

Los Angeles Mission College

**Accreditation Gap Analysis and
Recommendations:
ACCJC Recommendations 2-7 and 9**

August 23, 2013

Matthew C. Lee, Ph.D.

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Preamble

At its June 2013 meeting, the Accrediting Commission for Community and Junior Colleges (ACCJC) placed Los Angeles Mission College (LAMC) on Warning, and required a Follow-Up Report by March 15, 2014 to demonstrate resolution of all 14 Recommendations made by the visiting evaluation team. Members of that team will visit campus again in late March or early April 2014 to verify the College's progress, and on the basis of their report, the Commission will take action on the sanction in June 2014.

The College (through the District) contracted with me specifically to evaluate its progress to date on Recommendations 2-7 and 9. The primary purpose of this report is to summarize my findings and identify actions that the College can take to close the gap between where it is now and where it needs to be, in terms that are more concrete and detailed than those in the Recommendations, Standards, and applicable Rubrics. The aim is not just to help resolve the Recommendations and enhance the chances of gaining reaffirmation of accreditation—to “get out of trouble”—but more importantly, to help improve the effectiveness of Los Angeles Mission College permanently. The consultant recommendations listed are designed to facilitate planning and implementation of lasting, positive change.

Beneath each Recommendation, I have reproduced the ACCJC Standards (and Eligibility Requirements, where applicable) to which it refers. To formulate and execute the most productive responses to the Recommendations, the College needs to understand those Standards and Eligibility Requirements as well as the language of the Recommendations themselves.

Finally, it is the nature of a report such as this to focus more on the specific steps that still need to be taken than on what is already in good shape or well underway. Consequently, readers will not see as much coverage of the many positive aspects of the College as might appear in, say, an outreach brochure or history of the institution. I urge readers to view the report not as a source of discouragement, but rather as a call to action, to move forward in the right direction for the benefit of the College and its students.

Background: Accreditation Sanctions

As noted in the Commission's *Accreditation Reference Handbook*, Warning is the first level of sanction. It indicates that the “institution has pursued a course deviating from the Commission's Eligibility Requirements, Accreditation Standards, or Commission policies to an extent that gives concern to the Commission.” Probation is a stronger sanction than Warning. It indicates that the institution actually “deviates significantly from the Commission's Eligibility Requirements, Accreditation Standards, or Commission policies, but not to such an extent as to warrant a Show Cause order or the termination of accreditation.” Show Cause, the strongest

sanction short of termination, is a Commission order to the institution to “show cause why its accreditation should be continued.” A college under any of these three sanctions does retain its accreditation.

The final sanction, in the absence of sufficient corrective action, is Termination of accreditation. U.S. Department of Education (DOE) rules require “adverse action” (in this context, Termination) if an institution fails to correct deficiencies and come into compliance with Accreditation Standards within a two-year period, though the Commission may grant an extension of that deadline for good cause. The DOE is pressing ACCJC to adhere more stringently to the two-year deadline.

It is important to note that the Commission’s policies do not require it to follow the sequence of steps from Warning through Probation and Show Cause to Termination. It has the ability to impose any sanction at any time, or to terminate accreditation at any time if it concludes that the institution is significantly out of compliance with the Standards or the Eligibility Requirements.

I want to be very clear about all these Commission sanctions, not to frighten anyone, but to highlight the severe consequences of inadequate action, to call attention to the fact that the clock is ticking, and to convey a sense of urgency to the College community. LAMC has already made some significant progress, but more work is needed before the College is back in the Commission’s good graces, and more importantly on the road to permanent improvement.

A final background note on sanctions: Predicting Commission decisions is problematic for numerous reasons, and I offer no guarantees that any particular set of College actions will result in reaffirmation of accreditation, or prevent imposition of a more stringent sanction. However, based on my judgment and experience, it is possible to increase the probability of a positive outcome by taking concrete, documented, sustainable steps that demonstrate to a well-informed and reasonable observer both resolution of the applicable team Recommendations and long-term adherence to the Standards and Eligibility Requirements that underlie them. The analysis and consultant recommendations in this report are designed to help the College take those steps. (See also Accrediting Commission Action Probabilities, page 43.)

Review and Analysis Process

This report is based in part on my review and analysis of a substantial amount of documentation related to the seven applicable ACCJC Recommendations, including the following:

- LAMC 2013 Self-Evaluation Report, with selected evidence files
- ACCJC Evaluation Report, March 2013, with the College’s response
- ACCJC Action Letter, July 3, 2013
- Spring 2013 ACCJC Annual Report submission
- March 11, 2013 College Status Report on Student Learning Outcomes Implementation, with Master List of Evidence
- LAMC External Evaluation Report: Recommendations, Actions and Status, July 29, 2013
- College and District foundational statements
- Office of Institutional Effectiveness (OIE) position descriptions
- Documentation of OIE data resources and tools

- Sample standard OIE reports used by instructional units in their program reviews
- Selected OIE and LACCD reports related to institutional effectiveness in the applicable areas
- Procedures, instructions, rubrics, and other documents used in the existing cycle for SLOs and other outcomes
- Documentation of selected course and program outcomes and all institutional outcomes
- Current mapping of outcomes at course, program, and institutional/degree levels
- Documentation of progress on completion of the cycle for course, program (including those in Student Services and Administrative Services), and degree/institutional outcomes, including changes implemented as a result of outcomes assessment and reevaluation
- Documentation of the relationship of outcomes to program review, resource allocation, and other planning processes
- Program review process and product documentation, particularly in student support programs, including sample 2012-13 completed comprehensive program reviews and annual updates and resource requests
- Selected minutes of major planning committees
- Student Services Master Plan, December 2012 second draft
- Distance Education documentation, including the March 2013 DE Update and sample committee minutes

In addition, I conducted structured interviews with the following people on campus, individually or in groups:

- Michael Allen, Vice President for Academic Affairs, Accreditation Liaison Officer (ALO), and Educational Planning Committee Co-Chair
- Louise Barbato, AFT Guild LAMC Chapter President
- Angela Echeverri, Accreditation Steering Committee Co-Chair and former Academic Senate President
- Patricia Flood, SLO Coordinator and Accreditation Steering Committee Co-Chair
- David Jordan, Distance Education Coordinator
- Sarah Master, Dean of Institutional Effectiveness
- Leslie Milke, Academic Senate President
- Monica Moreno, Director, Child Development Center and Student Services Program Review and SLO Coordinator
- Deborah Paulsen, Assistant SLO Coordinator
- Monte Perez, College President
- D'Art Phares, Educational Planning Committee Co-Chair
- Joe Ramirez, Vice President for Student Services and College Council Co-Chair
- Tobin Sparfeld, Budget and Planning Committee Co-Chair
- Curtis Stage, College Council Co-Chair and Technology Committee Co-Chair
- Hanh Tran, Manager, Information Technology
- Daniel Villanueva, Vice President for Administrative Services, former ALO, Accreditation Steering Committee Co-Chair, and Budget and Planning Committee Acting Co-Chair

The findings in this report thus rest on a substantial amount of evidence, and I am confident that they accurately reflect that evidence. However, I have not read every possible document, nor have I interviewed every employee and student. To the extent that the information I have analyzed is not sufficiently comprehensive, or not entirely representative of the College's structures, processes, and issues, it is possible that my findings in some particulars might be subject to revision. Of course, it is up to the President and the College to decide what weight to give those findings, and how best to respond to my recommendations.

College Responses to ACCJC Team Recommendations

General Observations

- 1) Los Angeles Mission College is a fine institution, blessed with a hardworking set of faculty, staff, and managers who are clearly united in their dedication to the welfare of the College and the success of its students. Collectively, they comprise a formidable force for progress.
- 2) In coordination, training, and dialogue regarding the actions necessary to resolve all these Recommendations, it is essential to emphasize and elaborate on the principles of sound practice and the positive benefits of those actions for students, faculty, and the institution as a whole, rather than merely compliance with accreditation or other requirements.
- 3) Creating engaging opportunities for meaningful dialogue that is both broad and deep is also essential. Such dialogue on the important issues related to these Recommendations not only facilitates progress, but can also serve to reenergize the participants by reminding them of what brought them to a career in education in the first place.
- 4) Document, document, document! The College must be able to *demonstrate* its progress, both to everyone in the campus community and to the ACCJC, and without documentation that is well-organized and accessible, such a demonstration is impossible.
- 5) Progress on all these issues must be sustained. Quick fixes for the sake of compliance are frequently useless or even harmful. The College must establish or modify the structures and processes necessary for permanent institutional change for the better.

Recommendation 2: Outcomes Assessment and Student Success Standards

To meet the Standards, the team recommends the college assess the achievement and learning outcomes for each of the past five years by programs and the college, set standards for student success including student achievement and student learning, accelerate its efforts to assess outcomes in all courses, programs, degrees and certificates and assess how findings have led to improved student learning and the achievement of the college mission, and widely distribute the results so they may be used as the basis for all constituent groups to engage in self-reflective dialog about the continuous improvement of student learning and institutional processes. (I.B, II.A, II.B, I.B.2, I.B.6, II.A.1.c, II.A.2, ER 10)

- I.B. Improving Institutional Effectiveness: The institution demonstrates a conscious effort to produce and support student learning, measures that learning, assesses how well learning is occurring, and makes changes to improve student learning. The institution also organizes its key processes and allocates its resources to effectively support student learning. The institution demonstrates its effectiveness by providing 1) evidence of the achievement of student learning outcomes and 2) evidence of institution and program performance. The institution uses ongoing and systematic evaluation and planning to refine its key processes and improve student learning.
- I.B.2. The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.
- I.B.6. The institution assures the effectiveness of its ongoing planning and resource allocation processes by systematically reviewing and modifying, as appropriate, all parts of the cycle, including institutional and other research efforts.
- II.A. Instructional Programs: The institution offers high-quality instructional programs in recognized and emerging fields of study that culminate in identified student outcomes leading to degrees, certificates, employment, or transfer to other higher education institutions or programs consistent with its mission. Instructional programs are systematically assessed in order to assure currency, improve teaching and

learning strategies, and achieve stated student learning outcomes. The provisions of this standard are broadly applicable to all instructional activities offered in the name of the institution.

- II.A.1.c. The institution identifies student learning outcomes for courses, programs, certificates, and degrees; assesses student achievement of those outcomes; and uses assessment results to make improvements.
- II.A.2. The institution assures the quality and improvement of all instructional courses and programs offered in the name of the institution, including collegiate, developmental, and pre-collegiate courses and programs, continuing and community education, study abroad, short-term training courses and programs, programs for international students, and contract or other special programs, regardless of type of credit awarded, delivery mode, or location.
- II. B. Student Support Services: The institution recruits and admits diverse students who are able to benefit from its programs, consistent with its mission. Student support services address the identified needs of students and enhance a supportive learning environment. The entire student pathway through the institutional experience is characterized by a concern for student access, progress, learning, and success. The institution systematically assesses student support services using student learning outcomes, faculty and staff input, and other appropriate measures in order to improve the effectiveness of these services.
- ER10. Student Learning and Achievement: The institution defines and publishes for each program the program's expected student learning and achievement outcomes. Through regular and systematic assessment, it demonstrates that students who complete programs, no matter where or how they are offered, achieve these outcomes.

Observations: Progress to Date and Issues Requiring Action

Outcomes Cycle

- 1) Accreditation Requirements
 - a) To resolve the Recommendation, the College must demonstrate that it has in fact reached the Proficiency level on the ACCJC Outcomes Rubric, which was required as of Fall 2012. The Proficiency level has the following characteristics:
 - i) Student learning outcomes and authentic assessments are in place for courses, programs, support services, certificates and degrees.
 - ii) There is widespread institutional dialogue about the results of assessment and identification of gaps.
 - iii) Decision-making includes dialogue on the results of assessment and is purposefully directed toward aligning institution-wide practices to support and improve student learning.
 - iv) Appropriate resources continue to be allocated and fine-tuned.
 - v) Comprehensive assessment reports exist and are completed and updated on a regular basis.
 - vi) Course student learning outcomes are aligned with degree student learning outcomes.
 - vii) Students demonstrate awareness of goals and purposes of courses and programs in which they are enrolled.
 - b) The Accrediting Commission requires far more from every college than an immediate "fix" in response to its Recommendations. It requires sustainable practices to resolve all the Recommendations and meet all the Standards and Eligibility Requirements permanently. Based on the interview results, administrative and applicable shared-governance and committee leaders at Mission recognize this requirement. However, the degree to which the rest of the campus community share recognition of the need for, and are committed to, sustained action over the long term is unclear, in part because most faculty are only just returning to campus after the summer break.

- c) In my judgment, Recommendation 2 (along with Recommendations 6 and 9) reflects a relatively recent increased Commission emphasis on measuring the *overall* effectiveness of colleges in facilitating student achievement, student learning, and pursuit of the mission. Analysis of Mission's effectiveness at the level of discrete units is not enough, because one cannot necessarily assume that the sum of unit improvements will add up to sufficient overall effectiveness in a given division (e.g., Academic Affairs or Student Services), or in the College as a whole. That is part of the reason institution-set standards have become so important.
 - d) All that said, I was happy to hear from several interviewees that College committees and personnel for the most part recognize that while compliance with accreditation requirements is important, sustainable improvement and adherence to sound practices for the benefit of the students and the institution as a whole are more important.
- 2) Coordination, Training, and Documentation
- a) The SLO Coordinator (.40 FTE reassigned time) and Assistant SLO Coordinator (.20 FTE) bear primary responsibility for coordination and monitoring of the outcomes cycle in Academic Affairs (Instruction), Student Services, and Administrative Services. (The SLO Assessment Committee, which helped establish the application of outcomes at Mission, was disbanded in 2009.) They encourage, motivate, coach, answer questions, provide training, and work with Outcomes Leads (see sections (c) and (e) below), Deans, and Vice Presidents to move the process forward.
 - b) Plans call for raising the amount of reassigned time for these two positions to .60 FTE and .40 FTE respectively, beginning in Fall 2013. This increase strikes me as appropriate, particularly given the amount of work that remains to be done in this area.
 - c) In Instruction, Department Chairs are the Outcomes Leads, ultimately responsible for coordinating work on the outcomes cycle at the discipline level, and submit a report on progress each semester to the SLO Coordinator. Department Chairs are evaluated by their Deans in part based on that progress. Otherwise, the evaluation team found that there is no mechanism to ensure that assessments are executed as planned.
 - d) Both Department Chairs and Deans in Instruction review syllabi to ensure that CSLOs are properly listed in every class. The SLO Coordinator reviews the SLO portion of all Course Outlines of Record to ensure that CSLOs are aligned with the course descriptions and objectives.
 - e) In Student Services and Administrative Services, unit managers serve as Outcomes Leads, coordinating work on program-level outcomes. The new Program Review Oversight Committee (PROC) is reportedly expected to monitor outcomes work in these two areas overall.
 - f) The extent to which the Deans and Vice Presidents understand, actively support, and encourage the work on outcomes is reportedly not sufficiently clear to faculty and staff. The SLO Coordinator and the Department Chairs depend on the administrative support of the instructional Deans to keep the outcomes cycle in that area on track, and the loss of Deans in recent years has been problematic in that respect.
 - g) Mission enjoys a great advantage over many other community colleges in coordinating its outcomes cycles in Instruction: A well-designed online system for entering and reporting outcomes, assessments, and some improvements. However, the system's tracking and reporting capabilities are still somewhat limited, so that the SLO Coordinator and Assistant Coordinator have to monitor status and compile overall status reports separately

using ad hoc data requests and Excel spreadsheets. In addition, the system to date has lacked fields for reporting on actual implementation of improvements and subsequent reevaluation, but the SLO Coordinator has indicated that those fields will be added for the 2013-14 cycle.

- h) Student Services and Administrative Services use the program review system instead to record the substance of their own outcomes cycles. There is no summary reporting mechanism in that system, so both areas are supposed to track their overall progress manually. I do not know the frequency and quality of their tracking.
- i) Assessment timetables for each department are supposed to be posted in the online system under Department Notes, but I found no such timetables in the sample I reviewed; evidently, most Department Chairs simply keep those timetables in their own offices. A comprehensive schedule for all outcomes is reportedly under development by the SLO Coordinator.
- j) Training in outcomes formulation and assessment was extensive in the first few years of implementation. At this point in the history of the process, the College appears to rely much more on the SLO website and the brief instructions for the online system than on workshops and other direct training experiences. One faculty interviewee who certainly should have been in a position to know, when queried on the subject, indicated that he and his colleagues had received very little guidance on the nature of SLOs, what an SLO should be, and the “why” of assessment and how it would benefit students and improve teaching, before being required to formulate and assess SLOs. He also expressed the opinion that it was unreasonable simply to refer a faculty member to the SLOs website and expect him or her to gain the knowledge needed to get through the outcomes cycle properly.
- k) However, the SLO Coordinator also prepares and distributes at each flex day presentation a *Student Learning Outcome Assessment Handbook*, which contains a brief guide to using the online system, basic information about CSLO and PLO formulation and assessment, sample CSLO and PLO assessments, and the ILOs. The *Handbook* as a whole does not appear to be posted online, but similar information in different form has been separately posted.
- l) In the Self-Evaluation Report, the Actionable Improvement Plan (AIP) for Standards II.A.1.c-II.A.2.b to address self-identified needs in the area of outcomes was vague: “By fall 2013, the SLO Coordinator will work with the Academic, Student Service, and Administrative units to further identify achievement gaps, identify appropriate assessment measures, and implement improvements to assure quality instructional programs in support of student learning.” No actions on this AIP had been documented in the Summary of AIPs as of July 11, 2013.
- m) There is no systematic evaluation and revision process for the outcomes cycle. Instead, the SLO Coordinator and Assistant Coordinator receive informal feedback from users of the system, and implement changes accordingly as they see fit. It is unclear to me whether they also use survey results (e.g., the outcomes question on the Fall 2011 institutional effectiveness survey) in their analysis of the cycle’s effectiveness. A new SLO Assessment Committee (SLOAC) is reportedly being established to take on this task more systematically beginning in Fall 2013.

- 3) Progress in the Outcomes Cycle
- a) The vast majority of faculty and other personnel reportedly have been very cooperative in the formulation and assessment of course and program SLOs. Since the Coordinator and Assistant Coordinator carry no authority to direct faculty, staff, or management work on outcomes, that work depends on such cooperation. On the other hand, full-time faculty are expected to participate in the process under their contract; adjunct faculty are encouraged to do so, and reportedly often do; and participation in the process reportedly does receive attention in both comprehensive and basic faculty evaluations.
 - b) Interviewees reported that the collegiality issues that have beset the College over the last few years have improved to such an extent that the vestiges should not impede progress on this Recommendation or any of the others. That is a crucially important development, and very welcome news.
 - c) In its report, the evaluation team was somewhat inconsistent in its assessment of the status of the outcomes cycle at the course, program, and institutional levels. In my experience, when such inconsistencies occur, it is best to respond conservatively, and take into consideration the team's most critical comments in resolving the applicable Recommendation.
 - d) The team found, and I concur, that the College has processes and structures "in place to produce, support, and measure student learning and institutional effectiveness." However, the institution has too often fallen short in its execution of those processes, analysis of the evidence, deep dialogue about the results, and documentation of the entire cycle to fulfill the requirements of the Proficiency level of the ACCJC Outcomes Rubric.
 - e) According to interviewees, part of the reason for that lack of execution is faculty (perhaps especially Department Chair) fatigue regarding outcomes: Too many have come to see assessment as a high-pressure, required chore to be ground out by a looming deadline, or even as a punishment, not as an opportunity—for pausing, thinking, examining their approach and their students, improving their practices for the benefit of those students and their own professional growth, and even recharging their teaching batteries as a result.
 - f) Course SLOs (CSLOs)
 - i) The College reported in Spring 2013 that 98% of all active courses had defined CSLOs, and that all those courses had ongoing assessment of those outcomes. However, the team pointed out, and interviews and examination of documentation confirmed, that in many courses no assessments had been entered in the online system, and in most others, only one or two CSLOs for a given course had been assessed—despite the fact that formulation and assessment of CSLOs began over five years ago. Moreover, the team found little evidence of completing the full cycle through reevaluation after implementation of improvements. Systematic documentation is always essential, and especially so in the outcomes cycle.
 - ii) Each CSLO is mapped to one or more ILOs, but not to any of the PLOs. Instead, each course (*not* its CSLO) is mapped to one or more PLOs, in files apparently maintained by the Department Chairs and the SLO Coordinator, and not otherwise readily available.
 - iii) The team found that most documented improvements based on CSLO assessments focused on course content or organization rather than on pedagogy. Their evident concern was that faculty at Mission are paying inadequate attention to the relationship

- between pedagogical approaches and improvements in student learning. (See also the Recommendation 5 section, page 31.)
- iv) New template components to be implemented at Mission for 2013-14 will require respondents to enter a “benchmark standard” for student achievement of each CSLO, and an implementation (and perhaps reevaluation) update for each modification or improvement planned in the previous cycle. I do not know whether programs are to provide benchmarks for all their CSLOs now, or just those that they are to assess each successive year.
 - g) Program Outcomes
 - i) Instructional Programs
 - (1) Each Program Learning Outcome (PLO) is mapped to one or more ILOs. (See page 11 for the PLOs’ relationship to courses.)
 - (2) Progress in the instructional PLOs cycle, as the evaluation team noted, lags behind that in the CSLOs cycle, and clearly does not approach the Proficiency level in the ACCJC Outcomes Rubric. Work reportedly did not get well underway until early 2012, and most assessments to date have reportedly used a standalone approach (e.g., Class Climate, portfolios, surveys). Based on my analysis of data in the online system as of the date of this report, progress on instructional PLO assessment is as follows:
 - (a) Total defined programs: 99
 - (b) Disciplines that are not defined as programs: 35
 - (c) Total defined programs with at least one PLO: 78, which represents 79% of all defined programs
 - (d) Total defined programs with at least one assessed PLO: 40, which represents 40% of all defined programs, and 51% of all defined programs that have at least one PLO
 - (e) Total PLOs: 257, of which only 45 (17.5%) have been assessed
 - (3) To expedite progress, the College has reportedly decided to move in the direction of roll-up assessments based on the CSLOs, but that approach is problematic because CSLOs are not mapped to PLOs on a one-to-one basis (see page 11). An alternative approach that would use the aggregated assessment results for all CSLOs in a course to assess progress on the PLO(s) to which that course (among others) contributes is under discussion, but progress to date is unclear.
 - (4) CTE Outcomes
 - (a) Mission did participate in a statewide pilot study of CTE outcomes in early 2013. The survey of program leavers was not designed to assess individual PLOs, but certainly does show promise for gauging CTE student achievement outcomes in a meaningful and useful way. It might be adapted in the future for use by individual programs.
 - (b) Perkins IV Program Performance Reports are available on the Chancellor’s Office website at the TOP Code level, but the most recent data now available are for 2010-11. Two-year-old data is of limited usefulness.
 - (5) PLOs are evidently not formulated for disciplines whose courses do not comprise a degree or certificate program (e.g., African American Studies, Anthropology, Anatomy, History), and it is unclear how those disciplines evaluate their overall effectiveness in facilitating student learning.

- ii) Administrative Services
 - (1) Service Area Outcomes (SAOs) vary in quality. For example:
 - (a) Some collapse what should be multiple outcomes into one statement.
 - (b) Some are descriptions of departmental functions, not outcomes.
 - (c) As in Student Services, linkages to ILOs are often forced or meaningless.
 - (2) The contribution of progress on the Administrative Services SAOs to progress on the ILOs reportedly has not yet been discussed at the College.
- iii) Student Services: See the Recommendations 7 and 9 section, page 37.
- h) Degree/Institutional Learning Outcomes (ILOs):
 - i) Progress in the ILOs cycle, as the evaluation team noted, lags even farther behind in some respects.
 - ii) In March 2013, the College reported that it had identified its seven ILOs, and that all of them had ongoing assessment. Assessment of most of the ILOs is a rubric-driven process. The process originated at an assessment retreat in February 2012, and began in earnest in Fall 2012 with self-selected groups of faculty. However, reportedly only five of the seven have actually been assessed to date. As the ILO reports acknowledged, the sampling methods and the number of student works or responses considered were more limited than a systematic assessment would ordinarily demand, and no benchmarks for adequate performance have been established.
 - iii) For a more systematic approach, the College is considering an additional roll-up assessment of all the ILOs based on the CSLOs, each of which is mapped to one or more ILOs. Plans at present call for reassessment of each ILO every three years.
 - iv) The evaluation team noted that none of the ILO assessments had been used to make any improvement or resource allocation decisions, and I have seen no evidence to contradict that finding.
 - v) The Academic Senate reportedly does not take a leadership role in promoting the assessment and achievement of the ILOs.
- i) General Education SLOs (GESLOs)
 - i) The College construes its ILOs as its GESLOs.
- 4) Integration with Planning and Resource Allocation
 - a) Program Review
 - i) Program review templates in Instruction request quantitative information on the status of CSLO and PLO outcomes—the number planned, formulated, and assessed, and the number with improvements implemented—and a brief status report on outcomes assessment in the discipline, but no substantive information on what one might call the programmatic results or implications of assessment. Plans reportedly call for incorporating PLOs in a more substantive way into program reviews, but I do not know the schedule for that change, nor what progress in that direction, if any, has been made.
 - ii) Program review templates in Student Services and Administrative Services now comprise the entire reporting mechanism for SAO assessments and results, and for planned (not actual) implementation of improvements.
 - iii) Program reviews are not linked to ILOs in any fashion. However, in Spring 2013, EPC considered steps to integrate ILO assessments into program review. I do not know the outcome of those deliberations.

- b) Other planning processes at Mission pay some attention to outcomes, but more typically at the process level than at any deep level. I found no evidence that any overall outcomes assessment results shape major plans yet, and limited evidence of demonstrable alignment and integration.
- i) LAMC Strategic Plan
 - (1) Objective 3.2 calls for improving “the connection between SLO assessment, planning, and resource allocation,” but the activities focus on procedural connections rather than on analysis and improvements based on outcomes assessment results.
 - (2) Objectives 3.1, 3.3, and 3.4 call for improving outcomes formulation, assessment, and the rest of the cycle; raising awareness of outcomes on campus, and establishing an outcomes reporting system in Student Services.
 - ii) LAMC Educational Master Plan
 - (1) One of the planning assumptions notes the mandate to measure student learning using outcome assessments, and describes some of the steps Mission will have to take to meet that mandate effectively. It also states that assessment results “will be used to improve courses and programs” and “enable LAMC to meet the educational needs of an increasingly diverse student body.”
 - (2) Goal 3.4 deals with assessing outcomes, and states, “Results of assessment will be used for *institution-wide* dialogue resulting in improvement and further alignment of *institution-wide* practices and decisions” [emphasis mine]. However, no responsible party is listed, and this action item, in my judgment, does not sufficiently demonstrate a meaningful commitment to such institution-wide dialogue, improvement, and alignment.
 - iii) LAMC Student Services Plan
 - (1) The second draft of the Student Services Plan (the latest to which I had access) makes no mention at all of SAOs or SLOs. It does emphasize facilitating the progress of students toward designated academic goals, but does not make a direct connection with outcomes.
 - iv) LAMC Technology Master Plan
 - (1) The Technology Master Plan includes a goal of enhancing student success and readiness through technology, and thus indirectly addresses student learning, but assessment and improvement of student learning and student achievement per se is not a clear foundation of that plan.
 - v) LAMC Facilities Master Plan
 - (1) I was unable to obtain a copy of the latest Facilities Master Plan in final form, and therefore cannot comment on its relationship to the outcomes process. The sample of predecessor documents to which I did gain access made no mention of student learning outcomes at all, which is perhaps not surprising given that they dated to 2009 and before.
- c) LAMC enjoys the services of an on-campus Office of Institutional Effectiveness (OIE), which provides institutional enrollment, demographic, student performance, and staffing data for program review, among other tasks. However, the office is newly reconstituted, and consists entirely of one Dean at present; as is usually the case in California Community Colleges, demand for research far outstrips the resources available. Augmenting this department with the recently approved research analyst position should

permit a higher level of support for outcomes assessment as well as other tasks dependent on research, and should help the College move toward the pervasive culture of evidence that accreditation standards, accountability requirements, and sound practice now require. (See also the Recommendation 3 section, page 21.)

5) Communication and Dialogue

- a) The evaluation team found that most documented dialogue related to CSLOs focused far more on getting assessments done than on meaningful program improvement based on the results. At the certificate program and degree levels, it acknowledged that dialogue on outcomes occurs in the Curriculum Committee, EPC, BPC, the February 2012 assessment retreat, and the College Council annual retreat.
- b) More broadly, the team criticized the lack of depth and engagement in dialogue about student learning and institutional effectiveness. Interviewees confirmed their observations, noting the pro-forma nature of many program reviews and the sheer lack of time for dialogue, for example. Meaningful dialogue reportedly does occur in certain committees, and to a certain extent on flex days, but it does not rise to the level required by the ACCJC Standards and Rubrics.
- c) As some interviewees observed, dialogue with one's colleague down the hall is difficult in a relatively small institution, where one might be the only permanent teacher in the discipline, or staffer in the office. That makes cross-departmental opportunities for dialogue all the more important.
- d) The College reportedly used to schedule informal brown-bag discussions of student learning and other issues, but they lapsed for lack of time. The Academic Senate is planning to bring them back, which is certainly a positive development.
- e) Both ILOs and PLOs are published in the College Catalog. ILOs have been more widely disseminated over the past year, using various methods such as distributing laminated bookmarks listing the ILOs with every purchase in the bookstore.
- f) See also the Recommendation 5 section, page 31.

Institution-Set Standards for Student Achievement and Student Learning

1) ACCJC Requirements

- a) ACCJC requires in each college's annual report, in accord with US Department of Education regulations, institution-set standards for student achievement in the following areas:
 - i) Successful course completion rate
 - ii) Fall-to-Fall retention rate
 - iii) Number or percentage of degree completions
 - iv) Number or percentage of certificate completions
 - v) Number or percentage of transfers
- b) Each of these standards is defined as "the level of performance set by the institution to meet educational quality and institutional effectiveness expectations." An institution-set standard is thus not a goal toward which a college might strive, but a level below which the institution regards its performance as unacceptable. However, the institution may set goals for student achievement if it wishes to do so.

- c) In addition, ACCJC evaluation teams are charged with examining licensure pass rates and job placement rates where applicable, though reporting institution-set standards per se on these measures is not yet required.
 - d) The evaluation team made it clear that Mission must also set standards for student learning, in part to help it “monitor the effectiveness of its planning and resource allocation decisions in achieving improvements in student learning” (see the Recommendation 6 section, page 33).
 - e) An institution may certainly set additional overall standards, benchmarks, or key indicators of performance, and from the Commission’s standpoint, it is to each college’s advantage to do so.
- 2) The evaluation team roundly criticized Mission for having no institution-set standards, no benchmarks for or indicators of overall effectiveness, no “deep dialogue” about learning and achievement standards or the degree to which the College achieves its mission, little evidence of measurable goals, and a lack of data analysis at all levels “related to mission, institutional effectiveness, and improvement of student learning and achievement.” The College’s Strategic Plan goals, the team noted, are broad and general, focus on infrastructure and operations (and, I would add, inputs and processes) to the exclusion of overall learning outcomes, and in any case have not undergone a full cycle of assessment, improvement, and reevaluation. The team’s criticism appears to reflect the Commission’s movement toward requiring more explicit and rigorous attention to institutional effectiveness and student learning *overall*, as opposed to within individual departments, programs, or courses (see page 9).
 - 3) One of the responsibilities of PROC is reportedly to initiate development of institution-set standards, but I do not know what progress that group has made.

Consultant Recommendations: Actions to Close the Gap

Outcomes Cycle

- 1) Coordination, Training, and Documentation
 - a) PROC, with input from Outcomes Leads, Deans, and Vice Presidents, should prepare a list of administrative support expectations in the outcomes cycle. The list should include the specific types of support that the Outcomes Leads can and should expect from their immediate supervisors to facilitate progress on outcomes formulation and assessment and subsequent improvements. PROC should then obtain any applicable approvals, and disseminate the list campus-wide; it should also build into its schedule an annual review and revision process for the list.
 - b) PROC should coordinate adding to the online program review system sections for recording SLO changes and pedagogical changes separately from curriculum/content modifications, to permit tracking and reporting on all three kinds of improvements. Alternatively, the system should include a checkbox or flag identifying the type(s) of improvement discussed in the free-form text box.
 - c) The SLO Coordinator should request, and Information Technology should implement by the beginning of Spring 2014, enhanced reporting capabilities in the online outcomes system, to permit automated reports on the overall status of the outcomes cycle at all levels and in all areas of the College.

- d) Mission Learning Report
- i) By the end of Spring 2014, in consultation with OIE, SLOAC should develop and implement a system for preparing and effectively disseminating an annual report on Mission's overall progress in improving student learning at all levels through the outcomes cycle—a Mission Learning Report. (The Report should also include sections on institutional standards for student achievement and learning; see page 21.) Using the new system reporting capabilities recommended above, the Department Chairs' semester reports, and other sources as needed, the Report should at a minimum summarize the results of learning outcomes assessments at course, program, and institutional levels; all improvements planned on the basis of those results; resources allocated and improvements actually implemented during the following year; and subsequent reevaluations of performance. At the institutional level, it should include the contributions of Student Services and Administrative Services through progress on their SAOs. Each subsequent year, if feasible and useful, the Report might include a comparison with the previous year's data.
 - ii) The College Council, EPC, Student Support Services Committee (SSSC), Technology Committee, Facilities Committee, and SLOAC at minimum should review the Mission Learning Report annually. In particular, each of the first five bodies (and any other body responsible for a major institutional plan) should incorporate substantive consideration of the Report, including both sets of standards and baselines and the most recent available assessment results, into its deliberations on updating the plan for which it is responsible. It should then ensure that at least one goal in each annual update of that plan (with accompanying measurable objectives) focuses explicitly on facilitating improvements in student achievement and learning outcomes. Each body, in consultation with OIE, should develop metrics to measure the effects on student learning (in relation to the standards) that are attributable to pursuit of that goal and objectives, rigorously assess progress every year, recommend improvements based on the results, and then, the next year, reevaluate progress.
 - iii) If any resources are needed to pursue that goal, requests for them should be merged with those in the annual program review and resource allocation process.
 - iv) The College Council should monitor overall progress in improving student achievement and learning at Mission, and help coordinate work on the major plans to ensure that activities complement rather than interfere with one another.
- e) The SLO Coordinator and SLOAC, in consultation with other bodies as appropriate, should complete development of the master schedule for the periodic assessment of every CSLO, SAO, PLO, and ILO. The SLO Coordinator should document and disseminate the schedule, and monitor the work to ensure that such assessment occurs in timely fashion. This development should help take some of the pressure off Department Chairs to schedule the process.
- f) During 2013-14, the SLO Coordinator and SLOAC should evaluate the information and training needs of the College community regarding the outcomes cycle, and implement improvements in accord with their findings. Candidates for improvement, based on my examination of existing practices, might include the following:
- i) Drawing upon existing sources of information, compile concise reference documents on the outcomes cycle, one each for CSLOs, PLOs, SAOs, and ILOs. Each document should emphasize the benefits of the cycle for students, faculty, and staff, before

- going into a step-by-step process map. The *Student Learning Outcome Assessment Handbook* could serve as a starting point for these documents.
- ii) Evaluate the SLO website and incorporate changes to make it more efficient and useful for personnel in need of outcomes cycle information.
 - iii) Identify gaps in the training received by College personnel in the past, and address those gaps with appropriate training experiences—once again focusing more on the positive benefits of the cycle than on compliance with requirements.
- g) SLOAC, in consultation with OIE, should follow through on plans for establishing a systematic evaluation and revision process for the outcomes cycle, with the first review to be completed in Fall 2013 if possible, but certainly no later than Spring 2014.
 - h) SLOAC should consider modifying the requirement that every SAO must be mapped to an ILO, to minimize the forced connections that occur now. Assessing SAOs that connect in a real sense to an ILO can help an institution measure overall progress toward that ILO, so real connections should be encouraged. But spurious connections are misleading, since they can lead to invalid conclusions about ILO progress. Moreover, at the unit level, the point of most SAOs is to help the department evaluate its own effectiveness, and in the attempt to force a link to an ILO, a department too often formulates SAOs that say very little about its effectiveness. The same thing can occur when a support service unit focuses exclusively on creating true SLOs in lieu of SAOs: In many cases, assessment of the set it formulates might reveal something about students' procedural learning, but virtually nothing about the unit's own performance overall.
- 2) Progress in the Outcomes Cycle
- a) CSLOs
 - i) The master schedule for outcomes assessment should ensure that every CSLO (not just a CSLO in every course) is assessed at least once every three years, as specified in Mission's Self-Evaluation Report. To accelerate progress toward Proficiency as required by the Recommendation, I suggest that the schedule be somewhat front-loaded initially, so that assessment and identification of needed improvements for at least a majority of all CSLOs are completed no later than the end of Spring 2014 (based on authoritative counts from the online system).
 - ii) For all CSLOs already assessed, faculty should enter into the system's new fields information on actual implementation of improvements and subsequent reevaluation of student performance, as applicable. Going forward, that information should be updated annually, perhaps as part of the comprehensive and annual program review processes.
 - iii) The College should consider mapping CSLOs (not just courses) directly to PLOs as applicable, to improve the rigor of the roll-up assessment of PLOs.
 - iv) The SLO Coordinator and SLOAC, with the active support of Academic Senate leadership, the Deans, the Vice President for Academic Affairs, and EPC, should establish and disseminate effectively for the next instructional outcomes cycle the requirement that faculty consider all types of changes, including pedagogical changes if appropriate, if assessment results indicate the need for action to help improve student learning, and record in the applicable system fields those changes they plan to make.
 - v) SLOAC should establish an ambitious timetable for faculty to enter benchmark standards for all existing CSLOs.

- b) Program Outcomes
 - i) The College should take steps to accelerate significantly the assessment of PLOs and SAOs, as required by the Recommendation, to achieve the Proficiency level by the end of Spring 2014 if feasible, or by Spring 2015 at the very latest.
 - ii) Instructional Programs
 - (1) To expedite progress, in consultation with OIE and others as appropriate, the SLO Coordinator and SLOAC should develop, document, and implement a rigorous roll-up assessment method for PLOs based on achievement of the CSLOs.
 - (2) SLOAC should evaluate methods to assess and report on overall learning in each of the disciplines that is not treated as a program for PLO assessment purposes (see page 12), and implement one that will work well at Mission. One option, for example, might be a simple roll-up assessment of the CSLOs in each of those disciplines.
 - iii) Administrative Services
 - (1) The SLO Coordinator, in consultation with the Vice President for Administrative Services and Outcomes Leads in that area, should schedule additional training sessions for those Outcomes Leads. The training, once again, should start with the positive benefits of SAO assessments for the departments, students, and the College as a whole. It should also cover proper formulation and assessment of SAOs, and directions on how to complete all the applicable fields in the online program review system.
 - (2) Administrative Services, in consultation with OIE, should develop a method for gauging the contribution of its SAOs to achievement of the ILOs. For example, one approach might involve a qualitative mapping narrative persuasively demonstrating links between certain SAOs and certain ILOs, followed by measuring the degree of achievement of those SAOs, and concluding with calculating the contribution to the applicable ILOs that that degree of achievement represents.
 - iv) Student Services: See the Recommendations 7 and 9 section, page 37.
- c) ILOs
 - i) The Academic Senate should consider taking on an explicit leadership role in promoting and facilitating the long-term improvement of *overall* student achievement and student learning at Mission, perhaps focusing initially, though not exclusively, on the ILOs.
 - ii) SLOAC should assist the applicable faculty and staff in refining, augmenting, and scheduling on a regular basis the standalone assessment methods and reporting already established for the ILOs.
 - iii) In consultation with OIE and others as appropriate, the SLO Coordinator and SLOAC should develop, document, and implement the additional annual roll-up assessment of all the ILOs based on achievement of the CSLOs and/or PLOs/SAOs.
 - iv) After each annual cycle of ILO assessment, SLOAC should incorporate the results across all divisions (Academic Affairs, Student Services, and Administrative Services) into the Mission Learning Report described above (see page 17).

- 3) Integration with Planning and Resource Allocation
 - a) Program Review
 - i) The SLO Coordinator and SLOAC should follow through on plans to incorporate substantive coverage of program-level outcomes, assessments, and consequent improvements in all program reviews. This new section of the system should include consideration of the standards for student learning (see page 21) as soon as they become available. If possible, SLOAC should implement this enhancement for the upcoming program review cycle, but in any case no later than the Fall 2014 cycle.
 - ii) EPC, in consultation with SLOAC, should follow through on plans to add meaningful consideration of the ILOs to both instructional and noninstructional program reviews. This new section of the system should also include consideration of the standards for student learning as soon as they become available. Even after both the roll-up assessment of ILOs based on PLOs and the assessment of SAO contributions to the ILOs are implemented, program-level dialogue about each program's contribution to achievement of the ILOs and to meeting the standards will certainly be in order.
 - b) Other Planning Processes
 - i) As noted on page 17, under the leadership of the College Council, the bodies responsible for the Strategic Plan, the Educational Master Plan, and other major plans should review on an annual basis the Mission Learning Report, consider its implications carefully, and update their plans and/or recommend improvements in the functional areas covered in their plans based explicitly on learning assessment findings. Every major plan should contain documentation of this consideration of learning outcomes.
- 4) Communication and Dialogue
 - a) The College should consider adding a second flex day to the calendar, and devoting it specifically to meaningful dialogue on student learning and institutional effectiveness at all levels and in all areas of the College. The "SLO Summit" scheduled for October 6 represents a step in this direction, toward greater opportunities for positive, deep conversations about student learning.
 - b) The College Council, in consultation with the Academic Senate and other groups as appropriate, should examine additional options for promoting meaningful dialogue about student learning and institutional effectiveness sustainably on a smaller scale, and recommend scheduling pilots of the options that seem most promising, beginning in Fall 2013. It should include opportunities for cross-departmental and even campus-wide dialogue, and should ensure that each activity is at least minimally documented.
 - c) In accord with the Proficiency-level dialogue requirements of the ACCJC Outcomes Rubric, under the President's leadership, all campus committees and administrative and constituency groups involved in decision-making regarding institution-wide practices should build into their deliberations on a regular basis, and thoroughly document, dialogue on outcomes assessment results, and alignment of institutional structures and processes to support and improve student learning. Those groups should post that documentation in electronic form, in timely fashion, in a location readily accessible to the entire campus community.

Institution-Set Standards for Student Achievement and Student Learning

- 1) PROC, in consultation with OIE, the Academic Senate, and other groups as appropriate, and with College-wide input and opportunities for dialogue, should:
 - a) Complete development of, and establish five-year baselines for, institution-set student achievement standards in at least the following areas by the end of Fall 2013, for reporting in the Spring 2014 ACCJC Annual Report:
 - i) Successful course completion rate
 - ii) Fall-to-Fall retention rate
 - iii) Number or percentage of degree completions
 - iv) Number or percentage of certificate completions
 - v) Number or percentage of transfers
 - b) Consider whether other institution-set standards for student achievement, and/or goals for student achievement, are appropriate for Mission, and if so, complete development of them as well.
 - c) Develop, implement, and document a system for regularly revisiting the standards and goals, and revising them as appropriate.
- 2) The Office of Academic Affairs or other appropriate department or group, if it does not already do so, should maintain information on all applicable licensure pass rates and job placement rates for inclusion in the ACCJC Annual Reports, and ask the applicable programs to consider setting standards and/or or goals for each.
- 3) EPC, in consultation with OIE, SLOAC, the Academic Senate, and other groups as appropriate, and with College-wide input and opportunities for dialogue, should also complete development of, and establish five-year baselines for, standards for student learning (as measured in the outcomes cycle at each level) by the end of Fall 2013 if possible, but in any case by the end of Spring 2014.
- 4) The Mission Learning Report (see page 17) should include documentation of both sets of standards and baselines, applicable licensure pass rates and job placement rates, and annually updated assessment results. The data sets provided by OIE for program review should also include this information on a routine basis, so that each program can consider the performance of its own students in relation to the standards.

Recommendation 3: Comprehensive Research and Evaluation Program

To meet the Standards, the team recommends the college develop and implement a comprehensive program of research and evaluation to support the assessment of student, program and institutional learning outcomes, and program review; support ongoing engagement in a collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes; and support collection and analyses of data related to the needs and goals of its diverse student populations. (I.A.1; I.B.1; I.B.2; I.B.6; II.A.1.a; II.A.1.c; II.A.2; II.A.2.d; II.A.2.f)

- I.A.1. The institution establishes student learning programs and services aligned with its purposes, its character, and its student population.
- I.B.1. The institution maintains an ongoing, collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes.
- I.B.2. The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to

which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.

- I.B.6. The institution assures the effectiveness of its ongoing planning and resource allocation processes by systematically reviewing and modifying, as appropriate, all parts of the cycle, including institutional and other research efforts.
- II.A.1.a. The institution identifies and seeks to meet the varied educational needs of its students through programs consistent with their educational preparation and the diversity, demographics, and economy of its communities. The institution relies upon research and analysis to identify student learning needs and to assess progress toward achieving stated learning outcomes.
- II.A.1.c. The institution identifies student learning outcomes for courses, programs, certificates, and degrees; assesses student achievement of those outcomes; and uses assessment results to make improvements.
- II.A.2. The institution assures the quality and improvement of all instructional courses and programs offered in the name of the institution, including collegiate, developmental, and pre-collegiate courses and programs, continuing and community education, study abroad, short-term training courses and programs, programs for international students, and contract or other special programs, regardless of type of credit awarded, delivery mode, or location.
- II.A.2.d. The institution uses delivery modes and teaching methodologies that reflect the diverse needs and learning styles of its students.
- II.A.2.f. The institution engages in ongoing, systematic evaluation and integrated planning to assure currency and measure achievement of its stated student learning outcomes for courses, certificates, programs including general and vocational education, and degrees. The institution systematically strives to improve those outcomes and makes the results available to appropriate constituencies.

Observations: Progress to Date and Issues Requiring Action

- 1) Coordination and training
 - a) After about two years of interim management, the Office of Institutional Effectiveness (OIE) is now led by a permanent Dean of Institutional Effectiveness, who started work in May 2013 and reports to the Vice President for Academic Affairs. The Dean has no research or clerical staff, so all operations are her responsibility, and demands on the Dean's time reportedly already exceed the hours available in a standard work week. The primary tasks of the Dean, with the estimated proportion of all hours worked, are as follows:
 - i) Preparation for and participation in committee meetings: 38%
 - ii) Production work: 15%
 - iii) Special projects and ad hoc reporting: 15%
 - iv) Report-writing: 12%
 - v) Supervision and training of hourly and (eventually) permanent staff: 12%
 - vi) Website maintenance: 8%
 - b) To help address the demand, the President has arranged for a temporary research assistant, primarily for data extraction and reporting, for Fall 2013, and has approved a permanent research analyst position for 2013-14. If all goes well, that position might be filled by late Fall.
 - c) There is reportedly no separate budget for OIE.
 - d) The Dean is charged with coordinating the development of the institution-set standards of student performance discussed in the Recommendation 2 section. This task is not included in the breakdown above.
 - e) According to the job description, the Dean also bears responsibility for overall integrated planning activities at Mission, but so far research and research support for planning have been her primary focus. The Dean reportedly possesses the knowledge to advise the

College on planning structures and processes, but does not consider herself an expert, and would benefit from some additional skill development. Planning coordination per se is also not included in the task breakdown above.

- f) OIE has no research calendar, nor a project prioritization system, to help it organize its work. Research priorities are set in consultation with the Vice President for Academic Affairs.
 - g) To date, OIE has not developed training materials on the development, application, and interpretation of data for participants in the program review or outcomes assessment processes. The Office is not involved in the flex day program this year. However, the office does reportedly participate in the optional program review training workshops that occur each November. As the evaluation team noted, Department Chairs and faculty in general have expressed the need for more training in these areas.
 - h) I have found no evidence that OIE performs an assessment of its own effectiveness; nor has it assessed the utility of the data it provides for program review and other processes intended to improve and promote dialogue on institutional effectiveness.
 - i) The Accreditation Steering Committee has established a Research and Evaluation Theme Team to monitor progress on the research-related Recommendations, communicate that progress to the campus community, and promote sustainable progress in this area. Some interviewees expressed uncertainty about the purposes and usefulness of this Team.
- 2) Data collection, analysis, assessment functions
- a) OIE reportedly has access to data through nightly table extracts, rather than direct access to the underlying databases. This type of access is not unusual in community colleges.
 - b) Instructional program review
 - i) OIE provides the following standard five-year data sets for instructional program review:
 - (1) Total Enrollment
 - (2) Successful Course Completion
 - (3) Degrees and Certificates
 - (4) FTES, FTEF, and Average Class Size
 - ii) The evaluation team criticized these data sets, which are typical for community colleges, as “so general that they were not likely to be useful beyond simple descriptions of performance across an entire discipline over time.” Moreover, the team found that most program reviews lacked meaningful analysis and dialogue even at this general level.
 - iii) On the other hand, some interviewees emphasized that although the level and extent of documented dialogue varies dramatically across departments, many faculty would *love* more opportunities to discuss student learning, compare “what’s working and what’s not” in terms of pedagogy, and sharing best practices.
 - c) Noninstructional programs typically use survey data for their program reviews, and/or develop their performance reports using their own data.
 - d) The College provides access via the Institutional Effectiveness website to static reports on student characteristics, transfers, and degrees and certificates, and on service-area demographic and labor market data. It also provides the following useful tools, each of which permits a limited amount of run-time customization:
 - i) Selected student characteristics over time
 - ii) Student success and grade distribution by selected discipline over time

- iii) Degrees and certificates by selected program, gender, and ethnicity over time
- iv) Two enrollment management tools: the Enrollment Reporting System for detailed analysis of daily enrollment trends at the program and institutional levels, and a section status report for information at the section level
- v) A comparative analysis of instructional productivity at the program level over time. However, the latest data on that system are from Spring 2012.
- e) OIE also has access to the Economic Modeling Specialists International (EMSI) emsiAnalyst environmental scanning tool through a District-level subscription. In addition, the College contracted with the Centers of Excellence to produce a searchable labor-market analysis in Spring 2012.
- f) There is no institutional effectiveness “dashboard” available. Development of one is under consideration, but will likely have to wait at least until the new student information system is fully implemented.
- g) The Dean initiates ad hoc queries typically through an Open Database Connectivity link in Microsoft Access to the table extracts mentioned above. Then she exports the data to Excel, where she cleans the data and produces the final product.
- h) All available survey results are presented on the Institutional Effectiveness website. Student surveys are administered at the District-wide level every two years; the College may request changes, but there is no provision for customizing questions to College needs. Recent College-level surveys have tended to focus on specific issues, such as ILO assessment and the new mission statement. Faculty, staff, and students were surveyed on campus services in 2011, and all personnel were surveyed on accreditation-related issues in Fall 2011. No surveys about institutional governance, decision-making, or climate are regularly scheduled.
- i) OIE is not directly involved in supporting the outcomes assessment process.
- j) At present, OIE produces no research briefs, reports, or newsletters.
- k) To date, OIE and the College have made no progress on establishing and monitoring institution-set performance standards, key performance indicators, and/or similar metrics. (See also the Recommendation 2 section, page 15.)
- l) Neither OIE nor any other group has produced any formal, systematic assessments of student learning styles and needs at Mission, nor of the relation of teaching methodologies to student learning outcomes.
- m) The District research office is responsible for preparation of Chancellor’s Office MIS submissions, and coordinates that effort with each college’s research office, including OIE. ARCC, Scorecard, and some IPEDS reporting depends on the accuracy of those data. I have not determined the institution’s confidence level in the integrity of the submitted data.
- n) Internal discrepancies in reported data do occur among different tables in the District databases, as for example in the calculation of FTES in different systems, or the count of degrees by disciplines, which are sometimes coded differently. However, by and large, College committees reportedly trust the data they receive from OIE.
- o) Overall, the evaluation team found that the relatively simplistic approach to student achievement and learning data presentation and analysis, along with the lack of institution-set standards, “made it impossible for the visiting team to determine the appropriateness of [Mission’s] performance, and for the college to determine its success in meeting its mission.”

Consultant Recommendations: Actions to Close the Gap

- 1) Coordination and training
 - a) The College should proceed immediately with the hiring process for the research analyst position. The Dean will have to devote time to training the new analyst, but with a strong hire, in relatively short order, the additional resource should free the Dean to turn more of her attention to other crucial tasks that require her skills, such as institution-set standards and planning coordination.
 - b) The College should consider establishing a separate cost center and budget for OIE beginning in 2014-15.
 - c) The Dean should identify a set of appropriate professional development opportunities to increase her skills in the area of integrated planning, and the Office of Academic Affairs should provide the resources necessary for her to take advantage of at least some of them during 2013-14.
 - d) The Dean should develop and maintain a formal research calendar, including all cyclical production projects, as well as recurring patterns of ad hoc requests.
 - e) The College Council should establish a short-term shared-governance research advisory task force in Fall 2013, chaired by the Dean of Institutional Effectiveness, to accomplish the following tasks:
 - i) Develop and recommend to the President a system for setting priorities among research projects. OIE should then disseminate the approved system, and adhere to its provisions in allocating research resources.
 - ii) In consultation with EPC, SLOAC, the Council of Instruction, the SSSC, Administrative Services management and staff, and others as appropriate, determine campus training needs in the development, application, and interpretation of data, particularly though not exclusively for participants in the program review and outcomes assessment processes. Then develop a calendar of training sessions to help meet those needs during 2013-14, effectively disseminate that calendar with a sign-up mechanism, facilitate the sessions, and provide the opportunity for participants to evaluate them and suggest additional training. The Deans and Vice Presidents should strongly encourage all participants in the program review and outcomes assessment processes to sign up for at least one training session.
 - iii) In the same process, evaluate and recommend specific improvements in the data OIE customarily collects and provides (or should collect and provide) for program review in both instructional and noninstructional areas, and in other major planning and evaluation processes (such as the outcomes cycle), in light of the increasing need for data disaggregated in multiple ways to illuminate diverse student needs. The Dean should implement those improvements that can use existing data sets and production tools at the earliest feasible time.
 - iv) Evaluate and recommend concrete improvements in OIE support of ongoing, robust, and pervasive dialogue about the continuous improvement of student learning and institutional processes. Included in the improvement options considered should be a series of periodic research briefs, reports, or newsletters to inform the campus community about research resources and findings, to promote campus-wide dialogue

- about institutional effectiveness and student learning, and to help develop a culture of evidence.
- f) The Dean should develop a set of useful and engaging materials for the training sessions. These materials should also be designed for use on a standalone basis, and posted to the Institutional Effectiveness website. The Dean should notify members of the campus community when the materials are posted, and encourage them to use them.
 - g) By the end of Spring 2014, in consultation with other individuals and groups as needed, the Dean should evaluate the performance of OIE, and institute improvements as the findings warrant. Subsequent annual evaluations of OIE should occur as part of the program review process.
 - i) As part of this annual evaluation process, building on the work of the research advisory task force, and drawing on information gleaned from her participation in multiple campus committees and from her knowledge in the field, the Dean should develop and maintain a list of research development projects. These projects could include development of additional data sources, responses to upcoming mandates, improved support of institution-wide planning and dialogue, research capacity-building, or any other initiatives intended to strengthen the research foundation of the College, promote the culture of evidence, and improve student learning and institutional effectiveness.
 - ii) The annual OIE evaluation process should include sufficient time for effective reflection, dialogue, and planning.
 - h) The Accreditation Steering Committee should ensure that the charge of the Research and Evaluation Theme Team is very clear, both to the members and to the College community, to avoid possible duplication of effort or unnecessary work.
- 2) Data collection, analysis, assessment functions
- a) The Dean should add transfers and Fall-to-Fall retention rates to the data provided for program review, and ensure that all program review data in the areas of the institution-set standards are calculated in the same way as the institution-level data, so that comparisons related to institution-set standards are meaningful.
 - b) Programs using survey data in assessing their performance should submit their survey instruments to OIE for review as soon as possible, and incorporate the feedback they receive in the next iteration of the survey. The Dean should make every effort to respond quickly to these requests for review, given the pressing timeline for program review.
 - c) The Dean should update all datasets on the Institutional Effectiveness website as soon as new information becomes available, and build those updates into the research calendar.
 - d) The Dean should follow through with the development of an institutional effectiveness dashboard as soon as the new student information system is fully operational. Given the limited research resources available, even with the addition of a research analyst, distribution of data reporting capabilities makes sense for Mission.
 - e) The Dean should consider moving into production mode (with appropriate data integrity safeguards) any ad hoc queries that are highly likely to recur, to minimize labor-intensive, unnecessarily redundant preparation tasks.
 - f) The Dean should initiate a request that District-level surveys permit the addition of questions customized to individual colleges' needs.

- g) See also consultant recommendations regarding dialogue opportunities in the Recommendation 2 section (page 20), and regarding student learning needs and teaching methodologies in the Recommendation 5 section (page 33).

3) See also references to OIE in the consultant recommendations in other sections.

Recommendation 4: Distance Education Plan

To meet the Standards, the team recommends the college develop and implement a plan for Distance Education that includes an evaluation of Distance Education for alignment with the needs of the college's intended student population, an assessment of the quality of instruction and compliance with US Department of Education regulations, infrastructure to support online teaching and learning, and a systematic assessment of student learning and achievement outcomes in order to ascertain how well students are learning in distance education courses. Such a plan should be integrated with other college planning efforts and linked to the resource allocation process (I.B.1, I.B.2, I.B.4, I.B.5, I.B.7, II.A.1, II.A.2, II.A.3, II.A.6, II.A.7, II.A.8, II.B.3.c).

- I.B.1. The institution maintains an ongoing, collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes.
- I.B.2. The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.
- I.B.4. The institution provides evidence that the planning process is broad-based, offers opportunities for input by appropriate constituencies, allocates necessary resources, and leads to improvement of institutional effectiveness.
- I.B.5. The institution uses documented assessment results to communicate matters of quality assurance to appropriate constituencies.
- I.B.7. The institution assesses its evaluation mechanisms through a systematic review of their effectiveness in improving instructional programs, student support services, and library and other learning support services.
- II.A.1. The institution demonstrates that all instructional programs, regardless of location or means of delivery, address and meet the mission of the institution and uphold its integrity.
- II.A.2. The institution assures the quality and improvement of all instructional courses and programs offered in the name of the institution, including collegiate, developmental, and pre-collegiate courses and programs, continuing and community education, study abroad, short-term training courses and programs, programs for international students, and contract or other special programs, regardless of type of credit awarded, delivery mode, or location.
- II.A.3. The institution requires of all academic and vocational degree programs a component of general education based on a carefully considered philosophy that is clearly stated in its catalog. The institution, relying on the expertise of its faculty, determines the appropriateness of each course for inclusion in the general education curriculum by examining the stated learning outcomes for the course.

General education has comprehensive learning outcomes for the students who complete it, including the following:

- [II.A.3.a. An understanding of the basic content and methodology of the major areas of knowledge: areas include the humanities and fine arts, the natural sciences, and the social sciences.
- II.A.3.b. A capability to be a productive individual and life-long learner: skills include oral and written communication, information competency, computer literacy, scientific and quantitative reasoning, critical analysis/logical thinking, and the ability to acquire knowledge through a variety of means.
- II.A.3.c. A recognition of what it means to be an ethical human being and effective citizen: qualities include an appreciation of ethical principles; civility and interpersonal skills; respect for cultural diversity; historical and aesthetic sensitivity; and the willingness to assume civic, political, and social responsibilities locally, nationally, and globally.]

- II.A.6. The institution assures that students and prospective students receive clear and accurate information about educational courses and programs and transfer policies. The institution describes its degrees and certificates in terms of their purpose, content, course requirements, and expected student learning outcomes. In every class section students receive a course syllabus that specifies learning outcomes consistent with those in the institution's officially approved course outline.
- II.A.7. In order to assure the academic integrity of the teaching-learning process, the institution uses and makes public governing board-adopted policies on academic freedom and responsibility, student academic honesty, and specific institutional beliefs or world views. These policies make clear the institution's commitment to the free pursuit and dissemination of knowledge.
- II.A.8. Institutions offering curricula in foreign locations to students other than U.S. nationals operate in conformity with Standards and applicable Commission policies.
- II.B.3.c. The institution designs, maintains, and evaluates counseling and/or academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function.

Observations: Progress to Date and Issues Requiring Action

- 1) Distance Education (DE) enrollments are reportedly now recovering, after falling from their 2008-09 peak level.
- 2) Coordination and Documentation
 - a) No DE Plan as called for in the Recommendation exists. Forms, procedures, and other documentation are posted on the DE website, though they are not organized in a particularly user-friendly way. The DE Committee plans to work on a DE Strategic Master Plan beginning in Fall 2013, but there is no firm schedule for the work yet.
 - b) Coordination of DE falls to the DE Coordinator, a faculty position with .20 FTE reassigned time. According to the Self-Evaluation Report, "The DE Coordinator supports delivery of online, hybrid, and Web enhanced classes including coordinating the creation of MOODLE course shells and maintaining the online portal, its content, tutorials, faculty, student support, and Help Desk." He also has provided training for faculty in the transition to Etudes (see page 29), and makes a monthly DE report to EPC. For the demands, size, and likely growth of the Mission DE program, this level of support strikes me as marginal at best. For example, the DE Coordinator actually *is* the phone and email helpdesk from 6:30am to 10:00pm for both DE and web-enhanced face-to-face courses—and the latter comprise an increasing proportion of the demand for support. Helpdesk responses alone require a reported two hours per day, even after the first-of-term peak demand, though there is no ticket system to track and report these services systematically.
 - c) The DE Coordinator co-chairs the DE Committee, which functions as a subcommittee of EPC. Its charter comprises one short paragraph in Article 40 of the AFT contract. There is no other formal charter.
 - d) There is reportedly no line-item budget for DE training or other activities or infrastructure.
 - e) The DE Coordinator reportedly prepared an Action Plan to address this Recommendation; it has been reviewed by EPC, but it was not made available to me.
- 3) Alignment with the needs of the college's intended student population
 - a) Reportedly, deciding what classes to offer online to help meet student needs has been largely unsystematic. The Substantive Change Proposal of 2012 did describe the features of DE that logically would meet student needs, but it did not appear to be based on, say, a

- survey of Mission students about their needs. Instead, it included results of a survey of Department Chairs.
- b) The evaluation team cited its concern about the adequacy of counseling services to meet the needs of online students; those services appear to consist mainly of phone, fax, and email responses to student requests. Like the team, I was unable to find any evidence of systematic evaluation of the effectiveness of counseling or other services for online students, although the Fall 2011 Counseling survey did include one question about the helpfulness of online advising. The DE Committee, for example, reportedly has not initiated such a process.
 - c) However, the Student Services Master Plan now under development by the SSSC includes strategies for improvement of online services relevant to the Recommendation, such as online educational planning and online career exploration.
- 4) Quality of instruction
- a) Quality assurance in DE appears to focus primarily on the front end of the process: All online faculty must complete an online pedagogy certification process, and the applicable Department Chair reviews each proposed DE course shell before it goes live, for example. However, as the evaluation team noted, no formal criteria exist for that review, nor for evaluating requests to offer courses online.
 - b) Moreover, evaluating the effectiveness of the DE program based on student performance or outcomes achievement—outputs rather than inputs, so to speak—has been somewhat inconsistent. A separate program review process for the DE program was initiated in 2009 and updated in 2011, but the data reporting for these efforts was reportedly never set up. Plans call for the DE Committee to implement a more robust and rigorous program review process beginning in Fall 2013.
 - c) Nor has there been systematic student evaluation of DE classes per se; only a few disciplines have used the sample evaluation form from LATTC suggested by the DE Committee. However, the DE Coordinator and the Vice President for Academic Affairs have initiated discussions on implementation of a two-part system to include both evaluation of faculty per se and satisfaction with the online course itself.
- 5) Compliance with USDOE regulations
- a) The DE website contains links to the Chancellor's Office *Distance Education Accessibility Guidelines* and to steps for students with disabilities to receive accommodations in DE courses. Student identity authentication under Moodle and E College is briefly described in the March 2013 DE update for accreditation. However, I was unsuccessful in my search for a comprehensive assessment of DE compliance with federal regulations. Nor am I an expert in online system access for students with disabilities, identity authentication, and other federal requirements, so I am not in a position to conduct my own evaluation of the College's compliance with those requirements.
- 6) Other support infrastructure
- a) The College has recently moved to the Etudes course management system for almost all courses. All DE students will receive an emailed link to a video explaining the new system at the beginning of Fall. The effect of this change on the problems of funding stability for the LMS that were identified in the Self-Evaluation Report is unclear.

- 7) Student achievement and outcomes assessment
 - a) Student performance in DE courses so far has been compared to that in face-to-face courses only in the aggregate; there has been no comparison of performance within DE and face-to-face sections of the same course. To do this assessment, the DE Coordinator will require the assistance of OIE staff.
 - b) Coordination of assessment of CSLOs in DE courses is theoretically the responsibility of the applicable Department Chair, but it is unclear whether such assessment occurs systematically.

Consultant Recommendations: Actions to Close the Gap

- 1) The DE Committee should commence work in earnest on the DE Plan as soon as possible, complete it by early Spring 2014, and submit it for approval through EPC and the College Council to the President by mid-Spring 2014. The Plan should include, at minimum, the following elements:
 - a) Through an annual DE program review and resource allocation process, systematically evaluate and improve DE offerings, services, infrastructure, and procedures based on appropriate criteria, explicitly including maintaining the quality of instruction and services and alignment with student needs. The evaluation should be designed and implemented in consultation with OIE, and should include at least the following components:
 - i) An analysis of student performance in DE classes compared to that in corresponding face-to-face classes. The Committee should also include an analysis of other achievement measures (e.g., performance in subsequent courses in a sequence, degree and certificate attainment) and learning outcomes of students who have completed DE classes compared to that of those who have not.
 - ii) The results of student evaluations, so the DE Coordinator and the Vice President for Academic Affairs should follow through on plans to implement the two-part system mentioned above.
 - iii) The periodic assessment of the needs of current and prospective DE students, and of the match between those needs and current and prospective offerings. This assessment should be designed in part to provide the Committee with more systematic guidance on what courses should be added to or removed from the set of DE offerings.
 - iv) An assessment of all counseling and other student support services provided to DE students, prepared in cooperation with the SSSC (whose Student Services Master Plan should address such services; see the Recommendations 7 and 9 section, page 37).
 - v) An assessment of the criteria used for evaluating course shells and other aspects of DE offerings.
 - vi) An assessment of ongoing adherence to applicable federal and state regulations (e.g., authentication of student identity), ACCJC Standards, and Board policy.
 - vii) Adequate opportunities for meaningful broad-based dialogue among and input from applicable faculty, staff, management, and students regarding the results of assessments and the design and implementation of needed improvements.
 - viii) Recommendations for improvements.
 - ix) Resource requests as needed to implement the recommended improvements.

- b) Set goals and measurable objectives for improvement in the Plan, including specific timelines, responsible persons, and resources needed, if any.
 - c) Periodically review and revise as needed DE policies and procedures, such as those regarding preparation and certification of DE faculty and approval of online offerings.
 - d) Ensure that the information students receive both in and about DE classes is clear and accurate.
 - e) Systematically evaluate, redesign, and regularly maintain the DE website to make it more accessible and useful for students, faculty, and staff.
 - f) Identify and maintain meaningful linkages with other major College plans, including in particular the Educational Master Plan and Technology Master Plan, and describe the relationship with the College's mission.
 - g) Establish provisions for regular evaluation and revision of the DE Plan itself, based in part on its effectiveness in contributing to the desired student achievement and learning outcomes.
 - h) Disseminate the final Plan effectively to the campus community.
- 2) The Vice President for Academic Affairs, Deans, and Department Chairs should ensure that appropriate assessment of CSLOs in DE classes is taking place systematically, and that DE faculty are entering assessment reports in the online outcomes system in timely fashion.
 - 3) The DE Committee should develop and recommend to EPC a more detailed and useful charter consistent with the requirements of Article 40 of the AFT contract.
 - 4) The DE Committee should evaluate the reassigned time of the DE Coordinator, based in part on an analysis of his current tasks and in part on a comparison with analogous assignments at other colleges within and outside LACCD. If the analysis justifies an increase, as I expect it will, the Committee should recommend it, and after approval by the President, the College should implement it as soon as possible.
 - 5) The College should consider establishing a separate cost center and budget for DE support.

Recommendation 5: Assessment of Student Learning Styles and Needs

To meet the Standards, the team recommends the college adopt mechanisms for assessing: student learning styles and needs, the alignment of instructional delivery and pedagogical approaches with student learning styles and needs, and how instructional delivery and pedagogical approaches are related to achievement of student learning outcomes (II.A.2.d).

- II.A.2.d. The institution uses delivery modes and teaching methodologies that reflect the diverse needs and learning styles of its students.
- II.A.1.b. The institution utilizes delivery systems and modes of instruction compatible with the objectives of the curriculum and appropriate to the current and future needs of its students. [Cited in evaluation team's narrative (p. 42), but omitted from Recommendation; "The college does not meet Standard II.A.1.b."]

Observations: Progress to Date and Issues Requiring Action

- 1) The evaluation team was inconsistent in its consideration of Mission's attention to student learning styles and needs, and the alignment of pedagogical approaches with those needs.
 - a) On the one hand, under Standard II.B, the team concluded, "Overall the institution has the processes in place to support the identification of the learning needs of its student population and conducts analyses to assess how well it is meeting those needs."

- b) On the other, under Standards I.B and II.A, the team stated, “There was no evidence of an effort to understand how well different student groups perform and achieve; the only comparisons related to performance were historical and aggregated at the discipline level,” and “The team was unable to find evidence of any research activity related to student learning styles and how learning styles of students aligned with educational delivery modes. Additionally, there was no analysis or discussion in the outcomes assessment online system or in the program review system related to common teaching methodologies and their relationship to student outcomes.”
- c) These latter observations, it is clear, gave rise to Recommendation 5. It is foolhardy to attempt mind-reading with evaluation teams, and their written words comprise our only evidence, but in my judgment, the team’s primary concern is analyzing the learning performance and needs of identifiable subgroups of students that teachers frequently encounter in their classrooms, and then shaping pedagogy—not just course content—to meet those needs. Thus improvement of instructional program review and practices appears to be the main thrust of this Recommendation
- 2) The College’s attention to student needs as described in the Self-Evaluation Report focus on gross external measures such as educational attainment and labor market projections, student achievement data aggregated at the program level, overall survey results, programs and practices designed to fit presumed student interests (e.g., ethnic studies), and hiring for sensitivity to student diversity. The team did not object to these measures and activities, nor to programs designed to serve established subgroups (e.g., DSPS, EOPS) or address academic deficiencies (e.g., basic-skills courses, tutoring), but if my interpretation is correct, the Recommendation demands more attention to specific learning needs in the classroom across the curriculum, with consequent enhancements in pedagogy.
 - 3) It is unclear whether the College conducted any searching analysis of survey results to identify and then respond to students’ needs even in the aggregate. For example, the Spring 2012 Student Survey contained numerous questions from which one might draw conclusions regarding students’ needs likely to affect their success in pursuing their academic and vocational goals (e.g., questions 5, 10, 15, 16, 18-21, 23, 24, and 27). Yet the only analysis of the results that I found was a simple frequencies report on all survey items.
 - 4) Some researchers in the field contend that altering pedagogy to fit learning styles per se, such as aural, kinesthetic, or visual learning, has no demonstrated effect on student learning success, and in fact question the utility of the “learning styles” concept itself. Reportedly, however, the idea that learning can be more effective if teachers take into consideration their students’ background knowledge, interests, and ability level is still widely accepted. This research suggests, in the context of Recommendation 5, that instructors gauge in some fashion the knowledge, interests, and ability of those students in front of them, and tailor their pedagogy accordingly, to the extent feasible and consistent with academic rigor, to maximize learning. Interview results indicated, of course, that a great many teachers at Mission already do that very thing in one form or another, but is it probable that documentation of the practice is lacking.
 - 5) According to the *External Evaluation Report: Recommendations, Actions and Status* report of July 29, 2013, plans call for the Fall 2013 establishment of “a monthly forum on teaching and learning that will analyze, pilot, evaluate and train faculty on learning styles, needs, and pedagogical approaches,” and for planning a Center for Teaching and Learning at Mission. Both these initiatives promise to address this Recommendation very productively.

Consultant Recommendations: Actions to Close the Gap

- 1) The Vice President for Academic Affairs and EPC, in consultation with OIE, should follow through as soon as possible with developing a plan for a Center for Teaching and Learning. The following elements in that plan, in my judgment, would meet the intent of the Recommendation, though many other designs would no doubt do as well or better:
 - a) Establish the Center with appropriate sustainable resources, and schedule events as needed to promote achievement of its purposes. This step might occur after the EPC completes one or more of the following four steps, or it might occur earlier to provide a forum for dialogue related to those steps.
 - b) Adopt a working definition of “student learning styles and needs” as applied at Mission in light of this Recommendation and available research in the field. In formulating this definition, consider at a minimum the extent to which it includes background knowledge, interests, ability level, and/or “learning styles” per se as commonly understood.
 - c) Identify the student subgroups across which learning styles and needs data should be disaggregated to facilitate the alignment of suitable instructional delivery and pedagogical approaches.
 - d) Catalogue approaches that Mission faculty most commonly use in assessing their students’ learning styles and needs, and the changes that they most commonly implement to align their pedagogical approach with their assessment findings.
 - e) Based on that catalogue, on available research in the field, on existing survey findings, and on continuing dialogue with faculty across the institution, analyze and prepare an initial report on the relationship among student learning styles and needs, instructional delivery and pedagogical approaches, and the achievement of student learning outcomes at Mission.
 - f) Design and hold events through the Center to explore this relationship and refine the analysis.
 - g) In consultation with OIE, and based on the analysis and further dialogue, identify or develop additional tools to accomplish the following tasks:
 - i) Assess student learning styles and needs systematically.
 - ii) Document associated pedagogical or other changes.
 - iii) Document ongoing application of the approaches in the catalogue.
 - iv) Analyze the relationship among student learning styles and needs, instructional delivery and pedagogical approaches, and the achievement of student learning outcomes at Mission, using both quantitative and qualitative evidence as applicable.
 - h) Prepare an annual summary of the proceedings and findings of the Center, for inclusion in the Mission Learning Report (see page 17).

Recommendation 6: Planning and Resource Allocation Effectiveness

To meet the Standards, the team recommends the college develop a set of metrics and performance standards to better monitor the effectiveness of its planning and resource allocation decisions in achieving improvements in student learning (I.A.1, II.A.1, II.A.2.f).

- I.A.1. The institution establishes student learning programs and services aligned with its purposes, its character, and its student population.

- II.A.1. The institution demonstrates that all instructional programs, regardless of location or means of delivery, address and meet the mission of the institution and uphold its integrity.’
- II.A.2.f. The institution engages in ongoing, systematic evaluation and integrated planning to assure currency and measure achievement of its stated student learning outcomes for courses, certificates, programs including general and vocational education, and degrees. The institution systematically strives to improve those outcomes and makes the results available to appropriate constituencies.

Observations: Progress to Date and Issues Requiring Action

- 1) The program review and resource allocation process is arguably the most critical element of planning at Mission, involving as it does the largest number of participants at the most detailed level. Here again, the evaluation team was somewhat inconsistent in its consideration of Mission’s evaluation of program review and resource allocation processes. The team stated that the College does review and refine its program review processes to improve institutional effectiveness. But it also stated that there is no evidence to substantiate the College’s claim for systematic review of the effectiveness of its program review model, and that “Beyond surveying committee participants regarding their perceptions and satisfaction of committee performance, there was little evidence to support quality assurance in the area of effectiveness of ongoing planning and resource allocation processes.” Clearly, the latter assessment prevailed, and produced Recommendation 6.
- 2) The team found much to praise in the program review and resource allocation processes. For example:
 - a) They are integrated and cyclical.
 - b) There is a clear resource allocation prioritization process.
 - c) Planning is linked closely to the mission, vision, and core values.
- 3) However, the team also found some deficiencies in the program review and resource allocation processes that concerned them. For example:
 - a) Some units in both instructional and noninstructional areas had not completed their program reviews.
 - b) The College has not yet “closed the loop” entirely in the linkage between program review and resource allocations. Interviews confirmed that a significant number of personnel perceive that program review does not connect with resource allocations to the extent it should. Whether or not that perception is accurate, the College must address it constructively.
 - c) “Individual units have not developed a means of evaluating their program review and annual unit planning processes.”
- 4) My own analysis of a sample of 2012-13 program reviews in the online systems, along with interview results, indicates the following:
 - a) Strengths
 - i) The online program review system reportedly functions well for the most part, and its links facilitate inclusion of evidence.
 - ii) The review and approval routes for program review and resource allocation prioritization are straightforward, compared to those at many other institutions.
 - iii) Every resource request must be linked to a program objective.
 - iv) Program objectives are linked to the College’s Strategic Goals (though the link is too rigid in some respects; see page 35).
 - v) The system includes a field for projecting retirements.

- vi) Some programs do provide useful student performance evidence beyond the standard reports.
 - vii) The faculty hiring prioritization process, which originates in program review, reportedly works smoothly.
 - viii) Resource requests that originate in instructional outcomes assessments are automatically transferred into the program review system.
 - ix) Needs requests of all major categories (funding, personnel, technology, equipment, facilities, professional development) are integrated into the program review system. The Budget and Planning Committee applies a scoring rubric to all applicable resource requests.
 - x) The Educational Planning Committee reportedly does use program review information in development and refinement of the Educational Master Plan.
 - xi) Committees involved in the program review and resource allocation process do complete annual functional evaluations, which are submitted to the Shared Governance Task Force for analysis.
- b) Issues
- i) If detailed directions for completion of the program review fields exist, I was unable to find them. Specific directions are needed to help respondents interpret the questions, in part because they apply somewhat differently to instructional and noninstructional programs.
 - ii) Many programs, as the team noted, do not engage meaningfully with the evidence they present in assessing their effectiveness, and/or present limited or dated evidence. As noted in the Recommendation 3 section (see page 23), many Department Chairs and other faculty have acknowledged the need for better understanding of data application and interpretation in the context of program improvement.
 - iii) Many program objectives are really just resource requests. In fact, interviews indicated that program review is still regarded by many members of the College community as a mechanism for requesting resources, rather than for program improvements, many of which might not require additional resources.
 - iv) The required linkage of objectives to the College's Strategic Plan goals often results in a forced or meaningless connection. On the other side of that connection, Goal 3, which is to improve the quality of educational programs and services, can cover a multitude of activities that might or might not produce measurable improvements. Sound practice does not call for every single unit improvement objective to be tied to a strategic goal; in many cases, a perfectly legitimate unit objective deals with unit-specific issues with no strategic implications at all.
 - v) Otherwise, the program review process at the unit level evidently pays scant attention to higher-level planning (e.g., changes in the objectives or activities under each Strategic Goal). However, reportedly the Vice Presidents do ask their managers to think about the larger context when they prepare their resource requests, and do consult the Strategic Plan and the ILOs when they prepare their merged lists of resource request priorities. Documentation of these activities was not available to me.
 - vi) Participation in program review beyond those charged with preparing the reports is reportedly inconsistent, with faculty and staff in many departments largely omitted from the discussion of program effectiveness and needs. In the Fall 2011

- accreditation surveys, nearly one-third of respondents marked “not applicable/no experience with this” for two questions on program review.
- vii) Descriptions of the review and approval routes for program review and resource allocation prioritization across documents and interviewees were inconsistent, indicating the existence of some confusion about them.
 - viii) The scoring rubric for resource requests has not been revisited since it was established in 2010. However, it is reportedly scheduled for review by the Budget and Planning Committee this year.
 - ix) In practice, notification of the campus community regarding the final results of the resource allocation process is haphazard; reportedly most people (other than budget managers who receive additional allocations) find out about them via the grapevine. One interviewee stated that the top criticism of the whole process is that resource requests enter a black box, and no feedback ever gets out.
 - x) Quality control of program reviews is inconsistent. In Instruction, EPC can send back comprehensive reports that fall short of expectations, but rarely if ever does so; it also gives written recommendations on annual reports for implementation in the following cycle, but until this year has not made a practice of checking on that implementation later. Quality control activities in Administrative Services and Student Services are unknown to me.
 - xi) Although resource requests are rolled up to the divisional and College levels, no thematic analyses or other summaries across all program review findings are prepared. The lack of such summaries or the equivalent makes it more difficult to measure even qualitatively the overall impact of the program review process on the institution’s effectiveness.
 - xii) Self-evaluations of committees involved in the process focus more on committee mechanics (e.g., minutes) than on the effectiveness of the process.
 - xiii) Evaluation and improvement of the process as a whole is not as systematic as it should be. The Fall 2011 institutional effectiveness survey included two questions on program review. The program review templates include an open-ended section soliciting suggestions for improvement of the process, and in Instruction, EPC asks for feedback on the process during its one-hour hearings on comprehensive program reviews, and discusses and requests changes in the online system based on that feedback and its own examination of the screens. The group(s) historically responsible for review and revision of the noninstructional program review model are unknown to me. PROC, which will report to College Council, was charged in the July 11, 2013 AIP Summary with evaluating the effectiveness of the program review process in all areas, as well as with standardizing program review practices, but the group has just begun its work, and I do not know its progress.
- 5) The College is considering a revision in the schedule of program review to allow more time for the process, but presumably that revision will await the results of PROC’s initial overall evaluation.
 - 6) Beginning in 2013-14, the EPC will review and provide feedback on the merged list of instructional resource request priorities prepared by the Vice President for Academic Affairs.
 - 7) The most difficult portion of the Recommendation to address will be monitoring the effectiveness of planning and resource allocation decisions “in achieving improvements in student learning” at the institutional level, in part because there is no system in place at

present to measure such improvements at that level, much less to connect them demonstrably with planning and resource allocation decisions.

Consultant Recommendations: Actions to Close the Gap

- 1) See “Mission Learning Report” on page 17 regarding major planning processes other than program review.
- 2) See “Integration with Planning and Resource Allocation” on page 20 regarding consideration of PLOs, ILOs, and the standards for student learning in all program reviews.
- 3) In the annual process it develops for evaluation and improvement of the planning and resource allocation processes at Mission, PROC should include consideration of the extent to which program plans contribute to student achievement, the achievement of student learning and other outcomes, and pursuit of the mission.
- 4) In its first annual evaluation, I suggest that PROC consider improvements in the following areas to address issues that the evaluation team and I have identified:
 - a) Assuring participation by all programs
 - b) Facilitation of broad participation in program review within each program, with administrative support
 - c) Allowing sufficient time for participation, sound analysis, and meaningful dialogue
 - d) Quality control for program review submissions in all areas
 - e) Development and maintenance of accurate, unambiguous directions for completing each field, for both instructional and noninstructional programs
 - f) Systematic and timely notification of all participants and the whole campus community of the final results of the annual resource allocation prioritization process
 - g) Modification of the requirement that every objective must be mapped to a Strategic Plan goal, to minimize the forced connections that occur now. One alternative is to require that at least one objective clearly support pursuit of a College goal.
 - h) Training (in the form of clearly written, effectively disseminated guides, suitable for standalone use or for training sessions) to program review participants in the following areas:
 - i) The nature, purposes, and benefits of program review
 - ii) Appropriate application and interpretation of evidence
 - iii) Proper formulation of program objectives
 - iv) Steps in the process, through prioritization of resource requests

Recommendations 7 and 9: Student Support Services Scope and Program Review and Outcomes Assessment

Recommendation 7: Student Support Services Scope:

To meet the Standards, the team recommends the college undertake an overall assessment of its student support service offerings to determine the full scope of services it needs to offer to meet the diverse needs of its students as well as all federal and state requirements. The assessment should also determine the level of staffing needed to deliver an acceptable level of services based on its budgeted student enrollment, and develop the resources needed to employ the staff required to deliver the planned services. (II.B.1, ER 14)

- II. B.1. The institution assures the quality of student support services and demonstrates that these services, regardless of location or means of delivery, support student learning and enhance achievement of the mission of the institution.
- ER14. Student Services: The institution provides for all of its students appropriate student services that support student learning and development within the context of the institutional mission.

Recommendation 9: Student Support Services Program Review and Outcomes Assessment
To meet the Standards, the team recommends the college ensure that all student support programs, including counseling for distance education students, are actively engaged in the program review and outcomes assessment process to determine how they contribute to the institutional student learning outcomes. All of the student services programs and services should complete a full cycle of review and assessment which includes gathering of data, analysis of data, implementation of program changes for improvement and the re-evaluation of implemented improvements (II.B.3, II.B.3.c, and II.B.4).

- II.B.3. The institution researches and identifies the learning support needs of its student population and provides appropriate services and programs to address those needs.
- II.B.3.c. The institution designs, maintains, and evaluates counseling and/or academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function.
- II.B.4. The institution evaluates student support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.

Observations: Progress to Date and Issues Requiring Action

Scope of Services

- 1) Assessment of Student Services occurs primarily at the unit level through program review, which reportedly began in about 2008; I found no evidence of any systematic prior assessment of the full complement of services taken as a whole.
- 2) In Student Services, most departments engage in the assessment of their own individual students' needs in the ordinary course of business, but systematic assessment of students' diverse needs, and coordinated matching of students to the services they need, reportedly do not occur. For example, the Mission admissions application asks students to self-identify their need for child-care services, but the Child Development Center receives no report of such students from Admissions, and therefore cannot follow up with them.
- 3) As both the Self-Evaluation Report and the evaluation team note, Student Services at Mission, as at most California Community Colleges, have been hit very hard by the economic pain of the last several years, particularly because of cutbacks in Matriculation-funded services. As a consequence, despite the best efforts of personnel to compensate for the losses, services to students have declined to what the team clearly regarded as unacceptable levels—to such an extent that the team warned of noncompliance with regulatory requirements. To date, reportedly little progress has been made in recovering from those cuts. (That said, Student Services staff reportedly are not aware of any federal or state requirements that their scope of services does not meet at present.)
- 4) As the evaluation team observed in its Human Resources discussion, Mission “does not have a staffing study or a staffing projection plan to provide guidance for determining adequate staffing levels.” The AIP Summary of July 11, 2013 does call for a Dean, the Vice President for Academic Affairs, and the Vice President for Student Services to “review learning

support services throughout the campus and develop a plan to improve efficiency of services by spring 2014,” but efficiency is only part of the assessment that is needed.

- 5) The SSSC has begun development of a Student Services Master Plan, which is scheduled for completion by the end of Fall 2013. As noted in the Recommendation 4 section (see page 29), it includes strategies for improving online services for students.

Program Review and Outcomes Processes

- 1) In Student Services, responsibility for coordinating program review and the outcomes process that is part of it rests with the SSSC. However, the Committee reportedly reviews and validates only the triennial comprehensive program reviews, not the annual updates. Improvements suggested by the Committee reportedly need not be implemented until the following cycle. It is not at all clear whether anyone inside or outside the program monitors ongoing assessment of outcomes, implementation of improvements, or pursuit of the objectives in any formal, documented fashion between the comprehensive reviews.
- 2) The availability of an online program review system that integrates assessment, planning, and resource allocation at the unit level is a terrifically valuable tool for Student Services and the College as a whole. However, my examination of the 2012-13 Student Services program reviews and outcomes assessments, together with interview results, indicated that the departments in this area require considerable assistance in improving these processes to resolve Recommendation 9, to achieve the required levels in the applicable ACCJC rubrics, and most importantly, to ensure that these services maintain and enhance their effectiveness in meeting student needs. The following represents a selection of the issues I have identified (which apply in many cases to Administrative Services as well as Student Services):
 - a) The language in some prompts is problematic. For example, under Professional Development Needs, the question addresses faculty needs, but omits mention of classified staff and manager needs; the prompts in the Accreditation or Compliance Status and subsequent Recommendations sections mention only accreditation, which some respondents arguably misconstrue; and the Program Mission section asks not for a mission statement, but rather for a description of the program’s purpose.
 - b) Judging from misconstrued, redundant, misplaced, contradictory, blank, or otherwise inappropriate entries, many respondents seem to have encountered difficulty in using the online template and/or in understanding the intent of the prompts. Training refreshers, clarifying documentation, and/or system improvements in both substance and form appear to be in order.
 - c) Departments have tools such as locally maintained data, SARS GRID, point-of-service surveys, and District surveys to help measure their impact and effectiveness. However, the surveys and other types of evidence cited are too often dated or based on very small samples (e.g., only one program made any reference at all in its 2012-13 program reviews to results of surveys done in 2011-12), and therefore of less utility than more recent and robust data would be. Moreover, some interpretations of the data that are supplied indicate the need for assistance in understanding the proper application of those data. Reportedly, Student Services staff have received little or no training in research, assessment, or data interpretation.

- d) SAOs and SLOs
 - i) The formulation of SAOs and (where applicable) SLOs is of inconsistent quality. Some SAO statements bear no relation to SAOs, and others appear to confuse SAOs (the results of what we seek to do, from our clients' perspective) with objectives (what we seek to do to serve our clients).
 - ii) Linkages to ILOs, which are evidently required in Student Services, often appear forced or inappropriate. (See page 18 for consultant recommendation for SLOAC to modify this requirement.)
 - iii) Some assessment methods do not fit the outcome to be measured.
 - iv) Some respondents appear confused about the meaning and use of the Results section.
 - v) One major point of engaging in outcomes assessment, of course, is ultimately to improve program effectiveness based on the results, but the utility of some SAOs in that respect appears questionable.
 - vi) Benchmarks or criterion levels for satisfactory performance on SAOs and SLOs are not specified, so program staff are not in a position to judge systematically whether improvements are needed based on assessment results.
- e) Objectives
 - i) Many objectives are really just resource requests, rather than initiatives to improve services. (This pattern is consistent with the reported view of program review in Student Services primarily as a mechanism for requesting resources, rather than for program improvement.) The quality of others varies considerably.
 - ii) As with outcomes and ILOs, linkages between objectives and College goals often appear forced or inappropriate.
 - iii) Entries under Activity, Expected Outcome and Measure, and Assessment are more problematic than those in the other fields.
- f) See also the Recommendation 6 section (page 33) for other issues related to program review.
- 3) The 2012-13 Counseling program review does acknowledge some needs in the area of online counseling (e.g., more ongoing training, computer accessories) and that a counselor serves on the Distance Education Committee, but it does not include the systematic assessment of the adequacy of online counseling services called for by the evaluation team.
- 4) Interviews confirmed the evaluation team's finding that dialogue in Student Services program reviews was uneven across programs. Indeed, reportedly most program reviews are prepared largely by directors, with little or no participation by line staff.
- 5) There is reportedly no system for tracking and reporting on the status of either the program review cycle or the outcomes cycle in Student Services. Consequently, such tracking and reporting is a manual job, done by a de facto program review and outcomes coordinator as part of her faculty load.
- 6) The contribution of progress on the Student Services SAOs to progress on the ILOs has not yet been discussed.
- 7) All Student Services programs are scheduled to perform a comprehensive program review in either Fall 2013 or Spring 2014.

Consultant Recommendations: Actions to Close the Gap

- 1) See “Integration with Planning and Resource Allocation” on page 20 regarding consideration of SAOs, ILOs, and the standards for student learning in all program reviews.
- 2) Scope of Services: Student Services Master Plan
 - a) Assessment and Enhancement of Services to Meet Student Needs
 - i) SSSC should incorporate into the Student Services Master Plan now in development a comprehensive assessment of the scope of services now offered, the enhancements reasonably required to meet the needs of Mission’s diverse student population and all applicable regulatory mandates over a three-year period, and the staffing and other resources reasonably required to implement those enhancements.
 - ii) The assessment should be based on sound evidence, including but not limited to comparative analysis of student services and associated staffing at other LACCD and California Community Colleges, analysis of the needs of students and student subgroups at Mission, current distribution of personnel and other resources, any applicable standards in the field, state and federal requirements, projected enrollment growth, and availability of funding from all sources. It should also be integrated with broader human resources planning at the College.
 - iii) The Plan should set forth concrete recommendations for implementing the enhancements, with firm timelines, responsible persons or groups, and resources required in the first, second, and third year of implementation.
 - iv) Under the leadership of the President, the Vice President for Student Services, and SSSC, the College should commit to implementation of this portion of the Plan.
 - v) The Vice President for Student Services should submit the associated resource requests in timely fashion every year until the recommended service enhancements have been fully implemented.
 - b) Matching Students in Need to Services
 - i) SSSC should also incorporate into the Student Services Master Plan the development and timely implementation of one or more methods for systematically assessing student needs (see Recommendation 5 section, page 31), matching students in need to the appropriate service(s) in coordinated fashion, and documenting the process and its results. Such methods might include, for example, two that other colleges have used successfully:
 - (1) Automatically reporting students’ self-identified needs from the admission application (with appropriate permissions built in) to the services relevant to those needs for appropriate follow-up.
 - (2) Creation and effective dissemination of a more student-friendly directory of services, organized by needs rather than by department name.
 - c) SSSC should also incorporate into the Student Services Master Plan the assessment and continuous improvement of services—especially counseling, in light of the language in the Recommendation—for Distance Education students. This effort should be coordinated with the DE Committee.
 - d) In its deliberations on the Student Services Master Plan, SSSC should evaluate its own role in coordinating program review and the outcomes process in Student Services, and recommend improvements as needed. Discussion should include whether review of

- annual program updates is needed, and who bears responsibility for monitoring program progress between comprehensive reviews.
- e) SSSC should review the Plan and recommend revisions as needed on an annual basis.
- 3) Program Review and Outcomes Processes
- a) SSSC should review the issues identified beginning on page 39; determine whether any of them warrant changes in the noninstructional program review template; if any do, consult as needed with other users of that template; and request changes in areas on which all users reach consensus.
 - b) The SLO Coordinator and the Student Services SLO/Program Review Coordinator should provide refreshers in the outcomes cycle and program review for all Student Services unit managers as they start the program review process this Fall. The refreshers should be designed to remind participants that:
 - i) Broad participation in the dialogue concerning outcomes assessment and program review is important.
 - ii) Each SAO or SLO should be formulated properly with respect to type, language, content, and scope; clearly measurable by carefully specified quantitative and/or qualitative assessment methods as appropriate; and designed in such a way that assessing it will provide information useful in gauging whether each service is meeting identified student and institutional needs and in improving each service accordingly.
 - iii) Each assessment method, whether qualitative or quantitative, should be clearly tied to and suitable for the outcome it is supposed to measure.
 - iv) Objectives are not resource requests; they are program improvement steps, some of which might require resources to achieve.
 - v) The conceptual line from outcome to assessment method to results to analysis to improvement objectives (and resources, where applicable) to reassessment should be very clear.
 - c) SSSC, in consultation with OIE, should develop a method for gauging the contribution of Student Services SAOs to achievement of the ILOs. For example, one approach might involve a qualitative mapping narrative persuasively demonstrating links between certain SAOs and certain ILOs, followed by measuring the degree of achievement of those SAOs, and concluding with calculating the contribution to the applicable ILOs that that degree of achievement represents. (See also “Mission Learning Report” on page 17.)
 - d) Each program in Student Services should establish a benchmark for satisfactory performance on each of its SLOs and SAOs.
 - e) Student Services programs should be included in the master schedule for outcomes assessment (see page 17).
 - f) The Vice President for Student Services and the SLO/Program Review Coordinator should strongly encourage unit managers and Outcomes Leads in the area to sign up for the data training sessions described on page 25.
 - g) SSSC should evaluate existing monitoring of the status of outcomes assessment and program review, and implement improvements as required to enable the group to generate accurate status reports in both areas with minimal labor.
 - h) SSSC should ensure that all programs complete the full cycle of program review—through both implementation of improvements and reevaluation of performance after a reasonable period of implementation—as soon as possible.

- i) SSSC should consider modification of the requirement that every objective must be mapped to a Strategic Plan goal, to minimize the forced connections that occur now. One alternative is to require that at least one objective clearly support pursuit of a College goal.
- j) As noted on page 26, each Student Services program should consult with OIE before its next administration of a point-of-services or other survey, and make recommended changes to ensure consistent quality and utility across all departments.
- k) Student Services should identify the programs that have been most successful in engaging in meaningful dialogue about their effectiveness (especially during program review), and those that have been most successful in assessing their outcomes and using the results productively, and provide structured opportunities (e.g., workshops on flex day, portions of divisional meetings) for those programs to share their techniques with the rest.

Accrediting Commission Action Probabilities

Making predictions about Commission actions is a dangerous enterprise at best, because of uncertainties inherent in its processes. However, I will hazard an estimate of probabilities, based on the gap analysis in this report. In my judgment, if the College works very productively between now and March 2014 along the lines set forth in the consultant recommendations above, and writes a strong Follow-Up Report, the most probable outcome of the June 2014 Commission meeting is continuation on Warning, with a requirement for another Follow-Up Report by October 2014 or March 2015. (The latter would be far better for the institution than the former, but the College has no say in the timing of the Follow-Up Reports.) Full reaffirmation is possible, but relatively unlikely because of the sheer scope and number of the Recommendations, unless the College makes extraordinary progress remarkably quickly on all fronts. However, a move down to Probation or Show Cause is also unlikely, given demonstrable, appropriate College effort and significant progress over the next few months.