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Follow Up Report

*Accrediting Commission for
Community and Junior Colleges*

Team Site Visit Report

University of Hawai'i Kaua'i Community College

**A confidential report prepared for
The Accrediting Commission for Community and
Junior Colleges**

This report represents the findings of the evaluation team that visited
Kaua'i Community College on November 18, 2013

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Introduction:

Kaua'i Community College received notice in February that the Commission acted to reaffirm accreditation based on among other factors the college's Institutional Self-Evaluation Report and an Evaluation Report completed by a team of evaluators based on a site visit that occurred between October 15 and 18, 2012. The Commission required the College to complete a Follow-Up Report and was asked to focus its efforts on Recommendation 1, Recommendation 2, and Recommendation 4 as those recommendations included factors previously identified by an evaluation team during its site-visit in 2006.

The College provided comments on all of its recommendations and the evaluation team in turn has prepared comments and conclusions on each of the College's recommendations. For University of Hawaii, Community Colleges system recommendations the team members provided information to the evaluation team that conducted the site visit at the system office on the island of Oahu. The findings and conclusions on the Community Colleges system recommendations are included in this report for consistency in reporting.

In preparation for the visit the team members reviewed the prior evaluation report prepared as a result of the October 2012 comprehensive review site visit. The Commission's action letter was reviewed and information was exchanged with College personnel to arrange for interviews, reviews of evidentiary material in support of the College's reported actions that brought the College into compliance with the Standards. During the site visit, team members met with the individuals who were involved in preparing the Follow-Up Report and others who had information available on the processes used and actions implemented to achieve compliance with Commission Standards.

The results of the work of the evaluation team are included in the remaining portions of this report. Of special significance that the team members want to note is the energy, passion, and attention to detail that was evident during interviews and in the results of the work performed by members of the College. As a result of this positive environment combined with the College's implementation of actions leading to the College now being in compliance with the Standards, the team felt it was important to commend the College on the environment that it created and the results it produced since the October 2012 site visit. Accordingly, the following Commendation is offered:

Commendation #1:

The team commends the Kaua'i Community College leadership team and offers special recognition to the Accreditation Liaison Officer for the complete and comprehensive actions in addressing each of the Recommendations included in the Follow-Up Report. The College's Espirit de Corps was noteworthy and evident to team members during every interview session that was conducted.

Finally, although it may not need to be repeated but for completeness of the reporting of activities the team noted that the College was well prepared for the site visit. Evidence to support

College actions was easily available and appropriately succinct making the team work easier which was significant given the limited time available to complete the site visit. The team appreciates all of the College's efforts and especially the work of the Accreditation Liaison Officer who worked closely with the team members to ensure activities on-site went smoothly.

Recommendation 1: Student Learning Outcomes

As noted in the 2006 visiting team report and to meet Standards, the team recommends that the College accelerate the development, implementation, and assessment of learning outcomes for all courses, programs, and student support services with special emphases on the assessment of institutional learning outcomes and on the timeliness and completeness of comprehensive program review. (ER 10, Standards I.B.1, I.B.6, I.B.7, II.A.1.c, II.B.4, II.C.2)

Findings and Evidence:

The College has accomplished a great deal in the past year. It has developed a database that is capable of mapping all course-level SLOs (CSLOs) to their corresponding program SLOs (PSLOs) and institutional SLOs (ISLOs). This database is currently functional and is capable of producing reports that show the numbers of CSLO assessments that have transpired which address a given PSLO or ISLO, as well as the percentage of those assessments which meet the standard.

Student Services has developed and assessed a number of SLOs in the areas of counseling, financial aid, outreach, admissions and records, student life, and academic services. All of these areas have completed at least one assessment cycle on at least one of their SLOs. The College can maintain the positive momentum generated by these assessment activities by pursuing opportunities to converse and have dialogue about the assessment results with various stakeholder groups. This dialogue should then lead to evidence-driven experimentation and implementation of ideas of how to improve student learning.

The College moved quickly to get the PSLO and ISLO assessment system implemented. The types of reports the system can generate, in tandem with the results from the CCSSE, are provocative and intriguing.

Comprehensive program review timelines have been clarified as well as the conditions under which a comprehensive program review may be delayed (e.g., no full-time faculty in a program area due to sabbatical).

Conclusion:

The College meets the requirements of Eligibility Requirement 10, Standards I.B.1, I.B.6, I.B.7, II.A.1.c, II.B.4, and II.C.2 and has implemented actions that fully address Recommendation #1.

Commendation 2:

The team was impressed with the college's development of the CSLO-PSLO-ISLO assessment matrix database and its use in addressing the need to map or chart the progress on course-level SLOs to program SLOs and to institutional SLOs. The team commends the College for its

initiative in this area as the team members can easily see how this database can have broader application and benefits beyond the College.

Recommendation 2: Institutional Effectiveness

As was noted in the 2006 visiting team report and to meet the Standards, the team recommends that the College:

- (a) develop a timeline for, and method of measuring its success in accomplishing its goals and quality assurance processes;**
- (b) integrate the results of measurements of success in accomplishing goals and quality assurance processes into its overall planning and decision making processes on a more comprehensive basis;**
- (c) incorporate on a regular basis the results of such measurements into the process of reviewing the mission statement. (Standards I.B.2, I.B.3)**

Findings and Evidence:

Kaua'i Community College's performance in achieving goals is measured annually and was last communicated to the broader College community during the Fall Convocation where the Chancellor presented both the goals and the College's progress on meeting its goals. This information is also provided and used as appropriate to the Office of the Vice President for Community Colleges as a way of reported College performance in accomplishment of system goals.

The established timeline for updating institutional effectiveness reports that show how well the College is accomplishing its goals has been outlined as follows:

- Early Fall—Review/Set priorities/objectives for the year—College Council and College Conversation - Sept
- Fall— Comprehensive and Annual Program Reviews due by Oct 31
- Winter—Present data, action plans and resource requests
- Early Spring—Resource requests prioritized and decisions made

As part of the update process the College also assesses the effectiveness of the reporting processes used to measure accomplishment of its stated goals. The College reported a few of the changes in the measurement of various attributes to determine how well it is accomplishing its objectives and stated goals. A chart identifying when reviews of processes are scheduled to occur is included in the Follow-Up Report. Most reviews or processes occur annually with the Comprehensive Program Reviews (CPR) process occurring every even year.

The timeline for integrating the mission statement, goal measurement, dialogue, learning outcomes, and quality assurance processes has been updated to assist in integration of overall planning and resource allocation processes. As a result of the College's reviews and planning timelines it has also made adjustments as suggested by the previous evaluation team that the program, College Council, and administrative reviews of the CPRs be more explicit and included in the timeline. The team confirmed the College has specific target goals and ways in place to report objective quantitative data on how well the College is achieving its goals. Specific items related to the goals and progress on accomplishing the goals is referenced in the College's

Follow-Up Report. Information on the progress toward accomplishing goals is also publicly available through the College's website.

The College receives information about the college's performance and the performance of other colleges in the system through the Vice President of Community College's fall and spring reports at the annual Fall Convocation. The chancellor conducts a College Conversation during the fall semester to discuss goal attainment and whether the College should change its strategic priorities if data suggests that changes are appropriate to consider. The College Council discusses the information and comments on strategic priorities. The strategic priorities approved by the College Council and the chancellor are then the focus for the Annual Program Review Updates APRUs and CPRs in the following year. This process assists in integrating planning, resource allocation, implementation actions developed using courses of action targeted to goal achievement and a feedback loop that incorporates appropriate adjustments based on accomplishment of specific measureable goals.

In the area of quality assurance the APRU process is considered annually by the UHCC Instructional Program Review Council (IPRC). This council is made up of UHCC faculty and staff from across the seven campuses who come together to evaluate the ARPD process. The process takes place over the academic year and changes are implemented in August. The APRU process measures the achievement of College goals at the program or unit level on an annual basis.

The CPR process measures the achievement of College goals and learning outcomes over a five-year period of time and includes a five-year planning horizon for a future. The College has placed the evaluation of the CPR process on a two-year cycle, beginning Fall 2014. Kaua'i Community College Policy (KCCP) 1-6 has been revised to integrate the CPR process into the College Council on a schedule that will facilitate its inclusion in the College Conversation on the Assessment of College Goals. The chancellor provided a recap of the VPCC's spring presentation on the campuses' performance data, as well as other goal measurements, during Fall Convocation.

The mission of the College is reviewed every two years by the College Council in the fall semester. The next review is scheduled to occur in Academic Year 2013-2014. The College Council conducts an initial review and if it determines a more thorough review and revision is necessary, it is able to request initiation of the more extensive five-year process used to evaluate the college's mission in relation to its planning and current accomplishments towards achieving strategic priorities of the college. If the two year review does not result in initiation of the five-year process to assess and update the mission statement the that five-year process will occur on its regular cycle. Otherwise, a full campus wide and community review of the mission statement will take place every five years to ensure that it accurately reflects the current mission of the College. The next five-year review will be in 2016.

Conclusions

The College meets the requirements of Standards I.B.2 and I.B.3 and has implemented actions that fully address Recommendation #2.

information beginning on page 162 and concludes on page 169. The College Catalog also includes a form students can complete in order to compile information needed to file a grievance.

Conclusions

The College has fully implemented this recommendation and is in compliance with the requirements of Standards II.A.6.c, II.A.7 and II.B.2.c.

Recommendation 5: Resources

UHCC Recommendation 3: Student Learning Programs and Services and Resources

In order to meet the Standard, the UHCC and the colleges shall take appropriate actions to ensure that regular evaluations of all faculty members and others directly responsible for student progress toward achieving stated student learning outcomes include, as a component of the evaluation, effectiveness in producing student learning outcomes. (Standard III.A.1.c)

Findings and Evidence:

There are two new policies (UHCCP 9.203 [tenured] and UHCCP 9.104 [lecturer]) that were developed and approved in November 2013. The first policy addresses the evaluation of tenured faculty while the second policy addresses the recommendations concern for adjunct faculty members. Both policies now meet the requirements of Standard III.A.1.c. Faculty members must submit their documentation per the process laid out in the policies by April 1. The first evaluation under the new policies will occur on 4/1/14.

Conclusions:

Please refer to the attached University of Hawai'i Community College System Follow Up Report.

Recommendation 6: Leadership and Governance

In order to meet the Standards, it is recommended that the College strengthen evaluation of the effectiveness of the governance and decision-making structures and processes on a regular basis, and use the outcomes of evaluations as a basis for continuous improvement. (Standard IV.A.5)

Findings and Evidence:

The College has responded to this recommendation by forming a Process Task Force which had met four times as of 11/18/13 and has established a schedule and tentative process for evaluating the assessment of the primary governance body, College Council, as well as the primary SLO body, Assessment Committee. The initial process reviews are to be conducted in 2014. Although the cycle evaluation of the current governance and decision-making structures and processes has not been completed, the College has developed the process for evaluation and is ready to implement that process for the purpose of continuous review.

Follow Up Visit Report

**This Report is Appended to and Made Part of the
College Follow Up Report**

University of Hawai'i Community College System

2444 Dole Street

Honolulu, HI

A Confidential Report Prepared for the Accrediting
Commission for Community and Junior Colleges

This report represents the findings of the evaluation team that visited

University of Hawai'i Community College System

November 15, 2013

Dr. Helen Benjamin, Chair

System Evaluation Team

University of Hawai'i Community College System

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FRIDAY, NOVEMBER 15, 2013**

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Introduction

On November 15, 2013, Dr. Helen Benjamin and Dr. Thelma Scott-Skillman conducted a Follow Up Visit to the University of Hawai'i Community College System (UHCC). A comprehensive visit for the six colleges in the System and the System Office was conducted in October of 2012. Prior to the 2012 visit, one of the chairs of the college teams served as the "chair of chairs" and conducted the evaluation of the System Office. However, in the 2012 comprehensive visit, a separate team was established to conduct a visit for the System Office. Therefore, for the first time, a separate team was established for the one-day Follow Up Visit. The primary purpose of the Follow Up Visit was to document the progress the System had made toward resolving recommendations made by the comprehensive visiting team in 2012. The responses to the five System recommendations were included in the follow Up Report for each college.

The team chair met in advance of the visit by phone and through electronic means with the UHCC Vice President for Community Colleges (VPCC). Team members received the Follow Up Report in advance of the visit and had the opportunity to review the materials and visit the college and UHCC websites for information prior to their arrival at the System Office and the Hawaii Community College campus.

During the one-day visit, team members spent the morning at the System Office and the afternoon at the campus of Hawai'i Community College. The System Office was well prepared for the visit. The VPCC, the Director of Academic Planning, Assessment, and Policy Analysis, and the Executive Assistant to the VPCC met with the team to provide additional requested information, respond to queries needed in order for the team to complete its work, and provide details of actions taken by the System and the colleges in meeting the recommendations. A "tour" of the System website was provided, demonstrating easy access to and broad dissemination of essential information for all college and System constituencies as well as members of the public. Following the System Office visit, the team accompanied the VPCC to Hawai'i Community College where they continued discussions with the VPCC and met with the college chancellor, and attended a forum conducted by the VPCC. The forum held at Hawai'i Community College, was broadcast live with remote access to West Hawai'i Campus employees, located in Kona, HI. The VPCC updated more than 50 college employees in attendance on the progress on the System's strategic plan and the impact of the plan on their college in particular. The presentation, entitled "Moving Forward...2021", proved to be informational and inspirational for those in attendance.

The visit was very successful. It was obvious from the outset that the System Office and the colleges had taken the recommendations seriously and made considerable progress in the short time between receiving the recommendations from the Accrediting Commission on the October 2012 visit and the Follow Up Visit. Upon receiving the report of February 2013, the System Office led the colleges in focusing their collective energy on fulfilling the requirements made in the recommendations.

Recommendations made by the comprehensive visiting team of October 2012 and progress to date follow.

UHCC Recommendation 1: Institutional Mission and Effectiveness

In order to meet the Standards for institutional effectiveness and integration of planning and resource allocation processes, including program review, it is recommended that:

- The VPCC and the Chancellors develop broad-based, ongoing, collegial dialogue between and among the UHCC and the colleges to better assess the breadth, quality, and usefulness of UHCC analytical tools (e.g., UHCC Annual Report of Program Data (ARPD)) and planning processes through feedback from college stakeholders. In addition, the UHCC and Chancellors should provide training for the appropriate use of the tools to support on-going improvement and effectiveness.
- The Chancellors provide clear descriptions and training regarding the planning timeline and budgeting process. The information and training should be available to all college constituencies and reviewed regularly to ensure accuracy for resource allocation that leads to program and institutional improvement (Standards I.B.3, I.B.1, II.A.1.c, II.A.2.a, e, f, II.B.1, II.B.3.a, and II.b.4, I.B.1, I.B.4, I.B.6).

Broad-based dialog and assessment of analytical tools:

The team found that there was on-going dialog regarding planning and the use of analytical tools provided by UHCC. Per UHCC Policy, Strategic Academic Planning, the VPCC convenes the full UHCC Strategic Planning Council (SPC) in the spring and fall of each year. The membership of the UHCC Strategic Planning Council consists of the Chancellor, Faculty Senate Chair, and student government chair of each college, and the Vice President and Associate Vice Presidents for the Community Colleges. The fall meeting is used to look at the strategic planning process and to introduce and/or review system-wide Strategic Planning initiatives. The spring meeting is used to review UHCC strategic outcomes and performance measures. The SPC monitors and advises on progress toward the UHCC Strategic Planning goals. The VPCC uses the Fall and Spring meetings to gather impressions and reactions to progress to date and to emphasize and maintain the focus on items/areas the UHCC has identified as important. The VPCC conducts follow-up visits to each college to present college-level detailed data and obtain feedback on the planning process, goals, and data. The following web site provides comprehensive information and evidence of the integrated planning process for the UHCC system and its colleges:

http://uhcc.hawaii.edu/OVPCC/strategic_planning/appendixA.php

All college chancellors and appropriate staff are represented on various system-wide councils and committees that review tools for accuracy and usefulness. In turn, similar training and broad-based dialog occurs on each campus for faculty and staff who are responsible for utilizing the tools to conduct program reviews, curricular updates, and the like. College researchers work closely with the system research office to further explore the use of the analytical tools and the interpretation of the data. The team was provided examples of how the college's requests for data and/or explanation of data and formulae were provided by the system.

The analytical tools provided by UHCC are utilized system wide allowing for comparable data and economy of scale in development. One example is Curriculum Central that has been used as a common repository for all curricula in the community college system. There will soon be a replacement, the Quali Student/Curriculum Management System, which will continue to be the single repository for community college curriculum in the UH system. The visiting team received feedback that there was expressed concern regarding the lack of a common system for SLO assessment. Several colleges are developing their own in-house assessment tool. There was concern that this multiple college-level approach would lead to duplicate use of resources and non-comparability of data across the system. It was expressed that the UHCC system was not supportive of developing a common SLO assessment system.

Planning description and training:

All of the community colleges in the University of Hawaii system are responsible for allocating funds received by the system and retained by the college according to planning and program review priorities. The UHCC system's Associate Vice President of Administrative Affairs meets regularly with the college to present information on its allocations, trends, and projections. The Chancellors and the College Councils in the system have been actively improving the planning and budgeting system to respond to changing needs and improve the system based on college participants' input. The colleges view these processes and the policies that support them as "living documents," meant to be regularly examined and changed based on experience. For example, the budgetary system was reviewed at the end of the previous academic year. This process resulted in increased and ~~current~~ updated information for consideration in allocating resources. Several visiting site teams observed the involvement of all appropriate groups in the budget and planning process and found evidence of changes to the processes that resulted from that involvement.

The visiting team for the UHCC system was able to attend the VPCC's fall presentation at Hawaii Community College, Hilo, HI. The presentation, which was live broadcasted, provided opportunity for employees at other college sites to receive data on progress towards the current Strategic Plan goals and future system and college enrollment projections. The presentation outlined possible changes from the current Strategic Plan that expires in 2015 to the next 2015 – 2020 Strategic Plan that is currently being developed. The organization and process for updating the Strategic Plan had been shared with the colleges during the VPCC's spring 2013 campus presentation. At the conclusion of the presentation, there was opportunity for questions and answers. Employees in attendance were attentive and seemed, based on the question and answer session, to be comfortable with the data and possible changes. Similar observations were shared by visiting team chairs of the colleges who were able to attend a presentation. Feedback on the planning and budget process obtained from both system and college employees conclude a more realistic and farsighted approach occurring now than in previous years. The current plan is evident of the inclusion of more ideas generated from the open dialog and process across all colleges.

UHCC uses an outcomes funding model that is directly linked to the University's established strategic outcomes. The measures adopted are directly from the strategic plan and the targets are the specific targets identified in the strategic outcomes adopted by the University in 2008.

Under this performance-funding model, most colleges have been able to meet all of their outcomes criteria and receive supplemental funding resulting in modest increase to campus funding base each year. Observation and analysis by visiting site team chairs conclude there is satisfaction with this funding model. While there is some concern regarding some of the 'bench marks', the campus leadership considers performance based funding measures to be fair.

The Annual Reports Program Data (ARPD) is standardized system-wide and is used by each campus to operate its own program review process. Each college is provided annual reports for all degree and certificate of achievement programs that are used by the colleges for their comprehensive program reviews.

Since the comprehensive accreditation visit in October 2012, all key data users have been surveyed to determine if any of the current data elements should be eliminated or if any new data elements should be added to the ARPD. The surveys identified a gap in data information provided at new faculty, staff, and administrator orientation. The UHCC Institutional Research Cadre is developing key data information to be included in orientations as well as website "cheat sheets" to direct inquiries to available tools and data.

Each college web site and the system web site provide easy navigation, clear, and comprehensive information on the strategic planning and budget process. Reaction from the system administration and college constituent groups to resulting changes with the integrated planning and budget process is positive.

Conclusion

The System has addressed the recommendation and meets the Standard.

UHCC Recommendation 2: Student Learning Programs and Services

In order to meet the Standards, degrees offered by the colleges must be consistent with the general education philosophy as outlined in the college catalog and the rigor of the English and math courses needed to fulfill the degree requirements must be appropriate to higher education (ER 11, Standards II.A.3, II.A.3.b).

At the time of the visit in October of 2012, the System was aware that four colleges (Hawai'i Community College, Honolulu Community College, Kaua'i Community College, and Leeward Community) were out of compliance with granting the Associate of Applied Science degree (AAS). The level of English and math courses required for completion of the AAS degree was at or below the developmental education level and should have been higher.

In May of 2012, the General Education requirement to satisfy the recommendation was codified in UHCCP #5.200 General Education in All Degree Programs. Math and English requirements are now at the transfer level equivalent. It has been documented that all four colleges offering the AAS degree have implemented the new policy.

Conclusion

The System has addressed the recommendation and meets the Standard.

UHCC Recommendation 3: Student Learning Programs and Services and Resources

In order to meet the Standard, the UHCC and the colleges shall take appropriate actions to ensure that regular evaluations of all faculty members and others directly responsible for student progress toward achieving stated student learning outcomes include, as a component of the evaluation, effectiveness in producing student learning outcomes (Standard III.A.1.c).

It was concluded in the October 2012 visit that the System met all of Standard III.A except Standard III.A.C.1, as a tenured faculty member who does not request promotion, or a faculty member who has completed all requirements of tenure and promotion, does not have the same requirement to analyze student-learning outcomes for improvement of effectiveness. The team found on this visit that the System has negotiated with its bargaining unit, developed, and approved a policy that has been updated for the first time since 1990. The updated policy reflects current ACCJC requirements and includes a provision for the inclusion of the tenured faculty member's obligation to be evaluated based on, among other things, his/her effectiveness in producing student-learning outcomes. In addition, a policy on the evaluation of lecturers has also been negotiated and approved. While the change in evaluation requirements has been negotiated, there has not been the opportunity since negotiation of this new evaluation provision to implement the change at the colleges and document evaluations with this component.

Conclusion

The System has addressed the recommendation and meets the Standard. However, implementation of the negotiated evaluation requirements has not yet happened and been documented.

UH Recommendation 4: Resources

In order to meet the Standards, it is recommended that a comprehensive UH system wide technology plan that includes and supports distance education be developed and implemented and is integrated with institutional planning (Standards II.A.1.b, II.A.1.c, II.A.2.c, III.C.2, III.C.1, III.C.1.c, III.C.2).

The System took a novel, creative, and appropriate approach in its response to this recommendation. The System is in the process of creating “a dynamic, online resource” rather than develop a written plan that will provide pertinent information to users. The major sections of the resource follow infrastructure, enterprise business applications, business process improvements, academic, applications, and policies. The resource is currently under development and scheduled for completion in the spring of 2014. The team previewed the web site and found it to be an excellent resource for users with “just in time” information on current and future projects as well as long-term trends. The resulting information should strengthen the program review process and strategic planning to support resource allocations.

Conclusion

The System is in the process of addressing the recommendation but does not yet fully meet the Standard.

UH Recommendation 5: Board and Administrative Organization

In order to meet the Standards, it is recommended that the UH Board of Regents (BOR) adopt a regular evaluation schedule of its policies and practices and revise them as necessary. In addition, the UH BOR must conduct its self-evaluation as defined in its policy and as required by ACCJC Standards (Standards IV.B.1.e, IV.B.1.g).

The Board has been undergoing a thorough self-assessment that began during the October 2012 visit. They engaged the services of an experienced consultant who has led them through a rigorous process reviewing every aspect of their responsibilities. The result is a list of recommendations that will improve the effectiveness of the board.

Regarding the adoption of a regular evaluation schedule for the review of BOR policies and procedures, the UH System is in the process of developing an online policy management system that will allow for regularly scheduled development, review, revision, and tracking of policies and procedures. Because of

the self-evaluation during the last several months, the BOR is on schedule with its self-evaluation and meeting the requirement of board policy that indicates that the evaluation must be dedicated solely to the work of the BOR. Indeed, this has been the case.

Conclusion

This recommendation has been partially addressed. Because the process for developing the policy management system is underway, the System partially meets the Standard.