PEER REVIEW TEAM REPORT

West Hills College Coalinga 300 W Cherry Lane Coalinga, CA 93210

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

Dr. Henry Yong Team Chair

Table of Contents

Summary of Focused Site Visit	5
Commendations	<i>6</i>
Recommendations	<i>6</i>
Introduction	7
Eligibility Requirements	8
Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies	10
Public Notification of a Peer Review Team Visit and Third Party Comment	10
Standards and Performance with Respect to Student Achievement	11
Credits, Program Length, and Tuition	12
Transfer Policies	13
Distance Education and Correspondence Education	13
Student Complaints	15
Institutional Disclosure and Advertising and Recruitment Materials	16
Title IV Compliance	16
Standard I	18
I.B. Assuring Academic Quality and Institutional Effectiveness	19
I.C. Institutional Integrity	22
Standard II	25
II.A. Instructional Programs	25
II.C. Student Support Services	31
Standard III	33
III.A. Human Resources	33
III.B. Physical Resources	36
III.C. Technology Resources	37
III.D. Financial Resources	38
Standard IV	41
IV.A. Decision-Making Roles & Processes	41
IV.B. Chief Executive Officer	43
IV.D. Multi-College Districts or Systems	47
Quality Focus Essay	
Appendix A: Core Inquiries	52
Peer Review Team Roster	53
Summary of Team ISER Review	54
Core Inquiries	55

West Hills College Coalinga Peer Review Team Roster TEAM ISER REVIEW

Dr. Henry Yong, Team Chair Yosemite Community College District Chancellor

Kim Lopez, Vice Chair Canada College President

ACADEMIC MEMBERS

Dr. Laura Adams Norco College Associate Professor, Psychology

Dr. Roland Finger Cuesta College Instructor, English

Dr. Aulii Silva Leeward Community College Grants Research & Program Development Specialist

Karen Wong Skyline College Coordinator of Institutional Effectiveness / Professor, English

ADMINISTRATIVE MEMBERS

Dr. Denise Richardson Berkeley City College President

Carlos Lopez
Folsom Lake College
Dean of Business, Curriculum and Scheduling

ACCJC STAFF LIAISON

Dr. Gohar Momjian Vice President

West Hills College Coalinga Peer Review Team Roster FOCUSED SITE VISIT

Dr. Henry Yong, Team Chair Yosemite Community College District Chancellor

Kim Lopez, Vice Chair Canada College President

ACADEMIC MEMBERS

Dr. Aulii Silva Leeward Community College Grants Research & Program Development Specialist

Karen Wong Skyline College Coordinator of Institutional Effectiveness/Professor, English

ACCJC STAFF LIAISON

Gohar Momjian Vice President

Summary of Focused Site Visit

INSTITUTION: West Hills College Coalinga

DATES OF VISIT: February 20-21, 2024

TEAM CHAIR: Dr. Henry Yong

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

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

The team chair and vice chair held a pre-Focused Site Visit meeting with the college CEO on Tuesday, January 16, 2024, to discuss updates since the Team ISER Review and to plan for the Focused Site Visit. During the Focused Site Visit, team members met with approximately 75 faculty, administrators, classified staff and students in formal meetings, group interviews and individual interviews. The team held one open forum, which was well attended, and provided the College community and others with the opportunity to share their thoughts with members of the Focused Site Visit team. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement. The team thanks the College staff for coordinating and hosting the Focused Site Visit meetings and interviews, and for ensuring a smooth and collegial process.

Major Findings and Recommendations of the Peer Review Team Report

Commendations
None
Recommendations
None
Recommendations to Meet Standards
None
Recommendations to Improve Quality
None

Introduction

Established formally as an independent institution in 1961, West Hills College Coalinga is one of two colleges in the West Hills Community College District (WHCCD). The College's history of service to the west side of the San Joaquin Valley extends back even further to 1932, when it originally operated as an extension center of Fresno State College and the Coalinga Union High School District. The main campus of the College is made up of 40 acres on Cherry Lane in Coalinga. The College added a second campus at Firebaugh in 1971 and operates agricultural programs and facilities on the 213-acre Farm of the Future.

The College currently enrolls 5,700-7,000 students per year serving eight area high schools. The College serves nearly 112,985 residents of the western portion of Fresno County and the southwest portion of King's County.

During the focused site visit, the team observed the following practices that were noteworthy:

- The number of faculty and staff who pridefully and affectionately credited Coalinga as the college that launched their post-secondary journeys was truly impressive. The team appreciated learning about the District's notable "Upskill Program," whose stated goal is to provide entry-level leadership fundamentals for employees interested in higher education management and administration. (III.A.14)
- The campus tour allowed the team to see recently remodeled facilities such as the
 MESA "Nest," the Student Services One-Stop Center, and the "Essentials Center," where
 enthusiastic, equity-minded staff have reimagined, renovated, and rebranded programs
 to engage specific student sub-populations. Despite being located within different
 buildings and offering services to achieve different objectives, the previously named
 facilities conveyed a consistent "look and feel" that undoubtably fosters "Falcon Pride."
 (II.C.3)
- Related to the aforementioned student-oriented facilities is how the College leveraged corporate and community partnerships to fund these improvements. For example, the MESA Center partnered with Chevron and AERA to support its expansion and acquisition of furniture and 3-D printers. (III.B.3)
- The College is on the path towards increasing student outcomes and achievement through concerted analysis of data at the college and program level, available through dashboards that enable disaggregation. Program reviews illustrate the robust use of data to arrive at program goals, decision-making and strategic planning. (I.B.5)

The College's goal to strengthen institutional effectiveness through participatory governance is evident in the committee evaluations and 2022-2023 Participatory Governance and Integrated Planning Manual. The Student Success Committee's efforts are especially notable. Collaboration across constituent groups and the recent adoption of the tri-chair model have inspired changes that are positively impacting student achievement. For example, the Falcon Pathways was created to provide students with a recommended sequence of courses to complete each type of degree within a two-year time frame. They are readily available from the College website as well as in the One-Stop Center. The Student Success Committee also worked closely with the Accreditation, Research, Institutional Effectiveness, and Planning office to create a dashboard that captures key momentum points toward a degree and enables disaggregation. They monitor these metrics regularly, and programs are making use of these data to shape their goals. For example, in their program review, the Counseling Program aims to increase the number of students with comprehensive education plans. Their efforts were seen in part throughout campus, where signs ask, "got an Ed Plan?" to remind students. (I.B.1, I.B.5)

Eligibility Requirements

1. Authority

The team confirmed that West Hills College – Coalinga is authorized to operate as a public post-secondary degree-granting educational institution. The College operates under the authority of the State of California, the Board of Governors of the California Community Colleges, and is part of the West Hills Community College District. WHCC has been continuously accredited by the Accrediting Commission for Community and Junior Colleges (ACCJC) of the Western Association of Schools and Colleges (WASC) continuously since 1952.

The College meets the Eligibility Requirement.

2. Operational Status

The institution is operational, with students actively pursuing its degree programs. The evaluation team confirmed that West Hills College Coalinga (WHCC) has over forty-four programs and regularly serves between 5,700 and 7,100 students each year. The College is operational, and students enrolled there are actively pursuing degrees and certificates.

The College meets the Eligibility Requirement.

3. Degrees

The team confirmed that a substantial portion of WHCC's educational offerings are programs leading to degrees and certificates. The college offers 31 degrees (AA, AS, and ADT's) and 24 certificates in varied academic and career education fields. The team confirmed that WHCC's associate degrees require 60 units (2 academic years), including an appropriate general education component and a concentration within a major or area of emphasis.

The College meets the Eligibility Requirement.

4. Chief Executive Officer

The institution has a chief executive officer appointed by the governing board, whose full-time responsibility is to the institution, and who possesses the requisite authority to administer board policies. Neither the district/system chief executive officer nor the institutional chief executive officer may serve as the chair of the governing board. The institution informs the Commission immediately when there is a change in the institutional chief executive officer.

The evaluation team confirmed that Dr. Carla Tweed was appointed as West Hills College Coalinga President by the WHCCD Board of Trustees on December 14, 2021. She began her service on January 14, 2022. The President is responsible for planning, organizing, and coordinating the efforts of the College and serves under the direction of the Chancellor. Dr. Tweed is not a member of the governing board, and the Commission was notified of her appointment as the College President on January 25, 2022.

The College meets the Eligibility Requirement.

5. Financial Accountability

The team confirms that WHC Coalinga, as part of WHCCD, undergoes annual audits performed by external certified public accountants who share the report with the district's Governing Board. The college ensures compliance with Title IV regulations.

The College meets the Eligibility Requirement.

Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies

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

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

Evaluation Items:

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

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

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

Narrative:

ACCJC did not receive any applicable third-party comments.

Standards and Performance with Respect to Student Achievement

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

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

Narrative: The team confirmed that WHC Coalinga has established elements of student achievement primarily through their Institutional Set Standards (ISSs), specifically course success,

degrees awarded, certificates awarded, transfer to four-year institutions, licensure pass rate, and job placement. Through governance committees and program review, the College has a process to set goals, review them annually, and respond when performance is not at the expected level. Data dashboards include enrollment, completion, cohort momentum metrics and Student Success metrics, and can be employed at the program level for program review.

Credits, Program Length, and Tuition

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

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

Narrative: The College meets the regulation.

Transfer Policies

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

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

Narrative: The College meets the regulation.

Distance Education and Correspondence Education

Evaluation Items:

For Distance Education:	
X	The institution demonstrates regular and substantive interaction between students and the instructor in at least two of the methods outlined in the Commission <i>Policy on Distance Education and Correspondence Education</i> .
Χ	The institution ensures, through the methods outlined in the Commission <i>Policy on</i>

	Distance Education and Correspondence Education, regular interaction between a student and an instructor or instructors prior to the student's completion of a course or competency.
Х	The institution demonstrates comparable learning support services and student support services for distance education students. (Standards II.B.1, II.C.1)
X	The institution verifies that the student who registers in a distance education program is the same person who participates every time and completes the course or program and receives the academic credit.
For Co	rrespondence Education:
	The institution demonstrates comparable learning support services and student support services for correspondence education students. (Standards II.B.1, II.C.1)
	The institution verifies that the student who registers in a correspondence education program is the same person who participates every time and completes the course or program and receives the academic credit.
Overa	II:
Χ	The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings. (Standard III.C.1)
Χ	The institution demonstrates compliance with the Commission <i>Policy on Distance Education and Correspondence Education</i> .

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

Conclusion Check-Off (mark one):

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

Narrative: The team reviewed a sample of online courses from Spring 2023 and examined evidence related to College distance education policies and procedures. The College meets the regulation.

Student Complaints

Evaluation Items:

X	The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.
X	The student complaint files for the previous seven years (since the last comprehensive review) are available; the files demonstrate accurate implementation of the complaint policies and procedures.
Х	The team analysis of the student complaint files identifies any issues that may be indicative of the institution's noncompliance with any Accreditation Standards.
X	The institution posts on its website the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities. (Standard I.C.1)
X	The institution demonstrates compliance with the Commission <i>Policy on Representation of Accredited Status</i> and the <i>Policy on Student and Public Complaints Against Institutions</i> .

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

Conclusion Check-Off (mark one):

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

Narrative:

During the focused site visit, the Team reviewed Student Complaint files. It noted that the College has addressed concerns raised in student complaints per its policies. The team confirmed that the College meets the requirements.

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

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

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

Narrative:

The College meets the requirement.

Title IV Compliance

Evaluation Items:

X	The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the U.S. Department of Education (ED). (Standard III.D.15)
X	If applicable, the institution has addressed any issues raised by ED as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements. (Standard III.D.15)
Χ	If applicable, the institution's student loan default rates are within the acceptable

	range defined by ED. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. (Standard III.D.15)
X	If applicable, contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required. (Standard III.D.16)
X	The institution demonstrates compliance with the Commission <i>Policy on Contractual Relationships with Non-Accredited Organizations</i> and the <i>Policy on Institutional Compliance with Title IV</i> .

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

Conclusion Check-Off:

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

Narrative:

The College has policies and procedures to monitor loan default rates and addressed prior audit findings.

Standard I

Mission, Academic Quality and Institutional Effectiveness

I.A. Mission

General Observations:

West Hills Coalinga College demonstrates its commitment to its students through its mission and provides broad educational opportunities that align with their students' goals and community's needs. The College's programs of study are diverse and offer pathways into local workforce needs, as well as current and emerging economic opportunities. Through the College's program review process, that drives its planning and resource allocation priorities, the College aligns its programs, services and resources toward its mission in support of the communities it serves. The College reviews its mission regularly, revises it as appropriate, and submits it to the Board of Trustees for their approval.

Findings and Evidence:

The College's revised mission describes the institution's broad educational purpose as "foster[ing] equity and economic mobility by providing the environment to think critically, communicate effectively, and develop leadership skills to support our diverse communities." The College accomplishes this objective by offering quality learning experiences to its diverse student population. The College's certificate and degrees programs prepare students to transfer and enter careers that meet workforce needs within the local and regional community. (I.A.1)

To determine its effectiveness in accomplishing its mission, the College takes a comprehensive approach to collecting and analyzing institutional and external (e.g., local and regional) data. All personnel receive access to program review dashboards to track the College's progress toward its success, equity, and achievement outcomes. The Team noted that the College's participatory governance organizations, administrators, and trustees ensure mission and program alignment as evidenced by their recent work on Annual Program Reviews, Strategic Plan (2021 - 2026), and Education Master Plan (2022 - 2032). (I.A.2)

In May 2022, the College convened a representative body to devise a comprehensive educational master plan that would ensure mission alignment. After reviewing internal and external data alongside the revised mission, this task force generated the Educational Master Plan (2022 – 2032) that will guide the College's efforts to increase student enrollment and success for rural communities, inmates, adult learners, international students, and student athletes. (I.A.3)

The College publishes its mission statement widely through its website, catalog and within highvisibility areas throughout the District. The Executive Cabinet meets with all new hires in a mixed employee group session to introduce them to the College's mission, values, purpose, intended student population, and programs. The College's last mission statement was approved by the Board of Trustees in January 2017, following a three-year cycle of reviews, assessments, and revisions led by the Vision, Values and Mission Task Force. On November 14, 2023, after campus-wide review by its participatory governance bodies, the Board voted to approve a revised mission statement that commits the College to "foster[ing] equity and economic mobility" for Coalinga's diverse students and communities (I.A.4)

Conclusion: The College meets the Standard.

I.B. Assuring Academic Quality and Institutional Effectiveness

General Observations:

WHC Coalinga demonstrates a sustained and recursive process to improve the quality of its educational programs and services. Through program review, outcomes assessment, curricular review and governance processes, the College has structures in place to facilitate ongoing dialogue on student outcomes, student equity, academic quality, and institutional effectiveness. Data is central to this dialogue, which is evident in their many dashboards that enable disaggregation at the program level. WHC Coalinga acknowledges that outcomes assessment can be strengthened, which they intend to address.

Findings and Evidence:

Based on evidence presented in the ISER, WHC Coalinga has multiple means to engage in substantive dialogue about student outcomes, student equity, academic quality, and institutional effectiveness. Through its committees, program review and curricular processes, and professional learning opportunities, the College demonstrates a sustained and recursive process to improve the quality of its educational programs and services, as well as its overall institutional effectiveness. Among the notable changes documented in their Participatory Governance and Integrated Planning Manual 2022-2023 were ways to strengthen participatory governance, which emerged from each committee conducting its own self-evaluation. (I.B.1)

WHC Coalinga defines and assesses SLOs for all instructional programs and student and learning support services. Outcomes assessment is on a continuous cycle, with faculty convening each semester to discuss outcomes assessment, which includes plans for improvement. These reflections are documented in eLumen as well as integrated into program review. While the College meets the standard, it identified opportunities in the ISER to "elevate outcomes work to assure documented changes and action to further advance student achievement." (I.B.2)

WHC Coalinga has established Institutional Set Standards (ISS) for student achievement based on its mission, specifically course success, degrees awarded, certificates awarded, transfer to four-year institutions, licensure pass rate, and job placement. Minutes show that the development and establishment of ISS are on a three-year cycle and are collegially developed and approved by the Institutional Effectiveness and Accreditation Committee and College Council. ISS are published on the College website. Additionally, analysis of how programs are meeting ISS is part of the program review process. If programmatic rates are lower than ISS, program improvement plans are put in place to address them. (I.B.3)

WHC Coalinga makes robust use of assessment data at the college and program levels to advance student learning and student achievement. Evidence included the Institutional Set Standards, the Student Achievement SEA Plan, and sample program review reports, all of which included planned actions to address gaps identified from review of data. In addition to programmatic changes, program reviews also are the means through which programs access the resource allocation process. Requests are based on identified needs in the program review and then forwarded to the budget resources committee for review and prioritization. This prioritization is then shared with the College Council for review and recommendations to the college president for consideration in the upcoming year's budget. The College noted in the ISER its focus to strengthen and improve upon the use of assessment data to materialize documented changes to support and advance student learning and student achievement. (I.B.4)

WHC Coalinga's program review process is central to assessing accomplishment of their mission by instructional and student service units. Comprehensive program reviews are conducted regularly with instructional units every four years, career technical education units every two years, and non-instructional units every three years. The template and sample program reviews show that student access and performance data, as well as SLO assessment results, are used to evaluate goals and objectives. The Program Review Dashboard enables faculty to compare their program's outcomes to college-wide Institutional Set Standards, and to further disaggregate by location, modality and days/ times. This analysis enables them to identify areas for improvement and needs, as exemplified by program reviews such as Administration of Justice's and Sociology's. The same is true of student service programs, as exemplified by Admissions and Records, which drew from data on the volume of specific tasks and the time to complete them to inform their goals.

The College also noted the results of the committee evaluation, which led to several recommendations to strengthen participatory governance. The 2022-2023 Participatory Governance Manual incorporates many of these recommendations, one being that each committee submit an annual report to the College Council to assure that governance committees are working towards effectiveness. (I.B.5)

The Team confirmed that through data dashboards, the College disaggregates achievement data by ethnicity, gender, age and other sub-populations, as well as class types by length, location, and mode of delivery. Dashboards that enable disaggregation include enrollment, completion, cohort momentum metrics and Student Success metrics. At the college level, analysis of the various dashboards resulted in the creation of the Falcon pathways whose goal is to accelerate student achievement through recommended sequences of courses for general education and majors. These same dashboards can be employed at the program level for program review. While the College meets the standard, they noted opportunities to strengthen how outcomes assessment can lead to changes and inform institutional planning and priorities. (I.B.6)

WHC Coalinga regularly evaluates its policies and practices across the College through College Council, governance structures, and program review. The College Council agenda and minutes noted specific Board policies and administrative procedures that were reviewed per the Board's established timeline. In addition, among the improvements the College cited was better aligning the program review and resource allocation timeline with the district budget planning process, and the Student Success Committee refining its charge and membership. Finally, as noted in IB5, program review prompts all administrative, instructional, and student and learning support services areas to evaluate and assure their effectiveness in supporting academic quality and accomplishment of the mission. (I.B.7)

The Team confirmed that WHC Coalinga has processes in place to facilitate communication and create a shared understanding of the institution's strengths and weaknesses and set appropriate actions. A review of agendas and minutes from the College Council, Institutional Effectiveness and Accreditation Committee, and Student Success Committee illustrate the central role that committees play in reviewing, discussing, and disseminating the information, for example in recommending changes to the Institutional Set Standard targets in 2023. Dashboards, the College website and e-mails to relevant stakeholders are additional vehicles leveraged by the Institutional Research Office to disseminate this information, including data that informs the program review cycle of evaluation and developing plans for improvement. During the site visit, the Team learned about additional ways in which the College engages the broader community. The President hosts monthly Falcon meetings over zoom to highlight major College decisions and participatory governance updates, inviting comments and questions from participants. The College also recently launched the Falcon Faculty Fridays in which faculty analyze their own outcomes data so as to inform potential curricular and pedagogical changes to best support achievement. (I.B.8)

WHC Coalinga engages in continuous, broad based, systematic evaluation and planning through its governance structures and processes, the latter of which is primarily spearheaded by the College Council under advisement by the Institutional Effectiveness and Accreditation Committee. For long- term planning, the Education Master Plan acts as a compass, and is

complemented by the 2021-2026 Strategic Plan, which establishes goals, strategies and core values in support of advancing the mission of the College. Additionally, the College adopted student success metrics, some of which are related to the Strategic Goals, for example percentage of students who have an educational plan by year one, and who have completed transfer level math and English. These key momentum point metrics are monitored by the College Success Committee. Both the EMP and Strategic Plan are supported by other plans and processes within the College's integrated planning structure, particularly program review. Sample program reviews illustrate programs evaluating their students' outcomes as compared to the College's Institutional Set Standards and aligning program goals with the College's strategic goals. From program reviews emerge resource needs. Their Integrated Planning & Resource Allocation Annual Timeline was recently updated so that the resource request submission date better aligns with the District's planning and resource allocation cycle. (I.B.9)

<u>Conclusions:</u> The College meets the Standard.

I.C. Institutional Integrity

General Observations:

The College assures clarity, accuracy, and integrity of the information that it communicates to students and the public through its website and catalog. Through established policies and procedures, the College promotes honesty, responsibility, and academic integrity. The College ensures compliance with Accreditation Eligibility Requirements, Standards, and Commission Policies.

Findings and Evidence:

The team confirms that students have access to clear, accurate information that maintains integrity about the mission statement, learning outcomes, educational programs and student support services through the college catalog, Falcon Pathways, the Strategic Plan, the Educational Master Plan, and the college website. (I.C.1)

The team confirms that the college provides a printable online catalog for students and prospective students that satisfies the "Catalog Requirements." (I.C.2)

The team reviewed the Program Review process and confirmed that the institution uses this process as the documented assessment of student learning and evaluation of student achievement to communicate matters of academic quality to appropriate constituencies, including current and prospective students and the public. The college releases an annual report on progress toward strategic goals, including data on student achievement. Progress

toward Institutional Set Standards is reviewed in Academic Senate, faculty learning areas, and governance committees. (I.C.3)

The team confirms that the institution describes its certificates and degrees in terms of their purpose, content, course requirements, and expected learning outcomes. Program descriptions include required courses, Program Student Learning Outcomes, and applicable transfer information. The Catalog is reviewed and updated annually. The college acknowledged that not all programs had current learning outcomes in the catalog or that the program learning outcomes were always clearly identified. The most recent catalog has been updated to include more complete and more accurate PSLOs. (I.C.4)

The team confirms that the college regularly reviews institutional policies, procedures, and publications to assure integrity in all representations of its mission, programs, and services. The Mission is reviewed in strategic planning process. The College Council includes all constituent groups to review policies & procedures. The Participatory Governance and Integrated Planning Manual includes a calendar and planned actions to assure integrity and alignment. (I.C.5)

The College provides public information for both current and prospective students regarding the total cost of education in the catalog and on the college website. (I.C.6)

BP 4030: Academic Freedom and the General Information portion of the catalog communicate the College's commitment to the free pursuit and dissemination of knowledge for all constituents, including faculty. (I.C.7)

The College has established clear policies and procedures that promote honesty, responsibility, and academic integrity for all constituencies. These policies and procedures are communicated on the website, in the catalog, and in board and administrative policies for standards of academic freedom, institutional code of ethics, student discipline, and standards of conduct. Course syllabi emphasize expectations for academic honesty and integrity. (I.C.8)

The College holds a clear expectation that faculty distinguish between personal conviction and professionally accepted views. This expectation is communicated in BP 4030: Academic Freedom and AP 3050: Institutional Code of Ethics (I.C.9)

Standards for ethical conduct for staff, faculty, administrators and students are communicated in Board Policy 4030: Academic Freedom, AP 3050: Institutional Code of Ethics, and BP 5500: Standards of Student Conduct, and the College catalog. The College does not seek to instill specific beliefs or world views. (I.C.10)

Standard I.C.11 does not apply to the College, as it does not operate in foreign locations. (I.C.11)

The College agrees to comply with Eligibility Requirements, Accreditation Standards, Commission policies, guidelines, and requirements for public disclosure as evidenced by supporting documentation posted to the College's website under Accreditation. Access to this information is linked to the College's landing, page and is included as a quick link at the bottom of every College webpage. (I.C.12)

The College demonstrates honesty and integrity in its relationship with external agencies while complying with and conducting its external reporting and publication responsibilities. Information about college wide accreditation is available in the College Catalog and the Accreditation webpage. Program specific accreditation information for the Psychiatric Technician program is communicated on the program webpage. (I.C.13)

Standard I.C.14 does not apply to the College. As a public, non-profit institution they have no investors or external interested parties. (I.C.14)

Conclusions:

The College meets the Standard.

Standard II

Student Learning Programs and Support Services

II.A. Instructional Programs

General Observations:

The College's instructional programs are aligned with the College's mission and accepted standards for higher education. These programs are developed through a faculty-led curricular review process. The College has sufficient policies and procedures in place to assess the quality of programs and use the results to improve educational outcomes. Program Review is the main component for evaluation of all programs on an established cycle and is a key component of the integrated planning process, including resource allocation. The data sets used for program review are comprehensive, include information that spans several years, and are disaggregated by student characteristics, delivery modalities, and locations. Program review also incorporates curricular review and the results of course and program student learning outcome assessments. The College has recently transitioned to eLumen and is working to ensure that program learning outcomes are up to date, accurate, and clearly communicated in the College catalog.

Findings and Evidence:

The team reviewed the College's ISER, website, College Catalog, course outlines of record, and program reviews. Our review confirmed that that all instructional programs, regardless of means of delivery, are offered in fields of study appropriate for higher education and consistent with the College's mission to assure "...delivery of high-quality academic instruction, programs, and support services." Furthermore, all instructional programs offered by the college lead to student attainment of identified learning outcomes and the achievement of degrees, certificates, employment, or transfer to other higher education programs. The College identified a need to update the catalog to ensure that all program learning outcomes are up to date and clearly identified. They acted to correct this gap quickly and the newest version of the catalog has clearly labeled program learning outcomes for all programs. (II.A.1)

The faculty at West Hills College – Coalinga regularly engage in the process of ensuring that the content and methods of instruction meet generally accepted academic and professional standards through the curriculum development and review process, as outlined in AP 7217, the Curriculum Handbook, and the Participatory Governance and Integrated Planning Manual. Distance Education courses have curriculum addendums to document that each course aligns

with policies regarding substantive and effective student-to-student, instructor-to-student, and student-to-content interactions. The team reviewed archived distance education courses and found varied levels of regular and substantive interaction (RSI). The College has an opportunity to strengthen their practices for supporting online faculty with training and ongoing support concerning RSI. Such support would ensure that the definition of RSI in AP 4105: Distance Education is consistently interpreted and applied within online courses.

Comprehensive program review is conducted on an established cycle of every two years for CTE programs, every four years for non-CTE programs, and every three years for non-instructional programs. In the years comprehensive program reviews are not due, each program submits a periodic program review. Outcomes assessment is an essential component of the program review process. Programs examine student achievement data, such as course success rates, institutional set standards, equity rates, award conferrals, student learning outcomes, program learning outcomes, program completion, and fill rates. The results of this analysis are discussed during SLO Assessment Days and used to generate specific plans for improvement. (II.A.2)

The team confirmed that the institution uses established institutional procedures to identify and regularly assess courses, programs, certificates, and degrees. Course level outcomes are available on the course outline of record, on course syllabi, and in eLumen. Program level outcomes are available in the college catalog and in eLumen. A review of sample course outlines of record, syllabi, and program review reports support that the college has appropriate processes to support outcomes assessment and use the results to improve instruction.

Assessment of student learning outcomes follows an established two-year cycle overseen by the Student Learning Outcomes (SLO) committee. The results of assessment are reviewed by faculty each semester. Course SLOs are mapped to program SLOs which are analyzed during the program review process. Faculty can use Simple Syllabus to pre-populate the correct SLOs for each course that come directly from the course outline of record. This increases consistency and ensures that all students receive a copy of the syllabus with the learning outcomes from the institution's officially approved course outline. The College has identified areas for improvement, including making sure all degree and certificate programs have learning outcomes that are approved and included in eLumen, making intentional efforts to close assessment loops through discussion, and documentation of changes made based on outcomes assessment. This work is made difficult by a lack of full-time faculty in some disciplines and programs, but the College is actively working with eLumen to ensure learning outcomes are mapped correctly. (II.A.3)

The College uses a differentiated course numbering system in the catalog and on course outlines of record to distinguish pre-college and college-level courses. Course descriptions for corequisite support courses clearly identify the linked college-level course. Courses are

approved and regularly reviewed through the College's curriculum process, which includes determination of the appropriate level of credit. Some non-credit courses serve as co-requisite support for transfer level math and English courses. (II.A.4)

The College's degrees and programs follow practices common to American higher education. Course and program development follow the guidelines in the CCC Chancellor's Office Program Course Approval Handbook. The College communicates information about course sequencing and time to completion using Falcon Pathways. These documents outline recommended course sequences for program completion for both full-time and part-time students. BP/AP 4100 Graduation Requirements for Degrees and Certificates establish the minimum of 60 semester credits for associate level degrees and ensure compliance with State regulations. Program descriptions in the course catalog indicate the number of units required for graduation. Evidence from the CTE Business program supports the College's practice of maintaining appropriate depth in associate degrees to meet workforce requirements. (II.A.5)

The College schedules courses delivered across multiple modalities and in a manner that ensures students can complete their programs within a period that is consistent with established expectations in higher education, as outlined in Goal 4 of the Strategic Enrollment Management Plan for 2023-2026: "Strategic class scheduling to ensure student completion." The schedule is constructed to align with program pathways called Falcon Pathways and built so that students can register for an entire academic year at a time. This ensures that students can complete their programs in a timely fashion and provides a plan for completion. (II.A.6)

The College meets the needs and learning preferences of its diverse student body by offering courses in a variety of instructional modalities and formats. Course Outlines of Record document the modes of delivery and instruction methodologies that can be used for each course. Courses approved for Distance Education also describe how the course will establish instructor-student, student-student, and student-content interaction in the online environment. The College offers equitable learning support services to both in person and distance education students. Discipline faculty serve in learning support services that includes the Math Center and Writing Center. The college regularly evaluates the effectiveness of its delivery modes through the Program Review process and uses the results to guide improvements. (II.A.7)

The College does not offer department-wide course or programs exams. The College documents and uses criteria for direct assessment of prior learning as outlined in BP/AP 4235 Credit for Prior Learning and AP 4236 Advanced Placement Credit. (II.A.8)

The team confirmed that the College awards course credit, degrees, and certificates based on student attainment of learning outcomes. Units of credit awarded are consistent with the

College's policies (AP 4020) and reflect generally accepted norms in higher education. The team reviewed policies, procedures, the College catalog, and course outlines of record. Course outlines detail the student learning outcomes, which are in turn mapped to program learning outcomes. The College utilizes generally accepted equivalencies in higher education, and the College follows that policy in awarding units of credit. The policy includes conversion of clock-to-credit hours that follow Federal regulations. An example from Math Program Review from Spring 2022 reveals assessment of course SLOs that are used in an effort to better serve student success. While SLOs and course outlines of record are vetted and approved through the curricular development process, department faculty oversee assessments that evaluate student achievement of course objectives and learning outcomes. (II.A.9).

The College supports transfer of credit, and has policies in place to facilitate the mobility of students from high school to West Hills College, and then on to other post-secondary institutions. These policies are outlined in BP/AP 4050: Articulation and are published on the college website and in the college catalog. The College has an Articulation Officer who regularly submits information to the ASSIST website, coordinates articulation information for the C-ID system, and submits course outlines of record for CSU-GE and IGETC certification approval. The College has ADTs that follow the Transfer Model Curriculum. (II.A.10)

The team validated that the College has both program specific learning outcomes (PSLOs) and institutional student learning outcomes (ISLOs) that address communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, and the ability to engage in diverse perspectives. PSLOs and ISLOs are communicated on the college website and in the course catalog. Falcon Pathways document all required courses for programs and certificates, including those that satisfy general education learning outcomes. Course student learning outcomes are mapped to program student learning outcomes. The results are rolled upward to evaluate PSLOs, and the results are incorporated in the Program Review process. In turn, Program Review is a key part of the integrated planning process at the College. ISLOs are typically assessed every four years. The assessment is coordinated by an ILO taskforce, which in turn shares the results with faculty and gathers recommendations for improvement. (II.A.11)

The team reviewed requirements for degree programs and confirmed that the College requires a general education component for all degree programs. The philosophy of the College regarding general education and its purpose are published in BP/AP 4025 and the college catalog. Students can meet general education requirements by completing the CSU-GE, IGETC, or a local general education pattern. The local pattern includes a breadth of expected knowledge for a degree in higher education, including areas related to Language and Rationality, Natural Sciences, Humanities, and Social Sciences. Faculty expertise is used to

identify courses for inclusion in general education through the curriculum development and review process. Course outlines of record indicate which courses are GE approved and include the relevant general education area. Course outlines of record show connections between course SLOs and General Education Student Learning Outcomes (GESLOs). (II.A.12)

The team confirmed that all degree programs include a focused area of study in a specific discipline or interdisciplinary core. The focused areas of study are communicated in the college catalog, Falcon Pathways, and on the college website, all of which include the required courses within the discipline. Programs include appropriate level student learning outcomes recorded in the course outline of record. (II.A.13)

The College uses Advisory Committees made up of faculty members and industry representatives to ensure that career training programs develop the competencies that are required by employment standards and preparation for external licensure and certification. The biannual Program Review process for career and technical education programs includes assessment data of student learning outcomes, which are based on student demonstration of technical and professional competencies. The College references its training for students to meet industry requirements in the fields of welding, commercial truck driving, and psych tech training. (II.A.14)

The college ensures that students can complete their education in a timely manner if a program is eliminated or significantly changed. These policies and procedures are outlined in BP/AP 4021: Program Viability. The College notes that program changes have mostly been a result of regulatory requirements impacting associate degrees for transfer. (II.A.15)

The College regularly reviews the effectiveness of all instructional programs through the processes of student achievement data, student learning outcomes assessment, program review, and curriculum review. The College provided evidence of these evaluation processes and the plans and improvements that resulted, such as the creation of a Math & Writing Center to improve student success. The work to improve programs and courses is systematic and integrated into the College's integrated planning process. (II.A.16)

Conclusions:

The College meets the Standard.

II.B. Library and Learning Support Services

General Observations:

The College provides library and learning support services to aid in student achievement and in alignment with its mission. The College ensures that such offerings are sufficient, current, and diverse through its library and learning supports to students at the Coalinga and Firebaugh campuses, as well as to its on-line and off-site learners in the Dual Enrollment and Rising Scholars programs. The College's learning support resources include: personnel who assist with library research and academic tutoring, as well as tools such as laptops, hotspots, calculators, and textbooks.

The College regularly evaluates library and learning support services usage using multiple methods: student surveys, program review, and outcomes assessment. Data collected from these multiple assessment methods are analyzed and synthesized to formulate program improvement as identified within the Library and LRC's Program Reviews and strategic planning Reports. The College establishes formal agreements when it relies on or collaborates with other institutions to secure library resources or learning support technologies.

Findings and Evidence:

The College regularly assesses the sufficiency and currency of its learning support services through surveys, learning outcomes assessments, program reviews, and utilization data. Student learning and achievement is supported by student tutors in core subjects offered in locations, languages, and in modalities that demonstrate responsiveness to students: in-person and online, day and evening, and in the Spanish language. Writing and Math Centers both at Coalinga and Firebaugh Campuses, provide tutoring by discipline faculty, both in person and online. Direct support to Dual Enrollment and Rising Scholars students is provided by the College's librarians. (II.B.1)

The College relies on the expertise of faculty, librarians, and other learning support professionals to select and maintain its learning support services and resources. Through direct feedback to librarians and through their course outline of records, instructional faculty's expertise drives the selection of books, journals, and instructional materials. (II.B.2)

Librarians and learning support professionals regularly survey students to assure how well they are meeting students' needs and as the basis for making program improvements. Outcomes assessment data and analysis presented in the Library and Learning Resources Center's Program Review demonstrate how librarians and learning support professionals regularly evaluate how their resources and services contribute to student achievement and learning outcomes. (II.B.3)

The College establishes formal agreements when it collaborates with other institutions or sources for library or learning support resources. The College's library database subscription

was established and funded by an Institution Participation Agreement under the supervision of the California Community Colleges Chancellor. ExLibris and EZ Proxy databases through a District-level contract. A relationship with the Fresno County Library has been established via a formal Memorandum of Understanding.

The Team applauds the College's librarians, learning support professionals, and student tutors for being responsive to students' learning needs and for the thoughtful ways they collect and analyze data to determine program improvements. The College is encouraged to continue these practices and to conduct student outreach activities to increase annual usage of the library and learning resource centers. (II.B.4)

Conclusion:

The College meets the Standard.

II.C. Student Support Services

General Observations:

The College's Vice President for Student Services provides leadership and guidance for 30 student support units. The College offers student support programs and services that are appropriate and aligned with its mission, regardless of location or delivery method. Its co-curricular and athletics programs are uniquely suited for the College's diverse student population and regional cultural interests. The College ensures that its admissions and placement practices are evaluated regularly and that its student records are kept secure, confidential, and backed up for permanency.

Findings and Evidence

The College's student services offerings enhance the accomplishment of its mission by supporting and celebrating its diverse students. The team noted that College personnel take pride in its recently earned Hispanic-serving institution status and in its service to rural, first-generation, and Rising Scholars students. The College regularly surveys its students to evaluate the quality of its services and to study their effects on historically underrepresented and/or underserved students. (II.C.1)

The team found evidence that personnel in each of the College's student support units are committed to collecting and analyzing a wide range of student-generated data to increase student achievement and to facilitate program improvement. These data include student achievement, participant feedback, and satisfaction surveys. To ensure that WHCC designs support services appropriate for its diverse students, student support personnel routinely extract and analyze disaggregated student data through the dashboard. The College's Student Success Committee holds meetings regularly to study these disaggregated data, identify the largest equity gaps, and to communicate their findings to campus stakeholders. The College's student support services personnel have created several templates to support their continuous

program improvement including Program Reviews, End-of-Year Reports, and Outcomes Reflections. The team encourages the College to continue its equity-minded data collection and analysis practices (II.C.2)

The College aims to provide equitable access to student support services to students at its various locations by leveraging its in-person and on-line delivery systems. Students learn of the College's student support services via its website and "Student Support Guide." The College's dual enrollment students have access to counseling and advising and tutoring and its Rising Scholars have access to counseling and advising, financial aid, admissions support, and library request services. All health and mental health services are provided virtually through the Timely Care telehealth program. Equitable access to the College's Internet-based student support services is mitigated through laptop and hotspot rentals available at the library. (II.C.3).

The College's athletics, residence life, and co-curricular programs are aligned with its mission and enhance the student development experience. The College takes responsibility for its co-curricular, and athletics programs through the District's BP and AP 5420 which guides the effective management, operations, and financing of these programs. (II.C.4)

The College ensures that its counselors are prepared to perform their advising functions via an intensive orientation upon their hire and at monthly meetings thereafter. (II.C.5.)

The College advises students on how to complete their degree, certificate, and transfer goals through Falcon Pathways and counseling services. The College augments its general academic advising endeavors with programs that offer specialized services to its first-generation, low-income, minoritized, and incarcerated students. All degree and certificate requirements are publicized on its website and within its Catalog. The District's BP and AP 5010 policies and procedures ensure that its admissions practices are consistent with its mission. In the College's Psychiatric Technician program, faculty conduct selective admissions based on students' grades in a set of prerequisite courses to ensure that its entering students can be successful in its curriculum. (II.C.6)

The College regularly evaluates its admissions practices to validate their effectiveness and minimize biases. The College has created specialized forms and procedures for its Dual Enrollment, Rising Scholars, and International Students. In its ongoing evaluation of AB 705 placement practices, the College noted inequitable outcomes arising out of its self-placement guide. The College has adopted an Improvement Plan to make the self-placement guide more visible to students. (II.C.7)

Through adherence to the District's Board and Administrative Policies 5040, the College ensures that student records are permanent, secure, confidential, regularly backed up, and properly released. The College informs campus stakeholders of its FERPA responsibilities through its Catalog and provides students the opportunity to exercise their FERPA rights through the District's Authorization for Release of Student Records form. (II.C.8)

Conclusions:

The College meets the Standard.

Standard III

Resources

III.A. Human Resources

General Observations:

The College has written policies and procedures for the recruitment, onboarding and evaluation of employees. Systems are in place to identify staffing needs and prioritize hiring that meet the institutional mission and College goals. The collective efforts of the District and the College ensure appropriate staffing of administrators, faculty and staff. The College and District have processes and procedures in place that demonstrate the goal of a diverse workforce and there are ongoing efforts to ensure that this is put into practice. Professional development is a priority for the District and the College and there are significant efforts to improve performance and promote career progression. Many of the employee processes are defined in collective bargaining agreements. Employees are provided with access to their own personnel files, and these files are stored securely at the WHCCD Office.

Findings and Evidence:

West Hills Community College District has Board Policies and Administrative Procedures in place to ensure that employees are qualified to support their programs and services. These policies and procedures detail the hiring processes from recruitment through verification of qualifications (AP 7120). The institution provided evidence of public advertisement for positions and Board approval of job descriptions appropriate for the College and matching the needs of the programs they support. (III.A.1)

Administrative Procedures (AP 7211) provides a consistent process to verify that faculty qualifications and appropriate subject matter expertise. Human Resources is responsible for the initial review of minimum qualifications, as established by the California Community College Chancellor's Office, and a review committee with faculty representation is responsible for

further assessing the qualifications of faculty candidates. Job descriptions include curriculum oversight and the assessment of student learning outcomes and are aligned with policies and procedures that outline the role of and responsibilities of faculty. (III.A.2)

The College process for administrative hires aligns with Board Policies and Administrative Procedures 7120. Job descriptions are approved by the Board prior to posting, and Human Resources is responsible for reviewing all minimum qualifications. Procedures dictate committee membership and evaluation processes throughout the recruitment process. (III.A.3) The College utilizes its Human Resources Department to verify degree requirements and has a process for adjudicating equivalency (AP 7211). The Human Resources Department utilizes third-party verification of foreign degrees when individuals do not possess US degrees. (III.A.4)

The College has comprehensive evaluation processes for its regular faculty, classified staff, and administrators defined in collective bargaining agreements and in AP 7150. Evaluation timelines and criteria for evaluations of these employees are detailed and align with the measures to effectively determine performance of duties. In all documents, there is an emphasis on the use of evaluation to improve performance in support of the College mission and goals. Evaluation procedures for adjunct faculty are defined separately under BP 7218 since they are not represented by a labor representative. As evidenced from correspondence from Human Resources, the District and College track the completion of evaluations. (III.A.5)

The College has a process for the evaluation and prioritization of faculty positions to ensure that the College has the requisite number of qualified faculty to meet its mission and maintain its academic programs. This process is integrated with the College's system of program review and allocation of resources. Data on instructional programs and student demand are utilized to justify the need for full-time or part-time faculty positions. The College and District also utilize these data as metrics on faculty ratios and efficiency to make resource decisions that ensure that there are sufficient faculty to fulfill the needs of educational programs and services. (III.A.7)

The College provides opportunities for part-time faculty to participate in campus activities, including governance and professional development. Ongoing orientations are offered to part-time faculty, for which they are compensated. Such orientations include processes on supervision, evaluation and effective pedagogy. The College's Adjunct Faculty Resource Guide provides pertinent information to assist part-time faculty with - institutional processes, procedures and support. Per District BP 7218, part-time faculty are evaluated within the first year of employment, followed by intervals of once every six semesters, at a minimum. (III.A.8)

The College ensures that it has sufficient staff members with appropriate qualifications through its program review process. Recommendations for staffing needs are submitted to College Council, the Budget Resources Committee and to the college president for consideration. Determination of need and prioritization is accomplished through the College's annual program

review and districtwide resource allocation process. Dual Enrollment's program review, which resulted in the hiring of an academic advisor, exemplified this process. Through these means, the College has ensured that it provides sufficient staffing to support its programs. (III.A.9)

The College has a process for the evaluation and prioritization of administrative positions to ensure that the College has the requisite number of qualified administrators to meet its mission and maintain its academic programs in accordance with BP 7250 and BP 7260. This process is integrated with the College's system of program review and allocation of resources. (III.A.10)

The District has detailed personnel policies and administrative procedures. As evidenced from the comprehensive New Employee Orientation presentation slides and checklist, the College's employees gain familiarity with its policies. The New Employee Orientations present an overview of the most relevant and applicable policies and procedures. Employees receive copies of such materials at the orientations. Policies are also available on the District website for public review. Administrators participate in regular professional development on areas such as collective bargaining updates, sexual harassment and progressive discipline. These efforts support a consistent and equitable adherence to personnel policies and a focus on improvements in employee performance. (III.A.11)

The District has policies and procedures in place that outline a commitment to workplace diversity and equity. This commitment is put into practice through the development and updating of an EEO plan, some notable additions to which are requiring search committee members to be trained in the District's equal opportunity goals and procedures and the ability of the EEO Officer and District to add up to three members to ensure committee diversity.

To advance diversity and equity at WHC Coalinga, the College continues to host diversity, equity, and inclusion (DEI) trainings and learning sessions. (III.A.12)

The District provides AP 3050 that serves as a written code of ethics. The code encompasses all employee groups and ensures both compliance with laws and regulations and articulates an overall commitment to honesty and equity. Consequences for violations to this code of ethics are provided in its written procedures. (III.A.13).

The institution offers professional development programs through a combination of District offered and campus-based professional activities, which are consistent with WHCC's mission and promote the advancement of employees. Activities include but are not limited to a coordinated speaker series and learning events focused on Achieving the Dream, diversity, equity and inclusion, and specialized programs that promote both employee improvement and career progression. Of note is the District's "Upskill Program," whose stated goal is to provide entry-level leadership fundamentals for employees interested in higher education management and administration. The College efforts are primarily coordinated through the Professional Development Committee. There are ongoing evaluations of these activities, with those results used to inform future professional development activities. Attendance requirements for

professional development activities are defined in collective bargaining agreements, Board Policy and Administrative Procedure 7160. (III.A.14)

The institution has demonstrated the physical security of personnel records. Collective bargaining agreements and Administrative Procedure 7145 dictate the ability to access and amend employee records. (III.A.15)

Conclusion:

The College meets the Standard.

III.B. Physical Resources

General Observations:

The College has personnel and processes involved to assure safe, sufficient, and accessible physical resources at its locations. The College maintains a list of scheduled maintenance projects to ensure it maintains access to and the safety and security of all physical resources. WHCCD is working on developing a new Facilities Master Plan which will include the programs, priorities, and services outlined in the WHC Coalinga Education Master Plan and Strategic Plan.

Findings and Evidence:

The College demonstrates that it provides safe and sufficient physical resources at all locations where it offers courses, programs, and learning support services. The Maintenance and Operations Department regularly reviews and assesses the conditions of the buildings and facilities and maintains a plan for scheduled maintenance for its physical resources. The College conducts routine inspections for health and safety compliance. (III.B.1)

The Education Master Plan and Strategic Plan guide the direction for facilities planning at the College and inform the development of the new Facilities Master Plan (development to begin in spring 2023). These planning documents guide the actions to build, maintain and upgrade and/or replace physical resources including facilities and equipment at the College. Recently, a new center in Firebaugh, CA was completed based on the need to serve students in the northern part of the College's service area. Currently, the College is engaged in a feasibility study on the construction of student housing. (II.B.2, III.B.3)

The District maintains a Five-Year Construction Plan which is approved by the Board of Trustees annually and is submitted to the state Chancellor's Office. The District works with the college to develop and track the total cost of ownership (TCO) of college facilities and projects.

Administrative Procedure (AP) 3250 ensures that TCO is a required component of long-range capital projects, including the recently completed Firebaugh Center. (III. B. 4)

Conclusion:

College meets the Standard

III.C. Technology Resources

General Observations:

West Hill Community College District has a centralized approach to technology resources and support. The College is involved in the District Technology Committee and District Technology Review Council. Safety and security are a priority for the District, and attention to faculty training is apparent. District standards shape the processes for technology resources oversight across the colleges.

Findings and Evidence:

WHC Coalinga's technology is supported by the District's Office of Information Technology. Departments request technology needs through the WHC Coalinga's Technology Committee. The District Information Technology offices are responsible for professional support, facilities, hardware, and software. The District also has a Disaster Recovery guide to respond to disaster situations and understand backup and recovery process. (III.C.1)

WHC Coalinga is supported through the District's Technology Plan 2021-2025. The colleges and constituent groups are part of a process with District IT to drive the adoption of specific technology needs and following district technology guidelines that ensure considerations around infrastructure, data security, accessibility, and total cost of ownership are considered. The district plans for annual technology replacements and their cost following a five-year Technology Replacement Forecast. (III.C.2)

The College relies on the District to assure technology resources are implemented and maintained to assure reliable access, safety, and security. The Incident Response Playbook provides the colleges and district tools to prepare for and mitigate cybersecurity threats against the District's information systems. (III.C.3)

WHC Coalinga provides faculty, students, staff, and administrators with instruction and support in the effective use of technology and technology systems. The Education Technology Specialist provides training and assistance on Canvas and related Learning management System services and the Media Services Specialist helps to maintain and provide media technology needs including Zoom technology. Aside from the on-going support provided by the IT department,

the College maintains dedicated staff who provide support to faculty, staff, students, and administrators. (III.C.4)

The District and WHC Coalinga work together to develop standards to make sure there is reliable access to the District's infrastructure. These standards are in place, regularly reviewed and updated to meet institutional needs. BP and AP 3720 articulate the appropriate and acceptable use of computer and network use. BP and AP 3725 address the areas of information and communications technology accessibility and acceptable Use. (III.C.5)

Conclusion:

The College meets the Standard.

III.D. Financial Resources

General Observations

The District and WHC Coalinga are committed to advancing student achievement and the institutional mission, therefore, central to resource allocation and planning is program review. The College has established processes and procedures in place for the development of program reviews, the assessment of data, and prioritization of resource needs for budget consideration to support the college mission and vision. WHCCD has established processes and procedures in place to ensure fiscal affairs are planned and managed with integrity and ensures financial stability.

At both the college and district level, the institution has put systems, processes, and procedures in place to ensure that financial resources are used in a manner that supports student learning and that continuously improves institutional effectiveness through processes that are outlined in the Participatory Governance and Integrated Planning Manual 2022-2023. The District Governance Manual lays out the process for prioritization and allocation of resources based on these requests and available funding, with final prioritization taking place in the Chancellor's Executive Cabinet based on a set rubric. All changes to the district budget reflecting a change to the approved budget are presented to the Board of Trustees for final approval. (III.D.1)

WHCCD follows its established Board Policies and Administrative Procedures (BP/AP Budget Preparation and Resource Allocation) and uses these as the basis for its financial planning and for the development of its annual budget. Resource requests are based on program review, which is grounded in both the College's and District's respective missions, visions, and goals. The Budget Development Calendar in the District Governance Manual governs the timelines for resource allocation districtwide. (III.D.2)

The WHC District follows the processes for budget allocation that have been set within its Policies, Procedures, and District Governance Manual. The WHC Coalinga has a defined process to determine budget priorities based on the college's mission, needs, and goals. To ensure integration and opportunities for constituent participation the budget development process typically includes Program Review. Through this process, all constituencies can participate when they vetted it before submission to Chancellor's Executive Cabinet. (III.D.3)

The budget planning process, which starts in January, shows a realistic assessment of financial resources and expenditure requirements by using the current year-to-date balances of resources and expenditures as the basis for next year's budget. Following the release of the State of California's proposed budget in January, the district budget is developed. Both restricted and unrestricted funds are considered. (III.D.4)

The internal control system of the College is governed by AP 6300 and AP6301 – Fiscal Management and Fiscal Management Grants. Timely information on budgets and expenditures is available to budget managers via direct access to run on-demand reports through the Ellucian Colleague, the district's Enterprise Resource Planning (ERP) system. (III.D.5)

Financial documents of the district and the college including the budget adopted reflect a high degree of credibility, accuracy and appropriate allocation of resources. This is reflected in internal reports (e.g., budget and status reports), external reports (e.g., CCFS-311 and the district's annual audit). The WHCCD Foundation undergoes annual audits which are reviewed by its own Board of Directors. (III.D.6)

The District undergoes a comprehensive audit of its financials by an external auditor on an annual basis. Annual results are shared publicly on the district website and presented to the Board of Trustees once completed. The District has a long track record of timely, comprehensive, and unaltered audits, the only exceptions being in the two most recent years (2020-21 and 2021-22) in which auditors noted compliance findings unrelated to WHC Coalinga. The College responded with four corrective action plans and the auditors included the response in the audit report. Additionally, during both 2020-21 and 2021-22, a material weakness involving Return to Title IV procedures for federal financial aid at WHC Coalinga. The District and College are working together to develop consistent policies and procedures to remedy this situation to ensure ongoing compliance. (III.D.7)

The District's financial accounts are audited annually, which includes assessment of internal controls for validity and effectiveness. No recent audit findings regarding internal controls have been issued, however, the District determined that existing procedures were out of date and underwent an internal review of its control structures, processes, and documents, culminating with a release of updated Purchasing, Travel, and Business Office Process manuals in the summer of 2022. The manuals are reviewed every February and any changes that are made

become effective every July. The College's internal control system for budget development and reporting has been revisited and improvements implemented. (III.D.8)

WHCCD has Administrative Procedure 6305 in place to ensure that the District and College has sufficient cash flow and reserves to maintain stability, manage risk and meet emergencies and unforeseen occurrences. The cash reserves of WHCCD are set at 20% as required by AP 6305 and are clearly identified during audits for transparency. To monitor the actual spending of the College, the Business Office prepares monthly cash flow with revenues recorded from the monthly apportionment report. (III.D.9)

The WHCCD Business Office has procedures and practices in place to ensure the effective oversight of finances, including grants, restricted funds, and federal financial aid. The Board of Trustees is provided with regular updates on the status of unrestricted, restricted and auxiliary budgets. District financial statements are audited on an annual basis, including the use of state and federal financial funds. The WHCCD Foundation undergoes its own independent audit under the oversight of its Board. (III.D.10)

The WHCCD addresses both short-term and long-term obligations through multi-year budget projections on both revenues and expenditures such as cost escalations arising from COLA, collective bargaining agreements, estimated retirement rates, and long-term liabilities. Along with its financial projections, the College develops a 5-year plan for scheduled maintenance to ensure that its future obligations can be met. The District ensures that long-term obligations can be met each year and utilizes budget surpluses when available to minimize on-going, long-term costs. The Board of Trustees receives regular updates on the District's long-term financial obligations and acts to control and meet these expenses. (III.D.11)

The District has continuously monitored and planned for its liabilities and future obligations including salaries and benefits, liabilities associated with employee leave, and particularly the U district's OPEB obligations. To ensure that these obligations are sufficiently budgeted, actuarial studies are regularly contracted. (III.D.12)

The District monitors its debt schedules and integrates into the annual budget and its multiyear fiscal projections. The District office building was refinanced in 2021 to minimize costs. (III.D.13)

The district Purchasing Handbook outlines the purchasing and procurement processes to ensure that funds are used for their intended purposes. Purchasing and procurement includes multi-level approvals with budget managers, and a manager from the WHCCD Business Office responsible for reviewing and approving all requestions requests prior to purchase, thus ensuring compliance with funding source and local processes and requirements. (III.D.14)

The WHCCD Business Office has controls and procedures in place to ensure that federal financial aid funds are utilized in their intended manner. Expenditures involving federal financial aid are included in the District's annual audits. In the one instance, where an audit finding was issued, the District and College worked together to address these findings in the audit response and have developed procedures to ensure ongoing compliance with the requirements of Return to Title IV. (III.D.15)

The WHCCD has one Board Policy and six Administrative Procedures addressing the requirements for bids and contracts. Contracts over \$15,000 must go to the Board of Trustees for review and approval. Education-based contracts are signed by the college president to ensure they meet the college's educational goals. The Vice Chancellor of Business and Fiscal Services approves all contracts to ensure fiscal compliance. (III.D.16)

Conclusion:

The College meets the Standard.

Standard IV

Leadership and Governance

IV.A. Decision-Making Roles & Processes

General Observations:

West Hills College Coalinga has defined organizational structures, leadership roles, decision-making processes, and decision-making procedures outlined in their Participatory Governance and Integrated Planning Manual, Board policies and Administrative Procedures. The College has developed a governance structure that is designed to support participatory governance and promotes diverse perspectives from college constituents and is committed to institutional effectiveness and continuous improvement by assessing its structures, governance, and decision-making processes regularly.

Findings and Evidence:

The College demonstrates the opportunity for all employees to create and encourage innovative ideas, practices and programs and ensures broad participation to assure effective planning and implementation. The evidence provided is from the Student Success Committee's organization into four subcommittees, each addressing the core pillars of Guided Pathways. Efforts from each committee resulted in a relaunching of its student orientation program and Falcon Pathway development for each associate degree, which includes English and math completion in the first year of student enrollment. The committee includes participation from all constituent groups and reports directly to the College Council. (IV.A.1)

In matters about which students have a direct and reasonable interest, students are invited to participate in those councils and committees such as the Student Success Committee, Institutional Effectiveness and Accreditation, and the College Council. The Associated Student Body Government makes student representative appointments to the various college governance committees and every effort is made to ensure students, faculty, staff and administrators are given the opportunity to be a part of the planning process. (IV.A.2)

The college's institutional governance process is governed by the procedures and process outlined in BP 2510 and AP 2510, as well as the Participatory Governance and Integrated Planning Manual. The Manual defines the roles and responsibilities and outlines the membership and participation in governance committees. (IV.A.3)

Faculty's role in program, curriculum, and course development is clearly outlined in BP 4020 and AP 2510. Procedures related to college curriculum are outlined in the Curriculum Handbook. The Curriculum Committee serves as the decision-making body providing recommendations regarding course and instructional programs through the Academic Senate to the Board of Trustees. (IV.A.4)

The District administration and Board of Trustees have clear policies and procedures that specify the roles and responsibilities of administrators, faculty, staff and students in the participatory governance structure. The College's Participatory Governance and Integrated Planning Manual 2022-2023 outlines the process by which perspectives and expertise from different constituent groups take part in the dialogue, planning, and decision-making process. The College communicates decisions through meeting minutes, discussions, recommendations, actions, and decisions are posted in BoardDocs. Meeting minutes and agendas are also posted via each committee webpage, which the college has identified as requiring regular updating. Additionally, college decisions are communicated through monthly college check-ins (IV. B.5, IV.B. 6)

Annually, each governance committee conducts a self-evaluation of its work, leadership, meeting structures, alignment with college mission, and overall effectiveness. Results for each governance committee are reviewed by the respective committee and improvement plans are

formulated. These plans are shared at College Council for further review and determination of actions. (IV.A.7)

Conclusions:

The College meets the Standard.

IV.B. Chief Executive Officer

General Observations:

The WHC Coalinga president has primary responsibility for the quality of the institution and for providing leadership in planning, organizing, budgeting and selecting and developing personnel and assessing institutional effectiveness. The president provides guidance and leadership in all aspects of college operations and works to support faculty, classified staff, and managers in their respective roles, to advance student success. The president has demonstrated a commitment to participatory governance, and thus to communicating effectively and regularly with constituents.

Findings and Evidence:

The college president has the primary responsibility for institutional quality outlined through a recent job description and through planning and governance processes. The president routinely meets college leaders to learn more about progress, provide guidance and direction, problem solve, and plan actions. The president provides monthly updates to the Board of Trustees on progress toward strategic goals and takes the lead in the coordination and development of major institutional planning efforts such as the strategic plan and educational master plan for the college. The president communicates with the College regularly through monthly college virtual meetings (via zoom). (IV.B.1)

The WHC Coalinga president serves as the chief executive officer (CEO) for the college, provides leadership across the institution, including planning, oversight, and evaluation of the administrative structure. The president reports to the West Hills Community College District Chancellor and is responsible for planning, overseeing, and evaluating the college's administrative structure to reflect the institutional mission, goals, purposes, and size. The College maintains an organizational chart that clearly identifies the management hierarchy and the president delegates authority to the Vice President of Student Services and Educational Services to provide oversight, guidance, and leadership within each department. (IV. B. 2)

The College president, through established policies and procedures, guides the institution in the improvement of teaching and learning by establishing a collegial process that sets values, goals

and priorities. Through this process, the president ensures that the college sets institutional performance standards and student success metrics while also ensuring that evaluation and planning rely on research and applicable data. The College maintains several dashboards related to student achievement and progress. These data dashboards are used as part of enrollment monitoring, student achievement tracking, and programmatic evaluation in program reviews for instructional and non-instructional areas. The College uses both internal and external data and analysis in planning and evaluation, as is evident in the development of the Educational Master Plan. The president makes certain that the College's educational planning is integrated with resource allocation to support student achievement and learning. (IV.B.3)

Administrative Procedure 3200 stipulates that the responsibility and authority for the accreditation process lies with the College president. The president appoints the Accreditation Liaison Officer (ALO) who is "responsible for coordinating all necessary activities in preparation for the visit by the visiting team and subsequent reports and visits." The Vice President of Educational Services serves as the ALO and chairs the Institutional Effectiveness and Accreditation Committee (IEAC). The ALO works with staff, faculty, and administrators for shared responsibility on accreditation and a crosswalk has been developed which identifies key committees within the college whose work and areas of responsibility correlated to standards and eligibility requirements. (IV.B.4)

The president works to implement statues, regulations, and governing board policies and that institutional practices are consistent with the institutional mission and policies including the effective control of budget and expenditures. The program review and budget review processes are key fundamental mechanisms used by the college to align with institutional mission and goals. Requests for budget considerations are identified through the program review process. The Budget Resources Committee reviews all requests and prepares budget prioritization recommendations for the College Council. The College Council reviews all program reviews and the budget recommendations from the Budget Resource Committee and makes a budget recommendation to the president. The president reviews the budget recommendation and determines the College's priorities for the upcoming year and provides a recommendation to the District Chancellor. Based on the approved College budget allocation for the year, the president communicates the final decision to the College. (IV.B.5)

The president regularly communicates with college constituent groups greater community through email, monthly Zoom meetings, professional development days and other institutional governance meetings. The president participates in community meetings, including K-12 school boards, chamber of commerce functions and Rotary. She also provides monthly College updates to the WHCCD Board of Trustees and Foundation Board. (IV.B.6)

Conclusion:

The College meets the standard.

IV.C. Governing Board

General Observations:

The WHCCD Board of Trustees has board policies and administrative procedures, which are regularly updated, that define the Board's role in ensuring educational quality and fiscal stability while serving the public interest. These policies and administrative procedures set clear expectations for ethical behavior and avoiding conflicts of interest. The Board appropriately delegates operational responsibilities to the Chancellor. The District provides opportunities for board member education and professional development and ensures board members are informed about student achievement as well as accreditation activities.

Findings and Evidence:

BP 2200 (Board Duties and Responsibilities) outlines the WHCCD Board of Trustees' authority and responsibilities to govern on behalf of the citizens in the District's service area. AP 2410 (Policy and Administrative Procedure) clearly lays out a review and approval process, showing that all policies and procedures are reviewed on a six-year cycle. The District posts the last review and upcoming review date for each policy and procedure on its website. The Board of Trustees has the authority through its policies and procedures to assure academic quality and financial stability. The Team appreciates that WHCCD effectively organizes and presents their Board Policies (BP) and Administrative Procedures (AP), following a well-documented and upto-date process for regularly reviewing all BPs and APs. (IV.C.1)

The WHCCD Board of Trustees is held to high standards of ethical conduct for its members as outlined in BP 2715 (Code of Ethics/Standards of Practice). This policy further describes the responsibility of the Board to function as a collective entity and describes potential violations, including Board members advocating against decisions once they are made or advocating for a single interest instead of the public good. The governing board of WHCCD acts as a collective entity. (IV.C.2, IV.C.3)

BP 2200 (Board Duties and Responsibilities) states that the Board of Trustees is committed to representing the public interest and to monitoring institutional performance and educational quality. AP 2710 (Conflict of Interest) provides guidelines for protecting the public as it relates to potential conflicts of interest. BP 2716 (Political Activity) further protects the public interest by prohibiting members of the Board of Trustees from using District resources for political advocacy. The governing board is independent and reflects the public interest. (IV.C.4) A number of board policies address the governing board's responsibilities for ensuring educational quality and financial stability. BP and AP 2410 describe the process for establishing and revising policies and administrative procedures. BP 2200 (Board Duties and Responsibilities)

describes the governing board's role in establishing policies that ensure educational quality and fiscal health. BP and AP 3225 (Institutional Effectiveness) guide the District's efforts for continuous improvement. The governing board establishes policies and administrative procedures consistent with its mission to ensure academic quality and fiscal stability. (IV.C.5)

BP 2010 (Board Membership) and BP 2015 (Student Member) clearly specify the board's size and structure. BP 2210 (Officers) describes the duties of the President and Vice President of the Board. BP 2200 (Board Duties and Responsibilities), as referenced above, outlines the governing board's responsibilities for ensuring educational quality and fiscal stability. BP 2310 (Regular Meetings of the Board), BP 2220 (Committees of the Board), and BP 2330 (Quorum and Voting) outline the operating procedures of the governing board. (IV.C.6)

The Master Board Policy and Administrative Procedure Review Schedule shows the last and next review date of all BPs and APs and clearly shows that they are regularly updated. AP 2410 (Board Policies and Administrative Procedures) requires that all BPs and APs are reviewed under a six-year cycle. Board of Trustees meeting minutes provide examples of the Board following its policies and administrative procedures. The Board of Trustees acts in a manner consistent with its policies and administrative procedures. (IV.C.7)

BP 3225 and AP 3225 (Institutional Effectiveness) describe the Board's and District's commitment to student success. Each college in the district is required to publicly post goals on student performance and outcomes which have been approved by the Board. The tracking of student outcomes informs the District Strategic Plan. WHCL provides an annual update on these goals to the Board. The governing board regularly reviews key indicators of student learning and institutional plans for improvement. (IV.C.8)

BP 2740 (Board Education) describes the education, training, and orientation provided for Trustees. The Board also has regular study sessions. The Trustee Orientation Meeting agenda reflects a comprehensive board member orientation process. BP 2100 (Board Elections) demonstrates that the Board has a mechanism for providing continuity through staggered terms of office. (IV.C.9)

BP 2745 (Board Self-evaluation) describes the Board's process for evaluating its overall effectiveness. The Board of Trustees Self-evaluation Survey instrument helps the Board identify areas for improvement. The WHCCD Board of Trustees has established policies guiding the process and purpose of Board self-evaluation. The Board's self-evaluation reports are archived on the District's website dating back to 2010. The governing board regularly evaluates its practices and performance. The results are used to improve board performance. (IV.C.10)

BP 2715 (Code of Ethics/Standards of Practice and AP 2710 (Conflict of Interest) show that the Board has established policies governing behavior and ethics. As demonstrated by meeting

minutes, board members recuse themselves if there is a conflict of interest. The board upholds a code of ethics and individual board members adhere to that code. (IV.C.11)

BP 2430 (Delegation of Authority to Chancellor) gives the Chancellor full responsibility and authority to implement and administer board policies. The Chancellor is held accountable through the evaluation process as defined in BP and AP 2435, a formal process which takes place in closed session as described in meeting minutes. The Chancellor is accountable for the operation of WHCCD. (IV.C.12)

BP 3200 (Accreditation) includes eligibility requirements and ensures the Board is involved in the accreditation process. As described in meeting minutes, the Board is regularly updated on accreditation activities. The Board also had an accreditation training as part of a regular board retreat. The Board has been consistently engaged in the accreditation process. (IV.C.13)

Conclusion:

The College meets the Standard.

IV.D. Multi-College Districts or Systems

General Observations:

The Chancellor of WHCCD provides leadership in setting and communicating expectations and the District supports the effective operations of the colleges. The District Function Map defines which roles and responsibilities are shared and which fall primarily under the District or the colleges. The District has effective resource allocation processes tied to the District and College strategic plans. The District and College strategic planning process are aligned and contain measurable success indicators. The District ensures effective control of expenditures and regularly evaluates governance and decision-making processes to assist the colleges in meeting educational goals.

Findings and Evidence:

The Chancellor communicates to all employees regularly through Chancellor's Updates and Chancellor's Newsletters. As part of convocation, the Chancellor presents a State of the District to faculty and staff. BP 2430 (Delegation of Authority to Chancellor) allows the Chancellor to delegate the administration of the colleges, but the Chancellor is still responsible to the Board for the execution of delegated powers. The District Function Map, which is regularly revised, shows the delineation of functions between the District and its two colleges. (IV.D.1)

The District Function Map communicates the operational responsibilities between the District and the Colleges. Revisions to the District Function Map go through governance processes

including the Leadership Council, College Council at WHCC, and Planning and Governance Council at WHC Lemoore. Agendas from these council meetings show broad constituency participation and input. Several district functions are centralized: Human Resources, Business Services, Information Technology, Institutional Research and Planning, and Marketing. The District Governance Manual outlines the District program review process through which the District evaluates the effectiveness of its centralized services. (IV.D.2)

BP and AP 2600 (Budget Preparation and Resource Allocation) describe the overall budget process and how funds are distributed between the Colleges. The District Governance Manual includes the budget development timeline and process for ranking resources. The Business Services department has implemented mandatory trainings for personnel after internal audits revealed that their practices were not always in compliance with purchasing and procurement laws. The District is working proactively to continuously improve fiscal processes and documentation. The District supports fiscal sustainability and integrity. (IV.D.3)

BP and AP 3100 (Organizational Structure) allow the Chancellor to delineate lines of authority and reporting. The College President job descriptions for WHCC and WHCL enumerate the job duties and show that the College Presidents are responsible for implementing district policies. The College Presidents are evaluated by the Chancellor and are held accountable for their performance. Part of this evaluation includes a survey sent out to all full-time faculty and staff. Full authority and responsibility for the Colleges are delegated to the College Presidents who are held accountable for the operations of their respective Colleges. (IV.D.4)

Based on the State Chancellor Vision for Success goals, the WHCCD District Strategic Plan and the strategic plans of WHCC and WHCL focus on degree completions, transfer, unites to degree, employment, and equity. The 2021-26 District and College strategic plans provide detailed data and targets on these shared goals. The WHCCD Program Review includes administrative unit target outcomes and resource requests to achieve those outcomes. District strategic planning and evaluation are integrated with the College's strategic planning and evaluation to improve student learning and institutional effectiveness. (IV.D.5)

One of the four core commitments of WHCCD's District Strategic Plan is communication. As described in this plan, WHCCD will focus especially on listening to employees and students. Through established shared governance processes as outlined in the District Governance Manual, the District and Colleges work together to make effective decisions. (IV.D.6)

Every two years, the District administers a District Committee Communication and Effectiveness Survey to all governance committees. The survey is designed to support the District's Program Review process and to contribute to overall institutional effectiveness. College governance committees were also given the opportunity to suggest changes or improvements to the District Program Review Process. The District evaluates governance committees and processes, administrative units, and the delineation of roles. Results of these

evaluations are communicated broadly and used as a basis for continuous improvement. (IV.D.7)

Conclusion:

The District meets the Standard.

Quality Focus Essay

The ACCJC's Guide to Institutional Self-Evaluation states that the function of the Quality Focus Essay (QFE) is to provide an "opportunity for member institutions to be innovative, and to propose new ideas and projects that will improve student learning and/or student achievement at the institutional level." Colleges are requested to "identify two or three areas of need or areas of interest that arise out of the institutional self-evaluation and that focus on student learning and student achievement." The team reviewed the College's QFE and the accompanying two-part project action plan. The goal of Project 1, titled Connection and Integration is to improve the integration of the following College processes, program review, outcomes, planning, and assessment. The goal of Project 2, titled Student Achievement, is to better support the currency and development of curriculum and the enhancement of student services so that the diverse campus population is more equitably served. The College intends to leverage these efforts to increase enrollment, certificate/degree attainment, transfer readiness, workforce preparation, and student engagement.

Overview

WHCC is focusing on quality improvement in an intentional effort to support student achievement through structured opportunities for professional development and changes to curriculum and student services that positively impact the student learning experience. This emphasis came out of a self-reflective assessment of gaps and opportunities, and a concerted plan to move beyond the status quo. The College also designed a system of accountability by including outcome metrics to measure their success. The following projects delineate the strategies for accomplishing their goals.

Project 1 – Connection and Integration

The activities associated with this project include creating a more robust assessment culture by engaging participatory governance leaders, the administration, and the College assessment coordinators in a collaborative and intentional effort to examine the findings and develop plans for improvement. Identifying this gap in progress is a positive step to strengthen connections among College stakeholders and enhance the integration of functions. Additionally, revising the mapping of learning outcomes among programs, service units and administrative units will provide a framework for a more meaningful alignment with the College mission, planning and institutional learning outcomes. WHCC plans to facilitate continuity among all the College plans (e.g., education, enrollment, student equity and Guided Pathways), to further their integration agenda.

Project 2 – Student Achievement Goal

To institutionalize professional development, WHCC plans to develop a learning calendar that incorporates opportunities for growth for faculty, staff, and administrators. This systemization of professional development is intended to cultivate a college-wide norm of ongoing improvement in the way that student success is supported. Alternative pedagogical approaches will be explored to identify practices that better support the learning experiences of WHCC students. Faculty will also review, revise and update courses, and program certificates and degrees. Faculty senate learning area leaders will facilitate discussions among faculty to encourage cross-pollination of ideas and the development of best practices.

WHCC's action plan to facilitate the refinement and integration of College processes, institutionalize professional development and improve the quality of instruction and curriculum, will be well supported by the project action plans included in this quality focus essay. To attract broad engagement and enthusiasm for this plan the College might consider incentives for faculty, staff and administrators who successfully implement the strategies proposed.

Appendix A: Core Inquiries



CORE INQUIRIES

West Hills Coalinga 300 W Cherry Lane, Coalinga, CA 93210

The Core Inquiries are based upon the findings of the peer review team that conducted Team ISER Review on October 16, 2023.

Dr. Henry Yong Team Chair

	n	tΔ	nı	C
\mathbf{c}	111	te	111	LO

Peer Review Team Roster	. 3
Summary of Team ISER Review	_
Summary of Team ISER Review	•
Core Inquiries	4

West Hills College, Coalinga

Peer Review Team Roster

Team ISER Review

October 16, 2023

Dr. Henry Yong, Team Chair	Kim Lopez, Vice Chair	
Yosemite Community College District	Canada College	
Chancellor	President	
ACADEMIC MEMBERS		
Dr. Laura Adams	Roland Finger	
Norco College	Cuesta College	
Associate Professor, Psychology	Instructor, English	
Dr. Aulii Silva	Karen Wong	
Leeward Community College	Skyline College	
Grants, Research, Program Development	Coordinator of Institutional Effectiveness/	
Specialist	Professor, English	
ADMINISTRATIVE MEMBERS		
Dr. Denise Richardson	Calar Lange	
	Carlos Lopez	
Berkeley City College	Folsom Lake College	
President	Dean of Business, Curriculum and Scheduling	
ACCJC STAFF LIAISON		
Gohar Momjian, Vice President		

Summary of Team ISER Review

INSTITUTION: West Hills College Coalinga

DATE OF TEAM ISER REVIEW: October 16, 2023

TEAM CHAIR: Dr. Henry Yong

An eight-member accreditation peer review team conducted Team ISER Review of West Hills College Coalinga on October 16, 2023. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. The peer review team received the college's institutional self-evaluation report (ISER) and related evidence several weeks prior to the Team ISER Review. Team members found the ISER to be a comprehensive, well written, document detailing the processes used by the College to address Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the ISER was developed through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful ISER containing several self-identified action plans for institutional improvement. The College also prepared a Quality Focus Essay.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on August 1, 2023 and held a pre-review meeting with the college CEO on August 21, 2023. The entire peer review team received team training provided by staff from ACCJC on August 30, 2023. Prior to the Team ISER Review, team members completed their team assignments, identified areas for further clarification, and provided a list of requests for additional evidence to be considered during Team ISER Review.

During the Team ISER Review, team members spent the morning discussing their initial observations and their preliminary review of the written materials and evidence provided by the College for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and identified standards the college meets, as well as developed Core Inquiries to be pursued during the Focused Site Visit, which would occur from February 20-21, 2024.

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

Core Inquiries

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

Core Inquiry 1:

The Team would like to see a Board-approved mission statement.

Standards or Policies:

Standard I.A.4: The institution articulates its mission in a widely published statement approved by the governing board. The mission statement is periodically reviewed and updated as necessary.

Description:

- -Minutes of the Board's meeting on July 27, 2021 and on August 24, 2021 indicated that the revised mission statement was under review.
- -No actions reflecting formal voting to approve the mission revision were recorded in the Board's minutes.

Topics of discussion during interviews:

-Process for approval of the mission

Request for Additional Information/Evidence:

- -Confirmation that the mission was Board approved
- -A timeline for receiving evidence of the Board's approval of the College mission

Request for Observations/Interviews:

Accreditation Liaison Officer

Core Inquiry 2:

The Team would like to better understand how Student Services uses data to support students' learning and to make decisions about improving its programs and services.

Standards or Policies:

Standard II.C.2: The institution identifies and assesses student support learning outcomes and provides appropriate student support services and programs to achieve those outcomes. The institution uses assessment data to continuously improve their student support programs and services.

Description:

- -Data reported in the Vice President for Student Services and Counseling/Transfer departments' Program Reviews (II.C.1.01 & AE.34) reflected institutional enrollment, persistence, graduation, and transfer outcomes which reflect the whole institution's contributions to student learning, but it is not clear how this informs program level practices. -End-of-Year Reports provided (II.C.2.03, II.C.2.04, II.C.2.05, II.C.7.09) either left equity data
- -End-of-Year Reports provided (II.C.2.03, II.C.2.04, II.C.2.05, II.C.7.09) either left equity data columns blank or reported data that did not reflect equity gaps.
- -The team is trying to understand how Student Services uses its assessment data to continuously improve student support programs and services.

Topics of discussion during interviews:

- -Who develops student service outcomes (SSOs)?
- -How does the Institutional Research Office and Student Success Committee collaborate with Student Services program personnel to develop unit-level student learning indicators and methods to assess their outcomes?

Request for Additional Information/Evidence:

- -Additional Program Reviews from Student Services
- -Examples of professional development on learning outcome assessments and/or data collection methods that Student Services personnel participated in

Request for Observations/Interviews:

-Program coordinators for Counseling/Transfer EOP&S, Puente, Dream Resource Center, CalWORKs or other student service areas such as admissions/records -others involved in supporting student service outcomes assessment

56