

EVALUATION REPORT

ALLAN HANCOCK COLLEGE

800 South College Drive
Santa Maria, CA 93454-6399

A Confidential Report Prepared for
The Accrediting Commission for Community and Junior Colleges
Western Association of Schools and Colleges

This report represents the findings of the evaluation team that visited
Allan Hancock College from March 2 through March 4, 2004

Dr. Casey Crabill, Chair

ALLAN HANCOCK COLLEGE

Team Roster

March 2-4, 2004

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College of the Redwoods

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Ms. Maxine Moore
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SUMMARY OF THE EVALUATION REPORT

INSTITUTION: Allan Hancock College

DATE OF VISIT: March 2-4, 2004

TEAM CHAIR: Casey Crabill, President/Superintendent
College of the Redwoods

An eleven-member accreditation team visited Allan Hancock College (AHC) in early March 2004 as part of the college's comprehensive evaluation for reaffirmation of accreditation. Allan Hancock, a single college district, has a main campus located in Santa Maria and centers in Lompoc and on Vandenberg Air Force Base, as well as an instructional site in Solvang. During the visit, the team met with members of the Board of Trustees, students, faculty, staff, and administrators, for a total of 233 individual interviews with faculty, staff, and administrators, and 75 with students. In addition, the team attended numerous standing and ad hoc committee meetings and 35 classroom visits.

Like all community colleges in California, AHC has recently experienced significant budget reductions. The team noted strong college-wide support for the process used and the success experienced in handling those challenges. This has contributed to a sense of pride and a positive spirit.

AHC has tremendous challenges with instructional space, but they have made notable progress both in space renovation and in the planning for additional space, a great deal of which will be funded by a recently passed state bond act.

The team recognizes that the college has deliberately sought and received significant amounts of grant funding and that this funding has been used to support such things as new equipment and staff. The team has found significant evidence that these funds have been highly valued and that the college plans to continue to seek additional sources of funding from grants.

In response to the previous accreditation report, the college has made significant efforts to increase diversity among faculty and staff. In the self-study, the college recognizes that it has not been as successful as it desires in achieving this goal.

Much of what the team observed was excellent. In that regard, commendations are appropriate in the following areas:

- The team noted the extensive amount of work that the college has accomplished since the last accreditation visit. In particular the team commends the college for the deliberate and successful attention to the development and implementation of budgeting linked to research and planning. The team found widespread understanding of these processes and evidence that they have been fully implemented.

- The college is to be commended for expanding the reach of instruction through the centers at Vandenberg and Solvang and especially the design and operation of the Lompoc Valley Center. The team also commends the college for actively creating opportunities for students to take upper-division courses at the Santa Maria campus through active partnerships with six public and private university partnerships.
- The team notes that the process by which the college faced the recent state budget reductions has contributed to an enhanced spirit of collegiality with all constituencies having risen to a collective challenge. There is hope among all constituencies that this spirit continues to be the way that the college moves forward.

Recommendations

The team presents the recommendations below as a result of a thorough review of the self study, a close examination of documents, three days of observation and interviews, and extensive team discussion regarding the accreditation standards:

1. The team recommends that the college complete the revision of the faculty hiring process currently underway so that the positive changes can impact the current round of faculty hiring and perhaps move the college toward its goal. The team further recommends that the college aggressively seek ideas from its own faculty and staff, neighboring institutions, and colleagues beyond the state about ways in which the college could achieve greater staff and faculty diversity. Finally, the visible commitment of the Board must guide this effort. (Standards 2.6, 5.7, 7.A.2, 7.A.3)
2. The team suggests that the college needs to specifically integrate planning for grant funding, and the cessation of such funding, into the planning/budgeting process with particular attention to: the use of grants to support core operations or services, the increased expectations that result from added, grant-funded programming, and the cost of staff to support increased equipment. (Standards 3.B.3, 4.A.4, 6.5, 6.7, 8.5, 9.A.2)
3. The team recommends that the college complete its development of general education learning outcomes as well as program competencies for academic and vocational degrees and certificates. This process should extend to the collection of evidence of student learning through assessment of the extent to which students have met these competencies. This process should further extend to the development of outcomes for student services programs, similarly assessed by identified indicators. These results should be published and used as the basis for improvement through actions developed in the college program review, planning, and budget development processes. (Standards 3.A.4, 3.C.1, 4.B.3, 4.B.6, 4.C.2, 4.C.4, 4.D.3, 5.10)

4. The team recommends that the college develop and implement institutional processes and schedules for the evaluation of the effectiveness of both on-line education and student support services, including in particular the training of faculty/staff in technology and pedagogy as well as the quality of instruction and academic rigor, assessed through both program review and faculty/staff performance evaluation. (Standards 4.A.5, 4.D.2, 4.D.5, 4.D.7, 5.6, 6.7)

ACCREDITATION REPORT FOR ALLAN HANCOCK COLLEGE

Comprehensive Evaluation Visit
March 2-4, 2004

INTRODUCTION

Allan Hancock College (AHC) is a single-college district seeking reaffirmation of accreditation. The college prepared a comprehensive self study for reaccreditation during the 2002-2003 academic year.

AHC traces its roots back to Santa Maria Junior College, which was founded in 1920, with the current Allan Hancock Joint Community College District having been formed in 1963. AHC has a main campus located on 106 acres in Santa Maria. A small south campus is about a quarter mile away. In addition, the college operates in facilities on Vandenberg Air Force Base and in Solvang. In 1999, AHC opened the Lompoc Valley Center on 156 acres in Lompoc.

The mission of the college is that of a comprehensive California community college with careful attention to transfer and workforce preparation. In addition, AHC offers a significant amount of noncredit instruction. AHC delivers instruction through traditional classroom settings and via distance. The college has experienced rapid, recent growth in its online course offerings.

The college offers a full range of student support services, having recently added both a MESA and a Puente program to develop additional services for underrepresented students in the areas of math, science, and transfer. Noting a growing Hispanic population in its district, the college has increased its outreach and service efforts through advertising, orientations, and publications in Spanish.

The team found evidence that the college has built significant capacity to produce relevant data, in response to the previous comprehensive report. The Research Office produces data for program review. Student surveys have been conducted, producing important data. The report on the strategic plan objectives, which is presented to the Board, the fact book, the community report, and issues of *By the Way* contain reports that include institutional data. Although data is widely available, the use of this data seems uneven to date. There appears to be a need for training on the use of data and research to ensure that, for example, program faculty are able to use the data prepared for program planning to drive planning and innovation. The college will need to construct and nurture a careful link between the production of institutional data and the analysis of outcomes, many of which are yet to be identified. The college has visibly included the development of program outcomes in the planning agenda. The team believes that this step is very important and encourages the college to move deliberately and immediately in this direction.

In general, the team noted that the self study was thorough, well-written, clear, and accurate. The report was well-edited and allowed the college to speak with a single voice. However, the team observed that the planning agenda, as presented in the self study, was sparse. There was some evidence that the college was unsure as to the expectations for the planning agenda. Participants consistently indicated that, during the preparation of the self-study, standards committees actively deliberated over the contents of the planning agenda. However, when items were included, there were no indications of how, when, or by whom any of the items included would be accomplished or how they would be paid for. The team found evidence that there were active discussions about some of the items but that responsibility had not been assigned or timelines delineated. As a result, it was difficult for the team to see the planning agenda/planning summary, at this time, as a meaningful plan of action. This comment was also present in the previous site visit team's response to the college's last self-study.

The team recognizes that the college has deliberately sought and received significant amounts of grant funding and that this funding has been used to support such things as new equipment and staff. The team has found significant evidence that these funds have been highly valued and that the college plans to continue to seek additional sources of funding from grants.

In response to the previous accreditation report, the college has made significant efforts to increase diversity among faculty and staff. In the self-study report, the college recognizes that it has not been as successful as it desires in achieving this goal.

Much of what the team observed was excellent. In that regard, commendations are appropriate in the following areas:

- The team noted the extensive amount of work that the college has accomplished since the last accreditation visit. In particular the team commends the college for the deliberate and successful attention to the development and implementation of budgeting linked to research and planning. The team found widespread understanding of these processes and evidence that they have been fully implemented.
- The college is to be commended for expanding the reach of instruction through the centers at Vandenberg and Solvang and especially the design and operation of the Lompoc Valley Center. The team also commends the college for actively creating opportunities for students to take upper division courses at the Santa Maria campus through active partnerships with six public and private university partnerships.
- The team notes that the process by which the college faced the recent state budget reductions has contributed to an enhanced spirit of collegiality with all constituencies having risen to a collective challenge. There is hope among all constituencies that this spirit continues to be the way that the college moves forward.

Recommendations

The team presents the recommendations below as a result of a thorough review of the report, a close examination of documents, three days of observation and interviews, and extensive team discussion regarding the accreditation standards:

1. The team recommends that the college complete the revision of the faculty hiring process currently underway so that the positive changes can impact the current round of faculty hiring and perhaps move the college toward its goal. The team further recommends that the college aggressively seek ideas from its own faculty and staff, neighboring institutions, and colleagues beyond the state, about ways in which the college could achieve greater staff and faculty diversity. Finally, the visible commitment of the Board must guide this effort. (Standards 2.6, 5.7, 7.A.2, 7.A.3)
2. The team suggests that the college needs to specifically integrate planning for grant funding, and for the cessation of such funding, into the planning/budgeting process with particular attention to: the use of grants to support core operations or services, the increased expectations that result from added, grant-funded programming, and the cost of staff to support increased equipment. (Standards 3.B.3, 4.A.4, 6.5, 6.7, 8.5, 9.A.2)
3. The team recommends that the college complete its development of general education learning outcomes as well as program competencies for academic and vocational degrees and certificates. This process should extend to the collection of evidence of student learning through assessment of the extent to which students have met these competencies. This process should further extend to the development of outcomes for student services programs, similarly assessed by identified indicators. These results should be published and used as the basis for improvement through actions developed in the college program review, planning, and budget development processes. (Standards 3.A.4, 3.C.1, 4.B.3, 4.B.6, 4.C.2, 4.C.4, 4.D.3, 5.10)
4. The team recommends that the college develop and implement institutional processes and schedules for the evaluation of the effectiveness of both on-line education and student support services, including in particular the training of faculty/staff in technology and pedagogy as well as the quality of instruction and academic rigor, assessed through both program review and faculty/staff performance evaluation. (Standards 4.A.5, 4.D.2, 4.D.5, 4.D.7, 5.6, 6.7)

ELIGIBILITY REQUIREMENTS

1. AUTHORITY

Allan Hancock College, which traces its roots to the founding of Santa Maria Junior College in 1920, was authorized to operation as Allan Hancock Joint Community College District in 1963.

2. MISSION

The team confirmed that the college mission is adopted by the Board of Trustees, which last amended the mission in 1997 to add economic development. The team further confirmed that the mission is reviewed annually as part of the college's planning process.

3. GOVERNING BOARD

Allan Hancock Joint Community College District has a five-member elected Board of Trustees, with each member representing one of five geographic areas of the district. In addition, the student body annually elects a nonvoting student trustee. The team confirmed that the Board is an independent policy-making body and that members submit annual conflict of interest forms.

4. CHIEF EXECUTIVE OFFICER

Allan Hancock College has a Board-appointed Superintendent/President with responsibility for overall institutional leadership.

5. ADMINISTRATIVE CAPACITY

The team determined that the college has a sufficient administrative structure to meet the institution's purpose, size, and complexity and that administrators are adequately prepared to fulfill their responsibilities.

6. OPERATING STATUS

Allan Hancock College is fully operational, with a combined credit/noncredit enrollment of about 15,800 for fall 2003.

7. DEGREES

The team confirmed that degree and certificate programs constitute a substantial portion of the college's educational offerings.

8. EDUCATIONAL PROGRAMS

The team confirmed that Allan Hancock College offers a full range of degree and certificate programs, including 27 associate in arts degree programs and 54 associate in science degree programs, as well as 98 certificate programs, each of which appears to be consistent with the college's mission and to be typical of community college programs.

9. ACADEMIC CREDIT

AHC offers academic credit in a manner consistent with generally accepted higher educational practice.

10. EDUCATIONAL OBJECTIVES

The team confirmed that the catalog and course outlines include statements of course objectives and program intent.

11. GENERAL EDUCATION

The team confirmed that AHC has a defined component of general education intending to ensure breadth of knowledge, to promote intellectual inquiry, and to document competency in written communication, scientific and quantitative reasoning, and critical analysis. The team further confirmed that the college's Academic Policy and Planning Committee is responsible for the oversight of the general education component.

12. FACULTY

Allan Hancock College employs 173 full-time faculty. Responsibilities for full- and part-time faculty are outlined in agreements between the Allan Hancock Joint Community College District and the Faculty Association of Allan Hancock College and the Part-time Faculty Association of Allan Hancock College, respectively.

13. STUDENT SERVICES

The team reviewed the college's comprehensive student services and confirmed that the student services and development programs are consistent with the college's mission and designed to meet the specific needs of the college's population.

14. ADMISSIONS

Allan Hancock College's admissions policies are presented in the catalog and on the Web site, and they are reflective of the requirements of the California community colleges.

15. INFORMATION AND LEARNING RESOURCES

The team confirmed that the college's information and learning resources appear adequate.

16. FINANCIAL RESOURCES

The team confirmed that the college links planning and budget allocation to ensure adequate support for the college's programs.

17. FINANCIAL ACCOUNTABILITY

The team confirmed that the college annually completes and the Board of Trustees annually reviews an independent audit report.

18. INSTITUTIONAL PLANNING AND EVALUATION

The team found significant evidence to indicate that Allan Hancock College engages in broad institutional planning processes and that academic programs are reviewed on a regular schedule.

19. PUBLIC INFORMATION

The team confirmed that the college makes information about the college, its programs, services, policies, and requirements available through its catalogs, schedules, Web site, and other publications.

20. RELATIONS WITH THE ACCREDITING COMMISSION

The team reviewed a signed statement from the president of the Board of Trustees and the district Superintendent/President assuring that the college adheres to the Eligibility Requirements, Standards, and Policies of the Accrediting Commission.

EVALUATION OF ALLAN HANCOCK COLLEGE USING ACCJC STANDARDS

STANDARD ONE INSTITUTIONAL MISSION

Response to the Previous Team's Recommendations:

There were no previous recommendations for Standard One.

General Comments:

Materials presented in the self study, additional documents, and interviews with several faculty, staff, and students indicated that AHC is in compliance with Standard One. It was surprising to learn that only four individuals were involved in such an important committee. However, discussions with committee members revealed that other staff members were given opportunities to provide input into the reassessment of the college's mission.

Findings and Evidence:

The Planning Committee, faculty, staff, and administrators developed the mission statement of AHC for approval by the Board. Prompted by a state mandate, the Board of Trustees amended the mission statement in November 1997 to include economic development.

The mission statement consists of seven broad-based educational purposes and identifies the population the college intends to serve. The self study indicates that the staffing, budgeting, equipment, and facilities planning flow directly from the college mission, philosophy, and vision. Interviews with faculty and staff did reveal that the mission is considered as budgets are developed. (Standards 1.2, 1.3)

The self-study also indicates that the mission statement is reviewed yearly during the college annual planning retreat when strategic plans are being developed. During the 2000 planning retreat a change to include a broader statement on diversity was proposed. After discussions with several constituent groups, the committee decided to keep the current statement on diversity that states, "It takes pride in its diverse student body and staff and recognizes in them an important educational resource." (Standard 1.4)

Conclusion:

The college mission exists and is printed on page eight of the AHC 2003-2004 catalog, on page four of the AHC *Strategic Plan 2001-2004*, and on the college Web site. The college is in compliance with Standard One.

The team encourages the college to continue its efforts to review the mission statement on a regular basis, particularly in light of the increasing diversity of its population and the increased use of technology to provide programs and services to its constituents.

Recommendation:

None.

STANDARD TWO INSTITUTIONAL INTEGRITY

Response to the Previous Team's Recommendations:

Recommendation 1: The college should increase efforts to provide in-service training in cultural diversity and equity issues. Additionally, the college should carefully structure its employment procedures to ensure recruitment and hiring efforts that result in further diversification of the faculty, in particular. Leadership and support in these efforts must come from the Board, President, and the faculty. (Standards 2.6, 2.7, 7.A.3, 7.D)

Previous accreditation processes had identified as areas of concern: 1) the issue of inservice training in cultural diversity and equity issues, 2) restructuring employment procedures and practices that would result in further faculty diversification, and 3) tapping the leadership of Allan Hancock College to provide for implementation of the above areas. As reported in the *2003 Allan Hancock College Self Study* report, the recommendation was addressed essentially in two ways. A new multicultural committee, under the direction of the AHC Superintendent/President, undertook an aggressive and creative approach to inservice presentations regarding equity and diversity. The team was impressed with the new, ongoing inservice program. The team found AHC's commitment to understand the mosaic of American diversity to be symbolic of their goal to not only address, but to become a leader in such training. Of particular note in the college's outreach for diversity is the recognition of AHC by *Hispanic Outlook in Higher Education Magazine* in each of the past three years as one of the nation's top colleges and universities for Hispanic students.

While Board, administrative, and faculty leadership have shown a commendable zeal for inservice diversity training, the results are less encouraging toward the achievement of the desired level of faculty diversification. Admittedly, there are significant external factors in play, but the end result is essentially flat. The recent retirement incentives taken by 14 full-time AHC instructors are cited as "an opportunity and a challenge." Five positions are actively being sought at the time of the team's visit, and a maximum of three additional professors will be recruited for a total of eight to replace the fourteen who retired. This may complicate the challenge to increase diversity in the faculty.

Findings and Evidence:

Allan Hancock College is to be commended for the clarity, accuracy, and consistency of its campus publications. Virtually all documentation bearing the college crest is of professional quality, reflecting both graphic sophistication and editorial honesty. Among the fine AHC printed matter are the yearly college catalog and schedule of classes for each term. Both of these are easily obtained and eminently usable. Almost all documents provided for Standard Two validation were current. Overall, the publications detailed educational programs leading to degrees and/or certificates, fees and financial aid, admission requirements, academic calendars, and the roster of all campus instruction/support personnel. The college also produces student activity and theatre publications, as well as various community and staff

information broadsheets that seem to be well received. A college-produced video, *Start Here. Go Anywhere* (2002) seems to have been of significant introductory value for students. (Standard 2.1)

The college Web site, overseen by a full-time Webmaster, provides similar standards of accessibility and excellence. Although staff indicated that keeping an elastic 24/7 database is “an ongoing challenge,” www.hancockcollege.edu was cited for excellence in a June 2003 Santa Barbara County Grand Jury report in a comparison with 42 other governmental databases. Given approximately one million “hits” per month within a relatively limited permanent population base, this volume further reflects the college’s ability to disseminate information. (Standard 2.1)

The Allan Hancock College Board of Trustees has a recent policy, No. 7200: *Academic Freedom and Responsibility*, revised July 21, 1998. This buttressed a longstanding support of academic freedom as noted several places in the *Faculty Resource Guide* (latest edition, 2002-2003). The team noted that honesty and objectivity are resultant qualities of a positive institutional environment at Allan Hancock College. (Standards 2.2, 2.4)

The team found AHC faculty and staff to be examples to their student body of unbiased instruction. Student climate surveys, last administered in 2001, as well as student comments to the Superintendent/President in a 2003 report, indicated no issues regarding faculty bias. Additionally the President provides the community with access to statistical data gathered by the AHC institutional Researcher. (Standard 2.3)

The AHC statement on academic honesty is fundamentally within the institutional expectations for faculty and students. Students, especially, are made aware of ethical choices in their curricula through a combination of informal notice and by course syllabi statements. The team noted that the concept of plagiarism is widely understood, making student appeals infrequent and easily resolved. (Standard 2.5)

The team applauds the effort of the Allan Hancock College community in reaching resolution of its ongoing struggle to achieve balance between its growing numbers of underrepresented students and its commitment to equity and diversity. However, in the self-study report, the college admits not having completed the initial review of their faculty hiring process. While the college made many changes in its recruitment efforts, the college is still unsatisfied with its lack of achievement of significant changes in the diversity of faculty. No matter how well-intentioned the effort, the result is unfortunate. (Standard 2.6)

The Allan Hancock College intercollegiate athletic program has undergone significant review and evaluation since the last accreditation visit. This is reflective of the built-in process followed by AHC membership in the Western States Conference and the Commission on Athletics, the statewide athletic governing body. The bylaws of both conference and commission are scrupulously followed, especially as to regular eligibility checks and student-athlete retention follow-up. A new position, Associate Dean of Athletics, Health, and Physical Education, which replaces the former Athletic Director position, elevates the academic nature of the institution’s commitment to its student athletes. The new associate

dean was hired from NCAA Division I and has, in approximately one academic year, brought energy and vision to a solid instructional area. Despite aging physical facilities and equipment for its programs (excepting the first-rate softball stadium), AHC athletics seem well placed to progress should state funding issues be resolved. (Standard 2.7)

The team found ample evidence in the documentation provided that AHC has made a substantial effort to demonstrate honesty and integrity with the commission. As noted above, there is no shortage of public access to the college's mission or to its documentation. The recent development of the *Shared Governance Manual* provides an effective template for policy development and revision. The Board and Superintendent/President are very proactive in policy review and prioritization. (Standards 2.8, 2.9)

Conclusions:

The team agreed that AHC is in substantial compliance with Standard Two. The team encourages the college to reinvigorate its efforts to achieve increased diversity among the faculty.

Recommendation:

1. The team recommends that the college complete the revision of the faculty hiring process currently underway so that the positive changes can impact the current round of faculty hiring and perhaps move the college toward its goal. The team further recommends that the college aggressively seek ideas from its own faculty and staff, neighboring institutions, and colleagues beyond the state, about ways in which the college could achieve greater staff and faculty diversity. Finally, the visible commitment of the Board must guide this effort. (Standards 2.6, 5.7, 7.A.2, 7.A.3)

STANDARD THREE INSTITUTIONAL EFFECTIVENESS

Response to the Previous Team's Recommendations:

Recommendation 2: The college should structure the institutional research and planning functions to eliminate fragmentation and to ensure that the efforts are coordinated to meet the college's need to assess institutional effectiveness. (Standards 3.A.1, 3.C.3)

The college created an office of institutional research and planning in spring 1999, staffed by a Director of Institutional Research and Planning and a Research Analyst. The current director has been at the college since 1999. Currently, the Research Analyst position is unfilled, but the cooperative Title V grant has funded a research information technician for database programming and Web development. The team found that the creation of the institutional research office has resulted in improved coordination of the research function and improved use of institutional data in college processes.

The planning function has been coordinated by the Planning Committee since the early 1990s. The Director of Institutional Research and Planning serves on the Planning Committee and provides research support for the planning function. This organizational structure has improved the college's ability to assess institutional effectiveness and has improved the relationships among research, planning, evaluation, and budgeting. The college has adequately responded to this recommendation.

Recommendation 3: The college should integrate the self-study planning agenda items into the overall planning process and development of priorities.

The college incorporated the planning agenda items from its last self-study into its annual planning process by creating a matrix associating each planning item with priorities, necessary resources, people responsible, time lines, and relationships to the *1997-2000 Strategic Plan*. The planning items were discussed at planning retreats as part of the annual prioritization of components of the strategic plan. They were also incorporated into the *2001-2004 Strategic Plan*.

The college intends to incorporate the planning agenda items from the current self study into the next iteration of its strategic plan, scheduled to begin in April 2004. Planning items from the current self-study report have been organized into five themes, which are intended to be the basis for the next strategic plan. However, the team is concerned that the planning agenda items in the report were not developed as integral components of the college's planning. The team is also concerned that, while the college addressed this recommendation after the last comprehensive visit, the planning agenda in the current self-study report reviewed by the team did not show adequate improvement in the specificity of planning items.

General Comments:

The college has made a commitment to coordinated institutional research, which has improved its ability to understand and evaluate itself. The team encourages the college to continue this commitment. Planning is one of the college's strengths; its planning processes are inclusive, well defined, and related to resource allocation. Evaluation is also well defined and related to resource allocation, but it will need to address the recent focus on learning outcomes assessment.

Findings:

The team found evidence that institutional research is integrated with and supportive of planning and evaluation. The Director of Institutional Research and Planning, hired in spring 1999, is a member of both the Planning Committee and the Budget Advisory Committee. He supports the planning process by presenting environmental scanning data at planning retreats, coordinating the collection and reporting of performance indicators, and presenting planning issues to the Board of Trustees. The research office supports evaluation by compiling and presenting student success measures to programs undergoing program evaluation, as well as by consulting with programs on the design and analysis of their program evaluation surveys. The office has also begun providing access to much institutional data on the college intranet, and plans to move further in this direction. (Standard 3.A.1)

The college currently provides sufficient resources for institutional research. Funding for positions and equipment for the Office of Institutional Research and Planning has been provided by matriculation funds, Partnership for Excellence funds, grant funds, and the general operating budget. The college indicates that budget cuts might require the office to be more dependent on grant funds in the future. (Standard 3.A.2)

The college also provides sufficient resources for evaluation. Instructional program evaluation, coordinated by the Vice President of Academic Affairs, is well developed and has a long history at the college. Vocational programs undergo a brief evaluation every two years and a full evaluation every six years; other instructional programs undergo full evaluation every six years. Student services program evaluation, now coordinated by the Vice President of Student Services, was not conducted from 1996 to 2001; the current process was designed by the Vice President and an ad hoc committee and began in 2002 with the evaluation of the EOPS and Learning Assistance Program units. Administrative program evaluation is a new process coordinated by the Superintendent/President; before the current process, administrative units were evaluated on an irregular basis by external consultants. All three program evaluation processes are supported extensively by the Office of Institutional Research and Planning, which supplies student data and aids in the design and analysis of evaluation surveys. (Standard 3.A.2)

The institution has worked to develop indicators of success. The 2001-2004 strategic plan includes institution-level performance indicators such as participation rates, number of degrees and certificates awarded, and persistence rates. Data addressing the performance indicators are published annually in the college *Fact Book*. The measures are not associated

with baseline data and do not include quantified targets defining the accomplishment of the college mission and purposes. The *Progress Report on the Strategic Plan 2001-2004* reported at the 2002 planning retreat includes a different, more specific set of success measures; again, these measures are not associated with baselines or with quantified success targets. (Standards 3.A.3, 3.C.1)

There is evidence that program evaluations lead to program changes. Requests for facility enhancements, submitted as part of the program evaluation process, have been funded. The college perception of the link between program evaluation and resource allocation has improved recently. Several years ago, program evaluations were considered shelf documents, but now the perception is that requests coming out of program evaluation are prioritized and considered for funding. Although there is evidence that program evaluations lead to program change, the college presents limited evidence that evaluation leads to improved student outcomes. There is evidence that some programs, as a result of program evaluation information, examine issues such as barriers to success. For example, the nursing program investigated bottleneck courses in their curriculum, and Language Arts modified their placement process and improved course success. This, however, occurs at the discretion of each program and is not integrated into program evaluation. (Standard 3.A.4)

The college's strategic planning process is defined in the *Shared Governance Manual*. The Planning Committee, chaired by the Superintendent/President, is charged with the coordination of the college's planning efforts. The team found that appropriate segments of the college community, including classified staff and students, are involved in the development of the college's plans. Planning is inclusive and understood by participants who have served on the committee for a substantial time. There are some concerns that newcomers to the Planning Committee are not given enough training to be effective participants, though planning tends to have a steep learning curve at any institution. This issue may be exacerbated by the turnover in committee membership. (Standard 3.B.1)

The planning process integrates educational, financial, physical, and human resources planning with program evaluation. Requests for resources submitted in program evaluation action plans must address the objectives of the strategic plan and include estimated costs and target dates. Requests for resources from instructional program evaluation are summarized by the Vice President of Academic Affairs and sent to the Planning Committee to inform the development of the strategic plan and the annual prioritization of strategic plan objectives. Requests for new faculty and staff go through a parallel process. Requests are then sent to the Budget Advisory Committee for prioritization and for matching with available funds. The Budget Advisory Committee and the Planning Committee work more closely together now than in the past; there is overlap in membership between the committees, they have back-to-back meeting times, and they conduct joint meetings several times per year. As part of strategic planning, institutional priorities for improvement are developed every year at the spring planning retreat, attended by the Planning Committee and other decision makers, including all administrators and representatives from faculty and staff. The Board of Trustees is informed periodically about the planning process and progress toward objectives. Progress toward plan objectives in each administrative area is also included in every administrator's evaluation. The *Educational and Facilities Master Plan* is a five-year plan

that compiles the results of the college's planning efforts and includes program needs, institutional objectives from the three-year strategic plan, and the college's facilities master plan. (Standards 3.B.2, 3.B.3)

The college reports information from its planning and institutional research activities to the public. For example, the Superintendent/President's office produces an annual report to the community that includes student data such as success and transfer, Student Right-to-Know success rates are published in the schedule, and college staff make presentations to external audiences. (Standard 3.C.2)

The college evaluates and modifies its institutional research efforts through the program evaluation process. The office of institutional research and planning is currently undergoing program evaluation. The three program evaluation processes have been evaluated and modified recently: instructional program evaluation has been changed to begin the incorporation of student learning outcomes assessment, student services program evaluation has recently been developed and implemented by an ad hoc committee, and a regular process for administrative program evaluation has recently been developed. The team found evidence that the Planning Committee evaluates its processes regularly. (Standard 3.C.3)

Evidence:

The annual college fact book, the strategic plan document, and reports from the Office of Institutional Research and Planning, such as the *Progress Report on the Strategic Plan 2001-2004*, confirm that the planning process includes measurable performance indicators. (Standards 3.A.3, 3.C.1)

The team reviewed examples of academic, vocational, and student services program evaluation documents and an outline of the administrative program review process. These documents, in addition to program evaluation resource guides, confirm that program evaluation is being conducted with the support of the institutional research office. Program evaluation is also linked to planning and resource allocation, as demonstrated in the action plans from these documents and the planning procedures listed in the *Shared Governance Manual*. The linkages among program evaluation, planning, and resource allocation were also confirmed by interviews with administrators and faculty. Interviews also established that the link between program evaluation and resource allocation has improved in recent years. (Standards 3.A.1, 3.A.2, 3.A.4, 3.B.1, 3.B.2, 3.B.3)

Documents sent to the community, including the *Annual Report to the Community* and the *By the Way* newsletter, include information and data informed by the college's planning and institutional research efforts. (Standard 3.C.2)

Planning Committee meeting minutes and interviews with committee members confirmed that the Planning Committee evaluates the planning process and makes adjustments as needed. (Standard 3.C.3)

Conclusions:

The team found that the college meets Standard Three.

The team commends the college for establishing and supporting the office of institutional research and planning. The team also supports the research office's work in moving data access online so decision makers may access data directly and encourages the college to provide resources to continue this effort. (Standard 3.A.1)

The team is somewhat concerned about the stability of the research office's funding and suggests that the college find stable, consistent, permanent sources of funding for this important college function. (Standard 3.A.2)

The college's planning process is one of its strengths. Strategic planning is an integral part of the college's culture; the link between program evaluation, planning, and resource allocation is well understood by the managers and faculty who have participated in the processes. Planning could be further strengthened in some areas, such as reporting consistent performance indicators with baseline data and targets. Additionally, planning would benefit from more training and orientation for those new to the process, including new Planning Committee members. (Standards 3.A.3, 3.B.1, 3.B.3, 3.C.1)

Program evaluation is occurring in instructional, student services, and administrative programs. Evaluation processes, particularly in the instructional area, are well developed but the college should give more attention to connecting program evaluation, program changes, and student success. (Standard 3.A.4)

Recommendations:

2. The team suggests that the college needs to specifically integrate planning for grant funding, and for the cessation of such funding, into the planning/budgeting process with particular attention to: the use of grants to support core operations or services, the increased expectations that result from added, grant-funded programming, and the cost of staff to support increased equipment. (Standards 3.B.3, 4.A.4, 6.5, 6.7, 8.5, 9.A.2)

STANDARD FOUR EDUCATIONAL PROGRAMS

Response to the Previous Team's Recommendations:

There were no previous recommendations on Standard Four.

General Comments:

Allan Hancock College serves a population of about 300,000 dispersed over an area of 3,000 square miles with a main campus in Santa Maria and centers in Lompoc Valley, Vandenberg Air Force Base, and Solvang. The main campus is a comprehensive college serving approximately 8,000 students each fall, about one-quarter of whom are taking noncredit offerings. The newly enlarged Lompoc Valley campus offers an increasingly diverse curriculum, including a complete general education pattern, in an impressive new facility that serves 2,500 students. In its visit to Lompoc, the team found that the college has been quite responsive to the needs of its service area in expanding the Lompoc Valley facility. Vandenberg, with primarily credit offerings, enrolls 900, almost evenly spread among military personnel, their families, and the community. Solvang has 600 students, about half in credit courses.

Findings:

Conversations with faculty, staff, and students confirmed that the educational programs of AHC are comprehensive, of high quality, and appropriate to its mission. Courses and programs are well developed, scheduled, publicized, staffed, funded, evaluated, improved, and expanded. Conversations with students consistently elicited praise for the quality of instruction, the caring nature of the teaching faculty, and reliable academic and career advising. (Standards 4.A.1, 4.A.2, 4.A.3, 4.A.4, 4.A.5, 4.B.1, 4.B.2, 4.C.1, 4.D.6)

In reviewing college reports and through conversations with faculty and administrators, specifically those involved in planning and budgeting, it is clear that the college has made significant advances in the scope of program review, particularly in providing departments with relevant data, posing questions that encourage introspection, reviewing the quality and appropriateness of instruction, and using the results of program review as an essential component in developing and approving requests for resources. (Standards 4.D.1, 4.D.2)

Discussions with key leaders indicate that the college has initiated training on student learning outcomes, and course outlines and program reviews have begun to reflect improvements in identifying and assessing these outcomes. Review of college curriculum, including course outlines and syllabi, demonstrate that the college has a standard general education program with depth and breadth in the primary areas of knowledge. (Standards 4.B.3, 4.B.4, 4.B.6, 4.C.1, 4.C.3, 4.C.4, 4.D.3)

Those responsible for the curriculum process have begun discussions on establishing more explicit outcomes for each general education area. Discussions with students show a high-level awareness and appreciation of the commitment of the college to transfer. Based on review of relevant policies, college transfer practices are clear, accessible, and appropriate. Of particular note is the availability of baccalaureate degree programs on the AHC campus, including an agreement which adds CSU Bakersfield to begin in fall 2004. (Standards 4.B.3, 4.B.5, 4.C.2, 4.D.4)

The college's schedule of classes demonstrates a wide diversity of offerings through several modes of delivery. Noncredit courses are extensive, well integrated with credit offerings, and included in the program review process. The number of courses offered online has increased dramatically in the last few years. Online courses are approved through regular curriculum processes, and faculty who teach online expressed enthusiasm and showed a high degree of technical and pedagogical competence in delivering instruction in this mode, clearly following accreditation standards of good practice. (Standards 4.D.2, 4.D.5, 4.D.7)

Evidence:

The team reviewed many documents: the college catalog, distance learning survey and statistics, fact book, schedule of classes, strategic plan, annual report to the community, selected articulation agreements, selected course outlines and syllabi, the curriculum development guide, several program reviews and related process documents including the annual summaries of program reviews, the Academic Senate issue document on computer competency, and materials from learning outcomes workshops.

The team met individually with faculty leaders, senate, union, and curriculum, and approximately twenty faculty members, plus several more faculty who attended open meetings. The team had one-on-one discussions with the president, vice president of instruction, the college researcher, the co-facilitators of Standard Four, and each of the instructional deans. Discussion was also held with four of the trustees and the full planning committee. Conversations about some of the specifics of this standard were held with fourteen individual students and seven full classes of students.

The catalog and schedules demonstrate that courses, programs, degrees and certificates meet the needs of the community consistent with the scope of the college mission and are comprehensive, well identified and described, and well scheduled. Reviews of outlines and syllabi as well as discussions with faculty and students show that instruction is of high quality, program information is readily available, as is academic and career advising. (Standards 4.A.1, 4.A.2, 4.A.5, 4.B.1, 4.B.2, 4.B.4, 4.C.1, 4.C.3)

The clarity and effectiveness of program review and its connections to planning and budget were assessed through analysis of process documents, individual program reviews, budget development sheets, as well as conversations with trustees, the planning committee, the vice president, the deans, and the academic senate president. The nature and use of data provided to programs for their review was investigated by viewing documents and through conversations with the college researcher and the planning committee. The quality, rigor, and

effectiveness of courses and programs, for the full range of locations and modalities, was reviewed by consulting course outlines and syllabi, visiting outlying centers, querying faculty and students, and discussing evaluation processes with the vice president for instruction, instructional deans, and a range of faculty and students. (Standards 4.A.4, 4.D.1, 4.D.2)

Through a similar process, assurance was obtained that courses and programs were developed and approved through established practices. The college's development and use of course and program competencies and student learning outcomes was explored by reviewing training materials, reading responses to questions on these matters in program reviews, and through conversations with the vice president of instruction, the lead person on the student learning outcomes grant, as well as an instructional dean. (Standards 4.B.3, 4.B.5, 4.B.6, 4.C.2, 4.C.4, 4.D.3)

The college's commitment to articulation and transfer was ascertained through review of articulation agreements, examination of course outlines, and discussion with faculty, staff, students, and a visiting representative of a four-year college. The diversity of curricular offerings and the wide range of modes of instruction were established through review of the schedule of classes, course outlines, and instructor syllabi. (Standard 4.D.4)

Development and review of online courses was outlined in the curriculum manual and verified by discussion with the curriculum chair, several faculty who teach online, and instructional deans who supervise departments in which online courses are offered (Standards 4.D.5, 4.D.7)

Conclusions:

The college is in substantial compliance with Standard Four. The commitment of the staff and faculty to quality, rigor, and breadth of courses and programs is apparent both in processes and in the teaching and learning environment.

The college is to be commended for expanding the reach of instruction through the centers at Vandenberg and Solvang and especially the design and operation of the Lompoc Valley Center. The college is also commended for its efforts to expand the availability of data for evaluation of instruction and for its connection of instructional program review to planning and resource allocation. Every faculty member and administrator with program responsibilities showed a commitment to and an understanding of the evaluation, planning and budgeting processes.

There are issues to which the team would like to draw the attention of the college.

Competency in information technology has been discussed and a conceptual model developed by the Academic Senate. The team urges the college to move this effort forward. (Standard 4.C.3)

The college offers courses on a three-week basis known as "jump start." Several faculty and staff expressed concerns about the appropriateness of offering some courses in this format

and about maintaining academic content and rigor for such short courses. The team urges the college to review this practice, develop well-understood guidelines, and monitor student learning in such short courses. (Standard 4.D.5)

Recommendations:

3. The team recommends that the college complete its development of general education learning outcomes as well as program competencies for academic and vocational degrees and certificates. This process should extend to the collection of evidence of student learning through assessment of the extent to which students have met these competencies. This process should further extend to the development of outcomes for student services programs, similarly assessed by identified indicators. These results should be published and used as the basis for improvement through actions developed in the college program review, planning, and budget development processes. (Standards 3.A.4, 3.C.1, 4.B.3, 4.B.6, 4.C.2, 4.C.4, 4.D.3, 5.10)
4. The team recommends that the college develop and implement institutional processes and schedules for the evaluation of the effectiveness of both on-line education and student support services, including in particular the training of faculty/staff in technology and pedagogy as well as the quality of instruction and academic rigor, assessed through both program review and faculty/staff performance evaluation. (Standards 4.A.5, 4.D.2, 4.D.5, 4.D.7, 5.6, 6.7)

STANDARD FIVE STUDENT SUPPORT AND DEVELOPMENT

Response to the Previous Team's Recommendations:

Recommendation 4: The college should review its practices in Health Services related to appropriateness of facilities and comprehensiveness of services offered to students. It is recommended that this review include student participation in prioritizing services. (Standard 5.6.)

AHC addressed the issue in 2000 by completing a student needs analysis. As a result of this assessment, the Board of Trustees, with the support of the students, also approved a \$1 increase in the student health fee, and those additional funds allowed Health Services to expand the time assignment of the nurse/coordinator and several part-time professional staff (e.g., nurse practitioners). The fee will increase again effective Summer 2004, to \$12 per student per semester, which will provide for further expansion of staffing levels, including the program secretary to full-time, and possibly service hours. The college has made progress on expanding the facilities available for Health Services, and the college has developed and submitted to the Chancellor's office a plan for a one-stop student services center. Funding for the one-stop plan still needs to be identified.

The college is to be commended for the improvements made so far and is encouraged to continue its efforts on the Santa Maria Campus and the Lompoc Valley Center.

Recommendation 5: The college should evaluate the adequacy of student record storage, especially for transcripts dating before 1980. (Standard 5.9.)

The college addressed this issue by purchasing a document imaging system, which made possible safer and more efficient document maintenance. Transcripts prior to 1980 can now be scanned, indexed, and stored securely. Additionally, the college purchased fireproof file cabinets for off-site records storage.

General Comments:

Allan Hancock College (AHC) is committed to student access, progress, and success. This commitment is evident in the wide variety of services it provides to its students. A caring and committed staff of student services professionals makes every effort to create a supportive atmosphere that enhances students' growth and development. Program reports, examination of the college Web site and publications, and interviews with individual staff members and a small group of student leaders revealed a strong satisfaction with the programs and services offered. The self study is complete and forthcoming in identifying progress made in the past six years as well as problems that emerged since the last comprehensive visit. All staff with whom the team spoke who had been involved in writing this section of the self-study report agreed that it reflected their common perspective and that it accurately portrayed the college's student support services and processes in terms of this standard's expectations.

Findings:

AHC addresses the needs of its increasingly diverse population in an environment that promotes student success. The team was positively impressed by the college's extensive promotion of student support services on the Web site, in college-wide as well as program-specific publications, and in the impressive variety of outreach programs that take the message of higher education access directly to high schools, local businesses and the community. The increasing use of Spanish in publications and forms (e.g., the admissions application) is reflective of the changing demographics of the service area and indicative of the college's commitment to serving all segments of the community. (Standard 5.2)

AHC utilizes a variety of sources to identify the educational support needs of its students. The college then develops and implements such programs as the START, and the President's Ambassador Program to meet those needs. The *Student Climate Survey* and interviews with students indicate a high level of satisfaction with the services provided. (Standard 5.3)

The college provides opportunities for students to participate in the planning and evaluation of student support services. This involvement takes the form of membership in a number of standing and accreditation self-study committees. Even though the number of students who actually participate is small compared to the size of the student population, those who participate feel they have opportunities to give input into the planning and evaluations of the services provided. (Standard 5.4)

AHC utilizes assessment instruments such as the ACCUPLACER for native speakers of English and the CELSA for nonnative speakers of English. These instruments are evaluated every six years to minimize bias and to ensure an effective assessment process. (Standard 5.5)

The college has strengthened outreach efforts. The college provides a comprehensive array of services to meet the needs of students in all centers of the college except the Solvang center. The new Student Center and the Children's Center are successful initiatives to meet identified student needs. As the student population increases at the Solvang center, the college will need to provide services such as counseling, testing, transfer advising, and health services to meet the needs of the students. (Standard 5.6)

The college, in keeping with its mission, maintains a campus climate that supports its diverse population. Efforts to continue to diversify the faculty will strengthen this. Maintenance efforts include the promotion of campus diversity through the hiring of qualified underrepresented groups, an equal employment opportunity policy, and various programs such as the MESA and Puente programs that target underrepresented and academically underprepared students. Additionally, the college added two multicultural courses that meet the general education requirements and increased the number of multicultural activities to promote cultural awareness among students and staff. (Standard 5.7)

AHC fosters intellectual, ethical, and personal development for all its students through a number of co-curricular activities. These activities include a variety of athletic programs,

involvement in campus-wide governance and policy-making committees, participation in multicultural activities on campus, and participating in community projects off campus. Overall, it appears that with the possible exception of the multicultural activities, only a small number of students participate in these activities. The associated student government members, however, appreciate the opportunities to coordinate activities at the two main centers of the college and the leadership class that enhances their leadership skills. (Standard 5.8)

In accordance with state and federal guidelines, AHC maintains records permanently, securely, and confidentially. The purchase of a document imaging system, the ATI-Filer, in 2002 has made this possible. Only authorized personnel have access to this system through a security log-on and password. Additionally, the college backs up files onto magnetic tapes every twenty-four hours. (Standard 5.9)

In 1996-1997 AHC developed a plan to evaluate the effectiveness of student services programs. Over the last five years, however, student services did not meet the evaluation deadlines. Efforts are being made to evaluate services by 2005. EOPS and DSPS completed required reviews in 2003. (Standard 5.10)

Evidence:

The college's long-standing support programs (e.g., admissions, financial aid, counseling, transfer center) are well coordinated with established state-funded categorical programs (e.g., EOPS/CARE, Learning Assistance Program [DSPS], Matriculation). These programs also coordinate well with the newer grant-based efforts (e.g., MESA, Transfer Assistance Program, CalSOAP) that the college initiated since the last comprehensive report. All staff interviewed by the team confirmed the self-study report's description of close-working relationships among the programs. This was particularly evident at the Lompoc Valley Center, where the relatively small student population has required several of the support programs to share staff and working space in order to effectively provide the array of services available at the Santa Maria campus.

At the same time, the team noted that the college has not yet developed a clear, coherent strategy for how to maintain student support service levels smoothly when special grants end or when state categorical funds are reduced or when the general fund itself is insufficient. The impending retirement of 25 percent of the counseling department faculty (two of eight) and the uncertainty at the time of the site visit as to their replacement, is indicative of the problem. Until very recently, the challenge was how to add staff and services in a coordinated way within very limited workspace; and the college partially met that challenge. The planning and budgeting model as it applies to Student Services will now be tested as resources shrink despite growing student demand; and the path is not at all clear.

The college has made a concerted, consistent and well-documented effort to improve the campus climate as it relates to the rapidly changing student and community demographics. The effort has included strong presidential leadership, focused staff development opportunities, the new programs and services mentioned above, and increased social and

cultural opportunities for students on campus. The associated student body government contributes significantly to this effort through its clubs and the well-attended activities it sponsors. External and college-conducted climate surveys confirm a greater level of consciousness on diversity issues on the campus, a recognition of the value of diversity, and a general sense among students that Allan Hancock College is a comfortable and supportive learning environment.

Conclusions:

The college is in substantial compliance with Standard Five. Particularly impressive is the wide range of programs and services available to students regardless of whether they attend the main campus or the centers.

The college did not provide a thorough description and analysis of how support services are provided to the rapidly expanding number of students enrolled in online coursework. Brief mention is made of the recent implementation of online admissions applications, the availability of and online orientation, and e-mail advising. Interviews with staff members also indicated that the federal financial aid application is available online. The college did not provide information about the extent to which online students access such services, the degree to which those services appear to be effective, or the need to develop other services not now provided in a “distance” manner. Given the marked growth in the number of students taking online course work, the college will clearly need to gather data, analyze needs, and begin to plan. (Standards 5.6, 5.10)

With only isolated exceptions by program area, limited student achievement data (e.g., course completion, retention, persistence, GPA, graduation, etc.) was referenced in the college’s descriptions or analyses of how it meets the standard. Although the data did not appear to have been drawn upon in preparing the self-study report, the team found that it was available from the college research office. Student satisfaction data from several external and self-study related surveys were the most consistently cited support for the college’s conclusions. The report would have been strengthened by the greater use of information on the measurable *effects* of student support services on student success, and not just students’ satisfaction with them.

The absence of student achievement data is most glaring in the sub-standards on identifying support needs and providing appropriate services and programs, on assessment instruments and placement practices, and on evaluation of the appropriateness, adequacy, and effectiveness of student services. In these areas, use of staff- and student-satisfaction-survey results as the only quantitative data source sheds weak light on the extent to which the services are achieving the results they were designed to accomplish. (Standards 5.3, 5.5, 5.10)

The new student services program review process does include student outcome data as one required element. At the time of the site visit, two programs had undergone review under the new format, and those reports were reviewed by the team as part of the site visit. In both reports, figures on the program students’ retention, persistence, successful course completion

("C" or better), and graduation were presented and compared with college-wide figures, along with student-satisfaction survey results for program services. But neither report analyzed the outcome data or tied it to the adequacy or structure of program services; nor were program-planning items clearly linked to the student outcomes. Since the program review process is still new, there is time for staff to examine the role of student outcome data in program planning and to make adjustments, where necessary, in the process.

Space for student support services remains inadequate. Since the last comprehensive evaluation report, two program areas described in Standard Five – Health Services and the University Transfer Center at the Santa Maria campus – have been able to expand the working space within which they operate. The remaining areas continue to operate within the same crowded conditions described six years ago, and often in very isolated and inconvenient locations on campus, but now with an even larger student population to serve. There has been a significant improvement in the space available for support services at the Lompoc Valley Center as compared to six years ago, but it, too, may not be sufficient for the growth expected at that center over the next several years. The college continues to plan for a one-stop Student Services Center, but funding for it has not been identified nor a time line firmly established. In the meantime, the college needs to assess the space situation in which most of student services operate at the Santa Maria campus.

The planning agenda items throughout this standard are appropriate, and they clearly derive from the analyses. But they lack a consistent level of specificity and give no indication of how the proposed activity will be carried out, by whom, or when.

The college is commended for the planning and coordination of student support services at the Lompoc Valley Center with those of the main campus in Santa Maria. Staff interviewed during the site visit were clear about reporting relationships, shared databases, and the need for similarity of services. There are also several instances of programs sharing staff members, given the Lompoc Valley Center's smaller student population.

The college is also commended for its aggressive expansion of support programs and staff to serve the increasingly diverse student body, using both college and outside grant funds. However, recent downturns in state funding to the college and the expiration of grants place some of these efforts in a very precarious position. It was not evident to the team that "downsizing" of services and/or staff is being addressed comprehensively, but rather in a case-by-case basis.

Finally, the college is commended for reviving and putting on a specific schedule the student services program review process. The reviews follow a common template and will be used in the college-wide planning and budgeting processes. The review process's use of outcome data needed to be greatly strengthened and made more prominent.

All student support staff with whom the team spoke eagerly, indeed desperately, look forward to the long-standing college commitment to a one-stop Student Services building that will provide adequate working space for staff, a professional atmosphere for students

who seek assistance, and the convenience and efficiency of operating within a single building.

Recommendations:

See Recommendation 2 and 4.

STANDARD SIX INFORMATION AND LEARNING RESOURCES

Response to the Previous Team's Recommendations:

There were no previous recommendations for Standard Six.

General Comments:

Since the last comprehensive evaluation visit, the college has addressed some concerns that were noted including: The insufficient level of professional staffing in the AHC Library; the lack of hours of operation for the Library and other facilities; the potential drain on the Santa Maria campus with the opening of the new Lompoc Valley; and the lack of a formal program review for Library/Learning. AHC submitted a Focused Midterm Accreditation Report in November 2000. The report delineated 17 actionable items that addressed each of these areas.

Library/Learning Resources completed a formal program review in 1998/99. As a result, numerous improvements came about, largely funded by PFE, Title III, Title V, and state construction dollars. These include the hiring of new staff, in particular two full-time librarians, the creation of the Library/LRC at the Lompoc Valley Center, funding augmentations for new library materials and instructional equipment, and the scheduled implementation of multimedia classrooms. The college planned and coordinated to ensure equitable staffing and other library resources between the main campus and the Lompoc Valley Center. Finally, funding was provided to extend service hours.

Library and learning resources are comprehensively provided at both Allan Hancock College in Santa Maria and the Lompoc Valley center. Aside from the two library operations, these services also include audiovisual equipment services, multimedia production, distance learning support, and tutoring. Information Technology Services are a significant contributor in the delivery of learning resource services, as it is responsible for the entire data and telecommunications infrastructure, computer systems maintenance, Internet services and Web applications, and the provision of server and software support for distance learning.

Many of the learning resource areas have benefited from the expenditure of construction funding for new facilities, with categorical and grant funding used to support the acquisition of new materials, equipment and the development of innovative programs. Staffing has increased in response to demonstrated need, but the uncertainty of continued sources of funding could make further expansion problematic. The units contained within the Learning Resources building at Santa Maria will shortly move into temporary quarters in preparation for a major renovation and new construction project.

Findings:

The libraries in the Learning Resource Centers at both the Santa Maria and Lompoc Valley campuses maintain sufficient quantities of library materials to support the curricular mission.

There appears to be a suitable balance between print and non-print, traditional and electronically based media and information resources. The libraries maintain and make use of a competent online catalog and integrated circulation system. The catalog is Web-accessible, as are many of the other library resources. (Standard 6.1)

There will soon be a complete renovation of the existing Learning Resources building in Santa Maria, including new construction of Tutorial and Language Arts labs and student assistance centers. All of the units contained in the current building will be in temporary quarters for at least 18 months. The Lompoc Valley Center has been opened since the last accreditation visit. It has a compact, yet exceptionally well-appointed and attractive library facility that also comprises a tutoring center and an open access computer lab. (Standards 6.1, 6.3)

Library acquisitions are guided by established policies and procedures. It is evident that coordinated decision-making and cooperative efforts between the library personnel at both campuses has yielded positive results for acquiring new materials. Faculty and student suggestions are encouraged and sought out. Newly authored curriculum is reviewed by the Learning Resources Dean and given special emphasis as funding allows. Cataloging practices are consistent with normal professional standards. Technical services are located at Santa Maria and cover both libraries. Although general fund monies for library acquisitions have remained static over time, augmentations from other sources have allowed for sufficient collection growth in the recent past. (Standard 6.2)

A comprehensive array of instructional equipment, which is either delivered when needed or pre-installed in classrooms, and technical support are provided to support instruction on the Santa Maria campus. Classroom equipment at Lompoc Valley is installed in every classroom and lab and appears to offer advantageous learning environments to both instructors and students. Faculty and staff have input in the selection of instructional equipment. (Standard 6.2)

There are 15 computer labs for student use between the two campuses; each campus has one large general computer lab and other substantial labs that are related to particular departments and areas of instruction. Most of the facilities appear to be well developed and reasonably well supported by departmental staff and the Information Technology Services group. (Standard 6.2)

The Information Technology Services unit supports the data and telecommunications infrastructure of the district and also provides microcomputer support for all users. The IT infrastructure and operations have recently been reviewed by outside consultants who also assisted in developing a technology plan. The current state of the infrastructure is judged to be sound. The college has been advised to implement an equipment maintenance and replacement plan along with a network administration plan. (Standard 6.2)

The physical facilities, including libraries, tutorial centers and computer labs are readily accessible to students and faculty. Virtual resources, such as electronic databases and other learning resources, are accessible on campus and from remote locations. Open hours appear

to be adequate, although there has been fluctuation and diminution over time in response to budget reductions. To some extent access to electronic databases and other library resources via the Internet may help compensate. Adaptive technologies have been widely implemented and are in compliance with accessibility guidelines. Access to the Internet and intranet (for employees) is well facilitated. The Web site appears to be technologically sound, well designed, quite informative, and popular with its users. (Standard 6.3)

Library and learning resources staff appear to be well qualified and experienced. Some new positions have been added in response to the development of the Lompoc Valley Center, while other new positions are supporting the expansion of distance learning and other new initiatives. In addition to the dean who administers learning resources, there are three full-time faculty librarians covering the operations of the two libraries. The learning resources units are seeking funding for new positions to better meet the needs of the expanding programs and service-level demands. (Standards 6.4, 6.5)

The borrowing and lending of library materials between Santa Maria and Lompoc Valley operates efficiently, with no more than a one-day turnaround. The AHC libraries have more expansive interlibrary loan opportunities from a regional network and the nearest state university. Other agreements are being reached with local public libraries to assist the Santa Maria library during its temporary relocation. Tutorial services are currently contained at both Santa Maria and Lompoc Valley library facilities and are also provided online. (Standard 6.6)

The Library conducted its first program review in 1998/99. Tutorial services is scheduled to complete a review by April 2004; Multimedia Services later in 2004; IT began in 2002 via a technology consultant, to be completed in 2004. The Student Computer Labs were assessed via student and staff climate surveys in conjunction with the accreditation self study. (Standard 6.7)

Distance Learning has grown from eight to 103 courses and carries with it a substantial enrollment. Planning operates via an ad hoc committee, led by the Learning Resources Dean who administers the overall program. The most recent plan was updated in 2002. The college's *Technology Plan* incorporates a brief distance learning plan. Blackboard is used as a Web course-management system and is a vital key to the support of the distance-learning curriculum. Dedicated staff has been assigned to assist faculty and students engaged in distance learning courses. Both online tutoring and electronic library reference services are offered to support the distance learning program and students-at-large. (Standard 6.7)

Evidence:

The library administrator, staff, and others believe that the library is well respected by the campus community. Learning resources staff view themselves and each other as being cooperative, flexible, and dedicated to public service. The student satisfaction survey shows high levels of satisfaction with the library. The library staff believes that it has made qualitative improvements to its collections, although it admits that this is more evident at the Lompoc Valley Center, where the collection, although smaller, is noticeably more up to date.

Student surveys indicate that satisfaction with tutorial services is very high. Throughout the learning resources operations, the ability of a staff of its modest size to offer the breadth of services evident at AHC is commendable. The same can be said of the Information Technology Services unit. (Standards 6.1, 6.2, 6.4)

Throughout the learning resources operations, there appears to be sensitivity to the needs of people with disabilities and close adherence to accessibility laws, regulations, and guidelines. The college's Internet-based Web site and its intranet are well used and viewed as valuable additions to many aspects of the organization. (Standard 6.3)

For the library in particular, documented program review recommendations have led to changed procedures and operations and have resulted in positive benefits. For example, augmentations to base budgets have allowed for collection improvements and the addition of new electronic resources. (Standards 6.5, 6.7)

Planning for the renovation and new construction of the Santa Maria learning resources building demonstrated ample participation. Staff members look forward to increased seating and expanded stack space, but express concern about the loss of some integration with functions that will move away from the library to other parts of the new building. The temporary relocation of a number of library and learning resource services is a cause for concern among staff. In some cases it is due to the severe reduction in square footage, in others due to relocation far from the center of the campus. Planning for some of the units has already occurred and is being addressed. In other areas the staff seem unaware of what will become of them. (Standards 6.5, 6.7)

Each of the units contained within Standard Six (Library, Tutorial, Student Access Computer Labs, Multimedia Services, and Information Technology Services) report nearly identical outlooks concerning the stability of funding. Grant funding and categorical funding, while put to remarkably effective use, has dwindled or disappeared. Staff reports difficulties keeping pace with increased demands and service level expectations, having now been set at higher levels. Potential remedies to this potential funding dilemma identified by these departments include the addition of specific staffing positions in key and strategic areas. Other suggestions variously call for adherence to core mission, published standards and the recommendations of consultants. Another suggestion calls for a district-wide funding mechanism that discontinues reliance on categorical money. (Standards 6.5, 6.7)

Distance learning course evaluation, along with faculty appraisal, is being discussed, but no action has yet been taken. The administrator responsible for distance learning and others are identifying a best-practices model for distance-learning courses that will emphasize training to improve existing courses with an aim to improve student retention and success. The adoption of Blackboard has been important; an estimated 90 percent of the distance-learning faculty are using it. Future program growth may include the development of degree and certificate programs. Lab courses by distance are planned. AHC has not yet determined whether a substantive change proposal will be submitted to AACJC. (Standard 6.7)

The Information Technology services unit maintains a staff possessing expertise, but lacks the numbers to provide backup of key personnel in mission-critical assignments. IT feels it has begun to more effectively convey the strategic importance of IT and IT services to the campus community. Planning for technology has evolved further since the self study. A technology planning retreat was held recently, and there are plans to continue this on an annual basis. One outcome of the first retreat was to promote a budget allocation request for a help-desk function for IT services. (Standard 6.7)

Conclusions:

AHC effectively manages and operates its variety of library and learning resources. The campus community is quite well served, with major improvements to facilities on the horizon. The staff throughout learning resources and in Information Technology services are highly dedicated and committed to serving the needs of the college's students and faculty. Library staff, in particular, have done well in coordinating activities between Santa Maria and Lompoc Valley. There is ample evidence contained in the self-study report, in other supporting documents, and through the visiting team interviews and observations that AHC is achieving institutional purpose in regard to every provision of Standard Six. There is ample evidence to indicate they are effective within the institution. In regard to the variety of library and learning resources provided at AHC, it is apparent that the college has amply supported the facilities, resources, and services with funding from a plethora of sources. In addition, the college has utilized state construction dollars to expand operation outside of Santa Maria, especially to its Lompoc Valley Center. (Standards 6.1, 6.2, 6.4, 6.5)

The team noted the college's effective attainment and methodical use of categorical and grant funding to pursue important innovations and advances. However, an attendant concern is that the college has not apparently planned for the reduction or elimination of services or service levels given the apparent decline in grant funding and categorical funding that originally led to the creation, enhancement, or expansion of services. (Standards 6.5, 6.7)

The rapid growth of distance learning at AHC is impressive. The importance of this mode of instruction to the college as a means to alleviate a shortage of classroom space and to reach out to a more geographically diverse population is well articulated by the staff that supports it. Distance learning is addressed in the strategic planning documents and technology planning documents. However, the team noted that institutional processes that define planning, training, support services, program evaluation, and faculty performance appraisal are not yet apparent. (Standard 6.7)

Purposeful institutional commitment to the development of student information competency is not evident, despite its importance as an educational initiative in which a library and its faculty are often a key player. Currently it is addressed through a two-unit library skills course that enrolls small numbers of students. Competencies may to some extent be embedded into other class offerings, but this could not be verified. The library faculty is aware of the tenets of information competency and has deliberately revised the ways in which they conduct library orientations. (Standard 6.7)

The management and operation of the many diverse student computer labs would benefit from greater coordination of schedules, service offerings, and resource sharing. Lab hours and clearer indications about specific purposes could be more effectively communicated to student users. (Standard 6.7)

The IT infrastructure is stable for the near term, with good bandwidth capabilities, including video over IP and DS3. AHC has had difficulty filling the IT Director's position and must continue those efforts. As with the other units, IT has struggled to cement a base of stable funding, especially with the loss of TTIP dollars. (Standards 6.5, 6.7)

Recommendations:

See Recommendations 2 and 4.

STANDARD SEVEN FACULTY AND STAFF

Response to the Previous Team's Recommendations:

Recommendation 6: The college should adhere to established procedures for completion of all classified staff evaluators (Standard 7.B.2)

The team confirmed that the college has made significant progress on this issue and is in compliance with the standard. An added position in Human Resources has been effective.

General Comments:

In recent years, the successful acquisition of a number of grants has allowed faculty and staff to engage in a variety of projects and activities that have emphasized elements of the college's mission, especially in the area of leadership and staff development. Data obtained and disseminated by the institutional researcher hired since the last comprehensive visit has supported systematic self-assessment. There has been a determined effort to explore the cause and remedy for an insufficiently diverse workforce at the college. Despite recent economic shortfalls, Allan Hancock College employees continue to conduct stimulating staff development activities.

Findings:

Since the last self study, Allan Hancock College has significantly increased the number of staff in all categories. Many of these positions were funded through grants and categorical programs. As these funds run out, the district is expected to take on the financial obligations, or to reduce or eliminate the grant activities. The college is currently faced with an inability to fill all of the positions vacated by retirement and relocation; for example, at the present time, only five of 17 vacant positions are in the process of recruitment, although possibly three more will be advertised shortly. (Standard 7.A.1)

The district has devoted much consideration to the recruitment and hiring process, but has not yet completed the revision of the faculty hiring process. A variety of staff assist in the preparation of job descriptions, resulting in a strong collaborative effort, but also the less-desirable consequence of a delayed time line that potentially affects the timely accomplishment of hiring. An ad hoc committee of administrators and faculty was formed during the 2002-03 academic year to expedite the hiring process. Further, Human Resources staff and faculty have sought to broaden recruitment by targeting discipline-specific publications and maintaining current employment information on the college Web site, which has experienced vastly increased numbers of visits. Cooperative efforts by the President, Human Resources staff, and faculty have led to modifications in the interviewing process that emphasize fairer consideration for all candidates; follow-up candidate surveys reflect satisfaction with the process. (Standard 7.A.2)

The college employs careful measures to hire qualified candidates. Full-time faculty hiring committees are composed of faculty in the disciplines, dean or administrators, and a student. An EEO officer is present to observe the process. Qualities that are stressed include knowledge of the discipline/service area, possession of appropriate degrees, effective teaching/counseling/library skills, and evidence that candidates will address the college's mission. Regarding the disparity between the ethnic composition of the faculty and student body, the college has explored remedies that have thus far yielded less progress than hoped for. The planning agenda suggests further measures that college staff intend to implement to improve diversity at AHC. (Standard 7.A.3)

For all categories of employees, there are clearly defined evaluation processes in place. Probationary faculty are evaluated five times during their first four years by committees comprised of their peers and an appropriate administrator; classroom observations, student surveys, and a review of relevant materials such as syllabi are also employed. Tenured faculty are evaluated in a similar manner once every three years. Full-time faculty in the discipline observe part-time faculty; student input and review of classroom materials are also utilized. Evaluation of administrators involves faculty and peer groups. The college president is evaluated by the Board of Trustees. The team found evidence that the evaluation of classified staff has been improved by instituting a new Human Resources position to assist with the process. Online evaluation forms are sent to supervisors, who are instructed to administer the evaluations during a specified period of time. (Standards 7.B.1, 7.B.3)

As the college employs new time frames and modes of delivery for courses taught by part-time faculty, it becomes more challenging to evaluate the instructors; but the college staff should find a way to keep pace with this to ensure the quality of all instruction regardless of how the course is delivered. (Standard 7.B.1)

College staff have designed multiple measures to assess the efficacy of the evaluation process, stressing self-improvement, peer feedback and staff development. Still, a large percentage of faculty and staff who responded to the fall 2002 accreditation survey are skeptical regarding the meaningfulness of the evaluation processes. Further staff development for all categories of employees suggested in the planning agenda may remedy this negative perception in the future. (Standard 7.B.2)

AHC regularly provides staff development activities, despite low or nonexistent funding. Activities featuring diversity awareness are frequently offered, along with sessions that train in professional areas. Extensive orientation for new faculty is regularly provided, including a new online training program. All faculty receive a resource guidebook, and part-time instructors from Lompoc may attend sessions at the Santa Maria campus. Other employee groups at AHC plan staff development activities specific to their areas, and the 2002 staff survey indicates that all campus groups express strong satisfaction with the results. Clearly the AHC staff take great pride in the willingness of employees to share their personal interest and expertise to benefit the college community. The planning agenda related to staff development focuses on securing funding. (Standards 7.C.1, 7.C.2)

Human Resources staff, working with other employee groups in a shared governance process, carefully monitor fair employment procedures at the college. Prioritization of vacant positions is tied to the college planning process. Much attention has been paid to expanding recruitment to attract diverse, qualified candidates; and revisions to the interview phase include heightened emphasis on candidates' accomplishments rather than personality. Human Resources staff employ satisfaction surveys to query candidates on their experience with the hiring process in an attempt to monitor and improve the process. (Standard 7.D.2)

Personnel policies and procedures are developed in a shared governance process and are published in documents pertaining to each category of employees. (Standards 7.D.2, 7.D.3)

Evidence:

Currently, there are a number of administrative positions staffed by interim personnel. Discussions with Human Resources and faculty indicate concern that the college will be unable to continue the recent pace of hiring. Although the college's practice of hiring two more than the number of retiring or resigning faculty cannot be sustained in the current economic climate, there is no planning agenda item that addresses how the college will handle this. (Standard 7.A.1)

Hiring policies for all campus groups are published in documents that are available from HR and in Board policies. Employment information is included on the college Web site and then is monitored for numbers of visits. Satisfaction levels with participation on hiring and other committees are reflected in the climate survey of fall 2002. (Standard 7.A.2)

Interviews with college staff affirm that careful attention is paid to the development of job descriptions. The *Employee Selection Committee Handbook* specifies criteria sought in faculty and administrative/supervisor hires. Discussions with a number of employees reveal frustration with the college's difficulty in recruiting and hiring candidates to reflect the area's diversity, despite the best intentions and careful planning. One possibility is that the hiring process time frame is too drawn out, discouraging candidates from considering employment at AHC. The district uses evidence from the 2002 climate survey to support the high quality of candidates selected: 88 percent of students approved of faculty performance. An ad hoc advisory committee composed of administrators and faculty has been meeting regularly over the past year to address hiring process time lines. (Standard 7.A.3)

Conversations with HR staff and examination of evaluation records affirm that strong efforts to conduct regular and timely evaluations are practiced. (Standards 7.B.1, 7.B.2)

Staff development flyers and a variety of other documents attest the importance of this activity in the campus life of Allan Hancock College. Conversations with all categories of staff affirm the interest in continuous professional development. (Standards 7.C.1, 7.C.2)

The district's Board policies contain standards for district employment procedures. Collective bargaining agreements are published for full- and part-time faculty and classified staff. Shared governance committees ensure widespread participation in establishing hiring

priorities and time lines. The Human Resources office displays a flow chart for all steps of the process of current hires. EEO training and a brochure that provides guidelines are available. The ad hoc committee meeting to improve the recruitment and hiring time frame publishes written records of its work from meeting to meeting. Staff satisfaction surveys assess various groups' attitudes toward the hiring process. (Standard 7.D.1)

The college advertises positions in discipline-specific publications, and in national, local, and regional papers. Moreover, the Human Resources office utilizes online job notices that are then monitored to reveal the number of site visitors. Fact books published by the college give gender and ethnicity data. (Standard 7.D.2)

The district distributes copies of bargaining agreements to the relevant constituencies, detailing personnel policies and procedures and updating the documents through negotiations. The *Shared Governance Manual* is also widely disseminated to college staff. (Standard 7.D.3)

Conclusions:

A continuing priority at Allan Hancock College is staff diversity. The district's efforts to recruit and hire employees to mirror the community's diversity have not been as successful as hoped for to date, although faculty and staff continue to explore ways to improve diversification. (Standards 7.A.3, 7.D.1, 7.D.2, 7.D.3)

The accreditation visit validates that the college has established a process for the timely and structured evaluation of classified staff. (Standard 7.B.2)

Professional development activities at the college are valued by college staff, who continue to bring instructive and innovative inservice sessions to the campus despite lack of funding. (Standards 7.C.1, 7.C.2)

The college should quickly complete the revision of the faculty hiring process currently underway.

Recommendations:

See Recommendations 1 and 4.

STANDARD EIGHT PHYSICAL RESOURCES

Response to the Previous Team's Recommendations:

There were no previous recommendations for Standard Eight.

General Comments:

Allan Hancock College is located on several sites throughout northern Santa Barbara County. Santa Maria, the main campus located on 106 acres, has 30 buildings, a number of which are quite old. The site is attractive and well maintained. Next to the Santa Maria Campus is the South Campus that is on 9.6 acres and houses the health occupations programs and public safety programs and maintenance. The Lompoc Valley Center is an attractive, new facility of four buildings on 156 acres in the city of Lompoc. The college also uses facilities in downtown Santa Maria, in Solvang, and on the Vandenberg Air Force Base.

Findings:

The Physical Resources section of the self-study report fairly represents the efforts of the college to provide adequate facilities and equipment to meet its institutional and educational goals. The college has made significant strides since the last comprehensive visit to provide and plan for adequate physical resources by combining local funding (fund-raising, student contributions, certificates of participation) and state funding (scheduled maintenance, Proposition 47 and Proposition 55, e.g.) to replace aging facilities, improve student services' overcrowding, and expand instruction. This is evidenced by the following: 1) acquisition of modular buildings (buildings W and N2) to provide a temporary solution for the closure of buildings Y and S and expansion space for student services; 2) the use of a student center fee and foundation dollars to expand and remodel the Student Center; and 3) Proposition 47 funds to replace the Skill Center and to expand and renovate the Library/Media Technical Center; and 4) Proposition 55 funds to build a new Science Health Occupations Complex. However, it must be noted that 30 percent of faculty and staff indicated that a lack of adequate work/office space presents the greatest obstacle to reaching program and/or instructional goals (*Accreditation and Staff Assessment Survey, Fall 2002*). Space limitations were particularly evident in the student services functions and at the South Campus in the nursing and public safety programs. Team members visited Lompoc Valley Center and Vandenberg Air Force Base and were particularly impressed with the Lompoc Valley Center, both its technology and its upkeep. It was noted, however, that the growth of the center might soon surpass the available facilities. (Standard 8.1)

The Santa Maria campus gives the visual impression of being a very attractive and well-maintained campus. However, survey results indicate that only 52 percent of employees are satisfied with the physical condition and maintenance of classrooms, and only 46 percent are satisfied with the condition and maintenance of their work areas (*Accreditation and Staff Assessment Survey, Fall 2002*). Notwithstanding this survey result, the faculty and staff that

the team met with believe that the facilities staff, despite a number of vacant positions and the addition of new modular buildings, has been able to maintain a clean, attractive, and functional campus. The team noted that maintenance concerns that had arisen at Lompoc Valley Center center on HVAC issues are being addressed and are close to being resolved. (Standard 8.2)

The age of many college buildings creates access issues, but the college has made progress in the removal of barriers and has plans in place to address other access issues with scheduled maintenance funds. Survey results indicate that the vast majority of faculty and staff feel safe on campus. The *Annual District Crime Statistics Report* would confirm this impression, as there have been very few violent crimes. Personal contact with a number of students supports this conclusion. Lighting was an issue in the last comprehensive evaluation report, and the college has made significant improvements in this area, as indicated in the college's *Focused Midterm Report*. (Standard 8.3)

The college has a process in place to ensure purchases of equipment are linked to institutional planning and priorities, but it is very dependent on grant funding and donations for technology and equipment. The college has acquired more than 500 computers in the past two years. This expansion has resulted in concerns over adequate maintenance of equipment (Accreditation Survey). The lack of adequate repair staff for media and computers is a primary contributor to this problem. It was noted that the college has one media repair technician for the entire Santa Maria campus and one for the much smaller Lompoc Valley Center. Concerns were also expressed concerning the college's aging fleet of vehicles and the lack of adequate transportation for instructional and student activities. Finally, the self- study report identifies problems with the upkeep of the equipment inventory. (Standard 8.4)

The college has produced an excellent *Educational and Facilities Master Plan 2001-06*, and the team was able to validate the use of this document in the development of strategic plans and the annual *Five Year Capital Construction Plan* submitted to the state. (Standard 8.5)

Evidence:

The key documents used to provide evidence of the college's efforts to ensure adequate physical resources include the *Educational and Facilities Master Plan 2001-06*, the *Five-Year Capital Construction Plan* and the Board of Governor's action item on facility funding for 2003-04 and 2004-05. Visits with the Facilities Advisory Committee and Planning Committee as well as meetings with college maintenance administrators and various faculty and staff indicate that the college is making significant efforts to ensure adequate physical resources, even though much work remains. (Standards 8.1, 8.5)

Interviews with college maintenance administrators and various faculty and staff confirm the problems noted in the self study related to the maintenance of an aging campus. However, these same interviews reflected a great appreciation for the work of the grounds, maintenance, and custodial staff given position vacancies and the addition of new facilities. (Standard 8.2)

Meetings with the Facilities Advisory Committee, the Safety Committee, and various faculty, students, and staff and a review of the *Annual District Crime Statistics Report* and scheduled maintenance program confirmed the college's commitment to providing a safe, healthful, and accessible college. (Standard 8.3)

The *Accreditation and Staff Assessment Survey* and discussion with the college's Media Coordinator and Assistant Director of Information Services provided evidence for the college's concerns about the maintenance of equipment and technology and the lack of staff. (Standard 8.4)

Conclusions:

Allan Hancock College meets the requirements of Standard Eight. The college is to be commended for its efforts to improve the facilities on the Santa Maria campus and for the completion of the Lompoc Valley Center. The completion of a student-supported renovation of the Student Center and the college's success in obtaining state funding support for the Library/Media Technology Center, Science and Health Occupations Complex, and Skills Center are important steps to improving an aging campus and to providing a quality environment for learning. However, overcrowding will remain a problem for the foreseeable future, particularly for student services; and a solution to the facility needs of the public safety programs has yet to be identified. (Standard 8.1)

Maintenance of older buildings will continue to be an issue for the staff, particularly in light of ongoing fiscal concerns. The new work order system to be put in place this fiscal year should improve maintenance response time and reduce some of the dissatisfaction of faculty and staff with the upkeep and maintenance of their work areas. Concern is expressed, however, over the ability of the facility staff to maintain new buildings scheduled to come on line in the next three to four years, unless additional staff are funded in coming years. This should be a planning priority for the college. (Standard 8.2)

The college continues to make a concerted effort to recognize and address ADA and safety issues, in particular the issue of lighting. The college has an active, and apparently effective, Safety Committee. (Standard 8.3)

Reliance on grants for new equipment and equipment replacement will continue to be necessary for the short term, but the college should plan to incorporate adequate funds in its ongoing budget as soon as practical. The college should also consider giving priority to the funding of a purchasing position and additional staff to support equipment and technology repair. (Standard 8.4)

The college has an effective and vital integrated planning process. (Standard 8.5)

The planning agendas for 8.1 and 8.3 lack specificity and time lines. While discussions on the acquisition of adequate facilities for the public safety programs are ongoing, the college should develop a detailed planning agenda and time line for its accomplishment.

Recommendations:

See Recommendation 2.

STANDARD NINE FINANCIAL RESOURCES

Response to the Previous Team's Recommendations:

There were no previous recommendations for Standard Nine.

General Comments:

The financial, capital planning, and budgetary procedures established by Allan Hancock College as part of their institutional planning activities are effective. There is general acceptance and buy in of the planning and budgetary processes. These processes have created an atmosphere, on the Santa Maria campus, that all faculty, staff, and students will have input to address the current budget shortfalls caused by the state's fiscal crisis. The Vice President of Administrative Services appears to have the confidence of the college in her management of the college's financial resources.

Findings:

The team was able to find evidence to support the accuracy of the information provided in the self-study report. Financial and capital planning is done annually and represents a realistic assessment of the availability of resources and the ability to achieve institutional priorities. The *Educational and Facilities Master Plan 2001-06* provides long-range educational and capital plans. The budget development process is clearly defined and published annually, and the shared-governance process provides appropriate opportunities for faculty and staff involvement in the budget process. (Standards 9.A.1, 9.A.2, 9.A.3, 9.A.4, 9.A.5)

The college uses BiTech as its financial management system. This software appears to be adequate in providing budget and accounting information, appropriate financial documents, and support for the management of externally funded programs, although several problems occurred in preparing schedules for the *2002-03 Annual Audit* that will require local programming. The college proposes to improve the hardware and operating system on which the system runs. (Standards 9.B.1, 9.B.2, 9.B.3)

The district has two auxiliary corporations and two independent nonprofit corporations that support its programs. District staff serving on the boards of these corporations and district control of accounting and purchasing activities ensure that these corporations operate in a manner consistent with the mission and goals of the institution. Because of problems in getting annual independent audits from one of the nonprofit corporations, the college now contracts for audit activities for the two auxiliary corporations. The two independent foundations have agreements with the district to provide an audit. (Standard 9.B.4)

The college has established purchasing and contracting procedures that it updates on an as-needed basis, but it has recognized some problems with its current purchasing and accounts-payable systems. The college has implemented some improvements and proposed other

corrective actions. The business office has hired an additional accounts-payable clerk and has requested funding to hire a purchasing agent. (Standards 9.B.1, 9.B.5)

The college has procedures in effect to clearly identify future obligations. Currently, there are three such obligations: a certificate of participation, health benefits for retirees, and lease payments. All three long-term obligations are budgeted as part of the annual budget process. This practice is problematical for the health-benefits-for-retirees obligation that should be fully reserved based on an actuarial report. (Standard 9.C.1)

The college participates in a number of insurance pools to minimize its liability, property, and worker's compensation risks. The college provides regular training for all new employees on safety and diversity issues but relies on periodic safety inspections from its property liability JPA. This results in incomplete or no documentation as required for quarterly inspection reports. (Standards 9.C.2)

The college issues annual tax and revenue anticipation notes (TRANS) to manage its cash flow needs, and last year the Vice President of Administrative Services was in contact with the county to review all options in case revenues fell short in June due to the deferral of the June apportionment payment. The Budget Advisory Committee establishes an annual reserve level as part of its yearly budget assumptions. It attempts to maintain a minimum 4.5 percent unrestricted general fund reserve. (Standard 9.C.3)

The college relies on its several insurance joint powers authorities to cover emergencies associated with property loss and liability claims. Its consistent budgeting of a healthy, unrestricted general reserve provides for other forms of financial emergencies. More importantly, the college's strategic and annual plans provide guidance to the college on how to make budget reductions when such action is necessary. This was most clearly evident during the mid-year budget cuts in 2002-03. (Standard 9.C.4)

Evidence:

Meetings with the Budget Advisory Committee and Planning Committee and interviews with the presidents of the Academic Senate, faculty union, and CSEA confirmed that the college's financial planning and budget are tied closely to the *Educational and Facilities Master Plan*, *Strategic Plan*, and annual planning activities. A review of the published material, including the above-noted material, the *Shared Governance Manual*, the *Five-Year Capital Construction Plan*, several previous budget documents, and several internal budget planning documents (including the *Prioritization of Classified Positions*) clearly document that the college is engaged in active and effective financial planning. (Standards 9.A.1, 9A.2, 9.A.3)

The *Shared Governance Manual*, the annual *Budget Development Guide*, and material to be found on the college's Web site describe and define the processes for financial planning and budget development. Meetings and interviews with faculty, staff, and student leaders confirm that there are appropriate opportunities for all college constituencies to participate in the development of financial plans and budgets. (Standards 9.A.4, 9.A.5)

Interviews with the Vice President of Administrative Services, the Director of Business Services, and several department heads confirm the self-study report's assertion that the college has a sound financial management system in place and that financial documents demonstrate appropriate allocation, use, and oversight of financial resources. Written material used to confirm this assessment includes the college's annual audits, audits of the various nonprofit and auxiliary organizations, and a variety of other material provided to the team related to the relationship of the college to these organizations. (Standards 9.B.1, 9.B.2, 9.B.3)

Interviews with the Vice President of Administrative Services and the Director of Business Services and a review of the *Purchasing and Contract Guide* and the Business Services program review document confirmed the college's compliance with Standards 9.B.5 and 9.B.6.

Meetings and interviews with faculty, staff, and student leaders confirm that there is general support for the manner in which the college plans and manages financial resources to ensure fiscal stability. (Standards 9.C.1, 9.C.2, 9.C.3, 9.C.4)

Conclusions:

Allan Hancock College meets the accreditation requirements of Standard Nine.

The college is to be commended for the time and energy it puts into its planning and budgeting activities. There is a general belief from all constituencies that these activities work in addressing the financial and capital outlay needs of the college. The college is also commended for the three-year budget-planning effort that went into determining the operational needs of the Lompoc Valley Center prior to its opening. (Standards 9.A.1, 9.A.2)

The college is encouraged to consider funding a purchasing position that the Business Services administration believes will produce cost savings through more effective purchasing practices. (Standard 9.B.5)

The college is to be commended for its efforts in bringing in significant grant funds. However, the college is cautioned that these efforts place it in a position of having to continually find new grants to replace those that end. Planning activities should focus on distinguishing between those grants that support the core mission of the institution that should be institutionalized over time and those that fund one-time activities. (Standard 9.A.2)

The college should begin a multi-year effort to adequately fund its retiree-benefit obligation rather than rely on annual budget appropriations. (Standard 9.A.2, 9.C.1)

The team recognizes the financial difficulties facing the college as a result of California's ongoing fiscal problems. The team is confident that the college's current planning and budgeting practices and its collegial approach to problem solving will see it through these difficult times.

Recommendations:

See Recommendation 1.

STANDARD TEN GOVERNANCE AND ADMINISTRATION

Response to the Previous Team's Accreditation Report:

Recommendation 7: The Board of Trustees must develop a process for assessing its own performance, which is published in board policy or bylaws. (Standard 10.A.5)

The current self-study report states that the Board took action in September of 1998 to approve a process for self-evaluation. The college reports, and the team observed, evidence that the Board of Trustees has conducted this self-evaluation process annually since its adoption. The process begins with Board members completing a questionnaire that considers the Board's role and actions. The individual ratings are then discussed in a Board retreat in an open session. Board minutes reflect these discussions.

General Comments:

The team found evidence that the college is substantially in compliance with Standard Ten.

Findings:

Allan Hancock College has a five-member elected Board of Trustees plus a nonvoting student trustee. The Board serves as an independent policy-making Board. The Board has staggered terms of office. (Standard 10.A.1)

The Governing Board has processes and policies in place to oversee the quality of educational programs as well as the financial health and integrity of the college. Board members participate in planning and in the development of annual budgets. (Standard 10.A.2)

The Governing Board maintains a set of *Rules and Regulations* as well as a *Code of Ethics* that specify the Board's duties and responsibilities. The Board delegates implementation of established policies to the Superintendent/President. The college maintains an ongoing review of policies and uses external resources to support this review. (Standard 10.A.3)

The college has a Board-appointed Superintendent/President. The Board reviews the Superintendent/President annually and provides a written evaluation. The Board participates in final interviews for vice presidents and for the foundation director. For other hiring decisions, the Board confirms all appointments. (Standard 10.A.4)

Board policies, along with the Board's *Rules and Regulations* and *Code of Ethics* are published. The Board conducts an annual self-evaluation in conjunction with the annual evaluation of the Superintendent/President. (Standard 10.A.5)

The Board receives a great deal of information about the college, with program presentations a regular part of monthly Board meetings. Trustees regularly receive publications relevant to their responsibilities, and several Board members have participated in workshops and conferences for their development as trustees. (Standard 10.A.6)

The Board was informed about and involved in the reaffirmation of accreditation process. The majority of the Board spoke knowledgeably about the self-study process. In addition, during the site visit, four members attended the opening session, participated in interviews, and attended the exit meeting. (Standard 10.A.7)

The college has a clearly defined goal-setting, planning, and prioritizing process; and the role of the Superintendent/President is clearly central. (Standard 10.B.1)

Throughout the college, all units spoke highly of the Superintendent/President's process for managing the recent state budget reductions, noting that the widespread, deliberate involvement had enabled the college to meet a huge challenge while remaining cohesive and effective and without sacrificing important plans and goals. (Standard 10.B.2)

The college's administrative size and organization is sufficient to meet the college's size and complexity. The college has actively sought and received significant grant funding to support previously vacant administrative positions and to secure additional positions. The inherent challenge/risk in this approach is sustaining these positions beyond the cessation of external funding. (Standard 10.B.3)

The college's administrators meet published criteria for their positions. Board policies clarify administrators' responsibilities. The college has taken steps to improve the evaluation process for administrators. While this improvement has not been without controversy, the college has a system in place to ensure that these evaluations are conducted regularly and systematically. (Standard 10.B.4)

The college's *Shared Governance Manual* clearly defines the administrative role in college governance. (Standard 10.B.5)

The college has an active Academic Senate; and the faculty have a well-defined role in college governance, defined in the college's *Shared Governance Manual*. (Standards 10.B.6, 10.B.7)

The college's *Shared Governance Manual* clearly identifies the faculty role in all college committees. The college provides some release time to support faculty participation in these activities. (Standard 10.B.8)

Board policy 1112 and administrative procedure 1112.01 outline the role of staff in governance. This is published in the college's *Shared Governance Manual*, which is also online on the college's intranet. There is an identified interest in improving the participation of staff in institutional governance. (Standard 10.B.9)

The college's *Shared Governance Manual* outlines opportunities for students to participate in institutional governance. This involvement has been difficult to sustain; however, the college has identified and begun to address the need to better inform students of their opportunities for involvement in governance. (Standard 10.B.10)

Evidence:

The contents of the self study relating to the Governing Board membership, policies, evaluation, and orientation/development were validated through interviews with Board members and a review of documents, including college publications, Board *Rules and Regulations*, Board *Code of Ethics*, Board policy documents, and Board minutes and agendas. In addition, the team reviewed surveys commissioned by the Board to ascertain community needs and perceptions. (Standards 10.A.1-7)

The team reviewed college publications related to governance and conducted interviews with leadership of the Academic Senate and of the CSEA. Leadership cited the recent work on meeting budget challenges as a good example of a developing interest in and skill at working collaboratively. All individuals reported satisfaction with that process, and each expressed a hope that the college will continue such collaborative processes in the future. (Standards 10.B.1-2)

There was a general recognition in interviews with faculty and staff of the involvement and the effort of administrators, particularly as it relates to the planning effort. Interviews with administrators reflected some level of confusion about how grant-funded positions would be sustained following funding, and there was agreement that the college planned to continue to seek grant funding to augment what was possible under state support. It should be noted that some grants, such as Title V, had sustainability plans in their applications. (Standard 10.B.3)

Interviews with faculty noted a continuing concern about their level of participation in the evaluation of administrators. The process is, however, clearly outlined and published appropriately. In addition, they noted that the Board rejected their request for a role in the evaluation of the Superintendent/President. (Standard 10.B.4)

The college's *Shared Governance Manual* provides clarity about the roles of all constituent groups in institutional governance. (Standards 10.B.5-9)

Interviews with the Superintendent/President and the president of the college's chapter of CSEA highlighted an effort to explore and improve the participation of staff. Documents from the focus group indicated that staff were not necessarily well-informed about their opportunities to participate. Interviews suggested that work with supervisors to support staff participation is also necessary. The CSEA president expressed his hope that unit could be seen as an effective partner in institutional governance, more than just a bargaining unit. (Standard 10.B.9)

Conclusions:

Allan Hancock College has many strengths in the area of governance and administration. The college has an engaged and active Board of Trustees that is focused on its responsibilities. Board participation in planning retreats is evident. Board activities such as annual budget workshops support a high level of engagement. Board policy review appears to be ongoing. The *Rules and Regulations* of the Board were reviewed and updated. (Standards 10.A.1-5)

The Board and the Superintendent/President should be recognized for their Executive Roundtable discussions, which have created community connections and support. (Standard 10.B.1)

The college has looked to form partnerships with businesses and other institutions. The college's work in enhanced strategic planning, and its link to budgeting has created a sense of collegiality. (Standard 10.B.2)

There is some reason for concern, college-wide, in the dependence on alternative funding for what may appear to be core functions, such as administration. Referenced throughout this standard, new staffing positions have been added from this additional funding. It is important that planning take place for the conclusion of those funds; however, none is evident at this time. In fact, the plan seems to be to seek more grants. (Standard 10.B.3)

Classified staff seem confused about how to participate effectively in planning or other shared-governance activities. Some of these concerns seem to be connected to decisions by supervisors at the department level, while others are viewed as a lack of information and limited support from administration. There is evidence that the college has recently begun to deal with this issue through open meetings and the use of a facilitator. (Standard 10.B.9)

Recommendations:

None.