developed now. The College's Board of Trustees defines annual goals and objectives. Based on those, annual action plans are developed by the District Planning and Advisory Council (DPAC) which includes four planning sub committees: Budget, Facilities, Human Resources, and Technology. Membership in these committees is determined by the CEO and the College's four constituent groups. The College's Academic Senate bylaws guide joint committee membership for joint committees which make recommendations the Academic Senate, DPAC, and senior management in areas of 10+1. When the Senate and CEO are unable to resolve conflict in recommendations, the Academic Senate may present their recommendations to the Board without CEO approval (IV.A.1).

Participation by all constituents is evidenced based on multiple bylaws and Board Policies including: BP2015, BP2511, BP2512, BP3250, Academic Senate bylaws, and the inclusion of students through the student trustee or encouragement of students on all relevant committees (IV.A.2).

Curriculum at the College is the official responsibility of academic administrators and faculty members, with a clear process of review and approval through the Academic Senate and the Board of Trustees as evidenced through BP4020 and Board agendas approving curriculum (IV.A.3).

The College has implemented policies and procedures that describe the official responsibilities of authority of the faculty and of academic administrators in curricular and other educational matters, and regularly evaluates these policies and procedures to ensure they are followed. Board Policies provide a clearly defined structure by which faculty and administrators are responsible for curricular recommendations via the Curriculum Committee. These processes relating to student success and completion are aligned with college goals using metrics established by the Joint Academic Senate Institutional Effectiveness Committee (IV.A.4).

Board Policy 2515 specifies the appropriate roles for staff and students, ensuring diverse perspectives from various constituent groups are included in college decision-making. DPAC membership is stipulated by Board Policy 2525, and "shall comprise representatives of the Management (Administration/Management Association), faculty (Academic Senate and Faculty Association), classified staff, and students (Associated Students) who shall mutually agree upon the numbers, privileges, and obligations of council members. Constituent groups may engage their representatives on DPAC and in the Academic Senate joint committees to participate directly in decision-making processes (IV.A.5).

Decision making, and the resulting decisions are communicated across the College via agendas and minutes of the Board of Trustees, DPAC and the Academic Senate are posted on their respective websites. The DPAC makes a semi-annual update which is sent as a bulletin to the college community and produces an annual report. In addition, the President communicates with the wider community through regular bulletins and updates, the College's In Focus newsletter, and semi-annual Professional Development (Flex) Day events (IV.A.6).

The Board of Trustees creates annual Board Goals and Priorities that they communicate to the College. The progress of planning goals is evaluated each year by DPAC, and Senate goals are devised yearly at the annual Academic Senate Retreat. Progress toward those goals is evaluated yearly in a year-end report. Progress toward the completion of institutional student success goals is communicated in the annual Institutional Effectiveness report and presented at the Board of Trustees, thus "closing the loop" of the planning process (IV.A.7).

Conclusions:

The College meets the Standard.

IV.B. Chief Executive Officer

General Observations:

The superintendent/president has primary responsibility for the College, instructional quality, and the leadership of planning, organizing, budgeting, personnel, and institutional effectiveness per the position description. The Board of Trustees has delegated this authority to the superintendent/president through Board Policy 2430. The superintendent/president has extensive engagement with local, statewide, and national communities, all of which are directly connected to the College in the goal of serving students while forging tangible connections within the broader community.

Findings and Evidence:

The Board Bylaw 2430, superintendent/president job description, Board Policies, and Administrative Procedures all identify the responsibilities of the CEO. The CEO has primary responsibility for hiring full-time faculty, Deans, Academic and Classified managers. The CEO

overseas the District Planning Advisory Council which is the primary shared governance body that makes recommendations outside of 10+1 (IV.B.1).

The College's organizational chart delineates lines of responsibility and authority among vice presidents, associate deans, and managers. The CEO delegates authority to the appropriate administrators and evaluates administrators based on the mission and goals of the College, allowing the College to pivot rapidly when addressing unexpected circumstances. Board Policies 2430 and 2433 provide for delegation of authority from the Board of Trustees to the chancellor to the college presidents (IV.B.2).

The superintendent/president is involved in the participatory governance process and takes an active role in setting goals for institutional performance, planning, resource allocation, and use of data in decision-making (IV.B.3).

Board Policy 3200 stipulates "the CEO shall ensure the District complies with the accreditation process and standards of the Western Association of Schools and Colleges (WASC), Accrediting Commission of Community and Junior Colleges (ACCJC) and of other District programs that seek special accreditation." The superintendent/president led the efforts of the accreditation team to complete and present the institution's ISER in a timely manner (IV.B.4).

The superintendent/president assures adherence to statutes and regulations by delegating responsibilities and overseeing administrators who have expertise in their areas of oversight. The CEO attends regular meetings of the Board of Trustees as well as all subcommittee meetings. The CEO chairs the District Planning and Advisory Council and reviews all budget requests prioritized through the Program Review and Personnel and Budget Augmentation Request. The superintendent/president provides regular updates to the College and the community through forums (IV.B.5).

The CEO ensures that communities served by the college are regularly informed about the institution. The CEO is a member of key committees in the geographical region including: AltaSea Partnership; Asilomar Leadership Skills Seminar; California Community College Athletics Association Board of Directors; CEO Leadership Academy; Community College League of California; Citizens Bond Oversight Committee; KCRW Board of Directors Los Angeles Regional Consortium (LARC); Malibu Chamber of Commerce; and President's Round Table of African American CEO's (IV.B.6).

Conclusions:

The College meets the Standard.

IV.C. Governing Board

General Observations:

The College has a seven-member publicly elected Board of Trustees representing different geographical areas within the College. The College has Board Bylaws, Policies, and Administrative Procedures governing all aspects of the Board and District operations.

Findings and Evidence:

Board Policies have been adopted that clearly identify the Board of Trustees as having ultimate authority over academic quality, integrity, and effectiveness of student learning programs and services along with the ultimate responsibility for financial stability of the institution. Board Policies further stipulate that the Board reviews, analyzes, and updates said information annually, leading to the implementation of any necessary changes (IV.C.1, ER.7).

Board Policies have been adopted that provide a clear framework for collective action which guides board voting protocols and ensures the Board speaks with a unified voice once a decision has been made (IV.C.2).

Board Policies clearly define the selection and evaluation of the CEO. The selection policy details a fair, open, and inclusive process for selecting a new superintendent/president. The policy for evaluating the CEO is comprehensive and balanced and provides for annual performance reviews (IV.C.3).

The Board acts as a consistent advocate for the College and community. The public voice is welcomed by the Board and the public interest is regularly considered in the Board's decision making. Further, the Board has established and follows clear policies on conflicts of interest and standards of practice that ensure that the board remains free from undue influence or political pressure (IV.C.4, ER.7).

Board Policies exist ensuring that the Board of Trustees is responsible for and remains informed about all legal, financial, and educational issues. The Board exercises ultimate authority and oversight overall College operations, including educational quality, legal matters, and financial integrity and stability (IV.C.5).

The Board has established comprehensive policies that clearly define their size, duties, responsibilities, structure, and operating procedures, all of which are accessible to the public on the College's website (IV.C.6).

The Board of Trustees acts in accordance with its policies and has clearly established procedures for reviewing and revising policies and procedures (IV.C.7).

The Board of Trustees has dedicated itself to remaining abreast of efforts to improve student learning and achievement and regularly reviews and approves plans for advancing academic quality (IV.C.8).

Membership on the Board is staggered with comprehensive orientation and on-going professional learning opportunities for new and experienced Board members. These include

orientations and training for new trustees as well as conference attendance and additional opportunities for continuing trustees (IV.C.9).

The Board reviews the evaluation instrument and evaluation procedures before the evaluation process begins. The evaluation instrument includes assessment of Board performance on maintaining the College's academic integrity, institutional effectiveness, training, and budget (IV.C.10).

Established Board policies prescribe expected behavior and ethical conduct, as well as avoidance of conflict of interest and disclosing conflict of interest. The policies include procedures for handling both perceived and real violations of the code of ethics. There has been no violation of these policies evidenced during this accreditation cycle (IV.C.11, ER.7).

Board Policies and Administrative Procedures allowing the Board to authorize the CEO's implementation and administration of its policies without interference are in place (IV.C.12).

The Board of Trustees is kept informed and actively participates in the accreditation process. Board members discuss accreditation issues at their meetings and retreats and receive regular updates on the process. The Board thoroughly reviews the College's self-evaluation before submission to ACCJC (IV.C.13).

Conclusions:

The College meets this Standard.

IV.D. Multi-College Districts or Systems

General Observations:

Santa Monica College is a single college district.

Quality Focus Essay

The Santa Monica College Quality Focus Essay (QFE) is a well-developed document and provides an honest framework for identifying areas for improving institutional effectiveness and meeting accreditation standards via two Action Projects (AP).

The APs are related to adjusting the College's planning structure that leads to the development of the revised Master Plan for Education, one that will ultimately inform plans that focus on more specific aspects of the college such as budget, staffing, technology, facilities, and the transformation of the program review process. These two Action Projects were identified by the Accreditation Steering Committee, previously chaired by the former Vice President of Academic Affairs, as mechanisms for ensuring continuous improvement to support student learning, experiences, and success by strengthening the district planning processes. Together, the two proposed projects will ensure that the current assessment and planning processes continue to provide meaningful opportunities for the College to engage in critical self-reflection, planning, and improvement both at the macro-level (institutional) and on the ground (programmatic).

AP Project Plan #1 (Planning) identifies appropriately sequenced activities to address "foundational needs" that will provide a sound basis for the College's efforts to move away from its previous top-down approach to a more inclusive, distributed planning model. Given the overlapping timelines of this AP with the College's AP #2 (Revamping Program Review), it is suggested that some activities around ensuring clear connections between institutional/master planning and its revised program review model be specified.

Appendix A: Core Inquiries

INSTITUTION: Santa Monica College

DATE OF TEAM ISER REVIEW: March 23, 2023

TEAM CHAIR: Dr. Keith Flamer

A ten-member accreditation peer review team conducted Team ISER Review of Santa Monica College on March 23, 2023. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. The peer review team received the college's institutional self-evaluation report (ISER) and related evidence several weeks prior to the Team ISER Review. Team members found the ISER to be a comprehensive, well written, document detailing the processes used by the College to address Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the ISER was developed through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful ISER containing several self-identified action plans for institutional improvement. The College also prepared a Quality Focus Essay.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on December 1, 2022 and held a pre-review meeting with the college CEO and ALO on January 11, 2023. The entire peer review team received team training provided by staff from ACCJC on February 8, 2023. Prior to the Team ISER Review, team members completed their team assignments, identified areas for further clarification, and provided a list of requests for additional evidence to be considered during Team ISER Review.

During the Team ISER Review, team members spent the morning discussing their initial observations and their preliminary review of the written materials and evidence provided by the College for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and identified standards the college meets, as well as developed Core Inquiries to be pursued during the Focused Site Visit, which will occur the week of September 25, 2023.

Core Inquiries are a means for communicating potential areas of institutional noncompliance, improvement, or exemplary practice that arise during the Team ISER Review. They describe the areas of emphasis for the Focused Site Visit that the team will explore to further their analysis to determine whether standards are met and accordingly identify potential commendations or recommendations. The college should use the Core Inquiries and time leading up to the focused site visit as an opportunity to gather more evidence, collate information, and to strengthen or develop processes in the continuous improvement cycle. In the course of the Focused Site Visit, the ACCJC staff liaison will review new or emerging issues which might arise out of the discussions on Core Inquiries.

Core Inquiries

Based on the team's analysis during the Team ISER Review, the team identified the following core inquiries that relate to potential areas of clarification, improvement, or commendation.

Core Inquiry 1:
The team seeks to learn how the institution regularly assesses learning outcomes for its instructional programs and how the results of this assessment are used to improve student learning and achievement in all its delivery modes and at all locations.

Standards or Policies:
II.A.3 and II.A.16

Description:
a. The team verified through evidence that program learning outcomes have been identified and published in the catalog.
b. The team further verified through evidence that course-level SLOs and ILOs are assessed and course-level SLOs are mapped to PLOs.
c. The team did not see evidence of how the institution is regularly assessing program-level learning outcomes for its instructional programs.
d. The team also did not see evidence of how assessment of program learning outcomes across modes of delivery are evaluated and lead to improvements.

Topics of discussion during interviews:
a. How are program-level learning outcomes for instructional programs regularly assessed?
b. How does assessment of program-level learning outcomes factor into program improvements in the college's new resource allocation request form/process.

Request for Additional Information/Evidence:
a. Documentation of program-level learning outcomes assessment process and examples of completed assessments for instructional programs.
b. Documents showing how program-level learning outcomes assessments are used to improve student learning and achievement.

Request for Observations/Interviews:
a. Program Review Taskforce
b. Program Review Committee
c. DPAC Budget Subcommittee
d. Area VPs
e. Program Faculty
f. Others involved in the assessment of program-level learning outcomes.