EVALUATION REPORT

SOLANO COMMUNITY COLLEGE DISTRICT

4000 SUISUN VALLEY ROAD
FAIRFIELD, CA 94534-3197

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 Solano Community College from October 25-27, 2005.

Marie E. Rosenwasser, Ph.D.
Chair

Solano Community College
Comprehensive Evaluation Visit Team Roster
Tuesday, October 25, 2005 – Thursday, October 27, 2005

Dr. Marie Rosenwasser (Chair)
Superintendent-President
Cuesta College

Ms. Christina Newell-Holloway (Assistant)
Executive Assistant to President/Board
Cuesta College

Dr. Voiza Arnold
Executive Vice President
of Academic Affairs
Rio Hondo College

Ms. Priscilla Fernandez
Librarian
Chaffey College

Ms. Susan Brant
English Instructor
College of the Canyons

Mr. Joseph Madrigal
Assistant Superintendent/Vice President
Student Services
Palomar College

Ms. Kathryn Dabelow
Faculty
Pasadena City College

Dr. Andreea Serban
Associate Vice President Information
Technology, Research and Planning
Santa Barbara City College

Mrs. Becky Elam
Vice President,
Business Services
Mt. San Jacinto
Community College

Dr. Linda Spink
President
Los Angeles Harbor College

SUMMARY OF EVALUATION REPORT

Institution: **Solano Community College District Evaluation Team Report**

Date of Visit: October 25-27, 2005

Team Chair: Marie E. Rosenwasser, Ph.D.
Superintendent/President, San Luis Obispo County Community
College District/Cuesta College

Introduction

A ten member accreditation team visited Solano Community College District from October 25-27, 2005, for the purposes of determining whether the institution continues to meet accreditation standards, evaluating how well the College is achieving its stated purposes, analyzing how the College is meeting the eligibility requirements, providing recommendations for quality assurance and institutional improvement, and submitting recommendations to the Accrediting Commission for Community and Junior Colleges (ACCJC) regarding the accredited status of the College.

In preparation for the visit, the Accreditation Team members attended an all day team training session conducted by the ACCJC on September 16, 2005, studied the ACCJC Handbook for Evaluators, and were divided into sub-groups according to the specific accreditation standards. Team members also thoroughly read the college's Self Study Report (including recommendations from the 1999 accreditation team and subsequent progress reports) and related evidentiary documents provided by Solano Community College.

Three weeks prior to arriving on campus, each team member prepared written reactions to the college's responses to previous recommendations, the Self Study, and other evidentiary information. Team members also studied the college's web site and intranet; several examined the distance education offerings and services.

Once on campus, the Team thoroughly examined the evidence provided by the College for each standard as well as the numerous additional references such as minutes of the Board of Trustees, Academic Senate, taskforces and committees. During the visit the team members interviewed or met with approximately 150 individuals including faculty, staff, administrators, and students. The Team conducted two widely publicized open campus meetings, which were well attended by faculty, staff, and administrators. Team members also met with such committees as Financial and Budget Planning Advisory Council (FABPAC), Academic Senate, and Shared Governance Council. The Team also met with the Board of Trustees and the Superintendent/President.

<u>Analysis of the Self Study Report</u>

The Self Study frequently gives brief responses to some of the questions within the standards or fails to answer all the questions. The Self Study Report would have been stronger if it had: 1) engaged in more thorough assessment of whether and how the College meets each standard question; 2) included more evidence to support conclusions; and 3) identified some initial or potential plans for improving the way in which the College addresses the standards or their subparts. The Self Study does not seem to reflect a culture comfortable with institutional dialogue on substantive issues of learning, change, and problem solving; nor does it reflect a culture reliant on evidence based decision making where there is a clear understanding of what student learning outcomes and assessment mean. However, the Self Study reveals a college working hard to meet standards, its mission, strategic directions, and immediate goals and challenges.

The Evaluation Team verified that a participative process produced the Self Study Report, with all constituent groups represented on the Steering Committee and the Standards Committee. The Interim Accreditation Liaison Officer (ALO) confirmed that the committee approved the report. While the College can be commended for its participation in the self study process and shared responsibility for the report, the process appears to the Team to have resulted in less critical analysis and documentation to support conclusions that the standards are being met and few plans for improvement.

Certification of the Institutional Self-Study indicates endorsement of the leadership of the faculty, students, faculty and classified unions, as well as the expected endorsement from the accreditation steering committee co-chairs and the Superintendent/President and Board of Trustees.

Major Findings and General Recommendations of the 2005 Team

Based on Commission standards, the following eight recommendations are made as a result of the October 25-27, 2005 visit:

General Recommendation 1: Improving Institutional Dialogue

The College should broaden the self-reflective dialogue about the continuous improvement of student learning and institutional effectiveness among and between faculty, staff and administrators within and across different divisions of the College as well as between the Board and President and vice presidents in order to increase college unity and teamwork (I.B.1, II, IV).

General Recommendation 2: Improving Institutional Planning

In order to improve institutional planning, the College should clarify and simplify its terminology and processes used in planning so that the vocabulary is more easily understood and accepted institutionally, the planning processes are more integrated, and the plans actually get implemented. (I.A.4, I.B.3, ER 19).

General Recommendation 3: Improving Institutional Effectiveness

In order to improve institutional effectiveness the College should establish and implement a clear, systematic, consistent, and ongoing method of measuring and evaluating its effectiveness in achieving stated strategic planning goals and student learning outcomes (I.B.2, I.B.3, I.B.6, I.B.7, ER 10, ER 19).

General Recommendation 4: Student Learning Outcomes

The College must develop institutional procedures for the identification of student learning outcomes at the course, program, degree, and institutional level. It must also develop a timeline for the accomplishment of this process and expand this process to include assessment measures for each level, analysis of these assessment processes and results, and documentation of how results of the assessments are used to improve student learning. In addition, the College must involve all faculty, including those in Student Services and Library Resources, in the dialogue about process and results (II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.f, II.A.2.h, II.A.1.i, II.A.6.a, II.B.4, ER 16).

General Recommendation 5: Library Resources

In order to have Library holdings and services sufficient in scope and currency to support its curriculum, and be able to extend its services to the off-campus centers in Vallejo and Vacaville, the College will have to address the Library's funding level and, at a minimum, be responsive to the recommendations of the October 1993 and 1999 accreditation teams (II.C.1).

General Recommendation 6: Staffing and Organizational Stability

The College should continue to focus on prior accreditation evaluation reports and implement the recommendations. Stability in personnel, particularly in leadership positions, fiscal services and human resources will help the College to meet the requirements of Standard III and assure institutional integrity. (III.A, III.D.1, III.D.2, III.D.3)

General Recommendation 7: Fiscal Integrity and Stability

The College should develop a detailed plan with a timeline and fixed responsibility to address the long-term financial obligations including debt retirement, capital lease options, and establishment of a reserve for retiree benefits. Financial obligations associated with negotiated settlements should be evaluated and managed to determine long-range impact on institutional financial stability. (III.D.1, III.D.2, III.D.3, ER 17)

General Recommendation 8: Leadership

In order for the Governing Board to focus on the institution's major issues and questions of policy, the Board of Trustees is encouraged to delegate full responsibility and authority to the President to implement and administer board policies and the operation of the College. The institutional leaders should likewise foster empowerment, innovation, and institutional excellence through dialogue that builds trust and increases focus on student learning and assessment of learning outcomes, institutional effectiveness, and integrity. (IV.A.1, IV.A.3, IV.B.1.j, IV.B.2.a)

ACCREDITATION EVALUATION REPORT
FOR SOLANO COMMUNITY COLLEGE

Comprehensive Evaluation Visit
October 25-27, 2005

INTRODUCTION

History and Demographics of the Institution

Solano Community College (SCC) was established in 1945 as part of the Vallejo Unified School District and functioned as Vallejo Junior College for ten years until the voters approved the creation of an independent two-year college in 1965. Through a voter-approved $12.5 million bond, the main campus was constructed at Suisun Valley Road in Fairfield and the campus opened in 1971. In November 2002, voters approved a $124.5 million bond measure to establish two permanent educational centers (Vacaville and Vallejo), to construct a new Student Services Building on the Fairfield campus, to renovate campus buildings, and to upgrade the campus infrastructure.

Currently serving 20,000 students per year, SCC has grown over the last few years because Solano County is experiencing the fastest growth of the nine San Francisco Bay counties. The off-campus locations, located at the Vallejo John F. Kennedy Library and the north-county interim site near the junction of Interstate 80 and Highway 505, are also growing. The College also offers classes at the Solano County Nut Tree Airport in Vacaville, Travis Air Force Base (Fairfield) and the Harbor Theatre (Suisun).

In Fall 2004, 11,550 credit students were enrolled, with 25% new students or first time transfers to SCC. 67% of the students are part-time, 60% female, 58% under the age of 25. The ethnic breakdown of the students is near that of Solano County, 56% from historically underrepresented ethnic groups (16% African American, 12% Filipino, 14% Latino, and 14% all others). Two-thirds of the full-time students plan to transfer to a four-year college, and over one-third of the students receive some form of financial aid.

Observations and Commendations

During the Accreditation Evaluation Team's visit, the College excelled in its accommodation of the team by providing well-organized files and notebooks of evidence in both the team room on campus and at the hotel, by organizing numerous individual and group meetings, by being responsive to requests for copies of reports/documents from team members, and by providing delicious meals and snacks for the team. The Team appreciates and commends Solano Community College for its gracious hosting.

The Team found a dedicated faculty, staff, administration, and board committed to serving the students well. There is considerable pride in the quality of the College and admiration for the quality of students and programs. The Team also found actively engaged students in shared governance committees, task forces and hiring committees.

There is evidence of ASSC involvement in developing college policies and the development of its annual budget and in providing substantial financial assistance to the Inter-Club Council and other college activities.

Commendation 1: The College is commended for its responsiveness to the community; this is demonstrated through the development of expanded Vallejo and Vacaville Centers, partnerships and arrangements with Harbor Theater, Nut Tree Aeronautics, the hospitals/health care facilities, the Small Business Development Center, the passage of a bond measure, and the like. The College is situated in a dynamic, growing county and region and can use its community outreach and connections to support the institution's master planning through "Vision 2020".

Commendation 2: The College is to be commended for excellence as demonstrated in its comprehensive offerings; of special note are the college's theatre arts program, its award winning speech and debate program, and the academic excellence of its college athletes.

Commendation 3: Another area of commendation is in innovative programs and partnerships. Of special note, is the program in bio-technology and the partnership with Genentech, a state leader in bio-engineering technology, and the Nursing program's expansion of partnerships with local health care providers and its recent multi-million dollar grant partnership with Napa Valley College.

Commendation 4: Student Services is to be commended for having a focused, planned, and collaborative effort to ensure that support services identify and support the needs of the college's student population. The special efforts in outreach by the financial aid office have increased the number of students eligible for financial aid. On-line financial aid information is in the languages of the primary non-English speaking populations of its service area.

Self Study Responses to 1999 Recommendations, 2002 Focused Mid Term Report With Visit, Progress Report and 2005 Team's Conclusions Concerning College's Responses to Prior Recommendations

Background

Since the 1999 accreditation team's visit and 1999 Evaluation Report, Solano Community College has experienced several changes. During the last four years, over one-third (35%) of the full-time faculty members, about two-fifths (42%) of the full-time classified staff, and nearly half (46%) of the management positions were filled with new people. The current Superintendent/President was hired in January 2003 after the previous superintendent/president resigned and was replaced by an interim CEO for a year. At the time of the 2005 Evaluation Team's visit, the Vice President, Academic Affairs had been there since July 2005, there was an Interim Director of Human Resources; an Interim Vice President, Administrative and Business Services; vacancies in the position of Director of Public Information and Community Services, an Interim Dean, Counseling and DSPS; and the Director, Facilities had recently retired. New members of the Board of Trustees have also been appointed or elected in the last six years. Because of major budget reductions in 2002-2003 and 2003-2004, caused largely by California's fiscal crisis and reduction of community college funding, the College had laid off classified staff, announced but then rescinded 10 faculty lay-offs, and left numerous classified and managerial positions vacant. However, sixteen (16) full-time faculty had been hired for Fall 2005, and the Board of Trustees and Superintendent/President assured the Team that they intended to hire replacement directors and vice presidents to fill the vacancies in Human Resources, Administrative and Business Services, and Facilities.

The 1999 team made eleven recommendations. Five recommendations related to improving planning and linking budget decisions with planning: Recommendations 3.1, 4.1, 4.2, 8.2, and 9.2. Three recommendations related to fiscal planning and budgeting, including the need to adequately address long-term financial obligations. The other recommendations related to increasing student involvement in college governance, increasing library resources, funding a plan for equipment replacement, completing the backlog of employee performance evaluations, and improving organizational and communication processes.

Focused Mid-Term Report with Visit

The Commission recommended a Focused Mid-Term Report with Visit. The College was instructed to address all of the 1999 team's recommendations with special emphasis on 3.1, 7.1, 9.1, 9.2, 9.3, and 10.1. A November 2002 Focused Mid-Term Report Visit occurred and concluded the following:

"The team found that the College has made progress in coordination of its planning, in linking and integrating the planning process and budget development, and has further developed its institutional research capability with a foundation of research data for informed and effective decision making. (ATR 3.1 and 4.2)

"The College has continued to build services to students and expand its offerings in order to optimize FTES growth. However, in review of the college's Enrollment Management Plan, the team found that it was more of a series of statements identifying FTES growth initiatives/strategies rather than an actual plan, which should be a systematic set of activities, organized by strategic planning and supported by institutional research. To assist the College in sustaining success in maximizing FTES growth to generate increased revenues, the College is encouraged to regularly update and more fully develop its Enrollment Management Plan. (ATR 4.1 and 9.2)

"The College has responded very effectively to the concerns contained in this recommendation. Students are actively improving their organizational participation in the governance process of the College and it is expected that this trend will continue. (ATR 5.1)

"The Focused Mid-Term Report has not adequately addressed the recommendation contained herein nor has the College made adequate progress in satisfying this recommendation. Continued progress is called for through its education and budget planning and decision-reaching processes at all levels – strategic, master, fiscal and operational. (ATR 6.1)

"While progress has been made in reducing the backlog of faculty performance evaluations, and moderate or marginal progress has taken place in the other employment categories, the College needs to continue with its progress in order that it may be in full compliance with the recommendation. (ATR 7.1)

"The District has made progress to address its reoccurring equipment repair and maintenance needs. Although funds have been budgeted to match the State's scheduled maintenance projects, adherence to the District's policy of a one-half percent set aside should be followed. (ATR 8.1)

"The College has responded admirably to this recommendation. (ATR 8.2)

"The Board of Trustees and the College have developed a series of committees to establish institutional priorities and to link those priorities to the budget. Although communication between representatives and their constituents could be improved, the committee structure appears to be working. In light of the commission's new standards calling for outcomes and measures of effectiveness linked to its budget and planning processes, the College is encouraged to undertake a focused effort in this regard. (ATR 9.1)

"As a result of much stronger financial planning, the District is positioned to satisfy its long-term financial obligations, the most ominous of which is the retiree benefit obligation. (ATR 9.3)

"The College has made progress in reviewing its organizational and communication processes, and clarifying roles, responsibilities, and authority. In addition, the various

constituencies appear to be significantly involved in the work of the College and positively impacting its overall development. (ATR 10.1)"

2005 Accreditation Team's Findings Regarding Self Study Responses to 1999 Recommendations

In the summary of findings that immediately follows, it should be noted that the 2005 Accreditation Team learned that Solano Community College did not have training about the accreditation process or conducting the self-study before the study was done and the report written. This lack of specific training could explain why those recommendations from the 1999 team to which the college had responded in its mi-term report were not addressed in the college's 2005 Self Study Report.

1999 Accreditation Team Recommendation (ATR) 3.1 "The College should build on its current planning efforts, with particular attention to institutional research and documentation, implementation and monitoring, coordination and clarification of all planning components, and, most importantly, full integration and linking between planning and budgeting both on a short-term and a long-term basis." (Standards 3A1.2, 3B.2, 3B.3, 8.5, 9A.1, 9A.4, 9C.4)

2005 Self Study Response: Substantially Met. The College reported that planning processes are integrated into day-to-day operations, listed the standard reports produced by the Office of Research and Planning that various managers and committees consult in making decisions and doing more planning. The 2005 Team verified that there is an active Director of Research who produces enrollment, program review, retention, load calculation reports. However, there does not appear to be clear direction to the researcher for inquiry into more analytical questions, and the college's antiquated technology and MIS system inhibit more sophisticated data retrieval and analysis. The analysis has to be done manually.

The College has established the Financial and Budget Planning Advisory Council (FABPAC) to review budgetary issues and receive district-wide funding priorities. The response to this recommendation shows that the College has begun to respond but the Self Study did not discuss how decisions are made or give examples of decisions made that are based on the institutional research and documentation.

1999 ATR 4.1: "The College should develop a comprehensive and systematic approach to enrollment management, which would address problems of low enrollments and productivity, and would provide for resources, strategies, and accountability focused at optimizing program funding and marketing mechanisms to ensure that offerings are provided in alignment with student needs. (Standard[s] 4A.1, 4A.2, 4A.4, 4D.2)
That the College ensure that the major instructional strategic and operation plans (e.g. Strategic Plan, Educational Master Plan, Academic Program Review, and Three-Year Instructional Plans) are linked to each other, adhere to an appropriate timeline, and are clearly documented and broadly disseminated to members of the College. Furthermore, the College should ensure the alignment of these strategic and operational planning activities with the budget review and allocation processes." (Standard[s] 4.A.2, 4.A.4)

2005 Self Study Response: Substantially Met. Although this recommendation was not discussed in the Self Study, the 2005 Accreditation Team did observe that the College had responded to this recommendation in its Focused Mid Term Report and that both in the Self Study and verified during the team visit, the college's enrollment had improved. The College had created a Scheduling Task Force to analyze course scheduling and the College had increased offerings on-line and at the centers. At the time of the visit, enrollment appeared to be stable, but the College has ambitious growth plans for its centers for which a well developed enrollment management plan and program development was not found.

1999 ATR 5.1: "The College further acknowledge, encourage, and provide for the student's role in the decision reaching and governance processes of the College." (Standard 5.4)

2005 Self Study Response: Met. The College did not respond to this recommendation in this self study but had responded in its Focused Mid-Term Report. The 2005 Accreditation Team learned that students were actively engaged in college and hiring committees. The Associated Students were included in the Team's welcoming breakfast.

1999 ATR 6.1: "The College, in its educational and budget planning, should address improving the Library book and periodical holdings. Furthermore, a schedule for replacement, maintenance and purchase of equipment for Learning Resources services and labs should be incorporated into the college's Educational Master Plan." (Standards[s] 6.2.1, 6.5.2, 6.5.3)

2005 Self Study Response: Not met. The College did not respond to this recommendation in "Responses to Previous Recommendations" in the Self Study. The 2005 Accreditation Team made a similar recommendation, as shown in General Recommendation 5.

1999 ATR 7.1: "The College should set specific timetables to eliminate the backlog of overdue evaluations and provide for the implementation of a "systematic, competent, and timely performance evaluation process for all categories of employees and which broadens the criteria for faculty evaluations." (A previous team evaluation) (Standard 7.B.1, 7.B.3)

2005 Self Study Response: Met. Although the College did not respond to this recommendation in the Self Study section titled "Responses to Previous Recommendations," the visiting team learned that staff reductions and turnover in Human Resources could have complicated completing performance evaluations on time. Nevertheless, progress had been made, in spite of the college's budget reduction in 2002-2003 and 2003-2004, which led to classified staff lay-offs and the departure of the Director of Human Resources in 2004-2005. The administration now has a tracking system in place to monitor completion of performance evaluations and verify completion.

1999 ATR 8.1: "It is recommended that the recommendation of the previous accreditation team which states: 'The district should consider instituting a program of dedicating funds on a recurring basis to equipment maintenance and equipment replacement,' should be broadened to also include scheduled maintenance support." (Standard[s] 8.2, 8.4)

2005 Self Study Response: Partially met. The College did not respond to this recommendation in the Self Study Section titled "Responses to Previous Recommendations." However, the College did respond in its 2002 Focused Mid Term Report and the visiting team acknowledged that the College had begun to address the recommendation. The 2005 Accreditation Team found that since 2002, the College had not only experienced the California community college budget reduction but also settled labor contract negotiations that exacerbated the problem of the rapid rise in the cost of benefits, so the Team concluded that the College could be at financial risk if it does not address both current and long-term effects more vigorously. (See the 2005 Team's General Recommendation 7.)

1999 ATR 8.2: "The District should undertake a thorough assessment of the Vallejo and Vacaville Centers that considers the role each center is expected to contribute to the District's Educational Master Plan." (Standard[s] 8.3, 8.5)

2005 Self Study Response: Partially met. The College did not address this specific recommendation in the Self Study section titled "Response to Previous Recommendations." However, the Self Study did report that the College passed a $124.5 million bond measure to establish two permanent educational centers in Vacaville and Vallejo. The 2005 Accreditation Team did not find a comprehensive educational and facilities master plan that drove the 2002 bond measure, but there was a facilities master plan for the bond measure. The 2005 Team learned that the President and Governing Board have discussed funding a consultant to assist the College in assessing community needs and developing plans for the centers as well as the main campus.

1999 ATR 9.1: "It is recommended that the Governing Board and the College review and further develop their budgeting processes to ensure: (a) that short- and long-range planning are linked to budgeting; (b) that information is communicated in a timely, usable format to all constituencies and segments; (c) that participants are appropriately oriented; (d) that alternatives and priorities for addressing operating expense requirements are provided; and (e) that these processes are linked to measures of effectiveness." (Standard 9.A.1, 10.A.2)

2005 Self Study Response: Substantially met. The College responded to this recommendation by Figure 0-9, as well as narrative that summarized the development of the fall 2004 Task Force on Program Review, Planning, & Budget Development. While the 2005 Accreditation Team found a good report from this task force, the recommendations were only beginning to be implemented. See the 2005 Accreditation Team's General Recommendations 2 and 3.

1999 ATR 9.2: "The College should give immediate attention and serious consideration to the development and implementation of an enrollment management plan to address its enrollment decline and under utilization of instructional facilities throughout."

2005 Self Study Response: Met. The Self Study reported that the College has experienced steady growth over the past five years; the FTES for U.S. residents grew from 7,366.2 in 1999-2000 to 8,704.64 in 2003-2004. Factored FTES in 2003-2004 were 8,747.17. The new Superintendent/President commissioned the Task Force on Scheduling Effectiveness in spring 2003 and it concluded that the scheduling pattern suited the needs of the working adult population of the College. The College reported growth in its Weekend College and on-line classes, as well as at its off-campus locations.

1999 ATR 9.3: "The College should develop a plan to address long-term financial obligations including debt retirement, capital lease options, retiree benefits, and accumulated vacation and sick leave benefits." (Standard 9.C.1)

2005 Self Study Response: Partially met. The Self Study included a summary of progress on retirement of its long-term debt. An actuarial study was completed in April 2001 and updated in November 2004. The Self Study reported that the College "Developed a long-term debt retirement schedule as part of the District's Fiscal Plan and Human Resources Plan," but as the 2005 Team's discussion in Standard III indicates, the changes in staffing and financial obligations cast some doubt on how this earlier plan will be implemented. The College reported that "maximized growth FTES" had generated increased revenues; however, it was reported to the Accreditation Team in fall 2005 that the fall enrollment was below maximum growth levels, so a larger schedule of classes was being offered for spring 2006. Consequently, it remains to be seen whether the College can address long-term financial obligations including debt retirement, program development and expansion of centers with growth enrollment.

1999 ATR 10.1: "The College should further develop its organizational and communication processes to clearly outline and delineate functions, lines of authority, and shared responsibility in a consistently inclusive manner. All staff members need to take a broader role assisting in and assuming responsibility for the decision-reaching process, which will lead to more informed and widely supported decisions. Furthermore, the College should take the necessary steps to clarify, revise, and streamline the committee system and its related processes. This should include clarifying which committees exist, what their membership is, what their functions are, and from where they derive their authority." (Standards 10.B.3, 10.B.4, 10.B.6, 10.B.8, 10.B.10, [5.4], [9.A.5])

2005 Self Study Report: Met. The Self Study reported that the Superintendent/President's Executive Council meets weekly to review information and discuss district-wide issues, the Academic Deans meet biweekly to discuss common issues, the Academic Senate meets biweekly to address academic issues, and the Student Services managers meet biweekly to review programs and needs. Other areas of the College such as Fiscal Services and Operations and Grounds meet regularly to discuss

issues. The District's Shared Governance Council and the Financial and Budget Planning Advisory Council meet biweekly to review general policy and financial issues. The Self Study reported that, "The Executive Council makes recommendations for funding to the Superintendent/President, the Superintendent/President being responsible for making final budgetary decisions, which are then incorporated into the district's annual budget, and subsequently reviewed and accepted by the Board of Trustees."

Conclusions

The 1999 Team made eleven recommendations. The 2005 Self-Study for Reaffirmation of Accreditation responded to only six of those recommendations. 1999 Accreditation Team Report recommendations that were not addressed in the Self-Study were: encouraging student participation, increasing library and book holdings, equipment maintenance and replacement, and assessing the needs for centers in Vallejo and Vacaville. One of the unaddressed recommendations concerned linking planning and budgeting, about which the Response to the Focused Mid-Term Report said progress had been made. The 2005 Evaluation Team could verify that the institution's senior leadership understands the fiscal challenges but observed that the College as a whole has not understood how certain expenses are driving the budget, rather than the budget being driven by the institution's stated goals and plans. Because the College suffered a major budget reduction in 2002-2004, due to California's fiscal crisis, has had significant turnover in senior management, and has made contractual agreements to pass through COLA, enhance longevity steps, and continue to pay full health benefits without a cap, the College is less able to satisfy the recommendations concerning planning and financial stability in 2005 than it may have been at the time of the Focused Mid-Term Report and visit in 2002.

The 1999 Evaluation Team's recommendation to develop its organizational and communication process may have been better addressed at the time of the focused Mid-Term Report and visit, but the budget reductions, lay-offs, and changes in leadership with individuals bringing different styles, as well as continuing criticism by some faculty and staff about institutional leadership, is straining the college's progress toward its desired organizational and communication quality. Consequently, the 2005 Accreditation Team made General Recommendation 1 related to engaging in more self-reflective dialogue.

As mentioned, the College has made significant progress since the last visit in 1999. However, there are still some areas of continued concern:

- There appears to be continued lack of understanding of and/or willingness to participate by some campus constituents in the planning and budgeting processes.
- There appears to be some continued duplication of effort in the area of planning with lack of clarity and follow up on updating some of the plans (e.g. the plans for addressing long-term financial obligations and human resources needs were not fully implemented).
- Creating a clear relationship between program review, planning and budgeting remains an area that requires additional work to implement and evaluate the plans.

- The College had made progress in addressing its long-term financial stability in 2001-2002, according to the interim reports and evaluation responses. However, in October 2005, the Accreditation Team learned that new contractual obligations did not appear to acknowledge the significant unfunded liability; nor was there wide spread understanding of the cost of unfunded retiree liability, fully funded benefits, and other negotiated agreements in relation to the college's resources.

Eligibility Requirements

1. AUTHORITY
   The visiting team confirmed that Solano Community College received State approval of its programs/services and is accredited by the Accrediting Commission for Community and Junior Colleges of the Western Association for Schools and colleges. The College is authorized to operate as an educational institution and to offer undergraduate education.

2. MISSION
   The visiting team confirmed that Solano Community College's Mission Statement is clearly defined. It was last revised by the Board of Trustees in June 2005. The college's Mission Statement is included in the catalog and is posted on the college's website. The mission is appropriate to a degree granting institution of higher education and its Northern Bay Area constituency.

3. GOVERNING BOARD
   The Accreditation Team confirmed that Solano Community College has a functioning governing board responsible for the quality, integrity, and financial stability of the institution and for ensuring that the institution's mission is being carried out. Its membership is sufficient in size and composition to fulfill all board responsibilities.

4. CHIEF EXECUTIVE OFFICER
   The Team confirmed that Solano Community College has a chief executive officer who is appointed by the Governing Board and whose primary responsibility is to the institution.

5. ADMINISTRATIVE CAPACITY
   The visiting team learned that Solano Community College has an administrative structure to support the necessary services for an institution of its size and mission. However, there are so many vacancies or interims in senior administrative and basic classified positions that there are difficulties in quality assurance such as timely hiring processes and completing budget closure and audits on time. The intentions and efforts to hire replacement directors in Human Resources and Facilities and a Vice President for Administrative Services should be acted on expeditiously.

6. OPERATING STATUS
   The Team confirmed that Solano Community College is operational with students actively pursuing its degree programs.

7. DEGREES
   The Team confirmed that Solano Community College offers 83 Associate Degrees and 48 certificate programs and approximately 70 percent of its credit students are enrolled in courses applicable to the Associate Degree.

8. EDUCATIONAL PROGRAMS

The Team confirmed that Solano Community College's principle degree programs are congruent with its mission, are based on recognized higher education fields of study, and are of sufficient content and length.

9. ACADEMIC CREDIT
   The Team confirmed that Solano Community College awards academic credit based on generally accepted practices in degree granting institutions of higher education.

10. STUDENT LEARNING ACHIEVEMENT
    Eligibility Requirement 10 is partially met; the Team did not find published program outcomes for each program or regular, systematic assessment for all programs. However, there is a plan to make program review inclusive of all programs and systematic. Although the College does not currently have program outcomes for all programs, there are outcomes in such programs as Nursing, and there has been a commitment by institutional leaders to pilot the Bakersfield Student Learning Outcomes model in two programs (one academic transfer and one vocational), and the Self Study assures that "learning objectives have always been a part of the college's course approval process."

11. GENERAL EDUCATION
    The Team confirmed that Solano Community College defines and incorporates into all of its degree programs a substantial component (30 credits) of general education designed to ensure breadth of knowledge and promote intellectual inquiry.

12. ACADEMIC FREEDOM
    The Team confirmed that Solano Community College faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as judged by the academic/educational community in general.

13. FACULTY
    The Team confirmed that Solano Community College has a full-time faculty of 156 and a part-time faculty of 273, sufficient in size and qualifications for programs offered and students served. The Faculty Handbook defines faculty responsibilities as well as processes for curriculum development.

14. STUDENT SERVICES
    The Team confirmed that Solano Community College provides appropriate services designed to support student learning and development, in accordance with the College Mission Statement.

15. ADMISSIONS
    The Team confirmed that Solano Community College has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs.

16. INFORMATION AND LEARNING RESORUCES

The Team confirmed that Solano Community College provides, through ownership and contractual agreement, specific long-term access to information and learning resources and services to support its mission and programs. However, as noted in General Recommendation 5, the Library holdings need to be increased to serve the college's larger student body and enlarged educational program on and off-campus.

17. FINANCIAL RESOURCES

The visiting team believes the institution could be endangering its future financial stability until it addresses the high share of new revenue that the welfare and benefits for employees and retirees consumes annually, according to the budget analysis provided by Fiscal Services. (See Standard III) While the College asserts in the Self Study that "the institutional funding base, financial resources, and plans for financial development are adequate to support student learning programs and services, to improve effectiveness, and to assure financial stability," the Team found that the contractual agreements of 2003-2004 and the 76% increase in costs for welfare and benefits since 2000 compared to the 13% increase in new revenue for the College in the same time period will endanger the financial stability unless the College achieves a much higher growth rate or finds some way to manage its benefits costs.

18. FINANCIAL ACCOUNTABILITY

The Team learned that due to the inadequate number and expertise of Fiscal Services staff the 2004-2005 ledgers had not been closed as of October 27, 2005 and, therefore, the annual audit would not be completed on time. Although the Self Study asserts that the institution undergoes an annual audit, which is made public, the Team notes that the audits are neither timely nor free of findings.

19. INSTITUTIONAL PLANNING AND EVALUATION

While the Self Study asserts, "The College systematically evaluates and publishes how well and in what ways it accomplishes its purposes," the Team did not find evidence of systematic evaluation and publication of assessing student learning outcomes and accomplishments of purposes. There was considerable evidence of planning but less on implementation and evaluation of plans. (See Standard I) This eligibility requirement is partially met. Solano Community College is planning but has not implemented many of the plans, has not yet articulated expected or desired outcomes and criteria for assessing how well the outcomes have been achieved or what improvements have been or will be made.

20. PUBLIC INFORMATION

The visiting team confirmed that the College Catalog contains precise, accurate, and current information concerning general information, requirements, major policies affecting students, locations or publications where other policies may be found, degrees and certificates, and course descriptions.

21. RELATIONS WITH THE ACCREDITING COMMISION
    The visiting team confirmed that Solano Community College adheres to the eligibility
    requirements, with partial exceptions noted above, standards and policies of the
    ACCJC, describes itself in identical terms to all of its accrediting agencies, and agrees
    to disclose information required by ACCJC to carry out its accrediting
    responsibilities. The Accreditation Team found the College well prepared for its
    evaluation visit and especially accommodating to the Team, in regards to providing
    information and responses to questions.

Accreditation Themes

Dialogue: The Team found limited understanding or use of dialogue among or between faculty, faculty and administrators, the governing board and executives, or divisions, as "dialogue" is used in the 2004 Accreditation Handbook. While the Self Study reports that the Accreditation Steering Committee had extensive dialogue throughout the process of responding to the Standards and there was some evidence of the recent taskforces on student learning outcomes and integrating program review and planning using dialogue in the sense of "self-reflective" listening and communication, the Accreditation Team was told in the Campus Open Meetings, through interviews with faculty, staff, and administrators, and in committee meetings, that the College had long had difficulty with resolving conflict and that currently there was a low level of trust among and between various levels of employees.

The Team concluded that with leadership styles which were more responsive to self-reflective dialogue and faculty and staff more willing to actively engage in the kinds of institutional changes required by the accreditation standards and the institution's own strategic directions and goals, the College employees could have rich dialogue that would address all the accreditation standards, resolve problems, and improve employee satisfaction.

Institutional Integrity: The Team was very adequately provided documentation and evidentiary material for each accreditation standard. Although, many of the documents confirmed that Institutional Research consisted of objective, factual reports rather than analytical discussions based on research questions about institutional or program effectiveness, the Team believes the College demonstrated "institutional integrity."

Student Learning Outcomes: The Solano Community College Self Study Report repeatedly referred to course objectives as student learning outcomes, but the visiting team found limited evidence that there is institutional understanding or acceptance of student learning outcomes or outcomes assessment. While the Superintendent/President created a taskforce to study and propose a student learning outcomes model and while the taskforce proposed adopting the Bakersfield Student Learning Outcomes model, the visiting team heard only some of the deans and faculty leaders of the Academic Senate acknowledge the existence of the work of the taskforce. Nevertheless, with the leadership of the Vice President of Academic Affairs, Academic Senate and Deans, the College is positioned to pilot the Bakersfield Student Learning Outcomes model in one academic and one vocational program in 2005-2006.

As indicated in General Recommendation 4, the College must address more completely all the requirements of Standard II concerning program, course, and degree student learning outcomes and assessment of the outcomes.

Planning, Evaluation, and Improvement: The recommendations from the 1999 Evaluation Report as well as the Evaluation Reports of the Mid-Term and Progress Reports, indicate that the College has been required to improve its institutional planning.

The 2005 Accreditation Team found considerable evidence that the College has been improving its planning; however, it did not find evidence of implementation of all of its plans and evaluation of the effectiveness of the planning processes or results. The Team found 15 plans completed within the last six years that addressed strategic directions and goals, program review, facilities needs, enrollment, educational programs, human resources professional development, technology, etc. The Team also reviewed recent taskforce reports that addressed the integration of planning, program review, and budget and student learning outcomes. As General Recommendations 1, 2, and 3 indicate, the College needs to implement its plans, evaluate effectiveness, and make improvements where institutional or program effectiveness indicate a need for changes and improvements. While there is a clear and simple model of planning/implementation/evaluation/improvement described early in the Self-Study, the Accreditation Team did not find evidence that the model was as yet fully institutionalized.

Organization: The College has a clear organizational structure, a healthy set of shared governance groups, ranging from the Academic Senate to the Financial and Budget Planning Advisory Council to various taskforces created for specific work and disbanded when their work is done or transformed into standing committees if institutionalized.

While the organizational structure and shared governance organizations are clear, the functionality of the College is vulnerable because of the substantial turnover in the executive and administrative ranks. The CEO has been leading the College for two and a half years, the Vice President of Academic Affairs has been in the position for four months, and the Vice President of Student Services has been in his position for a limited time (although he has the advantage of being a long-term Solano Community College employee). There is an Interim Vice President of Business and Administrative Services, an Interim Director of Human Services, a consultant who substitutes for the position of Director of Public Information, and the Director of Facilities has recently retired. There has been significant turnover among the full-time faculty due to retirement and there were classified lay-offs during the budget reduction of 2003-2004. The Team observed that the college's personnel transition was causing some difficulties in adjusting to leadership styles, that its shortage in classified staff in Human Resources and Fiscal Services inhibited timely and effective employee hiring, as well as budget closing, budget development, and completion of an annual audit.

Institutional Commitments: Solano Community College's mission statement was reviewed and revised in spring 2005. The Team found that the College provides high quality education congruent with the college's Mission Statement. The College is committed to supporting student learning and student success. This commitment was evident in the number of degrees and certificate programs, extension of programs and services to off-campus centers, college publications, faculty/staff/administrator/governing board testimony, and expressions of satisfaction from students. The passage of a $124.5 million facilities bond for the College in 2002 was a powerful illustration of the community's endorsement of the College and the college's commitment to the community.

Reports of the four accreditation standards and related recommendations are as follows:

STANDARD I

2005 Accreditation Team's Responses to the Previous Team's Recommendations

Recommendation 3.1 from the 1999 Accreditation Team stated that "the College should build on its current planning efforts, with particular attention to institutional research and documentation, implementation and monitoring, coordination and clarification of all planning components, and most importantly, full integration and linking between planning and budgeting, both on a short-term and long-term basis."

The College has spent significant time and work on its planning processes and development of at least 15 different plans. The College has a centralized Office of Institutional Research and Planning, which provides an array of cyclical and ad-hoc reports and information. The College has developed a Master Planning Calendar, which specifies the periods for the development and review of various plans and those responsible. However, the Team could not find documentation of the evaluation conducted or the type of data and information analyzed during these evaluations. The College has made some progress in terms of linking planning and budgeting in that each division selects its top priorities for funding for the year from the list of items for the current year included in the three-year plans. These priorities are submitted to the Financial and Budget Planning Advisory Council (FABPAC).

General Observations

Overall, the response to Standard I shows involvement from faculty, staff and administrators and a reasonable attempt to grapple with the complexities of the standard. Each substandard is addressed in order, and, in most cases, references are cited appropriately in support of statements made. However, Accreditation Team interviews and meetings held with various constituencies revealed that more work has been done in support of Standard I than is reflected in the Self Study Report.

Findings and Evidence

Standard I.A. – Mission

The College has a well-established Mission Statement along with a Vision Statement and eight Core Values that are intended to guide policies, procedures, and daily practices. The College has developed its programs around the Mission Statement and Core Values. The Mission Statement is approved by the Governing Board (last revision was approved by the Governing Board in June 2005) and published in the College Catalog and on the college's Web site. The College has a Strategic Plan (most recent revision was approved by the Governing Board in July 2000), which is based on the Mission Statement and Core Values (I.A.1, I.A.2, I.A.3, I.A.4).

Standard I.B. – Improving Institutional Effectiveness

The College has provided some beginning opportunities for dialogue about student learning outcomes. The dialogue should be expanded and institutionalized more consistently across all divisions and departments. The dialogue about student learning outcomes should permeate the entire college. In addition, the dialogue should become broader in scope to include student learning outcomes that are measurable and observable at the institutional level. This includes more frequent, substantive dialogue about the quality of student learning and institutional effectiveness among and between faculty, staff and administration within and across different divisions of the College as well as between the Governing Board, the President and vice presidents in order to increase college unity and team work. A timeline should be developed for establishing student learning outcomes for courses, programs and degrees (I.B.1, I.B.2).

The team noted a myriad of planning process. In 2004-05, the College created a Task Force on Program Review, Planning and Budget Development (PERT) charged with reviewing existing processes and recommending changes. The Task Force completed the review and proposed six key points which are changes meant to streamline program review, planning and budgeting; expand program review to include all units of the College; and ensure adequate faculty and staff involvement and timely completion of program reviews. The College needs to ensure that the recommendations of this Task Force on Program Review, Planning, and Budget Development are implemented (I.B.3, I.B.4).

Along with the strategic plan, the College has developed various other plans: Educational Master Plan, Technology Plan, Facilities Master Plan, Human Resources Master Plan, Five-Year Capital Construction Plan, Five-Year Construction Plan, Online Enrollment Management Plan, Matriculation Plan, Seven-Year Business Plan, Marketing Plan, ADA Compliance Plan, Emergency Preparedness Plan, Staff Diversity Plan, Student Equity Plan, and three-year unit plans. The College has also developed a Master Planning Calendar and flow charts intended to clarify the sequence of steps and activities that are part of the planning process, as well as the connection between planning, evaluation, and budgeting (I.B.3, I.B.4).

The Team acknowledges the significant effort the College has put in the development of these documents. However, the Team believes that these multiple planning approaches should be synthesized and simplified. The individual plans do not necessarily reflect the priorities of the Strategic Plan. In addition, the Team observed an overwhelming commitment to process with not enough emphasis on outcomes and measurement of results. The Educational Master Plan, for example, repeats the Strategic Plan in its entirety and adds a collection of departmental synopses. While these program synopses are informative, the Educational Master Plan does not set broad educational goals or overall directions for the College. The Educational Master Plan does not indicate which programs are targeted for growth, which ones should be expanded or initiated at the off site centers, and which ones should just be maintained or reduced. In addition, the College does not have an integrated educational and facilities master plan, where current and projected educational needs drive the development of facilities. The three-year plans are long lists of activities, many of them very operational in nature. While such activities are certainly needed, they are part of the day-to-day operations and activities of any college. Moreover, these documents need to be reviewed and updated in their entirety on an annual basis. (I.B.7)

Interviews with students, faculty, staff, and administrators pointed to varying degrees of involvement, input, and understanding of planning processes and terminology. There is a clear need for streamlining, integrating and simplifying the large number of plans and planning processes that have been developed over time. In order to improve institutional planning, the College should clarify its terminology about planning and its planning processes such that the vocabulary is more easily understood and accepted institutionally and the planning processes are more efficient and related to the strategic directions and goals. (I.B.4)

The evaluation of the various plans is inconsistent and not based on measurable performance indicators. The Office of Institutional Research and Planning provides various reports and data. It is unclear how the data is being analyzed and subsequently used to evaluate the progress towards the goals and objectives included in the various plans, particularly in relationship to student achievement and student learning outcomes. (I.B.2, I.B.5, I.B.6, I.B.7)

The Self Study does not identify criteria that can be measured to determine effectiveness. This is an important activity in which faculty, staff, and administrators will need to actively engage. It is clear from discussions with faculty that this is occurring in some divisions and this needs to be expanded. For example, the Strategic Plan includes the following goal: "Improve student success." The College should define what it means by student success, what are the criteria by which student success is going to be measured, and how will the institution know that student success has been improved and to what degree. In order to improve institutional effectiveness, the College should establish a clear, systematic, consistent, and ongoing method of measuring and evaluating its effectiveness in achieving stated strategic planning goals and student learning outcomes. (I.B.2, I.B.5, I.B.6, I.B.7)

Conclusions

The College still struggles with a duplication of planning efforts. While progress has been made in trying to integrate the various plans, there is still work to be done to achieve a coherent and integrated planning approach. The evaluation of these plans appears to occur in an unstructured fashion, without a formal evaluation report being produced. The Strategic Plan appears to be the only plan for which an annual status report is being produced. However, the Annual Report is a listing of activities or actions without associated measurable indicators or a sense of how far from achieving the stated goals the College is or what the desired level of success to be achieved is. The three-year college plans would better serve the overall direction of individuals units and areas if they focused on programmatic goals and objectives rather than on routine, operational needs and activities.

General Recommendations for Standard I

General Recommendation 1: The College should broaden the self-reflective dialogue about the continuous improvement of student learning and institutional effectiveness among and between faculty, staff, and administrators within and across different divisions of the College as well as between the Board of Trustees and President and vice presidents in order to increase college unity and teamwork. (1.B.1, II, IV)

General Recommendation 2: In order to improve institutional planning, the College should clarify and simplify its terminology and process used in planning so that the vocabulary is more easily understood and accepted institutionally and the planning processes are more integrated and consistent and related to the strategic directions and goals. (I.A.4, I.B.3, ER 19)

General Recommendation 3: In order to improve institutional effectiveness, the College should establish and implement a clear, systematic, consistent and ongoing method of measuring and evaluating its effectiveness in achieving stated strategic planning goals and student learning outcomes. (I.B.2, I.B.3, I.B.6, I.B.7, ER 10, ER 19)

STANDARD II

2005 Accreditation Team's Responses to the Previous Team's Recommendations

Solano Community College is a comprehensive community college offering a wide variety of basic skills courses, general education courses, lifelong learning courses, and vocational programs leading to certificates and degrees. Combined with its off-campus centers, it is a true educational resource for Solano County.

General Observations

The team found excellence many of the academic programs and offerings, for example:

1) Some learning support programs such as learning communities, the Foreign Language Cross Age Teaching Program, and the travel/study course to the Oregon Shakespeare Festival provide exciting educational opportunities to the students and the community. Additionally, many centers and labs across campus and disciplines offer support to student learning and access to the Internet.

2) A further example of quality can be found in the Theatre Arts program that offers six full length productions a year, providing access to educational entertainment for both the campus and the community. The college's speech and debate team won the gold award in the national Phi Ro Pi Community College National Championship Speech and Debate Tournament. In addition, the College has two honors societies—Phi Theta Kappa and Alpha Gamma Sigma. Approximately twenty thousand dollars in scholarships each year go to deserving Solano College students. The college's commitment to academics is also reflected in the almost one hundred Solano College athletes who attained over a 3.0 grade point average in the 2004-2005 school year.

3) The College also has a very strong Ethnic Studies program. Students choosing Option C for the A.A. Degree have a multicultural course requirement. The College offers an A.A. in Ethnic Studies with several different major cores for students including the following: African-American Studies, Asian-American Studies, Latino Studies, Native American Studies, and an Ethnic Studies Combination.

4) The College should also be commended for the development of a program in biotechnology, a fast growing economic interest in the region. Funded in part through donations from local business and industry, the College is currently offering courses on the main campus, providing students with job preparation for employment in a high paying industry. The College plans to expand this program at its Vacaville site, which is adjacent to the new corporate headquarters of Genentech, one of the largest bioengineering technology companies in the state.

5) The College is also aggressively addressing the nationwide nursing shortage by expanding its partnerships with local health care providers. The College has partnered

with Napa Valley College to obtain a multi-million dollar grant to expand the number of students going through the Nursing program. The grant will allow them to expand from 44 students to 80 students in four years. Graduates of the program pass the state registered nurse licensing exam at a rate of 87 percent.

6) Another innovative program for which the College just received a $1.3 million Department of Labor grant is a program that trains students in various aspects of the insurance industry. The grant enables the College to expand the insurance certification program. Yet another instance of innovation is a recently developed certificate program in Home Technology Integrator.

Findings and Evidence

Standard II.A. – Instructional Programs

Distance Education
The College began offering on-line classes five years ago. Originally, this was an effort by a small group of faculty who, largely on their own initiative but with some administrative support, began developing on-line offerings. It soon became clear that the College did not have the technical infrastructure to support a large-scale program so the College began dialogue with eCollege® to provide technical support. The offerings have grown from a very small number to over 100 offerings per semester with an enrollment of approximately 3,000 students. The ad hoc committee composed of faculty teaching in the program and administrative input developed criteria for courses that would be offered on-line. These criteria require that courses be general education or related to a specific vocational discipline. The *ad hoc* group did develop a handbook of 23 "best practices" related to on-line instruction that is given to all faculty wishing to teach on-line. It goes without saying, however, that courses taught on-line need to develop student learning outcomes, assessment measures and methods, and demonstrate that these assessments are used to improve student learning. The size of the on-line offerings and enrollments reveal that the College needs to determine the place in its structure and relationship to the Academic Senate and Curriculum Committee of the on-line courses and offerings. Methods of evaluation of faculty and course content also need to be determined. Other issues include faculty load for on-line classes and intellectual property rights. All of these issues need to be addressed, perhaps some of them through the collective bargaining process, and there needs to be a more clearly defined program of distance education. (II.A.2, II.A.2.c, II.A.2.e)

Other Instructional Modalities and Locations
The campus offers students many opportunities for computer-assisted instruction in a variety of disciplines in several different settings on campus. Although the technology and equipment in classrooms across the campus varies substantially, those classrooms that have received modernization are state-of-the-art. The College is planning on using money from its recent bond measure to systematically upgrade all classrooms to "smart" classrooms. (II.A.1.b.)

The College offers classes at several off-campus sites. Team members visited the two largest sites—Vallejo and Vacaville, both currently in rented facilities but will soon move to new college facilities. The Team found that the facilities at both sites offered well-equipped classrooms and labs. Classified personnel staffed both sites at selected hours during the week. Both sites had access to electronic library services in the computer labs and classrooms. At the Vallejo site, a librarian has been assigned four hours a week, but the center has no space to keep library materials. However, when current site renovations are complete that problem may be rectified. Both sites offer counseling services at selected hours during the week.

Unfortunately, the level of services presently being offered needs to be expanded if these are to become more viable off-campus educational sites. Services that need to be expanded include the following: student registration, purchase of books, adequate library services, and adequate counseling services. Because the College is planning on permanent, larger facilities at each site in the future, the College needs to plan for even more support for these sites. In addition, the College needs to do more substantive community needs assessment to determine what programs will be offered at these expanded sites. (II.A.2.)

Program Review
Although the Team felt that the Self-Study was unclear about the regularity of program review, the program review cycle, and the extent to which program review was linked to three-year plans, team members determined through interviews with staff at the College that the program review process was clearer and could now become more regularly implemented. The Team learned that during the 2004-2005 year, the College formed a task force to review the program review process and refine its links to planning and resource allocation. The College is now on a four-year review schedule that includes academic, student, and administrative services. The year 2004-2005 was year one of the process. Programs have been identified for the next three years of the cycle. The report from this task force also validates the fact that program review informs the three-year unit plan development. The Team was also able to confirm that new faculty hires result from criteria that include quantitative and qualitative data related to program review. Instructional equipment is handled similarly. (II.A.2.e.)

Student Learning Outcomes
Although the Self Study contains many references to the work the College is already doing with identifying and measuring student learning outcomes, it was clear to the Team that the college's proposal in the Self Study to simply use the terms "measurable course objectives" and "student learning outcomes" interchangeably would not meet Standard II. (At one point, the Self Study also referred to the college's current term for student learning outcomes as "Student Performance Objectives.")

 In short, the Team found the terminology of the Self Study Report inconsistent and confusing, which was reflective of the level of understanding and institutionalization of student learning outcomes and assessment. The kinds of assessments referred to in the

Self Study consisted of traditional measures of academic achievement in courses. The Self Study did indicate, however, that the College President had instituted a Student Learning Outcomes Task Force that began meeting in February of 2005. The results of that task force were not clear in the Self Study. Team interviews at the campus, along with written materials from the task force meetings, made it clear that at least the task force and the Academic Senate now understand that learning objectives and student learning outcomes are two different concepts. In May of 2005, the task force adopted the Bakersfield Student Learning Outcomes model for identifying and assessing student learning outcomes at the course, program, degree, and institutional level. This was presented to the Academic Senate this fall and was positively received. Plans are now to pilot the Bakersfield Student Learning Outcomes model in two divisions, one academic—Humanities, and one vocational—Business, in 2005-2006. Currently, the College is only focusing on outcomes at the course level. At the end of the year, the process will be reviewed, any necessary changes made, and the process disseminated campus-wide. In the area of Student Services, the cycle for program reviews in the College are now in place for 2005-2006 in two-year cycles. Learning outcomes will be included in each program review for Student Services so that the effectiveness of program evaluation and improvement can occur.

While it is clear that the Vice President of Academic Affairs will be involved with this pilot program, along with the President of the Academic Senate, and that the Vice President of Student Services will work with the Student Services area in this process, the College still has not yet determined what relationship the Academic Senate and/or the Curriculum Committee has with the process and what accountability measures will be in place to ensure that activities proceed. The College is discussing some kind of approval process via the Curriculum Committee. While it is clear that the College has made initial steps towards meeting this aspect of Standard II, it is at a very early stage of the process. Issues that remain to be addressed include process, timelines, comprehensive identification of student learning outcomes, assessments for those outcomes, and uses of those assessments. It is also not clear how widespread the faculty's knowledge is of what is occurring in this area. Although the task force's members and Academic Senators are aware of what is occurring, several faculty members expressed disinterest and cynicism about why such activities are necessary during the Team's open forums.

Conclusions for Educational Program

The College offers a comprehensive curriculum, which appears to be responsive to student and community need, as well as in alignment with the institutional mission. There are numerous instances of strong academic quality. The general education program is defined and its objectives are identified in the College Catalog. However, Distance Education needs to become more integrated with the rest of the curriculum approval and faculty evaluation process. While there has been a taskforce to work on student learning outcomes and outcomes assessment, the College is only beginning to pilot any system for identifying and assessing student learning outcomes. The educational program and quality of dialogue among faculty and institutional leaders can

be enriched by fuller responsiveness to the requirements of Standard II.A concerning outcomes assessment.

Recommendation for Educational Program, Standard II.A.1

The College must develop institutional procedures for the identification of student learning outcomes at the course, program, degree, and institutional level. It must develop a timeline for the accomplishment of this process, and expand this process to include assessment measures for each level, analysis of these assessment efforts, and documentation of how results of the assessments are used to improve student learning. In addition, the College must involve all faculty, including those in Student Services and Library and Learning Resources, in this dialogue and process. (II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.f, II.A.2.h, II.A.1.i, II.A.6.a, II.A.6.a, II.B.4)

Standard II. B – Student Support Services

Student Support Services at the College are very comprehensive and appear to support student learning and enhance achievement of the college's Mission Statement. There is a concerted, planned, and collaborative effort to ensure that support services identify and support the needs of its student population. The process for developing and evaluating three-year plans is used for determining program effectiveness, needs, and modifications. The MESA and Puente programs, along with the increased outreach to disseminate financial aid information, have helped to increase the number of underrepresented students at the College. Special outreach is provided to disseminate financial aid information for eligible students. Dedicated and qualified staff members are in place to provide a high level of service. There is regular, ongoing communication among departments to assure clarification of problems and issues. In addition, the College has a very large program for disabled students that provides a significant service to the campus and community. Although the program has currently outgrown its location, when the new Student Services building is completed, DSPS and other student support programs will have a greatly improved facility.

The Associated Students of Solano College (ASSC) is actively encouraged to participate in shared governance. There is student representation on college committees, task forces and hiring committees. There is evidence of ASSC involvement in developing college policies, in the development of its annual budget and in providing substantial financial assistance to the Inter-Club Council and other college activities. The College is to be commended for providing on-line financial aid information in the languages of the primary non-English speaking populations in its service area.

The tutorial program provides much needed retention services for students. It provides tutors with part-time employment in a convenient job setting. Tutees are able to receive free tutoring to enhance their academic success. The annual budget for the tutorial center needs to be reviewed to determine if student demand for services is being met. The College may need to review remuneration for tutors to see if they are attracting well-qualified employees. (II.B.1.)

<u>Conclusions for Student Support Services</u>

There is considerable evidence that Student Support Services are focused on responsiveness to students. The communication among staff and with students appears supportive. While this portion of the college's services has been housed in less desirable facilities, there is evidence of responsiveness and initiative, such as the MESA program and in Financial Aid services. Inclusion of a new facility for Student Support Services in the recently approved facilities bond measure shows effective planning by those who developed the Facilities Master Plan. The Team has no recommendations in this area.

<u>Standard II.C. – Library and Learning Resources</u>

In the area of the Library and Learning Resources, there was participation in the Self Study from all areas of the Library and Learning Resources support services, as well as from faculty, classified staff, and management. The Self Study Report clearly described conditions and presented concerns regarding Library and Learning Resources support services.

In the last six years the Library has expanded its computer lab into a Bibliographic Instruction Classroom with twenty-eight workstations and has opened the Information Commons with sixty computers available to the students five days a week to give students expanded access to online information and to the computer technology needed to complete their education. There is also a computer lab in the Library. In addition, the Library has partnered with regional library cooperatives and consortiums to enhance student access to information services, which has continued to produce positive results for student learning in the areas of access to electronic databases, increased availability of materials, and "24/7" online reference services.

There is some evidence that the College has acknowledged in its educational and budget planning the need to improve the library budget and materials holdings. The reality is, however, that much of the library collection remains out of date. The library budget has remained stagnant while book costs have skyrocketed. The electronic databases are made possible by funding through Telecommunications and Technology Infrastructure Program (TTTP) and the Solano, Napa, and Partners (SNAP) Consortium. If the TTIP funds were not allocated by the state, the Library would be totally dependent upon the SNAP funds and could further lose the ability to meet student needs. Library technology is limited due to resource constraints. (III.C.1.a, III. C.1.c)

The 1999 Accreditation Team observed that the library book collection was inadequate to meet the learning needs of the students. In the November 2002 Midterm Report the Team found that the College had been silent on specifically addressing the recommendation. The report further noted that the report on file "Evaluation of the Library and Recommendations for Development" is not incorporated into the college's educational or fiscal plans. The Team stated that to have library holdings and services sufficient in scope and currency to support its curriculum and be able to extend its services to the off campus centers in Vallejo and Vacaville, the College would have to

address its funding level and, at a minimum, be responsive to the recommendation of the October 1999 Accreditation Team. (III.D.2.a, III.D.3)

Conclusions for Library and Learning Resources, Standard II.C

The College responded in the 2005 Self Study by indicating that due to budget constraints and other problems, many of the recommendations have not been met. The College added that in spite of the budget, the results from student surveys demonstrate that the College is meeting the standard. Team members could not agree with this conclusion because students' satisfaction with the library, previously found inadequate by both accreditation teams and college staff, could indicate that students were not being required to use the library resources in the courses in which they enrolled. By the college's own admission, it has lacked funds for enhancing the library and learning resources.

Recommendation for Library, Standard II.C.1

In order to have library holdings and services sufficient in scope and currency to support its curriculum, and to be able to extend its services to the off campus centers in Vallejo and Vacaville, the College will have to address the funding level for the Library and, at a minimum, be responsive to the recommendation of the October 1999 Accreditation Team. (II.C.1)

General Recommendations for Standard II

General Recommendation 3

The College must develop institutional procedures for the identification of student learning outcomes at the course, program, degree, and institutional level. It must develop a timeline for the accomplishment of this process, and expand this process to include assessment measures for each level, analysis of these assessment efforts, and documentation of how results of the assessments are used to improve student learning. In addition, the College must involve all faculty, including those in student services and library resources, in this dialogue and process. (II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.f, II.A.2.h, II.A.1.i, II.A.6.a, II.A.6.a, II.B.4, ER 10)

General Recommendation 4

In order to have library holdings and services sufficient in scope and currency to support its curriculum, and to be able to extend its services to the off campus centers in Vallejo and Vacaville, the College will have to address the funding level for the Library and, at a minimum, be responsive to the recommendation of the October 1999 Accreditation Team. (II.C.1, III.A.2, III.D.2. a, III.D.3, ER 16)

STANDARD III

2005 Accreditation Team's Responses to the Previous Team's Recommendations

Standard III recommendations from previous site visits and progress reports focused on linking institutional planning to resource planning and improving long-term fiscal stability. Although efforts had been started and focus groups created to deal with the planning recommendation, full implementation, through the assessment and evaluation stage, had not been completed by October 25, 2005. District-wide efforts of planning and budget development were well underway and evidence of progress made to date was reviewed. These efforts were achieved during fiscal year 2005 and had not been through a full cycle. As a result, the 2005 Team was not able to determine whether the recommendations of effective assessment and evaluation that are incorporated into the process were effective.

General Observations

Since the Progress Report in 2003, Solano Community College (SCC) has experienced fiscal challenges due to budget reductions similar to many California Community Colleges. Further, the District settled labor negotiations in 2004 with an agreement to pass through COLA, enhance longevity with a $5,000 increase, and continue to absorb the full cost of health benefits without a cap.

Despite the fiscal constraints, it appears Solano has made an effort to implement some of the accreditation teams' recommendations while evolving to meet requirements of the new accreditation standards. Reserve levels have been in compliance with Board Policy of at least 5 percent. However, issues dealing with the long-term financial stability of the institution have not been resolved.

Negotiated settlements since the last site visit have placed increased unfunded long-term and short-term financial obligation on the unrestricted general fund of the College. In addition, high turnover in key areas related to fiscal and human services has been an issue, which has slowed the progress toward full implementation of previous recommendations.

Since the Mid-Term Progress Report with Team Visit, SCC passed the Measure G bond, which includes building repair and renovation and increases capacity on the Solano campus and new physical plants for the Vacaville and Vallejo Centers. While Measure G will move the District forward by improving and enhancing the learning environment, the District could be challenged with the implementation of the Facilities Master Plan funded by Measure G, because it will impose increased operational expense in the future. The increased operational expense will have to be offset by enrollment-generated apportionment. The future viability and quality of programs and services will be difficult to achieve if the institution's serious matter of fiscal stability is not resolved.

While the institution has begun to discuss strategies to deal with the issues of long-term unfunded liability, long-term debt obligation, costly equipment replacement not funded by Measure G and inflation due to fringe benefit costs, the College must develop and implement strategies for corrective action within a short timeline and establish clear accountability, essential for meeting the requirements of Standard III. Individually, these fiscal conditions are manageable. However, collectively these material financial obligations present fiscal strain on existing financial resources that compounds in future years. It is essential that strategies for corrective action with a time line for implementation be developed to meet the requirements of Standard III. Responses to recommendations regarding fiscal stability have been inconsistent with evidence reviewed both before and during the site visit. SCC has not fully complied with Standard III.D.1.c, III.D.2.a, as stated in previous ACCJC reports.

The narrative for Standard III in the Self Study would lead a reader to conclude corrective actions for previous findings and recommendations have been implemented. In most instances, the narrative states the District meets the standard and no planning agenda is needed. However, significant issues identified in previous progress reports and the last two audit reports are inconsistent with the Self Study assessment of "meets standard". In addition, documents reviewed both during and before the site visit do not provide evidence that SCC "meets standards" for long-term financial stability. Specific items will be described in detail in the Findings and Evidence section of this report.

Recent administrative leadership change in key areas such as Administrative and Business Services, Human Resources, Academic Affairs, Counseling and Facilities is a matter of concern and one reason why prior period recommendations had not been fully implemented. Budget reductions in spring 2003 and rapidly increasing cost for health benefits (76% in the last five years) have had a cumulative negative impact on the district's financial stability. In addition, staff reductions in key areas prevented the College from meeting compliance requirements for fiscal reporting and control as set forth in Standard III.

Until this site visit, support areas of the institution, specifically Human Resources, Facilities, Fiscal Services and Information Technology, had not been part of the planning and review cycle for SCC. During the visit, the Team was able to verify that SCC has included these areas in the program review cycle, but program reviews are not completed. SCC has developed a planning process to meet the recommendation of previous accreditation reports. It is essential that SCC implement its plans through the evaluation and assessment stage. Stability in staffing will be required to sustain this effort. The Self Study indicates that SCC "meets standards" in the area of assessment and evaluation. Until the plans related to financial planning and human resources are further developed, implemented, and evaluated for a complete cycle, it seems premature to rate the institution as "meets standard".

Findings and Evidence

Standard III.A – Human Resources

Policies and procedures are in place for the Human Resources department but are outdated in some areas, such as compliance with Proposition 209 language. This was identified by the institution in the Self Study. Additionally, existing practices in recruitment and hiring, for example, are cumbersome and may not always be followed. Safeguards are not in place to assure that hiring procedures are consistently applied. This is due primarily to the staff reduction through lay-off and turnover in key leadership positions. These delays in advertising vacant positions the College intends to fill, and monitoring hiring committees are a direct result of the staffing insufficiency, both at the entry-level, and in the senior management for Human Resources. The College has had three different leaders in Human Resources in the last three years. This combined with the inadequate number of support staff has resulted in an inefficient operation with a rippling negative impact on the entire College. Key positions remain unfilled for many months. The consequence for this has been increased expense to the District to correct problems caused by inadequate staff levels. (Example: Audit findings and insufficient staffing in fiscal services.)

The Self Study speaks to the recent downsizing the institution experienced during fiscal year 2003. Since that time, some positions have been restored but many areas on campus are still not staffed adequately. The following issues were noted during the accreditation evaluation visit:

a. Unusually high turnover rate among administrators.
b. Insufficient staffing level for classified support staff.
c. Inadequate professional technical support staff in key support areas such as Fiscal Services.
d. Inappropriate staffing using students in key learning environments such as the Library.
e. Hiring practices that constrain the process to a point where the College operations are negatively impacted.
f. Cumbersome policies and practices that were identified during key interviews with interim personnel and described as inefficient. For example, the Board of Trustees is involved in matters that could be delegated to administration. (E.g., title changes require Board approval; low dollar transactions require Board approval.) Ideally, the Board should set policy and allow administration to operate the College.
g. Unusually high numbers of interims fill key positions. The cost of recruiting for and training interim managers may place an added financial burden on the general fund.
h. The Organizational Chart does not lend itself to career ladder. Position descriptions are narrowly defined and do not allow the administration to optimize service to students.

As stated above and in the Self Study, recent fiscal cuts resulted in staff reductions across the College. Evidence of understaffing in classified personnel is identified in the Self Study and is evident in operational support areas. Understaffing has resulted in

inefficient and ineffective operations and in some instances non-compliance with regulations. These conditions increase the risk to the College for loss of funding or unanticipated litigation. (III.A.1, III.A.3)

Diversity is identified as one of the SCC Strategic Goals. Data in the Self Study show that non-white faculty constitute 22.5% of the faculty. This percentage is lower than the level of diversity in the student body and general population served by SCC. However, the college's commitment in its strategic goal of diversity and recent hiring show progress in the area of ethnic diversity of the faculty. (III.A.2)

Professional development is a component of Human Resources standards. Efforts have been made to fund professional development. However, financial constraints have limited the resources available for essential training and staff development. An assessment of resource allocation should include adequate funds for professional development. (III.A.5). Even without funding, the College may be missing an opportunity for professional development that its faculty, managers, or technical staff could provide to all employees.

Conclusion for Human Resources, Standard III.A

The impact of the 2002-2003 and 2003-2004 budget reductions forced a reduction in staff from which the College has not fully recovered. In addition there has been employee turnover due to retirement and resignation. A shortage in staff at the basic operational level in Human Resources and Physical Resources seems to be impeding the institution from accomplishing hiring, employee performance evaluation, and fiscal operations in a timely manner. The lack of stability in senior and mid management and the shortage of support staff will need to be addressed.

Recommendations for Human Resources, Standard III.A

The Human Resource Plan should be updated to compliment the planning effort developed by the PERT task force that developed the plan for integrating program review, improving planning, and connecting implementation, budgeting and improvements with the results of program evaluation, assessment, and subsequent planning. (III.A.1)

Human resource planning should incorporate components of the Standard III requirements of sufficient staffing levels with appropriate qualifications. Human resource planning should be integrated with institutional planning and should include systematic assessment of the effective use of human resources. Employee performance evaluations should be the basis for improvement. Staff development should be a priority to sustain quality of service to students. Finally, compliance with regulations should be addressed in the plan and provided the highest priority. (III.A.2)

Standard III.B – Physical Resources

The Team visited the various sites of the College. Overall, the general condition of buildings reflected a safe and clean environment. For a campus of this age, the structures appeared to be well maintained and the facility provided a positive learning environment for students. The Self Study and related documents identified Measure G as the infusion of capital to improve, upgrade and increase facilities for the Solano campus and the two major off-site locations. The Facilities Master Plan was developed with Measure G as the main focus. The interview with the retired Director of Facilities revealed that the Educational Plan did not drive the Facilities Master Plan.

In addition to the issue of integrating planning and resource allocation, the following concerns about conditions and the future of the physical resources were observed during the site visit:

a) The recent retirement (as of September 2005) of the Director of Facilities has created increased dependence on the Interim Vice President of Administrative and Business Services to run the day-to-day operations of the Facilities department.
b) The Interim Vice President of Administrative and Business Services is overseeing the Measure G Bond projects and financial oversight.
c) The Director of Facilities recruitment needs to begin immediately because it is a key administrative position.
d) Inflation to the cost of construction materials continues to increase. SCC is monitoring and controlling projects to the best of their ability. This is a challenge with the existing staffing.

During the site visit, the Accreditation Team received information about an RFP for a consultant who will assist with institutional master planning for the future. The "Vision 2020" effort will enhance the Facilities Master Plan by linking developing long-range educational plans with capital projects planning and prioritization.

Budget constraints have had an impact on the physical resources of the campus. The Facilities department was downsized during the 2003 reduction. While staff reductions were made, a level of institutional commitment to this area is demonstrated in the funding strategy of earmarking annual budget allocations to support physical resources. This is a good strategy and appears to be effective.

Team members observed that the classrooms they visited are often dated but maintained and clean. Technology in most classrooms is outdated; overall, classrooms have not been made "smart" yet. This condition will be improved as the Measure G projects move forward.

Administrative and Business Services has been included in the recently developed program review process. As part of this review, the physical resources should be included. The Facilities Master Plan will be a vital element for future campus development. Regular review, assessment and evaluation of this plan should continue.

Assessments should be used to improve facilities and equipment and assure consistency with the institutional priorities.

Conclusions for Physical Resources, Standard III B

While most of the physical plant is aging, it is well maintained. The grounds and landscaping, as well as campus layout, provide a comfortable and aesthetically pleasing environment for the students and employees. Many of the classrooms lack multi-media and Internet access, and many buildings will benefit from modernization. The DSPS and several other student support programs have strong need for new facilities, which will occur with the implementation of Measure G. The Team has no recommendations for this section of Standard III.

Standard III C – Technology Resources

Technology resources encompass both the classroom and laboratory equipment and both on and off-campus facilities. Computer technology used for instructional purposes and administrative support is outdated. Outdated systems are not relational. The Human Resources System is not linked to the Fiscal System, which is not linked to the Student Information System, etc. Nevertheless, SCC has made improvements in technology and has identified progress made on goals. This includes successful implementation of equipment to enhance instruction, upgrades to lab equipment, new computers, new courses, phone service upgrade and training.

The Accreditation Team verified that Solano Community College is currently in the process of selecting an integrated software system to replace the existing system, and the College has set a goal to select appropriate and innovative applications of current technologies. The College has recognized the need to achieve and maintain an up-to-date data and technology infrastructure in order to offer high quality instructional, student support, and administrative programs and services, including the most efficient and effective delivery systems to meet varying needs. The high cost of replacing the existing MIS system has prevented SCC from reaching its goal in the area of technology resources.

The College initiated planning for the migration to a new, integrated computer management system for all campus operations. Still in the selection process, implementation will improve the technology resources across the District (campus and centers) and provide for more efficient and effective operations. As of fall 2005, the District was considering using a combination of facilities bond funds and a loan to gradually implement a new hardware and software integrated management information system. The computer management system will be costly, both in financial and human resources required through the implementation process. Institutional leadership is addressing this challenge and is valiantly working to find resources for this high priority need. Staffing levels must at least match the planning model before implementation of the ERP. Leadership has identified this need and is working toward selecting the most effective solution.

The Technology Plan has been recently updated. Evaluation and assessment is part of the plan but there has not been a full cycle of implementation, evaluation, and assessment yet. The Board of Trustees recently approved a policy that established a reserve for technology replacement and upgrade. Similar to the policy in place for Facilities, this reserve has been established to assure that financial resources are dedicated to technology and equipment. This is a fiscally sound procedure and reinforces the institutional commitment to technology resources. Measure G includes support for technology resources.

Conclusions for Technology Resources, Standard III.C

Documentation was reviewed during the site visit and components of the Self Study were discussed during the on-site interviews. The technology currently used has been assessed accurately. Leadership is well aware of existing system limitations and the requirements of Standard III for technology. SCC has made a decision to replace existing technology to improve operations for the future. The full implementation of the new system will meet the requirements of Standard III.

The Technology Plan has been incorporated into the institutional planning process. Similar to other recently revised plans at SCC, the plan has not gone through a full cycle and as a result the assessment and evaluation for improvement has not been verified. The plan includes this step and will be validated once a full cycle has been achieved. The Team had no recommendation for this section of Standard III.

Standard III D – Financial Resources

Previous site visits recommended a focus on long-term financial stability for the institution. In addition, the linking of institutional planning to resource allocation was recommended. Although efforts have begun to implement these recommendations, full implementation had not been achieved at the time of the site visit. The adopted budget for the current year may result in deficit spending if growth targets are not achieved. In addition, the following general observations were noted during the visit:

a) Unfunded liability and the requirements of GASB 45 have been discussed at high levels of the institution. The Interim Vice President of Administrative and Business Services and the Director of Fiscal Services both state that reserve strategy options have been discussed, but a decision has not been made and funds have not been set aside in preparation of the GASB 45 requirements.
b) Collective bargaining agreements include District paid fringe benefits for all employees. Current inflation to health benefit costs (21% increase in one year) has placed an extraordinary burden on general fund operating funds. The cumulative increase in health and welfare benefit premiums has been 76% or $2 million since fiscal year 2000-2001.
c) Existing contract settlements encumber COLA and growth revenue and therein limit allocations to programs and services to students.

d) Audits from fiscal year 2003 through fiscal year 2005 cite numerous findings. Not all of the recommendations have been implemented. Not all audits and financial reports have been performed in accordance with Board policy.
e) Financial ledgers for fiscal year 2005 are still not closed as of October 26, 2005; the audit for fiscal year 2005 has not been completed.
f) The Adopted Budget is based on 1.5% growth; fall semester enrollments are flat; the College is trying to achieve 4.5% growth in order to earn its maximum apportionment funding for the year.
g) Fiscal reports have not been submitted timely to the State, due to staff shortages in the department. Requests for extensions for categorical program financial reports have been made as the District continues to work on closing the fiscal year 2005 books.
h) Organizational structure is not effective or efficient in the support area of Fiscal services.
i) A new computer management system is needed and will require a material investment by SCC. Funding for this effort will further strain fiscal stability for the institution.

The Self Study for Standard III.D.1 states the College meets the standard and the planning agenda states "none" with the exception of sub-standard III.D.1.c. However, the items noted above do not confirm the self-assessment of "meets standard." The long-term fiscal stability of SCC is at risk if the issues of health benefits for current employees, reserves for retiree health benefits and the financial investment in the technology upgrade are not addressed and budgeted adequately. Senior leadership is informed of these material and significant obligations.

An analysis of the previous available actuarial reports and presentations made by Fiscal Services staff document the long-term debt associated with health benefit cost increases and the upcoming requirements of GASB 45. The most recent actuarial study for retiree health benefits indicates a liability of $11.8 million. The GASB requirement for compliance will be effective in fiscal year 2009 for SCC. If this issue is not resolved as required by the new regulation, the financial rating for the District will be negatively impacted. This will result in a lower rating and will have a negative impact on the funds on deposit for Measure G. Refunding the next bond issuance may be significantly reduced if the SCC financial condition (i.e. Standard & Poors) is not "A" rated. These matters have been identified by SCC leadership and discussed with the Board of Trustees.

The College does not have a relational computer management system. Human Resources position control is not linked to the Fiscal Services database. Budgeting for positions, over eighty percent of the budget, is performed in separate systems, which increases the possibility of error. Plans have begun to upgrade the computer management system, which will result in an integrated system to improve this weakness. (III.D.1)

The Self Study states the District meets the standard for all subsections of this section. The evidence cited includes the budget reports to the Board, audit reports, fiscal reports, budgeting process, FABPAC records, Board policy, and administrative procedure. The weakness identified in this substandard is insufficient staffing in the Fiscal Services area. Due to the budget cuts in previous years, key Fiscal Services positions remained unfilled

resulting in an increase in audit findings that were not corrected in consecutive years. The insufficient staffing pattern increased the challenges already faced because of the budget cuts. The Self Study was candid in describing the problems associated with inadequate fiscal staffing and the resulting problems. Corrective action plans cited filling vacancies as an institutional priority. Site visit review of documentation and interviews validate the assessment presented in the Self Study. (III.D.2)

During the site visit, validation of the assessment of effectiveness of financial resources and the process for evaluation and improvement was tested. The college's response to this substandard asserts that it meets the standard and that an action plan is not warranted. The Team reviewed the plan that had been developed to address this substandard. The plan is in the early stage of implementation and has not gone through a full cycle to test or evaluate the effectiveness of the plan. The FABPAC has made progress in working together and creating a committee that is viewed as a place for bringing issues to consider in a collaborative manner. The FABPAC should continue to make progress in the planning efforts for resource allocation.

Conclusions for Financial Resources, Standard III.D

The Self Study states that most areas "meet standards" and in most instances a planning agenda does not exist. The documents reviewed (audit reports, staff presentation materials, actuarial reports and meeting minutes) as well as on-site interviews do not support the Self Study assessment. The District is currently at risk for long-term fiscal stability. The short-term financial encumbrances associated with negotiated settlements are placing a strain on operations, program quality, and services to students. Specifically, health benefit inflation costs have strained the general fund operational budget. If not corrected, the future financial stability of SCC is at risk.

Fiscal operations have been stressed and as a result the evaluation and assessment of the financial system for improvement has not been done. Simply put, Fiscal Services has struggled to perform basic operations such as accounts payable and purchasing. The standard requirement of assessment, evaluation and improvement has not been addressed due to the limited staff size, caliber of existing staff and volume of work associated with regular operations as well as the Measure G activity.

The Seven Year Business Plan provides enrollment data projections into the future and links growth revenue required to operate future off-site centers. Center resources in the future will rely on the growth apportionment for operations. This plan must be evaluated and assessed on an annual basis and updated to reflect actual enrollment and available revenue. The Business Plan should be incorporated into institutional planning and the Facilities Master Plan.

Recommendations for Financial Resources, Standard III.D

The College should develop a detailed plan with a timeline and fixed responsibility to address the long-term financial obligations including debt retirement, capital lease options and establishing reserves for retiree benefits. Short-term financial obligations associated with

negotiated settlements should be evaluated to determine long-range impact on financial stability. (III.D.1.a,b,c,d; III.D.2.a,b,c,g; III.D.3, ER 17)

General Recommendations for Standard III

General Recommendation 6: The College should continue to focus on prior accreditation evaluation reports and implement the recommendations. Stability in personnel, particularly in leadership positions, fiscal services and human resources will help the College to meet the requirements of Standard III and assure institutional integrity. Compliance issues should be given the highest priority. (III.A.1, III.A.2, III.A.6.)

General Recommendation 7: The College should develop a detailed plan with a timeline and fixed responsibility to address the long-term financial obligations including debt retirement, capital lease options, and establishment of a reserve/fund for retiree benefits. Financial obligations associated with negotiated settlements should be evaluated and managed to determine long-range impact on institutional financial stability. (III.D.1.a,b,c,d; III.D.2.a,b,c,g; III.D.3, ER 17)

STANDARD IV

Response to Previous Recommendations

The 1999 Accreditation Team Recommendation 10.1 was, "The College should further develop its organizational and communication processes to clarify outline and delineate functions, lines of authority and shared responsibility in a consistently inclusive manner. All staff members need to take a broader role assisting in and assuming responsibility for the decision reaching process, which will lead to more informed and widely supported decisions."

The College has made strides in meeting this recommendation. Efforts are clearly evident in the manner in which FABPAC functions. All constituencies have a role to play and clearly participate effectively. More effort needs to continue for the decisions to be disseminated more effectively, as it was clear to the 2005 Accreditation Team that many on campus do not know or understand the budgeting and planning process or how FABPAC operates. All constituents should assume responsibility for understanding and participating in this effort.

General Observations

The turnover in the senior level management over the past three years has had a profound effect on the institution. There currently remain two interim senior level positions although this is a reduction from a year ago. The turnover has allowed for some inconsistencies in the way in which policies and procedures are implemented, creating some confusion among faculty, staff, and even administrators.

Findings and Evidence

Standard IV.A – Decision-Making Roles and Processes

Board Policy 2005 clearly defines participatory governance as "collaborative participation." It also clearly defines the roles and opportunities to participate for each of the constituent groups on campus. FABPAC serves as the budgetary advisory committee, and models the idea of collaborative participation with each constituent group represented. Based on interviews with members of FABPAC, the collaborative process functions effectively although occasionally member commitment to constituent interest may interfere with the committee's ability to focus on the needs of the students and the institution as a whole. Minutes of FABPAC demonstrate clear opportunities for input into budgeting. Since some on campus are uncertain of FABPAC's role, however, members of FABPAC must assume responsibility for more clearly disseminating the results of their efforts.

Varying groups express a less than satisfactory experience with the processes of participatory governance. As indicated in the survey of faculty and staff reported in the

Self Study, dissatisfaction with participation in the planning and particularly financial planning processes (definition and implementation) is substantial. It is unclear if this is the result of what some perceive as a long-standing 'culture of conflict' on this campus, flawed communication, or if groups really do not have the opportunity for input. There is, for example, some indication that some committees function more in a reporting mode than in their stated function as governance committees. The meeting minutes of the Academic Senate and the Curriculum Committee, however, demonstrate clear opportunities for input into curricular issues. (IV.A.1, IV.A.2, IV.A.2.a, IV.A.2.b)

The Governing Board, consisting of seven strong, independent members, clearly demonstrates great pride in Solano Community College. Board members are knowledgeable, active members greatly involved in their communities and their college. It is clear they want what is best for the institution and have its best interests at heart. Board minutes, however, indicate that some members tend to carry their own messages instead of those of the full Board. The Board has had two consultations with the CCLC to improve their understanding of their role as a Board. While the Board members perceive themselves as working as a team, it is not clear how well they function as a team, instead of seven individuals or sub groups of three or four within the seven-member Board. Working more as individuals rather than as a team makes it harder for the Board to delegate and empower the President and leadership team to carry out their functions effectively and confidently.

Conclusions for Decision-Making Roles and Processes, Standard IV.A

The various employee units, constituent groups, and all levels of employees need to assume greater responsibility for working together to assure establishment and dissemination of their plans and budgeting process. (IV.A.1)

The administrative team has had to deal with many changes in the past three years, from changes in the presidency, to lay-offs amid difficult fiscal constraints statewide. The new president arrived on campus in January 2003 amid a state fiscal crisis. Within two months she had to implement staff reductions to address the mid-year cuts mandated by the State. It would be difficult for any new president to recover from such a difficult situation. The campus community needs to understand this and work together to address the fiscal and planning issues. (IV.A.3)

The administrative team has begun to address the serious budget concerns; however, all members of the College community have to assume their responsibility in this effort. The President or the Executive Council cannot accomplish this by themselves. (IV.A.3)

The President and Board demonstrate integrity to external agencies. They understand they must comply with Commission policies, standards and recommendations. However, the institution itself has not expeditiously responded to recommendations by the Commission as evidenced by the repeated comments on planning since 1993. They have attempted to do so; however, they must respond per the recommendations this 2005 Accreditation Team made in Standard I. The Board assumes ultimate responsibility for

educational quality, legal matters, and financial integrity. Within this responsibility, the Board needs in particular to address fiscal concerns in relation to unfunded liabilities. (IV.A.4, IV.B.1.c) See the General Recommendation for Standard IV.

Standard IV.B. – Board and Administrative Organization

The Governing Board selects and evaluates the president. A yearly evaluation is held and conducted during closed session. The Board has the obligation to "delegate full responsibility and authority to the president to implement and administer Board policies without Board interference." However, a review of Board minutes and campus interviews found some inconsistency in the Board's delegation of authority to the College President without interference in operations. (IV.B.1.j)

The Governing Board's policies are clearly written and published online and in print. The Board also has a plan for development of new members, which the newest Board member reports was very helpful. However, the Governing Board does not act consistently in following their policies. Discussions with staff as well as Board meeting minutes reflect instances of board members becoming involved with operational activities rather than providing policy direction as a Board. As discussed at the Board training session with CCLC on February 12, 2005, which reviewed the Board working as a team, and a previous session in 2004, the Board can only act as a whole. At the 2005 training session board members were reminded that, "…staff members attribute much authority to trustees and therefore trustees need to be aware and use caution in their behavior and ideas to avoid inadvertent direction to staff." (IV.B.1.d, IV.B.1.e, IV.B.1.f)

The Board's self-evaluation process is defined and completed annually. The Governing Board also has a code of ethics within Board Policy 1017. However, the Board should set goals in order to measure Board effectiveness and develop procedures that address violation of its code of ethics. (IV.B.1.g, IV.B.1.h)

The Governing Board has been involved in the accreditation process; the Board held a study session to learn about the new standards and approved the Self Study. (IV.B.1.i)

The Board of Trustees should address policy issues as a whole. The Team learned through interviews with a number and variety of employees that occasionally board members single out individual staff members who are trying to carry out their responsibilities on issues an individual board member desires. In doing this, the Board may be implying to the college staff that its members are not united as a board of the whole. The Board is encouraged to concentrate on the major issues and to recall their February 2005 training regarding the weight of their criticisms when made to an individual staff member or when in pursuit of their individual agendas.

Conclusions for Board and Administrative Organization, Standard IV.B

The Evaluation Team found a college dedicated to providing excellent education but significantly challenged due to staffing vacancies, desires to expand offerings throughout

the District, perhaps beyond current resources, and a workforce that was in transition due to many retirements and fewer replacements. An institution challenged in these areas can be stabilized and strengthened by a supportive, united Governing Board and an empowered leadership team and institutional workforce. (IV.A.1, IV.A.3, IV.B.1.a, IV.B.1.e)

The standards direct the President to delegate and empower staff effectively. The President is a knowledgeable individual and should develop the leadership team to more effectively discharge their responsibilities. (IV.B.2, IV.B.2.a, IV.B.2.b)

The President has made efforts to guide the improvement of the teaching-learning environment by encouraging a collegial process. However, there are feelings of mistrust on campus between and among different constituencies. The President is encouraged to address these feelings and continue her efforts of developing and fostering collegiality with campus constituencies. (IV.A.3, IV.B.2.b)

The President and the Board of Trustees, as well as the administrative and constituent leadership of the institution, need to work collaboratively and make difficult decisions that result in prudent fiscal management that will enable the College to meet its strategic directions and goals. (IV.B.2.d)

The Superintendent/President works and communicates effectively with the external communities served by the institution. She has been instrumental in working with the Board and college community to communicate progress in the implementation of Measure G. (IV.B.2.e)

General Recommendation, Standard IV

General Recommendation 8: In order to empower the institutional leaders, the Governing Board, in compliance with Standard IV, is encouraged to delegate full responsibility and authority to the President to implement and administer board policies without board interference. The institutional leaders should likewise foster empowerment, innovation, institutional excellence through dialogue that builds trust and increases institutional focus on student learning and assessment of learning outcomes, institutional effectiveness, and integrity. (IV.A.1, IV.A.3, IV.B.1.b, IV.B.1.j, IV.B.2.a)

All eight general recommendations made by the 2005 Accreditation Evaluation Team are listed in the beginning Summary of this report.