Follow-Up Team Report

Site Visit Report

Bakersfield College
Kern Community College District

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

This report represents the findings of the evaluation team that visited
Bakersfield College from October 28 – 29, 2013

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Introduction

Bakersfield College had its accreditation reaffirmed on the basis of a comprehensive evaluation that occurred in October 2012. The Commission requested a Follow-Up Report from the College by October 15, 2013. A team consisting of four Commission representatives visited the College for the purpose of verifying evidence and determining whether actions taken to implement the reported recommendations and correct deficiencies had occurred. The team found that the College has addressed all eight of the recommendations identified as related to college operations with another four recommendations related to district office controlled activities being reviewed in conjunction with the visit to Bakersfield College.

A team visited Bakersfield College on October 28, 2013 and the same team plus members of the Porterville College and Cerro Coso College came together on October 29, 2013 to review services and evidence to determine the status of the district recommendations noted above.

In preparation for the site visit, the team members reviewed the previous comprehensive evaluation report based on the team visit in late October 2012. Team members also reviewed the College's Follow-Up Report Dated October 15, 2013. The college included links to the source of evidence in the electronic version of the report. Team members were able to review written evidence prior to the team visit.

The site visit interviews and reviews of various forms of evidence are the basis for the conclusions regarding the College's status on implementation of the previous recommendations and its compliance with Accreditation Standards. Based on the team's review the recommendations have been addressed. Specific details are included under each recommendation of this report.

Bakersfield College and the Kern Community College District Office personnel were very well prepared for the team's visit and were well organized and available to all team members as needed. Team members met with faculty, staff, and administrators who were directly involved in developing courses of action to implement changes as appropriate. An open forum was held to allow college and interested personnel to make comments to the Team Chair about accreditation related matters associated with Bakersfield College. Twenty eight people attended the open forum.

At the District Office team members met with the vice chancellors and two members of the Board of Trustees. All information received during interviews reinforced written evidence provided by the College and the District Office to show the actions implemented to bring the College into compliance with all aspects of Accreditation Standards.

The results of the visit and the status of action taken by the College to implement the recommendations are as follows:

College Recommendation 1: Develop and Implement Evaluation Processes to Assess Effectiveness of the Full Range of Planning Processes
In order to comply with Standards, the team recommends that the College develop and implement effective evaluation processes that can be applied to the full range of planning processes developed by the district and the Colleges to assure that:
- *Results of student learning assessments and program reviews are systematically linked and integrated into institution-wide planning for improvement and resource allocation processes*
- *That the data and measures identified in the new strategic plan are used to identify improvements in student learning and institutional goal attainment*
- *The functional map defined and agreed upon in 2011 results in effective services being received by the Colleges. (I.B.3, I.B.6, I.B.7)*

Findings and Evidence:
The Follow-Up report details some of the accomplishments of BC in building effective program review, student learning assessment, and planning processes. The college strategic plan was reviewed in the spring of 2013 resulting in the Strategic Focus document, which created an 18-month work plan for implementation of actions to achieve strategic priorities.

The Strategic Focus document identifies the immediate priorities for the college and objective measures to assess progress on those priorities. In reviewing the prior strategic plan and new information since that was developed, this refresh of the strategic plan yielded a sixth goal on professional development. The Strategic Focus document has been widely distributed and is actively used to guide planning. All governance groups and senior administrators have developed annual work plans based on the Strategic Focus document. The Follow-Up Report provides additional details on the college's progress towards implementation of initiatives in the Strategic Focus document.

Student learning assessments have been recently incorporated into the College's program review processes. The results of program review process forms the basis for changes needed in the strategic direction, if any, and for planning processes not directly included in the strategic plan for the College. Program review results are also used for the resource allocation process as all resource requests are first identified through the program review process. This includes the results of student learning assessments. Annual program review results are also used by governance groups and senior administrators to develop their annual work plans, integrating program review and planning.

The College and the District Office are actively working to improve services received by the college. The functional map forms the basis of this relationship and evidence of this work includes the many re-organizations that have occurred in various areas of the college-district relationship.

Interviews with college personnel confirmed the general facts of the Follow-Up Report and identified important additional accomplishments towards addressing Recommendation # 1 not identified in the Follow-Up Report. The interviews revealed a significant change in the culture of the College with regards to planning, program review, student learning assessment, and the use of data in these processes.

A culture of evaluation and assessment is clearly taking hold. In addition to the direct evaluation and assessment of college programs and services, the college has made significant process to assure that planning, evaluation and assessment processes are themselves being evaluated to assure their effectiveness. The Strategic Focus document provides a foundation for this effort by consolidating various college plans and priority documents into a cohesive plan that is easy for campus constituents to follow and understand (Strategic Focus document, Follow-Up Report).

College governance groups and senior administrators use this document to create annual work plans (*18-month Work Plan for the President, Work Plan for the Faculty Director of Technology, Innovation and Professional Development*). Some of the results of the use of the Strategic Focus document are detailed in a year-end summary provided to the College Council (*Memo from the President to the BC College Council dated May 17, 2013*).

The Annual Program Review process was evaluated by the Program Review Committee through an analysis of completed APRs and a survey of faculty chairs, program directors and administrators. This evaluation is reported in the *2012-13 Program Review Committee Annual Report*.

Evaluation of student learning assessments and information technology (IT) needs have been included in the Annual Program Review assuring that these results are systematically linked into college planning and resource allocation processes (*Program Review website*). College governance groups and senior administrators incorporate these results into their annual work plans, integrating the results of program review and student learning assessments with the Strategic Focus document (*Accreditation Follow-up Meeting with College Staff on Recommendation 1, October 28, 2013*). These results are also used to identify resource needs, and the resource allocation process is based on the needs identified through the APR (*Program Review website*).

While the planning process is not clearly articulated in the Follow-Up report, planning is occurring at all levels of the college using the Strategic Focus document and through the APR process. The APR document includes a section on "Progress on Program Goals" (*Program Review Annual Update*). Interviews with college staff confirmed this (*Accreditation Follow-up Meeting with College Staff on Recommendation 1, October 28, 2013*).

The use of data in the college is growing. In addition to the measures identified in the college strategic plan, the Focus document identifies data "strands" that are used to inform planning processes (Strategic Focus document). In addition, the college has recently joined the ATD effort and formed data teams and the Student Success Stewardship Team (SSST) to support the data analysis process that is part of ATD (*Follow-up Report*). Data are incorporated into the APR, where programs are asked to discuss trends in the data presented (*Program Review website*).

The District-College relationship is clearly evolving since the team visit in October 2012. The Program Review Committee has proposed several surveys to assess District Services (Follow-Up Report, Recommendation #1). A survey on District Human Resources has already been completed (Follow-Up Report, Recommendation 5). The District conducted an analysis of business processes in Financial Aid (*Kern Community College District Business Process Revitalization & Process Alignment: Financial Aid*) and, as a result, developed a services work order to implement the improvements (*Services Work Order: Financial Aid Revitalization*).

Conclusion:
The College has completed the evaluation of a number of processes at the college resulting in documented improvements to planning, program review, and student learning assessment. While planning itself is not clearly articulated by the College in the Follow-Up Report, site work conducted by this team revealed that planning is occurring at institution and program levels and actions to implement changes in support of planed activities are occurring.

The college has fully addressed this recommendation, resolved the deficiencies, and meets Standards.

College Recommendation 2: Establish Student Learning Outcomes for Instructional/Academic Programs
> *In order to comply with the Standards and to meet the proficiency level of institutional effectiveness for student learning outcomes, the College should establish learning outcomes for each certificate and degree program, conduct authentic assessment for student learning outcomes at the certificate/program and degree levels, and utilize the results of assessment in the decision-making and planning process to support and improve student learning (ER 10, II.A.1.c, II.A.2.f)*

Findings and Evidence
Since the comprehensive team visit, the College has refocused its efforts to develop student learning outcomes at the program level. Working collaboratively, the Program Review Committee, Faculty Chairs and Directors Council, Academic Senate, and College Council recommended a change from the college's historic definition of a program to the Title 5 definition of a program. Using the newly-framed program definition, the Assessment Committee developed a grid that serves as a status inventory of each program's development/currency of program level outcomes (PLOs) and its efforts to assess outcomes.

The college has increased its efforts to train and fully engage both full- and adjunct faculty in the assessment process. For example, the department chairs received additional training on the use of CurricUNET in March, and documents from the training were placed on a website. Adjunct faculty have also been encouraged to attend assessment workshops and were given 2 hours of flex credit for their participation.

In response to this recommendation, the College initiated a number of action items. Related to Program Learning Outcomes (PLOs), the Assessment Co-chairs asked programs to submit their program level assessment plans in April 2013. Course level assessment plans were due in June.

To establish the alignment of program review and assessment, the chairs of both committees recommended the insertion of two questions into the program review documents that ask the manner in which assessment results have informed the program's budget requests and planning. Finally, professional development trainings and workshops continue on the use of the CurricUNET Assessment module, the assessment process, and the use of data in decision making and planning.

The College has focused energy and efforts on the development of PLOs based on its newly-accepted definition of a program. At the time of the follow up visit, 100% of the programs have program level outcomes which are posted in CurricUNET and, 100% of the programs have completed an assessment during the 2012-2013. (ER 10, II.A.1.c) Results of these assessments are in the CurricUNET Assessment Module. (II.A.2.f) There is evidence to show that faculty are using assessment results to inform curriculum writing, teaching and learning. Moreover, the college has demonstrated its commitment to assessment by providing resources for an additional faculty coordinator position to address the outcomes of a degree and to align institutional, program, and course level outcomes.

In an effort to close the assessment cycle and integrate assessment with planning and resource allocation, there is a definite linkage between program review and assessment. Examples of program review annual update documents for the Nursing Program and the Academic Development Program demonstrate the College's use of assessment outcomes and data to inform curriculum development, requests for technology, identification of teaching strategies, and additional student support.

Conclusions

Bakersfield College has made great strides in establishing a culture of assessment that is supported by the new president, faculty, staff, and administrators. Through professional development trainings focused on learning outcomes, program review, and assessment, all full-time faculty now participate in assessment, and many of the adjunct faculty participate as well. In the spirit of continual improvement and increasing effectiveness, the Assessment Committee has plans to continue professional development. The College will host a data conference that includes external speakers from the state Chancellor's office and the Research and Planning Group (RP). The college has established an environment that embraces the use of data and assessment outcomes for planning and resource allocation.

The college has fully addressed this recommendation and complies with the requirements of Standards *ER 10, II.A.1.c, II.A.2.f.*

College Recommendation 3: Include comments on how effectively adjunct faculty members produce student learning outcomes

In order to meet the Standards, the team recommends that adjunct faculty have as a requirement of their evaluation a component that addresses their effectiveness in producing student learning outcomes. (III.A.1.c.)

Findings and Evidence:

Human resources are centralized at the district office. The district office has resolved contractual issues regarding adjunct evaluation to include student learning outcomes. Concurrently, the college has made significant progress in student learning outcomes assessment. Adjuncts are included in this process.

The Follow-Up Report states that District Human Resources Office and the faculty union (KCCD/CCA/CTA/NEA) have issued memorandums stating that the production of student learning outcomes assessments can be included in the adjunct faculty evaluations (*CCA Letter regarding contract interpretation dated 4-18-13, HR letter of agreement dated 5-8-13*). The District Human Resources Office is working with the college to ensure that adjunct evaluation criteria includes a statement that adjunct faculty members provide assessment information to their department chairs as appropriate. (*Accreditation Follow-up Meeting with District Staff, October 29, 2013*).

At the same time, student learning outcomes assessment activities at the college have increased significantly. The number of adjuncts in the process is a growing. They are given flex credit for participation and actively encouraged to participate (*Accreditation Follow-up Meeting on SLOs with Bakersfield College Staff, October 28, 2013*).

Conclusion:
The college has fully addressed this recommendation and complies with the requirements of Standard III.A.1.c.

College Recommendation 4: Evaluate the effectiveness of professional development programs
In order to meet the Standards, the College should systematically evaluate the professional development programs offered to employees and use the results of the evaluation as a basis for improvement. (III.A.5.b)

Findings and Evidence:
The Staff Development Coordinating Council comprised of representative groups, formulated, administered, and assessed the results of surveys to gain insight into the effectiveness of professional development and training it provides to College employees. The evidence indicates a high degree of participation among the faculty. It also points to detailed plans targeted at improving services related to Student Services Act. The report did not provide clear evidence regarding professional development initiatives and subsequent survey results for classified staff development. However, the team learned important improvements in these areas were in place and that the implementation activities were completed a short time after the Follow-Up Report was prepared. The team has included these additional pieces of evidence to support its conclusions.

During the visit, a cross section of the college employees reported a "cultural change" at the College regarding professional development. The college representatives reported participation of all employee groups in professional development workshops ranging from "just-in-time" to week-long sessions at on- and off-site locations. In some cases, while attending a conference, employees communicate with their colleagues at the college via Skype to share information

gleaned at the conference and field questions from employees to presenters; a creative method to expanded the number of employees affected by paid professional development training. The list of professional development opportunities includes workshop topics for academic, student, and administrative services employees of the college. Faculty, administrators, and staff participate in workshops and professional development opportunities such as Achieving the Dream, leadership development, team building, and customer services.

Conclusion:
The evidence gathered from the follow-up report and during the site visit indicates that the College has addressed this recommendation. The College complies with the requirements of Standard III.A.5.b.

College Recommendation 5: Human Resources should complete a program review
In order to meet the Standards, the team recommends that the College human resources department complete a comprehensive review of services to include the following: regularly assess its record in employment equity and diversity, conduct an annual review of services; clarify and publish the roles and functions of human resources personnel; survey employees to determine effectiveness of human resources at the College, and; survey screening committee members to determine effectiveness of hiring processes. (III.A.3, III.A.3.a, III.A.4, III.A.4.b, III.A.4.c, III.A.6)

Findings and Evidence:
The College submitted evidence documenting the resolution of this recommendation, which indicates it has developed processes: to assess records of employment equity and diversity; to clarify and publish the role of human resources personnel; and to determine effectiveness of human resources at the College and the effectiveness of hiring process. The on-site visit interviews revealed that the human resources services are centrally provided by the District in a distributed model among the three colleges and the district locations. The College employees reported that, in many cases, the human resources staff functions and interacts with the rest of the College employees as if they were the College employees; in some cases they act as a conduit to the District office.

A number of College employees advocated for an independent functioning Office of Human Resources at the College since it has been assigned a full complement of staff; this request is contrary to the functional map that delineates scope of responsibilities within the district. It is clear that while the District Human Resources provides services in support of the college, it lacks a seamless process. The College's Follow-Up Report indicates "*The roles between the District and College were not clearly defined; however, based on the evidence provided the roles have now been established.*" The economies-of-scale supports centralizing certain administrative services including human resources.

Interviews with the District staff revealed that the District administrators have developed processes to include the College in planning, training, and evaluation processes. The District and the Chancellor's Cabinet follow the Sustained Continuous Quality Improvement model by redesigning services from human resources based on the assessments of the established processes. The outreach from the District administrators has been limited to the College's

administrators and select shared governance committees that interact with District Office centralized service provider departments. College personnel are responsible for communicating District-specific information through its communication methodologies. Some people on campus believe more information would be helpful although the sufficiency of communicated information was not assessed by the team because the college and District Office have a process in place to evaluate communications and is best situated to determine what can be provided based on resource availability. The team felt it is was important to note that some employees pointed to the necessity of a more inclusive relationship between the college and district in order to improve services to the college. The team determined this is a local decision best made through existing processes and evaluations of those processes.

Conclusion:
The staff of human resources assigned to the College has developed sound processes, surveys, and evaluation instruments to meet the requirements of Standards III.A.3, III.A.3.a, III.A.4, III.A.4.b, III.A.4.c, III.A.6, and has implemented actions necessary to comply with these standards. The College complies with the Standards identified in this recommendation.

College Recommendation 6: Develop a long-range capital projects planning process that supports and is aligned with institutional improvement goals of the College
In order to meet the Standards, the team recommends that the College develop a long-range capital projects planning process that supports and is aligned with institutional improvement goals of the College. Additionally, the team recommends that the College include major renovations and facilities upgrades in the long-term plan for facilities. (III.B.2.a)

Findings and Evidence:
The Follow-Up Report indicated that the College has identified processes to align and continuously update its facilities master plan with the college's educational master plan (EMP.)

The discussions from the site visit clarified that the College has taken steps in identifying projects for new construction, revitalizing existing facilities, and developing energy efficiency measures. The College's facility Committee meets regularly to discuss ongoing and new construction projects that are identified through the departments' Annual Program Reviews in association to the EMP. The District Construction Group collaborates with the College's facilities staff to verify feasibility of the projects through needs analysis processes including the State's Fusion system. Facilities committee recommendations are distributed among shared governance constituencies and the college president approves the facilities projects based on constituency feedback and feasibility of the projects. The team reviewed a list of completed and in-progress projects; several other projects have been designed and submitted to the Department of State Architect for approval. The College has submitted plans to the Chancellor Office to access the 2013/14 Proposition 39 funds for implementing LED outdoor lighting in order to reduce electricity consumption.

Conclusion:
The College meets the requirements of Standard III.B.2.a.

College Recommendation 7: Develop an assessment methodology to evaluate how well technology resources support institutional goals

In order to meet the Standards, the team recommends that the College develop and use an assessment methodology to evaluate how well technology resources support institutional goals and use the result of the evaluation as a basis for improvement. (III.C.2)

Evidence and Findings:
The Follow-Up Report identifies three different mechanisms used to assess how well technology resources support institutional goals. The first mechanism is direct user surveys of specific technologies. Three surveys have been conducted over the past year to gather data on existing campus technologies. Survey results are forwarded to the Information Services and Instructional Technology (ISIT)committee "to be used as guidance for future technology decisions." The second mechanism used is the Annual Program Review (APR). The APR asks programs to evaluate their use of technology and to identify improvements recommended by the programs. This section is then compiled and forwarded to the ISIT Committee for use in its established technology planning process. The College recently completed the APR with the new questions. ISIT committee members have stated that the APR results have been sent to the ISIT Committee. The third mechanism is a general college-wide survey on technology scheduled for the spring 2014 semester.

Meetings with District Office identified organizational process adjustments that have been made under the District's continuous improvement based processes that require adjustments based on feedback from evaluation actions that are conducted on a regular basis. Working with the college, the District Office recently created a new structure centralizing most IT processes but providing local support with college-supervised IT manager. The College IT manager coordinates IT activities related to instructional technology with the District Office focus on infrastructure and broad based support of technology at the colleges. Both the college and the District Office consider this organizational assessment and refinement of centralized services to be a structure that is successful and that addresses college level requirements for technology.

In addition, because IT operations are centralized, the District Office has been assessing its delivery of services and making improvements to those services. One example identified involves the Financial Aid process. The District conducted an analysis of the business processes (*Kern Community College District Business Process Revitalization & Process Alignment: Financial Aid*) and, as a result, developed a service work order to implement the improvements (*Services Work Order: Financial Aid Revitalization*). Examples like this showed the team that the College/District relationship is strong and effective in ensuring consistent services are provided by the District to the colleges.

Conclusion:
The college has fully addressed this recommendation and meets the requirements of III.C.2.

Recommendation # 8 The College President should establish effective communication with communities served by College

In order to increase effectiveness, the team recommends that the College President engage community and business organizations that represent community interest areas for the

purpose of establishing effective communication with the communities served by Bakersfield College (IV.B.2.e).

Findings and Evidence:
This recommendation requested that the College President become more involved in engagement with business and community organizations in order to establish effective communication with the communities served by Bakersfield College. While the main emphasis of this recommendation was the actions of the president to enhance communication, the current president who started in January went one step farther by not only personally being involved in business and community activities that enhance communication, but also bringing all of the resources from the college to the community by placing college provided services in the communities through connection of college program personnel and needs established by business and community organizations who rely on the college for certain services.

The team reviewed published materials prepared or sent out under the Office of the President. The current president writes and publishes a daily blog to keep the campus and others informed about activities she is directly involved with. There is a reenergized college publication that is prepared and made available across the college. In conversations with local business owners' association president he stated in general that there is now a perception that the college is taking a strong interest in what is occurring within the community and wants to help. The same person commented how pleased he is to see the current president remain involved in the community.

The Follow-Up Report identifies specific actions and new initiatives that have been implemented since the last team visit in October 2012. Verification of evidence combined with interviews with appropriate personnel show that the College is in compliance with Standard IV.B..2.e.

Conclusion:
The college has fully implemented this recommendation and complies with Standard IV.B.2.e.

Commendation:
The Team commends the College President for her enthusiasm, community spirit and speed in which she was able to bring the vast range of college services and educational programs into the conversations with local community and business leaders. As reported by one Chief Executive Officer of a local business organization, the College is now an important resource that is available to the community because the College President has taken the time to bring that message and those resources into the Bakersfield community.

District Recommendation # 1 Review and Update Board Policies on a Periodic Basis
In order to comply with the Standards, the team recommends that the Board of Trustees establish a process to ensure that the Board's policies and procedures are evaluated on a regular basis and revised as appropriate (IV.B.1.e).

Findings and Evidence:
 The Board of Trustees has been reviewing its Board Policy Manual and has created a schedule that ensures on-going review of policies over a two-year time period and that change will assist in ensuring its policies are reviewed on a continuous basis with changes made as needed to keep the policies current.

The KCCD Board Policy currently includes eleven sections, including sections 5, 7, and 9, which are collective bargaining agreements that are negotiated every three years. Because those items are reviewed and negotiated regularly, the Board decided to remove those three sections from its policy manual. For the on-going review of policies by the Board, it has been determined that in odd numbered years, board policy sections 1, 3, and 11 will be reviewed. In even numbered years, board policy sections 2, 4, 6, 8, and 10 will be reviewed. In all instances, the Kern Community College District makes any regulatory changes resulting from changes in laws that may be referenced in various Board Policies.

Initially, a calendar was created to facilitate the review of section 1, 3, 5, 7, 9, and 11. The calendar was revised in July 2013. The Chancellor and Chief Financial Officer are charged with coordinating the evaluation of Section 1 and Section 3 of the Board Policy Manual and for the process of making recommended revisions to Board Policy by the October, 2013 KCCD Board of Trustees meeting.

A review of minutes of meetings from the Board of Trustees, the Chancellor's Cabinet meetings and other structured participatory governance meetings show active conversations and activities to update Board Policies on an on-going and routine schedule. The District Office established a review policy based on Board direction and those processes are in place and functioning as intended.

Conclusion:
The District has defined a process for the periodic review and appropriate revision of the KCCD Board Policy Manual to ensure an ongoing and systematic review of Board policies and revisions where appropriate. This process began in January 2013 and will be evaluated for its efficacy and needed modifications by May 2014.

The College meets the requirements of Standard IV.B.1.e and has implemented actions that fully address District Recommendation #1.

District Recommendation # 2 Board Member Development Program
In order to comply with the Standards the team recommends that the Board of Trustees in consultation with the Chancellor develop and implement a development program that meets the needs of the newer board members as well as board members who have a considerable amount of experience as a governing board members (IV.B.1.f).

Findings and Evidence:
Board Policy 2 E Board Members are receiving information on available professional development training opportunities from a wide range of governing board training providers. In addition to these external training opportunities, the board members also have the option of taking internally prepared training programs. Board members during the conversation with the team chair commented on specific trainings they attended and noted the comprehensive development plan developed meets the needs of new trustees and the more experienced members of the governing board. The board member development plan is now part of Board Policy 2F entitled *Board In-Service Development Plan.*

Development of the new training plan for governing board members has been accomplished and is being followed by members of the board who spoke with the team chair during the site visit. The Board Policy has been developed and is operational.

Conclusion:
The College meets the requirements of Standard IV.B.1.f and the requirements of this recommendation have been fully implemented.

District Recommendation # 3 Evaluate the Board of Trustees Self Evaluation Process
In order to comply with the Standards, the team recommends that the Board of Trustees review the elements of its Self Evaluation Process and ensure that the Standards' minimum requirements for a Self Evaluation Process which are: 1) have clearly defined processes in place, 2) have processes implemented and 3) have processes published in the Board's policy manual are included in the Self Evaluation Process. The Board's policy 2E2 prescribes additional requirements when conducting the Board's Self Evaluation. (IV.B.1.g)

This Recommendation was intended to address not the contents of the governing board's evaluation process but the fact that an evaluation of the process could not be located nor could the 2012 team determine that an evaluation of the process had occurred. In preparation for the Follow-Up Report, it appears that there was an evaluation of the existing process, and, as a result, the timeline for conducting the evaluation and the frequency of the evaluation of the governing board's self-evaluation was reexamined.

The process was previously noted as being in place and operational. What was missing was evidence of the evaluation of the existing process. Supporting evidence provided to the team and included in the Follow-Up Report reiterates what had previously been identified and reported in the Team Evaluation Report from the comprehensive evaluation conducted in October 2012. In the Follow-Up Report, the College again lists the same evidence previously reviewed by the team with no comments about how the Board reviews the self evaluation instrument and makes any necessary adjustments.

In preparing the Follow-Up Report the District commented that the governing board was going to review its process during the October 30th Board Meeting. Prior to that time, the District provided evidence to show that all of the governing board policies, forms and other material prepared to guide the self evaluation process were reviewed and approved by the Board. The

documents used have been deemed to remain appropriate and the self-evaluation process is working as intended as evidenced by the lack of changes made to the current practices. Through analysis and review of those materials the District had in fact conducted an evaluation of its self-evaluation process thereby meeting the requirements of this recommendation and bringing the District (and College) into compliance with the requirements of Standard IV.B.1.g.

Conclusion:
The Kern Community College District Board of Trustees has a process in place to evaluate the practice used by the District to complete a governing board self-evaluation. This recommendation has been addressed as action has been taken to fully implement changes that address the requirements of Standard IV.B.1.g, and the Board is in compliance with this Standard.

District Recommendation # 4 Evaluation of Role Delineation and Decision Making Processes for Effectiveness
In order to comply with the Standards, the team recommends the District conduct an evaluation of the new decision-making process and evaluate how effective the new process is in making decisions and in communicating the decisions to affected users (IV.B.3.g).

Findings and Evidence:
The team evaluated actions to implement this recommendation from several different approaches. Evidence was provided to show that the decision-making process specifically related to issues of centralization and decentralization of support services provided in support of the colleges is evaluated regularly and modifications are made quickly once a change is considered necessary. Minutes from meetings combined with information obtained during interviews confirmed that the decision making processes are being evaluated on a regular basis. This is occurring as decisions are being made. As they move through the decision-making process, the participants comment about the effectiveness of the process. As a result of these reviews, changes have been made and the process refined. The last approved document that was prepared to publicize the Decision-Making Process was dated April 2012. At the time of the team visit, the team was uncertain about actions taken to review the decision process. During this visit, more information was obtained and, as a result, confirmed that the processes used to make-decisions are being reviewed.

The team had lengthy conversations with each executive at the District Office who was responsible for providing support for college-level functions. It was clear that each support area was determined in consultation with the colleges. The conversations revealed that the functionality and level of control over the various activities changes over time with functions being centralized and then decentralized depending on what is appropriate and necessary at that time and considering the limited amount of resources that have been available during the recession when resources were being reduced. The last full-scale review of functions provided by the District Office occurred in May 2012 using the Decision-Making Process noted above.

Interviews with District Office Vice Chancellors and representatives from the colleges revealed that the decision-making process and the review of the process are on-going and routine. The reviews of District services frequently focus on the support of college activities with the conversations including the overarching topics of how to provide services using traditional

organizational theory models of decentralized services, centralized services or a blend of the two. The Kern Community College District uses the practice that best serves the colleges with some services centralized at the District and others decentralized with the college having primary control. The decisions involve a collaborative process and the decision on whether to offer decentralized or centralized services is different for types of services provided.

Some services like technology have both a centralized service and a decentralized service component. At the time of this visit, the team learned that the services are consistent with the previously reported division of functions being consistent with those included in the College's Self Evaluation Report. One area that was unclear was how human resource services were being provided to the College. The concerns previously stated by the Evaluation Team have been resolved with the decision-making model used being a key factor when evaluating services offered at the colleges.

To provide more detail for the next review of the Decision-Making Process, the Follow-Up Report notes that the Consultation Council will evaluate the process in fall 2013. This evaluation will provide further documentation to support other evidence to show how the Decision-Making Process is being evaluated and what changes, if any, are made based on the evaluation.

The team suggests that the College and the Kern CCD modify their Decision-Making Flowchart in a way that shows the feedback and evaluation process that occurs. Currently the chart is linear and is formatted in a way the highlights where decisions are made from an organizational viewpoint. In this format a feedback-loop is not normally recorded as the intent is to show where decisions are made along a continuous line going up the chain of command until a decision is made.

Conclusion:
The College and Kern CCD have provided evidence that shows the Decision-Making process is being evaluated. The requirements of this recommendation have been implemented and the District now meets Standard IV.B.3.g. It is suggested that the College and the District provide more information on the structure of the evaluation and include documentation of the data obtained from the evaluation.