

EXTERNAL EVALUATION REPORT

Copper Mountain College

6162 Rotary Way
Joshua Tree, CA 92252

This report represents the findings of the peer review team that visited
from March 4 to March 7, 2019.

Dr. Michael A. White
Team Chair

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Copper Mountain Comprehensive Evaluation Visit

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ACCJC STAFF LIAISON

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Summary of Evaluation Report

INSTITUTION: Copper Mountain College

DATES OF VISIT: March 4 to March 7, 2019

TEAM CHAIR: Dr. Michael A. White

A nine-member accreditation team visited Copper Mountain College (CMC) from March 4 to March 7, 2019 for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and USDE regulations. The team evaluated how well the College is achieving its stated purposes, 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 team chair attended a workshop on December 5, 2018. In lieu of a face-to-face pre-visit, the team chair and team assistant met with College administrative leadership via Zoom video-conference on January 11, 2019. The chair and team assistant conducted an additional Zoom meeting with CMC's President/Superintendent and the Accreditation Liaison Officer on February 22 to finalize arrangements for the team's arrival.

The external review team received the College's self-evaluation documents (ISER) and supporting evidence in early January 2019, for preliminary review. The full team participated in the ACCJC's team training on February 6, 2019.

Team members observed that the ISER presented the College's processes for addressing all Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the ISER was developed through a broad and participatory process which included faculty, staff, students, and management. The team noted that in addition to representing the College's current practices, the ISER identified action plans for institutional improvement in several areas. The team also discussed the College's Quality Focus Essay (QFE).

Following the team training, members were assigned to specific Standards and began composing preliminary responses. This process allowed the team to identify areas for further inquiry, and to provide the College with a list of requests for interviews and additional evidence for review during the site visit.

The team convened in Twentynine Palms the evening of March 3 and discussed the schedule and logistics of the campus visit and the preparation of the team report. Copper Mountain College hosted an introduction reception on the morning of March 4, 2019.

During the visit, team members met with a representative cross-section of students, faculty, classified staff, administrators and Trustees in formal meetings, group interviews, and individual

interviews. Open forums, held the evening of March 4 and the morning of March 5, provided College stakeholders and community members with opportunities to meet with members of the evaluation team, ask questions and contribute comments to inform the evaluation process. The team issued one compliance and three improvement recommendations.

The team found the College was well prepared for the team visit and that all members of the campus community were very accommodating in meeting requests for additional evidence and follow-up interviews. The team felt welcomed by the entire campus community and was thoroughly supported in all facets of their work. Team members expressed their admiration for the beauty and tranquility of the campus, enhanced by the demonstration gardens and public art. In addition to the commendations noted within this report, the team recognized several noteworthy areas of distinction:

- The Team recognizes the College's progress in creating a robust and integrated planning process, characterized by campus wide, mission-centric dialog, data supported assessment, significant leadership from senior administrators, and effective oversight by the Institutional Effectiveness Committee. (I.A.2)
- The Team recognizes the College's successful support towards student equity, reflected in significant closure of achievement gaps among underrepresented groups and encourages continued improvement in course success rates for both African Americans and Hispanics/Latinos in the sciences and all other disciplines. (I.B.1)

Major Findings and Recommendations of the 2019 External Evaluation Team

Team Commendations

Commendation 1:

The Team commends the College's implementation of its mission to understand and meet the needs of its unique community, characterized by its inclusive approach to its local community and constituents, including engaging with, and responding to, community concerns and recommendations; being proactive in building relationships with, and supporting, K-12 educational partners; and crafting and carrying out a mission that best serves the College's desert communities and student population. (I.A.3)

Commendation 2:

The Team commends the College's leadership in creating and encouraging innovation resulting in institutional excellence, and for empowering all employees to take initiative to provide exemplary service to students and the broader community. (IV.A.1)

Team Recommendations

Recommendations to Meet Standards:

Recommendation 1:

In order to meet the standard, the team recommends that the College follow its course, program, and institutional level learning outcomes cycle. (I.B.2, II.A.3, II.A.11)

Recommendations to Improve Quality:

Recommendation 2:

In order to improve institutional effectiveness, the team recommends that all programs complete the program review per the College's established cycle. (I.B.5, II.A.2)

Recommendation 3:

In order to improve institutional effectiveness, the team recommends that all faculty consistently implement the College's expectations for regular and substantive interaction as defined in the College's policy. (II. A.7, Commission Policy on Distance Education)

Recommendation 4:

In order to improve, the team recommends that the College formalize a process or plan in order to ensure adequate resources are available to meet long-range capital plans. (III.B.4)

Introduction

Copper Mountain College (CMC), located six miles east of Joshua Tree, is renowned as the College built by the people, its first phase having been paid for almost entirely with local private money and subsequent phases with substantial private help. Now governed by its own locally elected, five-member Board of Trustees, CMC's road to independence was accelerated by legislative action in recognition of the College's uniquely strong local support.

In 1966, the residents of the Morongo Unified School District elected to join the Coachella Valley Community District (now the Desert Community College District). Classes were first offered in the High Desert in the fall of 1967 at the Twentynine Palms High School.

In 1981, a group of Morongo Basin residents decided to build a campus with funds raised by community volunteers. Upon completion of its first phase in 1984, the new campus quickly attracted a host of first-generation college students, including a large population of Marines and their dependents stationed at the Marine Corps Air Ground Combat Center in Twentynine Palms. As the College grew, community leaders began to suggest pursuing separation from College of the Desert.

Legislation to create the Copper Mountain Community College District was introduced by State Senator James Brulte (R-Rancho Cucamonga) and endorsed by Morongo Basin residents by a 90 percent vote in November 1999. In June 2001, CMC was granted full accreditation status by the Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges.

CMC offers Associate degrees and certificate programs in 26 fields of study. Classes are offered at the Joshua Tree Campus and in various other locations convenient to community residents. CMC's Developmental Education program provides all adults of the Morongo Basin the opportunity to enroll in classes directed at high school completion and/or GED. Copper Mountain Colleges' academic calendar includes a fall, spring, and summer session beginning in August, January, and June respectively.

Copper Mountain College serves a diverse population. Lower average educational attainment and the limited local economy of the Morongo Basin result in higher unemployment and lower household incomes when compared to San Bernardino County and State of California averages. Additionally, students graduating from the local school district qualify for admission to the California State University and University of California systems at rates below county and state averages. Further, 12th grade enrollment has decreased over the last 5 years. The broader regional economy expects job growth in the Health, Business, Education, and Computer industries. Copper Mountain College's programs align well with the local and regional economy to provide opportunities for its student population.

Eligibility Requirements

1. Authority

The College is one of 115 California Community Colleges, a public entity authorized by California's Education Code and operating in accord with the California Code of Regulations, Title 5. The College is accredited by the Accrediting Commission for Community and Junior Colleges (ACCJC) and maintains continuous accredited status without sanction. Governance of the College resides with the Copper Mountain Community College District Board of Trustees.

Conclusion: The College meets ER 1.

2. Operational Status

The Accrediting Commission of Community and Junior Colleges awarded Copper Mountain College independent college status in 2001 and has been operated continuously since that time. Students are actively pursuing certificate and associate degree programs offered by the College.

Conclusion: The College meets ER 2.

3. Degrees

The majority of courses offered at Copper Mountain College are degree-applicable; approximately 93% with twenty-six educational programs that lead to an associate degree. These associate degrees include transfer, non-transfer, and associate degrees for transfer (ADTs). All requirements for degrees are listed in the College Catalog in which a minimum of sixty units is required, including a General Education component. According the 2018 Annual Student Survey, the majority of students (65.2%) are pursuing a transfer degree as their primary educational goal.

Conclusion: The College meets ER 3.

4. Chief Executive Officer

The District's current chief executive officer is qualified for the position and has served as permanent Superintendent/President since May 2015. His full-time responsibility is to the District; he possesses the requisite skills and authority to provide leadership for the District. The Superintendent/President does not serve as a member of the board nor as the board president. Since the last full accreditation visit, there was a change in the Superintendent/President position and that change was appropriately reported to the ACCJC.

Conclusion: The College meets ER 4.

5. Financial Accountability

The team confirmed that Copper Mountain College engages a qualified audit firm to conduct audits of all financial records. All audits are certified, and all explanations or findings are documented appropriately. The College's audit is presented annually to the board and a copy is submitted to the Chancellor's Office. Audit reports are publicly available.

Conclusion: The College meets ER 5.

Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies

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

Public Notification of an Evaluation Team Visit and Third Party Comment

Evaluation Items:

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive evaluation visit. |
| <input checked="" type="checkbox"/> | The institution cooperates with the evaluation team in any necessary follow-up related to the third-party comment. |
| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the Commission <i>Policy on Rights and Responsibilities of the Commission and Member Institutions</i> as to third party comment. |

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements. |

Narrative

The College is exceptionally connected to the local community with multiple cooperative projects with the municipal school district, the local Marine Corps base, and the community at large. Community members have a strong sense that Copper Mountain College is “their” college, and the College consistently solicits the input from the community, not just prior to the evaluation visit but as a matter of habit. There have been no third party comments requiring follow-up, but the College has made it clear their intention to cooperate should those third party comments be forthcoming. Acknowledgement of this policy is found on the College’s accreditation web page.

Standards and Performance with Respect to Student Achievement

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements. |

Narrative:

The College has defined institution-set standards, including both minimal levels of performance as well as aspirational targets, including standards and targets for course completion and other appropriate achievement metrics. The College uses job placement rates to inform achievement in CTE programs for program completers. Additionally, the College uses licensure pass rates for its nursing and EMT completers, all of which are above the institution-set standards. The College uses the Institutional Effectiveness Committee to review the propriety of institution-set standards

and to recommend appropriate adjustments to those standards upon review of performance data. These findings are readily available in the Institutional Effectiveness Report and are used to guide mission-centric planning. If the data were to reflect the College performing below the standard, as reported in the annual Institutional Effectiveness Report, processes are in place to support intervention strategies with planning and resources.

Credits, Program Length, and Tuition

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

Copper Mountain College awards academic credits based on generally accepted practices for degree-granting institutions of higher education. The Course Outlines of Record, degrees, and certificates are reviewed by the Curriculum Committee, under the direction of the Academic Senate, to ensure that the credit hours and units comply with the regulations set forth in the California Community Colleges Chancellor's Office Program and Course Approval Handbook. The College has in place written policies and procedures for determining a credit hour that meet accepted academic expectations. Tuition is clear and consistent across all degree programs.

Transfer Policies

Evaluation Items:

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Transfer policies are appropriately disclosed to students and to the public. (Standard II.A.10) |
| <input checked="" type="checkbox"/> | Policies contain information about the criteria the institution uses to accept credits for transfer. (Standard II.A.10) |
| <input checked="" type="checkbox"/> | The institution complies with the Commission <i>Policy on Transfer of Credit</i> . |

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

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

Transfer policies for the College are appropriately disclosed and available to students on the College website and other locations. The information contained in the policies explains transfer requirements to 4-year public and private colleges and universities. The transfer policies comply with the Commission Policy on Transfer of Credit.

Distance Education and Correspondence Education

Evaluation Items:

| | |
|--------------------------------------|--|
| For Distance Education: | |
| <input checked="" type="checkbox"/> | The institution demonstrates regular and substantive interaction between students and the instructor. |
| <input checked="" type="checkbox"/> | The institution demonstrates comparable learning support services and student support services for distance education students. (Standards II.B.1, II.C.1) |
| <input checked="" type="checkbox"/> | The institution verifies that the student who registers in a distance education program is the same person who participates every time, completes the course or program, and receives the academic credit. |
| For Correspondence Education: | |
| <input type="checkbox"/> | The institution demonstrates comparable learning support services and student support services for correspondence education students. (Standards II.B.1, II.C.1) |
| <input type="checkbox"/> | The institution verifies that the student who registers in a correspondence education program is the same person who participates every time, completes the course or program, and receives the academic credit. |
| Overall: | |
| <input checked="" type="checkbox"/> | The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings. (Standard III.C.1) |
| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the Commission <i>Policy on Distance Education and Correspondence Education</i> . |

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

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the Institution does not meet the Commission's requirements. |
| <input type="checkbox"/> | The College does not offer Distance Education or Correspondence Education. |

Narrative:

Distance education courses follow the same course outline of record as face-to-face courses and are required to address regular and substantive contact. The College has policies and procedures for classifying course as distance education courses; however, these policies and procedures are not consistently applied. The College utilizes Canvas as its online learning platform. To ensure the identity of students in online courses, the College requires a student identification and password. Technology infrastructure is deemed sufficient to support distance education students.

Student Complaints

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

The College defined policies and procedures for handling to student complaints. The policies and procedures are assessable in the College catalog. Due to organizational restructuring, the policies and procedures are being revised. All student complaint/discipline files are stored in a locked file cabinet and are assessable for review. The names of various accrediting associations, agencies, and governmental agencies are listed in the College website. Current practices are in compliance with relevant Accreditation Standards.

Institutional Disclosure and Advertising and Recruitment Materials

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

The College catalog, both print and online versions, are current, relevant, and comprehensive in its information for students and the public. The College website is similarly maintained and readily available for students and the public with information about programs, policies, and locations. Additionally, the College has a dedicated web page where it displays current and accurate information about its accredited status.

Title IV Compliance

Evaluation Items:

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the USDE. (Standard III.D.15) |
| <input checked="" type="checkbox"/> | If applicable, the institution has addressed any issues raised by the USDE as to financial responsibility requirements, program record keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements. (Standard III.D.15) |
| <input checked="" type="checkbox"/> | If applicable, the institution's student loan default rates are within the acceptable range defined by the USDE. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. (Standard III.D.15) |
| <input checked="" type="checkbox"/> | If applicable, contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required. (Standard III.D.16) |
| <input checked="" type="checkbox"/> | The institution demonstrates compliance with the Commission <i>Policy on Contractual Relationships with Non-Regionally Accredited Organizations</i> and the <i>Policy on Institutional Compliance with Title IV</i> . |

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

Conclusion Check-Off:

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
| <input type="checkbox"/> | The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements. |

Narrative:

The College demonstrates compliance with Federal Title IV regulations, and USDE requirements.

Standard I

Mission, Academic Quality and Institutional Effectiveness

I.A. Mission

General Observations:

The College is uniquely positioned to respond to the needs of its diverse community. The mission statement describes this purpose and the intended student population. Data-informed decision-making has been a hallmark of the College, and data that is relevant to student needs is collected, analyzed, and incorporated into mission-centric planning processes and resource allocations. The mission is reviewed annually and published widely.

Findings and Evidence:

Together the mission and vision statements call out the purpose of the College to meet the needs of students who are diverse, low income, vocationally oriented, and, for many, enlisted in the armed forces. The College mission and vision addresses that portion of the student body who are degree seeking or transfer bound. Degree and certificate offerings reflect both career education and transfer options. Multiple programs exist that support the College's unique setting and mission: food and care programs for needy students; a presence at the Marine Corps base to support students in the military; assistance for disabled students (of which there is a preponderance within the District); tuition and book fee waivers. (I.A.1)

The team confirmed a College-wide culture of inquiry and an organizational structure that facilitates relevant data collection and decision-making use. The Institutional Effectiveness Committee (IEC)—a recommending body to the College Council—provides oversight, direction, and analysis for college planning, following the College's Integrated Planning Model (IPM). The IEC also ensures that the data needs of the College constituents are met and are relevant. Through the annual Institutional Effectiveness Report (IER), assessments of how effectively the College addresses the educational needs of students are published. These assessments focus on the College's effectiveness in accomplishing its mission, providing disaggregated student success metrics and data that specifically supports the College's seven Strategic Initiatives, which reside within the Educational Master Plan (EMP) and support the college mission. The Integrated Planning Model provides for annual review, planning, and goal setting, all supported by appropriate and comprehensive data. (I.A.2)

The Educational Master Plan serves as the umbrella for long term planning and is written to support the College mission. Additionally, each of the seven strategic initiatives are integrated into program review. These strategic initiatives drive the College's aspirational targets, which then are incorporated within the decision-making, planning, and resource allocation—all of which trace their origin back to the mission. It is the role of the IEC, then, to monitor how well the mission guides the process. The College follows rubrics found in the Institutional Roles, Responsibilities, and Procedures (IRRP) handbook to ensure that program

reviews align with the strategic initiatives and, therefore, with the mission. The IRRP also includes rubrics to align resource allocation with fulfillment of the mission. (I.A.3)

The team reviewed examples of the College aligning its programs and practices with its mission. It is notable that the College has developed and implemented community-based programs unique and appropriate to its residents and its students. In a district characterized by low socio-economic status and disparate community groups, the College has become a unifying center in the community and has worked to meet the needs of the community, including staff fundraising to finance scholarships and meals for needy students; removing barriers to promote integration of community members into the library; establishing partnerships with the K-12 schools and increasing faculty awareness of the workings of the unified school district. (I.A.3)

The mission is clearly articulated and widely published. Not only is the mission on the College website and in the catalog, but it resides in every classroom, clearly visible to students and guests. The College annually reviews the mission statement in accord with BP 1200, soliciting input from the entire college community. (I.A.4)

Conclusions:

The College meets the Standard.

Commendation 1:

The Team commends the College's implementation of its mission to understand and meet the needs of its unique community, characterized by its inclusive approach to its local community and constituents, including engaging with, and responding to, community concerns and recommendations; being proactive in building relationships with, and supporting, K-12 educational partners; and crafting and carrying out a mission that best serves the College's desert communities and student population. (I.A.3)

I.B. Assuring Academic Quality and Institutional Effectiveness

General Observations:

The College is actively and continuously engaged in dialog, assessment, and planning. It uses relevant data wisely in support of student learning and achievement. The planning is integrated with program review and with resource allocation, according to a well-devised planning model, assessment schedule, and resource allocation prioritization process, all of which are widely communicated to constituents.

Findings and Evidence:

Relevant and ongoing dialog characterize the College's approach to institutional effectiveness and academic quality. Beyond the expected discussions in participatory governance settings, the

creation of the Institutional Effectiveness Committee to specifically address planning and assessment is noteworthy, as is the creation of the Institutional Learning Outcome survey to incorporate student voices in the dialog. Dialog occurs in multiple appropriate venues and consistently includes response to data, impact upon student learning and achievement, academic quality, and equity—all with an eye toward continuous improvement. For example, and as a result of such discussion and action, the College can point to closing some specific achievement gaps within some groups but can also acknowledge the lack of closure among Hispanic students; plans are already laid to address that gap. Dialog that focuses on continuous improvement also provoked a change in how program review is conducted and an addition of disaggregated data elements for the program review process. Of additional note is the widespread engagement of, and dialog with, the local community. This truly is a “community” college—a source of great pride and participation among local residents. Community input is regularly solicited and has influenced community-friendly decisions on the part of the College, the most noteworthy being the institution of an athletics program at the College, a popularly supported decision among local residents. (I.B.1)

Learning outcomes are defined at the course level (SLOs), the program level (PLOs), the administrative level (AUOs), and the institutional level (ILOs); however, assessment of learning outcomes has been inconsistent. The assessment of at least one SLO every year is expected for each department, but there is no process in place to ensure that such a cycle eventually captures all SLOs. ILOs are assessed annually through a graduate survey. The assessment of PLOs, on the other hand, is less structured. The presumption is that PLOs are assessed indirectly by the SLO assessment of courses that comprise a program. Given the uncertainty of comprehensive SLO assessment and the additional logistical problems created by an unsuccessful software implementation, learning outcome assessment is neither consistent nor robust, particularly for SLOs and PLOs. Non-instructional AUOs are more consistent and complete. The College has specifically recognized and addressed this shortcoming, establishing improvement plans and timelines as a project within the Quality Focused Essay (QFE). The QFE outlines goals of implementing a new system to improve tracking and assessing of learning outcomes; providing additional support to coordinators guiding the learning outcome assessment; improving mapping of SLOs, PLOs, and ILOs; and reporting assessment results as a part of the annual Institutional Effectiveness Report. (I.B.2)

The College has institution-set standards and annually reviews their propriety. In addition to establishing minimum standards for performance, the College has created aspirational targets. Both the standards and the targets reflect reasonable levels of attainment based on current indicators and metrics—the California Community College Student Success Scorecard, for instance. The annual review of standards is reported in the IER and are publicly available. Included in this review is a re-benchmarking for standards and targets that have been met or the implementation of a plan to address those standards or targets where anticipated levels of achievement have not yet been attained. Over the past four years, all College institution-set standards have increased, and additional standards are being developed to address the goals of recent system wide mandates. (I.B.3)

The team confirmed that the College’s integrated planning model calls for regular collection and analysis of data to support student learning and achievement. Faculty have access to data for program review through the College’s data warehouse and regularly access that resource and use

it in program review. Annual surveys provide qualitative data for instructional and non-instructional programs alike, and a rubric for analysis of qualitative data is in the implementation stage. In response to data findings, program reviews then produce an operational plan for improvement. The IEC consistently reviews college wide assessments and reports this data in the IER, publicly communicating what the data reflects about student learning and achievement. (I.B.4)

The team has confirmed that College has established a process for the regular review of all instructional programs, though not all programs participate. College mission and its attendant strategic initiatives drive program review. The annual program review process draws on assessments of courses, programs, SLOs, and PLOs. To ensure alignment with the strategic initiatives, a program evaluation rubric is used to assess the quality of each program review and its level of completion, its integration with the EMP, and its response to assessment data.

The team confirmed that the Institutional Effectiveness Committee is revising the College program review processes in accord with campus-wide dialog and evaluation. These revisions are designed to improve the quality of the program reviews and to increase completions of program reviews, removing an unwieldy software program that discouraged completing program review. Data is disaggregated for programs with a large enough number to make the data meaningful, particularly addressing equity for target groups and mode of delivery. Disaggregated data is also provided for some student services departments—EOPS, DSPS, CalWorks. Program reviews for non-instructional programs are ongoing, substantial, mission-driven, and rubric-evaluated. However, the team found evidence that the College’s completion of instructional program reviews is inconsistent. (I.B.5)

The team found that the College effectively disaggregates data to identify achievement gaps among subpopulations, and the College has been successful in implementing intervention strategies to address some of those gaps. Six of seven ethnic groups that fell below targeted success rates in 2014-15 have now surpassed the target, with the remaining subgroup presently close to attaining the goal. When gaps were identified, the College had in place a resource allocation process that considered program review, alignment with strategic initiatives, appropriate objectives, and extent to which the goals are measurable with data. Responsibility for verifying gaps—particularly those gaps indicating disproportionate impact—and reallocating resources belongs to the SSSP/Equity Committee. This committee also reviews the annually collected, disaggregated data to update and adjust interventions, in order to continuously address additional or continuing achievement gaps among subpopulations. (I.B.6)

The College does evaluate practices across all areas —both instructional and non-instructional programs—using available data from the data warehouse, the IER, and surveys completed by both students and staff. This is all in line with the Integrated Planning Model. Recent evaluations have resulted in the College recommending improvements to program review and to better linking budget development and resource requests. It was also noted in past staff surveys that nearly half (46.6%) of employees disagree with the statement, “The current organizational structure functions well.” This finding has led to a plan to formalize procedures in what is currently described as “an informality of policies and procedures across all areas of the institution.” Policies are regularly evaluated, as elaborated in standard IV.A.2, where it is learned

that 130 board policies have been reviewed or added since 2014 to align with the recommendations of the Community College League of California. (I.B.7)

The team found evidence that the Institutional Effectiveness Report is the means by which the results of assessment and evaluation activities are clearly communicated among College constituents. This report, addressing student success indicators as outlined in the EMP, is presented to faculty and staff at All Staff Day, to the Board of Trustees, and broadly shared with the local community. Beyond hearing the report, faculty and staff are also asked to discuss both the College's achievements and its areas needing improvement. This feedback is then incorporated into the next round of planning and goal setting. (I.B.8)

Guided by the Integrated Planning Model, the College provided evidence that it has an effective process in place for assessment, evaluation, and planning. The College's major plans and budget development are integrated within this process, which begins with program review. Planning is aligned with the mission and supports student learning and achievement. The College has developed clear and comprehensive rubrics for integrating institutional goals, measurable student learning and program outcomes, and assessments and evaluations generated through program review. There is a defined resource allocation process that sets budget priorities, based on the scoring of these rubrics, for both long-range and short-range needs. The Budget Advisory Committee (BAC) serves as arbitrator for resource requests and consistently asks if the request aligns with program review. Long-range planning engages local community members as well as those from the college community. One result of the most recent planning assessment was to identify the need for an additional rubric to prioritize non-budget resource requests. The College also has plans to review and update the five-year Educational Master Plan every two years. (I.B.9)

Conclusions:

The College meets the Standard, except I.B.2.

Recommendation 1:

In order to meet the standard, the team recommends that the College follow its course, program, and institutional level learning outcomes cycle. (I.B.2, II.A.3, II.A.11)

Recommendation 2:

In order to improve institutional effectiveness, the team recommends that all programs complete the program review per the College's established cycle. (I.B.5, II.A.2)

I.C. Institutional Integrity

General Observations:

The College assures that all information provided to students, prospective students, staff, and the community is clear, accurate, and integrous, including information about the College's accredited status.

Findings and Evidence:

Primarily through the catalog, but also on the website and in other publications, information about the College is clearly and accurately shared. The mission statement, educational programs, program learning outcomes, student support services, and accredited status are addressed in the catalog and on the website. Course learning outcomes are included in the Course Outline of Record (COR) and on each of the class syllabi. (I.C.1)

The team found that the catalog is complete and up to date with all the required information, both in print and online formats. (I.C.2)

Levels of academic quality are assessed and communicated through the IER, which addresses student learning and achievement, aligned with institution-set standards. This report is publicly available on the college website and is shared with the Board of Trustees. (I.C.3)

The catalog describes the purpose, content, requirements, and learning outcomes for all degrees and certificates. Individual courses, with their expected learning outcomes, are described in the COR—available for review on CurricUNET—as well as on each syllabus. (I.C.4)

The team found evidence that CMC has a regular process for review of policies and procedures is in place and follows the guidelines of the Community College League of California. Board policies are reviewed at least every five years. The catalog is produced annually and reviewed prior to publication by faculty, staff, and campus leadership. Separate processes for review of public relations materials are established to ensure appropriate content representing the college mission, programs, and services. The IEC has published a handbook—Institutional Roles, Responsibilities, and Procedures—to ensure consistent and integrous practices. (I.C.5)

To ensure that students are aware of the total cost of education, information about annual costs and fees are clearly delineated in the college catalog, schedule of classes, and on the website. (I.C.6)

The team reviewed Board policy (BP4030) identifying the College's policy of promoting academic freedom and responsibility. This policy has recently been reviewed and reaffirmed, and it is found publicly expressed in the college catalog and on the website. (I.C.7)

Both board policy (BP5500) and administrative procedure (AP5500) outline expectations for honesty and responsibility among students. A Student Code of Conduct is clearly defined in the catalog. Faculty are held to a specific Code of Ethics; Board members are expected to behave ethically in line with Six Pillars of Character. For all groups, consequences for inappropriate conduct are addressed. (I.C.8)

The team verified that faculty are expected to adhere to BP4030 and to exhibit a professional understanding of academic freedom. Faculty evaluations by students and peers ensure fairness

and objectivity in the classroom, as well as adherence to the COR and appropriate mention of personal conviction. (I.C.9)

The College does not require conformity to specific beliefs or worldviews. (I.C.10)

The College does not have any foreign locations. (I.C.11)

The team found evidence that all requirements and information regarding accreditation—the Institutional Self Evaluation Report, follow-up reports, midterm reports, current accredited status—are met and communicated to the local and college community accurately and with integrity via the website. (I.C.12)

In addition to its timely responses to ACCJC, the team found evidence that the College demonstrates similar honesty and integrity among additional external agencies. These include program approvals for three health sciences programs, two approvals for the automotive program, and two approvals for the fire technology program. All of these additional accreditations are current and appropriately publicized. The College is consistently timely, honest, and integrous in its relationships with the California Community Colleges Chancellor's Office. (I.C.13)

The team verified that the College is publicly funded and ensures its commitment to high quality education, students learning and achievement. (I.C.14)

Conclusions:

The College meets the Standard.

Standard II

Student Learning Programs and Support Services

II.A. Instructional Programs

General Observations:

Copper Mountain College maintains and assesses student learning programs and support services for quality, rigor, and currency. College faculty ensure that the content and methods of instruction meet accepted academic standards and promote student success. The College has identified course student learning outcomes, program student learning outcomes, and institutional level student learning outcomes through a variety of assessment methods and approaches. While the College has identified outcomes at the course, program, and institutional levels, the team confirmed that the College is not regularly assessing these outcomes in a systematic manner. A new process is currently under review and revision to establish a more efficient, meaningful, and engaging program review and evaluation process.

Copper Mountain College clearly distinguishes pre-collegiate level curriculum and directly support students in these courses. The curriculum approval process ensures that courses and programs are consistent with the College's mission during the curriculum approval process.

The College effectively uses delivery modes, teaching methodologies, and learning support services that reflect the diverse and changing needs of their student population and the College's certificates, degrees, and programs follow practices common to American higher education, including appropriate length, breadth, depth, rigor, course sequencing, and synthesis of learning.

The official Course Outline of Record (COR) captures key curriculum elements such as the number of units and hours required for each course. This information is also included in the College's course schedules and Catalog. All CORs include student-learning outcomes (SLOs) which are included on all syllabi. The College ensures that minimum degree requirements are sixty (60) semester credits or equivalent at the associate level.

Course quality and rigor are evaluated and approved as part of the curriculum approval process for all modalities at Copper Mountain College. Distance Education courses meet the same requirements as face to face courses, are approved by separately as required, employ a secure log-in password for authentication, and faculty are made aware of regular, effective standards of contact.

Each College degree includes a component of General Education based on a carefully considered General Education Philosophy that is on the College's website and catalog. In addition, graduates of certificates and degrees demonstrate competencies that meet employment standards. The transfer of credit policies are established by the College in Board and Administrative Policies. Copper Mountain College maintains articulation agreements with public and private accredited institutions in and out of the state of California.

Findings and Evidence:

The team found that programs offered at Copper Mountain College are consistent with its mission, appropriate to higher education, (with supporting courses in basic skills) and lead to certificates, degrees, and transfer. The Curriculum Committee provides a framework for the review, revisions, and approval of course and program curricula. This robust process includes review by the Curriculum Technical Review Committee, the Curriculum Committee, the Academic Senate, and the Board of Trustees before submitting to the California Community College Chancellor's Office. All Course Outlines of Records (CORs) are housed in CurriQunet and include course student learning outcomes (SLOs). (II.A.1)

The team verified that the Curriculum Committee oversees the process of a systematic review of all courses, which includes every two years for all Career Technical Education (CTE) courses and every five to six years for all other courses. This review process includes updating curriculum to meet student, program, and industry need. Course syllabi are shared with students at the beginning of the semester that include pertinent information about the course and the course student learning outcomes. Faculty, administrators and staff involved in the curriculum process have many opportunities to participate in related professional development such as Flex activities, one-on-one training workshops, conferences like the Academic Senate of California Community Colleges Curriculum Institute, and other workshops hosted by the College.

The team confirmed that the program review process was in transition and the College is improving its process the current program review process. The Dean of Planning, Research, and Institutional Effectiveness distributed an Annual Employee Survey in spring 2017 with focused questions regarding the program review process. The Institutional Effectiveness Committee reviewed the survey results and discussed various ways to improve the process based on these results. The Dean of Planning, Research, and Institutional Effectiveness shared with the team two major changes to the process. The first is to move away from the software system for program review (Task Stream) and towards a locally developed template, allowing the Dean the opportunity to easily track the data and reports into an easy to read format for faculty, staff, and administrators to utilize. Two other changes are on the horizon but were not implemented during the accreditation visit. These changes include a standardized rubric for the Program Review Reports and submitting Program Review Reports every three years (instead of annually). The College is still engaged in reviewing and confirming a timeline for these changes.

The Dean of Planning, Research, and Institutional Effectiveness is working closely with faculty, staff, and administrators to implement a new template for program review as the College transitions from a software product to a homegrown Program Review Template for collecting and housing the reports. This new proposed template includes assessment and analysis of student learning outcomes, program learning outcomes, student achievement and success data, an overview of the program, and long-term goals. The College is also considering in a shift from an annual program review process to completing the process every three years. In addition, the College has experienced a significant amount of change in leadership and is currently replacing four key administration positions in the next six months.

While faculty, staff, and administrators continuously strive to improve instructional courses, programs, and directly related services through a systematic evaluation and program review process to assure currency, improve teaching and learning strategies, and promote student success; however, the team confirmed that not all programs completed the current cycle of the program review process. While the College did appear to have a structured process, the team found that not all of the Program Review Reports for fall 2017 and fall 2018 were complete. In reviewing the evidence provided by the College to the team, many templates were blank and/or incomplete. (II.A.2)

Copper Mountain College identifies student-learning outcomes for its courses, programs, certificates, and degrees. The College currently utilizes a software program to manage the input and collection of outcome assessment and analysis. The Student Learning Outcomes Assessment Coordinators assist faculty with course outcomes and assessment. The Course Outline of Record for each course includes the student learning outcomes and program learning outcomes for the course.

The team confirmed the College has established course student learning outcomes. These student-learning outcomes are included in the official Course Outline of Record and match course syllabi provided to students at the beginning of each semester. In addition, faculty use a software program to enter and house the outcome assessment reports for all course student-learning outcomes. Faculty review the results and incorporate goals needing funding into the resource allocation process when appropriate. The team confirmed that there is not a formalized calendar or timeline to ensure that all course student-learning outcomes are assessed in an appropriate timeframe. In addition, the team confirmed that not all course student-learning outcomes have been assessed.

The College also identifies Program Learning Outcomes and the results from program learning outcomes are entered and housed into the same software system as course student learning outcomes. Both program learning outcomes and institutional student learning outcomes are also included in the College catalog. However, the team confirmed that the College is not regularly assessing learning outcomes for courses and programs using the processes and procedures in place for assessment. The College has identified specific improvement plans related to the assessment of student learning outcomes in their Quality Focus Essay, which if followed, should lead to stronger assessment practices and results. (II.A.3)

Copper Mountain College offers pre-collegiate courses in support of math and English. Over the last year, both departments use an integrated approach with faculty and student services in revamping the basic skills sequences as a result of AB 705. Course Sequence tables are provided for students in the catalog for each area. Pre-collegiate courses are listed in the Schedule of Courses and differentiated from college level courses by the exception of the transfer notation. Pre-collegiate courses are approved through the same curriculum approval process as college level courses and CORs and these courses are described in the college catalog. (II.A.4)

Copper Mountain College offers twenty-nine certificates, thirteen transfer degrees, seven non-transfer degrees, and sixteen associate degrees for transfer, that meet the degree requirements as described in the College's Board and Administrative Policies as well as the California

Community College's Chancellor's Office Program and Course Approval Handbook. Courses and units are based on the Carnegie hour and consistent with common practice and verification of credit hour is included in the COR. Programs are at least 60 units, and all length, breadth, depth, rigor, course sequencing, time to completion, synthesis of learning and critical thinking are evidenced within the Course Outline of Record and verified by the Curriculum Committee. (II.A.5)

Copper Mountain College offers courses in a manner that allows students to complete within a reasonable timeframe consistent with established expectations. The Office of Instruction Advisory Committee review data on past enrollment trends, success rate of courses, and the two-year course cycle to carefully construct a schedule that meets student demand and need. Division Chairs, staff, and administrators work closely with student services to ensure course are offered in a manner that allows students to complete certificate and degree programs. (II.A.6)

The team found evidence that equity is a core part of the mission at Copper Mountain College: "the success of every individual student." In 2015, the College developed and implemented the CMC Equity Plan to focus on closing achievement gaps. Faculty carefully consider the best delivery methods to offer a class to meet the needs of their students. The College delivers courses by using face-to-face, hybrid, and online delivery methods. When a course is offered in more than one modality, the different modalities are compared to ensure consistency and equity. Coordination between Disabled Student Programs and Services and academic disciplines ensure that students with special needs are accommodated.

The team found that there were inconsistencies in the instructor adherence to the College's definition of regular and effective contact in its distance education policy for regular and effective interaction. Moreover, the College's policy states that there many alternative ways to archive activities that fulfill their own definition of regular and effective interaction such as e-mail, study sessions, chat rooms and phone calls. (II.A.7)

Several mathematics courses at Copper Mountain College use a common exam. The Math Department has developed clear instructions to the faculty on process as well as a rubric for scoring in order to enhance the reliability of the exam. There is substantial evidence of discussions of the validity and reliability of the examinations in the Math Department, including additional discussions on the placement of SLO questions and timing of exams. Results are used for decision making in the department. (II.A.8)

Copper Mountain College awards credit based on passing grades determined by the faculty. Passing grades represent student attainment of the learning outcomes for degrees and certificates. A review of the College catalog provided evidence that academic programs are based on credit hour instruction. The College offerings follow federal guidelines for clock-to-credit hour conversions and unit credits are consistent with the norms in higher education, as evidenced in the CORs and approved by the Curriculum Committee. (II.A.9)

Policies related to protocols for assessing transcripts for students entering or transferring to the College are implemented to ensure uniformity for awarding credit by examination, advanced placement examinations, non-credit courses, and cooperative work experience, and military service credit are clearly delineated in the Board Policies and in the college catalog. The College

has articulation agreements with two-year and four-year institutions in the state and nationwide. (II.A.10)

Copper Mountain College has five major areas that contain seventeen institutional learning outcomes. The five major areas are communication skills, critical thinking skills, ethics, person development, and information competency. The College states the institutional learning outcomes in the College Catalog and uses a graduate survey to assess each goal. The team reviewed evidence that the College is in discussion to develop more effective institutional learning outcome assessment tools in order to address a known deficiency. (II.A.11)

The College's General Education Philosophy Statement serves as the foundation for the College's mission, vision, values, and institutional learning outcomes and is listed in the College Catalog. General education courses at the institution constitute the foundation for associate degree programs and are evaluated through the curriculum process involving the Curriculum Committee, Academic Senate, and the Board of Trustees. (II.A.12)

The Curriculum Committee at Copper Mountain College ensures that every associate degree includes one area of a focused study of eighteen or more semester hours. The degrees offered at the College consist of the major area of focused student and general education courses. This provides students with a broad and diverse base of knowledge. Associate Degrees for Transfer (ADT) includes a focused area of inquiry that is determined through a comprehensive state-level review that by faculty from the California State University and California Community College systems to ensure rigor and currently in all ADTs. (II.A.13)

Copper Mountain College offers Associate of Arts Degrees, Associate of Science Degrees, and Certificates of Achievement in several CTE fields. All CTE disciplines have advisory committees that meet annually. All vocational and occupational programs at the College undergo biennial review to ensure that the program meets labor market demand, does not duplicate another program, and is effective as measured by employment and completion success of its students. (II.A.14)

When programs are eliminated or program requirements are significantly changed, the discipline faculty provide justification to the Curriculum Committee with a recommendation to be reviewed and approved by the Academic Senate. The final action goes to the Board of Trustees for approval. Every effort is made to inform students who are affected by these actions. In addition, the College follows Board Policy 4280 and Administrative Policy 4280 for the discontinuance of an instructional program. (II.A.15)

The team confirmed that Copper Mountain College's annual program review process ensures the improvement of quality and currency of instructional programs. The program review process is part of the College-wide Integrated Planning Model, which serves as the basis for program and service planning. All programs at the college are to be evaluated for quality and currency through the college's program review process. This process includes both discipline faculty, appropriate administrators, and the Dean of Research, Planning and Institutional Effectiveness. (II.A.16)

Conclusions:

The College meets the Standard.

Recommendations:

See Recommendation 1.

See Recommendation 2.

Recommendation 3:

In order to improve institutional effectiveness, the team recommends that all faculty consistently implement the College's expectations for regular and substantive interaction as defined in the College's policy. (II. A.7, Commission Policy on Distance Education)

II.B. Library and Learning Support Services

General Observations

Library and learning support services are centrally located together in the Greenleaf Library at the heart of the campus in modern learning environment well equipped to support the student body. The Greenleaf Library offers access to academic resources including print books, periodicals, required textbooks, and media, as well as online periodical databases and eBooks supporting the curriculum of the District. The Learning Resource Center (LRC), where students may receive tutoring in a variety of subject areas, is housed within the Greenleaf Library and contains additional study space and computer access. The LRC offers drop-in and online tutoring services. The District also offers access to library databases and print textbooks at its Marine Corps Air Ground Combat Center (MCAGCC) site in an open computer lab. The library offers 24/7 remote access, currently available through use of passwords or software installation, to its online resources. Workshops supporting the library's mission to support CMC's curriculum are offered in-person and online via the College's Canvas learning management system, and class presentations contextualized to meet specific research needs are also made in classes upon request. The library and learning support services align with the District's mission to provide educational opportunities through a comprehensive curriculum and support services.

Findings and Evidence

The Learning Resource Center (LRC) is open on all days during which classes are offered for a total of forty-six hours per week including Saturdays during regular semesters and is open during summer session sixteen hours per week. The LRC provides critical academic support for students, with faculty and trained student tutors providing tutoring in 21 subjects as well as supporting writing across the curriculum, and it ensures there are two Math tutors and an English/Writing tutor available in the LRC during all open hours. The LRC demonstrates a high

standard of learning support by training tutors using a program through which students receive Level 1 tutoring certification that is portable to the California State University system. LRC faculty is now preparing to apply to offer Level 2 certification as well.

The Library offers a collection of print books in support of the College's curriculum, copies of textbooks required for classes taught at the MCAGCC, and a collection of audio-visual materials, all of which are indexed in the Library's online catalog. There is also a collection of the print copies of all non-digital textbooks required for all classes at the main campus, for which are identified in a list online at the Library's website. In addition, the Library offers access to a variety of print periodicals, and over 25,000 online periodicals via subject-specific and general online databases. The Library offers access to some of its online resources regardless of location or means of delivery by providing password-based access to its online collections, and to others through the installation of client software on individual personal computers. Evidence indicates that this method of access is problematic, but only for a small number of students. In addition, database statistics indicate that access and usage of online resources has nearly doubled in the most recent three years. (II.B.1)

The Greenleaf Library is open 67 hours per week during regular semesters, including Saturdays, and 40 hours per week during summer session. This indicates efforts meet the College's mission to serve its diverse student population. The Library is staffed by 1.95 FTE faculty librarians, 2.45 FTE classified staff members, and student workers covering 120 hours per week. Until recently there was only one full-time librarian, but the recent hiring of two part-time library faculty and the recent commitment to replacing the current full-time librarian who is retiring are indicative of the College's intent to provide a sufficient level of service in support of student learning. The College has committed to replacing the full-time librarian who will retire at the end of the current academic year. The learning environment offers ample seating, group study space, access to 51 computers with Internet access, software that meets standard research and knowledge production activities, including free printing, associated with college learning. There is an ACCESS lab with adaptive software, and individual adaptive workstations exist within the Library that can be accessed when the lab is closed. Librarians offer research and other class assignment assistance in-person and online via chat services during open library hours. (II.B.1, II.B.2)

The LRC, located inside the Greenleaf Library, offers an additional ten workstations each loaded with the same software as Library computers, and in addition provide students access to more specialized programs required for student work. In addition to these resources, tools such as scientific calculators, headphones, and current textbooks in crucial classes are available in the LRC.

The team reviewed evidence demonstrating that library staff provide and assess information competency instruction through regularly offered online and in-person workshops and classroom presentations, and they effectively implement improvements to resources and services through

their efforts. Students indicated in interviews that library staff are extremely helpful, that they never have trouble receiving guidance when needed, and that computers are always available for their use. In addition to the array of resources noted above, the library also offers 25 online guides, both subject-specific and general, to support student learning. Librarians demonstrate active curation of collections through regular statistical analysis of usage, faculty consultation, and regular engagement with curriculum development. (II.B.2)

The team confirmed that the library regularly reviews outcomes in support of the college mission through workshop assessment, Library Committee consultation, and annual faculty, staff, and student surveys, and has followed up with modifications and additions to workshops and other instructional resources as a result. In the LRC, Student Learning Outcomes are assessed as part of the annual student survey. The College demonstrates further efforts to align with the Standard by instituting an assessment specifically focused on the LRC a year ago. Recent assessments in the LRC indicate a significant positive impact upon student success for most students who have received tutoring support in the LRC, with those students engaged in six tutoring sessions achieving a 100% success rate in their courses in most subject areas. The LRC faculty member has recently updated the assessment form used to gather information that is more specific on the impact of tutoring services on student learning. (II.B.3)

The District has signed on to the Council of Chief Librarians and the California Community Colleges Technology Center for procurement of the statewide new Library Services Platform (LSP). Once implemented, the LSP should help staff facilitate enhanced remote access to its resources, demonstrating the College is working toward alignment with this Standard. The Library does not offer inter-library loan services, but the implementation of the LSP could facilitate access to a wider array of resources, should the Library choose to implement that feature.

Available evidence demonstrates that Copper Mountain College maintains a contract with NetTutor, an online tutoring service, for students enrolled strictly in online, hybrid, or off-campus classes. NetTutor holds an agreement with Copper Mountain College and the CCCC. NetTutor conducts internal evaluations, and a separate evaluation is conducted for Copper Mountain College students on campus. The LRC holds no third-party contracts of its own. (II.B.4)

Conclusions

The College meets Standard.

II.C. Student Support Services

General Observations

Copper Mountain College has established an on-going process of evaluation of student support services. Services are offered at the College's various locations and are provided in formats that meet the accommodation needs of students who comprise the College's large and diverse geographic service area.

Findings and Evidence

The Team reviewed evidence demonstrating that the College has developed assessment methods to ascertain the effectiveness of student support services, and the institution uses evaluation results to improve student services. The College provided evidence of student surveys administered annually to evaluate the support programs across student services departments, the results of which guide program improvement. Other Student Support Areas, e.g., EOPS/CARE, CalWORKs, and ACCESS, work closely with the Institutional Effectiveness Office to track data specific to student retention, persistence, completion and success rates in courses to make data-informed decisions regarding program growth and progress.

The College's Student Success Center (SSC) provides a variety of free, non-credit programs to students, including high school completion, GED/Hi-Set preparation, ESL courses, self-paced basic skills refreshers, and face-to-face military basic skills refresher courses. The SSC offers these services at a variety of locations across the Morongo Basin and locations in Twentynine Palms and Yucca Valley, including the Academy for College and Career Excellence (AC2E). ACCESS, CalWORKs, and EOPS each have identified program review processes. The College has shown evidence of sufficient evaluation processes to measure whether the quality of its student learning programs and support services are comparable, regardless of location or means of delivery. Program evaluation occurs at regular intervals.

CMC provides substantial support services and resources for veterans who reside in the Morongo Basin service area through direct services on the main campus, where a Veteran's Resource Center (VRC) was established in 2016, and a satellite location at the Marine Corps Air Ground Combat Center (MCAGCC). Service provision for students at both locations is comparable. A School Certifying Official, general counselors, and Financial Aid staff who focus on specific veteran's benefits staff the VRC. Designated Student Equity funds are utilized to provide additional resources for student veterans.

Remaining student support programs are assessed either through the Counseling Department's program review or through the SSSP and Equity Committee. The resulting program work plan is based on the evaluation of student data obtained from the Office of Institutional Effectiveness to meet the goals of student success, the specific student support program, and the institution as a whole. (II.C.1)

The institution identifies and assesses learning support outcomes for its student population and provides appropriate student support services and programs to achieve those outcomes. The institution uses assessment data to continuously improve student support programs and services. To assess and improve student support programs and services at the College, each area is involved in a program review process which assesses the previous year's data, initiatives, and services; leading to the development of Administrative Unit Outcomes (AUOs). The resulting

AUO's guide the development of program goal setting, planning, and resource allocation. All student support staff are involved in the program review process. (II.C.1, II.C.2)

The institution assures equitable access to all students by providing appropriate, comprehensive, and reliable services to students regardless of service location or delivery method. CMC offers a full array of reliable, equitable services for students across the College's service locations, regardless of location. Students attending classes in distant locations, such as the MCAGCC Base satellite campus, have access to equitable student support program services as provided on the main campus. Credit and non-credit basic skills courses are offered as well as degree applicable coursework. Students have access to textbooks at the Base library and the technology needed for their coursework is available at the computer lab. Students enrolled in distance education courses, as well as those in need of need remote services, can access assistance through the student portal and CANVAS.

Acknowledging, "CMC serves a student population that has a low-income status, low achievement of education past high school, and higher level of individuals with disabilities," online New Student Orientation sessions are provided at a distance and in a manner, which addresses the needs of all students. The College provides an online tutoring system through CANVAS so students can access tutoring for the majority of subjects taught online. In addition, students can make a phone appointment to speak with counselors remotely or can request an online appointment with a counselor. To ensure student access to comparable College services, regardless of location or means of delivery, the Counseling Department utilizes telephone appointments and access through the CCCConfer ZOOM teleconferencing system for online appointments. Two Semester, First Year Education Plans and Academic Standing workshops and forms, are accessible to students via the College's website and student portal. (II.C.2, II.C.3)

Co-curricular programs and athletics programs are suited to the institution's mission and contribute to the social and cultural dimensions of the educational experience of its students. The institution has responsibility for the control of these programs, including their finances. There are a variety of co-curricular programs and opportunities at Copper Mountain College that engage student interest. The College fielded its first intercollegiate athletic teams during the 2017-2018 academic year in Men's and Women's basketball. Student publications include The Copper Penny, an online journal sponsored by the Academic Senate, and Howl, the College's literary journal, which is in its twenty-first year of continuous publication. The Associated Students of Copper Mountain College (ASCMC) mission is to empower the voice of students and to encourage the involvement of students at all levels.

The inaugural season of basketball at Copper Mountain College has provided the community with a long-desired home-team to rally behind. Women and Men's teams compete in the Orange Empire Conference, supervised by Director of Athletics. The Director of Athletics oversees the requirements for in-season credit courses and off-season courses for skill development and conditioning. Student athletes are required to enroll in a minimum of 12 credits course load and must maintain a 2.0 average to be eligible to participate. All courses associated with the intercollegiate athletic program have inspired the youth of the Morongo Basin to consider CMC as their future educational institution.

Student publications feature poetry, short stories, and artwork. Through ASCMC, students pursue policies that will improve student access; promote student success; engage and empower local student leaders; and enrich the collegiate experience. ASCMC has helped to establish several student clubs. In addition, the College operates two honor society chapters, Alpha Beta Gamma and the Beta Rho Pi chapter of Phi Theta Kappa, the international honor society for community college students. Both have contributed immensely to the campus atmosphere. (II.C.4)

The team reviewed evidence demonstrating that the Counseling Department engages students to develop comprehensive education plans that provide a guided pathway for academic success. The College's Counseling Department is the primary source of program offerings for students. Given the College's remote location, the Counseling Department is the source for connecting students to resources, offered both on and off campus, which are essential for students' academic and personal success. After having met individually with a counselor, students are surveyed for their perceptions and rating of the perceived quality of support services. Department personnel utilize an interactive process to evaluate individual students' academic history to determine course placement. Evidence-based practices utilizing multiple measures are used to assist students with educational planning. The Student Appointment Registration System (SARS) software is used for scheduling of appointments and drop-in visits by students. SARS tracks scheduled appointment times, wait times for drop-in appointments, volume of students receiving services, and the types of services received.

Counseling services are reviewed and evaluated on an ongoing and regular basis. Counselors regularly attend off-campus workshops to maintain currency. The Counseling Department completes annual surveys with students and faculty to discover the perceptions of the effectiveness of the services in the Counseling Department. The Counseling Department uses the survey information to enhance services to students and to improve Counseling Department practices. In addition, the Counseling Department meets regularly to discuss successes, concerns and issues, and to provide professional development opportunities for continuous quality improvement.

All programs within the Counseling Department conduct a yearly Advisory Board meeting with participation from program staff, community partners, faculty and staff, and administrators to review current programs and initiatives, share community updates and resources, and discuss and elicit feedback on how to better serve students.

Through the ACCESS program, the College provides counseling service for students who have a documented, verified disability. ACCESS program staff develop individualized academic accommodation plans specific to each student's needs through an interactive process to provide students equitable educational opportunities. EOPS/CARE and CalWORKs provide individualized counseling and education planning for students who are educationally disadvantaged and/or economically disadvantaged. Program staff also provide resources for students with housing and food insecurities.

The College shows how it provides comprehensive, appropriate, and reliable information and services to students regardless of location. Efforts are in place to ensure that services are enhanced such that students at the MCAGCC Base satellite campus receive comparable services.

College staff are also continuously working to ensure that distance education students have remote access and that these services meet the guidelines for delivering services online. (II.C.5)

The team reviewed evidence that CMC provides educational opportunities to individuals of all ages and educational backgrounds. Board Policy 5010 – Admissions and Concurrent Enrollment defines the College’s admissions policies. Multiple measures, such as high school grade point average and self-reported skills, have been used across the past two years, in an interactive process, to determine course placement for students.

The College has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs. The institution defines and advises students on clear pathways to complete degrees, certificate and transfer goals. Major sheets are regularly updated and along with Student Education Plan templates, students are kept aware of academic requirements for completion of their degrees. Students are required to attend First Year Plan Workshops as part of their matriculation process. All pertinent information regarding academic requirements is reviewed during the workshop, and by the conclusion of the workshop, students have completed their 2-Semester First Year Plan.

The institution provides counseling and/or academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function. Counseling and advising programs orient students to ensure they understand the requirements related to their programs of study and receive timely, useful, and accurate information about relevant academic requirements, including graduation and transfer policies.

The Transfer Center provides resources, information, and specialized support for students focusing on transfer to four-year institutions. California State University (CSU) and University of California (UC) transfer fairs are held in the fall where specific transfer information is shared with students. The “Transfer 101” program provides transfer overview information in the spring semester for targeted students with between 30-45 units completed. Transfer representatives from CSU, San Bernardino, UC Riverside, University of Redlands, and Canyon University participate annually.

Information pertaining to academic requirements is listed in the College Catalog, as well as on the College website. The College’s Articulation Officer verifies transfer course patterns and counselors attend annual UC and CSU conferences to remain current on transfer readiness and the process for applying for transfer to California 4-year public universities. The team confirmed that the College is in the process pursuing the implementation of the “Student Tracer” software application to more effectively respond to the need to track students to successful transfer. The request for purchase of the software is anticipated to advance to the Board of Trustees for approval in March 2019. In addition, “Degree Audit” was implemented to assisting transfer tracking in late February 2019. (II.C.6)

The confirmed that the institution regularly evaluates admissions and placement instruments and practices to validate their effectiveness while minimizing biases. An annually administered student survey queries the level of service provided by the Admissions and Records Department. The data from the student survey is analyzed and used as an evaluative tool to inform the

program review process for the department. Similarly, the Counseling Department utilizes data from student surveys to assess its delivery of services.

In Fall of 2019, the College will discontinue the use of the Accuplacer assessment test. Counselors will continue to utilize multiple measures as a primary means of course placement for students. Student data from multiple measures placements will be shared the Department of Institutional Effectiveness to disaggregate and evaluate. (II.C.7)

The institution maintains student records permanently, securely, and confidentially, with provision for secure backup of all files, regardless of the form in which those files are maintained. The institution publishes and follows established policies for release of student records. The College maintains student record files, alphabetically in a locked/secured room, accessible by key. Files are stored in fireproof file cabinets on campus and transferred to an offsite storage location on a weekly basis. Vital and pertinent student information is stored in the College's student information system, Colleague. Access to student records in Colleague is limited by employee position. The college maintains excellent redundancy in practices to ensure effective and efficient backup and retrieval of stored information.

The College's Information Systems Department maintains a file backup system to ensure that data can be retrieved. CMC's policy regarding student records and directory information is outlined in Board Policy 5040 - Student Records and Directory Information, and Privacy, and college staff adhere to the Family Educational Rights and Privacy Act (FERPA) and relevant guidelines for the release of student information. Information regarding policies for release of records is published in the Academic Catalog. (II.C.8)

Conclusions

The College meets the Standard.

Standard III

Resources

III.A. Human Resources

General Observations:

The College has formal and well-documented plans to ensure all employees are well qualified for the position they seek. Requests for faculty, staff, and administrators begins in the program review process. Faculty position requests are prioritized by a ranking based on department needs. Academic Senate submits its recommendations on what faculty positions will be hired. Classified staff position requests are made through the program review process. Positions are prioritized by the criteria of program goals and align with the Education Master Plan. All requests are reviewed at the Management Council and forward to the Budget Advisory Committee for recommendations. Categorical positions for both faculty and classified staff are initially formulated to meet the regulations by the funding agency. These positions are then posted and filled following the guidelines of the funding agency and the protocol of the College.

Collective Bargaining Agreements delineate how faculty will be evaluated, the criteria to be used, and the timeline for evaluations. The California School Employees Association Collective Bargaining Agreement delineates how staff are evaluated, the individuals responsible for conducting the evaluation, and the timeline for evaluation. Evaluation for administrators are delineated in an administrative procedures document. Human Resources is responsible for ensuring that all employees are evaluated appropriately and in a timely fashion and maintaining the security of personnel documents.

The College provides professional development opportunities to all constituent groups. The College has an Employee Development Fund (EDF) to assist employees in their professional development activity. All EDF requests are reviewed by the EDF Committee, comprised of the Chief Human Resources Officer, two faculty members, and two classified staff members. The committee reviews the application along with its supporting documents, the committee approves, requests more information, or denies the request. The College also allows release time and alternative Flex activities for employees to attend regional meetings, seminars, and conferences that directly relate to his/her position at the College. Other funding sources, such as the Perkins Grant funds and Basic Skills Initiative funds, assist in the professional growth of employees by sponsoring training on and off campus.

The College is mindful that clearly written and comprehensive policies and procedures that are widely disseminated and regularly assessed to ensure quality will result in a smoothly operating organization. These policies and procedures pertain to employees and their performance, ensuring fairness and equity in all actions at the college, professional ethics – all which align with the College's mission.

Findings and Evidence:

The College has policies and procedures to ensure quality personnel meet appropriate education and experience to provide and support program and services.

BP 7211, Minimum Qualifications and Equivalencies - Academic Employees Faculty shall meet minimum qualifications established by the Board of Governors or shall possess qualifications that are at least equivalent to the minimum qualifications set out in the regulations of the Board of Governors.

BP 7120, Recruitment and Hiring - The Superintendent/President shall establish procedures for the recruitment and selection of employees including, but not limited to, the following criteria. An Equal Employment Opportunity Plan shall be implemented according to Title 5 and BP 3420 titled Equal Employment Opportunity. Academic employees shall possess the minimum qualifications prescribed for their positions by the Board of Governors. The criteria and procedures for hiring academic employees shall be established and implemented in accordance with board policies and procedures regarding the Academic Senate's role in local decision-making. The criteria and procedures for hiring classified employees shall be established after first affording the California School Employees Association an opportunity to participate in the decisions under the Board's policies regarding local decision-making.

The team found the College has developed an Equal Employment Opportunity (EEO) Plan and board policies to ensure that the hiring procedures are consistently and fairly followed. The team found evidence that the EEO plan is shared with governance representation on all hiring committees. (III.A.1)

The College has established policies and procedures such as BP 7120, Recruitment and Hiring – that outline the recruitment and selection of employees. The College develops job descriptions by establishing the requirements through consultation with the specific departments requesting the position, surveying other institutions for similar positions, and taking into account the College Mission Statement goals by seeking candidates who will be able to meet the needs of the College's diverse desert community's students. (III.A.1, III.A.2)

BP 7250 – Educational Employees that addresses qualifications for all academic personnel. BP 7232- Classified; BP 7240 Confidential and BP 7260 – Classified Supervisors and Managers documents the procedures used to hire classified staff and administrators. Human Resources is responsible to ensure that candidates meet the minimum qualifications and are suitable for the position for which they are applying. Human Resources reviews information pertaining to the candidate's degrees, qualifications, and experience. Screening committees are responsible for reviewing candidate portfolios, interviewing desired candidates, and selecting candidates to continue along the hiring process. Human Resources personnel ensure that all processes are followed. (III.A.3)

The College ensures that all faculty, classified staff, and administrators meet the minimum qualifications for employment. Human Resources is responsible to ensure that transcripts are complete and appropriate. If equivalency is needed to evaluate transcripts from institutions

outside the United States, Human Resources Office verifies degrees from foreign institutions and requires all applicant include a translation and evaluation of the degree awarded. (III.A.4)

The collective bargaining agreements describe how faculty and staff will be evaluated, the timeline for evaluation, and the criteria to be used. The Board of Trustees ratified the collective bargaining agreement for faculty effective July 1, 2016 – June 30, 2019. The criteria used to evaluate faculty is comprehensive and attention is devoted to student learning, achievement, and service to the college community. The collective bargaining agreement proves comprehensive documentation regarding how classified staff are evaluated.

Managers and administrator’s performance evaluation form is part of an on-going communication process with employees regarding the employee’s job performance, adaptation, and growth. The performance evaluation form is a measuring tool for both the College and the employee. The performance evaluation form establishes the criteria against which the employee is assessed and evaluated. Areas of strength and areas where performance improvement may be required or desired are highlighted for the employee. Measurable plans and targets for improving job performance developed in collaboration with the employee should also be used in conjunction with the evaluation form. (III.A.5)

Per ACCJC, this Standard no longer applies. (III.A.6)

The team reviewed evidence that the College maintains a sufficient number of qualified faculty. The team confirmed that faculty positions requests are generated through program review. The Academic Senate submits its recommendation for how the position should be re-hired. This process has been in place for several years and there is consensus that the procedures work well for determining the faculty positions that are selected for funding. (III.A.7)

The College culture promotes strong collaborations between full-time and part-time faculty. The College has employment policies and practices, which provide for the orientation, oversight, evaluation, and professional development of the part time faculty. Upon hiring, the new part-time faculty receives a “New Employee Packet” from the Human Resources Office. Part-time faculty are evaluated once every two semesters for four years and then once every six semesters. Part-time faculty follow the evaluation process as outlined in the faculty CBA, Article XVI, Section 4. (III.A.8)

Classified staff positions are requested through program review process as well. Departments submit their requests for the additional position or hours into the program review, which is then prioritized by the criteria of program goals, the college Mission, alignment with the Education Master Plan, and accreditation requirements. After requests are reviewed at the Management Council, they go to the Budget Advisory Committee for recommendations before final approval.

The team confirmed that staffing needs are evaluated annually as part of the program review process, in which each department looks at staff availability and workload, compares it to the requirements of their program, and checks whether any new requirements have emerged from the Chancellor’s Office.

The College has a sufficient number of staff with appropriate qualifications to support the College operations. Classified staff and leadership reported high job satisfaction, good working conditions and an overall positive commitment to serving students. (III.A.9)

The College has a sufficient number of administrators for optimal operations for the college and there is a process in place to continually examine the effectiveness of the administrative body. In 2019, the administrative structure was reconfigured to split the duties of the Vice President of Academic and Student Services into two executive dean positions. This structure was presented and approved by the board in January 2019. Splitting the duties between CSSO and CIO into separate positions ensures that there are sufficient personnel to effectively address the needs of the College. (III.A.10)

The team reviewed Board Policies (BP) and Administrative Procedures (AP) describing how staffing positions are determined, protocol for hiring employees, and determining the quality and appropriateness of academic degrees and experience. The College has a process of reviewing and updating all of its policies and procedures. There is a master tracking chart guiding the process; this chart is reviewed twice monthly by the College Council. (III.A.11)

BP 7100, Commitment to Diversity – the College is committed to employing qualified administrators, faculty, and staff members who are dedicated to student success. The Board recognizes that diversity in the academic environment fosters cultural awareness, promotes mutual understanding and respect, and provides suitable role models for all students. The Board is committed to hiring and staff development processes that support the goals of equal opportunity and diversity, providing equal consideration for all qualified candidates. The Equal Employment Opportunity Plan, which was updated in 2017 for 2017-2020, describes how diversity will be incorporated into the hiring process and reflected in employee trainings. (III.A.12)

BP 3350, Institutional Code of Ethics - the Board shall direct the Superintendent/President to develop procedures to address Institutional Code of Ethics, recognizing that groups on campus may have their own code of ethics, so long as such codes do not conflict with the institutional code. BP 7360, Discipline and Dismissal - the Superintendent/President shall establish procedures that define the conditions and processes for dismissal, discipline, and due process and ensure they are available to employees. Violation of the ethics policies result is discipline outline in the collective bargaining agreements in CSEA, CBA Article XVI: Discipline; and for faculty, Education Code Community Colleges Article 6: Termination of Services and Reduction in Force, Sections 87730-87736. (III.A.13)

The College provides all constituents with opportunities to acquire or maintain proficiency in pedagogy, technology, and learning needs. The College has an Employee Development Fund (EDF) to assist employees in their professional development activities. The fund provides compensation for conferences, seminars, sessions, and trainings that directly relate to employees' positions. At the start of the fall and spring semesters, Staff Development and Flex days provide opportunities for training in pedagogy, technology, and learning assessments. Classified Employees are able to request professional growth funds for educational reimbursement, including reimbursement of tuition for CMC courses.

The EDF committee, comprised of the Chief Human Resources Officer, two faculty members, and two classified staff members, reviews all EDF requests. The committee reviews the application along with its supporting documents; the committee approves, requests more information, or denies the request. (III.A.14)

The College has procedures in place for the security and confidentiality of personnel records. The procedures provide that employees have access to their personnel records. (III.A.15)

Conclusions:

The College meets the Standard.

III.B. Physical Resources

General Observations:

The College insures a safe learning and working environment through staff training and by-annual inspections. One of the strategic initiatives in the Education Master Plan as well as the Facilities Master Plan is “to create and maintain a sustainable and adequate square footage.”

Findings and Evidence:

The team reviewed evidence that the College conducts multiple types of training for staff and faculty. There are bi-annual scheduled inspections of the working and learning environment that have led to improvements in safety. For example, the College responded to multiple reports of undesirable activity at the Bell Center by installing cameras in that location; because of this action, the College experienced a dramatic reduction of incidents in that location. (III.B.1)

The Facilities Master Plan, guided by the Education Master Plan, insures proper planning of physical resources to address needs and long-range goals of the institution. For example, the challenge of measuring the total cost of ownership of facilities is being addressed with the development of a tool to assist in strategic planning. Resources are being used to address students’ (as well as the community’s) needs and further the mission of the College. For example, some projects stated in the Facilities Master Plan include an Intercollegiate Athletics Program, a Climbing Wall, a Cultural Arts Center and a Student Success Center. (III.B.2)

The Annual Program Review is used to evaluate the College’s facilities and equipment needs. An electronic work order system (MOTO) is used to identify short-term needs. To evaluate the effectiveness of physical resources in supporting the College’s mission, such as program demands, space load ratios and space inventories, the College uses FUSION database software. (III.B.3)

The Facilities Master Plan supports the Education Master plan, and its aim is to advance institutional goals. A new tool will be developed to address the College's challenges with the strategic planning of total cost of ownership of facilities and equipment. The College discusses total cost of ownership during the program review resource requests and emergency budget requests. The ongoing and unanticipated costs regarding staffing and maintenance are part of the resource request discussions. Though the College continues to analyze total cost of ownership issues, the College should formalize processes or plans to ensure adequate resources are available to meet long-range capital plans. (III.B.4)

Conclusions:

The College meets the Standard.

Recommendation for Improvement:

Recommendation 4: In order to improve, the team recommends that the College formalize a process or plan in order to ensure adequate resources are available to meet long-range capital plans. (III.B.4)

III.C. Technology Resources

General Observations:

The College identifies technological needs through program reviews, surveys (for faculty and students) and the following two committees: Technology and Education Technology. It has a Technology Master Plan that was designed to further the goals of the Education Master Plan. The College evaluates technological needs and tries to implement improvements as well as a regular maintenance schedule through the Information Services department. One of the strategic initiatives in the Education Master Plan is to "create and maintain a sustainable process that ensures our ability to provide adequate services over time. This includes budgeting for the cost of life of the equipment and software and providing funding to replace aging equipment on a rotational basis."

Findings and Evidence:

The College has sufficient technological resources for its needs, but maintenance and renewal of technology is a recognized challenge. The Technology Committee created a five-year Technology Master Plan, which identifies the technological needs of the College through surveys, program reviews and other College committees. This plan is reviewed annually. The upgrade of the firewall and the new Ellucian enterprise resource planning (ERP) system are some examples of needs identified, as a result of the annual evaluation done via program review. There are stated provisions for reliability, disaster recovery, privacy, and security. (III.C.1)

Evidence demonstrated the College makes decisions about the distribution of its technology resources based on the input of annual program reviews and both the Technology Committee and the Education Technology Committee. The Management Council prioritizes requests using a rubric. The final priority list for resource allocation is reviewed at the Budget Advisory Committee (BAC), and the BAC's recommendation goes to the College Council for consideration by constituency groups. (III.C.2)

The Information Services (IS) department's function is to maintain the College's technology. Information Services support technicians are responsible for nearly all electronic devices owned by the College. Each semester, the Technology Committee meets to review technology upgrades or replacements for the fiscal year. The College uses a combination of backup methods to maximize the efficiency, security, and integrity of the College's backups. In addition, year-end backups are pulled and stored offsite at the MCAGCC. (III.C.3)

Information Services staff and/or faculty provide technical training to other faculty and staff. There is an annual program review for the IS department. There is an identified need for a continuous technological training program. Although the IS department does not provide direct instruction to students, it does offer support on all types of technology to each member of the campus community. Students are surveyed for input on technological needs and can request technological help via the College's website under Distance Education webpage and/or MyCMC. There are established administrative procedures on the appropriate use and distribution of technological resources, for example, there is a "Computer Use Procedures/Electronic Media Use Guidelines", distributed to Faculty, Staff and Students. The institution publicizes this policy on the College's website on the Distance Education webpage. (III.C.4)

Faculty receive a Faculty Handbook that explains the College's policies. Faculty, staff, and students receive a Computer Use Policy approved by the College Council and the College's Board of Trustees. At the beginning of each year, the Information Services department sends out the Computer Use Procedures/Electronic Media Use Guidelines, for employees and students respectively. The student policy can also be found at MyCMC. The distribution of technology resources is decided primarily through the campus committee structure, specifically, both the Technology and the Education Technology committees. (III.C.5)

Conclusions:

The College meets the Standard.

III.D. Financial Resources

General Observations:

Copper Mountain College has established policies and procedures to ensure financial resources are sufficient to support and sustain the needs of the institution. The College has an integrated planning model that provides the structure for review and discussion of the budget. The College manages its financial resources with integrity and in a manner consistent with policies. The

College adopts budgets that include ongoing revenues exceed ongoing expenditures in the unrestricted general funds. The College's budget is driven from the mission, educational master plan, and strategic plan.

The College's annual budgeting process includes participatory governance whereby all user groups provide input. The College continues to improve the effectiveness of resource allocation. The College's budget process begins with program review. The resource allocation process ensures that budget priorities are allocated to requests that meet established goals and strategic initiatives. The Budget Advisory Committee reviews the prioritization list and identifies requests as recurring or ongoing.

The College has adequate internal controls to ensure fiscal integrity, which is evidence with the absence of financial statement audit findings (significant deficiency and material weaknesses). The College for the most recent three fiscal years has received an "unmodified/unqualified" audit opinion on the financial statements. These audits are considered "clean" audits.

The Business Office manages all financial transactions under the oversight of the chief business officer, and all financial transactions are included within the scope of the annual financial audit.

As part of the College's internal control system, they have developed professional development that is available to employees including professional development to the Business Office staff.

The College has sufficient cash flow and reserves to maintain stability. However, the team suggests the College continue to work with the County to reconcile cash held with the County Treasurer's Office. The College provides the board with monthly financial review reports. The College maintains reserves in accordance with BP 6250 Budget Management. The College prepares multiyear forecasts to monitor fund balance reserves. The College has a goal of maintaining a reserve of 10% as noted Board Policy 6250.

The annual budget includes resource allocations appropriate resources for payments of liabilities and future obligations. The College's 2018-19 adopt budget forecasts operating surplus and shows operating surplus in fiscal year 2017-18. The College is expected to spend 85% of its total unrestricted expenditures on salaries and benefits for the fiscal year 2018-19.

The College began taking steps to increase its reserves by adopting BP 6250, which states, "District's unrestricted general reserves shall be no less than 8.5%, with the goal of increasing the reserve by .5% each year until an unrestricted general reserve of 10% is achieved. At that time the minimum allowable unrestricted general reserves for the District shall be no less than 10%." In fiscal year 2017-18, the College achieved reserves above 10%.

The College plans for and allocates resources for the payment of liabilities and future obligations. The District set aside \$670,000 in reserves to future pension liabilities. However, the District has not set aside any funds towards their other post-employment benefits (OPEB) liability because it would jeopardize the institution's fiscal stability. The District's total OPEB liability as of June 30, 2018 totaled \$1,292,736. The annual cost of benefits for current retirees is \$60,543, which is on a pay-as-you-go basis. Though the College addresses its OPEB on a pay-as-

you-go basis, the team suggests the College develop a written plan that addresses its OPEB liability and allocate resources, if applicable.

The College approves an annual budget calendar by the Board of Trustees. The budget calendar includes timelines for the reporting to the College's Budget Advisory Committee (BAC) and the Board of Trustees. The BAC review enrollment forecasts and make recommendations to the Superintendent/President relative to budget preparation and the spending priorities.

The College monitors and manages compliance with student loan default rates, federal requirements including Title IV. The College's default rate for the three most recent fiscal years are below federal requirements. The College's two most recent audit reports noted one instance of noncompliance with federal requirements.

The College's contractual agreements with external entities are consistent with the mission and goals of the college.

Findings and Evidence:

The College's 2018-19 adopt budget is developed using the integrated planning model forecasts and focuses decisions based on the College Education Master Plan. The College has taken appropriate steps to increase its reserves by adopting BP 6250, which states, "District's unrestricted general reserves shall be no less than 8.5%, with the goal of increasing the reserve by .5% each year until an unrestricted general reserve of 10% is achieved. At that time the minimum allowable unrestricted general reserves for the District shall be no less than 10%." The College's 2017-18 reserve achieved its goal of 10%. The College three recent fiscal years has showed an operating surplus, which shows implementation of BP 6250. The College's 2018-19 adopted forecast an operating surplus and is expected to spend 85% of its total unrestricted expenditures on salaries and benefits for the fiscal year 2018-19. Financials are managed with integrity and provide dependable and timely information for sound decision-making.

The annual budget includes resource allocations to cover short-term obligations. The College's 2018-19 adopt budget forecasted operating surplus for the year. The Budget Advisory Committee set aside \$670,000 in reserves to future pension liabilities. The College does not do any multi-year budgeting however; annual budgets and reserves are adequate to meet current needs. The College has sufficient cash flow and reserves to support student programs and services. However, the College should continue to work with the County to reconcile cash held with the County Treasurer's Office.

BP 6200 – Budget Preparation - Each year, Chief Business Officer shall present to the Board a budget prepared in accordance with Title 5 and the California Community Colleges Budget and Accounting Manual (BAM). The schedule for presentation and review of budget proposals shall comply with state law and regulations and provide adequate time for Board study. (III.D.1)

The College uses participatory governance structures to ensure its mission is integrated and supports the institution's planning process. The resource allocation process ensures that budget priorities align with goals and strategic initiatives.

BP 6250 – Budget Management - The budget shall be managed in accordance with Title 5 and the California Community Colleges Budget and Accounting Manual. Budget revisions shall be made only in accordance with these policies and as provided by law. The District's unrestricted general reserves shall be no less than 8.5%, with the goal of increasing the reserve by .5% each year until an unrestricted general reserve of 10% is achieved. At that time, the minimum allowable unrestricted general reserves for the District shall be no less than 10%.

Revenues accruing to the District in excess of amounts budgeted shall be added to the District's reserve for contingencies. These accrued funds are available for appropriation. If at any time the District anticipates expenditures that may lead to a reserve of less than 8.5%, only upon a resolution of the Board that sets forth the need according to major budget classifications in accordance with applicable law can such expenditures be authorized. Board approval is required for changes between major expenditure classifications. Transfers from the reserve for contingencies to any expenditure classification must be approved by a majority vote of the members of the Board. Transfers between expenditure classifications must be approved by a majority vote of the members of the Board. (III.D.2)

BP 6300 – Fiscal Management - The Chief Business Officer shall establish procedures to assure that the District's fiscal management is in accordance with the principles contained in Title 5 Section 58311, including: Adequate internal controls exist. Fiscal objectives, procedures, and constraints are communicated to the Board and employees. Adjustments to the budget are made in a timely manner, when necessary. The management information system provides timely, accurate, and reliable fiscal information. Responsibility and accountability for fiscal management are clearly delineated. The books and records of the District shall be maintained pursuant to the California Community Colleges Budget and Accounting Manual. As required by law, the Board shall be presented with a monthly report showing the financial and budgetary conditions of the District. As required by the Budget and Accounting Manual, expenditures shall be recognized in the accounting period in which the liability is incurred and shall be limited to the amount budgeted for each major classification of accounts and to the total amount of the budget for each fund.

The resource allocation procedure requires program review process be completed in September. All resource requests are evaluated based on how they support established institutional and program goals. A rubric is used for ranking all requests. Final ranked lists are forward to the President's Council for final institutional prioritization and final approval. The final prioritization list is presented to Budget Advisory Committee. (III.D.3)

The Budget Advisory committee (BAC) is charged with providing an independent budgetary advice to the College Superintendent/President and Board to ensure that College resources are directed to the highest value and best use of available financial resources while ensuring the College's fiscal stability and regulatory compliance. In addition, during BAC deliberations, voting members are expected to regularly report to and solicit feedback from their participatory governance groups. The Budget Advisory Committee (BAC) reviews the final resource allocation prioritization list to identify funding sources and ongoing and one-time costs. The Strategic Initiatives outlined in the Education Master Plan determine the basis for which annual funding priorities are established (III.D.4).

BP 6300 – Fiscal Management - The Chief Business Officer shall establish procedures to assure that the District’s fiscal management is in accordance with the principles contained in Title 5 Section 58311, including: Adequate internal controls exist. Fiscal objectives, procedures, and constraints are communicated to the Board and employees. Adjustments to the budget are made in a timely manner, when necessary. The management information system provides timely, accurate, and reliable fiscal information. Responsibility and accountability for fiscal management are clearly delineated. The books and records of the District shall be maintained pursuant to the California Community Colleges Budget and Accounting Manual. As required by law, the Board shall be presented with a monthly report showing the financial and budgetary conditions of the District. As required by the Budget and Accounting Manual, expenditures shall be recognized in the accounting period in which the liability is incurred and shall be limited to the amount budgeted for each major classification of accounts and to the total amount of the budget for each fund.

The College has been able to close their books in a timely manner and filed their past audit reports by December 31. However, the College’s 2017-18 audit was not filed by the December 31 due date. The College’s past three audit reports reported no material weaknesses in internal controls over financial reporting however, in 2017-18 one significant deficiency was reported. The College appears to have adequate internal controls in order to assure financial integrity and provide dependable and timely information for sound decision-making. (III.D.5)

The College demonstrated how the Chief Business Officer reviews financial reports before being submitted to the Board of Trustees. The Chief Business Officer reports all budget adjustments/journal entries during the fiscal year for the board’s approval. The Chief Business Officer reports working budget vs. year to date actuals to the board on a monthly basis. (III.D.6)

The team confirmed that the College has received an “unmodified” audit opinion on the financial statements for the most recent three fiscal years. These audits are considered “clean” audits. The most recent 2016-17 audit report noted audit finding relating to federal compliance in the Student Financial Aid program. The College’s general obligation bonds audit and performance audit produced no findings. The Business Office manages all financial transactions under the oversight of the Chief Business Officer, and all financial transactions are included within the scope of the annual financial audit. The Chief Business Officer reports of results of the audit, including the audit findings to the board on an annual basis. (III.D.7)

For fiscal years 2015-16, 2016-17, and 2017-18, the College received an “unmodified” audit opinion on the financial statements. No material weaknesses were identified in these audits. The most recent 2017-18 audit report noted one significant deficiency audit finding stating the annual financial and budget report did not accurately reconcile to the College’s trail balance. (III.D.8)

The College reports cash balances to the Board on the “Monthly Financial Review Report” provided by the Chief Business Officer. The College reports the unrestricted cash balances separately from the College’s other funds. The College’s reserves for fiscal year 2017-18 were above the 10% minimum per Board Policy 6250. In addition, the College has set aside a total of \$670,000 to fund future pension (STRS/PERS) liabilities. (III.D.9)

An independent certified public accountant audits the College's accounting records, including its foundation, annually. The College developed and implemented corrective actions for audit findings reported in fiscal year 2016-17. The College's independent certified public accountant audits of the Financial Aid program noted one finding relating to cash management. The audit finding was resolved in the 2017-18 audit. The College reviews and updates, when appropriate, procedures focus on student financial responsibility. (III.D.10)

The College has developed an integrated budget planning system that considers both short-term and long-term financial needs. The College's budget includes and allocates appropriate resources for payments of liabilities. The Budget Advisory Committee review enrollment forecasts. The College engages outside professional services to establish funding levels for their other post-employment benefits. However, the College has not been able to set aside any resources for its OPEB liability. The College has implemented policies that limit the amount of vacation an employee can accrue. The budget forecast includes estimated increases from CalPERS and CalSTRS pension payments. The forecast is used to ensure reserves levels are adequate and comply with board policy. (III.D.11)

The College has not planned for or allocated resources for the payment of liabilities for other post-employment benefits (OPEB). The College does not have a trust and has not set aside any funds towards their OPEB liability because it would jeopardize their fiscal stability. The District's total OPEB liability as of June 30, 2018 totaled \$1,292,736. The annual cost of benefits for current retirees is \$60,543, which is on a pay-as-you-go basis. It is suggested the College develop a written plan that addresses its OPEB liability and allocate resources, if applicable. (III.D.12)

The team found that the College's actuarial plan is current and prepared in accordance with generally accepted accounting principles under Governmental Accounting Standards Board statement 74/75. (III.D.12)

The College assesses and allocates adequate resources to for repayment of all locally incurred debt such as their line of credit. The line of credit was no longer needed and was canceled in fiscal year 2017-18. The College has no other incurred debt instrument. (III.D.13)

The College has a foundation that is governed by the Foundation's Board of Directors. A separate finance committee monitors expenditures and activity within the Foundation. The Foundation received an unmodified opinion and no audit findings. (III.D.14)

The College has established policies, procedures, controls, and templates to assure the appropriate handling of financial resources. The College has established an internal control system and received an "unmodified" audit opinion on the financial statements for fiscal years 2013-14, 2014-15, 2016-17, and 2017-18. No significant deficiencies or material weaknesses were identified in these audits. The College has received "clean" audits. Departments manage the daily operations and reporting on grants funds and are reviewed by the Business Office. The Business Office monitors expenditures. The College has expended all of its bonds funds and all debt payments are label by the San Bernardino Auditor-Controller's Office. The College has no other short and long-term debt instruments.

The College monitors and manages compliance with student loan default rates, federal requirements including Title IV. The College's default rate for the three most recent fiscal years are below federal requirements. The College contracted with ECMC Solutions to assist in monitoring and providing student awareness regarding student loans. The College's 2015-16 and 2016-17 audit reports noted one instance of noncompliance with federal requirements, which was resolved in the 2017-18 audit. The Department of Education's website published the following default rate information for the College Fiscal Year (FY) FY 2013, FY 2014, and FY 2015 default rates are 27.8%, 29.2%, 20.1%, respectively. (III.D.15)

The College's contractual agreements with external entities are consistent with the mission and goals of the College. The College included copies of lease and contract templates. The College notes that contract templates include adequate standards and termination provisions. The Business Office reviews contracts for compliance to manage risk and maintain quality. Contracts not completed on standard templates, containing unusual risks, or uncommon terms are submitted to legal counsel for review. Contracts are summarized and submitted to the board for ratification. (III.D.16)

Conclusions:

The College meets the Standard.

Standard IV

Leadership and Governance

IV.A. Decision-Making Roles & Processes

General Observations:

Improved practices and protocols encourage College constituency (students, faculty, staff, and managers) contributions to effective planning and implementation. Institutional documents codify roles and authority in College decision-making.

Findings and Evidence:

Semi-annual department meetings, All-Staff Days, “lunch with the President”, and campus climate surveys provide informal constituent members opportunities for input. The College Institutional Roles, Responsibilities, and Procedure Handbook identifies formal decision-making roles for campus constituencies. College Council is described as the “hub” of CMC participatory governance and the team found evidence whereby systematic processes resulting in significant institution-wide improvement occur. One such example is demonstrated in College Council meeting minutes where discussion of Guided Pathways resulted in valuable feedback about the project. Through review of minutes and College Council member interviews, the team confirmed that students, staff, faculty, and administrators may initiate conversations about program and service improvements. Constituents collectively agree the College’s leadership is exemplary in creating a culture of transparency and empowerment. This praise for leadership was persistent and noteworthy, with comments such as, “I feel empowered,” echoing throughout the campus. College Council members noted the relatively new communication structure that significantly contributes to the functioning of the college. According to the Academic Senate members, the College Council allows each group to have a venue to express concerns and recommendations for improvement. Student representatives, trustees, classified staff and others shared specific incidents about moments when their voice was not only requested but also heard. The 2018 Annual Employee Survey substantiates some of these claims with 70% of employees surveyed indicating they “had sufficient opportunity to participate in the planning process.” The team heard College personnel and students overwhelmingly confirm leadership’s direct impact on trust building and the transformational change of the College environment. (IV.A.1)

The team confirmed that student, staff, faculty, and administrative decision-making provisions are codified in the Institutional Roles and Responsibilities Handbook. For example, the College provided the team with a copy of a College Council charter that included a Council mission statement, broad representative membership, meeting rhythm, and reporting requirements. Board Policy 2510: Participation in Local Decision-Making, provides provisions for students, staff, and the Academic Senate. Board Policy 2015: Student Member, describes the Student Trustee role as an advisory member of the Board of Trustees. Copper Mountain College Foundation bylaws similarly recognize a Student Member, annually designated by the

Superintendent/President to the Foundation Board. The Institutional Roles, Responsibilities, and Procedures Handbook is grounded in a Philosophy of Governance supporting the manner in which individuals work together at CMC, as demonstrated to the team by results of the climate surveys. (IV.A.2)

Evidence provided to the team demonstrates how CMC program review processes undergird annual budget development in a systematic fashion. The College provided Budget Advisory Committee (BAC) meeting minutes, for example, and resource requests have been declined due to requests not adhering to the resource allocation process and following the College's requirement to link requests to the program review process. The BAC is constituency-based and recommends resource allocation recommendations directly to the Superintendent/President. (IV.A.3)

Board Policy 4020: Program and Curriculum Development documents the consultative relationship between administration and Academic Senate with regards to curriculum development, maintenance, and discontinuance. The College provided minutes of several Academic Senate Operational Committees (Transfer Center Advisory, Flex, Curriculum, and Educational Technology) as procedural evidence of systematic CMC curriculum, program, and service development. (IV.A.4)

The team reviewed written and interview data demonstrating a commitment to timely action about institutional plans, policies, and curricular changes. The 2015 creation of a new CMC Director of Institutional Effectiveness position and subsequent work products like that of a College Institutional Effectiveness Committee, an annual Institutional Effectiveness Report, as well as the College Council Actionable Items Tracking Chart are noteworthy. (IV.A.5)

Campus Update newsletters, Board Reports, and e-Newsletters from the Superintendent/President's Office demonstrate a commitment to documented decision-making across the institution. Board approved 2017-2018 Superintendent/President Goals include "Develop and implement consistent and reliable communication strategies that keep the campus community well-informed and engaged in the participatory governance process". (IV.A.6)

Superintendent/President Goals also include "the development of comprehensive plan linkage and implementation of the Educational Master Plan as an institutional priority". The team recognized a commitment to process and procedural assessment as documented in written form and interviews. For example, the CMC Educational Master Plan commits the institution to an annual plan development and update intended to "increase the intentionality of our efforts on an ongoing basis". Written evidence and interviews demonstrate a regular evaluation of CMC decision-making policies, procedures, and processes through annual internal and external committee surveys. (IV.A.7)

Conclusions:

The college meets the Standard.

Commendation 2:

The Team commends the College's leadership in creating and encouraging innovation resulting in institutional excellence, and for empowering all employees to take initiative to provide exemplary service to students and the broader community. (IV.A.1)

IV.B. Chief Executive Officer

General Observations:

The Superintendent/President began his interim position in 2014 and later named to the permanent position in May 2015. The team found written and interview evidence of the Superintendent/President's effective leadership resulting in improved planning and institutional effectiveness practices. The Superintendent/President leads college-wide dialogue codified in governance practices and grounded in data-driven decision-making.

Findings and Evidence:

The team reviewed written and interview evidence of the CEO's overall leadership resulting in the CMC Integrated Planning Model, Institutional Effectiveness Committee, and the creation of an Office of Institutional Effectiveness. The Director of Institutional Effectiveness reports to the Superintendent/President and they jointly develop strategies to propose SLO/PLO assessment linkages with College planning. Written evidence and interviews demonstrate the CEO's role in a regular evaluation of CMC planning cycle output and processes. For example, the Superintendent/President chairs College Council, where Budget Advisory Committee recommendations aligned with the College Educational Master Plan are vetted and then move forward the President's Office. (IV.B.1)

The Superintendent/President has appropriately organized and staffed the CMC administrative structure relative to the purpose, size, and complexity of the institution. On-site interviews confirmed college-wide dialogue resulting in the abandonment of a proposed instructional and student services vice president position in favor of separate CIO and CSSO positions. The team reviewed evidence demonstrating how the CEO delegates authority to administrators and others consistent with their responsibilities under this new administrative structure. (IV.B.2)

The team reviewed evidence substantiating how the Superintendent/President guides improved institutional teaching and learning, aligned with goals articulated in the Educational Master Plan. College management and Budget Advisory Committee recommendations made to the Superintendent/President ensure integrated planning and allocations. The team reviewed recent prioritized allocation recommendations made to the Superintendent/President. Campus leaders meet regularly with the Superintendent/President, ensuring constituent representatives an opportunity to discuss relevant issues. The team examined College Council minutes and other documents as evidence of collegial deliberation and final resource allocation recommendations made to the CEO. Established program review processes and College climate surveys, provide evidence of systemic assessment efforts led by the Superintendent/President intended to achieve the College mission. (IV.B.3)

The Superintendent/President assumes primary leadership for accreditation at all times, as codified in Board Policy 3200 and evidenced by Board minutes. The team reviewed evidence of intentional accreditation-related delegation to the College Accreditation Liaison Officer, faculty, staff, and administrators. The current Superintendent/President position announcement calls for the CEO to effectively navigate the “complexities of the California Community College policy, legal, and accreditation environment or equivalent”. (IV.B.4)

The CEO ensures consistent statutory and regulatory implementation as authorized in Board Policy 2430: Delegation of Authority to the Superintendent/President. The Superintendent/President led Board-level discussions resulting in the establishment of a minimum reserve policy, further evidence of effective budgetary controls and expenditures. (IV.B.5)

The Superintendent/President engages with CMC service area communities as a service club and local foundation member. The team also reviewed significant evidence of CMC and Morongo Unified School District integration efforts led by the Superintendent/President. (IV.B.6)

Conclusions:

The College meets Standard.

IV.C. Governing Board

General Observations:

Copper Mountain College has a five-member elected Board and one Student Trustee elected annually by student body. The five elected Board members serve four-year terms. The Board of Trustees demonstrates an understanding of their authority and acts cohesively to serve Morongo Basin constituents.

Findings and Evidence:

Board Policy 2200: Board Duties and Responsibilities codifies roles in accordance with Education Code. The Policy identifies general responsibilities to represent the public interest; establish and maintain policies; advocate for the District; and to assure fiscal health and stability. The College provided to the team a five-year BP and AP review rotation captured within a Master Tracking Sheet. (IV.C.1)

Board Policy 2715: Code of Ethics and Standards of Conduct commits all members as “stewards of the public trust, serving the needs of district citizens”. The Board has adopted “Six Pillars of Character” core values, ensuring that it acts collectively with “primary loyalty to the college and the public good”. (IV.C.2)

Board Policy 2431: CEO Selection, details search processes when a vacancy occurs. CMCCD Board of Trustees evaluate the Superintendent/President at least once each year. Campus

constituents have an opportunity to view a summary of the CEO evaluation. Evaluation criteria are grounded in mutual goals, job description, and BP 2430: Delegation of Authority to the Superintendent/President. (IV.C.3)

The team reviewed CMCCD Board minutes and interviews confirmed the body acts with “primary loyalty to the college and public good”. The team reviewed evidence of the Board’s community engagement and commitment to improved educational programs and services. Board Policy 2200: Board Duties and Responsibilities codifies the Board as an independent, policy-making body and advocate for the college. (IV.C.4)

Board and Superintendent/President responsibilities related to policy establishment and review are codified in BP 2410: Board Policies and Administrative Procedures. The team reviewed a Master Board Tracking document as demonstration that the Board has ultimate responsibility for CMCCD educational quality, legal matters, and fiscal health. A review of Board agendas and meeting minutes confirms the governing board’s commitment to quality, integrity, and improved student learning programs and services. (IV.C.5)

Several CMCCD Board Policies posted on the college website describe CMCCD Board composition, size, responsibilities, structure, and operating procedures. All such policies are archived in BoardDocs and available to the public. (IV.C.6)

A review of Board agendas and minutes demonstrate Board actions are consistent with policies and bylaws. The Master Tracking Board Policy document reveals that CMCCD Board Policies and Administrative Procedures are scheduled on a five-year assessment cycle. The team found that some Board Policies and Administrative Procedure reviews are delinquent, though there is a significant College-wide focus on completing these delinquent Policies and Procedure updates. The team suggests the College continue to review all Board Policies and Administrative Procedures as documented in the Master Tracking Board Policy document. (IV.C.7)

The team reviewed several Board agendas and minutes to confirm each has a standing Academic and Student Success Report to the Board of Trustees. Transfer, Guided Pathways, enrollment management, and institutional effectiveness are among the topics under review by the Board. The Board annually reviews the CMC Institutional Effectiveness Report. A review of agendas and minutes also reveals the Board’s review of Institution Set Standards and Targets. (IV.C.8)

The team reviewed regular and special Board meeting agendas and minutes, confirming a commitment to ongoing Trustee training and orientation practices. All of the current CMCCD Trustees have attended at least one CCLC Trustee Conference. Board Policy 2100: Board Elections and Administrative Procedure 2110: Vacancies on the Board provide mechanisms for Board continuity. (IV.C.9)

Board Policy 2745 delineates CMCCD Board self-evaluation processes and timelines. The team reviewed recent self-evaluations, confirming the Board’s commitment to sustained academic quality and institutional effectiveness. The team reviewed evidence of improved trustee on-boarding curricula as a recent outcome of the CMCCD self-evaluation processes. (IV.C.10)

The team reviewed written and interview evidence establishing CMCCD Board compliance with BP 2710: Conflict of Interest and BP 2715: Code of Ethics and Standards of Conduct, and BP 2717: Personal Use of Public Resources. The team found no evidence of any violations of the aforementioned Policies. (IV.C.11)

Board Policy 2430: Delegation of Authority holds the Superintendent/President accountable for College operations. Board Policy 2435: Evaluation of the Superintendent/President outlines Board evaluative criteria. The Board and Superintendent also conduct an annual mid-year review of progress made towards shared goals. (IV.C.12)

Copper Mountain College's 2018-2019 Annual Goals include an accreditation timeline, evidence of the Board's mindfulness. The team reviewed evidence of the Board's accreditation training practices as well as their regular review of the College's progress towards addressing Eligibility Requirements, Accreditation Standards, and Commission Policies. (IV.C.13)

Conclusions:

The College meets the Standard.

Quality Focus Essay

The ACCJC's Guide to Institutional Self-Evaluation identifies the function of the QFE as "the opportunity for member institutions to be innovative and to propose new ideas and projects that will improve student learning and/or student achievement at the institutional level." To this end, colleges are to "identify two or three areas of need or areas of interest that arise out of the institutional self-evaluation and that focus on student learning and student achievement." The team acknowledges the collaborative process and engagement of faculty and management in identifying the QFE projects.

The College articulates the intent of the project as "to improve documenting student learning outcomes." This project is timely for the college and has the potential to 1) address areas for improvement identified by visiting team and 2) improve student learning and achievement. Recommendations for shaping this project include:

- Carefully articulate the problem to be addressed
- Clarify the project's impact on student learning and achievement
- Ensure that faculty regularly engage in SLO assessment, even as the details of the assessment cycle and documentation process are in flux.

In presenting the QFE projects, colleges are to include "introductory discussion of the *student learning or student achievement data* that led to identifying the area of need or area of interest, [and] a brief discussion of the anticipated impact of the project *on student learning and/or student achievement.*" In the Project #1 overview, the college identifies "a trend in lower completion rates of SLO outcomes." The team appreciates this starting point and urges the College to expand their level of inquiry and investigation.

Recommendations for using data:

- Identify how the QFE project originates from institutional data
- Collect data specific to measuring the rates of SLO Assessment completion
- Use data to link the project to specific and measurable targets measuring the impact on student learning

QFE Project #2 outlines the important work of adopting a Guided Pathways framework. The team applauds the College's enthusiasm and commitment to the Guided Pathways model for improving student achievement. While the College has already begun steps toward implementation, full implementation of Guided Pathways seems ambitious for a QFE project, in terms of both scope and resources.

The ACCJC's Guide to Institutional Self-Evaluation identifies the function of the QFE as "the opportunity for member institutions to be innovative and to propose new ideas and projects..." In the spirit of the assignment instructions, the team would recommend the following:

- Narrow the scope of the project to ensure capacity
- Focus on a new idea or project that fits into the existing Guided Pathways efforts
- Consider reducing the project to one area, such as, Pillar 4: Ensuring equity, completion and learning

- Identify measurable outcomes that assess the project's impact on student learning and achievement.