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Follow-Up Visit Report*Accrediting Commission for
Community and Junior Colleges*

Napa Valley College
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This report represents the findings of the evaluation team that visited
Napa Valley College on March 24, 2017

Submitted to:
The Accrediting Commission for Community and Junior Colleges

Submitted by:

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Follow-Up Visit Report

DATE: March 24, 2017
TO: Accrediting Commission for Community and Junior Colleges
FROM: Willard Lewallen, Team Chair
SUBJECT: Team Report of Follow-Up Visit Team to Napa Valley College, March 24, 2017

Introduction:

A comprehensive evaluation team visit was conducted at Napa Valley College in September-October 2015. At its meeting of January 6-8, 2016 the Commission took action to require Napa Valley College to submit a Follow-Up Report by March 15, 2017 and that this report would be followed by a visit of Commission representatives. The Commission found that the College was out of compliance with the following Eligibility Requirements and Standards: ER 11; I.B.2; II.A.3; III.A.5, III.A.6; III.B.3, III.D.2, III.D.4, and III.D.11 as reflected in team recommendations 1, 5, and 9. The College submitted a follow-up report in March 2017 and the follow-up team visit occurred on March 24, 2017.

The purpose of the team visit was to verify that the Follow-Up Report prepared by the College was accurate and through examination of evidence, to determine if sustained, continuous, and positive improvements had been made at the institution, and that the institution has addressed the recommendations made by the evaluation team, resolved the deficiencies noted in those recommendations, and meets the Eligibility Requirements, Accreditation Standards and Commission policies (together Commission's Standards).

The team found that the College had prepared well for the visit by arranging for meetings with the individuals agreed upon earlier with the team chair and by assembling appropriate evidence in support of addressing the recommendations. Over the course of the day, the team met with the Superintendent/President; Executive Director of Human Resources; Learning Outcomes Assessment Faculty Coordinators; Director of Facilities Services; Vice President of Administrative Services; Interim Vice President of Instruction; Dean of Research, Planning and Institutional Effectiveness.

The Follow-Up Report and Visit were expected to document resolution of the following recommendations:

Recommendation 1: In order to meet the Standards, the team recommends that the College fully engage in a broad-based dialogue that leads to the identification of Student Learning Outcomes at the course, program, and degree levels, and that leads to regular assessment of student progress toward achievement of the outcomes. The team further recommends that, in order to meet the Standards, the College develop student learning outcomes and assessment that is ongoing, systematic, and used for continuous quality improvement, where student learning improvement in all disciplines is a visible priority in all practices and structures across the College. The team further recommends that training be provided for all personnel in the development and assessment of learning outcomes at the course, program, institution and service levels. (Standards I.B.2, II.A.3; ER 11)

Recommendation 5: In order to meet the Standards, the team recommends that performance evaluations are regularly and consistently conducted for all employee groups. The team further recommends that faculty, academic administrators, and others directly responsible for student learning have, as a component of their evaluation, consideration of how these employees use the results of learning outcomes assessment to improve teaching and learning. (Standards III.A.5, III.A.6)

Recommendation 9: In order to meet the Standards, the team recommends the College link institutional plans (i.e., Campus Master Plan, Educational Master Plan, 5-Year Facilities Plan, and other appropriate plans; e.g. staffing plan) with financial plans to ensure that financial plans are integrated with other institutional short- and long-range institutional plans. Further, the team recommends the College's planning reflects a realistic assessment of financial resource availability and expenditure requirements. (Standards III.B.3, III.D.2, III.D.4, III.D.11, III.D.12)

Team Analysis of College Responses to the 2015 Evaluation Team Recommendations

Recommendation 1: In order to meet the Standards, the team recommends that the College fully engage in a broad-based dialogue that leads to the identification of Student Learning Outcomes at the course, program, and degree levels, and that leads to regular assessment of student progress toward achievement of the outcomes. The team further recommends that, in order to meet the Standards, the College develop student learning outcomes and assessment that is ongoing, systematic, and used for continuous quality improvement, where student learning improvement in all disciplines is a visible priority in all practices and structures across the College. The team further recommends that training be provided for all personnel in the development and assessment of learning outcomes at the course, program, institution and service levels. (Standards I.B.2, II.A.3; ER 11)

Findings and Evidence: Napa Valley College has made significant improvements over the last 18 months to address concerns cited within Recommendation 1. The College has improved outcomes assessment through identifying learning outcomes for most courses, programs, degrees and certificates, and academic support services and assessing outcomes more regularly in each area. The College has also made progress in using assessment results through tools such as assessment plans and assessment results templates to improve the quality of dialogue, through dedicated opportunities, such as Flex Day and regular division meetings. In order to ensure that CLOs are listed correctly on course syllabi, the College has developed a review process and a Congruency Certification form. Napa Valley College has also created more professional development opportunities, both internal and external, surrounding assessment. And finally, the College has committed resources (e.g., 80% reassigned time for two Learning Outcomes Assessment Faculty Coordinators) and developed practices to ensure that all of these improvements are being institutionalized so that they may be sustained over time.

Most learning outcomes have been identified and assessed across the College. As of January 2017, 96% of courses, 97% of degree and certificate programs, and 100% of Academic Support Services had outcomes identified. The College now has a more formal process to document and track assessment and to calculate the proportion of courses engaged in ongoing assessment and has also established a 6-year assessment cycle to create better consistency in outcomes assessment reporting. As of February 2017, 87% of courses, 100% of degree and certificate programs, and 100% of Academic Support Services had outcomes assessed. The majority of courses that have not been assessed are courses that have not been offered in recent years. The Curriculum Committee is working on revising the process to archive or assess courses still in the catalog, but that have not been offered in the last 6 years.

Interviews with College personnel and evidence provided indicate assessment is being used for continuous quality improvement. Reports from TracDat specify that close to 50% of courses and programs have substantive action plans defined with content-driven plans to improve student learning. Various tools have also been provided to faculty and staff to document assessment plans and to capture dialogue about assessment findings and use of results (Assessment Plans and PLO Assessment Results Template). Examples of learning outcomes assessment results leading to curricular improvements and resource allocations were shared in interviews and in the evidence provided. Faculty also have had the opportunity to dialogue about assessment results

during the College's Flex Day (spring 2016) as well as during division meetings, where assessment is a regular agenda item.

The College has implemented a review process to ensure that CLOs listed on syllabi are the same as those recorded on official Course Outlines of Record. Each semester, division deans/chairs record the alignment between the Course Outline of Record and syllabi on a Congruency Certification form. Overall congruence is improving, and the Interim Vice President of Instruction is working to clarify expectations and timelines for submissions and content of syllabi; thus continued improvement is expected.

Increased opportunities for professional development have been offered since fall 2015 regarding outcomes assessment. The Learning Outcomes Assessment Faculty Coordinators held a series of workshops tailored to different constituent groups (e.g., faculty, division secretaries, etc.) and redesigned the Learning Outcomes Assessment website to provide a variety of assessment tools and resources for employees (e.g., rubric templates, instructional videos, etc.). Administrators and faculty also have attended external workshops on methods to improve assessment.

In order to institutionalize improvements to the use and practice of assessment, the College has committed resources and developed practices to ensure they can be sustained over time. Human resources have been devoted to supporting assessment in the form of increased reassigned time for two Learning Outcomes Assessment Faculty Coordinators as well as revised job descriptions for Program Coordinators to oversee assessment and discussion of results. The faculty coordinators have established "train the trainer" models for Program Coordinators to facilitate assessment completion and dialog at department levels. The coordinators have assisted in providing learning outcomes information to adjunct faculty through templates, videos, etc. and are overseeing assessment collection for programs that do not have dedicated Program Coordinators. Systematic reviews and evaluation of practices have been put into place to ensure the continued use and improvement of college processes related to assessment. In particular, the College worked with a Partnership Resource Team (provided through the Institutional Effectiveness Partnership Initiative) to create an Innovation and Effectiveness Plan that included a component devoted to SLO assessment.

Conclusion: The College has fully addressed this recommendation and meets the Standards and Eligibility Requirement.

Recommendation 5: In order to meet the Standards, the team recommends that performance evaluations are regularly and consistently conducted for all employee groups. The team further recommends that faculty, academic administrators, and others directly responsible for student learning have, as a component of their evaluation, consideration of how these employees use the results of learning outcomes assessment to improve teaching and learning. (Standards III.A.5, III.A.6)

Findings and Evidence: The College has addressed the timely completion of performance evaluations for administrative/confidential and classified employees. The College has also incorporated the use of outcomes assessments as part of the performance evaluation process for

administrative/confidential and classified employees. The College is currently in negotiations with the faculty union to strengthen the performance evaluation process to incorporate how part-time/adjunct faculty members use the results of learning outcomes assessment to improve teaching and learning.

All performance evaluations for administrative/confidential and classified employees for 2015 were completed. Ninety-nine percent of the performance evaluations for administrative/confidential and classified employees for 2016 were completed. The success of completing the past due performance evaluations was attributed to on-going communications with managers and individual support from the Office of Human Resources. To sustain timely completion of all performance evaluations, the Office of Human Resources created a template that includes the names of the employees to be evaluated and the due date. A tracking system was developed to assist each manager with the timely completion of performance evaluations. Each manager received a list of assigned employees to be evaluated each year.

The administrative/confidential group developed a process to incorporate learning outcomes assessment into the performance evaluation of all academic administrators. A statement of understanding was approved February 2017 with the intention of using the new process in spring 2017. This is a new evaluation element so no evidence has been gathered yet on how the results of these assessments might lead to the improvement of teaching and learning.

The Classified Association developed a process to incorporate learning outcomes assessment into the performance evaluation of select classified employees. This was based on the employee's position and responsibility related to student learning. Specific positions were identified such as Instructional and Lab Assistants. This is a new evaluation element so no evidence has been gathered yet on how the results of these assessments might lead to the improvement of teaching and learning.

Performance evaluations for full-time faculty members have been completed regularly and consistently. Performance evaluations for part-time faculty members are not as regular and consistent. However, these performance evaluations are now being tracked and this is leading to more regular and consistent evaluations.

Full-time faculty members have as a component of their performance evaluation consideration of how they use the results of learning outcomes assessment to improve teaching and learning. For part-time faculty members the College is working through its collective bargaining process to revise the performance evaluation process to include this component. There has been a delay in completing this revision because the College is also working through "re-employment" rights for part-time faculty that is required effective January 1, 2017 as a result of Assembly Bill 1690. The College is addressing both these matters and is committed to having both issues resolved by July 1, 2017.

Conclusion: The College has fully addressed the recommendation and meets the Standards.

Recommendation 9: In order to meet the Standards, the team recommends the College link institutional plans (i.e., Campus Master Plan, Educational Master Plan, 5-Year Facilities Plan, and other appropriate plans; e.g. staffing plan) with financial plans to ensure that financial plans are integrated with other institutional short- and long-range institutional plans. Further, the team recommends the College’s planning reflects a realistic assessment of financial resource availability and expenditure requirements. (Standards III.B.3, III.D.2, III.D.4, III.D.11, III.D.12)

Findings and Evidence: The College provided an updated Five-Year Construction Plan with no new construction, and the revised Three-Year Plan incorporated assumptions from that plan, thus linking an institutional plan to the financial plan.

Regarding enrollment, the College’s updated EMP described the College’s strategy to “generate sufficient enrollments to remain fiscally viable/sustainable.” However, as evidenced in the California Community Colleges 2016-17 First Principal Apportionment Exhibit C Report, the College is a “basic aid district.” This means its funding does not depend on State Apportionment, which is based on enrollment. Instead, the College primarily depends on local property tax revenues which does not depend on enrollment, but rather increases/decreases with local property taxes. Consequently, the College may no longer need to “generate sufficient enrollments to remain fiscally viable/stable” because the College is no longer funded based on its enrollment. The College has now projected flat enrollment through 2016-17 and the Three-year Plan reflects flat enrollment identified in enrollment projections, thus linking the enrollment institutional plan to the financial plan. The College provided additional evidence in the Three-Year Financial Plan of incorporating scheduled maintenance and the technology “refresh” program expenditures as a result of capital outlay expenditures.

The College provided evidence of an updated OPEB plan that increased allocations for 2015-16 and 2016-17, and those allocations are being placed into a reserve with the county, but not into an OPEB trust. The OPEB plan was incorporated into the Three-Year Plan. The College provided evidence that the Three-Year Plan accounts for the CalSTRS/CalPERS pension increase through 2018-19. Scheduled maintenance and technology refresh program expenditures as a result of capital outlay expenditures have been incorporated into long-range planning. The College does not have any grants that require expenditures to be institutionalized through 2018-19.

Conclusion: The College has fully addressed the recommendation and meets the Standards.