

Follow-Up Visit Peer Review Team Report

Palo Verde College
One College Drive
Blythe, CA 92225

This report represents the findings of the Peer Review Team that conducted a virtual visit to Palo Verde College October 25-26, 2021. The Commission acted on the accredited status of the institution during its January 2022 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Submitted to:

The Accrediting Commission for Community and Junior Colleges

Submitted by:

Dr. Eva Bagg - Superintendent-President, Barstow Community College
Dr. Matthew Goldstein - Instructor, College of Alameda
Dr. Carol Kozeracki - Dean of Liberal Arts, Los Angeles City College
Dr. Susan Murray - Dean of Institutional Effectiveness, San Diego City College

Date: November 17, 2021
To: Accrediting Commission for Community and Junior Colleges
From: Dr. Eva Bagg
Subject: Follow-Up Team Report to Palo Verde College, October 25 - 26, 2021

Introduction

The Peer Review Team for Palo Verde College (PVC) completed its initial visit to the college from March 2 – 5, 2020. At its meeting June 10 - 12, 2020, the Commission acted to Reaffirm Accreditation for 18 months and Require a Follow-Up Report, due no later than October 1, 2021, followed by a visit from a peer review team.

Members of the peer review team conducted the Follow-Up site visit to Palo Verde College on October 25 -26, 2021. The purpose of the team visit was to verify that the Follow-Up Report prepared by the College was accurate, and through thorough examination of the evidence, to determine if the institution has resolved the deficiencies noted in the compliance requirements, and now meets Eligibility Requirements, Accreditation Standards, and Commission policies.

The team found the college was very accommodating in arranging for meetings with groups and individuals and by promptly providing relevant evidence and access to courses delivered to students through the college's online learning management system. The college also ensured access to the web-based software it uses to store student learning outcome information at the course, program and institution levels.

Over the course of the two-day visit, the team met with the following individuals and groups:

Don Wallace, Superintendent-President
William Smith, Acting Vice President of Instruction and Student Services and Accreditation Liaison Officer
Biju Raman, Dean of Instruction and Student Services and SLO Coordinator
Brian Thieboux, Division Chair, English/Business Instructor

Distance Education Coordinator and Faculty Members who teach online modality
Biju Raman, Maria Kehl, Richard Castillo, Esmeralda Lopez, Timothy Bolin, Adrian Casas, Peter Martinez, Juliette Singler

ALO & Accreditation Taskforce
William Smith, Biju Raman, Brian Thieboux, Adrian Casas

Individuals to address questions relating to institutional research
William Smith, Biju Raman, Irma Gonzalez, Shelley Hamilton

Faculty Members who oversee professional development

Sarafina Redwine, Greg Snider

Chair of Academic Standards & Academic Senate President

Sarah Frid

Program Review Committee

William Smith, Biju Raman, Timothy Bolin, Silvia Lainez, Alejandro Clark, Irma Gonzalez

The Follow-Up Report and Visit were expected to document resolution of the following compliance requirements:

ACCJC Policy on Student and Public Complaints Against Institutions

(Requirement 1): In order to meet the Commission's policy, the Commission requires the institution widely communicate its formal student grievance process so that all students are aware of their rights and responsibilities.

ACCJC Policy on Distance Education and Correspondence Education

(Requirement 2): In order to meet the Commission's policy, the Commission requires the institution establish a policy defining regular and substantive instructor-initiated contact with students for Distance Education courses. The college must provide professional development opportunities for faculty teaching online to ensure Distance Education courses include regular and substantive instructor-student interaction.

Standard I.B.2, I.B.4, II.A.3

(Requirement 3): In order to meet the Standards, the Commission requires the institution regularly assess student learning outcomes for course, program and institutional levels and use assessment data to support student learning and achievement.

Standard I.B.3

(Requirement 4): In order to meet the Standard, the Commission requires the institution consistently use institution-set standard data to address student achievement gaps.

Standard I.B.5, II.A.2, II.C.1

(Requirement 5): In order to meet the Standard, the Commission requires the institution assess accomplishment of its mission through program review by consistently and systematically evaluating programs and services.

Team Analysis of College Responses to the June 29, 2020 Commission’s Requirements

Requirement 1

ACCJC Policy on Student and Public Complaints Against Institutions

In order to meet the Commission’s policy, the Commission requires the institution widely communicate its formal student grievance process so that all students are aware of their rights and responsibilities.

Findings and Evidence:

The Team confirmed that the current PVC website has prominently displayed on its front page a blue button labeled “Student Concerns.” By clicking on this button, the student is taken to information about the college’s student grievance process and to the student grievance form.

The PVC College Catalog was also confirmed to contain a section on Students Rights and Responsibilities, which includes information about the student grievance process and points students to Administrative Procedure 5530, which delineates the grievance process. This section of the College Catalog also includes information about how students may file a complaint in accordance with Board Policy and Administrative Procedure 3410.

The Team also confirmed that students are provided information about how to file a formal grievance in the PVC Handbook/Planner, which is made available to all students via the college website. The section on Complaint Procedures/Due Process appears on page 109 of the 2020-2021 Student Handbook/Planner.

Since incarcerated students served by PVC are not permitted access to the internet where the College Catalog and Handbook/Planner are published, the college relies on hard copy publication and distribution of the PVC Correspondence Handbook to communicate important information to this special population of students. The Team confirmed that on page 35 of the PVC Correspondence Handbook, there is information detailing how students may file a grievance. Form N, found on page 52 of the Handbook, is used for students to file a formal grievance. College staff reports having distributed the Handbook and the student grievance forms directly to incarcerated students.

The Team also confirmed that the evidence provided in the PVC Follow-Up report demonstrates that the college has established a system for documenting and tracking student complaints and concerns and that the system provides for tracking of student follow-up and closure of complaints.

Conclusion:

The college has addressed the requirement, corrected the deficiencies, and now meets the Commission’s policy.

Requirement 2

ACCJC Policy on Distance Education and Correspondence Education

In order to meet the Commission’s policy, the Commission requires the institution establish a policy defining regular and substantive instructor-initiated contact with students for Distance Education courses. The college must provide professional development opportunities for faculty teaching online to ensure Distance Education courses include regular and substantive instructor-student interaction.

Findings and Evidence:

Team members interviewed academic administrators, teachers of Distance Education courses, the presidents of the academic senate and faculty union, and organizers of college professional development activities.

The Team found that Palo Verde College (PVC) has established official policies that define regular and substantive instructor-initiated contact with students for Distance Education courses. The Team further found that PVC has made available professional-development opportunities for faculty teaching online to ensure that Distance Education courses include regular and substantive instructor-student interaction.

As evidenced in PVC’s follow-up report, Administrative Procedure 4105 was revised significantly since the Team’s 2020 Comprehensive Review Visit. Developed by a team of college faculty and administrators, formally accepted by the Board of Trustees on June, 8, 2021, AP 4105 now sets out detailed requirements for faculty to follow to ensure regular and substantive teacher-initiated student contact, now commonly referred to as Regular and Substantive Interaction (“RSI”). AP 4105 describes eight specific ways for faculty to achieve RSI in Distance Education classes. Federal regulations and ACCJC standards on DE underwent adjustments between the Team’s Comprehensive and Follow-up Visits; PVC’s revised AP 4105 is written effectively to meet the recently revamped regulatory and commission requirements.

PVC has implemented certification policies and professional development opportunities to ensure that RSI is practiced in all the college’s Distance Education offerings. Per recent academic senate recommendations and updates to the faculty Collective Bargaining Agreement (CBA), PVC DE faculty must successfully complete, at district expense, an intensive course in online pedagogy and course design, or demonstrate equivalent training, before teaching a DE class. Flex-day activities include DE-related sessions, and faculty leadership routinely circulates RSI tips and virtual trainings via email; the PVC library maintains a DE resources page on its website.

The Team reviewed a sampling of courses offered online during spring 2021 and noted in many RSI practices consistent with the new PVC policies. A few of the courses observed fell short of the new policies, some appearing to be insufficiently adapted correspondence courses (understandable given the college’s exceptional, longstanding commitment to correspondence education, especially of incarcerated students); however, PVC’s revised DE policies went into effect after the end of the spring term, and structures are in place to ensure continued improvement for all DE offerings. The team encourages the college to build on its excellent

work and consider protocols for ongoing review of the effectiveness of Canvas shells.

Conclusion:

The college has addressed the requirement, corrected the deficiencies, and now meets the Commission's policy.

Requirement 3

Standard I.B.2. I.B.4, II.A.3

In order to meet the Standards, the Commission requires the institution regularly assess student learning outcomes for course, program and institutional levels and use assessment data to support student learning and achievement.

Findings and Evidence:

The Team interviewed members of the Accreditation Task Force and the Program Review Committee to ask questions about the process for assessing and applying the results of learning outcomes at the course, program, and institutional level. The Team also reviewed the course learning outcomes assessment results posted in eLumen and the Program Review reports that serve as the source of information for Program Learning Outcomes.

Palo Verde College began using eLumen as the repository for course-level learning outcomes results in Fall 2020. The college provided the Team with an SLO Schedule that was updated on August 31, 2021. It lists the expected semesters for all college courses to be uploaded into eLumen. Compiled results are posted and faculty are asked to comment on the students' assessment results, differences seen by modality (correspondence, face-to-face, online), conclusions drawn, actions to be taken based on results, and changes to be made to the CLOs.

Fifty-one (51) courses were listed as being assessed in Fall 2020 and Spring 2021. Thirty of those reports were randomly selected and reviewed. Scheduled assessments did take place except in cases where the classes were cancelled. Faculty comments were generally brief and confirmed that the majority of students met the 70% threshold for success and that no changes were needed in the courses. However, some faculty did offer recommendations, including: increasing engagement (especially in Correspondence courses), providing extra support for topics addressed by the SLOs, and providing assistance with basic writing skills. The eLumen process does not provide a forum for discussing the results, but faculty can read each other's comments. The opportunity for interaction regarding results is designed to take place at the time the comprehensive Program Review reports are completed.

The Comprehensive Program Reviews (full and CTE) provide Program Level Outcomes, which are "rolled up" from the course-level outcomes. The author of the Academic Program Review is asked to provide specific examples of course, program, and certificate improvements resulting from the assessment of learning outcomes. Service areas are requested to provide metrics for the Service Areas Outcomes and then comment on changes made. The Program Review Guide (2016) offers instructions for completing this section. The 23 programs that completed the comprehensive program reviews in 2020 all provided the necessary data and all except one responded to the request for changes and initiatives undertaken to improve SAO results.

Conclusion:

The college has addressed the requirement, corrected the deficiencies, and now meets the Commission's Standards.

Requirement 4**Standard I.B.3**

In order to meet the Standard, the Commission requires the institution consistently use institution-set standard data to address student achievement gaps.

Findings and Evidence:

Team members interviewed faculty and administrators who participate in and oversee processes designed to collect, analyze and respond to student learning and achievement outcomes, examined the college's institutional effectiveness website where institution-set standards are made publicly available, thoroughly examined the Program Review guide which was updated in response to the Commission requirement, examined all 15 program reviews conducted after the comprehensive team visit, and requested and reviewed program collection and analyses of licensure examination pass rates and job placement rates where available.

The Team examined the Program Review guide that includes templates for instructional and learning support areas to evaluate and identify areas for improving student learning and achievement. As reported in the Follow-Up report, the Team verified that the guide has been revised to include institution-set standard data in order to meet the Commission requirement. Specifically, the template now includes, in prominent red font, a prompt for including the institution-set standard for course completion where "student successful completion and retention" data is reported in the "CTE Full Review" template.

Also, on page 20 of the "CTE Update" reporting template, a prompt for the institution-set standard for course completion appears where course completion, course retention, and certificate and degree awards are to be reported. Further, in the program review template for "Learning Support Full Review," there now appears a section entitled "Institution-Set Standards Data," and a notation indicating that this question is for Counseling program review reports only. The template prompts for transfer counts for multiple years as well as for the average number of accumulated units for AA or AS degree earners (see page 25 of the template). The Team was not able to confirm inclusion in the program review templates prompts for other institution-set standards shown on the institutional effectiveness website, nor was it able to confirm inclusion of prompts for the other federally required data on licensure examination or job placement rates. The Team did, however, request and receive evidence of the collection and analysis of examination pass rates for vocational nursing, CNA and criminal justice programs. Evidence was also provided on data collected for job placement rates for Nursing. Interviews with college staff confirmed that with the addition of a job placement technician provided for by regionally-focused state funding, more job placement tracking will be possible.

The Team reviewed all CTE full program reviews conducted most recently, many completed

after the college received this requirement from the Commission. Almost all of the reviews included the institution-set standard for course completion. It was observed, however, that a few of these inserted a value that was not consistent with the institution-set standard of 73.5% as is documented on the college's institutional effectiveness website. Some of the CTE full reviews included faculty discussion on ways to improve course completion and retention in order to close the gap where the course completion fell below the set standard. No evidence of explicit comparison to the institution-set standard of 87% for retention was found. Many of the reviews also included discussion about certificate and degree completion and ways to make improvements, although none were set in relation to institution-set standards for these metrics.

The 2020 program review for Instruction and Student Services notably includes in section #3 of the report on "Accomplishments in Achieving Goals" an articulation of accomplishments to the institution's strategic planning goal 4.1.1.2 which commits to determining the appropriate institution-set standards for student achievement, including course completion, program completion, job placement rates, and licensure examination passage rates and to reporting these data to ACCJC each year. The Team observed that later in this report, completion and retention outcomes were discussed in relation to institution-set standards for these metrics. Certificate completion, degree completion and transfer outcomes were included but not in relation to the institution-set standards for these metrics. There was no mention of the average number of units accumulated for degree completers.

The Team also reviewed the Annual Snapshot reports posted on the Program Review website that captures course completion rates by academic division. These snapshots provide analyses of this metric, not against the institution-set standard for this metric, but there are significant comparisons by ethnic group and other groups deemed important by the college in accordance with its mission; these include students who are inmates, disabled students, foster youth, and veterans. Analyses and discussion about ways to improve are made in relation to the highest performing groups, as are most disproportionately impacted student analyses.

The Team observed that institution-set standards are reported on the college's institutional effectiveness webpage but that outcomes for these metrics have not been updated to include the most recently available data. (The Team also learned that the college's institutional researcher had left the college a few weeks prior to the follow-up visit, leaving the position currently vacant.) Interviews with college staff revealed that although there is not yet in place a formal mechanism for monitoring at the institution level performance that falls beneath the institution-set standards, an organic evolution of the communication process already well-established for PVC could be easily leveraged to do so. This process involves the discussion of program review data (and especially that included in and extensively discussed in the program review for the combined areas of instruction and student services) at the Program Review Committee. Program reviews are then shared with College Council and next reported to the Board of Trustees. The Team further confirmed with interviews of college staff that it makes sense to the college to include in its Instruction and Student Services program review those institution-set standards that are published on the institutional effectiveness website and reported annually to ACCJC. Prompts for these data could easily be added to program review templates to ensure attention is paid to performance at the institution level and discussion is documented on ways to address instances where actual outcomes may fall below the standard. Interviews with college staff even indicated that annual discussion of the ACCJC annual reporting of

performance on all required metrics, including license exam and job placement rate where standards are probably most meaningfully set at program levels rather than at an institutional level, could be presented regularly at College Council and then on to the Board.

In sum, while the college made important strides toward compliance by adding the institution-set standard for course completion into the program review template and has added other institution-set standard prompts into the program review for some units, including Counseling and the combined unit for Instruction and Student Services, it still needs to address the remaining metrics for which the college has set institution-set standards and that are listed under federal regulations (602.16(a)(1)(i)). The college also needs to provide a mechanism so that there is systematic monitoring in place to identify when there are may be gaps in student achievement and to facilitate discussion about ways to improve performance. The team encourages the college to consider leveraging its existing and effective evaluation and communication processes to ensure that student achievement at the level of the institution is monitored against institution-set standards as it is currently happening at programmatic levels.

Conclusion:

In order to meet Standard I.B.3, the Commission requires the institution consistently use institution-set standard data to address student achievement gaps. The college has not fully addressed this requirement and does not meet the Commission Standard.

Requirement 5

Standard I.B.5, II.A.2, II.C.1

In order to meet the Standard, the Commission requires the institution assess accomplishment of its mission through program review by consistently and systematically evaluating programs and services.

Findings and Evidence:

The Team interviewed members of the Program Review Committee as well as faculty and administrators involved in the Accreditation Taskforce, and faculty in leadership roles including division chair and Academic Senate president.

The Team found that the college has implemented a consistent and regular system of program review. A schedule matrix, comprehensive guide, and data resources are available on the college website, and completed reports are also published online. The college has completed the changes to the process that were planned or newly instituted at the time of the comprehensive review in 2020. Team members were able to align completed reports with the posted schedule and confirm that both instructional and administrative areas are actively participating in program review. A systematic structure is provided through templates for instructional and administrative areas, and through data tables produced by Institutional Research. Narrative questions in the templates prompt reflection on outcomes and documentation of plans for improvement.

Program review reports undergo three levels of review and approval, with feedback to the presenting departments that informs revisions and resubmission if warranted. Reports are presented by department or division leads to the Program Review Committee, College Council, and the Board of Trustees, confirmed through review of meeting agendas.

Academic programs complete a full review on a four-year cycle. Overall data on student achievement metrics is provided by Institutional Research for the four-year reviews. In addition, all instructional divisions receive an annual snapshot addendum with course completion data disaggregated by student characteristics such as ethnicity, gender, incarcerated students, and veteran status. The Team verified and reviewed completed reports on the college website.

Service area reviews for administrative and student services have been clarified and are completed annually. Service area outcomes are defined by the individual programs with data collected internally by each area. The college has completed two cycles of annual reports under this new framework, with a third due later this year.

Assessment of mission accomplishment is supported in program review by including questions in the templates that address the alignment between program goals and the institutional goals and objectives in the college's Strategic Plan.

Both the published schedules and reports and the conversations during interviews indicate broad engagement in the college's program review processes and a shared understanding of the purpose.

Conclusion:

The college has addressed the requirement, corrected the deficiencies, and now meets the Commission's Standards.