College of the Siskiyous

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2020 ACCJC MIDTERM REPORT

Submitted to:
Accrediting Commission for Community and Junior Colleges,
Western Association of Schools and Colleges
March 15, 2020

Accreditation Liaison Officer: Dr. Char Perlas
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800 College Ave.
Weed, CA 96094

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Midterm Report Certification Page

To: Accrediting Commission for Community and Junior Colleges,
Western Association of Schools and Colleges

From: Dr. Stephen Schoonmaker, Chief Executive Officer
College of the Siskiyous
800 College Ave.
Weed, CA 96094

I certify there was broad participation/review by the campus community and believe this report accurately reflects the nature and substance of this institution.

Signatures:

_____

(Carol Cupp – President, Board of Trustees)   (Date)

_____

(Dr. Stephen Schoonmaker – Chief Executive Officer)   (Date)

_____

(Jayne Turk - President, Academic Senate)   (Date)

_____

(Debbie Dutcher - President, Classified Senate)   (Date)

_____

(Doug Haugen - President, Administrative Support Management)   (Date)

_____

(Béla Fujimoto – President, Associated Student Board)   (Date)

_____

(Dr. Char Perlas - Accreditation Liason Officer)   (Date)

Report Preparation

College of the Siskiyous is committed to a collaborative, student-centered and data driven evaluation process which embodies a cycle of continuous improvement. An example of our commitment is evident in the May 2019 Education Reference Desk ranking of College of the Siskiyous as the number one ranked small college in the state for graduation and transfer rates. Education Reference Desk rankings are based on academic quality and student outcomes.

The College of the Siskiyous 2020 Midterm Report details the progress made since the 2017 Accreditation Follow-up Report which addressed the recommendations outlined in the July 6, 2016 Action Letter submitted by Barbara Beno, now former ACCJC President. Self-identified improvement plans and outcomes demonstrate the college's ability to meet the standards and maintain accreditation compliance.

Additionally, the 2020 Midterm Report consists of reflections on improving institutional performance, including student learning outcomes, service area outcomes as well as annual data trends and annual fiscal report analysis. Progress on the projects outlined in the 2016 Quality Focus Essay are also reported.

At the August 28, 2019 College Council Meeting, a Midterm Report Taskforce was introduced. Midterm Taskforce Members who assisted in gathering needed information included:

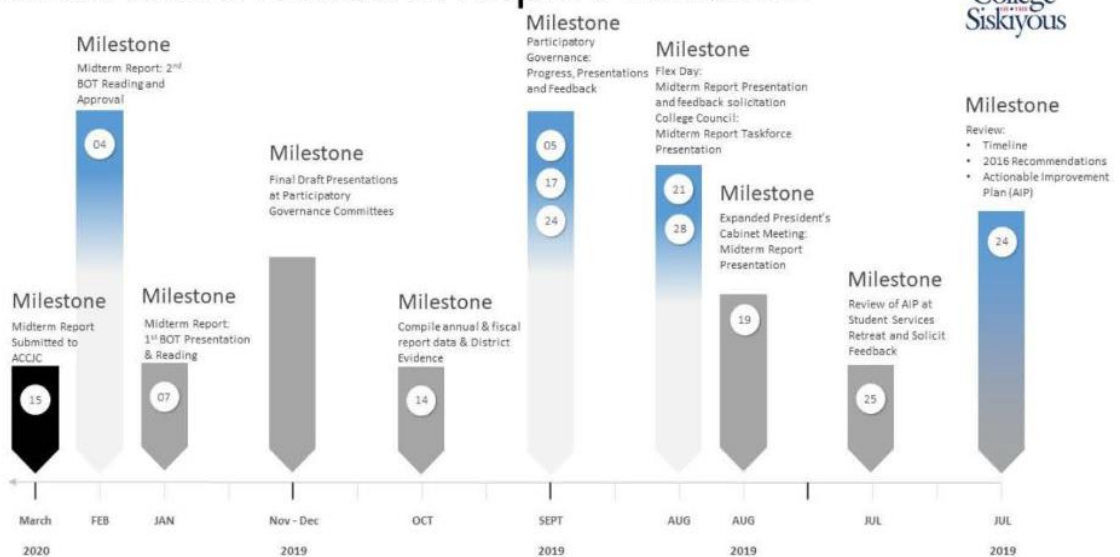| Name	Title
Eldridge, Elaine	Academic Programs Analyst
Green, Melissa	Vice President of Student Services
Gross, Kent	Director of Fiscal Services
Melby, Darlene	Vice President of Administrative Services
Perlas, Char	Vice President of Academic Affairs
Rexford, Nathan	Director of Research and Evaluation
Roberts, Dennis	Associate Dean of Instruction
Schoonmaker, Stephen	President
Thatcher, Patrice	Early Childhood Education Faculty
Turk, Jayne	Academic Senate President

Midterm Report Timeline

The timeline for submitting the 2020 Midterm Report demonstrates the involvement of students, faculty, staff and administrators in providing needed feedback and data. Because the outcomes, stemming from the 2017 Follow-Up Report, have been continuous, the timeline merely represents the work performed to compile and organize the required Midterm Report data. The Midterm Report Taskforce was intentional in ensuring that report communications followed the participatory governance process.

Furthermore, the timeline also indicates targeted instances when feedback was solicited. Specific feedback was collected from those with historical knowledge while reflections were collected via the College of the Siskiyous Accreditation website: http://www.siskiyous.edu/accreditation/reportreflections.htm.

Completion of the Midterm report would not have been possible without inclusion of all campus stakeholders.

2020 ACCJC Midterm Report Timeline

Milestone
Midterm Report: 2nd BOT Reading and Approval — 04

Milestone
Final Draft Presentations at Participatory Governance Committees

Milestone
Participatory Governance: Progress, Presentations and Feedback — 05, 17, 24

Milestone
Flex Day: Midterm Report Presentation and feedback solicitation
College Council: Midterm Report Taskforce Presentation — 21, 28

Milestone
Review:
• Timeline
• 2016 Recommendations
• Actionable Improvement Plan (AIP) — 24

Milestone
Midterm Report Submitted to ACCJC — 15

Milestone
Midterm Report: 1st BOT Presentation & Reading — 07

Milestone
Compile annual & fiscal report data & District Evidence — 14

Milestone
Expanded President's Cabinet Meeting: Midterm Report Presentation — 19

Milestone
Review of AIP at Student Services Retreat and Solicit Feedback — 25

| March 2020 | FEB | JAN | Nov - Dec 2019 | OCT 2019 | SEPT 2019 | AUG 2019 | AUG 2019 | JUL 2019 | JUL 2019 |

Plans Arising from the Self-Evaluation Process

In response to the 2017 Follow-up Report, two Actionable Improvement Plans (AIP) were developed: Recommendations to Meet the Standards and Recommendations to Improve Institutional Effectiveness. Both have yielded the following institutional documents which have proven beneficial to the College's overall effectiveness:

- 2016 – 2020 Technology Plan
- 2017 Planning by Design
- 2017-2020 EEO Plan
- 2017-2018 Enrollment Management Plan
- 2017 Facility Master Plan
- Institutional-set standards developed between the Academic Senate and IEPI
- SFPD Substantive Change Report
- ISA Program Reviews: FIELD and SFPD
- Administrative Procedure 4021, Program Discontinuance
- Full-time and part-time faculty evaluation tool (pending contract negotiations)
- Revised College Catalog timeline

New and revised processes resulting from the AIP include:

- System for collecting syllabi containing SLOs
- Budget development timeline and guidelines
- Evaluation of governance and decision making

College of the Siskiyous

An Exceptional
Learning Environment
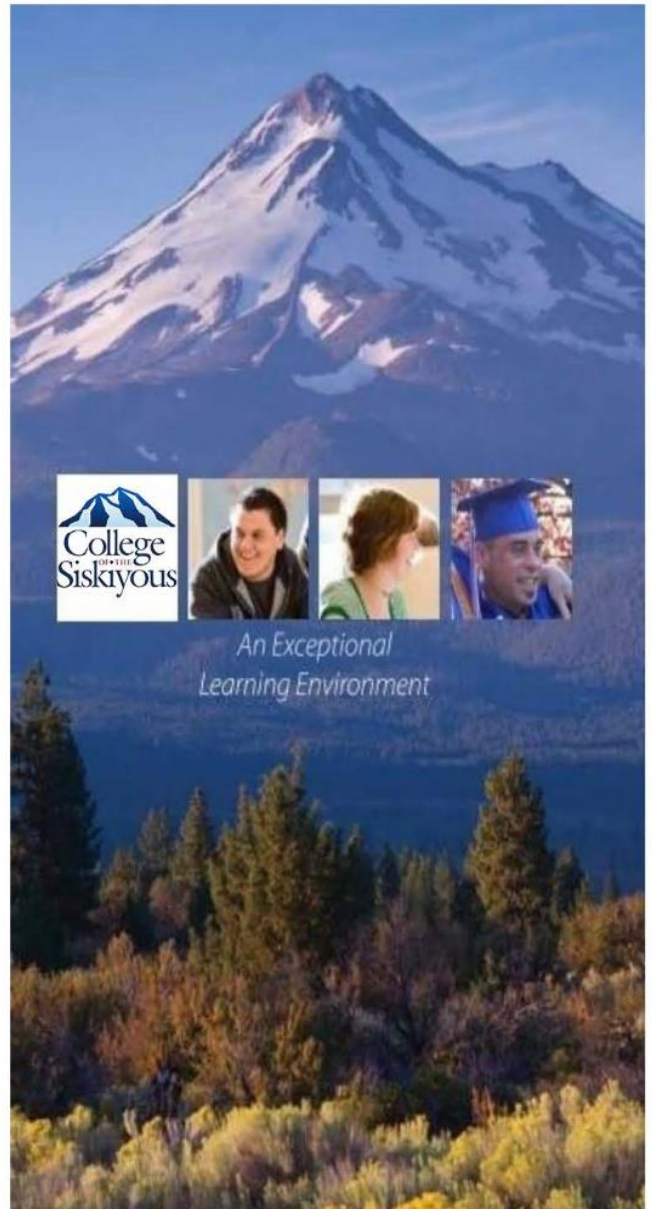
In the November 6, 2017 Follow-Up Visit Report, the following recommendations were found to be addressed and in compliance with ACCJC standards:

- **Recommendation 1**: In order to meet the Standards, the team recommends that the college review the propriety of its institution-set standards, assess student achievement and student learning relative to those standards, and address performance gaps in pursuit of continuous improvement. (I.B.2, I.B.3, IV.B.3)
- **Recommendation 2**: In order to meet the Standards, the team recommends that the college engage in integrated and sustained assessment, dialog, planning, and resource allocation, informed by data that has been disaggregated appropriate to the college community, leading to continuous improvement in student learning and student achievement. The team also recommends that, as a part of this planning process, a Technology Plan is completed, based on appropriate data, assessment, and dialog. (I.B.1., I.B.4, I.B.5, I.B.6, I.B.9, III.C.2, IV.B.3, ER19)
- **Recommendation 4**: In order to meet the Standard, the College should file a Substantive
- Change Report regarding its instructional Service Agreements for the FIELD and SFPA programs. (IC12)
- **Recommendation 5**: In order to meet the Standard, the team recommends the College develop a mechanism to ensure that all faculty include the College's approved student learning outcomes in course syllabi. (II.A.3)
- **Recommendation 6**: In order to meet the Standard, the team recommends the College develop mechanisms to assure that student learning outcomes assessment and program review take place for the FIELD and SFPA programs. (II.A.3)
- **Recommendation 7**: In order to meet the Standard, the team recommends that Administrative Procedure 4021, provide guidance on program elimination to ensure appropriate arrangements are made for students enrolled in the program to complete their education goals in a timely manner. (II.A.15)
- **Recommendation 8**: In order to meet the Standard, the College must include consideration of how employees are using the results of the assessment of learning outcomes to improve teaching and learning in the evaluations of regular faculty, part-time faculty, and managers who are directly responsible for student learning. (III.A.6)
- **Recommendation 9**: In order to meet the Standard, the College must demonstrate that it creates and maintains appropriate programs, practices, and services that support its diverse personnel and regularly assess its record in employment equity and diversity consistent with its mission. (III.A.12)

The AIP (Appendix A) details as well as provides evidence on how the college achieved compliance.

An inclusive process was used to collect the data required to address the questions below. With the use of Google Sheets posted on the college's Accreditation website, we were able to generate responses which represents the reflections of faculty, staff and administrators.

Assessment Process Reflections-Instruction

- What are the strengths of the process that helps lead the college to improve teaching and learning?
  We have over the years, clarified the obvious connection between direct and indirect assessment methods and have aligned them with curriculum and content to meet the needs of our students. In efforts to articulate this process, in 2018, a Student Learning Outcomes taskforce was developed and worked with a consultant, Dr. Lori Sours, in creating a Student Learning Outcomes and Assessment Manual for Faculty. The manual outlines types of assessments, SLO Assessment cycle by discipline, recommended number of assessment points and SLO Assessment timeline. The manual serves as a guide for analyzing and documenting meaningful assessment outcomes.
- What growth opportunities in the assessment process has the college identified to further refine its authentic culture of assessment?
  Guided Pathways is currently being seen as an opportunity to support initiatives towards authentic assessment. As such, we are re-evaluating our assessment process and have initiated dialog on reestablishing Institutional Learning Outcomes and creating communities of practice focused on outcomes analysis and strategies to improve learning.
- Provide examples where course, program, or service improvements have occurred based on outcomes assessment data.
  Assessment data, showing student success rates, have influenced our program to create tools to more closely monitor student engagement and participation. The data has also allowed us to identify those who are struggling early to provide them with the support needed to succeed. Examples include the launch of 'U' can do it (early alert system), embedded tutoring and creation of co-requisite courses.
- In those areas where assessment may be falling behind, what is the college doing to complete the assessments per the college's schedule.
  The college is committed to adhering to the assessment schedule as identified in the SLO and Assessment Manual. We are also committed to insuring that assessment of outcomes are performed and documented in a manner consistent with ACCJC Standards. As a result, our Participatory Governance groups are currently reviewing our SLO and Assessment Manual and will implement recommended revisions. Currently, via our Program Review cycle, the college is completing assessments per the college's schedule.

Assessment Process Reflections-Student Services

- What are the strengths of the process that helps lead the college to improve teaching and learning?
  Strengths of the process include:
  a. Having a position dedicated to facilitating the assessment and program review processes. This person provides guidance, education, direction, and support.
  b. Working collectively as a Student Services unit on Program Reviews and Service Area Outcomes (SAO).
- What growth opportunities in the assessment process has the college identified to further refine its authentic culture of assessment?
  In Student Services, there are several opportunities for growth in the assessment process. We are working on creating and expanding meaningful SAOs and posting those outcomes on our webpages. During the Fall 2019 Planning Day, Student Services engaged in an activity that allowed us to identify existing data and to use that data to inform our SAOs.
- Provide examples where course, program, or service improvements have occurred based on outcomes assessment data.
  Examples where service improvements have occurred based on outcomes data are numerous:
  a. As a result of feedback from Noel Levitz Student Satisfaction Surveys, there was an increase in the number of professional development activities, related to COS academic program and/or career guidance, in which counselors and advisors participated.
  b. Reformed assessment process which provided an opportunity for students to enter transfer level English and Math in their first year.
  c. Re-instituting meal cards for EOPS students based on end-of-semester exit surveys.
  d. Financial Aid improved and expedited the process of awarding packages by using Inceptia.
  e. Increased student awareness of how to establish residency.
  f. Identified and increased award rates (partnership between A&R and Counseling).
  g. Decreased Loan Default Rate by implementing 3rd party service to intervene when students are delinquent. The 3rd party service assists students in securing feasible repayment options.
  h. Improved timelines for financial aid disbursements.
  i. Implementation of a Universal Application which resulted in helping students get access to special services before the start of the semester.
  j. Creation of a Behavioral Intervention Team resulted in follow-up and actions for assisting students in distress.
- In those areas where assessment may be falling behind, what is the college doing to complete the assessments per the college's schedule.
  The college is providing support for Student Services to streamline the SAO process by identifying resources required to collect and track data needed for SAO analysis. Through review of the SLO Manual, we anticipate inclusion of a new Service Area Outcomes section that will clarify the SAO process and provide an SAO Assessment timeline.

Institution Set Standards

The Institution-Set Standards provides baseline data that has allowed the college to reflect on progress in achieving course, degree, certificate, transfer and student learning outcomes assessment completion. As noted in the report, the last three years, the college did not identify aspirational goals in each area. In alignment with the California Community Colleges Chancellor's Office Vision for Success goals, the College's stretch goals for 19-20 are as follows:

- Student Course Completion – Increase by 20% or 78
- Degree Completion – Increase by 20% or 192
- Certificate Completion – Increase by 20% or 120
- Transfer – Increase by 20% or 168

These goals will be implemented and reflected upon in our upcoming Annual Report as well as included in our Enrollment Management Plan.

Analysis of Institution Set-Standard data indicates the following:

- *Student Course Completion* – As a result of the high success rates of our CTE courses, we perform above our set standard. Initiatives implemented to further improve outcomes include those associated with Guided Pathways implementation.
- *Degree Completion* – Data shows that we exceeded our Institution Set Standard. Initiatives implemented that increased degree completion are those aligned with AB 705 (College of the Siskiyous implemented Multiple Measures Placement in 2016).
- *Certificate Completion* – The College did not meet the set standard in Years 1 or 2 but exceeded the set standard in year 3 by 15%. Initiatives implemented that contributed to this increase include a growth in the number of credit and noncredit certificates offered.
- *Transfer* – As with certificate completion, the College did not meet the set standard in Years 1 or 2 but exceeded the set standard in Year 3 by 31%. The increase in Year 3 can be attributed to a robust student-athlete population and cutting-edge success rates in college level math.

In conjunction with the 2020 Midterm Report, Annual Report Data was shared widely with the college community through the Participatory Governance Process. Specific data relating to the College leading Multiple Measures Placement, prior to the implementation of AB 705, can be accessed in the October 2019 Public Policy Institute of California Publication, 'What Happens When Colleges Broaden Access to Transfer-Level Courses?'

ACCJC Midterm Report Data Form

Click Here for Word Version

(for reports due through Spring 2020)

ANNUAL REPORT DATA

INSTITUTION-SET STANDARDS

STUDENT COURSE COMPLETION
(Definition: The course completion rate is calculated based on the number of student completions with a grade of C or better divided by the number of student enrollments.)

Category	Reporting Years since Comprehensive Review		
	Year 1	Year 2	Year 3
Institution Set Standard	65	65	65
Stretch Goal	NA	NA	NA
Actual Performance	76	77	77
Difference between Standard and Performance	+11	+12	+12
Difference between Stretch Goal and Performance	NA	NA	NA

Analysis of the data: Boosted by the high success rates of our CTE courses, we perform above our set standard

DEGREE COMPLETION
(Students who received one or more degrees may only be counted once.)

Category	Reporting Years since Comprehensive Review		
	Year 1	Year 2	Year 3
Institution Set Standard	160	160	160
Stretch Goal	NA	NA	NA
Actual Performance	162	206	186
Difference between Standard and Performance	+2	+40	+26
Difference between Stretch Goal and Performance	NA	NA	NA

Analysis of the data: The introduction of the Student Centered Funding Formula (SCFF) provides greater incentives to award degrees even to successfully transferring students

CERTIFICATE COMPLETION
(Students who received one or more certificate may only be counted once.)

Category	Reporting Years since Comprehensive Review		
	Year 1	Year 2	Year 3
Institution Set Standard	100	100	100
Stretch Goal	NA	NA	NA
Actual Performance	69	55	115
Difference between Standard and Performance	-31	-45	+15
Difference between Stretch Goal and Performance	NA	NA	NA

Analysis of the data: As above, the (SCFF) provides greater incentives to pro-actively award students with certificates

TRANSFER

Category	Reporting Years since Comprehensive Review		
	Year 1	Year 2	Year 3
Institution Set Standard	140	140	140
Stretch Goal	NA	NA	NA
Actual Performance	123	102	184
Difference between Standard and Performance	-17	-38	+44
Difference between Stretch Goal and Performance	NA	NA	NA

Analysis of the data: Our transfer rates often vary with our robust student-athlete population but commitment Multiple Measures Placement, prior to the implementation of AB 705, has made more students transfer-ready faster by removing exit points.

STUDENT LEARNING OUTCOMES ASSESSMENT

	Year 1	Year 2	Year 3
Number of Courses	978	978	
Number of Courses Assessed	100%	100%	
Number of Programs	67	67	
Number of Programs Assessed	100%	100%	
Number of Institutional Outcomes	0	0	
Number of Outcomes Assessed	0	0	

Analysis of the data:

Data for Year 3: As a result of the elimination of CurricUNET, there is no data for Year 3. The College is currently working on identifying an SLO Repository system and will have one in place by the end of the Academic Year.

100% Data: Student Learning Outcomes Assessment is currently being reviewed by our Participatory Governance groups. Past practice of outcomes assessment included calculation of final grades as the determining factor of SLO achievement. As a result of information recently shared with faculty, this past practice will be replaced with one that is reflective of SLO Assessment best practices.

'0' Institutional Learning Outcomes: Institutional Learning Outcomes (ILO) was discontinued after the 2012 Institutional Self Evaluation Report (ISER) and was replaced with General Education Student Learning Outcomes. ILOs are currently being revisited through the Participatory Governance process and dialog has commenced regarding revision and application of ILOs.

The College looks forward to highlighting its revised SLO Assessment processes and results in the 2023 ISER.

LICENSURE PASS RATE

(Definition: The rate is determined by the number of students who passed the licensure examination divided by the number of students who took the examination.)

Program Name	Institution Set Standard	Actual Performance			Difference			Stretch Goal	Difference		
		Y1	Y2	Y3	Y1	Y2	Y3		Y1	Y2	Y3
Paramedic	80	100	100	100	+20	+20	+20	NA	NA	NA	NA
Fire Science	85	100	94	100	+15	+9	+15	NA	NA	NA	NA
Administration of Justice	85	100	100	100	+15	+15	+15	NA	NA	NA	NA
Nursing	90	97	93	93	+7	+3	+3	NA	NA	NA	NA

JOB PLACEMENT RATE

(Definition: The placement rate is determined by the number of students employed in the year following graduation divided by the number of students who completed the program.)

Program Name	Institution Set Standard	Actual Performance			Difference			Stretch Goal	Difference		
		Y1	Y2	Y3	Y1	Y2	Y3		Y1	Y2	Y3
Paramedic	80	100	100	100	+20	+20	+20	NA	NA	NA	NA
Fire Science	80	87	90	90	+7	+10	+10	NA	NA	NA	NA
Administration of Justice	80	80	47	90	+0	-33	+10	NA	NA	NA	NA
Nursing	90	97	93	100	+7	+3	+10	NA	NA	NA	NA

Report on Quality Focus Essay Outcomes

Overview

In the College's 2016 Quality Focus Essay (QFE), two areas were identified as problematic:

1. Centralizing the collection of institutional data to better inform college-wide decision making.
2. Increasing the quality and consistency of assessment of student learning through Student Learning Outcomes.

This resulted in the following Action Projects:

- **Action Project #1:** The College will create a data system that integrates the currently separate data systems. After the College has created an integrated data system, the College will provide consistent and ongoing training for all employees who work with the data. The College will construct a data warehouse and an easily accessible, online dashboard for commonly used queries and data reports.
- **Action Project #2:** The College will re-energize professional development for faculty regarding student learning outcomes and assessment and their role in Program Review. The College will enhance mechanisms for collecting assessment data at the end of each term; these mechanisms will encourage analysis and reflection for improving student learning. The College will make a concerted effort to involve all part-time instructors in the collection and analysis of assessment data. The College will find or create a data system that will disaggregate assessment data for the purpose of helping faculty, Student Support Services staff, and Learning Support Services staff to identify achievement gaps between populations.

PROGRESS – ACTION PROJECT #1

Year 1: 2015 – 2016 Objectives

- Complete evaluation of Banner system
    - Status: Complete.
- Begin to integrate recommendations of the evaluation of Banner system
    - Status: Mostly complete. Since 2015-2016 school year, the college has worked on the following projects directly connected to this evaluation: successful transition to Banner 9, significant revitalization of Student Banner, nearing completion of Banner HR revitalization.
- Conduct training sessions for employees inputting data into system:
    - Status: Complete. All functional areas have at least one staff member with training on necessary data entry for the relevant Banner forms.
- Develop common data definitions and a list of common reports for regular dissemination.
    - Status: In progress. Broad-scope enrollment management report runs each night to enable live updates for a variety of stakeholders and trend analysis potential for the IR office. Common data definitions have been aided by alignment of college frameworks towards Guided Pathways and Vision for Success Goals.
- Transition Program Review and SLO data results to the Office of Instruction
    - Status: Modified and In Progress. Updated Program Review manual calls for the Office of Institutional Research to maintain Program Review records. Updated SLO manual working its

way through participatory governance process, current draft calls for IR office to maintain these records as well. College is evaluating software solutions to enable both straightforward and comprehensive access to these records by the Instruction Office.

Year 2: 2016-2017 Objectives

- Evaluate the first year integration projects of the Banner system
  - Status: Complete.
- Determine actions to be taken based on the evaluation
  - Status: Mostly complete, please see second bullet point in the 2015-2016 school year.
- Create data warehouse and common queries and reports for the Program Review process and other institutional effectiveness processes
  - Status: Discontinued in part, completed in part. Extensive feasibility analysis which included multiple onsite visits by consultants offering detailed training in data warehouse oversight revealed a lack of institutional capacity in both the IR and IT departments to support an active data warehouse. As such, the project was discontinued in favor of targeted improvements to reports and reporting processes. One example concerns the "Program Review Data Report" as part of the academic program review process. In its second year, this data report represents a significant achievement in providing standardized accessible data to principle preparers.
- Create a dashboard for accessing data warehouse
  - Status: Modified and in progress. With the data warehouse project discontinued, efforts turned to ensuring that key stakeholders would have sufficient training to review meaningful data on-demand. This has been most fully realized with our enrollment management report, available daily to key stakeholders via export to a shared drive. Currently an offshoot of this report is in development providing more detailed productivity information for more specific use in the Office of Instruction.
- Increase participation of units, areas, programs in the new processes
  - Status: mostly complete. All academic programs fall under standardized program review process and receive relevant data report (see third bullet point in this section). Non-academic areas have identified subtly different processes through yearly evaluations of their program or area. The college has a current timetable of Spring 2020 for completion of a standardized "program review guide" that recognizes linkages in the processes and minimizes redundancies.

Year 3: 2017-2018

- Fully implement redesigned data query processes with changes
  - Status: In progress. Program Review Data Report fully implemented. Enrollment Management report fully implemented, with productivity offshoot near completion. SLO data collection/maintenance processes under discussion as manual progresses through participatory governance process.

- Evaluate for effectiveness of integration with Program Review, institutional evaluation, planning, and resource allocation/budgeting
  - Status: Mostly complete. After pilot year, Office of Institutional Research will perform first mandated "review of process" after 2019-2020 program review cycle is completed in late Spring 2020. Discontinuation of data warehouse project was the result of in-depth opportunity cost analysis jointly conducted by IR and IT departments. Institutional Master Plan has been revised to reflect current college aims while aligned with Vision for Success goals. A more detailed Comprehensive Strategic Plan is intended to be fully drafted by Spring 2020 with full completion by Summer 2020 for approval in the 2020-2021 academic year.
- Adjust and/or address areas in need of improvement (as appropriate)
  - Status: Continuously in progress. Through Continuous Quality Improvement Proposal process, each unit has opportunity to propose new processes with funding requests as appropriate. In relation to Action Project 1: this process opened up district funds to cover 10% of Research Analyst to support the Office of Institutional Research in its data collection and dispersal processes.

PROGRESS – ACTION PROJECT #2

Immediately following the ACCJC follow-up visit, steps were made towards completion of this project. In efforts to achieve the desired outcome (below), a consultant was hired to work with the faculty in providing professional development as well as to guide their work on the development of a Student Learning Outcomes and Assessment manual.

> *Reinforce with all faculty the process of developing learning outcomes for courses and programs, assessing student achievement of those outcomes, and using assessment results to make improvements to teaching and learning. All faculty will include a list of the approved learning outcomes on first-day handouts, will understand and utilize appropriate methodologies for properly and consistently assessing learning outcomes at the course and program level, and will be able to report and discuss assessment results in Program Review for the purpose of improving teaching and learning.*

Year 1: 2015-2016

- Submitted Technical Assistance Application to the Institutional Effectiveness Partnership Initiative (IEPI) for assistance in evaluation of the institution's SLO processes
  - Status: Complete
- Developed an implementation plan based on the evaluation of the current SLO process
  - Status: Complete
- Developed Academic Senate FLEX day(s) for faculty wide dialogue on the SLO development and assessment process
  - Status: Complete

- Negotiated between District and Faculty Bargaining Unit compensation to ensure participation by all faculty, especially part-time faculty
  - Status: Complete
- Made progress on the percentage of faculty participation in the SLO assessment process
  - Status: Complete
- Developed a process in which SLO analysis is more easily integrated and accessible within Pro- gram Review process
  - Status: Complete
- Develop a Program Review Handbook
  - Status: Complete

Year 2: 2016-2017

- Evaluating the first year integration projects of SLO development and assessment process
  - Status: In Progress
- Determining actions to be taken based on the evaluation
  - Status: In Progress
- Increasing the percentage of SLO assessment participation
  - Status: In Progress
- Regular faculty wide dialogue on SLO assessment data at Faculty Senate FLEX Day(s)
  - Status: In Progress and Ongoing

Year 3: 2017-2018

- Fully implementing redesigned process with changes
  - Status: In Progress
- Evaluating for effectiveness of SLO development and assessment process
  - Status: In Progress
- Adjusting and/or address areas in need of improvement (as appropriate)
  - Status: In Progress

The College has taken an in-depth look at our progress towards Action Project #2 and, in doing so, discovered areas that could be improved. Although we haven't completed all of our desired objectives, moving forward, we have the opportunity to further refine our SLO and Assessment process so that it is meaningful and advantageous for our students.

Fiscal Reporting

The Annual Fiscal Report Data includes data analysis as well as the following strategies for improvement:

- *General Fund Performance:* Establishment of a local Police Academy to replace the College's previous Instructional Service Agreement (ISA) with San Francisco Police Academy. The discontinuation of our ISA with the San Francisco Policy Academy resulted in a loss of 486 FTES during Year 1.
- *Other Post-Employment Benefits:* As a result of a closed program for retiree health benefits, the District has been able to stabilize costs and increase its funded ratio through contributions and solid investing through the CCC League JPA.
- *Enrollment:* Initial reduction in FTES during Year 1 resulting from discontinuance of our ISA with the San Francisco Policy Academy. Strategies implemented that contributed to an increase in FTES include our ISA with FIELD, increase in Distance Education sections, outreach and student athlete recruitment efforts and, innovative scheduling.
- *Financial Aid:* In efforts to reduce the District's default loan rate, the District has been working with ECMC. The Student Loan Default rate decreased .5% from Year 2 to Year 3.

Furthermore, the College anticipates an increase in enrollment resulting from Guided Pathways efforts. Currently, Guided Pathway Pillar Teams are identifying gaps to enrollment and strategies to close those gaps. Data resulting from these efforts will be directly applied to the Enrollment Management Plan.

Draft Design Principles created, with input from the entire college community, at the Fall 2019 Orientation Day.

ANNUAL FISCAL REPORT DATA

Category	Reporting Years since Comprehensive Reviews		

General Fund Performance

	Year 1	Year 2	Year 3
Revenue	20,171,205	20,972,479	21,932,498
Expenditures	20,456,573	20,887,145	20,251,389
Expenditures for Salaries and Benefits	14,617,733	14,041,592	13,047,579
Surplus/Deficit	(285,368)	85,334	1,681,109
Surplus/Deficit as % Revenues (Net Operating Revenue Ratio)	(1.41%)	0.41%	7.66%
Reserve (Primary Reserve Ratio)	13.72%	14.81%	14.85%

Analysis of the data: 2015-16 was a windfall year due to an ISA with San Francisco Police Academy. Those funds have been invested into an on-campus police academy program as part of the transition from an ISA academy to our own academy

Other Post-Employment Benefits

Actuarial Accrued Liability (AAL) for OPEB	7,149,969	7,104,528	7,104,528
Funded Ratio (Actuarial Value of Plan Assets/AAL)	23.82%	13.66%	13.66%
Annual Required Contribution (ARC)	925,701	549,971	549,971
Amount of Contribution to ARC	699,055	649,266	692,586

Analysis of the data: For 17-18, the ARC is no longer required in the Actuarial Study, however, the actuarial provided the amount in a separate letter to the District. The District has a closed program for retiree health benefits and has been able to stabilize the costs and increase its funded ratio through contributions and solid investing through the CCCC League JPA

Enrollment

Actual Full-Time Equivalent Enrollment (FTES)	2,453.91	2,500.87	2,819.84

Analysis of the data: Reduction in FTES from scheduled loss of ISA with San Francisco Police Academy

Financial Aid

USED Official Cohort Student Loan Default Rate (FSLD - 3 year rate)	20.0%	23.4%	22.9%

Analysis of the data: District has been working with ECMC in a loan default prevention program to help reduce the District's default loan rate.

Appendices

APPENDIX A: Actionable Improvement Plan

ACTIONABLE IMPROVEMENT PLAN
Recommendations to <u>Meet</u> the Standards
Developed August 8, 2017/Updated September 24, 2019

Recommendations to Meet the Standards	Responsible Party	Action Plan	Progress	Date Completed and Evidence
Recommendation 1 In order to meet the Standards, the team recommends that the college review the propriety of its institution-set standards, assess student achievement and student learning relative to those standards, and address performance gaps in pursuit of continuous improvement. (I.B.2, I.B.3, IV.B.3)	Bart Scott Academic Senate	Develop one set of institutional-set standards between the Academic Senate and IEPI.	All minutes including Senate Exec and Board minutes that document processes are posted online. Chris Vancil and Academic Senate will review the language in the draft follow-up report. Bart will research the last two years of the Board minutes to see whether the Board received information on the institutional standards or the institutional goals.	September 2017 Senate Executive Committee Minutes: http://www.siskiyous.edu/academicsenate/agendas-minutes/ExecutiveCommittee/ Institutional-Set Standards: http://www.siskiyous.edu/accreditation/documents/AnnualReports/2016_Annual_Report.pdf
Recommendation 2 In order to meet the Standards, the team recommends that the college engage in integrated and sustained assessment, dialog, planning, and resource allocation, informed by data that has been disaggregated appropriate to the college community, leading to continuous improvement in student learning and student achievement. The team also recommends that, as a part of this planning process, a Technology Plan is completed, based on appropriate data, assessment, and dialog. (I.B.1, I.B.4, I.B.5, I.B.6, I.B.9, III.C.2, IV.B.3, ER19)	Eric Houck Bart Scott Planning Committee Shirley Louie Jesse Cecil	1. Complete the Technology Plan. 2. Review disaggregated data of all measures of student learning and achievement.	The current draft of the Planning by Design document includes revisions made by Scotty Thomason, Nancy Funk, Bart Scott, and Academic Senate. The Planning Committee, Academic Senate, and College Council will review the final draft of the current Planning by Design document in the next few weeks. Eric Houck will provide Dr. Scott with a narrative of the Technology Plan as well as minutes from the Technology Council in which this document was discussed. He will also call a meeting of the Technology Council to review the Technology Plan. Eric will provide Darlene Melby and Dr. Schoonmaker with a draft of the Technology Plan today.	September 2017 Planning By Design document: http://www.siskiyous.edu/planning/documents/PbD_Updated_Sep2017.pdf Technology Plan: http://www.siskiyous.edu/accreditation/2017_Follow-Up_Report/documents/2.11_Technology_Master_Plan_2016-2020.pdf

Recommendations to Meet the Standards	Responsible Party	Action Plan	Progress	Date Completed and Evidence
Recommendation 4 In order to meet the Standard, the College should file a Substantive Change Report regarding its Instructional Service Agreements for the FIELD and SFPA programs. (IC12)	Dr. Todd Scott Samantha Worthington	A Substantive Change Report will filed for the SFPA program.	Dr. Scott will prepare a Board Report for the September Board meeting covering the substantive change report for new programs that alter in locations (FIELD and SFPD). The Substantive Change Report will then be submitted to ACCJC on September 13, 2017. We are still awaiting a letter from Sequoias.	September 2017 Substantive Change Report: https://go.boarddocs.com/ca/sjccd/Board.nsf/files/AQXT8S760D9A/$file/Substantive%20Change%20Proposal.pdf Substantive Change Proposal Board Report: https://go.boarddocs.com/ca/sjccd/Board.nsf/files/AQXT8P7603D7/$file/Board%20Report%20No.%204963%20-%20Substantive%20Change%20Proposal.pdf
Recommendation 5 In order to meet the Standard, the team recommends the College develop a mechanism to ensure that all faculty include the College's approved student learning outcomes in course syllabi. (II.A.3)	Dr. Todd Scott	All course syllabi will be reviewed to be sure that SLOs are included. A procedure will be developed to ensure that all the necessary elements are included in the course syllabi.	Dr. Scott emailed all faculty requesting that their syllabi contain SLO's. Vickie then compared the syllabi to the corresponding course outlines to ensure that the SLO's match. Dr. Scott has email evidence that his office followed up on those courses in which the syllabi were incomplete. Vickie has created a spreadsheet which will show that this process has been in place for three consecutive semesters.	September 2017 **Spreadsheet is located in shared** N **drive**
Recommendation 6 In order to meet the Standard, the team recommends the College develop mechanisms to assure that student learning outcomes assessment and program review take place for the FIELD and SFPA programs. (IIA3)	Dr. Todd Scott	Mechanisms will be developed to ensure that student learning outcomes assessment and program reviews for FIELD and SFPA programs are completed.	Samantha Worthington was hired as the FIELD ISA Director. She will be ensuring that the FIELD syllabi contain SLO's and that class assessments are being conducted. Dr. Scott and Samantha will be responsible for completing the Program Review for FIELD. A member of the faculty will receive a stipend to visit SFPD to ensure that their syllabi contain SLO's and that class assessments are being conducted. They will also be responsible for completing the Program Review for SFPD.	February 2018 **FIELD and SFPD Program Reviews are located in shared N drive**

Recommendations to Meet the Standards	Responsible Party	Action Plan	Progress	Date Completed and Evidence
Recommendation 7 In order to meet the Standard, the team recommends that Administrative Procedure 4021 provide guidance on program elimination to insure appropriate arrangements are made for students enrolled in the program to complete their education goal in a timely manner. (II.A.15)	Dr. Todd Scott	Administrative Procedure 4021 will be updated and submitted to Instruction Council, College Council, and the Board of Trustees for approval.	AP 4021 was approved by College Council on May 10, 2016, and reviewed by the Board in June 2016.	June 2016 AP 4021: http://www.siskiyous.edu/bpap/procedures/academic/ap4021.pdf
Recommendation 8 In order to meet the Standard, the College must include consideration of how employees are using the results of the assessment of learning outcomes to improve teaching and learning in the evaluations of regular faculty, part-time faculty, and managers who are directly responsible for student learning (III.A.6).	Dr. Todd Scott Nancy Miller Faculty Association Faculty Senate Exec Theresa Richmond Campus leadership	Develop the same evaluation tool for both the full-time and part-time faculty.	The evaluation form is working its way through the approval process and will be in use for spring 2018.	January 2018 **The evaluation form has been approved but is currently pending implementation resulting from negotiations.**
Recommendation 9 In order to meet the Standard, the College must demonstrate that it creates and maintains appropriate programs, practices, and services that support its diverse personnel and regularly assess its record in employment equity and diversity consistent with its mission (III.A.12).	Bart Scott Theresa Richmond Melissa Green	1. Review disaggregated data of our hiring practices in how it relates to diversity. 2. Investigate the history of the Diversity Council.	A Diversity Council has been created. Its members include students and staff. This Council has developed both their mission and vision statements. The EEO Plan for 2017-2020 was approved by the Board at their June 6, 2017, meeting. Faculty, staff, and administrators evaluation forms contain a diversity component. Bart provided data to HR and information has been disseminated in the EEO plan that went to the Board. Melissa Green will submit a campus climate survey.	September 2017 Diversity Committee: http://www.siskiyous.edu/committees/diversity/ EEO Plan: http://www.siskiyous.edu/accreditation/2017_Follow-Up_Report/documents/9.2_Equal_Employment_Opportunity_Plan_20172020.pdf Campus Climate Survey: http://www.siskiyous.edu/committees/diversity/documents/StudentClimateSurvey.pdf

Recommendations to <u>Improve</u> Institutional Effectiveness
August 8, 2017 / Updated September 24, 2019

Recommendations to Improve Institutional Effectiveness	Responsible Party	Action Plan	Progress	Notes and Evidence
Recommendation 3 In order to improve institutional effectiveness, the team recommends that the College establish a timeline and responsible individuals for updating both the print and electronic version of the College catalog. Additionally, the team recommends that the updating of the College catalog be coordinated with the updating of the College website to insure students are provided the most current and accurate information. (I.C.1, I.C.2)	Dr. Todd Scott Elaine Eldridge	1. Communicate to the Campus Community as to who is responsible for keeping the online schedule current. 2. Communicate to the Campus Community the timeline for updating the College catalog.	Dr. Scott will check with Elaine and obtain evidence that the non-instructional sections of the catalog have been updated.	Completed - Process is in place and notifications have been made. **2020-2021 Production Calendar distributed**
Recommendation 10 In order to increase institutional effectiveness, the College should create a comprehensive enrollment management plan to address long term fiscal stability in conjunction with its current Instructional Service Agreements (ISAs). (III.D.1 III.D.10)	Dr. Todd Scott Melissa Green	1. Document the reasons why the College has had decreases over the years. 2. Develop a plan to increase our base FTES.	Melissa will set up participatory governance Enrollment Management Committee which will begin meeting in September, 2017.	The Enrollment Management Committee began meeting in September, 2017. http://www.siskiyous.edu/committees/enrollment/
Recommendation 11 In order to improve institutional effectiveness and provide for increased budget transparency, the team recommends that the College administration ensure that the Planning by Design: An Integrated Planning Model document be updated to reflect the current Budget Development and Revision Process and that this new process be widely disseminated throughout the campus governance and committee structures. (III.D.2, III.D.3)	Dr. Stephen Schoonmaker Darlene Melby Bart Scott	Update the Planning by Design document.	Dr. Scott and Dr. Schoonmaker are working together to figure out how to obtain feedback from the campus in regards to our planning processes. One idea is to have a presentation on Planning Day and then share it with our current governance structure. Darlene and Dr. Schoonmaker will be writing up additional information for addition to the Planning by Design document. The current draft of the Planning by Design document includes revisions made by Scotty Thomason, Nancy Funk, Bart Scott, and Academic Senate.	Completed Planning by Design Document: http://www.siskiyous.edu/planning/documents/PbD_Updated_Sep2017.pdf

Recommendations to Improve Institutional Effectiveness	Responsible Party	Action Plan	Progress	Notes and Evidence
Recommendation 12 In order to improve institutional effectiveness and provide for increased budget transparency, the team recommends that the College administration publicize and disseminate the Summary of Budget Requests document and that this information be shared on a regular basis with the campus community as resource allocation decisions are made and be included as a component of the budget development and revision process. (III.D.6)	Darlene Melby Dr. Stephen Schoonmaker	Send emails to the Campus Community regarding the budget development process, resource allocation decisions, etc.	Budget managers and their assistants attending a budget training session. Dr. Scott will work with Kent to obtain materials that were distributed during the budget training sessions. The budget development timeline and guidelines are posted on the Budget Committee webpage along with agendas and minutes of the meetings. As well as the tentative and final budget and budget assumptions. Also, every year there is a Board Study Session in May, which is open to the public, prior to the Board approving the budget.	2017-18 will be a transition year to new processes and will be reflected in the increased sharing of information electronically and verbally. Integrated Planning and Budget Website: http://www.siskiyous.edu/committees/planningbudget/ Budget Timeline and Guidelines: http://www.siskiyous.edu/planning/documents/PbD_Updated_Sep2017.pdf
Recommendation 13 In order to improve institutional effectiveness, the team recommends that the College continue the evaluation process of the governance and decision-making processes but more widely communicate those results to the campus community. (IV.A.7)	Dr. Stephen Schoonmaker	Michael Graves will develop an Administrative Procedures that specifies that the follow Committees: Budget Committee, College Council, Instruction Council, Planning Committee, Student Services Council, and Technology Council completes a self-evaluation as well as establish goals for the following year on an annual basis in the spring. The results of the self-evaluation will be posted on each committee's page.	Administrative Procedure 3250 was revised and reviewed by the Board at their February 7, 2017, meeting. The Campus-Wide Standing Committee's annual reports for the last two years were completed and are available on the COS website. This year's annual reports were reviewed by the Board at their August, 2017, Board meeting. Dr. Schoonmaker has met with all groups on campus to discuss governance. Process will not be in place by the October visit but will be worked on extensively through this year.	Ongoing **Administrative Services Council** http://www.siskiyous.edu/committees/administrativeservices/documents/annualreport_2018-19.pdf **College Council** http://www.siskiyous.edu/committees/collegecouncil/documents/annualreport.pdf **Integrated Planning and Budget** http://www.siskiyous.edu/committees/planningbudget/documents/annualreport_2018-19.pdf **Instruction Council** http://www.siskiyous.edu/committees/InstructionCouncil/documents/annual

				_report_2017-18.pdf **President's Cabinet** http://www.siskiyous.edu/committees/presidentscabinet/documents/annual report.pdf **Student Services Council** http://www.siskiyous.edu/committees/studentservicescouncil/documents/annual_report_2018-19.pdf
Recommendation 14 In order to improve institutional effectiveness, the team recommends that the College follow through on assessments of co-curricular offerings, collect the data and perform the analysis to better inform programmatic improvement. (II.C.4)	Dr. Todd Scott Dennis Roberts	Conduct program reviews in Kinesiology and Athletics.	A comprehensive Kinesiology program review was completed during the last cycle in 2015-2016. Administrative and Student Services Program Reviews are posted online under the Research & Evaluation webpage. Bart is holding a few of the new Program Reviews which he would like to discuss with the appropriate individuals prior to posting online.	Completed **Program Reviews are located in the shared N Drive**