#### PEER REVIEW TEAM REPORT

Victor Valley College 18422 Bear Valley Rd. Victorville, CA 92395

This report represents the findings of the Peer Review Team that conducted a focused site visit to Victor Valley College on February 20-February 21, 2024. The Commission acted on the accredited status of the institution during its June 2024 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Michael Gutierrez Team Chair

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# Victor Valley College Peer Review Team Roster TEAM ISER REVIEW

Mr. Micheal Gutierrez, Team Chair Hartnell College Superintendent/President

Dr. Lennor M. Johnson, Vice Chair Imperial Valley College Superintendent/President

#### **ACADEMIC MEMBERS**

Mr. Patrick Bettencourt Modesto Junior College Dean of Instruction and Student Learning

Dr. Carl Polley Kapi'olani Community College Assistant Professor

Ms. Elizabeth Romero Clovis Community College Early Childhood Education Instructor/Academic Senate President

#### **ADMINISTRATIVE MEMBERS**

Dr. Rebecca Bocchicchio Sierra College Vice President of Instruction

Mr. Augustine Chavez San Joaquin Delta College Vice President of Administrative Services

Dr. Elizabeth Coria Cuesta College Assistant Superintendent/Vice-President, Student Success & Support Programs

Mrs. Herminia Honda Los Angeles County College of Nursing and Allied Health Dean, Institutional Effectiveness, Research and Planning

Dr. Teresa Ward

Butte College Interim Director, Special Programs

#### **ACCJC STAFF LIAISON**

Dr. Catherine Webb ACCJC Vice President

# Victor Valley College Peer Review Team Roster FOCUSED SITE VISIT

Mr. Michael Gutierrez, Team Chair Hartnell College Superintendent/President

Dr. Lennor M Johnson, Vice Chair Imperial Valley College Superintendent/President

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Mrs. Herminia Honda Los Angeles County College of Nursing and Allied Health Dean, Institutional Effectiveness, Research and Planning

Dr. Teresa Ward Butte College Interim Director, Special Programs

#### **ACCJC STAFF LIAISON**

Ms. Virginia "Ginni" May ACCJC Interim Vice President

# **Summary of Focused Site Visit**

INSTITUTION: Victor Valley College

DATES OF VISIT: February 20 - February 21, 2024

TEAM CHAIR: Mr. Michael Gutierrez

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

A six-member peer review team conducted a Focused Site Visit to Victor Valley College on February 20- 21, 2024 for the purpose of completing its Peer Review Team Report and determination of whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and U.S. Department of Education regulations.

The team chair and vice chair held a pre-Focused Site Visit meeting with the college CEO on January 17, 2024, to discuss updates since the Team ISER Review and to plan for the Focused Site Visit. During the Focused Site Visit, team members met with approximately 20 faculty, administrators, classified staff and students in formal meetings, group interviews and individual interviews. The team held one virtual open forum and one on site open forum, which were well attended, and provided the College community and others to share their thoughts with members of the Focused Site Visit team. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement. The team thanks the College staff for coordinating and hosting the Focused Site Visit meetings and interviews and ensuring a smooth and collegial process.

# Major Findings and Recommendations of the Peer Review Team Report

Commendations
None
Recommendations
Recommendations to Meet Standards: None
Recommendations to Improve Quality:
Recommendation 1: In order to increase effectiveness, the team recommends the College fully institutionalize their total cost of ownership plan. (III.B.4)

#### Introduction

Established in 1961 by and for the residents of the high desert, Victor Valley College has served as the region's primary provider of higher education for more than 60 years. Before the college had its permanent campus, the first classes were held at Victor Valley High School, the only feeder school in the area at the time. In 1964, local voters passed a \$2.5 million bond to fund construction of the first buildings on a portion of the former Kalin Ranch site, chosen because it was central to the three largest nearby communities of Victorville, Hesperia, and Apple Valley. With each new expansion since, the college has more closely matched its founders' vision of an institution that enriches the burgeoning community and helps students build a brighter future.

The team was impressed with how Victor Valley College has engaged and served the community both internally and externally with Outreach/One-Stop and Caring Campus. The pride of ownership was reflected by the campus community during the Virtual Forum, consistently referenced throughout the ISER, and the site visit.

The team was impressed with Victor Valley College for their work and achievements directly related to responsiveness to the Community. The College has a strong understanding of their demographics and the needs of the community the college serves. It is also a direct correlation with the expansion in enrollments, both credit and non-credit.

# **Eligibility Requirements**

#### 1. Authority

The team confirmed that Victor Valley College is authorized to operate as a postsecondary, degree-granting institution based on continuous accreditation by the Accrediting Commission for Community and Junior Colleges (ACCJC) of the Western Association of Schools and Colleges (WASC) ACCJC is a regional accrediting body recognized by the U.S. Department of Education and granted authority through the Higher Education Opportunity Act of 2008.

The College meets the Eligibility Requirement.

#### 2. Operational Status

The team confirmed that the College is operational and provided educational services to 14,992 students for the 2021-22 academic year. The majority of these students are pursuing goals that relate to attainment of a degree, certificate, or transfer.

The College meets the Eligibility Requirement.

#### 3. Degrees

The team confirmed that the majority of courses offered at Victor Valley College lead to a degree, certificate, or transfer. Victor Valley College offers 116 credit certificate programs, 8 noncredit certificates, 33 associate degree programs, and 25 associate degree programs for transfer. A majority of Victor Valley College students are enrolled in courses leading to transfer and/or a degree or certificate.

The College meets the Eligibility Requirement.

#### 4. Chief Executive Officer

The team confirmed that Dr. Daniel Walden serves full-time as the Superintendent/President of Victor Valley College. Dr. Walden was appointed by the Victor Valley Community Board of Trustees on January 2, 2019. The team also confirms that the superintendent/president does not serve as chair, nor is he a member of the governing board.

The College meets the Eligibility Requirement.

#### 5. Financial Accountability

Based on the 2021-2022 Annual Audit, the team confirmed that there were no financial statement findings or recommendations identified. No federal award findings, state award findings, or questioned costs were identified, and all prior year audit findings appear to have been corrected as no current findings were reported.

The College meets the Eligibility Requirement.

# **Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies**

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

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

#### **Evaluation Items:**

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

[Regulation citation: 602.23(b).]

#### Conclusion Check-Off (mark one):

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

**Narrative:** The team has confirmed that the Commission did not receive any relevant third-party comments. The team has verified that the College meets requirements for public notification of a peer review team visit and third-party comment.

# **Standards and Performance with Respect to Student Achievement**

	The institution has defined elements of student achievement performance across the
	institution and has identified the expected measure of performance within each

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

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

#### **Conclusion Check-Off (mark one):**

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

**Narrative:** The team has confirmed that the College analyzes its performance on institution-set standards and student achievement and takes appropriate measures in areas where its performance is not at the expected level. Per the 2023 ACCJC Annual Report, the institution uses institution-set standards to guide self-evaluation and institutional improvement.

# **Credits, Program Length, and Tuition**

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

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

### **Conclusion Check-Off (mark one):**

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

**Narrative:** The team has verified, through review of college handbooks and information published on its website, that the college meets requirements for credits, program length, and tuition. The college does not offer clock-hour courses.

# **Transfer Policies**

Х	Transfer policies are appropriately disclosed to students and to the public. (Standard II.A.10)
X	Policies contain information about the criteria the institution uses to accept credits for transfer, and any types of institutions or sources from which the institution will not accept credits. (Standard II.A.10)
Х	Transfer of credit policies identify a list of institutions with which it has established an articulation agreement.

v	Transfer of credit policies include written criteria used to evaluate and award credit for prior learning experience including, but not limited to, service in the armed
X	forces, paid or unpaid employment, or other demonstrated competency or learning.
Χ	The institution complies with the Commission Policy on Transfer of Credit.

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

# **Conclusion Check-Off (mark one):**

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

**Narrative:** The team has verified, through the review of the college catalog and website, that the college meets requirements for transfer policies.

# **Distance Education and Correspondence Education**

For D	stance Education:
Х	The institution demonstrates regular and substantive interaction between students and the instructor in at least two of the methods outlined in the Commission <i>Policy on Distance Education and Correspondence Education</i> .
X	The institution ensures, through the methods outlined in the Commission <i>Policy on Distance Education and Correspondence Education</i> , regular interaction between a student and an instructor or instructors prior to the student's completion of a course or competency.
X	The institution demonstrates comparable learning support services and student support services for distance education students. (Standards II.B.1, II.C.1)
x	The institution verifies that the student who registers in a distance education program is the same person who participates every time and completes the course or program and receives the academic credit.
For Co	orrespondence Education:
x	The institution demonstrates comparable learning support services and student support services for correspondence education students. (Standards II.B.1, II.C.1)
х	The institution verifies that the student who registers in a correspondence education

	program is the same person who participates every time and completes the course or program and receives the academic credit.
Overa	ılı:
x	The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings. (Standard III.C.1)
Χ	The institution demonstrates compliance with the Commission <i>Policy on Distance Education and Correspondence Education</i> .

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

#### **Conclusion Check-Off (mark one):**

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

**Narrative:** The team confirmed that the College verifies that the student who registers in a distance education or correspondence program is the same student who participates every time, and completes the course or program, and receives the academic credit. The Team sampled distance education courses, and the majority of courses met the substantiative interaction requirement. The College may want to explore ways to corroborate that requirement when publisher resources are used, and it is not as apparent in the LMS.

#### **Student Complaints**

X	The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.
X	The student complaint files for the previous seven years (since the last comprehensive review) are available; the files demonstrate accurate implementation of the complaint policies and procedures.
Х	The team analysis of the student complaint files identifies any issues that may be indicative of the institution's noncompliance with any Accreditation Standards.
Χ	The institution posts on its website the names of associations, agencies and

	governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities. (Standard I.C.1)
х	The institution demonstrates compliance with the Commission <i>Policy on Representation of Accredited Status</i> and the <i>Policy on Student and Public Complaints Against Institutions</i> .

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

# **Conclusion Check-Off (mark one):**

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

**Narrative:** The team has verified through review of documentation and an interview with College leadership that the college meets requirements for student complaints.

# <u>Institutional Disclosure and Advertising and Recruitment Materials</u>

#### **Evaluation Items:**

X	The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies. (Standard I.C.2)
X	The institution complies with the Commission <i>Policy on Institutional Advertising,</i> Student Recruitment, and Policy on Representation of Accredited Status.
Х	The institution provides required information concerning its accredited status. (Standard I.C.12)

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

# **Conclusion Check-Off (mark one):**

Х	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution

does not meet the Commission's requirements.

**Narrative:** The team has verified, through a review of College documents and an ACCJC midterm report, that the college meets requirements for institutional disclosure and advertising and recruitment materials.

# **Title IV Compliance**

#### **Evaluation Items:**

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

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

#### **Conclusion Check-Off:**

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

**Narrative:** The team has verified that the college meets requirements for Title IV compliance.

#### Standard I

#### Mission, Academic Quality and Institutional Effectiveness

#### I.A. Mission

#### **General Observations:**

The College demonstrates its commitment to its students through its mission, which articulates availability of educational opportunities based on identified student and community needs. Through its ongoing Program Review, Allocations, and Institutional Strategies for Excellence (PRAISE), the college aligns its programs, services and resources toward its mission and the communities it serves. The mission is reviewed and updated as needed, approved by the governing board, and communicated widely.

#### **Findings and Evidence:**

The College's mission states, "In partnership with the community, the College is dedicated to providing opportunities for student learning and success through academic advancement, workforce development, and personal growth." The mission supports the intended student population in meeting the community needs. The college demonstrates its commitment to student learning and achievement through its values statements. (I.A.1)

The College uses institutional data to determine effectiveness in achieving its mission. The college guides continuous improvement through its PRAISE process. The College aligns its programs and services with its mission through its annual program review process using noninstructional program level outcomes and student achievement data. Governance committees such as the finance, planning, and budget committee, (FBPC); academic senate; and institutional effectiveness committee (IEC) use institutional data to evaluate whether students' educational needs are being met. Allocations stay focused through the application of a rubric based on the key priority areas of the Educational Master Plan (EMP) strategic framework. (I.A.2)

By utilizing the EMP, the College aligns program needs to support student success and achievement and ensure connection of the requests to the College's mission. (I.A.3)

The mission statement of the College is published and available through the college website, educational master plan, and college catalog. The College governing board in collaboration with key constituent groups reviews the college mission every five years. The College mission was last reviewed by the governing board in 2019. (1.A.4)

#### Conclusions:

The College meets the Standard.

#### I.B. Assuring Academic Quality and Institutional Effectiveness

#### **General Observations:**

The College consistently demonstrates its efforts to assure academic quality and institutional effectiveness through its disaggregation and analysis of data and dialog surrounding data. The Educational Master Plan, institutional handbooks, Strategic Enrollment Management plan, and board policies all value the institution's use of data. Programs which offer a degree or certificate also devise an assessment schedule for assessing program learning outcomes (PLOs). In mapping student learning outcomes (SLOs) to PLOs, departments can see if they are meeting their predesignated metrics for improving student learning. Service area outcomes are assessed annually so data can be used for continual improvement and be in alignment with the college's program review process. Victor Valley's college council reviews administrative procedures and the governing board cyclically reviews and updates board policies. The college updates its progress on the education master plan monthly.

#### **Findings and Evidence:**

The College demonstrates sustained, substantive, and collegial dialog among and between campus committees consisting of representatives from all constituencies. Further, dialog is conducted at all levels from associated students through the governing board. The practice of sustained, substantive, and collegial dialog is supported by the college's Educational Master Plan where it is stated "Include educational partners in dialogues about effective teaching and learning including embedding equitable activities and practices into classroom pedagogy" and "Implement[ing] inclusive dialogue, robust data-driven analysis for quality decision making, and commitment to quality outcomes drive courageous conversations." Sources of dialog are demonstrated in Philosophy/Religious Studies and Admissions and Records' program reviews and in the college's three equity and diversity committees that meet regularly and report to and update the College Council monthly. Accountability is assured by the involvement of the College Council and by the Finance, Budget, and Planning Committee where resource requests are reviewed. (I.B.1)

The College utilizes a comprehensive plan for defining and assessing learning outcomes for all instructional programs and service areas. With the assistance of a staff member, a faculty facilitator, and a governance committee charged with overseeing learning outcomes and assessments, six-year calendars that call for assessment of each learning outcome twice in three years or four times in six years are maintained. After learning outcomes are assessed,

instructional outcomes are evaluated, and planning is conducted at least one semester following assessment. Faculty are responsible for facilitating discussions. Service area outcomes are created by operationalizing each service area's mission statement. Service-area assessments are conducted in spring terms, so that dialog, evaluation, and planning can be conducted in fall terms. By operationalizing the mission statements to determine learning outcomes, there is always a guaranteed connection between the mission and assessment of each service area. (1.B.2, ER11)

The College has a process for establishing institution-set standards that includes a proposal by the academic senate executive board with counsel from the office of institutional research and the vice president of instruction with final confirmation made by the academic senate. Floor standards are determined based on rolling two-, three-, and five-year averages of performance outcomes. Stretch goals are determined based on a combination of historical data, the college mission, and Vision for Success goals. Standards are published on the college's website and embedded within student success dashboards. (I.B.3, ER11)

Through assessment and program review processes and procedures, data is gathered and analyzed to better understand student success challenges and to inform improvement strategies. Advisory boards align program offerings and transfer pathways to meet industry needs. Students are surveyed to better understand their support needs with online learning. Data is broadly available through the California Community College's Data Mart. Institutional planning handbooks, program reviews, and board policies and administrative procedures all speak to the organization of institutional processes to support student learning and achievement. (I.B.4)

The College assesses the accomplishment of its mission and evaluates student achievement and learning outcomes through its comprehensive and annual program review processes, which are outlined in their program review committee handbook. Program review is integral to the College's culture of dialog, planning processes, and assessment of student learning and achievement. Comprehensive program review, conducted over a four-year cycle, includes program-level data aligned to the College's mission, changes in program quality, effectiveness, viability, and performance on past goals. Also included in the program review template is a review of data via a data dashboard, Nuventive. The program review data, both qualitative and quantitative, is disaggregated by program type and mode of delivery. (1.B.5)

The College demonstrates appropriate disaggregation and analysis of data. Dashboards and data reports prepared in preparation for program review provide members of the college with disaggregated data in response to student learning and success metrics. Data is according to race/ethnicity, gender, first-generation status, veteran status, and low-income status. Program Review is the primary site of programmatic data analysis, with attention to procedures that document the program review process, analysis of past goals and objectives, analysis of student learning and student achievement data, and the process of disaggregation of data by program

type and mode of delivery. Primary sources of evidence are the Foreign Languages, History, Nursing, Philosophy- Religious Studies, Real Estate Escrow, and Sociology program reviews. (I.B.6)

Through detailed program review and assessment processes, the college evaluates its policies and practices across all areas of the institution. Program review helps inform the college's strategic plans, facilities master plan, EEO plan, technology plan, strategic enrollment management plan, student equity plan, associated student body plan, and more. Systematic reviews are completed in accordance with board policies and the work of College council and academic senate. (I.B.7)

The College has systems in place for program review and for providing feedback on the program review procedure itself. Discussion of outcomes data is managed through the College's governance bodies with primary involvement by academic senate. A yearly report of outcomes for instructional units and service area is prepared by institutional research. (I.B.8)

Program review along with the educational master plan (EMP) and strategic enrollment plan (SEM) accomplish broad-based evaluation and planning. The EMP reinforces strategic components of three district goals. Several interconnected, mutually reinforcing documents detail and elaborate upon the EMP. The SEM outlines broad strategic priorities and establishes evidence of meeting district goals, which are an integral part of the college's planning process. Furthermore, the SEM was developed also to align with three district goals and with Vision for Success goals. The college employs a robust system for evaluation and planning addressing the short, medium, and long-term needs of the college. (1.B.9, ER19)

#### Conclusions:

The College meets the Standard

#### I.C. Institutional Integrity

#### **General Observations:**

The College provides accurate and timely information to the public and its students through a variety of print and electronic sources regarding awards, total cost of education, and its commitment to education and learning. The college reviews its policies, procedures and publications on academic freedom, honesty, responsibility, and integrity while complying with accreditation standards and external accrediting agencies.

#### **Findings and Evidence:**

Through the College's planning and evaluation processes, the College assures clarity, accuracy, and integrity of learning outcomes, programs, and services information provided to students, prospective students, and persons or organizations related to the mission statement. The office of institutional research (IR) compiles data at the student, faculty, program, and institutional levels and presents data through the dashboard and reports supporting program review. Educational programs and courses including learning outcomes are approved through the faculty led curriculum committee and by the governing board. This information is posted on the college website which is maintained by a distribution of personnel who keep it current on a regular basis. The content is updated as needed to ensure accuracy. The college posts the accreditation information on the college homepage. (I.C.1, ER 20)

The College catalog is available for students and prospective students both in print and online. The catalog is on the College's homepage. The catalog includes all accurate and current information on the facts, requirements, policies, and procedures listed in the required components for accreditation. The College catalog committee meets once per month during the academic year to ensure the accuracy of the content. The catalog is published once per academic year, and there are two addendums to provide updates. (1.C.2, ER 20)

An annual report is developed by the student learning outcomes assessment committee (SLOAC) which summarizes assessment of student learning outcomes. (I.C.14-02) The College communicates to the public how well the college is doing on student enrollment and equity. (I.C.3, ER 19)

In the online catalog and webpage, the College outlines the degrees, purpose, content, course, and admission requirements and expected learning outcomes. (1.C.4)

The College's governing board, participatory governance bodies, and operational units review its institutional policies, procedures, and publications. The college catalog is reviewed and updated annually to ensure accuracy of information. In addition, two addendums are published annually to provide updated information. (1.C.5)

Through the College website under "Cost of Attendance/Budget" and in the "Financing Your Education" section on the catalog, the College accurately informs current and prospective students regarding total cost of education including tuition, fees, textbooks, and other instructional materials and required expenses. (1.C.6)

The College assures institutional and academic integrity by utilizing and publishing governing board policy (BP) 4030 on academic freedom. The administrative policy (AP) 3270 clearly indicates VVC's commitment to free pursuit and dissemination of knowledge and support that intellectual freedom exists for all constituents. (1.C.7, ER 13)

AP 3050 outlines the Institutional Code of Ethics all District employees must adhere to. It also addresses the consequences of the violation of the institutional code of ethics.

The College's AP 5500, articulated in the student handbook, catalog and every syllabus, addresses student behavior, academic honesty, and consequences of honesty. Furthermore, BP 2715 applies to the board's code of ethics. (1.C.8)

AP 4030 and BP 4030 ensure that faculty maintain academic freedom within the law of inquiry, teaching and research, and the pursuit of knowledge. Furthermore, faculty distinguish between personal conviction and professionally accepted views on a discipline and present the data objectively. (1.C.9)

The College's institutional code of ethics, AP 3050, outlines the expected behavior of the college's employees. It also describes the College's responsibility when these standards are violated. Faculty complete the code of ethics training through the Canvas learning management system. Board policy 5500 outlines expected student behaviors while on campus and the processes by which such behaviors are addressed. Furthermore, this information is available on the college catalog and disseminated to the students during online orientation. (1.C.10)

The College does not operate in foreign locations (I.C.11).

The College complies with Eligibility Requirements, Accreditation Standards, Commission Policies, guidelines, and requirements for public disclosure. The executive vice president of instruction, innovation and success serves as the college Accreditation Officer (ALO) and is responsible for oversight of the college accreditation and compliance process. The College submits the annual and fiscal report. The college-maintained progress as noted in the 2021 Midterm report. Furthermore, it recently submitted a substantive change request for correspondence education and received approval before the program's launch. All the reports as well as ACCJC annual reports are available on the webpage. The statement of accreditation and accreditation for the paramedic program, respiratory therapy program, and nursing program are noted on the accreditation homepage. (1.C.12, ER 21)

The College demonstrates honesty and integrity with external agencies including ACCJC, California Board of Registered Nursing, paramedic, and respiratory therapy accrediting bodies, and the public. The college has a statement of accreditation on the webpage, notifying students and the public of ongoing accreditation status. (I.C.13, ER 21)

The College is a non-profit, state funded teaching organization and does not generate financial returns or contributions for inventors or external interests. The college ensures commitment to high quality education through its learning assessments and integrated planning processes. (I.C.14)

#### Conclusions:

The College meets the Standard.

#### Standard II

## **Student Learning Programs and Support Services**

#### **II.A.** Instructional Programs

#### **General Observations:**

The College offers instructional programs aligned with its mission and conducted at levels of quality and rigor appropriate for higher education. Programs are regularly reviewed for quality and currency through program review, curriculum development and review processes, and student learning outcomes assessment with appropriate faculty engagement. The results of this review are used to improve student outcomes across instructional programs. The College has a clearly defined general education requirement that is incorporated into all degrees, and all courses and programs have defined learning outcomes.

#### **Findings and Evidence:**

The College ensures that all instructional programs are consistent with the institution's mission, are appropriate to higher education, and culminate in student attainment of identified student learning outcomes and achievement of degrees, certificates, employment, or transfer to other higher education programs. All programs have identified student learning outcomes that align with the College's mission, and those outcomes result in the achievement of degrees, certificates, transfer, or employment.

The College has a clear and rigorous curriculum development process for both courses and instructional programs that follows the Program Course Approval Handbook (PCAH) and includes input from stakeholders at all levels. General Education requirements must facilitate student attainment of knowledge and skills in one of five well-defined categories that align with the intersegmental general education transfer curriculum (IGETC) and California State University (CSU) general education patterns. The correspondence program for justice-involved students also prepares students for transfer under IGETC and CSU general education breadth certificates.

The College has floor and stretch institutionally set standards for student achievement. These standards are established by the Academic Senate and reviewed yearly. Programs are evaluated for currency and performance on achievement and student learning outcomes on a four-year Program Review cycle. (II.A.1; ER 9; ER 11)

The College has well documented processes for curriculum development and review, SLO assessment, and program review. The curriculum process ensures that courses meet standards for content; the Student Learning Outcomes and Assessment Committee provides processes for assessing and tracking SLOs and provides guidance and training for faculty as they engage in

assessment; and the Program Review Committee ensures that instructional programs engage in the four-year program review cycle. The completed program reviews provided as evidence include SLO assessment data and reflect engagement with student achievement data used for continual program improvement. (II.A.2)

The College has clear processes for identifying and assessing learning outcomes for programs, certificates, and degrees. Program-level outcomes, developed for academic disciplines offering a degree or certificate, are available in the catalog. As described in the curriculum development process and confirmed through CurriQunet, all course outlines of record include student learning outcomes. Syllabi are collected and checked to ensure they include learning outcomes from the course outline of record.

The College has a 6-year cycle for SLO assessment. The Assessment Handbook notes that faculty are responsible for closing the loop on SLO and PLO assessment, and the Course Assessment Column Reports provided as evidence show robust SLO assessment and analysis of the results to improve student learning. (II.A.3)

The College offers a variety of pre-collegiate level curriculum designed to prepare students to pass a California-approved high school equivalency exam or for college-level work in the Associate Degree. An examination of the course descriptions shows that the content of the courses directly supports students in attaining the knowledge and skills necessary for success in college-level curriculum. The courses are clearly indicated as not applicable to the associate degree, and their student learning outcomes are regularly assessed to ensure effectiveness. (II.A.4)

The College has policies and procedures in place to ensure that degrees and programs follow practices common to American higher education. Board policy, the curriculum development and review cycle, and the program review process are all aligned to evaluate and ensure quality, rigor, and synthesis of learning in all programs. All associate degrees require a minimum of 60 degree-applicable units. The College does not offer baccalaureate degrees. (II.A.5; ER 12)

The College has processes to ensure that it meets its set standards for course completion and degree, certificate, and transfer outcomes. Programs have semester-by-semester maps that show how students can complete in four semesters or less. The College evaluates its performance against standards set in the strategic enrollment plan. (II.A.6; ER 9)

The College offers classes in a variety of modalities (on-ground, online, hybrid, short-term) to meet student needs. On-ground classes are offered at various times throughout the day to provide as many options as possible. Students have access to support services including tutoring, the writing center, the math support center, the ESL lab, counseling, and the ACCESS Center during the week and NetTutor 24/7. Justice-involved (JIE) students must be served within the restrictions of the correctional facility, so most support for JIE students is offered through written questions. Some in-person support is offered by a staff member who is approved to enter the facility. (II.A.7)

The College does not offer department-wide course or program examinations. When industry accreditation or licensure is required, standardized tests are proctored and monitored by appropriate third parties. Credit for prior learning is awarded through approved alternative methods described in administrative procedure. When credit for prior learning is awarded through examination, responsibility for reducing test bias and enhancing reliability rests with the faculty member administering the exam. (II.A.8)

The College has policies and procedures in place to ensure that credit for courses, degrees, and certificates are based on the attainment of SLOs. All courses and programs have SLOs that are regularly assessed and SLO assessments are a factor in the awarding of course credit. The College has policies and procedures in place to ensure units of credit for courses and degrees are awarded according to higher education norms, California education code, UC/CSU standards, and the Program and Course Approval Handbook. The College does not offer courses based on clock hours. (II.A.9; ER 10)

The College has clear policies on transfer of credit, both into the College and from the College to other institutions, clearly described on its website and in the catalog. The College seeks out and maintains articulation agreements with appropriate institutions and makes this information readily available on the website. The College is in the process of developing cooperation agreements with four-year institutions to support JIE students in completing bachelor's degrees. (II.A.10; ER 10)

The College has six institutional learning outcomes (ILOs) that describe expected student outcomes in communication; computation; creative, critical, and analytical thinking; social and personal responsibility, information competency, and health and human flourishing. Each program that results in a degree or certificate has developed program learning outcomes (PLOs); course-level student learning outcomes are mapped to these PLOs. Courses that are not part of an approved program are mapped directly to the ILOs. PLOs and ILOs are assessed on a six-year cycle. (II.A.11)

The College has a clearly articulated philosophy of general education that is stated in board policy and the catalog and addresses the required outcomes. All degree programs at the College include a general education component that satisfies these requirements through the local GE pattern, the CSU GE Breadth pattern, or IGETC, according to student need. Faculty recommend placement of courses into appropriate local, CSU, or IGETC general education categories and the articulation officer confirms these placements. (II.A.12, ER 12)

All degrees offered by the college require at least 18 units of study within a single discipline or set of disciplines. Regular curriculum review ensures that courses have appropriate SLOs, which are mapped to PLOs. The assessment and accreditation coordinator is responsible for ensuring that mapping of SLOs to PLOs is current. (II.A.13)

The College participates in four regional consortia on workforce development that include partnerships with regional community colleges (the Inland Empire Desert Regional Consortium); K-12 school districts (Mountain Desert Career Pathways); industry, government, education, and

community members (Mount Desert Economic Partnership); and adult education (Victor Valley Adult Regional Consortium). Active participation in these groups ensures the College is aware of and responsive to current and developing regional workforce trends.

Career and Technical Education (CTE) degrees and certificates are developed through the same processes as for all programs at the college, with the additional input from program advisory committees and the consortia listed above. CTE programs must also provide compelling market data when developing new programs. All CTE programs are designed to prepare students for employment and industry certifications, as demonstrated through various indicators including licensure pass rates, advisory board input, and employment surveys and analysis. As with all programs, CTE programs participate in curriculum review, program review, and SLO assessment. CTE programs also convene advisory boards that make recommendations on new and existing programs. A commercial driver's license certificate and forklift operator program have both been developed recently in response to local labor market indicators and industry recommendation and several other new programs are under development.

As shown in its 2023 ACCJC Annual Report, the College meets its institution-set standards for licensure examination pass rates and in many cases reaches its stretch goals as well. It also meets its institution-set standards for job placement rates. Data in the California Community Colleges Chancellor' Office Management Information System (CCCCO MIS) shows that the College meets most negotiated levels in the Perkins core indicators. (II.A.14)

The College has an established administrative procedure for discontinuing or making significant changes to a program. This process includes input from all relevant stakeholders and considers a broad spectrum of factors, including impact on students, enrollments, program effectiveness, and labor market indicators. When a program is discontinued, the College has a teach-out policy that maintains catalog rights for impacted students as long as courses are available and provides students with counseling so that the degree or certificate can be awarded before the program is discontinued with minimum disruption. A list of programs discontinued within the past six years is maintained in the catalog. (II.A.15)

As described in detail elsewhere in this standard, the College has robust evaluation processes for all instructional programs, including curriculum processes, program review, and learning outcome assessment. These processes are used to improve programs and enhance learning outcomes and achievement for students. (II.A.16)

#### Conclusions:

The College meets the Standard.

#### **II.B. Library and Learning Support Services**

#### General Observations:

Relying on the expertise of faculty and results of student feedback, the library and learning support services at the College are robust and adequately funded to support students in all instructional modalities. Library faculty and staff update available material consistently for currency to meet the needs of the student population. Formal agreements are in place to ensure the resources are utilized for their intended purpose.

#### Findings and Evidence

The College supports student learning and achievement by providing library and learning support services that are sufficient in quantity, currency, depth, and variety to support all students, including off-site, distance, and correspondence education students. The library is a welcoming, student-centered learning environment and features a unique art collection. In a Fall 2022 survey, more than 80% of students who responded agreed that they receive timely and attentive service when they use the library, and the same percentage agreed that the library meets their needs in providing an effective learning environment. Library collections include print and eBooks, course reserve textbooks, periodicals, newspapers, scholarly journals, and streaming media databases. Currency is maintained with annual purchases of print and eBooks, and periodical, newspaper, scholarly, peer-reviewed journal, and streaming media database subscriptions. The 2021-22 Circulation Usage Report indicates overall circulation is increasing following the Covid-19 closure and that there has been an increase in holdings and usage of electronic materials. Evidence of library collections, facilities, services, and instruction is provided in data reports focused on library materials, number of items added, expenditures by format type, visitors, instruction, and reference statistics. (II.B.1)

Learning support services include a centralized tutoring program that offers online and inperson tutoring and academic support in six centers, including a writing center, communication center and ESL lab, achievement center, technology center lab, math success center, and tutoring and academic support center. The College partnered with NetTutor to provide online tutoring 365 days a year, 24 hours a day tutoring support in 55 subjects. Justice-involved correspondence education works with the tutoring center to address written student academic support requests. Additionally, the Federal Bureau of Prisons has approved the college request for training and background clearance for a member of the justice-involved education office to provide inside-facility tutoring to enrolled VVC students. (II.B.1)

The library facility offers students a range of educational technology to support academic success, including computers, Wi-Fi, laptops, print kiosks, whiteboards, a book scanner and copier, and study rooms equipped with collaborative learning technology. The College Library Collection Development Policy provides guidelines for developing and maintaining library materials, defines the library's mission, and outlines the criteria for acquisition. According to the policy, faculty regularly review the collection and make recommendations for new library resources through the Curriculum Committee. Faculty librarians are responsible for the development and maintenance of the library's collection, and all faculty are encouraged to review holdings and recommend materials to support the college's course offerings. (II.B.2)

The library completes an annual program review (PRAISE) which incorporates survey feedback from students and faculty, and student learning and service area outcomes data. According to the Fall 2022 PRAISE report, the library expanded online resources by adding the Gale All Access subscription, which offers additional academic resources. The library has a goal of offering and developing library instruction in a variety of formats, including online, on-campus, credit, and non-credit to help students develop essential research, critical thinking, and digital literacy skills. (II.B.3)

The library conducts annual student and faculty surveys to gather feedback, which is analyzed to identify gaps in service. The library evaluates student learning outcomes (SLOs) for its instructional program through the information competency online tutorial completed by students in all English 101 classes. Qualitative questions at the end of the tutorial ask students to rate how useful the tutorial will be in helping them to complete future research projects and what areas of research they need more help with after completing the assignment. The 2021 Library Service Area Outcomes Assessment Report summarized student survey results, indicated that they had been reviewed, and outlined plans for using the results. (II.B.3)

The library collaborates with the Community College Library Consortium for contract negotiation and management for subscriptions to online databases. The College benefits from statewide access to databases funded by the California College League of California (CountryWatch) and the California Community Colleges Chancellor's Office (EBSCO). The college benefits from statewide funding for the LSP and LibKey, which ensure equitable library services throughout the community college system. Formal agreements exist, and evidence focused on library database usage shows the number of monthly searches on each database platform. Faculty librarians are responsible for regularly evaluating services to ensure that they are effective, used for their intended purpose, and are easily accessible. (II.B.4)

#### **Conclusions:**

The College meets the Standard.

# **II.C. Student Support Services**

#### General Observations:

The College offers student support services aligned with its mission. The programs are conducted at levels of quality and rigor appropriate for higher education. The College assesses its educational quality through methods accepted in higher education, makes the results of its assessments available to the public, and uses the results to improve educational quality and institutional effectiveness.

#### Findings and Evidence:

All student services units engage in comprehensive and annual program review and student learning outcomes and/or service unit outcomes regardless of location or means of delivery, including distance education. The College has a process for student services assessments and follows its annual program review. Annual program reviews are part of a four-year cycle. The four-year cycle allows comprehensive planning for short-term and long-term goals. The annual program review process connects to the college's Educational Master Plan. (II.C.1)

The College offers various student support services programs to support student populations at risk. All student support services programs are subject to an annual program review process in which service area outcomes (SAOs) and student learning outcomes (SLOs) are measured. Annual program reviews are part of a larger four-year cycle to allow comprehensive planning for short-term and long-term goals. In addition to systematic program review, the college's research department provides learning support programs with tools to monitor and track the retention, completion, and persistence of students and special interest populations. Student support services have service area/service outcomes that are connected to the college's educational master plan and use data and evaluation for continuous improvement. (II.C.2)

The College provides appropriate, comprehensive, and reliable services regardless of service location or delivery method. These services include in-person and virtual access to all student support services, including personal support centers. Delivery modes include websites, Canvas learning management system, and virtual conferencing. The college offers all these services during a variety of day and evening hours. (II.C.3)

Aligned with its mission, administrative procedures and California Athletics governing bodies, the College provides an array of leadership, cultural, social, and athletic programs to provide opportunities for a broad educational experience for its students. (II.C.4)

The College provides a variety of counseling services, both in person and virtually, to support the development and success of all students. Counselors remain current in their fields and connected to intersegmental partners to impart to students accurate, timely, and useful information related to their program of study. The college provides students with information about academic and degree requirements and transfer policies in multiple locations and formats using tools to help them track their progress. (II.C.5)

The College adheres to admission policies aligned with its mission to specify the qualifications of students appropriate to each program. The college defines and advises students on clear pathways to complete degrees, certificates, and transfer goals. Counseling programs are available to support and encourage academic, social, personal, and career development and success for all students. (II.C.6)

The College's admissions and records department participates in the campus' noninstructional program review process to evaluate its effectiveness. In addition, the College uses the CCCO approved Multiple Measures Assessment Project (MMAP) placement criteria to maximize the probability students enter and complete transfer level English and math coursework within the first year. The College received an award for Excellence in Placement and overall success improvement rates in English and Math within the first year. (II.C.7)

The College follows acceptable practices for maintaining student records permanently, securely, and confidentially. The College follows State and district regulations and publishes policies and procedures regarding the release of student records. (II.C.8)

#### **Conclusions:**

The College meets the Standard.

#### Standard III

#### Resources

#### III.A. Human Resources

#### **General Observations**

The College has well-documented and established processes to ensure faculty and staff have the verified qualifications and experience to be successful in their position. The College hired 13 full-time and 136 part-time faculty in the 22-23 year to accommodate the growing and diverse student population. Full-time and part-time faculty receive orientation and are regularly evaluated using processes that include evaluation components and timelines that align with the California Education Code. The college assesses its hiring practices by actively recruiting and hiring people from diverse backgrounds. Professional development is available to all college personnel and evaluated by a participatory governance committee. Personnel records are confidential and secured systematically.

#### Findings and Evidence

The College assures the integrity and quality of its programs and services by employing administrators, faculty, and staff who are qualified by appropriate education, training, and experience to provide and support the college's programs and services. AP 7120 outlines recruitment and hiring processes for all employees other than the superintendent/ president and full-time faculty. The College is committed to providing full and fair opportunity for all qualified individuals to compete for hiring and promotion. BP 7120 states that academic employees shall possess the minimum qualifications prescribed for their positions by the Board of Governors of the California Community Colleges. (III.A.1)

Faculty, administrator, and classified professional job descriptions delineate representative job functions, minimum qualifications, and qualifications that represent knowledge, skills, and abilities relative to each position. A job announcement for a full-time instructor, for example, A sample faculty job announcement, for example, includes minimum qualifications, preferred qualifications, and links to resources that outline California Community College minimum and equivalency qualifications. Similarly, administrator and classified professional job descriptions align with the college's mission and goals and accurately reflect position duties, responsibilities, and authority. (III.A.1)

The College's AP 7120 describes the subject matter and requisite skills required of faculty. Faculty are required to meet minimum qualifications established by the California Community Colleges, and job postings for full-time faculty include appropriate degrees, professional

experience, discipline expertise, teaching skills, scholarly activities, and potential to contribute to the mission of the institution. A review of full-time faculty job descriptions showed they include development and review of curriculum and assessment of learning. (III.A.2)

The College Administrative Procedure 7120, as well as job announcements, and faculty, staff, and management application samples provided as evidence show that administrators and other employees responsible for educational programs and services possess necessary qualifications to perform duties required to sustain institutional effectiveness and academic quality. (III.A.3)

Applicants who apply for positions that have educational requirements at the College must provide written documentation that they have met educational requirements at an accredited institution. Statements on faculty job announcements state that all degrees must be from an accredited institution. Further, it is "the responsibility of the candidate to include U.S. evaluations of non-U.S. transcripts with their application." (III.A.4)

Although the evaluation process varies by employee group, all regular employees and part-time faculty have a written and documented process for evaluation designed through interdepartmental and negotiated processes. Full-time faculty evaluation documents are included in the written collective bargaining agreement pertaining to full-time faculty. Classified employee, management, and confidential employee evaluation documents clearly outline evaluation procedures for those groups. All evaluation processes seek to assess the effectiveness of personnel and encourage improvement. The college is committed to conducting evaluations using NEOGOV software that includes electronic forms, automated notifications, and completion reports. Screenshots of a test evaluation using NEOGOV indicated that the College is in the initial stages of implementing this software. The College reported that the software has been tested and used for a group of classified employees, and Human Resources is loading all employees and supervisors into the correct department/division. The College is committed to offering regularly scheduled training for all supervisors on how to conduct a performance review, including developing performance improvement plans. The team encourages the College to continue with its plan to implement NEOGOV employee evaluation software. (III.A.5)

Evidence shows that the College maintains a sufficient number of full-time and part-time faculty to assure the fulfillment of faculty responsibilities essential to the quality of educational programs and services and to achieve the institution's mission and purposes. One way the college ensures the appropriate number of faculty is through the annual program review. Justifications for hiring additional faculty are based on program and college need and are reviewed and approved by the faculty hiring prioritization committee (FHPC). The FHPC consists of 12 members who represent administration, full-time faculty, part-time faculty, library, and distance education faculty. The FHPC prioritizes the requested positions and formulates a recommendation to the college superintendent/president. (III.A.7)

The College employs part-time faculty and maintains employment practices that provide these faculty members with orientation, oversight, evaluation, and professional development. All newly hired part time faculty participate in an extensive onboarding process that covers college policies and procedures as they relate to their employment. The college integrates part time faculty into the life of the institution by encouraging participation in collegewide meetings, participatory governance meetings, all college day, collegewide budget forums, and collegewide "chats" with the superintendent/president. (III.A.8)

The College has used established processes to ensure it employs a sufficient number of staff with appropriate qualifications to support the effective educational, technological, physical, and administrative operations of the institution. The college is undergoing a staffing reevaluation and restructuring due to the results of a recent classification study for staff and management. This study has created both direct and indirect reevaluations of department campuswide staffing needs. Current job titles and descriptions are being reviewed to determine their relevance and to align with the growing needs of the college with respect to the college's mission and purpose. (III.A.9)

The College maintains a sufficient number of administrators with appropriate preparation and expertise to provide continuity and effective administrative leadership and services that support the institution's mission and purposes. All administrators are evaluated regularly and are offered professional development opportunities throughout their employment with the college. Evidence shows that this professional development might include participation in various leadership groups established by the superintendent/president. (III.A.10)

The College has established written personnel policies and procedures available for information and review. According to the ISER, these policies and procedures are fair and equitably and consistently administered through interdepartmental communication and training with administrators and association leaders as well as through regular training and review for human resources personnel. The college engages in collective bargaining, which helps to ensure open communication between the college and constituent groups and helps to take in multiple viewpoints when considering the equitable nature of policies and procedures. (III.A.11)

Board Policy 7100 describes the District's commitment to diversity. The policy concludes with this statement: "The Board is strongly committed to hiring and staff development process that support the goals of equal opportunity and diversity, equity, and inclusion, provide equal consideration for all qualified candidates, and create an anti-racist academic and employment environment." The college opened a multicultural center in spring 2023 – a space where all student, faculty, and staff identities intersect and are celebrated. The college's equal employment opportunity plan requires that employees who serve on selection committees receive training in the importance of a diverse workforce, bias awareness, and the elements of cultural competence. The diversity of applicants, as well as committee members, is assessed prior to closing of a recruitment and commencement of committee work. (III.A.12)

The College AP 3050 describes a code of professional ethics, principles, and guidelines for the conduct of all District employees. The consequences for violation are clearly outlined in the administrative procedure and include a thorough and fair process review by the District and, for unlawful acts, a possible fact-finding process. Any violation involving the superintendent president would be addressed by the Board of Trustees. (III.A.13)

The collegewide employee professional development committee (EPDC) includes faculty, classified professionals, classified managers, and administrators. The EPDC advises, supports, and assists with the identification of training opportunities that promote and sustain the professional growth and development of college employees. Opportunities include an all-College Inservice Day each semester, upward mobility programs for classified employees and managers, leadership sessions, as well as trainings provided by external vendors. Through the EPDC, the college systematically evaluates professional development programs and uses their results as the basis for improvement. (III.A.14)

Employee personnel records are maintained by the human resources office. All physical personnel records are stored in a secure area, and these records are kept in a separately keyed room within the

human resources department and then double-locked within fire-safe filing cabinets. Human resources personnel are the only employees issued keys to the file room. Electronic personnel records are secured by using restricted permissions limited to human resources staff. Employees wishing to review their personnel file can schedule an appointment with human resources personnel. Employees can review their personnel file with a human resources representative present. Human resources staff update the personnel log after an employee has viewed their personnel file. (III.A.15)

### **Conclusions:**

The College meets the Standard.

### **III.B. Physical Resources**

### **General Observations**

The College has adopted a range of measures to ensure that physical resources on campus are safe and sufficient for the services it provides. Maintenance activities are planned in a manner that prioritizes campus safety. The College has renovated classroom buildings to modernize its learning spaces and has detailed plans to build a sports stadium and educational event center using a bond measure passed by the local community.

### **Findings and Evidence:**

Size and number of classrooms and lab spaces are actively tracked and managed. The College has established a facilities master plan, most recently updated in 2015, which guides budgetary and prioritization planning for construction and maintenance. An emergency mass notification system has been implemented for the college, and the campus conducts education and training activities to help students, staff, faculty and administrators to be prepared for emergency situations that may involve evacuation. The college complies with statutory Clery Act reporting requirements. (III.B.1)

The College has adopted comprehensive plans for facilities maintenance and upgrades. Due to a trend of increasing enrollment, the college is actively engaged in a long-term plan to modernize and expand classroom and lab spaces to meet projected instructional needs. However, the supporting evidence provided by the College indicates that its facilities planning committee has 6 vacant seats out of 13 total seats, and that all faculty and student seats are vacant. (III.B.2)

The College has a detailed five-year capital outlay plan that contextualizes ways in which facilities construction and improvement works to support learning programs and services. The college recently renovated several classroom buildings and is currently constructing a sports stadium and educational event center. (III.B.3)

The College conducts annual reviews to update its five-year capital outlay plan, which works to implement strategies for facilities improvement identified in the college's 2015 facilities master plan. (III.B.4).

### **Conclusions:**

The College meets the Standard.

<u>Recommendation 1</u>: In order to increase effectiveness, the team recommends the College fully institutionalize their total cost of ownership plan. (III.B.4)

### **III.C. Technology Resources**

### **General Observations:**

The College has a detailed and comprehensive technology plan that guides its use and maintenance of technology resources on campus. The College maintains a high-quality infrastructure in both physical and human capital to adequately support the needs of staff and students, regardless of location or modality. The college was recognized by the Chief Information Systems Office Association for their work during the COVID-19 pandemic.

### Findings and Evidence:

The College has established a new Connect2Success center as a one-stop location for email and phone inquiries relating to learning support services. Campus technology infrastructure and equipment has been upgraded and refreshed, with bandwidth increases to 10 GB fiber for most buildings on campus. The College is currently implementing platforms for management of administrative processes and student services through cloud applications. (III.C.1)

The College has adopted a comprehensive technology master plan for 2021–2025 and has codified guidelines, policies, and procedures for handling technology work requests. (III.C.2)

The College has established processes to ensure proper management and operation of technology resources on campus including infrastructure, equipment, and software services. (III.C.3)

The instructional support services provided by the College to faculty, staff, and students span a variety of platforms and modalities including in person, hybrid, and online resources. The college conducts annual training on phishing attack identification for staff and faculty, and test emails are sent to personnel who undergo the training to determine whether additional training may be necessary. (III.C.4)

The College has established and publicized policies and procedures that guide the appropriate use of technology for teaching and learning, including codes of conduct. The College also has language specifically written regarding codes of conduct for students and faculty regarding online and correspondence classes. (III.C.5)

### Conclusions:

The College meets the Standard.

### **III.D. Financial Resources**

### **General Observations:**

The College effectively uses its financial resources to achieve its mission and to improve academic quality and institutional effectiveness. Financial resources are sufficient to support and sustain the College's learning programs and services, and its mission serves as the foundation for financial planning that supports institutional goals. Policies and procedures are in place to ensure sound practices and stability in budget development. Mechanisms are in place for the dissemination of timely financial information and multiple campus constituencies have opportunities to participate in planning and budget development. Institutional planning reflects a realistic assessment of financial resources, including operating funds, reserves, and

liabilities. Practices and mechanisms are in place to ensure financial integrity, accuracy, and oversight critical for stability in operations.

### Findings and Evidence:

The College has sufficient financial resources to sustain student learning and student services. Financial resources are sufficient to support and sustain student learning programs, services and improve institutional effectiveness. The distribution of resources supports the development, maintenance, allocation and reallocation, and enhancement of programs and services. The institution plans and manages its financial affairs with integrity and in a manner that ensures financial stability. (III.D.1)

The College's mission and goals are the foundation for financial planning, and financial planning is integrated with and supports all institutional planning. The institution has policies and procedures to ensure sound financial practices and financial stability. Appropriate financial information is disseminated throughout the institution in a timely manner. (III.D.2)

The College clearly defines and follows its guidelines and processes for financial planning and budget development, with all constituencies having appropriate opportunities to participate in the development of institutional plans and budgets. (III.D.3)

The College planning reflects a realistic assessment of financial resource availability, development of financial resources, partnerships, and expenditure requirements. (III.D.4)

The College ensures financial integrity and responsible use of its financial resources, and the internal control structure has appropriate control mechanisms and widely disseminates dependable and timely information for sound financial decision making. The institution regularly evaluates its financial management practices and uses the results to improve internal control systems. (III.D.5)

The College's financial documents, including the budget, have a high degree of credibility and accuracy, and reflect appropriate allocation and use of financial resources to support student learning programs and services. (III.D.6)

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

The College's financial and internal control systems are evaluated and assessed for validity and effectiveness, and the results of this assessment are used for improvement. (III.D.8)

The College has sufficient cash flow and reserves to maintain stability, support strategies for

appropriate risk management, and, when necessary, implements contingency plans to meet financial emergencies and unforeseen occurrences. (III.D.9)

The College practices effective oversight of finances, including management of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations or foundations, and institutional investments and assets. (III.D.10)

The College's level of financial resources provides a reasonable expectation of both short and long-term financial solvency. When making short-range financial plans, the college considers its long-range financial priorities to ensure financial stability. The institution clearly identifies, plans, and allocates resources for payment of liabilities and future obligations. (III.D.11)

The College's institution plans for and allocates appropriate resources for the payment of liabilities and future obligations, including Other Post-Employment Benefits (OPEB), compensated absences, and other employee related obligations. The actuarial plan to determine Other Post-Employment Benefits (OPEB) is current and prepared as required by appropriate accounting standards. (III.D.12)

On an annual basis, the College assesses and allocates resources for the repayment of any locally incurred debt instruments that can affect the financial condition of the institution. (III.D.13)

The College's financial resources, including short and long-term debt instruments (such as bonds and Certificates of Participation), auxiliary activities, fund-raising efforts, and grants, are used with integrity in a manner consistent with the intended purpose of the funding source. (III.D.14)

The College monitors and manages student loan default rates, revenue streams, and assets to ensure compliance with federal requirements, including Title IV of the Higher Education Act, and comes into compliance when the federal government identifies deficiencies. (III.D.15)

The College's contractual agreements with external entities are consistent with the mission and goals of the institution, governed by institutional policies, and contain appropriate provisions to maintain the integrity of the institution and the quality of its programs, services, and operations. (III.D.16)

### **Conclusions:**

The College meets the Standard.

### Standard IV

### **Leadership and Governance**

### **IV.A.** Decision-Making Roles & Processes

### **General Observations:**

The College provides a governance process that encourages innovation and continuous improvement. Roles and responsibility of various constituent groups are specified in policies, and procedures. These policies make provisions for faculty participation, staff, students, management, administrators and their role in planning, resource allocation, and curriculum decisions. The committee minutes and resulting decisions are documented and readily available on the BoardDocs platform. Furthermore, curriculum changes are available on the CurriQunet system. The College has recognized that the decision-making process is not clear to all its constituents. An improvement plan is in place to ensure all constituents understand their roles in governance and decision-making processes and with clear timelines. Furthermore, there is a need for the governance and decision-making process to be evaluated regularly to ensure its effectiveness and integrity. The College has created a Governance handbook which outlines these processes and is currently going through constituent review.

### Findings and Evidence:

In 2020, the College adopted an entrepreneurial mind set to provide service to students and to meet its mission. The college implemented a campus wide survey to examine its essential practices incorporated into the educational master plan (EMP) and to address areas needing attention. Five areas were below 50<sup>th</sup> percentile. Several meetings ensued to discuss these areas and the college sought the help of two consultants through the Institute for Evidence-Based Change to address these areas and to assist the College in its pursuit of excellence and entrepreneurial thinking. (IV.A.1)

The College defines the role of employee and student participation in its AP 1201 and BP 2510. The College council is the college-wide committee through which participatory governance is practiced. Students play a role in governance process as outlined in BP 2510. An off-campus location meeting is held every year in which the college management team attends to discuss associated student body (ASB) goals. During the academic year, the president/superintendent collaborates with ASB regarding meeting their annual goals. (IV.A.2)

Administrators, faculty, staff, and students actively participate in planning and resource allocation through the College council that reports directly to the Board of Trustees. The Academic Senate serves as the official voice for the College faculty. In addition, there is a participatory standing committee with representation from the management team, faculty,

classified staff and ASB council. The following are the list of the standing committees which reports directly to the College Council include DEI, environmental health safety, facilities, finance, budget and planning, IE, employee professional development, student equity and achievement and technology. (IV.A.3)

Faculty and academic administrators are involved in curriculum and student learning through PRAISE program review. The College's academic senate, staff, and students are active participants in the decision-making processes as outlined in BP 2510. The Curriculum Committee leads the continuing development and modification of the curriculum and curriculum modifications are documented on the CurriQunet system. (IV.A.4)

The college's governance processes, including roles and responsibilities, are outlined in AP 1201 and BP 2510 ensures that relevant perspectives from appropriate constituent groups are considered in the decision-making process. (IV.A.5)

The College ensures that processes for decision-making and resulting decisions as documented through committee meeting minutes are readily available to all employees through the BoardDocs platform. PRAISE results are posted on the website. Furthermore, resulting actions by committees are communicated and distributed to the campus community via email. (IV.A.6)

The College recognizes the need to regularly evaluate the college's governance and decision-making policies and procedures. In 2021, the institutional effectiveness committee was established by the college council to provide quality control on the governance and decision-making process and to evaluate participatory governance committee participation. At the college council meeting on March 16, 2022, discussion ensued regarding the need for the college to standardize reporting of participatory governance committees and the need for a central location to post documents for easy accessibility. Furthermore, a survey was sent out on July 7, 2022, to evaluate the effectiveness of the participatory governance committees. The institutional effectiveness committee has recognized the need for more participation on committees and the need to review the survey questions before its implementation for the following year. The college council has recognized the need to improve the evaluation process. The college's willingness to address these issues in a transparent manner is commendable. The board conducts self-evaluation as outlined in BP 2745. (IV.A.7)

### Conclusions:

The College meets the Standard.

### IV.B. Chief Executive Officer

### **General Observations:**

The College has demonstrated that it an effective chief executive officer leading the institution in administrating board policies, planning, organizing, budgeting, selecting and developing personnel, leading the accreditation process, and institutional assessment. The CEO has full

executive authority over the institution and delegates authority to administrators and others as appropriate to achieve the mission. (IV.B.1)

### Findings and Evidence:

In this evaluation, the Chief Executive Officer's (CEO) performance and contributions to various critical aspects of institutional leadership and management was assessed:

The CEO's executive leadership role over the campus is commendable. The CEO's involvement in leading the planning and development of the 2020-2025 educational master plan incorporating a comprehensive environmental scan, and providing strategic direction, underscores their dedication to the institution's long-term success. The collaborative approach and effective resource utilization reflect the CEO's commitment to maximizing both human and financial resources for the college's benefit. (IV.B.1)

The alignment of the administrative structure with the college's mission and the proactive job classification study to balance job descriptions with salaries demonstrate the CEO's commitment to a well-structured and responsive administrative setup. Regular meetings with Vice Presidents to delegate duties consistent with their roles further enhance the efficiency and adaptability of the administrative structure. (IV.B.2)

The CEO's guidance of the institutional planning, resource allocation, and evaluation processes through a participatory governance structure ensures alignment with the college's mission, goals, and student access and success. This approach enhances transparency, inclusivity, and the overall effectiveness of decision-making processes. (IV.B.3)

The CEO's leadership in the accreditation process is evident through the appointment of an Accreditation Liaison Officer and regular communication with the governing board and stakeholders. The delegation of this responsibility to the Executive Vice President of Instruction, Innovation, and Student Success along with quarterly reports, demonstrates a structured and accountable approach to accreditation compliance. (IV.B.4)

The CEO's role in assuring the implementation of regulations and board policies, along with consistent practices that align with the mission, policies, and procedures of the college, reflects a strong commitment to governance and compliance. The delegation of budget oversight to the Deputy Superintendent/Executive Vice President of Administrative Services, with a focus on effective control and compliance with applicable laws, enhances financial stability and transparency. (IV.B.5)

The CEO's active communication with community stakeholders, including presentations to various groups and organizations throughout the state, fosters positive relationships and reinforces the college's commitment to its broader community. Effective communication ensures that the college's mission and accomplishments are well understood and appreciated. (IV.B.6)

In summary, the CEO's leadership and commitment to the institution's mission, effective governance, transparency, and stakeholder engagement are evident in the performance and outcomes described above. These efforts reflect a dedication to institutional excellence and a strong foundation for accreditation standards.

### **Conclusions:**

The College meets the Standard.

## IV.C. Governing Board

### General Observations:

The College is governed by a five-member Board of Trustees who are elected by citizens of the district. They have authority over the policies and procedures to ensure the college fulfills its mission. They have delegated full authority and responsibility to the CEO to administer board policies and the governing board holds the CEO accountable for the operation. The governing board meets regularly and is informed on campus operations, legal matters, accreditation, financial interest, and student performance.

### Finding and Evidence

The governing board of the College has duty and responsibility for the polices to ensure academic quality, integrity, student learning and effectiveness, and the financial viability of the college. The Board holds regular meetings and special meetings to obtain valuable information to assist in the decision-making process and to establish goals and objectives for the board and the district. (IV.C.1)

The governing board acts as a collective entity as described in BP2330. In many cases, the votes are unanimous; however, on rare occasions, the votes are split, and the majority vote is accepted by the Board. (IV.C.2)

The Board has established policies for selecting a CEO (BP 2431) and polices to evaluate the CEO. The process for selecting a CEO is fair, open and complies with applicable regulations. In 2018, the board hired a search consultant to identify a new superintendent/president. The process for evaluating the CEO is outlined in BP 2435 and AP 2435. (IV.C.3)

As outlined in BP 2200, the board serves as an independent, policy making body that represents the public interest and advocates for the college's educational quality. The board maintains a high standard of ethical conduct in accordance with BP 2715 and BP 2710. (IV.C.4)

The board established polices that are consistent with the college's mission. The Board monitors the college's institutional performance and quality, is accountable for all legal matters and ensures the fiscal health and stability of the college. The board receives reports and updates regularly at board meetings to ensure the college is meeting its goals and objectives. The board

has also developed budget management and control systems to ensure the college maintains financial viability. (IV.C.5)

Approved policies and procedures are published on the college website. The College has several Board Polices that outline the board size, duties, composition, and elections procedures (IV.C.6).

According to BP 2410, the governing board regularly reviews, and updates its policies and bylaws to improve the effectiveness in achieving its mission. The board also subscribes to the Community College League of California Statewide Policy and Procedures services for legal guidance and updates. Through a participatory governance process college leadership review and make recommendations to be Board for approval and/or additional edits. (IV.C.7)

The governing board ensures the College is accomplishing its goal for student achievement by regularly reviewing key performance indicators and institutional plans for improving academic quality. The board receives regular updates on student success and institutional plans as summarized in the board meeting agenda, and board goals and objectives tracking reports. (IV.C.8)

As evidenced in BP 2740, the governing body is committed to ongoing professional development for trustee candidates, newly elected trustees, veteran trustees, and student trustees. At all levels, Trustees are provided training from information about the college, new trustee orientation, role on accreditation and training via CCLC. (IV.C.9)

The governing board regularly evaluates its practices and performance to identify its strengths and areas in which it may improve. BP 2745 outlines a committee of the board is appointed each April to determine the instrument or process to be used in their self-evaluation. (IV.C.10)

As outlined in in BP 2715 and BP 2710, the board upholds a cold of ethics and conflict of interest policies. They are also expected to complete a Statement of Economic Interests (Form 700) annually, which discloses any possible personal financial interest and familiar conflicts to secure and ensure academic and fiscal integrity of the college. (IV.C.11, ER 7))

The governing board has delegated full authority and responsibility to the CEO as described in BP 2200 and BP2430. The Board holds the CEO accountable by way of setting clear expectations, receiving regular reports on campus operations and performance and having annual performance evaluations of the CEO (IV.C.12)

The governing board has received ongoing training and information related to the accreditation standards, processes, and their roles and functions This is evidenced in BP 3200 which outlines the expectations of the CEO in informing the board on accreditation matters. This is also evidenced in the board established goals (IV.C.13)

### Conclusions:

The College meets this Standard.

### **IV.D. Multi-College Districts or Systems**

This section is not applicable as the College is not a part of a multi-College district.

## **Quality Focus Essay**

Victor Valley College has developed an action plan that focuses on addressing faculty training and improvement in online education, including ADA compliance. Like all colleges during the pandemic, the College had to pivot to all online education. The College rose to the challenge and moved classes to online. The majority of Instructors (68%) are certified through the Victor Valley College online Instructor certification training program.

The College found discrepancies in their distance education training and has created a project action plan which includes faculty professional development, increasing CVC/OEI exchange, POCR training and developing a POCR team. The project is clearly tied to the accreditation standards, the College mission, and in the Victor Valley College education master plan.

Overall, the team feels that Victor Valley College's QFE will have a positive impact on student achievement and improve student learning.

**Appendix A: Core Inquiries** 

# **CORE INQUIRIES**

Victor Valley College 18422 Bear Valley Rd. Victorville, CA 92395

The Core Inquiries are based upon the findings of the peer review team that conducted Team ISER Review on October 19, 2023.

Michael Gutierrez

# Team Chair

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# Victor Valley College

# Peer Review Team Roster

## **Team ISER Review**

October 19, 2023

Mr. Michael Gutierrez, Team Chair	Dr. Lennor Johnson, Vice Chair
Hartnell College	Imperial Valley College
Superintendent/President	Superintendent/President
ACADEMIC MEMBERS	
Mr. Patrick Bettencourt	Dr. Carl Polley
Modesto Junior College	Kapi'olani Community College
Dean of Instruction and Student Learning	Assistant Professor
Ms. Elizabeth Romero	
Clovis Community College	
Early Childhood Education	
Instructor/Academic Senate President	
ADMINISTRATIVE MEMBERS	
Dr. Rebecca Bocchicchio	Mr. Augustine Chavez
Sierra College	San Joaquin Delta College
Vice President of Instruction	Vice President of Administrative Services
Dr. Elizabeth Coria	Mrs. Herminia Honda

Cuesta College Assistant Superintendent/Vice President, Student Success and Support Programs	Los Angeles County College of Nursing and Allied Health Dean, Institutional Effectiveness, Research & Planning
Dr. Teresa Ward	
Butte College	
Interim Director, Special Programs	
ACCJC STAFF LIAISON	
Dr. Catherine Webb	
ACCJC Vice President	

## **Summary of Team ISER Review**

INSTITUTION: Victor Valley College

DATE OF TEAM ISER REVIEW: October 19, 2023

TEAM CHAIR: Mr. Michael Gutierrez

A 10-member member accreditation peer review team conducted Team ISER Review of Victor Valley College on October 19, 2023. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. The peer review team received the college's institutional self-evaluation report (ISER) and related evidence several weeks prior to the Team ISER Review. Team members found the ISER to be a comprehensive, well written, document detailing the processes used by the College to address Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the ISER was developed through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful ISER containing several self-identified action plans for institutional improvement. The College also prepared a Quality Focus Essay.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on August 10, 2023, and held a pre-review meeting with the college CEO on September 11, 2023. The entire peer review team received team training provided by staff from ACCJC on August 30, 2023. Prior to the Team ISER Review, team members completed their team assignments, identified areas for further clarification, and provided a list of requests for additional evidence to be considered during Team ISER Review.

During the Team ISER Review, team members spent the morning discussing their initial observations and their preliminary review of the written materials and evidence provided by the

College for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and identified standards the college meets, as well as developed Core Inquiries to be pursued during the Focused Site Visit, which will occur in Spring 2024.

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

## **Core Inquiries**

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

**Core Inquiry 1:** The team would like to confirm how total cost of ownership for facilities and equipment is integrated into procedures and practices for long-range facilities planning.

**Standards or Policies:** Standard III.B.4 on Physical Resources: "Long-range capital plans support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment."

### **Description:**

The team reviewed the Facilities Master Plan (III.B.4-02), Technology Plan (III.B.4-01), and Educational Master Plan (III.B-03), which together provide evidence for prioritization of institutional goals relating to physical resources. The team also reviewed the College's five-year capital outlay plan (III.B.3-03). However, the team is unclear about how long-range planning for physical resources is mapped to specific goals for institutional improvement. The team would like to better understand how long-range planning incorporates analysis of total cost of operation and ownership.

### **Topics of discussion during interviews:**

- a. How the College calculates projections of the total cost of ownership for facilities and equipment.
- b. How the College considers total cost of ownership for facilities and equipment as part of its long-term fiscal planning processes.

### **Request for Additional Information/Evidence:**

- a. Documentation of how the College calculates total cost of ownership.
- b. Documentation or descriptions of how total cost of ownership is integrated into decision-making processes for long-term planning and facilities management.

### **Request for Observations/Interviews:**

- a. Superintendent/President, Executive Vice President for Administrative Services, Director of Maintenance of Operations
- b. Finance Budget and Planning Committee (FBPC) members
- c. Facilities Committee members
- d. Staff and faculty involved in facilities planning processes

### **Core Inquiry 2:** Governance

The team acknowledged that the college had identified that the decision-making process is not entirely clear to the campus community. The team would like an update on what progress the college has made to improve their governance structure and decision-making processes since the creation of the ISER.

Standards or Policies: IV.A.3, IV.A.7

### **Description:**

The team had reviewed the evidence on the college's governance structure and decision-making processes but need clarification on the following:

- a. How does the campus governance structure evaluate the committees' effectiveness regarding participation in the decision-making process?
- b. What is the progress in creating the integrated planning handbook?

### **Topics of discussion during interviews:**

- a. Clarity on the governance structure and the decision-making process.
- b. How does the college evaluate the effectiveness of its committees and participation from all constituents?
- c. How does the college evaluate the processes, the effectiveness of the governance structure, and make overall decisions?

### **Request for Additional Information/Evidence:**

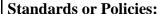
- a. Please provide an example of the committee bylaws and the overall campus committee bylaws and governance structure currently in place.
- b. The integrated handbook draft as in progress

### **Request for Observations/Interviews:**

- a. We would like to meet with students who have participated in committees.
- b. We would like to meet with some of the committee chairs and members including faculty, administrators and staff.

### **Core Inquiry 3: Outreach/One-Stop/Caring Campus**

The team is excited about the work Victor Valley College has engaged in directly related to Outreach/One-Stop and Caring Campus. The pride of ownership was reflected by the campus community during the Virtual Forum and consistently referenced throughout the ISER.



I.C.1, I.C.2, I.C.5, II.A.14, II.B.1, II.C.3, II.C.6, III.A.2, III.A.14, III.C.1, III.D.2, IV.B.1, IV.B.3

### **Description:**

No additional evidence required at this time.

## **Topics of discussion during interviews:**

- a. Outreach efforts
- b. One-Stop and services to students
- c. Institutional implementation of Caring Campus

## Request for Additional Information/Evidence:

No additional evidence required at this time.

## **Request for Observations/Interviews:**

- 1. Outreach lead
- 2. One-stop lead
- 3. Caring Campus lead

### **Core Inquiry 4: Responsiveness to the Community**

The team is excited about the work of Victor Valley College for their work and achievements directly related to responsiveness to the Community. This is strongly emphasized with a strong understanding of the demographics and needs of the community the college serves. This is also a direct correlation with the work in Outreach, One-Stop and Caring Campus.

### **Standards or Policies:**

I.A.1, I.B.8, II.A.5, II.A.14, II.C.4, II.C.6, III.B.2, III.B.3, III.C.2, III.D.2, IV.A.1, IV.B.3, IV.B.6

Description:
N/A
Topics of discussion during interviews:
a. Program offerings
b. Community partnerships
c. Consortiums
Request for Additional Information/Evidence:
No additional information requested at this time.
130 additional information requested at this time.
Request for Observations/Interviews:
Any college personnel or students that the college feels can speak to the Standards in the core inquiry/topics for discussion.