EXTERNAL EVALUATION REPORT

Ohlone College
43600 Mission Boulevard
Fremont, CA 94539

A Confidential Report Prepared for the
Accrediting Commission for Community and Junior Colleges

This report represents the findings of the External Evaluation Team that visited Ohlone College on March 10, 2014 through March 13, 2014.

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Summary of the Report

INSTITUTION: Ohlone College

DATE OF VISIT: March 10, 2014 – March 13, 2014

TEAM CHAIR: Kimberly Perry
Superintendent/President Butte-Glenn Community College District

A team of 11 professionals, including the Team Chair and Team Assistant, visited Ohlone College in Fremont, CA March 10 – 13, 2014 for the purposes of reaffirmation of accreditation through evaluation of the College’s performance relative to the Accreditation Standards and its compliance with the Eligibility Requirements and Commission and USDE policies; to make recommendations for quality assurance and increasing institutional effectiveness; and to submit recommendations to the Accrediting Commission regarding the College’s accredited status.

Team members attended an all-day training session on February 7, 2014 conducted by the Commission and studied Commission manuals and materials written to prepare team members for site visits. The team members prepared for the visit by reviewing Ohlone College’s Self-Evaluation Report of Educational Quality and Institutional Effectiveness and corresponding evidence and by creating a draft report of their overall assessment of the Self-Evaluation Report, their initial impressions of assigned Standards, Eligibility Requirements, and Commission and USDE policies, and their conclusions regarding the College’s response to the recommendations from the 2008 educational quality and institutional effectiveness review.

The Ohlone College Team found the College to be prepared for the visit. In general, the accommodations for the team worked well with a conference room at the hotel available for team meetings and a secure team meeting room at the College equipped with accessories needed to complete the work efficiently. The team appreciated the snacks and beverages available in the team room as well as the easy access to food in the cafeteria. Both prior to and during the visit college staff – in particular the assistant to the president – responded quickly and efficiently to all requests made by team members as communicated through the team assistant. However, the work of the team was delayed for nearly 1.5 hours while technology connections were configured on each individual device. Due to the tremendous construction occurring at Ohlone College, it was difficult to get a real sense of the layout of the college, and unfortunately, the campus tour was minimal, concentrating mainly on the routes the team would be making to meetings and the cafeteria.

The team began its work with a meeting held in the hotel team room the afternoon of Monday, March 10. Late that afternoon, the College hosted an informal reception for the team at the College. In attendance from the College were members of the Board of Trustees, College Council, Standard Team Leaders and College administrators. The College president provided some brief opening comments and then the college personnel who were present.
introduced themselves. The team chair also provided some brief comments and then the team members introduced themselves. The College’s ALO provided some additional comments about the process by which the self-study was written. The room was set up by each standard and after the introductory comments team members had the opportunity to circulate and talk with the standard team leaders. The team was warmly received by the college community which set a positive tone for the remainder of the visit.

The team conducted its work from the morning of Tuesday, March 11 through noon on Thursday, March 13. During this time team members toured the Ohlone campus and the Newark Center; attended meetings of the Board of Trustees, Executive Team, Deans, College Council, Student Learning Outcomes Assessment Committee and Faculty Senate; held two open forums which were available through a live webcast link; conducted more than 40 interviews with Board of Trustees members, administrators, faculty, staff and students; and observed both face-to-face and online classes. Several team meetings were held throughout the visit. The preliminary findings, recommendations and commendations were provided to the team chair late Wednesday evening. The team met Thursday morning to finalize the commendations and recommendations and to prepare the summary that was shared with the college community at the Exit Report which occurred at 1:30 p.m. on Thursday, March 13 in the Jackson Theatre on the Ohlone campus.

The Institutional Self-Evaluation Report for Ohlone College was a visually appealing, (especially the tables and graphs), well-written document, however, in much of the document the descriptive summaries, self-evaluations and corresponding evidence were minimal, incomplete and, in several instances, out-of-date. It was only through interviewing college personnel that team members were able to uncover the information and evidence necessary to accurately assess the college’s performance relative to the Standards, Eligibility Requirements and Commission and USDE policies. The college probably should have prepared an addendum to provide, at the very least, updated information. An example is that in several places it is referenced that the CurricUNET Program and Services Review module was being used as part of the Program and Services Review process when in fact the use of portions of the module had been abandoned for the current year.

Throughout the document, there was a tendency toward including sweeping statements that were not backed up by evidence. The consistent inclusion of satisfaction survey data with inconsistent analysis added to the overall lack of true assessment and evidence. Additionally, there were instances in the self-evaluation sections where action steps were described, but no Actionable Improvement Plans were provided.

The report included links to evidence and a flash drive was provided with all of the evidence as well. The evidence was clearly labeled which served to facilitate the work of the team. However, there were several instances where the links to evidence were embedded in a .pdf document and thus were inactive. The visit was almost entirely paperless, a tribute to Ohlone’s commitment to sustainability. The lack of hard copies of the evidence in the team room posed no challenges.
The team found Ohlone College to be in compliance with 20 of the 21 Eligibility Requirements, all of the Commission Policies, and three of the four USDE Regulations. Through a review of the 2014 Self-Evaluation Report, the follow-up reports as a result of the 2008 Self-Evaluation Report and the 2011 Midterm Report, the team found that the College had successfully implemented each of the eight recommendations.

Relative to the Standards, the team found that the College is at the Continuous Sustainable Quality Improvement levels in both planning and program review, and is at the Proficiency level in regards to Student Learning Outcomes. There is college-wide dialog on the college mission and the college strategic plan and this dialog informs planning and review processes. The College reviews data regularly and has incorporated that data in the Program and Services Review process, making these processes systematic. Planning, program review and resource allocation processes are broad-based and offer opportunities for all college constituent groups to participate. Since there have been changes to the institutional planning processes over the past few years, the College still needs to fully implement follow-up procedures to communicate quality assurance to the entire campus community as well an evaluation of these follow-up procedures.

The College is in the beginning stages of renovating and modernizing the Fremont campus due to the passage of a $349 million bond in November 2010. The team found that the College has not planned in any meaningful way how student services will be effectively delivered during this period of construction. Additionally the team found that program-level student achievement data had not been fully developed nor implemented assuring quality of student support services.

The team found the College to be currently in compliance with Eligibility Requirement 13-Faculty, however, the team was concerned about the College’s ability to continue meeting this requirement in order to support the College’s educational programs and services. Thus, there is a team recommendation to increase effectiveness in this area.
Introduction

Ohlone College, named in honor of the early Ohlone Indians who lived in the area, began offering classes in fall 1967, serving approximately 1,300 students in the cities of Fremont, Newark and part of Union City. The College initially rented a facility until a new campus was constructed at the 534 acre Fremont site which started serving students in fall 1974. The new campus was constructed as a result of the passage of a $10 million bond in 1972.

The College expanded their programs and services by renting a facility in Newark in the 1990s. In 2002, the voters passed another bond measure which allocated $100 million towards constructing the Newark Center for Health Services and Technology which opened in January 2008 on an 81-acre site.

The voters passed yet another bond measure in November 2010. Measure G will replace many of the aging, original buildings on the Fremont campus and will provide funds to improve the remaining facilities.

In fall 2012, Ohlone College served a headcount of 10,270 students which is a decline of 2,572 (20%) from the fall of 2008 (a direct result of course offering reductions dictated by lower state funding). Full-time Equivalent Students (FTES) for 2012-13 totaled 8,840 which is a decline of 436 (4.7%). In fall, distance learning courses were responsible for 3,227 enrollments which represent 11% of the total enrollment, and in 2012-13 generated 788 FTES which represents nearly 9% of the total FTES. The College serves a diverse student population, the most represented ethnicities being Asian (32%), White (24%) and Hispanic (19%). Ohlone College is clearly “A World of Cultures United in Learning.”

In fall 2012, 68% of the students were part-time, 50% were women, and nearly 65% were residents of Fremont, Newark or Union City. It is interesting to note that within the District’s service area, 43.7% of the residents have a baccalaureate degree or higher. Ohlone College currently offers courses in approximately 53 disciplines, leading to 61 degrees and 116 types of certificates.

As a result of a comprehensive accreditation visit in March 2008, the Commission acted to issue a Warning and asked Ohlone College to correct the deficiencies as noted in recommendations 5, 6, 7 and 8 by the Commission meeting in January 2009. The Commission further requested the College to correct the deficiencies as noted in recommendations 1, 2, 3 and 4 by the Commission meeting in June 2009. At the January 2009 meeting, the Commission accepted the first report and continued the Warning status and reiterated that the March, 15 2009 report which will be followed by a visit needed to demonstrate resolution of recommendations 1, 2, 3, and 4. At the June 2009 meeting, the Commission accepted the second report, removed Warning and reaffirmed accreditation. The Commission reviewed Ohlone College’s Midterm Report at their June 2011 meeting.
Commendations/Recommendations

Commendations

The team commends the institution for the exemplary academic programs and services it provides for its Deaf students, both domestic and international; and for its equal integration of Deaf administrators and faculty into the campus community.

The team commends the College for the 2012 institutionalization of a student services ombudsperson office to assist students’ navigation through grievance policies and procedures and self-advocacy.

The team commends the College on the planning and facilitation of “Learning College Week” and “Get It Done Day” as an example of campus-wide collaboration, and commitment to a culture of shared responsibility for institutional effectiveness and student success.

The team commends the institution for its dedicated commitment to environmental sustainability as evidenced by the installation of photoelectric fields on both sites, the awarding of LEED Gold Certification by the U.S. Green Building Council in the building of the Fremont Student Services Center and LEED Platinum Certification for the building of the Newark Center, for arriving at Net-Zero level for its Newark site, and for its commitment to eventually achieve zero energy designation for the entire district.

The team commends the institution for its comprehensive Technology Master Plan that not only identifies its mission, vision and needs, but also provides technology forecasting of upcoming trends and the plans to meet the needs of the College.

The team commends the institution for having the foresight to include in Measure G the establishment of an endowment fund to sustain information technology.

The team commends the College for its responsiveness to the prior teams’ recommendations related to defining, publishing and adhering to the respective leadership roles and scopes of authority of college and district constituent groups and governance committees in decision-making processes.

The team commends the College and Board for creating a Board Member Guide and implementing Ohlone College Trustee Orientation to support effective transitions and on-going education and development for Board members.

Recommendations: Meet the Standard

Recommendation 1: In order to meet the standard, the team recommends that the college complete the process to develop institution-set standards for student learning and achievement and to use those standards to systematically improve student learning and
achievement and learning within the college. (Standards I.B.1-6; II.A.1.c; II.A.2.a, b, f, g, h, i: II.A.5; II.A.6; IV.B.2; ER 10 – Student Learning and Achievement)

**Recommendation 2:** In order to meet the standard, the team recommends the College develop and implement a data-driven plan to provide appropriate, comprehensive, and reliable support services to students regardless of service location or delivery method; and develop and implement program-level student achievement data that assures the quality of all student support services and demonstrates that these services support student learning and enhance the achievement of the mission of the institution. (Standard II.B.1, II.B.3, II.B.3.a, II.B.3.c, II.B.3.d, II.B.3.e, II.B.4)

**Recommendation 3:** In order to meet the standard, the team recommends that faculty and others directly responsible for student progress toward achieving stated learning outcomes include, as a component of their evaluation, effectiveness in producing those learning outcomes (Standard III.A.1.c.)

**Recommendations: Increase Effectiveness**

**Recommendation 4:** In order to improve institutional effectiveness, the team recommends that the college develop and implement data-driven, systematic follow-up procedures that communicate quality assurance to the entire campus community on college planning, program review, unit planning and resource allocation processes. The team further recommends that the college include evaluation of these follow-up procedures as part of the annual evaluation of planning processes. (Standard I.B.4, I.B.6, I.B.7, III.A.6, III.B.2, III.B.2.a, III.B.2.B, III.C.2, III.D.4, IV.B.2.b)

**Recommendation 5:** In order to improve institutional effectiveness, the team recommends that the cost of regularly replacing and updating library and learning resources be institutionalized in the College’s budget rather than relying on one-time funding and/or donations. (Standard II.C.1)

**Recommendation 6:** In order to improve institutional effectiveness, the team recommends the coordination of all tutorial services incorporating mandatory tutor training, faculty outreach and referral processes, tracking of sessions and an assessment of the effectiveness of the services. (Standard II.C.2)

**Recommendation 7:** In order to improve institutional effectiveness, the team recommends that the College work to implement the staffing plan in order to ensure a sufficient number of full-time faculty to support all of the College’s educational programs and services. (Standard III.A.2., ER 13 - Faculty)
Evaluation of Institutional Responses to Previous Recommendations

Recommendation 1

*The team recommends that the college establish a regular assessment and review process for the Mission and Vision statement to meet Standard I.A.3 and to do likewise for its planning processes (including program review) to meet Standard I.B.6.*

The college has established a regular review of its Mission Statement as part of its five-year strategic planning cycle. The current Mission Statement was approved by the Board of Trustees in June 2004. The last comprehensive review of the Mission Statement occurred in spring of 2009 by a three member task force of the College Council followed by college wide review during a Planning Summit. The Board reaffirmed the Mission Statement on June 10, 2009. An annual review of the Mission Statement also occurs by the College Council as part of the planning process. The next comprehensive review of the Mission Statement will occur in 2014-2015 as part of the College Strategic Plan development process.

The college has developed and implemented planning and program review processes. Institutional plans include the College Strategic Plan, the Education Master Plan, the District Facilities Master Plan, the Technology Master Plan, and Program and Services Review. The plans directly relate to the Mission Statement. A Process Assessment Committee has been established that conducts an assessment of the planning processes for the college plans previously listed. The Mission Statement includes “…in an environment where student learning success is highly valued, supported, and continually assessed.” The Student Learning Outcomes assessment process can be tied back to assessment of the student learning success component of the mission.

The College has successfully met this recommendation.

Recommendation 2

*The team recommends that the college improve its program review process by enhancing the nature and use of data to meet Standard I.B.5 and by codifying the links between program review, budget decision making, facilities planning and information technology decisions that support student learning outcomes (I.B.2, I.B.3, I.B.4).*

The college has continued its efforts to address Recommendation 2 since the Follow-up Report submitted in 2009. The college has enhanced the nature and use of data in the program review process. All programs have access to enrollment and student achievement data at the institution and program levels through the enrollment management, program review and planning process. The college continues to actively use the online data tool developed in 2009 to support enrollment planning and management. The college provides a wide array of data analysis, including peer group comparisons, longitudinal analysis and performance data disaggregated by demographic variables through the program review
process. The college has also identified measures, benchmarks and targets at the institutional level in the college strategic plan and reports on those measures annually.

Just as importantly, the college has developed mechanisms to make the data generated by the program and services review more usable by the college. The college effort to use CurricuNet for program review has not been entirely successful and the college’s Process Assessment Committee has responded by identifying and implementing improvements that are reflected in the current version of the program review process. One area where CurricuNet has been successful is in the management of the Program Improvement Objectives (PIOs) that have been generated as a result of the program review process. The college has access to all PIOs that have been generated and actively uses this data in planning and resource allocation decisions. Vice presidents, deans, program managers and faculty have all verified the utility of this data for making decisions in the planning, program review and resource allocation processes.

The new program and services review process is documented in Board Policy 3250 Institutional Planning (approved in April 2013) and Administrative Procedure 3250 Institutional Planning and Program Review, which also codifies the links between program review, budget decision-making, facilities planning and information technology decisions. This document was prepared by Executive Staff, reviewed and modified by the Process Assessment Committee and approved by the Faculty Senate and College Council in 2013. These links are also codified in the Planning and Decision Making Handbook, also developed in 2013. These processes are reviewed annually by the Process Assessment Committee; the charge of this committee is to assess and improve college planning, review and resource allocation. The work of this committee identified and implemented significant improvements to these processes.

The College has successfully met this recommendation.

**Recommendation 3**

*The team recommends that the college continue its planning agenda to put in place appropriate and systematic employee performance evaluation procedures (III.A.1.b).*

The District has demonstrated a commitment to ensuring that employee evaluation of classified and management staff be carried out and consistently completed each year. To accomplish this, the college moved away from a process that was triggered by the hire date of employees to a standard performance evaluation period (April 1 to June 30) for all evaluations to be completed by managers. The Human Resources department provides training to ensure that all unit managers are prepared to carry out their evaluations in a timely manner. In the narrative, the college stated that one ongoing challenge involved the turnover of managers, and the difficulty of newly-hired managers evaluating staff that they may not know well. In these circumstances, the college has established an alternative self-evaluation process that involves a review by the Area Vice President to ensure that all evaluations are carried out in accordance with the policy.
The College has successfully met this recommendation.

**Recommendation 4**

_The team recommends that the college improve its program review process by enhancing the nature and use of data to meet Standard III.D.1.d and by codifying the links between program review, budget decision-making, facilities planning and information technology decisions that support student learning outcomes (III.D.1.d)._

As reported in the Follow-Up Report of 2009 and Mid-Term Report of 2011, the college has improved its program review process by using enhanced data sources and a comprehensive environment scan. These improvements were made possible through the implementation of the CurricUNET program review module. The relational nature of the CurricUNET database helps facilitate the generation of usable data and provides the linkages between program review, facilities and information technology planning, and budget decision-making. Data is made available electronically to all program managers and facilitates the analysis of programmatic expenditures to provide a solid foundation for the establishment of PIOs for the next program review cycle. Responses to the college wide survey, of faculty choosing to respond, were moderately positive when asked “Budget priorities are determined by systematic planning.” 43% yes, 14% no and 43% no opinion. It appears some additional work needs to be done to raise awareness and increase confidence that budget priorities are systematically planned. Evidence-based decision making is a growing part of the college culture.

The College has successfully met this recommendation.

**Recommendation 5**

_The team recommends that the Board of Trustees ceases involvement in college and district operations and delegate all non-policy issues and policy implementation at the district level to the president (IV.B.1.e.j)._

At the time of the last accreditation visit, there were contributing factors that caused confusion among Board members regarding their role in college governance. Board members were confused about what was procedural and was policy, causing some board members to inappropriately encroach upon College operations.

The institution has responded to these contributing factors in multiple ways. The college president can be credited with taking the lead in making these responses. Upon her arrival in 2008, the college president assessed the situation that generated this recommendation and the following actions were taken:

- Initiation of a regular Board workshop focused on clarifying the role of Board members in college governance with an emphasis on distinguishing between policy and procedure.
• New Board member orientations that clarified the appropriate role of trustees in college governance.
• Elimination of the “extended board.” (This elimination was significant since having an “extended board” served only to confuse the process.)
• Development of an extensive Board Member Guide. This Guide stresses the fact that the Board’s attention need always be on college policy.
• Efforts to educate the campus community, the Board, and college employees, about using the proper protocol of communicating with the Board via the college president.
• Use of an outside consultant to facilitate discussion about appropriate roles of the Board and president.
• Attendance of most trustees to the Community College League of California (CCLC) workshop for new trustees.
• Revision of the Board agenda including the listing of policy numbers next to each agenda item and the clear delineation between items that are: ‘For Action’, ‘For Potential Action’, and ‘For Information’.
• Practice of reviewing the Board agenda with the Board and key constituents prior to Board meetings.

The College has satisfactorily responded to this recommendation in that, as a rule, individual trustees have learned to leave all non-policy issues and implementations in the hands of the College President.

Recommendation 6

The team recommends that the Board of Trustees and College leadership define, publish, adhere to, regularly evaluate, and continuously improve the respective leadership roles and scopes of authority of College constituency groups and governance committees in meaningful, collegial decision-making processes (IV.A.1, 2, 3, 5).

Ohlone College has taken actions to ensure that trustees no longer engage in issues that are outside their role as a policy making body.

The College offered nine workshops for trustees since 2008 that emphasized the appropriate role of the board and nearly every trustee has attended CCLC workshops on trustee effectiveness. Additionally, the College updated its Board Member Guide in 2012, eliminated its “extended Board” organ, and elevated the College Council to its rightful place in shared governance, codifying the roles of College constituencies in an Administrative Procedure 2510,”Participation in Local Decision Making,” and a Planning and Decision-Making Handbook. The Board now reviews its policies on a four-year cycle.

All college constituencies cooperated in making these changes, supported them, and review and update them on a continuing basis.

The College has successfully met this recommendation.
Recommendation 7

The team recommends that the Board of Trustees take measures to bring all constituent groups together to enable the College to:

A. **Develop a positive and in-depth dialog on decision making roles and responsibilities that will ultimately lead to strengthening student learning and success at the College** (I.A.3, I.B.1);

B. **Create an environment which ensures greater administrative stability and empowerment at the College** (IV.A.1, IV.A.2, A.2.a, A.2.b, A.3, A.5, IV.B.1, IV.B.2, IV.B.3).

Ohlone College has revised procedures for planning and conducting Board meetings with the full cooperation and support of all campus constituencies.

The College Council is now the principal committee for collegial governance at the college. *Administrative Procedure 2510 Participation in Local Decision Making* prohibits informal meetings and consultation between trustees and campus constituencies. The Board consequently conducts its meetings effectively and in a business-like manner, with fewer interruptions and confusion.

The College has successfully met this recommendation.

Recommendation 8

*The team recommends that the Board of Trustees develops a process to implement identified improvements derived from regular self-evaluations (IV.B.1.g).*

A new self-evaluation survey was developed by Association of Community College Trustees (ACCT) to improve the self-evaluation process and refinements have resulted in the Board setting measurable priorities that complements the President’s priorities and the College Strategic Goals. The survey appears to be a work in progress as well as continued improvement on establishing Board priorities with focused process improvement.

The president’s contract requires that she develop and assess goals together with the board. The president has been following an annual evaluation cycle that starts with the setting of goals which are then broken down into tasks. She reviews and evaluates progress on these tasks annually and this serve as part of her evaluation.

Initially, the Board did not follow a parallel cycle even though they were tasks to develop and assess goals together with the president. For several years, the Board worked on improving their self-evaluation survey but failed to establish any goals. Then they added goals but failed to assess whether or not they were met at the end of the year. Now, the process is complete and parallels the one followed by the president.
Each year, a self-evaluation survey is completed, goals are set, corresponding tasks are developed, and an assessment is made on the completion of these tasks mid-year and annually.

The College has successfully met this recommendation.
Eligibility Requirements

1. Authority

Ohlone College is accredited by the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges and is approved under regulations of the California State Department of Education and the California Community Colleges. The Registered Nursing Program is accredited by the California State Board of Registered Nursing and the National League of Nursing; the Respiratory Therapist Program is accredited by the Council on Accreditation of Allied Health Programs; and the Physical Therapist Assistant Program is accredited by the American Physical Therapy Association.

2. Mission

The evaluation team confirmed that the current version of the Ohlone College Mission Statement was approved by the Board of Trustees in June 2004 and reaffirmed on June 10, 2009. The focus is appropriate for the community college and the constituency it seeks to serve. There is specific inclusion of “student learning success” in the statement. The Mission Statement is easily available at the college website and in published materials including the college catalog and class schedules.

3. Governing Board

The evaluation team confirmed that the Ohlone Community College District is governed by a seven-member Board of Trustees elected at large by voters from the cities of Fremont, Newark, and a portion of Union City. Each member serves a term of four years and the terms are staggered. Starting in 2012, trustees are elected by area. Trustees have no employment, family, or personal financial interest in the institution. Each December a chair and vice-chair are chosen. There is a Student Trustee who serves a one year term and who is elected by enrolled students. The Student Trustee has an advisory vote.

The team confirmed that the Board makes policy for the District. Policies are in place that require that programs and curricula be “of high quality and relevant to the community and student needs”. These policies encompass academic affairs, student services, and financial stability. The Board has a published code of ethics defined in Board Policy 2710 Conflict of Interest and its conflict of interest policy is aligned with government code.

4. Chief Executive Officer

The team confirmed that the Ohlone College District President serves as the chief executive officer and has primary authority and responsibility for the effective operation of the institution. The District President provides leadership and management for all
programs and services of the District. The District President is selected by the Governing Board according to a clearly defined selection process.

5. **Administrative Capacity**

   The college identifies one President/Superintendent, three Vice Presidents and two Associate Vice Presidents, and 11 dean positions that comprise its management team. Three of the deans are located in student services, and the remaining eight deans oversee various instructional areas. The span of responsibility for each of these positions appear to be equitable and appropriate to support high quality education and service delivery to carry out the institutional mission and purpose.

6. **Operating Status**

   The evaluation team confirmed that the college is operational, with students actively pursuing its degree programs.

7. **Degrees**

   The evaluation team confirmed that the College currently offers courses in approximately 53 disciplines, leading to 61 degrees, 14 of which are Associate in Arts/Sciences Transfer degrees (AA-T/AA-S) and 116 types of certificates.

8. **Educational Programs**

   The evaluation team confirmed that the degree programs offered by the institution are congruent with the college mission, based on high education fields of study, and are of sufficient content and length, are conducted at levels of quality and rigor appropriate to the degrees offered, and culminate in identified student learning outcomes.

9. **Academic Credit**

   The evaluation team confirmed that the institution awards credit based on generally accepted practices in degree-granting institutions of higher learning.

10. **Student Learning and Achievement**

    The evaluation team confirmed that the institution defines and publishes for each program the program’s expected student learning and achievement outcomes and assesses their achievement. The team found that the college was in the process of completing the development of institution-set standards for student learning and achievement.
11. General Education

The evaluation team confirmed that the students who complete general education programs at the college have achieved comprehensive learning outcomes, ensuring breadth of knowledge and intellectual inquiry.

12. Academic Freedom

The College’s faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as ensured by Board Policy 4030 Academic Freedom, adopted by the Board of Trustees on April 14, 2010.

13. Faculty

Ohlone College has a substantial core of qualified faculty with full-time responsibility to the institution. The core is sufficient in experience to support many of the institution’s educational programs. A clear statement of faculty responsibilities includes development and review of curriculum as well as assessment of learning.

The institution may not have a sufficient number of full-time faculty to support all of the college’s educational plans. The Self-Evaluation reports 113 full-time faculty, but the college’s Staffing Plan for 2013-14 reports only 108.5 full-time positions (92 instructional, 3 librarians, and 13.5 counselors). The Staffing Plan cites peer estimations of 154 necessary full-time faculty members (132 instructional, 4 librarians, and 18 counselors) and “optimal” staffing of 147 full-time faculty (127 instructional, 5 librarians, and 15 counselors).

The institution is well behind the numbers of full-time faculty it states that it needs and has failed to achieve its own goals as set forth in an August 2010 Plan to Rebuild Faculty, which the Self-Evaluation reports to be the institution’s primary plan for long-term re-staffing. The College president has committed to an additional four faculty each year in order to increase the number of full-time faculty.

14. Student Services

The evaluation team confirmed that a broad array of support services is offered in order to serve the College diverse student population.

15. Admissions

The evaluation team confirmed that Board policies and College publications, such as class schedules and the College catalog, are clear, accessible and consistent with Education Code, Title 5 regulations and the California Community College system wide mission statement.
16. Information and Learning Resources

The evaluation team confirmed that Ohlone College provides students and staff with access to adequate resources and learning resources and services to support its mission and all education programs. Through its virtual library, students and staff have access to library resources on demand. Tutorial Services are available at all locations including virtually for distance education students in the areas of basic skills math, English and in discipline specific areas.

17. Financial Resources

A review of the annual Adopted Budget documents affirms that the district adheres to Board Policies regarding financial solvency and budget preparation criteria and adequate reserves are maintained to ensure fiscal stability. Fiscal management policies and institutional planning processes are adequate to support student learning and services and to improve institutional effectiveness.

18. Financial Accountability

A review of the annual external audit statements confirms that the District’s overall budget is being prudently managed and compliant with federal Title IV requirements. Additionally, external audits verify that federal and state programs are used with integrity and in a manner consistent with the intended purposes.

19. Institutional Planning and Evaluation

The college has established and codified processes that assure that college programs, services and policies are continually assessed and improved. Planning and program review processes are systematic and have college-wide participation. The results of these processes are made available to the entire college and provide the framework for college-wide dialog in institutional and program improvement.

20. Integrity in Communication with the Public

The evaluation team confirmed that publications provide the public with current information in support of the College mission; course, program, and degree offerings, academic calendar, certificate, degree, and transfer requirements; academic freedom statement; faculty and Board information; and other relevant documents are available in print and on the website.

21. Integrity in Relations with Accrediting Commission

The College and the Board of Trustees has affirmed by signatures of the official representatives that Ohlone College has consistently adhered to the Eligibility Requirements, Standards, and policies of the Accrediting Commission for Community and Junior Colleges. The College describes itself in identical terms to all of its
accrediting agencies, communicates any changes in its accredited status, and has agreed
to disclose information required by the commission to carry out accrediting
responsibilities. All disclosures by the College are therefore complete, accurate, and
honest.
Commission Policies Compliance

Policy on Distance Education and on Correspondence Education

The College’s distance education program, also known as “e-campus” has been incorporated into its educational master plan, and is aligned with the educational mission of the College. The plan calls for FTES generated from distance education courses to grow from 11% to 15% of total College enrollment over the next several years.

E-campus is fully developed and implemented, and the quality of the program is assessed and managed by the faculty and administration at the College. The Dean of Learning Resources and Academic Technology oversees distance learning, and is the administrative member of the Distance Education Committee. Approximately 60 full-time and 40 part-time faculty teach courses through distance education format. E-campus is funded by the General Fund Budget, rather than categorical funds.

The College has integrated Student Learning Outcomes for 100% of courses and programs, including those which are taught online. A review of Program Review documents as well as “Assessment in a Box” indicates that departments that offer Online courses have conducted assessments of learning outcomes and reported results for both traditional and distance learning courses.

The College’s program and services review process requires that all program units report the results of their assessment of learning outcomes, and to connect resource allocation to the results of assessment. This is accomplished through the identification of Program Improvement Outcomes, or PIOs. The College has identified three specific PIOs that are directly related to the resource allocation for distance education courses, and have tracked the funding of these through the budget prioritization process.

In March 2011, the College submitted a Substantive Change Proposal which would expand their online offerings, offering 12 Associate Degrees and 16 Certificates, of which 50% or more of the courses are offered through distance education. The rationale for the change involved the expansion of delivery options for adult learners and working parents, as well as students who prefer internet and digital media-based modes of instruction. The Commission approved the proposal in July 2011.

The College’s Blackboard platform for eLearning ensures the identity of their distance education students via a secure login process which verifies the students’ personally-identifying information while safeguarding vital information. When logging into the Blackboard user interface, students use only the last four digits of their student identification number, along with the first two initials of their first name and the first two initials of their last name. Once inside the system they are asked to change their password and answer a key authentication verification question, for example, “Where were you born?”
The college meets the Commission Policy on Distance Education and on Correspondence Education and the USDE Regulation on Distance Education: Definitions, Security of Student Identity and Effective Student Contact.

Policy on Institutional Compliance with Title IV

The evaluation team confirmed that the College Financial Aid Office demonstrates compliance with Title IV regulations. The Dean of Enrollment Services supervises the Financial Aid Director and is responsible for Title IV compliance. The Financial Aid module in Colleague is used to maintain all student financial aid information; awards, disbursements, Satisfactory Academic Progress, award letters and student communiques. Students receive an award letter via the WebAdvisor instrument. The College participates in the Cash for College program and holds January and February events.

The College meets the Policy on Institutional Compliance with Title IV.

Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status

The evaluation team confirmed that the college demonstrates compliance with each of the policy elements; ACCJC accreditation status is posted on the website and printed in the catalog; class schedules, College wide promotional materials and other appropriate recruitment information is accurate. The College posts gainful employment information on the institution’s website.

The College meets the Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status.

Policy on Institutional Degrees and Credits

The College has board policies and administrative procedures for graduation requirements for degrees and certificates (Board Policy 4100 Graduation Requirements for Degrees and Certificates and Administrative Procedure 4100 Graduation Requirements for Degrees and Certificates) as well as for program and curriculum development (Board Policy 4020 Program and Curriculum Development and Administrative Procedure 4020 Program and Curriculum Development). The administrative procedures for degrees and certificates outline length of degree and certificate programs that are in compliance with the California Community College Chancellor’s Office and adhere to guidelines on academic achievement. The administrative procedures for program and curriculum development outline the process by which courses and programs are developed and approved. In addition, it includes a definition of a credit hour that incorporates both in-class and out-of-class work that adheres to federal guidelines for financial aid eligibility. The Ohlone Course Catalog defines a unit of credit based on the Carnegie Unit; it outlines the difference between laboratory and lecture hours. Course outlines of record (CORs) that are on file contain clearly articulated student learning outcomes and hours of instruction that comply with the College’s administrative procedures. The College does not convert clock hours to credit hours in any course or
program. The evaluation team confirmed that the College demonstrates compliance; the institution awards transfer, degree, and certificate credits based on student achievement of the course’s stated learning outcomes and that adhere to commonly accepted practices including time invested and content mastered.

**Policy on Institutional Integrity and Ethics**

The seven-member Board of Trustees of the Ohlone Community College District is an independent policymaking board and ensures that the District’s administration implements the college’s institutional mission. The Board also ensures the quality, integrity, and financial stability of Ohlone College. District voters elect Members to four-year terms, and these terms are staggered. Trustees have no employment, family, or personal financial interest in the College.

The College has a satisfactory history of compliance with Policy Element 2 and 7 by providing the Commission information that is readily available, current, complete, and accurate, including reports to other accrediting and auditing agencies; and cooperating with external evaluation processes, including site visits. The College catalog provides the information in Policy Elements 3 and 5. Standard III.A of the Self-Evaluation Report demonstrates the College complies with Policy Element 4. Standard IV of the Report demonstrates the College complies with Policy Elements 1 and 7.

**Policy on Student and Public Complaints against Institutions**

The evaluation team confirmed that the College demonstrates appropriate procedures for addressing student complaints and grievances. Board Policy 5500 Standards of Conduct and Administrative Procedure 5500 Standards of Conduct are in accordance with the requirements for due process of the federal and state law and regulations. The College has institutionalized a student services ombudsperson office to assist students’ navigation through grievance policies and procedures and self-advocacy.

The college meets the Policy on Student and Public Complaints against Institutions.

**Policy on Contractual Relationships with Non-Regionally Accredited Institutions**

Ohlone College does not have contractual relationships with non-regionally accredited institutions.

**Policy on Transfer of Credit**

The evaluation team confirmed that the College demonstrates compliance; the institution awards transfer, degree, and certificate credits based on student achievement of the course’s stated learning outcomes. Transfer of credit, both internal and external, are made available to students on the website and in the catalog. Board Policy 4050 Articulation and Administrative Procedure 4050 Articulation establish articulation procedures between the District’s programs with K-16 institutions. The Board Policy and Administrative Procedure support foreign transcript evaluations “for those that are not geographically proximate.”
The College meets the Policy on Transfer of Credit.

**Policy on Award of Credit**

The College has established Board Policies and Administrative Procedures that support awarding credit to students based on student learning outcomes that are necessary to meet standards of quality in transfer institutions, by employers, and for program and degree requirements. *Board Policy 4025 Philosophy and Criteria for Associate Degree and GE* and *Administrative Procedure 4025 Philosophy and Criteria for Associate Degree and GE* define the college’s philosophy and criteria for general education and for awarding associate degrees of arts and sciences. *Board Policy 4100 Graduation Requirements for Degrees and Certificates* and *Administrative Procedure 4100 Graduation Requirements for Degrees and Certificates* outline the College’s graduation requirements for associate degrees and certificates of achievement. *Administrative Procedure 4102 Occupational/Vocational Technical Programs* outlines the requirements and expectations of occupational and vocational/technical programs, including the assessment of student learning outcomes to document the competence of student achievement. The Course Catalog outlines the College’s transfer of credit policies as well as providing an Advanced Placement credit chart, information on credit for military training, and procedures for credit by exam. The evaluation team confirmed that the College meets the Policy on Award of Credit.
USDE Regulations Compliance

Institution-set Standards (Addressed in Standard I.B.; ER 10)

The college has not established institutional-set standards on student achievement and learning. The college uses student achievement and learning data for planning and program review purposes and has established benchmarks for these data. The college has only recently begun the process to establish standards.

The college does not meet the USDE regulation on Institution-set Standards.

Academic Credit/Clock to Credit Hour Conversion (Addressed in Standard II.A.; ER 9; ACCJC Policies)

The College has established Board Policies and Administrative Procedures that support awarding credit to students based on student learning outcomes that are necessary to meet standards of quality in transfer institutions, by employers, and for program and degree requirements. Board Policy 4025 Philosophy and Criteria for Associate Degree and GE and Administrative Procedure 4025 Philosophy and Criteria for Associate Degree and GE define the college’s philosophy and criteria for general education and for awarding associate degrees of arts and sciences. Board Policy 4100 Graduation Requirements for Degrees and Certificates and Administrative Procedure 4100 Graduation Requirements for Degrees and Certificates outline the College’s graduation requirements for associate degrees and certificates of achievement. Administrative Procedure 4102 Occupational/Vocational Technical Programs outlines the requirements and expectations of occupational and vocational/technical programs, including the assessment of student learning outcomes to document the competence of student achievement. The Course Catalog outlines the College’s transfer of credit policies as well as providing an Advanced Placement credit chart, information on credit for military training, and procedures for credit by exam. The evaluation team confirmed that the College meets the Policy on Award of Credit.

Student Complaints (Addressed in Standard II.B.; ER 20; ACCJC Policy)

The evaluation team confirmed that the College demonstrates appropriate procedures for addressing student complaints and grievances. Board Policy 5500 Standards of Conduct and Administrative Procedure 5500 Standards of Conduct are in accordance with the requirements for due process of the federal and state law and regulations. The College has institutionalized a student services ombudsperson office to assist students’ navigation through grievance policies and procedures and self-advocacy.

The College meets the USDE regulation on Student Complaints.
Standard I – Institutional Mission and Effectiveness

Standard IA – Mission

General Observations

The Institutional Self-Evaluation Report addressed each of the I.A Standards. The College made changes following the spring 2008 accreditation evaluation team visit and report to formalize review and revision of the Mission Statement. The College has described its planning process and clearly states that the Mission Statement is the basis for the College’s Strategic Goals and Objectives and is at the heart of the College’s Educational Master Plan. The institution provides programming consistent with the areas identified in the Mission Statement.

Findings and Evidence

The College has a Mission Statement that defines the institution’s broad educational purpose, its intended student population, and describes its commitment to student learning. The mission of Ohlone College is to serve the community by offering instruction for basic skills, career entry, university transfer, economic development, and personal enrichment for all who can benefit from instruction in an environment where student learning success is highly valued, supported, and continually assessed. The College offers transfer, career technical education, and basic skills courses and programs that align with the educational purposes listed in the Mission Statement. The intended student population is defined as “…all who can benefit from instruction…” The majority of students at the College reside in Alameda County with most of them residing in communities within the College District. The College provided a review of county and College demographic data indicating the balance that exists between the two. (Standard 1.A)

Ohlone College offers a range of courses and programs to meet the educational needs and interests of its diverse student population. Results from a spring 2013 Student Survey indicated 77.2, 20.5, and 15.9 percent of student respondents were enrolled in transfer level courses, career technical education (CTE) courses, and basic skills courses, respectively. This is similar to reported FTES by credit type. In addition, the College partners with the Tri-Cities One-Stop Career Center at the College’s Newark Campus. This is an example of an activity supporting the economic development statement in the mission by connecting dislocated, new, and incumbent workers with training and support services. The College has continued to offer personal enrichment courses through credit and community education offerings. Ohlone for Kids is a fee based not-for-credit summer program for students entering grades 4-11 which provides relevant learning activities and helps to connect the community and future students with the College. The Ohlone College 2013 Student Success Scorecard data indicated student success rates above the statewide average for success in basic skills courses, transfer level courses, and CTE courses. Spring 2013 survey results reported that faculty and staff strongly agree that College program and services reflect the Mission Statement. The Mission Statement has undergone College wide review. There is a Strategic Plan and program review process in place that provides ongoing assessment of
course and program relevance and needs. The evidence supports that the College establishes programs and services aligned with its purpose, character, and student population. (Standard I.A.1)

The Mission Statement was originally approved by the Board in June 2004 and reaffirmed on June 10, 2009 as documented in Board minutes. The Mission Statement is present on the College website and included in printed forms and documents including the College Catalog and class schedules. (Standard I.A.2)

The Mission Statement is comprehensively reviewed every five years per the College’s five-year Strategic Plan cycle. The College Council is a participatory governance body for the College with broad representation. The College Council also annually assesses the Strategic Plan and established an annual review of the Mission Statement during its planning discussions. There has been no change in the current Mission Statement since 2004. Periodic review of the Mission Statement is occurring with opportunity for College-wide participation in the process. (Standard 1.A.3)

The institution uses the Mission Statement as the central point of focus for its Strategic Plan and Program and Services Review process. College Goals are aligned with the Mission Statement. Program Improvement Outcomes (PIOs) are developed during department level Program and Service level review. The PIOs are prioritized and funded according to their alignment with the Mission Statement and established goals. (Standard 1.A.4)

**Conclusion**

Ohlone College has a Mission Statement which is central to the College’s strategic planning and program review processes. The Mission Statement has been periodically reviewed by the College, approved by the Board of Trustees, and is accessible in printed form and on the College website.

The College meets the Standard.

**Recommendations**

None
Standard I – Institutional Mission and Effectiveness
Standard IB – Institutional Effectiveness

General Observations

Ohlone has established well-known and widely used processes to increase institutional effectiveness. There is college-wide dialog on the college mission and the college strategic plan and this dialog informs planning and review processes. The college reviews data regularly and has incorporated that data in the Program and Services Review process, making these processes systematic. Planning, program review and resource allocation processes are broad-based and offer opportunities for all college constituent groups to participate. The college documents its assessment results and communicates these results through a variety of forums, including program review and planning processes, the participatory governance structure and the college website. The Process Assessment Committee provides an evaluation mechanism to assure that college processes are regularly reviewed for improvement, and improvements in the processes have been documented. While the college has done much work on these important effectiveness processes, it is not clear how these processes have led to improvements in student achievement outcomes. The establishment of a college standard for student achievement would facilitate this process.

Findings and Evidence

The College has done considerable work to assure that there is an ongoing dialog on institutional improvement. At the heart of this dialog are the college planning, program review, SLO and participatory governance processes. These processes provide a framework for the college-wide dialog on institutional improvement and have been implemented and evaluated over two complete cycles. Process improvements have been identified, documented and implemented in the third cycle started in fall 2013. The amount and extent of the improvements are significant. The participatory governance process provides the forum for this dialog and committees have been actively engaged in the dialog. The college sustains these efforts by documenting them in minutes, reports, handbooks and manuals and making these documents available through the college website. (Standard I.B.1)

The college has described its planning process and clearly states that the mission statement is the basis for the College’s strategic and educational master plans. These plans articulate institutional goals and identify objectives using student success and other data as measures for those objectives. College benchmarks have been established for these measures. The College annually assesses progress in achieving the strategic plan at the institutional level and communicates these results widely through the governance structure. There is a widespread understanding of institutional goals. (Standard I.B.2)

The College has an ongoing and systematic cycle of evaluation, integrated planning, resource allocation and implementation. The College assesses it progress towards achieving its strategic goals through the Annual Assessment of Goals and Objectives which documents the College’s progress on the strategic plan. This assessment has been completed for the last four years and includes the analysis of both quantitative and qualitative data at the institutional
level. The College has identified eight (of 42) objectives in the strategic plan that have not been completed. The recently revised Program and Services Review process is conducted on a three-year cycle with annual updates on any Program Improvement Objectives (PIOs, aka unit plans) created through the Program and Services Review process. PIOs integrate the program review, planning and resource allocation activities of the college. The College has identified an actionable improvement plan to “close the loop” on these processes by reviewing the outcomes of the unit planning process. (Standard I.B.3)

There is a growing culture of data use in the College. The use of data at the institution level is effective and incorporated into the strategic plan. A wide array of program-level data is available to all programs through the enrollment management and Program and Services Review process. This includes disaggregated enrollment and student achievement data. Data available through the enrollment data tool developed in 2009 continues to provide effective support for the enrollment management decisions. The use of student achievement data for college improvement processes requires more definition. One issue is the lack of institution-set standards for student success. Standards provide a framework to evaluate student success within the college. Applying these standards to the program and services review process would assure the systematic evaluation of student success by identifying programs that exceed, meet or do not meet the standards. Any actions taken as a result of this evaluation could then be evaluated using the same student success standards; in research terms, a pre-test/post-test design. This would create a data-driven method to “close the loop” of planning, program review and resource allocation. However, while data are provided at the program level, the lack of an institution-set standard limits the effective use of these data to drive program improvement. (Standards I.B.3, I.B.4, I.B.7)

College planning processes are widely understood and offer opportunities for input by appropriate constituencies. The College Strategic Plan was developed with broad-based input from the College. Progress on the Strategic Plan at the institutional-level is reported annually and these results inform planning and resource allocation processes. The College uses these results to inform the resource allocation process and these allocations have led to documented improvements to the College. The resource allocation process effectively identifies College needs at the division and institutional level. However, identification of needs at the program level is less effective due to the lack of institution-set standards for student success. The links between program review, planning, resource allocation and the completion of College goals, especially around student success, need additional clarification. (Standard I.B.4)

For example, in the January 2014 annual evaluation of the Strategic Plan the College states that it has met objective 1.6, which was to “increase to 500 the number of students receiving associate degrees.” The evidence provided by the College was the fact that 545 degrees were awarded in 2012-2013. However, no data or analysis was provided to establish which programs increased and which did not. Further, there was no established link between the increase and college program review, planning or resource allocation process outcomes. So, while the college has reported achievement of many of the strategic plan objectives, including increases in student success measures, it is not clear that these increases are the result of college processes. (Standards I.B.2, I.B.3, I.B.5, I.B.7)
The College collects, publicizes or makes publicly available assessment data at the institution, program and course levels. These data are provided through the College’s website, the online program and services review and SLO assessment systems and highlighted in various ways through the planning and program review processes, committee discussions, College wide presentations, planning retreats and the President’s twice-a-year state of the college report. The College has begun a process to establish institution-set standards but it has not been completed or applied. (Standard I.B.5)

Planning, program review and resource allocation processes are assessed annually. The College has established a Process Assessment Committee whose specific charge is to “conduct regular assessment of important college planning and decision making processes.” This work is codified in reports which are available on the College’s website. Interviews with College personnel confirm that the work of this committee has resulted in improvements to effectiveness processes. Documented improvements include streamlining the resource allocation process and changing the program and services review cycle from every year to once every three years. Processes are in place to assure that improvement in College processes are continuous and sustainable and provide the foundation for future improvements in student achievement. (Standard I.B.6)

Conclusions

Ohlone has established well-known and widely used processes to increase institutional effectiveness. The Strategic Planning, SLO, Program and Services Review, and resource allocation processes are all evidence of the College’s ongoing effort to improve institutional effectiveness. These processes are codified in numerous process documents, manuals and procedures and reviewed regularly. Improvements to these processes have been made and documented. The amount and extent of the improvements are notable and provide evidence of the College’s ongoing and significant commitment to institutional improvement. The College has linked program review with planning and resource allocation through the PIO process.

How these processes lead to institutional, program or learning outcomes improvement was not clear. A significant amount of data and analysis, including student achievement data, are provided to programs for use in the program review process. However, the lack of an institution-set standard limits the effective use of these data to drive program improvement. Additional work in establishing and systematically applying institution-set standards for student success will assure the College is able to meet the standard.

The College does not fully meet the Standard.

Recommendations

See Recommendations 1 and 4
Standard II - Student Learning Programs and Services
Standard IIA - Instructional Programs

General Observations

The Institutional Response to Standard IIA is comprehensive in most areas, but lacking in evidence in some targeted areas. It is clear that the college is concerned with meeting all Accreditation standards and has devoted energy and resources toward this end. There have been recent changes to the composition of the Student Learning Outcome and Assessment Committee (SLOAC), recent re-structuring of the timing of assessment cycles, regular updates of plans designed to guide the efforts of faculty toward the completion of assessment cycles, and linking the results to planning and resource allocation processes, and progress on documenting all parts of the cycle.

There exists a “Student Learning Outcomes and Assessment Plan 2011-2013” that appears to be a living plan for ensuring that all key constituencies are involved with the assessment of student learning and documenting efforts toward improvement. This plan has been updated each year with a summary of actions taken toward strengthening the support for student learning assessment. Additionally, the college has developed a Master Course List for Assessment and Assessment Tracking that identifies the courses that are slated for assessment for each year of the four-year cycle.

There also exists a “2010-2015 Strategic Plan: Annual Assessments of Goals and Objectives Assessment Documentation Tool,” dating from September 2013, that appears to be a working document that updates the efforts to assess the objectives identified in the existing Strategic Plan. The first objective in the document states “By 2013, have in place an ongoing system for identifying and assessing student learning outcomes at the program and course levels, which includes faculty dialogue and appropriate improvement plans.” The language in this document states that “Faculty and Deans at Ohlone currently engage in an active process of identifying and assessing SLOS at the course, program and college levels.”

Based on the examination of these documents, it appears significant that Deans are empowered in the assessment process, and as active members of SLOAC. This raises the question regarding the level of faculty engagement in SLO assessment, and ownership over the process. The decision to expand the SLOAC membership with the inclusion of academic deans would seem to indicate that getting faculty meaningfully engaged in the work continues to be an issue for the college.

The evidence found in the self-study document presented a number of challenges. For instance, the hyperlinks in the document often pointed to screenshots of web pages that appeared to be placeholders for actual documented evidence (for instance, the environmental scan referenced as II.A.6 is not the report itself but a bulleted summary of observations from the summary). In some cases, evidence presented was thin, as in the example of II.A.2.c., where a single student satisfaction survey was cited as evidence for meeting the standard for “high quality instruction and appropriate breath, depth, rigor, sequencing, time to completion
and synthesis of learning.” In other instances, no evidence was provided in support of the actions that the college has taken in support of meeting an entire standard (as was observed in II.A.1.b, II.A.2.g, & II.A.2.h.) or important components of a standard. Most notably absent was a substantive discussion of the college’s Distance Learning program, known also as eCampus. There is mention of the Substantive change proposal submitted to ACCJC in March 2011 for the expansion of online course and program offerings in Standard II.A.2.d., but no evidence was included.

Findings and Evidence

The Introduction to Standard II establishes alignment of all instructional programs with the mission and educational master plan. Programs are regularly evaluated via the Program and Services Review process, and identified areas for improvement lead to the generation of Program Improvement Outcomes, or PIOs. A framework is in place for the integration of assessments at the course, program, and institutional levels with program review and curriculum processes. Currently, courses are reviewed on a six-year cycle and programs and certificates on a three-year cycle. (Standard II.A.1)

The College’s Institutional Research and Planning Office conducts research and analysis that identifies the needs of its students and enables the college to make informed decisions at all levels at the institution. A periodic environmental scan is carried out to identify the trends as well as needs that the college serves. The institution makes extensive use of surveys to identify the attitudes, preferences and needs of stakeholders, and supplies results for Program and Service Review, as well as other decision-making processes. The College has built a campus-wide infrastructure for assessing Student Learning Outcomes at Course, Program, and General Educational levels. The SLOAC committee has created a Master Course List for assessment of Courses across the campus on a 4-year cycle. The Master List was initially approved in 2010 by the Faculty Senate, and the 4-year cycle was adopted in fall 2013. The entire cycle does not appear to be completed, as the College’s Status Report on Student Learning Outcomes Implementation in spring 2013 reported that 55% of courses have undergone ongoing assessment of Student Learning Outcomes. The college has stepped up its efforts by expanding the membership of its SLOAC committee, and providing additional support for faculty dialogue designed to close the loop on course and program level assessments. (Standard II.A.1.a)

The College describes the various instructional modes and delivery methods that meet the needs of students. The Curriculum Committee conducts 6-year reviews of courses that include the currency of instructional methods. However, the document does not include evidence to support their assertions through the entire descriptive summary section of this standard. Similarly, no discussion of Distance Education is included in this section, which would seem to be a significant omission particularly since distance education classes comprise 12% of total enrollments. The document relies exclusively on satisfaction survey data to support the statements in the self-evaluation section of this document. A review of institutional documents reveal that the college does offer instruction in a variety of modes and contexts, and that the currency of delivery methods are discussed in department
meetings, Curriculum Committee, Faculty Senate, and the Distance Learning Committee. (Standard II.A1.b)

The College asserts that student learning outcomes have been identified for all courses and programs, and these outcomes are located on the Course Outlines of Record in CurricUNET. A review of a selection of course syllabi from across the curriculum also indicates that SLOs are consistently included in course syllabi, ensuring that students are aware of the learning expectations of each course. Additionally, the college catalog contains program SLOs for all certificates and degrees, and each General Education pathway has identified Learning Outcomes for 8 distinct areas of GE, and these are also found in the college catalog. With regard to the identification of student learning outcomes, the college has done a commendable job. (Standard II.A.1.c)

The college continues to step up its efforts to assess learning outcomes at all of these levels, while encouraging faculty to take the lead in these efforts. Institutional documents such as the Master Course List for SLO Assessment (Oct. 2013), The Student Learning Outcomes and Assessment Action Plan 2011-2013, and 2010-2015 Strategic Plan Annual Assessments of Goals and Objectives Assessment Documentation Tool (Sept 2013) provide a narrative summary of the progress of assessment efforts to date. Additionally, the SLOAC website includes a list summary of the completed cycles, with links to the “Assessment in a Box” forms that are provided for faculty to document their assessment results, findings, and actions for improvement. A summary of a selection of these course level improvements are provided in the document. (Standard II.A.1.c)

Of concern is that an Actionable Improvement Plan was not included for this standard. By the college’s own report to ACCJC, they are not at 100% completion of course-level assessment, and have been making significant efforts to boost that number. The SLO and Assessment Action Plan reveals that the college continues to make efforts in this direction and efforts such as “Get it Done Day” and College Learning week provide opportunities to engage faculty meaningfully in assessment activities. Based on the evidence provided, and with suggestions that the college make their action plan a priority for greater progress in this area, the team concurs that the College is at a level of Proficiency. (Standard II.A.1.c)

The College has an integrated decision-making structure that informs decisions regarding the identification, design, approval, administration, delivery, and evaluation of courses and programs. The Educational Master Plan integrates the mission and vision of the college and drives efforts toward offering and maintaining high-quality programs and services. These programs include Transfer programs, Career and Technical programs, Community Education and non-credit, English Language Institute, study abroad, and the largest deaf studies program at a community college in the U.S. Following the 2008 self-study, the President established the Process Assessment Committee, an advisory body that reviews key college planning and decision-making processes. The initial focus of this committee was to strengthen planning and program review functions in response to previous recommendations. The college institutionalized this body in March 2012, and its purpose is to provide direction to the key planning processes under its charge. One example of the work performed by this committee involved the examination of the workload issues experienced by faculty in the
assessment of Student Learning Outcomes. The committee recommended adjustments to planning processes that included moving to a 3-year program review cycle, easing the burden on faculty and departments. Faculty plays a central role in establishing and ensuring program quality through the assessment of SLOs. Links to the evidence of the committee’s work would strengthen this section, but a review of web resources confirms the outcome described in the document. (Standard II.A.2.a)

The College asserts that faculty take a lead role in decisions regarding competency levels and identifying SLOs for all courses and programs. This work occurs through involvement in the program review process, curriculum review process, and the assessment of SLOs which are shared and discussed at SLOAC meetings. Evidence of external advisory committee involvement in decision-making was cited in the document in the Career and Technical Education division, with minutes of these proceedings included. The evidence cited in this standard demonstrates that the College has developed and is refining processes that rely on faculty and external experts in setting appropriate learning outcomes for courses and programs. (Standard II.A.2.b)

The narrative in this standard is significantly lacking in evidence to support the college’s contention that it offers “high quality instruction and appropriate breath, depth, rigor, sequencing, time to completion and synthesis of learning.” The evidence presented consisted of two questions from a single student satisfaction survey administered in spring 2013, where 85.5 percent of students responded yes or strong yes to the statement “The quality of instruction is excellent at Ohlone.” And 91.4 percent answering yes to “MY instructors are highly-skilled teachers who come to classes well-prepared.” The inclusion of the college 2012 ARCC Report as evidence, impressive as these measures may be, does not address the central question of how the college ensures that its instruction meets high quality standards. Other measures, such as those gleaned from Program and Services Review, as well as curriculum review, would have provided stronger evidence that the college addresses and meets this standard. Based on a review of documents not cited in this standard, such as the proceedings of the Curriculum Committee, Distance Learning Committee, SLOAC and other bodies, the evidence indicates that the college does offer and maintain a high quality standard of instruction of appropriate depth, breadth, and rigor in its courses and programs. (Standard II.A.2.c)

The College lists a range of instructional formats in this standard, but does not provide any links to where these approaches are utilized, how they are determined, nor any evidence of assessing their effectiveness in this standard. A sampling of workshops offered during Learning College Week are described that indicate the encouragement of new approaches, such as incorporating social media into the class experience, but once again it is not made clear how these approaches are linked to the master plan of the college. Data from student satisfaction surveys and faculty surveys of their satisfaction with College Week programs are offered as evidence in this section, which does not address the main question of how delivery modes and teaching methods meet the diverse needs of students. It is in this standard that the Substantive Change Proposal for the expansion of online courses and programs was discussed. The link to this document was not provided, and as with other parts of this standard, the practices described relating to Distance Education, are not well-supported with
evidence provided in this document. However, a review of the substantive change proposal was found to be clear rationale for these changes. (Standard II.2.A.d)

The College, mainly through the work of SLOAC, has integrated the results of student learning outcomes assessment into the planning process, and the assessment work is ongoing, continuous and sustained. An example of how assessment has been integrated into master planning was offered in how these considerations have shaped the planning of repairs, renovations, and new construction planned for the Fremont campus. The expansion of online course and program offerings, as outlined in the Substantive Change proposal, is another example of how learning assessment has shaped the planning of new programs and initiatives. The Program and Services Review, upon review of recent completed documents, includes a comprehensive examination of the currency and relevance of all program elements and courses, including the achievement of performance targets, results and discussion of SLO assessments, and plans for the future of courses and programs. (Standards II.A.2.e, f)

This standard requires the college to validate department-wide or program wide examinations in terms of their effectiveness in measuring learning and minimizing test bias. There are only three departments, Chemistry, CNET/Cisco Networking Academy, and Respiratory Therapy, that utilizes examinations of this nature. The process of validation in each case is described and through a review of the program review documents in each of these areas revealed that the departments have validate these department tests against their program SLOs. (Standard II.A.2.g)

The College cites the Course Outlines of Record (CORs) as the primary component of what students must achieve in order to successfully complete the course. All course outlines are reviewed by the Curriculum Committee to verify that hours of instruction, course objectives, and content meet standards in alignment with other institutions of higher education. Key components of the CORs are the student learning outcomes. Utilizing the evaluation methods cited in the COR, faculty assess the extent to which the student demonstrates satisfactory achievement of the outcomes and award letter grades within accepted norms of higher education, for which credit is award to students. Course SLOs are aligned with program SLOs. (Standard II.A.2.h, i)

The College’s general education (GE) philosophy aligns with the college’s mission and vision. Additionally the College, led by the faculty, has crafted a well-considered general education pattern and is engaged in ongoing dialogue to ensure the currency of the GE pattern, as exemplified by the dialogue that occurred in the GE Committee over the proposal to add an oral communication component to GE Plan A. The College is set to reassess the GE/SLO Framework in preparation for the college’s 2015-2020 Strategic Plan. The slogan on the college website states: “A World of Cultures United in Learning” and its student body reflect this diversity. As such, the GE philosophy reflects a broader commitment to ethics and citizenship in a multicultural world. The college revised its GE Area II Definition for Social and Behavioral sciences, to address a need for outcomes related directly to the issues of ethics and civility. (Standard II.A.3.a, b, c)
The College graduation requirements for degrees and certificates follow the stipulations of state regulations that students must demonstrate competence in reading, written expression, and mathematics, and complete at least 60 semester units of college work. (Standard II.A.4)

The College offers 20 associate degrees with CTE emphasis. These programs undergo the college’s Program and Service Review process and additionally are subject to the standards of their respective state governing bodies. The college complies with all state and federal regulations that govern career programs, and reports core indicators and success rates as required for CTE Programs. (Standard II.A.5)

The College prepares students for transfer to four-year institutions. Fourteen associate degrees for transfer (AA-T, AS-T) have been completed and approved by the California Community College Chancellor’s Office. The College plans to complete all available transfer degrees by summer of 2014, a goal which seems achievable. The college provides a detailed, well-supported narrative of how transfer-of-credit is made possible through articulation agreements, and how students are supported in their navigation from college entry to transfer. (Standard II.A.6.a)

The College adopted a Program Discontinuance Procedure in May, 2007 that clearly spells out the processes involved when a program is discontinued and procedures to address the impact on students. (Standard II.A.6.b)

The College ensures that its public presentation through its publications is consistent, precise, and accurate in its communication of the college’s mission and service to its community. The catalog is updated annually, and the schedule is published twice annually. The College Website is a primary source for information about the college, and is organized to address the needs of the college and surrounding community. (Standard II.A.6.c)

The College’s policy on academic freedom was re-approved in March 2010 by the Board of Trustees. It clearly states the rights and responsibilities of faculty as it pertains to their treatment of course content, and in particular controversial subject matter. The policy is available online and in the Faculty Handbook. (Standard II.A.7.a)

The Standards of Student Conduct and Discipline and Due Process are contained in the college catalog, the Student Handbook, and the Faculty Handbook, and describe students’ rights and due process. The most recent update of the Academic Dishonesty procedure took place in 2010 and can be found on the college website. (Standard II.A.7.b)

The self-study provides a list of all relevant Board Policies and college procedures that address conformity to specific codes of conduct. (Standard II.A.7.c)

The College does not offer curricula in foreign locations other than U.S. nationals. (Standard II.A.8)
Conclusions

The College has moved quickly to improve and expand course and program SLO analyses in response to previous accreditation requirements. The College has responded to community need in the expansion of its distance education program and the conversion to community service mode those of its courses that did not meet state repeatability requirements. The extensive Deaf Studies Program is another indication of the College’s responsiveness to the needs of its community. The opening of the Newark satellite campus in 2008 is likewise an outgrowth of community need.

The College does not identify institutionally-set standards for student learning achievement. For example, in a discussion of the ESL Program, a member of the College community described measures currently being taken to address the gap between success and persistence rates for ESL students as compared to the rates for other students at the college, stating that “68% is too low and not what we expect at the college.” These expectations are not quantified or described in the report. (Standards II.A.I.c, A.2.a, b, c, e, f, g, h, i, II.A.5, II.A.6)

The college does not fully meet the Standard.

Recommendations

See Recommendation 1
Standard II – Student Learning Programs and Services
Standard IIB – Student Support Services

General Observations

Ohlone College offers a myriad of student services designed for specialized populations and the general student body as a whole. These services include Admissions and Records; Counseling; Educational Opportunities Programs and Services (EOPS); Financial Aid; Disabled Student Programs and Services (DSPS); and Placement Testing. Student access to these support services varies by program and location across the Fremont campus and the Newark center. Distance education students are provided student services information through program websites and staff response to students’ email inquiries. The College provides regular registration, financial aid, campus crime alerts, and other student services updates via email to all students. The College catalog and class schedule includes student services contact information and is available to all students online, in hard copy, as well as through alternate media upon request.

Findings and Evidence

*Board Policy 5010 Admissions and Concurrent Enrollment* describes College admission eligibility requirements and an open enrollment policy for anyone who “shows evidence of being able to profit from instruction.” Student services and program learning outcomes demonstrate a commitment to not only access across the service area, but student learning and achievement. Relatedly, the College international student program as well as an affiliated English Language Institute provides higher education opportunities for foreign students as well. (Standards II.B, II.B.1)

The College generally reflects the broad ethnic distribution of the District as a whole. Current College outreach efforts target international students as well as those within the diverse service area. The College website and International Program and Services Strategic Plan demonstrate a focus on international student enrollment in degree-granting programs and associates degree completion. There are also a significant number of Deaf and Hard of Hearing students serviced collaboratively by the College Deaf Studies and Interpreting and student services programs. (Standards II.B, II.B.3.b)

The College provided evidence of 22 Student Services Program and Services Reviews. A three-year Program and Services Review process provides an assessment of student services linked to established division wide curriculum. These Program and Services Reviews are also updated annually. Student Services Curriculum of responsibility, respect, integrity, leadership, and purpose are reflected in student services learning outcomes. Program Review summaries and improvement initiatives are shared with the College community through established governance processes. Each student services manager participates in PIO development and prioritization processes. (Standards II.B.1, II.B.3.b)
The College has made significant efforts to support students across their two “brick and mortar” sites in Fremont and Newark, as well as the distance education program, labeled by the College as eCampus. The online Student Services Guide and all student services websites provide new and continuing students with department contacts, office hours, and general information. The College Self-Evaluation Report, however, notes “how services are delivered varies by service and location.” For example, the College provided spring 2013 Student Survey results as evidence of near-universal satisfaction with regards to WebAdvisor services. In the same survey, however, over 21 percent of student respondents did not believe counselors were available when needed.

Relatedly, Health Services, DSPS and EOPS services are housed only at the Fremont main campus, suggesting that students’ experiences may vary significantly across the two physical sites. The College has intentionally developed distance education opportunities to meet student needs. The College reports that, since fall 2004, distance education has grown 345 percent. The College provides student services program information through websites and email. However, it was noted that students can expect to wait one to three business days for a counselor response to their inquiries. In summary, staff interviews as well as posted service days and hours are evidence of significant differences in student support services access. (Standards II.B.1, II.B.3, II.B.3.a, II.B.3.c)

The College catalog is available online and in hard copy. Alternative media versions of the catalog and class schedule are available by request. The Self-Evaluation Report included a useful chart of required elements found in the catalog, class schedule, and online. In spring 2013, the College underwent a college wide analysis of the need for a printed class schedule. An ASG recommendation was accepted by the College to continue printing a class schedule. Matriculation processes, fees, and student service program information supporting certificate, degree, and transfer students is readily available and clear in institutional publications. Major policy updates are regularly distributed to all College students via email. (Standard II.B.2)

Regular Program and Service Reviews, which include student learning outcomes (SLO), drive program improvement objectives (PIO). Student Services staff, along with the general campus community, appear to have an increased appreciation for how data-driven PIOs support institutional budgetary requests and overall program improvement. Satisfaction surveys and focus group responses currently provide College student services managers with some level of data. Staff interviews and existing program and service reviews suggest that student services managers have yet to identify additional program-level data to address students’ needs. (Standards II.B.3, II.B.4)

There is little evidence, beyond enrollment data and student satisfaction surveys, to suggest the College plans and decisions are based upon the effect of student services on student learning. One of only two Student Support Services Actionable Improvement Plans notes the College has struggled to create and implement effective SLO assessment metrics. Accordingly, program improvement initiatives, while well-intentioned, are not supported by consistent program-level data. Discrete program/course student success and achievement
data, for example, may be compared to the overall student population, thus informing student services decision-makers. For specialized programs that are shared across the two sites, the College might consider a needs assessment of student support services that is further disaggregated by locale. (Standards II.B.3, II.B.3.a, II.B.4)

Academic counseling services are provided through the general Counseling Department, EOPS, DSPS, and Deaf Studies. The College also provides personal and mental health counseling services at the Fremont campus. Recent program improvements initiated by the Counseling Department include website information to Assembly Bill 540 (undocumented) students as well as crisis intervention training. Members of the College Student Success and Support Programs Committee have prioritized counseling services improvements to meet orientation, electronic Student Education Plan, and data collection needs. The College provides examples of professional development for full time counselors, but little evidence of supporting adjunct counselors. Additionally, it is unclear how the College assesses professional development affects upon student learning and achievement. (Standard II.B.3.c)

In one of the two Student Support Services Actionable Improvement Plans, the College has recognized the need to accurately collect Student Education Plan data using the SARS software suite. Without thorough analysis of this data, the College cannot accurately assess counseling needs and the effects upon student success, limiting institutional improvements in this area. Relatedly, the College provides little evidence of how SARS data will generate dialogue, creating a culture of continuous quality improvement. While there is significant evidence of data collection in the Counseling Department, such as data sets related to students enrolled in personal development courses, the College does not provide evidence of similar program-specific data analysis across the division. (Standards II.B.3, II.B.3.a, II.B.3.c, II.B.4)

The College’s Self-Evaluation Report suggests efforts to align student support services, programs, and practices with the institution’s “global education imperative.” Student Services Curriculum of responsibility, respect, integrity, leadership, and purpose reflect an appreciation for diversity. The International Program and Services Strategic Plan and various student services department program reviews cite student focus group and survey results. As the College becomes increasingly more diverse “regular surveys and statistical analysis” of disaggregated data by groups and campus sites will become a challenge. Without such data, it is unclear as to how the institution will design and maintain appropriate student support services in support of student learning and achievement. (Standards II.B.3, II.B.3.a, II.B.3.c, II.B.3.d)

A diverse Admissions and Records staff reviews and improve College forms. The staff translates testing materials minimizing cultural and linguistic bias, but there is no validation evidence across language groups. A College dean, assessment coordinator, and student services assistant regularly review English, ESL, math, and chemistry placement instruments. These instruments are developed by third party test publishers and approved by the California Community College Chancellor’s Office. Disabled students are provided DSPS proctors for the Accuplacer Companion test in braille, large, print, and audio. (Standards II.B.3, II.B.3.d, II.B.3.e)
Student academic records, counseling contacts and financial aid information are stored electronically in the College’s Colleague program. Colleague records are backed up on CDs weekly and stored in fireproof vaults. Paper student applications are scanned and appropriately shredded and other admissions documents are locked in storage for one year. Specialized programs, such as EOPS and DSPS, store student files in locked cabinets. Student medical records are also stored electronically. Secure log-ins, staff training, and other institutional policies regarding release of student records are guided by Board Policy 5040 Student Records, Directory Information and Privacy. (Standard II.B.3.f)

IV. Conclusions

The College serves an increasingly diverse student population and provides a significantly broad array of support services to meet student needs. Compounding the challenges presented by student diversity, the College serves students at the Fremont campus and the Newark center as well as at the distance education eCampus. The College’s Self-Evaluation Report notes “how services are delivered varies by service and location.” For example, the College provided spring 2013 Student Survey results as evidence of near-universal satisfaction with regards to WebAdvisor services. In the same survey, however, over 21 percent of student respondents did not believe counselors were available when needed.

The College has also intentionally developed distance education opportunities to meet student needs. The College provides student services program information through websites and email. However, it was noted that students can expect to wait one to three business days for a counselor to respond to student inquiries. Given these notable disparities in student services delivery and student access, there is surprisingly little use of disaggregated data to evaluate program effectiveness across these populations and sites. Enrollment data, student surveys, and focus group data are provided by the College with little evidence of program-level analysis to encourage institutional improvement in light of the challenges presented to a diverse multi-site College. (Standards II.B, II.B.1, II.B.3, II.B.3.a, II.B.4)

The College has an established Program Review process leading to the development of Program Improvement Objectives. One of only two Student Support Services Actionable Improvement Plans, however, notes the College has struggled to create and implement effective SLO assessment metrics. There is little evidence, beyond enrollment data and student satisfaction surveys, to suggest the College plans and decision-making are based upon the effect of student services on student learning. As an example, while there is significant evidence of data collection in the Counseling Department, such as data sets related to students enrolled in personal development courses, the College does not provide evidence of associated division wide data analysis and dialogue. In summary, while there appears to be a growing appreciation and efforts to embrace the program and service review processes, more program-level data analysis is needed to accurately address the College’s students’ needs. (Standards II.B.3, II.B.3.a, II.B.4)

The College does not fully meet the Standard.
Recommendations

See Recommendation 2
Standard II - Student Learning Programs and Services
Standard II.C - Library and Learning Support Services

General Observations

The College’s Library and Learning Resources support student leaning and contribute to student success. The Library services include the traditional print books, periodicals and research journals as well as a large variety of online resources available through the Library website. Electronic resources are available to all students on the College Library’s website. There has been an expansion in both resources and the efforts since the last accreditation visit. (Standard II.C.1)

Information competency as a core skill continues to evolve at the College. Students are provided multiple avenues to meet this requirement including taking a course specifically addressing information competency, taking a major class that has information competency embedded in the content or “testing out.”

The Self-Evaluation Report highlights the expansion of online resources that can be accessed by all students. Through the Library Program Review resources were requested based on the student learning outcomes and needs of the institution. Ongoing evaluations through classes, surveys, and studies drive the resources that the College purchases. The College leverages consortium membership to attain cost-savings on subscriptions, and advocates for funding through the general fund and the Foundation. These measures have been effective in expanding the resources both in print and electronically; however, there remains a need for further funding. (Standard II.C.2)

Student demographics and survey results reflect that 95.4% of their students use a laptop or desktop computer. The college has made strides to adapt resources to be used with various technologies (smartphones, tablets, kindles/readers). The strategy to leverage social media (Facebook, Twitter, YouTube and SCVNGR) to guide their students to the Library and Learning Services is commendable. (Standard II.C.1.a)

Findings and Evidence

The College has doubled their electronic books and increased from 11 to 51 electronic databases since the last accreditation visit. The LRC staff has made concerted efforts to ensure that student know about the resources through multiple channels including, but not limited to, presentations to on ground classes, workshops, personal appointments with a librarian, and embedded customized library resources within their course management systems. The College and Foundation have allocated resources in the past year to provide additional electronic and printed resources to the students. Security is maintained with 3M security gates at entrance and exit doors within the library buildings. With the passage of Measure G, a new library with upgraded security features is in the planning stages. Formal agreements exist between the library offices and various outside consortia to ensure that the
college is maximizing opportunities for group buying discounts of electronic resources. (Standards II.C.1.b, II.C.1.d, II.C.1.e)

The Library and Learning Support Services provide students with assistance and support that aids in their success. Tutoring services are comprised of traditional in person tutoring on each campus (Fremont, Newark, online). There is specialized tutoring by discipline; however, not all disciplines are at both campuses and student may need to travel to get assistance. The hours of the tutoring on campus are adequate and available to student (9:00 a.m. – 5:00 p.m.) and online tutoring is available by appointment. Tutoring in the Math discipline is well organized and provided in different delivery models. These models include embedded tutors in the self-paced basic skills classrooms, tutors in the traditional classroom and one-one assistance in the outside laboratory. The English tutorial services are provided in the open laboratory. There are tutorial services in different disciplines other than Math or English such as Accounting and Biology that students can access. Faculty are available at specific times to provide students assistance, but there is not a referral or active early alert system to provide intervention measures when students need help. There is not an organized tutorial services center for students to be referred to and there does not seem to be a systematic way to get them tutoring in all disciplines. There is no mandated tutor training even though the College has been recertified as a CRLA provider. The College lacks resources to establish an effective on-going system to inform instructors and tutors about specific students and their needs. (Standards II.C.1.c, II.C.2)

In the Library Program Review, student learning outcomes were discussed and a direct correlation between print resources and students using the resources impacting student success was addressed. The Program Review outlines the needs form the previous review in 2006-2007 where the requests for a steady budget line item was requested to sustain print resources. The College’s budget for books “was officially raised from $25,000 to $50,000, but during the past three years of extreme budgetary shortfalls these funds have not been released for book purchases” (Standard II.C.3). In the past three years, the budget has not had a line item for book acquisitions and they have had to rely almost entirely on donations. In this past budget cycle, the College designated $20,000 in the general fund and the Foundation provided an additional $10,000; however, there is not a systematic allocation to maintain resources. Permanent funding for sufficient Library and support resources and services remains an issue for the College. (Standard II.C.2)

There are ongoing discussions regarding student learning and the connection between Library and Learning Services and student success. The Library and Learning Services use surveys to assess both student and faculty satisfaction. These surveys demonstrate high rates of student and faculty satisfaction with resources available for those that responded. There were a high number of respondents that selected “Did not know.” That implies that they either have no opinion based on a lack of knowledge or do not use the services. (Standard II.C.2)

The Librarian is a member of the Curriculum Committee and is involved in ongoing conversations regarding the needs of courses and new programs as they arise. New programs
in CurricuNet require the librarian and the faculty to have discussions regarding resources as they go through the proposal process. (Standard II.C.1.a)

Conclusion

The College’s Library and Learning Support Services support student learning and contribute to student success. The College has expanded the resources and has been innovative in supporting the learning resource needs of all its students, including their distance education students. Their virtual resources include a variety of resources that are available 24 hours per day, seven days per week to all their students. Not only do they have extensive resources for students, they monitor and evaluate their usage statistics to determine whether it is enhancing student learning and make the appropriate modifications. (Standards II.C.1, II.C.1.a, II.C.1.b, II.C.1.c, II.C.2)

The College appears to be meeting the standard; however, there is concern in several areas that need to be strengthened. The 2012-2013 program review identifies a need for budget allocations to maintain and expand the resources that are needed. In the 2006-2007 Program Review, a similar improvement was identified and a $25,000 allocation was developed. The financial problems at the state precluded this allocation and they had to rely on donations. The 2013 budget allocated $20,000 from the general fund to support resources. College personnel have been innovative in obtaining donations and community/employer resources to meet obtain resources for their students; however, there needs to be systematic allocation to maintain resources both in print and electronically in order to provide student with ongoing current resources. Permanent funding for sufficient Library and support resources and services remains an issue for the College. (Standards II.C.1, II.C.1.a, II.C.1.b, II.C.1.c, II.C.2)

The College meets the Standard.

Recommendations:

See Recommendations 5 and 6
Standard III - Resources
Standard IIIA - Human Resources

General Observations

The Institutional Self-Evaluation Report addressed each component of Standard III.A. The College has well-established processes for the recruitment, training and professional development of its personnel that support and carry out the educational mission and values. The institution has taken steps to integrate the personnel needs identified through the planning and program review process and the identification of Program Improvement Outcomes, or PIO’s.

Findings & Evidence

Ohlone College has standardized hiring practices in place, and has established an annual performance evaluation period for all employees. Procedures are in place for ensuring timely completion of faculty evaluations. A comprehensive classified and management job classification study will be conducted during the 2014-2015 fiscal year. Personnel records are protected, while still providing access to all employees who wish to review their own personnel files. (Standards III.A.1.a., III.A.1.b., III.A.3.b.)

The faculty and staff generally reflect the diversity of its students. The college’s commitment to equity and diversity is one their Core Values, is reflected in Goal 6 of their Strategic Plan and evidenced throughout the college in its Board Policies and resolutions, supported by discrimination and harassment policies, practiced in training, and celebrated in college events. The faculty and staff expressed a strong belief that the college demonstrates appropriate concern with regard to issues of equity and diversity (Standards III.A.3.a, III.A.4.a., III.A.4.b., III.A.4.c).

The Board of Trustees revised their Code of Ethics/Standard of Practice in 2009 and adopted an Institutional Code of Ethics for all college employees in October 2013 (Standard III.A.1.d.)

Professional development opportunities are provided in the form of funding for conferences, workshops, and faculty sabbatical leaves. The College acquired a Learning Management System that all employees can access. A wide variety of courses ranging from strengthening technology skills to leadership development are available through the web portal. During the annual performance evaluation period, employees utilize an individual professional development plan to identify specific professional development needs. An entire day during Learning College Week (Flex) is devoted to providing faculty with time and support to work on key initiatives like Student Learning Assessment and Outcomes, and Program and Services Review. New faculty members are paired with a full-time faculty mentor. Training and coaching is available to faculty who teach distance education courses. Feedback data is continually analyzed by the Professional development Committees and Human Resources to
make improvements, add new offerings and inform planning. (Standards III.A.5.; III.A.5.a.; III.A.5.b.)

Planning for human resources is an integral component of the Program and Services Review process and assigned priority in accordance with strategic goals, and integrated within the budget planning process. While the College has maintained compliance with the state mandates regarding the ratio of full-time to part-time faculty numbers, the number of full-time faculty is low when compared to colleges of similar size. The College offered a number of retirement incentives to employees to avoid layoffs during the State budget crisis. A plan has been developed that is designed to rebuild full-time faculty to the 2007-2008 number. (Standard III.A.2)

The College provides evidence through its catalog, Board Policies and Administrative Procedures, position descriptions, and recruitment strategies that it employs qualified personnel. Position descriptions relate to the College Mission Statement and goals, and appropriate Board Policies support fair hiring practices. Position responsibilities are reviewed by constituency groups, and job specifications are periodically reviewed and updated to ensure they match job expectations. (Standards III.A., III.A.1.)

Faculty hiring processes include extensive involvement of faculty members in the selection of new faculty, and hiring procedures provide for demonstration of expertise within the interview process (Standard III.A.1.b.). The College ensures that minimum qualifications are reviewed and that announcements and performance measures are appropriately appraised. A standard presentation/training is presented to all search committee members on fair hiring practices, policies and procedures of the District, confidentiality of the process, conflict of interest and the requirements of nondiscrimination laws. The associate vice president of human resources and training is responsible for overseeing the overall screening and selection process, including conformance with Equal Employment Opportunity (EEO) requirements. (Standard III.A.1.a)

In 2008, the College received the following recommendation from the visiting team:

_The team recommends that the College continue its planning agenda to put in place appropriate and systematic employee performance evaluation procedures (Standard III.A.1.b)._

The College has implemented a tracking system to ensure evaluations are completed timely. In general, all evaluations are completed before the fall semester each year. Two-thirds of those expressing an opinion in the faculty and staff survey agreed “Evaluation processes help improve the quality of employees’ job performance.” Data provided by the College substantiates that evaluations for academic, staff and administrative are completed in a timely manner. (Standard III.A.1.b)

Performance review timelines and processes are addressed in all the bargaining unit contracts; managers and confidential employees in their individual employment contracts. Performance appraisal documents for academic and classified managers and supervisors
include the development of measurable goals, as well as job skills including leadership, communication, and decision making (Standard III.A.1.b.). Only administrators responsible for student progress toward achieving Student Learning Outcomes (SLOs) have effectiveness in producing student learning outcomes as a component of their evaluation. Faculty evaluation includes evidence of teaching skills and strategies and professional growth on a personal, departmental and educational community level. Effectiveness in producing SLOs is not a specific component of the faculty evaluation, though faculty are encouraged to offer samples of their assessment results and improvements as part of their self-evaluation. Student surveys are completed for all full-time faculty, counselors and librarians. The evaluation process includes peer evaluation. The Self-Evaluation Report indicates that the College does not meet the Standard for this area. The College has introduced the inclusion of responsibility for developing and assessing Student Learning outcomes in its initial proposal as part of the upcoming contract negotiation with the Faculty Bargaining unit. While this is a step in the direction toward compliance, the team concurs that the college does not meet the standard. (Standard III.A.1.c)

The Board of Trustees revised their Code of Ethics/Standard of Practice in 2009 and adopted an Institutional Code of Ethics for all college employees in October 2013. The United Faculty of Ohlone (UFO) bargaining agreement has language that describes as a general duty and responsibility of a faculty member that he/she will adhere at all times to the high standard of professional ethics expected of the teaching profession. The Ohlone Faculty Ethics Statement, adopted by the Faculty Senate in 2008 and based on the 1987 American Association of University Professors’ Statement on Professional Ethics, can be found on the faculty senate webpage. Board Policy 4030 Academic Freedom discusses academic freedom and responsibility, is faculty to balance ethical responsibilities with academic freedom. Information regarding academic freedom is also listed in the college catalog. (Standard III.A.1.d)

The College currently employs approximately 123 faculty, 15 administrators, and 172 classified staff members. The College adheres to state requirements regarding staffing; however, compared to colleges of similar size, the College has an artificially low Faculty Obligation Number (FON). The artificial drop in the FON was a planned strategy to go into enrollment restoration of 2005-2006. The College lost staff throughout the organization due to the state wide budget reductions and retirement incentives being offered. Program and Services Reviews include Program Improvement Objectives (PIOs) that identify the need for additional faculty, staff and administrators to support student success. The College maintains a model staffing plan that compares staffing levels of other community colleges that are similar in size and full-time equivalent students. The Institutional Research and Planning Office analyze environmental scan data and consider the unique needs of the College’s students in determining optimal staffing levels. This data assists the administration in making hiring decisions.

A plan has been designed to rebuild full-time faculty to the 2007-2008 number, taking the decline in FTES into account. The Faculty Position Prioritization Committee reviews full-time vacancies annually and make recommendations for replacement. Administrator positions left vacant or filled with interims due to budget reductions are being refilled.
Classified management position essentially remained unchanged over the same period. Staffing needs are reviewed and prioritized annually. (Standard III.A.2)

The College developed written policies and procedures that specifically focus on fair and equitable treatment of all employees and fairness in employment practices. The Board of Trustees has a systematic process for the review of Board Policies and corresponding Administrative Procedures are developed by the president in collaboration with relevant constituent groups. The College utilizes the California League for Community College (CCLC) service for guidance with updating and incorporating changes to laws and regulations into Board Policies and Administrative Procedures. Board Policies and Administrative Procedures are posted on the College’s website, Human Resources’ website, and some personnel related policies are distributed to employees annually via email. Additionally, Human Resources posts new hard copies of personnel related policies and procedures outside the Human Resources office. (Standard III.A.3.a)

Employee personnel records are secured in the Human Resources office. Education and Labor Codes are followed regarding access and inspection of records by the employees. Employees may review their own personnel files by appointment. (Standard III.A.3.b)

The College has developed policies (Board Policy 3410 Nondiscrimination, Board Policy 3420 Equal Employment Opportunity and Board Policy 7100 Commitment to Diversity) that support and promote diversity in hiring. Positions are advertised in a variety of formats and locations in order to attract diversity within pools of qualified applicants. Over the past four years the college has increased its advertising budget to include recruitment fairs when necessary. The College states in its Self-Evaluation Report that the College generally reflects the ethnic distribution of the District. Overall, White staff is in excess of 17% of the District’s White population; Asian staff is below the District by 16% and Hispanic staff are below the District by 4%. Fall 2012 data indicates that there is a gap in diversity of the student population and faculty population as it relates to Asian (32%:18%), Hispanic (19%:9%) and White (24%:62%). The College conducted student, staff and faculty surveys in the spring 2013. Survey results indicate that, of those who had an opinion, 91.5 of the students feel that the faculty and staff of the College are sufficiently diverse to meet the needs of students. (Standard III.A.4)

The college is developing an Equal Employment Opportunity (EEO) Plan that reflects the District’s commitment to equal employment opportunity. The College estimates that the policy will be complete by the 2013-2014 academic year. The College participates in recruitment fairs as necessary to provide a full and fair opportunity for participation of a wide diversity of potential candidates. The International Education Committee oversees strategic planning with respect to Goal Number 6: Enhance College wide interaction with, and acceptance of, diverse peoples, cultures, arts and perspectives. (Standard III.A.4)

The College organizes professional development trainings to fit the needs and interests of both faculty and classified staff. An all-employee cultural sensitivity training was held in fall 2010; over 150 employees, including faculty, classified and managers attended. The majority of respondents (students, faculty and staff) believe that “The College’s policies and
practices demonstrate appropriate concern for issues of equity and diversity.” The College supports and acknowledges various cultural and ethnic groups by means of celebrating history, national recognition, and accomplishments to promote College wide consciousness, understanding and acceptance. Faculty serve as advisors for various student clubs (Gay Straight Alliance, Korean Student Association, Muslim Student Association, Women and Gender Empowerment. (Standard III.A.4.a)

The College has a variety of policies that address issues of integrity and fair treatment, including Board Policy 3430 Prohibition of Harassment, Board Policy 3720 Computer Use, Board Policy 3510 Workplace Violence Plan, and Board Policy 2715 Code of Ethics/Standards of Practice. The president and College Council are focusing on developing and augmenting the College’s Codes of Conduct for all employees and students. The College created a response team to deal with issues of harassment, bullying, discrimination and hate speech. Annually, Human Resources distributes the Board Policy regarding unlawful harassment and discrimination and the Administrative Procedure for the investigation and resolution of complaints to all employees. In fall 2012 the College established the Office of the Ombudsperson where students are able to discuss their complaints and concerns, receive advocacy, obtain referrals, and explore resolution options in a safe environment. Human Resources supports departments in team building, interdepartmental communication strategies, and manager-employee and employee-employee relations through retreats, consultants, and mediators. The president schedules luncheon meetings with various groups to learn about issues and concerns. The Employee-Employer Relations Committee with both classified bargaining units and the Certificated Employer-Employee Relations committee with UFO bargaining unit are working well to resolve conflicts outside the negotiation process. The faculty survey indicated that, of those expressing an opinion, 88% answered yes to “I feel safe on campus.” (Standard III.A.4.c)

The faculty and classified staff are represented by three separate unions. Each of the bargaining unit agreements provides for support of professional development. Employees utilize an individual professional development plan to discuss their professional development needs. The College annually sets aside funds to support professional development for faculty and staff. Applications are taken on a first-come, first-serve basis. Sabbatical and academic leaves are outlined in the UFO contract. The college provides funding for trustees to participate in individual training and workshops. Annually, a Classified Professional Development Day is conducted. The workshops, seminars, and events planned are especially for classified staff. The College is a member of the Bay Area Community College Districts Consortium, providing additional opportunities for employees to participate in a broad range of professional development trainings and workshops. Managers and supervisors participate in a variety of workshops and trainings presented through Human Resources. Faculty mentoring is supported through the Faculty Professional Development Committee. There is substantial opportunity for faculty and staff to participate in a variety of professional development activities during Learning College Week. (Standard III.A.5.a)

Professional development activity is evaluated through paper evaluations, online survey technology (Survey Monkey) and/or small group debriefs. Feedback data is discussed with the respective Professional Development Committees. Feedback has resulted in providing
more online training available on the Learning Management System and is used to plan Classified Professional Development Day and workshops during Learning College Week. (Standard III.A.5.b)

The faculty survey indicated that, of those expressing an opinion, 64% answered yes to “College Council is an open forum for broad participation by all constituencies in the decision making process at the college,” and 77.5% answered yes to “I have opportunities to be involved in institutional dialogue and decision making.” The College employs qualified personnel through established hiring processes that are in compliance with fair employment and equal opportunity requirements and appropriately evaluate the qualifications and experience of candidates relative to job descriptions that realistically match performance expectations. (Standard III.A.1.a) Employee personnel records are appropriately secured, and the College follows policies and contractual requirements for allowing employees to review their personnel files. (Standard III.A.3.b) Established policies that promote diversity are followed; however, additional focus needs to be applied in recruiting Asian and Hispanic faculty. (Standard III.A.4) The College has an active professional development program, and a majority of faculty and most of classified employees participate in professional development activities. (Standard III.A.5.a)

Conclusion

The College has put in place appropriate and systematic employee performance evaluation procedures (Standard III.A.1.b) and fully satisfied 2008 accreditation team recommendation. The College does not yet incorporate effectiveness in producing learning outcomes into the evaluation processes for faculty. (Standard III.A.1.c)

Resources to support Faculty Hiring Plan goals need to be a priority to ensure improvement in the Faculty Obligation Number. (Standard III.A.2, III.A.6)

The College does not fully meet the Standard.

Recommendations

See Recommendations 3, 4 and 7.
General Observations

The College is comprised of two sites: the Fremont campus and the Newark Center for Health Sciences and Technology (the Newark Center). The Fremont campus is located on Mission Blvd. in the city of Fremont and is comprised of 32 buildings. Most of the campus buildings were constructed in 1974-1975 with the exception of the Smith Center (1995), Hayman Hall (2001), Student Services Center (2009), Child Development Center (2004), and the Orchard House (1890). The campus is located on 534 acres on a hillside with the elevation change from Mission Boulevard to the easternmost portion of the campus 65 feet, with the western half of the campus relatively flat in grade and the eastern half sharply sloping uphill. The Newark Center is located on Cherry Street in the city of Newark and is comprised of one approximately 130,00 gross square feet building built in 2008 on 81 acres.

The community approved a $160 million facilities bond (Measure A) in March of 2002 that comprised three major allocations, the Newark Center ($111 million), the Student Services Center on the Fremont campus ($33 million), and other specific renovation and upgrade projects on the Fremont campus ($16 million). Another $349 million bond (Measure G) was approved in November of 2010. With the passage of this bond measure the College has embarked upon a major project to completely renovate and modernize its Fremont campus.

Findings and Evidence

The College provides safe and sufficient resources that support and assure the integrity and quality of its programs and services, regardless of location or means of delivery. The campus is committed to keeping its students safe. The Safety Committee and Campus Police Services monitor and ensure a safe campus environment. The College maintains a visible campus police presence on both campuses. When surveyed in 2013, 96.6% of classified staff and managers were satisfied with the responsiveness of campus police and 90.7% reported that they felt safe on campus. Similarly in March 2013, 90% of students surveyed responded that they too felt safe on campus. The College is up to date on its NIMS and SIMS training and conducts an annual table top exercise simulating a disaster/emergency situation. In fall 2013 the campus became 100% smoke free. (Standards III.B.1, III B.1.a & b)

The Facilities and Modernization Department oversees the ongoing safety of buildings and grounds and the overall maintenance of facilities. In order to monitor and assess the efficient and effective use of facilities and to determine the sufficiency of classrooms, lecture halls and laboratories, the college utilizes the newly integrated FUSION, GIS, and ONUMA databases. Funding from both Measure A and G has allowed the College to address many of their delayed maintenance and potentially hazardous conditions. Under Measure A, the bond has addressed the following on the Fremont campus: creating disabled access to three buildings, installation of 32 security/safety cameras, increased exterior lighting including all pathways leading to parking, weatherproofing buildings and repair to water damaged areas.
and removal of mold among others. Trip and fall studies are conducted and issues are addressed. In addition, the district employs a “Quick Fix” process that allows any employee to sponsor a project. Projects are categorized and prioritized as follows: 1) Safety and Accessibility, 2) Eminent Failure, and 3) Way Finding (signage/lighting). This is a very responsive, dynamic process that allows for emerging concerns to be dealt with expeditiously. (Standards III.B.1, III.B.2)

In the College’s 2010-2015 Strategic Plan, two goals were set that deal directly with this standard: 1) Goal 4.7. - by 2015, upgrade the Fremont campus, including functionality, sustainability, safety, accessibility, and aesthetics; and 2) Goal 4.9. - by 2015, achieve long-term campus maintenance and capital improvements necessary to increase effectiveness of learning and support services for facilities improvement, while promoting sustainability. Funds generated from Measure G will allow the district to completely renovate and modernize the Fremont campus. At this writing, major projects are coming on line including the demolition and replacement of three key building simultaneously. The development of projects and priorities for Measure G has been an open-ended and inclusive process. The process has involved input from the community during the campaign to pass the bond, setting physical resources goals within the Educational Master Plan, and the District Facilities Master Plan, and a participatory approval process for each individual project. (Standards III.B.2, III.B.2.a)

All projects go through a multiple-step approval process that included input form user groups and all college constituents. In line with the College’s commitment to its Deaf administrator/faculty/ and student community, consultations have been made to ensure that new facilities are designed in such a way to be ‘Deaf Friendly’ (maintaining line of sight for all participants). There is College Citizens’ Bond Oversight Committee that is responsible for both Measures A & G. This committee meets quarterly. Within the scope of Measure G, facilities will be constructed to accommodate any projected growth through the year 2024, and within the District Facilities Master Plan, plans are in place to accommodate growth through 2030. (Standards III.B.2.a, III.B.2.b)

The College is committed to developing a facilities assessment component as a part of the Program and Services Review module. With this component in place there will be a regular and systematic assessment of the efficient use of existing space. The results of this assessment will allow for the necessary realignment of space as program needs change. (Standard III.B.2.b)

Capital equipment purchases are linked to College planning. Departments must specify how requests are tied to the College Strategic Plan, Program Improvement Objectives, or particular Program and Services Review recommendations. (Standard III.B.2.b.)

An area for exemplary practice is the district’s commitment to environmental sustainability. The college has in place Photovoltaic Energy Systems (solar energy), one on the Fremont campus and one at the Newark Center. The Newark solar field creates enough electricity to fully cover its electrical needs making it a Net-Zero campus and it also generates enough surplus power to offset 1 megawatt of the energy demand of the Fremont campus. In 2009,
the College was awarded LEED Gold Certification by the U.S. Green Building Council in the building of the Fremont Student Services Center, and in 2008, it was awarded LEED Platinum Certification for the building of the Newark Center for Health Sciences and Technology. Under Measure G the college hopes to achieve zero energy designation for the entire district.

**Conclusion**

Ohlone College effectively uses its physical resources to achieve its broad educational purposes to achieve its broad educational purposes, including stated student learning outcomes, and to improve institutional effectiveness.

The College meets the Standard.

**Recommendation**

See Recommendation 4.
Standard III - Resources
Standard IIIC - Technology Resources

General Observations

The College’s Information Technology Vision sums up the vital importance of technology services at the College. “Technology is a service provided to faculty, students, and staff across every function at Ohlone. Technology is central to programs, courses, facilities, operations, and professional development, and it serves to advance the mission, vision, goals, and objectives of the College. Technology support services balance efficiency and cost-effectiveness with quality.” Since the last accreditation visit, the College submitted, and was approved for, a substantive change proposal for delivering a large portion of their classes online. As such, they have put an intensive amount of effort and work into the identification of needs for the infrastructure of the technology to provide resources to the staff, faculty and students of the College. They assessed the technology resources through their program and services program review, developed a comprehensive Technology Master Plan, upgraded and improved the infrastructure, physical resources and are in the process of planning for new facilities that will serve future students. The Technology Management Team and staff have been transformed since the last visit and their vision and progress is admirable. (Standard III.C.1.c)

The College has an outstanding, collaborative and innovative approach to delivering the seamless technology to provide for successful completion of the college mission. The systematic, organized and visionary leadership demonstrates a commendable asset to the College. The Technology Master Plan and the Information Technology Program Review are insightful and well designed. (Standard III.C.1.c)

Findings and Evidence

The College evaluates annually the needs of the institutions through the technology planning processes which include input from the College through the Technology Committee and the Colleague Coordination Team (CCT) Chairs. Unit requests and distribution of resources are handled through the college wide PIO process. Technology planning is integrated with institutional planning. (Standard III.C.1.c)

The Technology Plan uses the College’s Strategic Plan as its basis and further articulates the technology agenda for the college. Additionally, the College makes decisions about technology services, facilities, hardware and software through the Information Technology Department with oversight by the Technology Committee and the CCT. The Technology Plan and College technology standards help guide decisions made by the College. Distance education services are provided and supported. The College has provisions for reliability, disaster recovery, privacy and security. (Standard III.C.1.c)

The College uses established participatory committees, surveys, program review, institutional planning (Technology Plan, Educational Master Plan) to establish, verify, and validate the
needs and services to the community. The College effectively uses different avenues to ensure they are meeting the present and future needs of the students and student learning services. Within these processes they analyze and assess potential technology solutions, risks, costs and implementation plans to determine which direction they will take. In addition, the College analyzes future trends to determine long term approaches to providing technology and services to their communities, as well as monitoring the instructional program development to ensure that the technology can meet the needs for student learning. (Standard III.C.1.c)

Technology resources (computers, laptops, etc.) are plentiful around the College sites. At the Fremont campus, the Library has multiple areas where students can get online to do research, write papers, and read email. There is a pod (32 workstations) available on the third floor that is comprised of both Apple and PC computers. There are additional computers throughout pods in the other buildings and two floors in the Hyman Hall building where the computer laboratories and the tutoring centers are located. The Newark site has adequate technology resources available in the Library. (Standard III.C.1, III.C.1.a)

Technology training is provided to the staff and faculty in a variety of venues from professional development days, one-on-one support, training sessions and the use of videos and purchased technology training modules. Training is not provided outside the regular courses for students by; however, tutoring, learning resources and videos are all available to students. They provide ongoing technology support, as well as conducting ongoing survey to assess student, staff and faculty satisfaction with technology resources. (Standard III.C.1.b)

The College continually evaluates its technology needs, maintains an updated inventory listing and has demonstrated planning of projects and priorities within their Technology Master Plan. The College has done an excellent job of developing a comprehensive plan to serve the staff and students of Ohlone. The funding appears to be provided through a bond measure which the College created an endowment in order to provide ongoing support for technology resources. The College had a history of relying on special one-time funding or grants to support their technology needs as the state funding continued to decrease as noted in the Technology Master Plan. This insightful approach to ongoing support of technology needs is commendable. The college has taken the further step of funding for this ongoing operation through the college’s recent bond measure, establishing a $10 million “technology endowment” which will be available for in 2017. (Standard III.C.2)

While this is an innovative approach to provide ongoing funding for technology needs, the College should support technology resources and support for student learning through the use of their general funds. Technology staffing has declined from the last visit from approximately 30 personnel to 20 personnel. Through reorganization, the Information Technology department has streamlined processes and organized functions into two key groups: the Application Services and Technical Services. While the reorganization has streamlined the services, there is concern that there is not adequate staff to support the infrastructure of the College as it brings on additional buildings. (Standards III.C.1, III.C.1.a)
Conclusion

The College has provided evidence that ongoing planning is done to ensure that technology resources support student learning programs and services. The College also demonstrates through ongoing program review and PIOs that they have a cycle of improving institutional effectiveness. The College has ongoing cycles of reviewing the needs, developing plans and allocating resources. The College needs to assess the impact of decisions to determine if the allocation of resources met the need to improve student learning (Standards III.C.1.d, III.C.2)

There is concern regarding the reliance on the Measure G endowment funds and the question of whether the institution allocates general funds to the maintenance and ongoing improvement in services. (Standard III.C.2)

The College meets the Standard.

Recommendations

See Recommendation 4.
General Observations

The College has prudently managed its fiscal resources. It has acted proactively to decrease expenditures in order to keep pace with declining state funding levels. Control of expenditures is strong and well managed. The finance team is commended for its prudent fiscal management to ensure financial solvency.

Findings and Evidence

A review of the audit statements confirms that the College’s overall budget is being well managed. In spite of the turbulent economic times, the prudent approach to budgeting has ensured positive general fund ending balance after two years of deficit spending. Financial resources appear sufficient to ensure fiscal solvency. (Standard III.D)

Program and Services Review guidelines indicate that financial planning is linked and supported by the Educational Master Plan and the Vision, Mission and Core Values statements. The College Planning Matrix shows how strategic goals, governance committees and the accreditation standards connect and interrelate. Governance structures align with financial planning efforts. In 2013, the Program Review cycle was changed to occur on a three year cycle. Through this review, Program Improvement Objectives (PIOs) are identified on an annual basis. Those requiring additional fiscal or physical resources are moved forward and are reviewed by the executive leadership team (president/superintendent and vice presidents). Institutional Improvement Objectives (IIO) are identified by the executive leadership team. The PIOs are categorized in terms of 1) savings and/or revenue generating, 2) safety/compliance/eminent failure, 3) external factors and prioritized based on college priorities and goals. The PIO Prioritization Rubric is used to assess the efficacy of the PIO. The Budget Committee reviews the IIOs and prioritized PIOs, and makes recommendations on which items to fund and possible funding resources. Recommendations are reported out to the College Council. Final prioritized recommendations are forwarded to the executive leadership for approval and sharing with the Board of Trustees. The Program and Services Review documents show that resource requests are linked to program review and institutional planning. Additional work needs to be done to assess how IIOs and PIOs effect improvement in programs. (Standard III.D, III.D.1.a)

The Vice President, Administrative Services – in consultation with the President, Vice Presidents, Associate Vice President, Budget Committee and College Council - develops budget assumptions based on projected enrollment data, full-time faculty obligations, cost of living adjustment (COLA), growth/restoration factors and deficit factors. Review of the Budget Committee and College Council meeting minutes confirm that the annual tentative and final budget is reviewed before going to the Board for approval. The Annual Budget presentation (Standard III.D.15) clearly stated projected revenues and expenditures, including approved budget additions and deletions. Apportionment revenue estimates includes
restoration of 150 FTES over 2012-13. The College’s planning reflects realistic assessment of available financial resources and expenditure requirements that include the PIOs and IIOs approved for the 2013-14. An additional $600,000 of improvements was included in the budget to support student learning, including faculty sabbaticals (2) and previously-eliminated administrative positions. Since 2007-2008 the College’s annual Net Activity has resulted in an Operating Deficit four of the six years (III.D.18). The Adopted 2013-2014 Budget projects a 15.6% Available Reserve after deducting the required 5% contingency reserve and other reserve components for such things as capital improvements, office equipment and Supplement Employee Retirement Reserve (SERP). (Standard III.D.1.b)

The College carefully identifies and plans for its long-term liabilities while maintaining its fund reserves to ensure adequate resources in case of unanticipated shortfalls. The long-term obligations are presented to the Budget Committee and College Council. The Adopted Budget includes the current obligation for long-term liability payments. A review of the 2012-13 and 2013-14 budget shows amounts set aside for district obligations for employee benefits and retiree benefits as well as a reserve to buy back bookstore operations. The district’s decision-making methodology detailed in the Educational Master Plan seeks to identify the entirety of obligations that will require future resources. Evidence of payment schedules are in the 2012-2013 audit report (Standard III.D.24) for Measure A and G general obligation bonds issued to finance acquisition, construction and modernization of property and facilities. The College refinanced a portion of its Measure A, Series A and Series B resulting in significant savings to the taxpayers. The tax collection and debt service is managed by Alameda County with input from the district. (Standard III.D.1.c)

The College Council is the governance committee that oversees financial planning, budget development, strategic planning; and, is an advisory to the President. It also serves as the Accreditation Self Evaluation Steering Committee. Members from all college constituencies make up the College Council and its subcommittees. Meetings of the College Council and Budget Committee (a subcommittee of College Council) are open to the college community, and agendas and minutes are posted on the College’s website. Of faculty choosing to respond to the College wide survey, 65% responded yes to “The College Council is an open forum for broad participation by all constituencies (students, staff, faculty, administration) in the decision making process at the college”, 76% responded yes to “I have opportunities to be involved in institutional dialogue and decision making.” As reported in the Follow-Up Report of 2009 and Mid-Term Report of 2011, the College has improved its program review process by using enhanced data sources and a comprehensive environment scan. These improvements were made possible through the implementation of the CurricUNET program review module. The relational nature of the CurricUNET database helps facilitate the generation of useable data and provides the linkages between program review, facilities and information technology planning, and budget decision-making. Data is made available electronically to all program managers and facilitates the analysis of programmatic expenditures to provide a solid foundation for the establishment of PIOs for the next program review cycle. Responses to the College wide survey, of faculty choosing to respond, were moderately positive when asked “Budget priorities are determined by systematic planning” - 43% yes, 14% no and 43% no opinion. It appears some additional work needs be done to raise awareness and increase confidence that budget priorities are systematically planned.
Evidence-based decision making is a growing part of the college culture. (Standard III.D.1.d)

Board Policies govern approval processes for internal audits and fiscal management. In addition to daily and monthly review of financial transactions, quarterly budget reports are prepared and analyzed to ensure accuracy and credibility. Colleague financial software system is used to summarize year-to-date budget/financial information and is presented to the college administrators, Budget Committee, College Council, and the Board. The College has consistently received unmodified opinions from its independent auditors. There were three findings in the 2013 audit. One revolved around informal bidding procedures. Per discussion with the Purchasing Manager, the district will secure proper documentation of the required trade journal advertisements going forward. The second revolved around State General Apportionment. The College did not maintain detailed documentation to validate instructor certifications of attendance rosters. The College has developed a new electronic format for instructor certification of active enrollment at census that meets the requirements of Title 5, Section 58004. The third finding revolved around State Compliance – EOPS and CARE. The College’s advisory committee for EOPS and CARE did not meet during the 2011-2012 academic year as a result of not achieving a quorum. For 2012-2013 the College formed a new 14-member EOPS/CARE Committee, has shared the meeting calendar and sends out meeting reminders; finding resolved. A review of the College’s quarterly and annual financial statements, and last three years of budgeting compared to actual expenditures, the budget accurately reflects institutional spending. The Ohlone Foundation audit report included two recommendations. Implement an additional review process for check requests and reconcile Raiser’s Edge donor management database to the general ledger. Steps have been taken to resolve both recommendations. (Standards III.D.2.a, III.D.2.b)

On a monthly basis the Budget Committee, College Council and Board receive fiscal information and updates. Real-time online financial information can be accessed by all budget managers through the WebAdvisor and/or Colleague pathways. Quarterly financial reports and the tentative and final budgets are reviewed by the Budget Committee and College Council before being shared with the Board. Quarterly financial reports are presented to the Citizens’ Bond Oversight Committee. The College provides financial statements to the Foundation on a regular basis. An annual audit of the Foundation financials shall coincide with the College’s regular fiscal audit. The College is exploring the implementation of a budget development module in Colleague for all budget managers. Currently, a budgeting module is not available in Datatel. A review of Budget Committee, College Council and Foundation meeting minutes confirms that fiscal information and updates are taking place. (Standard III.D.2.c)

The external audits verify that federal and state programs are used with integrity in a manner consistent with the intended purposes. The College bookstore is now operated under contract with an outside vendor (Follett) and is no longer an auxiliary organization. Cafeteria services are operated by Fresh & Natural. Negotiated revenues are used to support the General Fund. All financial transactions of the Associated Students require Associated Students of Ohlone College (ASOC) Board approved and are reviewed by College’s Vice President of Student
Services for appropriateness as well as the College’s financial team and external auditors. Financial expenditures of the College Foundation are monitored by the College’s finance team and reviewed by the Foundation’s finance committee, executive committee and Foundation’s board of directors. The College and Foundation Director meet regularly to ensure that Foundation fund raising efforts are aligned with stated College goals and priorities. The College also offers fee-based community education classes and workforce development (contract education) opportunities. Both programs must be self-supporting. The largest contract education contracts are with Alameda Workforce Investment Board (WIB) and Microsoft Office. The Citizen’s Bond Oversight Committee has reviewed expenditures from Measure A and G to ensure they are consistent with regulatory and legal restrictions. The College also employs a construction management firm to assist in planning, monitoring, and reporting of bond expenditures and activities. The College historically does not utilize any short-term debt instruments such as Certificates of Participation or Tax Revenue Anticipatory Notes. Board Policy 3280 Grants, reviewed and reapproved 2009, references Administrative Procedure 3280. The Administrative Procedure has not been developed. The College has identified this as an actionable improvement plan. Procedures need to be refined for grant management and enhanced involvement of the finance team in all college grant programs. (Standards III.D.2.d, III.D.2.e)

The College adheres to Board Policies 6200 Budget Preparation, 6250 Budget Management and 6300 Fiscal Management regarding financial solvency and budget preparation criteria. The criteria and standards dictate that the unrestricted general reserves shall be no less than 5% of the general fund. The Vice President of Administrative Services is responsible for stewardship of the available College resources and ensuring that the fiscal practices are in place. The Vice President of Administrative Services, in collaboration with the Director of Business Services, ensures adequate and clear delineation of fiscal responsibility and staff accountability within fiscal services departments. In response to the state budget crisis, the College set aside a two percent Rainy Day Reserve; class sections were reduced which, in part, resulted in a reduction of adjunct salary costs; spending was also reduced through a salary freeze and keeping vacancies open as long as possible. The College participates in shared risk pools including Joint Powers Authority to manage risk. A review of the two most recent financial reports reveals that the college was deficit spending; however, the Budgeted Net Activity for 2013-14 is positive. (Standards III.D.3, III.D.3.a)

The College uses the Datatel financials system for all general fund expenditures. The College uses the results of the external audits of General Fund, Bond Funds, Foundation and program compliance audits (USDE and USDVA) to verify compliance and make improvements. Regular meetings between Business Services and auxiliary organizations are conducted to ensure appropriate fiscal oversight. (Standard III.D.3.b)

The College has established an investment trust for the purposes of investment and disbursement of irrevocably designated for the payment of “other post-employment benefits” (OPEB), in compliance with governmental Accounting Statement Nos. 43 and 45. Actuarial studies are done every two years to identify the present value of the future OPEB obligation. The Retirement Board of Authority consisting of College personnel oversees the trust. A qualified Discretionary Trustee provides for asset and fiduciary management and investment
policy development. A Program Coordinator for the Trust provides oversight of the program and guidance to the College. The liability in 2013 is estimated at 7,250,590; 29% ($2,077,916) has been set aside in the irrevocable trust. The annual required contribution (ARC) is set aside on a yearly basis. Presently the district is paying the minimum required. For 2011-2012 and 2012-2013 Bookstore proceeds were used to cover the ARC. Beginning in 2013-2014, the General Fund will pick the entire cost. Reserves from the Community Education and Contract Education funds will fund 50% of the OPEB costs with the remaining 50% being funded from General Purpose Operating Fund for the next four years. The actuarial study for 2013 has been received. (Standards III.D.3.c, III.D.3.d)

Two types of local debt have been incurred by the College: supplemental employee retirement program (SERP) debt and general obligation (GO) bond debt. The College participated in two five-year SERPs; the first was offered in 2009 and second in 2011. Payment schedules were negotiated with a third party administrator. There is one remaining payment for the 2009 SERP and two remaining payments for 2011, for total debt of approximately $1.3 million at June 30, 2013. The College has two active general obligation bonds. Measure A bond was approved by voters in 2002 and will be closed out in fiscal year 2014. Measure G bond was approved by voters in 2010. Uses of Measure G included the establishment of a technology endowment fund. The technology endowment fund was established in 2013 and earnings on the principal will be available to support technology needs beginning in 2017. Repayments are funded through the General Purpose Fund. A review of the audit statements and the budget documents show that the district allocates resources for the repayment of locally incurred debt instruments. (Standard III.D.3.e)

The student loan default rates for the past three years are within federal guidelines. The College is not under any sanction at this time. (Standard III.D.3.f)

Contractual agreements with external entities directly support the mission and strategic plan goals of the college. The Board delegates authority to the President/ Superintendent to enter into contracts on behalf of the College and establish Administrative Procedures for contract award and management. Contracts are not enforceable obligations until ratified by the Board. Purchasing practices are reviewed as part of the annual external audit. No exceptions have been cited on contractual agreements with external agencies. Appropriate provisions are in place to maintain the integrity of the institution. (Standard III.D.3.g)

Audit findings and/or recommendations noted in the annual external audit are reviewed by the president, vice presidents, associate vice presidents, the Audit Committee of the Board and the College’s Budget Committee to improve financial management and planning. Internally, the College regularly evaluates its financial management practices and, as needed, implements new or additional procedures to strengthen and improve internal controls. (Standard III.D.3.h)

The College’s financial resource planning is integrated with institutional planning. The Annual Assessment of Goals and Objectives Assessment Document Tool is used to assess the use of it financial resources on an annual basis in relation to the College Strategic Plan. Each goal and its supporting objectives are assessed for progress and efficacy. At the
departmental and program level, budgets and expenditures are consistently monitored to ensure operational effectiveness. The College has begun the work of enhancing its Program and Services Review Process to make it more robust. The College is working to develop metrics to assess the efficiencies and efficacies of resource allocations in relation to program performance to further inform and improve institutional planning. These metrics will also be needed to support the strategic plan goals and objectives as well as institutionally set standards. (Standard III.D.4)

Conclusions

Overall, fiscal management of the College is very prudent. Risk management strategies are in place to meet financial emergencies and unforeseen circumstances. Adequate reserves have been maintained despite the uncertainty of state budget. This fiscal management approach supports student learning and protects its programs and services.

The College meets the Standard.

Recommendations

See Recommendation 4.
General Observations

The College has both a structure and a culture that encourages participation of all constituencies. The College’s “primary committee” for discussion and decision-making is the College Council, which comprises representatives from the Faculty Senate, the Associated Students of Ohlone College, California School Employees Association (CSEA), Service Employees International Union (SIEU), and three administrators from Academic Services, Student Services, and Administrative Services. The College Council makes recommendations to the College President regarding Board Policies, Administrative Procedures, Annual Budget, District Strategic Plan, and Accreditation Self-Study. Board Policy 2510 Participation in Local Decision Making outlines the broad rules for constituent consultation and Administrative Procedure 2510 Participation in Local Decision Making, and the College Council’s by-laws provide for effective consultation by requiring public agendas, open attendance, and opportunities for public comments. The College’s Planning and Decision-Making Handbook summarizes these requirements and is widely available on the president’s office website. Effective and timely notification of meetings and agendas to the College community, however, has occasionally been unsuccessful in allowing satisfactory participation, especially among students.

The constituency organizations hold regular meetings, post agendas, and make minutes available to the College community. Although all constituents feel welcome to participate, part-time faculty, classified staff, and especially students find widespread participation to be challenging. While the College’s governance process appears to work well for all concerned, some participants seem much less certain about both their input and the results of College governance.

Findings and Evidence

The College has an open leadership structure in which the President encourages all constituency groups to "participate in the pursuit of institutional excellence.” In 2003, the College abandoned its President’s Council and replaced it with the College Council, the primary forum for interaction, discussion, and questions. Large majorities of faculty, both full- and part-time, and administrators believe that the College Council is open to frank discussions relating to planning and decision-making. While this structure occasionally fails to provide adequate notification to College constituents regarding important issues, most agree that it is an improvement over previous consultations within the President’s Council. (Standard IV.A.1)

In addition to the official governance participation structure, the College has made use of outside consultants, state agencies, and citizen’s groups for purposes of bonds and facilities planning. The College uses measurable objectives for program improvements, which the
institution frames in the context of its Mission Statement and updates every three years. (Standard IV.A.1)

The College has an exemplary participatory governance structure documented in Board Policies, Administrative Procedures, and a published handbook, which makes these documents easily available to all interested parties on its website. The described processes appear to function well, although the College needs to establish a better system for informing the community about the times, dates, and locations of governance meetings. (Standard IV.A.2)

The faculty have clearly defined governance roles in Board Policies and Administrative Procedures. The Board relies primarily upon the Faculty Senate for policies regarding grading and curriculum, including the establishment of prerequisites and the placing of courses within disciplines; it mutually agrees with the Faculty Senate on policies regarding degree and certificate requirements, educational program development, standards regarding student retention and success, College governance relating to faculty roles and development activities, processes for program review, and processes for institutional planning and budget development. The Faculty Senate refers its recommendations in these areas to the College Council, which includes students, staff, and administrators. (Standard IV.A.2.a)

Board Policy 2510 Participation in Local Decision Making and Board Policy 4020 Program and Curriculum Development recognize the primary role of faculty with respect to student learning programs and services, curriculum development, grading policies, and the development of student learning outcomes. The College's Curriculum Committee is a subcommittee of the Faculty Senate and has two principle subcommittees, General Education and Distance Education. Evidence clearly describes the responsibilities and authority of faculty and academic administrators in curricular and other educational matters. (Standard IV.A.2.b)

The College has processes that promote communication among constituencies to effect student success. The College relies on faculty, the Faculty Senate, the Curriculum Committee, and academic administrators via written policies that define their respective roles in educational programs and services. The Self-Evaluation Report notes, however, that multiple, overlapping, and occasionally contradictory sources of information about College activities, particularly in social media, have confused members of the College community. (Standard IV.A.3)

The College satisfies expectations for its relationships with the Accrediting Commission. It documents past accreditation history on the college web site and has responded to previous recommendations. Although the Self-Evaluation Report states that the “College complies will all accreditation standards,” there may be instances in which this conclusion is unwarranted (Standard IV.A.4). The College has created a Process Assessment Committee that reviews its decision-making standard annually. The College now employs a full-time dean for Institutional Research. (Standard IV.A.5)
Conclusion

The College has both a structure and a culture that encourages participation of all constituencies. Board Policies, Administrative Procedures, and the College Handbook document its participatory governance describe both the philosophy and the structure of participation for each of the constituent groups. The College should make a greater effort to communicate its governance activities to all college constituencies in more timely and consistent manner.

The College meets the Standard.

Recommendations

None
Standard IV – Leadership and Governance  
Standard IVB – Board and Administrative Organization  

General Observations

The College has a governing board that is responsible for establishing policies to assure the quality and effectiveness of student learning programs and services and financial stability of the institution. The Board of Trustees consists of seven members who are elected to four-year terms. Elections are held every even numbered year for staggered elections of the members. The College and the Board have worked together to clearly define roles and processes to focus Board responsibilities on setting policies and the chief administrator on the effective operation of the institution. Board Policies define procedures for the Board of Trustees to use for selecting and evaluating the chief administrator for the District. Board Policies and Administrative Procedures are in place to address Board member duties and responsibilities and the decision making elements of this standard. The College and Board are commended for creating a Board Member Guide (developed in October 2008 and revised in October 2012) and implementing Ohlone College Trustee Orientation to support effective transitions and on-going education and development for Board members. (Standards IVB, IV.B.1.c, IV.B.1.f, IV.B.1.j)

The College President was hired in 2008. She has worked within the governance structure of the College to support a revised Program and Services Review process with resource allocation tied to prioritized improvement requests aligned with the Mission Statement of the College. The President led and supported actions to reduce expenses during years of reduced revenues and has maintained the fiscal stability of the institution. She also communicates effectively with the College and external communities through formal presentations, informal discussions and forums, and attendance at various committee and organization meetings. (Standards IV.B.2.a, IV.B.2.b, IV.B.2.d, IV.B.2.e)

Findings and Evidence

The College website includes the Board Policy and Procedures manual that lists and describes the policies established by the Board. The Board policies are categorized in seven different sections. The specific sections include 1) District, 2) Board of Trustees, 3) General Institution, 4) Academic Affairs, 5) Student Services, 6) Business and Fiscal Affairs, and 7) Human Resources. The Board functions as an independent policy making body as described in Board Policy 2010 Board Membership. Board size and membership requirements, structure, and duties and responsibilities are established in Board Policy (Board Policy 2010 Board Membership, Board Policy 2100 Board Elections, and Board Policy 2200 Board Duties and Responsibilities). Board members are elected by qualified voters of the District per Board Policy 2100. Individual members receive training and resources to support their understanding of their roles and responsibilities. All agendas and minutes are readily accessible on the College website and Board meetings can be viewed live online. A review of Board meeting minutes and interviews with Board members confirm that action items generally receive unanimous votes. The College and Board are recognized for their
outstanding efforts to communicate and distribute Board information and actions. (Standards IV.B, IV.B.1.a, IV.B.1.b, IV.B.1.c, IV.B.1.d)

Chapters four, five, and six of the Board Policy and Procedures Manual include the Board Policies that have been approved to ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them. *Board Policy 4020 Program and Curriculum Development* specifically states the expectation for the College to provide high quality and relevant programs and curricula for the community and students. This is demonstrated through the diverse course and program offerings at the College. The College also provides a range of student support services in alignment with Board Policies in chapter five. Financial related policies require effective use of resources and include sound fiscal and budget management expectations. The College conducts an annual outside audit per *Board Policy 6400 Audits*. (Standard IV.B.1.b)

A review of Board Policies, meeting agendas, and minutes confirms that the policies and practices are regularly reviewed. The College Council and the Faculty Senate are the governance groups that participate in the development and recommendation of policies for consideration by the Board of Trustees. *Board Policy 2710 Conflict of Interest* sets the standards of ethical conduct for Board members and its conflict of interest policy is aligned with government code. The process to address violations of the policy is currently defined under an administrative procedure. The College and Board are in the process of changing the process so that violations are addressed by Board Policy rather than Administrative Procedure. The present process could be compromised by having the President, who is an employee of the Board, lead the process to reprimand a Board member. (Standards IV.B.1.e, IV.B.1.h)

A Board Member Guide was developed in October 2008 and revised in October 2012. The guide serves as an important resource for board member development. Additional development and support occurs through trustee mentors, a Board Member Guide orientation led by the President, and various topic specific trainings on and off campus. Discussions with Board members, administrators, staff, and faculty have confirmed the value of the training resources and activities. Board meetings have been reduced from two to one per month and are shorter and more focused. Previous concerns of Board member direct communication with College faculty and staff and tendency towards micromanagement of College operations have been addressed as confirmed by discussions with College employees and Trustee members. Direct observation at a Board meeting attended during the site visit confirmed Board effectiveness and focused effort to function in compliance with Standard IV.B. (Standard IV.B.1.f)

The Board conducts a self-evaluation annually per *Board Policy 2745 Board Self-Evaluation*. The evaluation was revised in 2011 to include accreditation standards and assessment of Board priorities. There are five identified Board Priorities for 2013-2014 and each includes specific tasks to accomplish. The Board periodically reviews progress on the tasks. Each task is aligned with a College goal. The Board is informed about the accreditation process and reviews and/or approves documents as appropriate and is documented in meeting agendas and minutes. Discussions with Board members confirmed that accreditation
updates have been provided at monthly Board meetings over the past two years. Board members also reviewed the Self-Evaluation Report and two members participated on an ad hoc accreditation committee. (Standards IV.B.1.g, IV.B.1.i)

The College President is selected by an open search process and delegated responsibility and authority to implement and administer Board Policies (Board Policy 2430 Delegation of Authority to President/Superintendent and Board Policy 2431 Selection of President/Superintendent). The College used an “extended Board” model prior to 2008. The Vice Presidents, Faculty Senate President, bargaining unit representatives, Associated Students of Ohlone College, and College Council were members of this group. This structure tended to result in operational micromanagement and circumvention of the President. The College restructured the Board meeting in 2008 to include only the Trustees and President as the working Board for the meeting. This has helped to resolve earlier issues. Conversations and requests between the Board and the broader College community now are referred to the President and this has improved her authority to delegate Board policy. The College plans to include more information in training resources and professional development on micromanagement including caution against wordsmithing documents to help continue the positive and commendable progress in this area. (Standard IV.B.1.j)

**Board Policy 3100 Organizational Structure** delegates the responsibility of organizing the College to the President. The organizational structure of the College delegates responsibility to appropriate administrators. Administrative Procedures have been developed to implement Board Policies. Board Policies and Administrative Procedures are organized by topic area with clear ties to the Mission Statement. The President’s leadership in planning, organizing, budgeting, personnel, and assessing institutional effectiveness is confirmed through her involvement on various committees including College Council. The College Council has functioned as the main shared governance body for the College since 2003. The President serves as Co-Chair of the College Council and supports a collaborative and inclusive approach to institutional planning, program review, and resource allocation tied to priorities. (Standard IV.B, IV.B.2.a, IV.B.2.b, IV.B.2.c)

The President effectively controls budget and expenditures. **Administrative Policy 6100 Delegation of Authority** provides authority to the Vice President of Administrative Services to supervise budget development and management and overall fiscal management of the College. The policy includes requirements for financial controls and an annual outside audit is conducted. A Budget sub-Committee of College Council provides regular review of the budget process. (Standard IV.B.2.d)

The President is engaged with the College and external communities. The College’s website contains information on past and upcoming formal presentations by the President as well as written updates and information items to the College. Each semester begins with the President giving a State of the College speech to provide relevant updates. The President serves on and attends various committee meetings and other events at the College. Budget forums were frequently held (2009-2012) to provide updates and the opportunity for questions and dialog from those in attendance. The President has also established effective relationships in the community that develops and maintains support the College. The
President annually provides update presentations to at least 18 community organizations. The recent passage of bond Measure G reflects the positive outcome of the efforts to communicate effectively with communities served by the College (Standard IV.B.2.e).

**Conclusion**

The Board has established policies in place and the President is responsible for the effective operation of the College.

The College meets the Standard.

**Recommendations**

See Recommendation 4.