PEER REVIEW TEAM REPORT

OXNARD COLLEGE
4000 S. Rose Ave.
Oxnard, CA 93033

This report represents the findings of the Peer Review Team that conducted a focused site visit to Oxnard College from September 25, 2023 to September 26, 2023. The Commission acted on the accredited status of the institution during its January 2024 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Dr. Carla Tweed
Team Chair

Table of Contents

Oxnard College
Peer Review Team Roster
TEAM ISER REVIEW

Dr. Carla Tweed, Team Chair *
West Hills College Coalinga
President

Dr. P. Wesley Lundburg, Vice Chair *
San Diego Miramar College
President

ACADEMIC MEMBERS
Mr. William Breitbach
Shasta College
Executive Dean Educational Technology, Learning Services & Research

Dr. Jeremy Brown
Yuba College
Vice President of Instruction

Dr. Anna Hanlon
Orange Coast College
Professor, Public Health; IE Coordinator; Accreditation, Faculty Chair

Dr. John Hannigan
West Valley College
Department Chair, Communication Studies

Mr. David K Song
East Los Angeles College
Faculty Chair, Accreditation

ADMINISTRATIVE MEMBERS
Ms. Michelle Barton
Palomar College
Sr. Director Planning, Research, Institutional Effectiveness, Grants

Ms. Iris Ingram
Rancho Santiago Community College District
Vice Chancellor, Business Services

Dr. Joshua Moon-Johnson

College of San Mateo
Vice President of Student Services

ACCJC STAFF LIAISON
Dr. Catherine Webb
Vice President

*Persons who served as participants on the district review team should be noted with an asterisk.

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FOCUSED SITE VISIT

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Summary of Focused Site Visit

INSTITUTION: Oxnard College

DATES OF VISIT: September 25-26, 2023

TEAM CHAIR: Dr. Carla Tweed

This Peer Review Team Report is based on the formative and summative components of the comprehensive peer review process. In March 2023, the team conducted team ISER Review (formative component) to identify where the college meets Standards and to identify areas of attention for the Focused Site Visit (summative component) by providing Core Inquiries that the team will pursue to validate compliance, improvement, or areas of excellence. The Core Inquiries are appended to this report.

A six-member peer review team conducted a Focused Site Visit to Oxnard College September 25 and 26, 2023 for the purpose of completing its Peer Review Team Report and determination of whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and U.S. Department of Education regulations.

The team chair and vice chair held a pre-Focused Site Visit meeting with the college CEO on Monday September 11, 2023 to discuss updates since the Team ISER Review and to plan for the Focused Site Visit. During the Focused Site Visit, team members met with approximately 70 faculty, administrators, classified staff and students in formal meetings, group interviews and individual interviews.   The team held one open forum, which was well attended, and provided the College community and others to share their thoughts with members of the Focused Site Visit team. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement. The team thanks the College staff for coordinating and hosting the Focused Site Visit meetings and interviews, and ensuring a smooth and collegial process.

Major Findings and Recommendations of the
Peer Review Team Report

College Commendations
Commendation 1: The team commends the College for its work ensuring accessibility and support for its traditionally underserved populations, particularly the Latine population both on campus and in the community. (Standards I.A.I, I.B.I, II.A.7)

College Recommendations to Meet Standards
None

College Recommendations to Improve Quality
Recommendation 1: In order to increase effectiveness, the team recommends that the College fully implement its self-identified plans to codify, support, and integrate regular cycles of authentic student learning and service area outcomes assessment throughout the college. (I.B.2, II.A.3, II.A.11)

District Recommendations to Meet Standards
District Recommendation 1: In order to meet the Standard(s), the team recommends that the governing board delegates full responsibility and authority to the CEO to implement board policies without board interference. (IV.C.12)

District Recommendations to Improve Quality
District Recommendation 2: In order to increase effectiveness, the team recommends the board acts in a manner consistent with its policies and bylaws. (Standard IV.C.2)

Introduction

Oxnard College owes its existence in large part to the dedication and persistence of the citizen activists of the City of Oxnard who, in the early 1960s, championed the creation of public higher education opportunities for their community. As a result of these efforts, the Ventura County Community College District (VCCCD) purchased 118 acres of land at the College's current location in South Oxnard in 1968; the College officially opened for the 1975–1976 academic year.

Oxnard College regards 1975 as its founding year, given that it hired its first president and published its first college catalog. During its early years, Oxnard College classes operated out of rented facilities in churches, K–12 schools, military bases, firehouses, public athletic facilities, a local seminary college, and two storefront centers. In June 1976, the College's first commencement exercises were held at the Oxnard Civic Auditorium. The year 1976 also marks the date that the first modular buildings were on the site of the present campus.

Within a few years, the College moved operations to its current location, mostly in temporary buildings. The three primary buildings that served the College consisted of North and South Hall, the Liberal Arts Building, and the Learning Resources Center (LRC) building (now known as Condor Hall). In 1976, the College's first childcare center opened, and the Oxnard College seal was created, featuring a condor atop a stack of textbooks, emblazoned with the words "Truth, Knowledge, Wisdom."

In 1986, the Occupational Education complex was built, and in 1992, the Child Development Center was added to the campus. A physical education complex was added in 1994, and in 1997, the Letters and Sciences buildings opened as the first modern classroom and lab buildings with classrooms, science labs, and two large lecture halls. That same year the College inaugurated the highly successful Dental Hygiene program and the Regional Fire Academy, located at the Camarillo Airport site.

After the initial 20 years, it became apparent that there was a critical need for the College to expand to better serve the growing student population. In 1999, a Job and Career Center was constructed, and in 2003 the College took ownership of a two-story building complex that had been constructed by the County of Ventura. This building now serves as the Administration Building. In 2003, the voters of Ventura County approved Measure S, a $300 million bond measure to fund the construction and rehabilitation of educational facilities for VCCCD. As a result of the passing of the bond measure, Oxnard College was able to substantially improve its facilities.

Today, approximately 11,000 students, annually, make use of these new facilities and enjoy robust academic and student services campus wide. There are multiple academic departments housed in four divisions: Career Education, Liberal Studies/Library, Math/Science/Health/Physical Education/Athletics, and Public Safety. There are also multiple Student Services to ensure student success.

The Review Team was impressed that within one of the College's Guiding Principles, Social Justice and Equity, it specifically identifies Oxnard College as a Hispanic Serving Institution. The Review Team noted that a deep commitment to the College's student population was evident among the College Classified Professionals, Faculty, Administrators, and other staff during the visit. Many of the College's events are centered on the cultural values inclusive of students' families.

One poignant example the Review Team was impressed with was a community/College effort to fund and install night lighting for the soccer field so that games can be played in the evening to allow students' families to attend their students' soccer games.

Eligibility Requirements

1. Authority

The team confirmed that Oxnard derives its authority to operate as a two-year community college from the Board of Governors of the California Community Colleges and has been accredited by the Accrediting Commission for Community and Junior Colleges (ACCJC), an institutional accreditation body recognized by the Department of Education.

The College meets this ER.

2. Operational Status

The Review Team confirms that Oxnard College is operational and serves approximately 11,000 students annually. The College offers 104 instructional programs, including 70 associates degree and 30 Career Technical Education programs. The College also offers 6 noncredit Certificates of Completion and 3 noncredit Certificates of Competency in English as a Second Language (ESL).

The College meets this ER.

3. Degrees

The Review Team confirms that a majority of Oxnard College's students are enrolled in courses leading to a degree or certificate and that the majority of the College's educational offerings lead to a degree or certificate.

The College meets this ER.

4. Chief Executive Officer

The team confirmed that the President of Oxnard College serves as the Chief Executive Officer. The CEO has the requisite authority to administer board policies and does not serve on the chair of the governing board. The process for recruiting and hiring the College President is established in VCCCD AP 7120. The Chancellor of VCCCD delegates the appropriate authority to the College President.

The College meets this ER.

5. Financial Accountability

The Review Team confirms that Oxnard College undergoes an annual financial audit by a qualified external firm. All audits are presented to the Board of Trustees at regular open

sessions at Board meetings and are available to the public. The College maintains compliance with Title IV regulations.

The College meets this ER.

Checklist for Evaluating Compliance with
Federal Regulations and Related Commission Policies

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

Public Notification of a Peer Review Team Visit and Third Party Comment

Evaluation Items:

X	The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive review visit.
X	The institution cooperates with the review team in any necessary follow-up related to the third party comment.
X	The institution demonstrates compliance with the Commission *Policy on Rights, Responsibilities, and Good Practice in Relations with Member Institutions* as to third party comment.

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The College appropriately solicits third-party comments through its website. As part of its process to complete its Institutional Self-Evaluation Report, the College solicited third-party comments in advance of the site visit.

Standards and Performance with Respect to Student Achievement
Evaluation Items:

X	The institution has defined elements of student achievement performance across the

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

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

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The College has developed metrics for monitoring and addressing student achievement appropriate to its mission (e.g., course success rates and measures of completion for degrees, certificates, and transfer). These metrics are integrated and regularly reviewed as part of the College's integrated planning and evaluation process. Relevant institution-set standards and stretch goals are established and regularly monitored through the Student Equity and Success Committee. The College actively follows up on performance that falls below standards.

Credits, Program Length, and Tuition

Evaluation Items:

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

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

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The College awards credit for courses, degrees, and certificates consistent with standard practices in higher education and compliance with state laws and regulations. The formula for the assignment of credit hours is integrated into appropriate curriculum handbooks and Board Policy and is consistent with state and federal regulations. All programs and courses are approved by the Curriculum Committee and Governing Board prior to being offered. The College has standard tuition across all courses and programs and is set by the California legislature. The institution demonstrates compliance with the Commission *Policy on Credit Hour, Clock Hour, and Academic Year.*

Transfer Policies

14

Evaluation Items:

X	Transfer policies are appropriately disclosed to students and to the public. (Standard II.A.10)
X	Policies contain information about the criteria the institution uses to accept credits for transfer, and any types of institutions or sources from which the institution will not accept credits. (Standard II.A.10)
X	Transfer of credit policies identify a list of institutions with which it has established an articulation agreement.
X	Transfer of credit policies include written criteria used to evaluate and award credit for prior learning experience including, but not limited to, service in the armed forces, paid or unpaid employment, or other demonstrated competency or learning.
X	The institution complies with the Commission *Policy on Transfer of Credit*.

[Regulation citations: 602.16(a)(1)(viii); 602.17(a)(3); 602.24(e); 668.43(a)(11).]

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

Transfers policies are presented to students and the public in the College Catalog. The College has established articulation agreements with the University of California and the California State University systems. Transfer of credit policies are codified in district policy and procedures and published in the transfer section of the College Catalog. In addition, the College Catalog communicates the District's Credit for Prior Learning policy. The institution complies with the Commission *Policy on Transfer of Credit.*

Distance Education and Correspondence Education

Evaluation Items:

For Distance Education:	
X	The institution demonstrates regular and substantive interaction between students and the instructor in at least two of the methods outlined in the Commission *Policy on Distance Education and Correspondence Education*.
X	The institution ensures, through the methods outlined in the Commission *Policy on Distance Education and Correspondence Education*, regular interaction between a student and an instructor or instructors prior to the student's completion of a course or competency.
X	The institution demonstrates comparable learning support services and student support services for distance education students. (Standards II.B.1, II.C.1)
X	The institution verifies that the student who registers in a distance education program is the same person who participates every time and completes the course or program and receives the academic credit.
For Correspondence Education:	
N/A	The institution demonstrates comparable learning support services and student support services for correspondence education students. (Standards II.B.1, II.C.1)
N/A	The institution verifies that the student who registers in a correspondence education program is the same person who participates every time and completes the course or program and receives the academic credit.
Overall:	
X	The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings. (Standard III.C.1)
X	The institution demonstrates compliance with the Commission *Policy on Distance Education and Correspondence Education*.

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

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution

	to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the Institution does not meet the Commission's requirements.
	The college does not offer Distance Education or Correspondence Education.

Narrative:

Oxnard College has established standards of quality regarding distance education, such as definitions of regular, substantive interaction, which are found in the Distance Education Handbook. The College requires training and recertification of all faculty who teach distance education courses, as established in the faculty collective bargaining agreement. The collective bargaining agreement also establishes the process and criteria to evaluate faculty teaching distance education courses.

Distance education courses undergo a review process from the Curriculum Committee to ensure standards are met before courses are offered online. Learning and student support services are also accessible for students online.

Oxnard College uses a district-wide learning management system that requires unique user credentials to verify the identity of students enrolled and participating in online courses.

The College does not offer any correspondence education.

Student Complaints

Evaluation Items:

x	The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.
x	The student complaint files for the previous seven years (since the last comprehensive review) are available; the files demonstrate accurate implementation of the complaint policies and procedures.
x	The team analysis of the student complaint files identifies any issues that may be indicative of the institution's noncompliance with any Accreditation Standards.
x	The institution posts on its website the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities. (Standard I.C.1)
x	The institution demonstrates compliance with the Commission *Policy on*

	Representation of Accredited Status and the *Policy on Student and Public Complaints Against Institutions*.

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

Conclusion Check-Off (mark one):

x	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The institution has processes for various student complaints, including student conduct, grievances, sexual misconducts, discrimination, behavioral interventions, as well as others. The processes are clearly outlined on a public website and organized in a manner that is easy to follow as well as connects to other governing bodies and state and federal policies. The reports and files are stored in an online reporting system and database, Maxient. There were no issues identified with the process or management of student complaints.

Institutional Disclosure and Advertising and Recruitment Materials

Evaluation Items:

X	The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies. (Standard I.C.2)
X	The institution complies with the Commission *Policy on Institutional Advertising, Student Recruitment*, and *Policy on Representation of Accredited Status*.
X	The institution provides required information concerning its accredited status. (Standard I.C.12)

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

Conclusion Check-Off (mark one):

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The College complies with the Commission's *Policy on Institutional Advertising, Student Recruitment*. It provides accurate, updated information in printed form through its catalog and online through its website. The published information includes its accreditation status and related information.

Title IV Compliance

Evaluation Items:

X	The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the U.S. Department of Education (ED). (Standard III.D.15)
X	If applicable, the institution has addressed any issues raised by ED as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements. (Standard III.D.15)

X	If applicable, the institution's student loan default rates are within the acceptable range defined by ED. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. (Standard III.D.15)
X	If applicable, contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required. (Standard III.D.16)
X	The institution demonstrates compliance with the Commission *Policy on Contractual Relationships with Non-Accredited Organizations* and the *Policy on Institutional Compliance with Title IV*.

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

Conclusion Check-Off:

X	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.
	The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.
	The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative:

The College monitors its student loan default rate and provides evidence supplied through audits and the District's ERP (Banner) system in compliance with regulations. Contractual agreements and obligations are managed through joint oversight and review by the College and District. The College is in compliance with Commission policies.

Standard I

Mission, Academic Quality and Institutional Effectiveness

I.A. Mission

General Observations:

Oxnard College articulates its broad educational purpose and identifies the students it serves through its mission, guiding principles, and vision statements. These statements express a clear commitment to student learning and achievement and identify the College as a Hispanic Serving Institution. The College implements an integrated planning, review, and resource allocation model which serves to align its programs, services, and resources with its mission. The mission was updated and approved by the Board of Trustees in August 2021 as part of the development of the College's new Educational Master Plan (EMP). The mission, guiding principles, and vision statements are published on the College's website and documented in the EMP.

Findings and Evidence:

Oxnard's mission of "offering equitable access to multiple educational and career pathways" encompasses its broad educational purpose. The College's Guiding Principles specifically identify Oxnard as a Hispanic Serving Institution, and the vision statement calls out the College's diverse student body. As an expression of the College's commitment to student learning and success, the mission states that Oxnard seeks to "prepare students to enrich their communities and to succeed socioeconomically, professionally, and personally." The vision further documents the College's commitment to student success, "We will foster the highest level of student success, advocate for a just and inclusive society, and be a community partner." Oxnard fulfills its mission by offering multiple educational and career pathways including noncredit instruction, career-education programs and certificates, associates degrees, and associates degrees for transfer. To fully support student success, student services and support are offered in multiple delivery methods, including in-person and online. The Review Team was impressed with the College's mission, vision, and guiding principles and its commitment to serve its diverse student body. In particular, the Review Team observed in its focused visit that, with a student body that is 71% Hispanic, the College's commitment to its status as an HSI institution is clearly embraced and evident throughout the College to the degree that it has become part of the College's culture. (I.A.1)

The Review Team found that Oxnard uses institution and program level data to determine its effectiveness in accomplishing its mission as part of its integrated planning model. For example,

the College annually monitors 24 metrics aligned with the goals listed in its EMP. Data are reviewed annually with the intent to inform planning goals and priorities. Data on student enrollment, success, and outcomes informs program review. These data are disaggregated by demographic factors and course modality. (I.A.2)

The Review Team reviewed evidence that the College aligns its programs and services with its mission through an integrated planning process. The new mission statement informed the development of Oxnard's EMP. The College Planning Council monitors implementation of the EMP and holds an annual spring retreat. To review progress on the plan's goals and objectives. As part of the College's program review process, programs describe how their plans and activities align with the College's mission statement and with the EMP's goals. The program review template includes an area for units to request resources to support their program needs. The Program Review Committee (PRC), a governance committee, reviews completed program reviews and moves resource requests to the appropriate governing body for prioritization. (I.A.3)

The College's most recent mission statement was approved by its Board in August 2021. The mission statement is posted on the College's website and as part of its EMP. (I.A.4)

Conclusions:

The College meets the Standard.

I.B. Assuring Academic Quality and Institutional Effectiveness

General Observations:

Oxnard engages in dialogue about student outcomes, equity, academic quality and learning at the institution and program level. Student Learning Outcomes (SLOs) are developed and aligned across courses, programs, and the institution. Institution-set standards and stretch goals are established through the Student Equity and Success Committee and the College acts to address performance that falls below standard. Data, including disaggregated data, is prepared to inform institutional planning and program review. The Institutional Effectiveness office is working with student services to identify and provide data to inform their program reviews. The College posts assessment and student achievement data on its Institutional Effectiveness webpage. Plans which document goals and priorities established through assessment and evaluation of data are posted on the college website. The College has identified a self-improvement plan to improve the assessment of student learning outcomes.

Findings and Evidence:

Through an examination of evidence provided in the ISER, the Review Team confirmed that Oxnard engages in structured dialogue about student outcomes, equity, academic quality, and learning through various processes. At the institution level, the Review Team found that the College has established a process to annually review and discuss goals included in its Educational Master Plan (EMP). The Team encourages the College to fully implement this process and utilize the outcomes of its Spring Planning Retreat to inform its annual goals and priorities. The Student Equity Committee, is charged with developing and implementing the College's Equity Plan. This committee meets regularly and discusses student outcomes and achievement. Programs also engage in dialogue on student learning outcomes and student success through the program review process and department meetings. Professional development opportunities provide another avenue for discussing topics related to teaching, learning, and equity. Additionally, the Educational Master Plan's Goal Three is focused on advancing social justice and equity-minded practices. Students are included in professional development conference attendance; programs such as the PACE Program, which is focused on adult learners with 8-week courses offered in online and hybrid formats to optimize flexibility for this population. Course delivery includes cultural sensitivity, and ethnic studies programs are in place. The Review Team further noted that the College has a new Title V grant focused on implementing Guided Pathways, and initiatives to increase transfer.
(I.B.1)

The College develops and aligns Student Learning Outcomes (SLOs) at the course, program, and institutional level. The Review Team found that Course SLOs (CSLOs) are reviewed as part of the Course Outline of Record review and are documented on course syllabi. CSLOs are assessed through a rating system and results are highlighted as part of the program review process. While the Review Team noted evidence of assessment in the program review process and eLumen reports, it found it difficult to determine if the College implemented regular cycles of assessment institution-wide based on the evidence provided in the ISER. The Team noted that the College established a Focused Innovation Group (FIG) to review the assessment process and develop recommendations. The FIG reported a lack of support for assessment and developed recommendations for improvement. These recommendations are incorporated in a self-identified improvement plan for this standard. At the time of the focused site visit, the Review Team noted that the College has developed a framework for its SLO Handbook and is recruiting three faculty positions that will provide support for the implementation of regular cycles of assessment. Fall plans include hiring the faculty positions, completing the handbook, and integrating the cycle into the existing governance structure with planned implementation of the process in Spring or the following Fall. Through additional interviews during the focused site visit, the Review Team identified that Course SLO assessment is occurring within departments and that results are discussed in program review. However, because there is not currently a college-wide process for systematic analysis of CSLO results, the Review Team strongly encourages the College to complete its proposed work to ensure regular cycles of meaningful assessment and follow-up. (I.B.2)

The Review Team confirmed that Oxnard has established institution-set standards and stretch goals. The Student Success and Equity Committee (SESC) reviews, establishes, and monitors, the standards and stretch goals. The College follows up and addresses performance that drops below its institution-set standards. Notably, the Review Team recognized that the College has developed and is implementing plans to increase the number of students who transfer to a university, a metric that has dipped below the Oxnard's documented institution-set standard. The College is integrating transfer initiatives within its Guided Pathways and its recently awarded Title V grant. Additionally, the Quality Focus Essay includes a project focused on transfer. (I.B.3)

The Review Team found that Oxnard utilizes data to support institution and program level planning. The College Planning Council (CPC) discussed progress on the EMP's goals and objectives during an annual spring planning retreat. A set of 24 metrics are tracked, monitored, and aligned with the EMP's goals. Enrollment, efficiency, course retention and success, and student completion data are integrated into the program review process. The Office of Institutional Effectiveness and the Division of Student Services have recently defined metrics to inform program review in student services. (I.B.4)

Instruction, Student Services, and Business Services annually complete a program review process. The College recently modified its program review form to require analysis of disaggregated student achievement data, including review of course success rates by method of instruction. Additional evidence provided by the College during the ISER review process documented the efforts of the College to integrate data and assessment into Student Services program review, including the list of proposed service unit outcomes for assessment. All units are asked to align their program planning with the EMP's goals as part of the review process. This serves to integrate institution and program level planning. The PRC employs a peer review process for completed program reviews. Requested resources are forwarded to the appropriate governance committee where they are reviewed and prioritized. (I.B.5)

The Review Team noted that the College disaggregates data across achievement metrics at the institution, program, and course level. Institutionally, the College uses disaggregated data to inform its Student Equity Plan. Achievement gaps are identified, strategies developed to close the gaps, and resources are allocated to support the strategies. Dashboards used to inform program review have consistently provided data disaggregated by mode of delivery and student demographic variables. The Review Team noted the updated program review form explicitly requests instructional programs to review and reflect upon disaggregated data. The Review Team encourages the College to continue to refine its program review process to include disaggregation and reflection of data. (I.B.6)

District policies, processes, and procedures are evaluated through various means. At the college level, the Review Team found that the College regularly reviews its governance

structures and decision-making processes through its two-year review of the Participatory Governance Manual (PGM). The Review Team confirmed that governance committees participate in the evaluation of the College's policies and procedures and that specifically, the College Planning Council (CPC) is responsible for the review of committee goal progress and self-assessments of all committees. For example, the Program Review Committee annually assesses the program review process and refines it accordingly. Additionally, the CPC makes recommendations to the College president. The Review Team noted that the College is implementing or has implemented improvements to several core processes such as its SLO assessment cycles, course management system, and integrated planning models. Further, the College employs Focused Innovation Groups (FIGs) to research, review, and establish recommendations for improvement in such areas as assessment and transfer. To ensure regular review of institutional processes, the Review Team encourages the College to codify and document its evaluation cycles. (I.B.7)

Assessment and evaluation data are published on the College's Institutional Effectiveness webpage which can be easily accessed by the campus community. College planning documents representing evaluation of such data are accessible on the College's webpages as well. Program review data are provided to all instructional units to inform their evaluation processes as is evidenced through the examination of completed reviews. The PRC evaluates program reviews which include requests for resources. All college days and an annual spring planning retreat are additional ways the College uses to communicate results of its evaluation. The Review Team found that during the Spring Planning Retreat members of constituent groups engaged in dialogue related to the College's EMP's goals and metrics. Importantly, the retreat includes updates and recommendations from Focused Innovation Groups (FIGS) formed to address specific areas for improvement such as the assessment of Student Learning Outcomes. (I.B.8)

Overseen by the CPC, the College has employed an integrated planning and resource allocation process that aligns institutional and program level planning and resource allocation decisions. The EMP is the principal long-range planning document. Additional institutional plans include the Facilities and Technology plans which are also aligned with the EMP. The CPC intentionally reviews progress on the EMP during its Spring Planning Retreat. Program review which is aligned with the EMP's goals serves as a vehicle for resource allocation requests at the program level. As resource requests are received by the PRC, they are distributed to the appropriate governance body for review and prioritization. (I.B.9)

Conclusions:

The College meets the Standard.

Recommendation to Improve Quality:

Recommendation 1: In order to increase effectiveness, the team recommends that the College fully implement its self-identified plans to codify, support, and integrate regular cycles of authentic student learning and service area outcomes assessment throughout the college. (1.B.2, II.A.3, II.A.11)

I.C. Institutional Integrity

General Observations:

Oxnard ensures that information about its institution is communicated to students and the public through its catalogue and on its website. The College has established a self-improvement plan to improve accuracy and clarity of program webpages. Board policies are in place to promote honesty, responsibility, and academic integrity. Evidence of the regular review of college level policies and procedures was not clearly documented in the ISER. The College complies with the Commission's Eligibility Requirements, Standards, and Policies.

Findings and Evidence:

Oxnard assures the clarity, accuracy, and integrity of information provided to its community. The mission statement is posted on the College's website and in the College's catalogue. Evidence provided by the College confirmed that data on achievement are posted on the institutional effectiveness website and are updated annually. Information published in the college catalogue which describes educational programs and program learning outcomes is reviewed annually through the office of the Vice President of Academic Affairs and Student Learning. The Review Team confirmed that accreditation information is posted on the College website and can be accessed from the home page. The College is working to update several webpages to ensure up-to-date information is readily accessible. This work is described in an improvement plan for this standard. (I.C.1)

The College publishes an online version of its catalogue. The Review Team confirmed that the catalogue includes all information listed in ACCJC's "Catalogue Requirements." The Review Team also confirmed that the catalogue is reviewed and updated annually. (I.C.2)

Oxnard communicates assessment of student learning outcomes and the evaluation of student achievement data to the public and its community through its Institutional Effectiveness webpage and its integrated planning processes which include program review. (I.C.3)

The Review Team found that Oxnard clearly describes its state-approved certificate, degree, and locally approved proficiency awards in its catalogue. The information contained in the catalogue lists program learning outcomes and presents course sequences, plans of study and program units; prerequisites; and admission requirements if different from the College's

admission requirements. Specifically, the catalogue describes additional admission requirements for the College's Dental Hygiene and Firefighter I/II Academy. (I.C.4)

Oxnard reviews college-level policies and procedures through its governance process. The Participatory Governance Manual describes the role and responsibility of each governance committee. The College communicates its mission, programs, and services through its website, college catalog and class schedule. The Review Team noted that the catalog is reviewed and revised on an annual basis with both instruction and student services participating to ensure all information is accurate (I.C.5).

The College informs current and prospective students regarding the cost of education, including tuition, fees, and other required expenses, such as textbooks and other instructional materials. The Review Team confirmed that the Financial Aid Office publishes the total cost of attendance on its website. Fees and tuition information are published in the college catalogue as well. (I.C.6)

Board Policy (BP) 4030 expresses Oxnard's commitment to academic freedom and responsibility and addresses the evaluation criteria for this standard. The District's BP is readily accessible online and is published in various places including the faculty handbook, bargaining agreement, online, and in the college catalogue. The District's participatory governance bodies regularly review BPs and make recommendations for changes to the Governing Board. (I.C.7)

The College adheres to the district's Board Policies (BP) and Administrative Procedures (AP), BP/AP 5500, 5520, 5530 that promote honesty, responsibility, and academic integrity. These policies are in the college catalogue and faculty handbook. Additionally, the Academic Senate has adopted the American Association of University Professors (AAUP) Faculty Code of ethics. (I.C.8)

BP 4030, the Faculty Code of Ethics, and the faculty collective bargaining agreement emphasizes the importance of distinguishing between personal conviction and professionally accepted views. In addition, the Review Team examined the Faculty Code of Ethics and noted it emphasizes that that faculty "accept the obligation to exercise critical self-discipline and judgement in using, extending, and transmitting, knowledge." (I.C.9)

I.C.10 Not Applicable

As part of the Ventura County Community College District, Oxnard is a California public postsecondary institution. It has no parent organization, private investors, or other external interests. It does not operate in foreign locations, nor does it require conformity among staff regarding beliefs or world views. (I.C.11)

The College maintains a robust accreditation webpage that includes links to current and historical reports submitted to the Accrediting Commission for Community and Junior Colleges. The website documents the accreditation status and notification of the accreditation status of the College. The Review Team found that the current Institutional Self-Evaluation Report (ISERR), accompanying evidence, link to the third-party comment form, and notice of upcoming evaluation are posted on the webpage. In addition, the College solicited public comment through presentation on the status of its self-evaluation leading up to the submission of its ISER to the Commission. (I.C.12)

Oxnard advocates and demonstrates honesty and integrity in its relationships with external agencies. It complies with regulations and statutes. The College's accreditation webpage is current and includes historical documents describing its accreditation status over time. The College's accreditation page provides links to accrediting agencies for externally accredited programs and programs post their accreditation agency and status on their program website. (I.C.13).

Oxnard is a publicly funded, not-for-profit institution and therefore does not generate financial returns for investors nor contributes to any financial organizations. (I.C.14)

Conclusions:

The College meets the Standard.

Standard II

Student Learning Programs and Support Services

II.A. Instructional Programs

General Observations:

The College offers an appropriate level/range of instructional programs that relate to the attainment of learning outcomes, degrees, and other goals in support of student success. Faculty are involved at various levels throughout the process, and the College has policies and procedures that work to align curriculum and programs with its mission. Learning outcomes are generally established. Evaluative cycles exist but the assessment process was not clear, nor was how the faculty use student outcome assessment for continuous quality improvement.

Findings and Evidence:

The College offers a wide range of courses and programs which are appropriate to post-secondary education and are aligned with the College's mission. The College relies on the Curriculum Committee and Program Review Committee to assure that courses and programs, regardless of modality, are aligned with the College's mission. Student achievement metrics are monitored by the Office of Institutional Effectiveness (II.A.1)

The College has a robust Curriculum Development Handbook and professional development schedule to guide faculty in the creation of courses and programs that meet generally accepted academic and professional standards. In spring 2020, the Curriculum Committee lead a faculty in a review of every active course to ensure they were current, complete, and compliant. Further, faculty evaluate courses and programs through the annual program review process.   A variety of student success indicators are reviewed as part of program review, but there was no indication of how the data is used in planning. It is unclear if actions come out of the data review as there is evidence of discussion but no evidence of action plans. (II.A.2)

The College has identified learning outcomes for all courses, programs, certificates, and degrees. Learning outcomes analysis is part of the Comprehensive Program Review process. However, the samples provided reported discussion on learning outcome assessment in the aggregate followed by how the discussion informed program objectives, action and resource requests. The assessment of an individual outcome was completed, analyzed, and used for improvement was not clear. Through additional interviews during the focused site visit, the

Review Team learned that this level of review was occurring at the department level with faculty and summaries provided in program review. The Review Team also noted that work to improve this process was ongoing, with a plan for implementation of a new process in the Spring or early Fall of 2024. The Office of IE manages the assessment process to ensure assessment results are reported as scheduled. The College assures that faculty are including content from the CORs via classroom visit observations during faculty evaluations. CSLOs are identified on the COR and syllabi. The requirement of having CSLOs on the syllabi is outlined as a faculty responsibility in the Faculty Handbook. (II.A.3)

The College makes clear the transferability of its courses through the language attached to each course in the College's catalogue. Courses are identified as either "Not applicable for degree credit," "Applies to Associate Degree," or "Noncredit course; not applicable for degree credit." The catalog also includes CSU and/or UC transferability status. Course numbers also indicate whether a course is precollegiate or college level. The College used guided self-placement for ESL courses and provides concurrent support courses for transfer level English and math. (II.A.4)

Degrees and programs are developed following BP/AP for the district which are informed by Title 5. The College also relies on the Program and Course Approval Handbook provided by the State Chancellor's Office. CTE programs also rely on input from local employers and industry partners. The College's Articulation Office recommends elective courses for ADTs to increase student's transfer options. All courses and programs are reviewed and approved by the College's Curriculum Committee and BOT. (II.A.5)

The College follows a scheduling calendar that outlines scheduling deadlines. The deans and discipline faculty use data dashboards of enrollment metrics such as fill-rates, wait lists, section counts, room capacity, course capacity, enrollment counts to determine course offerings. Program maps have been created as part of the Guided Pathway implementations and are also used to inform scheduling. (II.A.6)

The College offers courses through a range of modalities, using student demographic data to help guide scheduling. Likewise, support services are offered both in person and online. The College has an established procedure for approving courses and programs for distance education and a well-developed Distance Education Handbook. All courses offered online have a distance education addendum which is reviewed and approved through the Curriculum Committee. The Distance Education Committee, a subcommittee of the Curriculum Committee, evaluates and promotes web-enhanced tools and instructor professional development in distance education. Faculty evaluations and program review also evaluate the quality of instruction across modalities. The College's commitment to its Latine population as an Hispanic

Serving Institution (HSI) is demonstrated in programming such as the PACE program, which ensures flexibility for adult learners and students who are employed in the daytime industries of the community. Tutoring and mentorship programming also reflects an intentionality in attending to students of traditionally underserved populations. (II.A.7)

The College does not have department-wide examinations but does directly assess prior learning. The district has BP/AP that addresses eligible courses, documentation, and means of assessment for awarding credit for prior learning. Credit for prior learning pathways include external examinations, credit by examination, and high school course articulation. (II.A.8)

Course learning outcomes are reviewed by the Curriculum Committee to ensure they "integrate with course content" and that assignment reinforce content achievement of outcomes. The College aligns units awarded for courses with California's C-ID descriptors, and in the case of GE courses, with CSU GE-Breadth and IGETC. (II.A.9)

The College relies on faculty, counselors, and articulation officers to evaluate courses transferred from other colleges without C-ID alignment. The College articulation officers work collaboratively to provide alignment information for courses across the district's three colleges. The College's catalog outlines steps to transfer and provides an extensive list of equivalent courses based on C-ID descriptors. (II.A.10)

The College has identified institutional learning outcomes (ILOs) that address communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, and the ability to engage diverse perspectives. During the focused site visit, the Review Team learned that while Program Student Learning Outcomes (PSLOs) and Service Unit Outcomes (SUOs) are mapped to the ILOs, results are not systematically reviewed or analyzed. The College has identified a plan for improvement that includes hiring three faculty peer mentors to improve authentic student outcomes assessment across the college, and the Review Team strongly encourages the College to follow through with this plan. (II.A.11)

The intent of the general education (GE) courses that are required to complete an associate degree is clearly articulated in District Policy and in the faculty's philosophy and criteria for general education. GE requirements are published in the College's catalog. Courses are approved for inclusion in the College's GE pattern through processes outlined in the General Education Handbook. These processes were created by the College's GE Committee and approved by the Curriculum Committee and Academic Senate. The faculty have identified GE SLOs in Natural Sciences; Social and Behavioral Sciences; Humanities; Language and Rationality;

Health Education; Physical Education; and Ethnic/Gender Studies. There was no evidence provided of if these were regularly assessed. (II.A.12)

The Curriculum Committee assures that all degree programs include courses that address a focused field of study or prepare students for employment. Career education programs are informed by industry needs, and transfer programs rely on the required outcomes of receiving institutions. The college catalog outlines program outcomes and required courses. (II.A.13)

CE programs complete additional sections of multiyear reports that focus on advisory committee engagement, employment outcomes, career trends, and current and projected labor demand. CE programs undergo curriculum review every two years with LMI Faculty also may survey graduates to determine employment rates. The College relies on advisory committees to report on the performance of recent graduates. External licensure and certification are additional measures of competency development, along with CSLO assessment. (II.A.14)

BP 4021 gives authority to the Academic Senate to establish discontinuance procedures. Program discontinuance may be recommended based on a set of possible criteria evaluated during program review and outlined in AP 4021. A Recommendation Group evaluates program review recommendations and may propose program discontinuance. The College Planning Council hears appeals from programs recommended for reduction or discontinuance. If a program's requirements are significantly changed, a plan for completion for current students is created by discipline faculty in consultation with the division dean and communicated to counselors and to students in the program. (II.A.15)

Programs complete a comprehensive program review on a 3-year staggered cycle, with annual updates the two years that follow. The comprehensive program review includes analysis of a variety of data, including student enrollment, productivity, retention, and success rates, and labor demand (CTE only). All reports are reviewed by the Program Review Committee, a participatory governance committee that includes 11 Academic Senate representatives, 5 Classified Senate representatives, 2 Associated Student Government representatives, and 3 Management representatives. A summary report with recommendations is compiled by the Program Review Committee and submitted to the College Planning Council for consideration. (II.A.16)

Conclusions:

The College meets the standard.

Recommendation to Improve Quality:

Recommendation 1: In order to increase effectiveness, the team recommends that the College fully implement its self-identified plans to codify, support, and integrate regular cycles of authentic student learning and service area outcomes assessment throughout the college. (1.B.2, II.A.3, II.A.11)

II.B. Library and Learning Support Services

General Observations:

The institution has a wide variety of support services, including textbooks, hotspots, laptops, library instructional services, and tutoring as examples. Services are sufficient given the size of the College and are more than adequate to support educational programs. Students taking classes in varying modalities have access to material and services. Assessment and evaluation practices related to this Standard should be refined to strengthen alignment.

Findings and Evidence:

The library and learning center have robust offerings, which include computers, textbooks, and hotspot lending. They have been responsive to changing demand and added services over time, extended loan periods, Zoom Tutoring, and Tech Bar are a few examples. The library evaluates the effectiveness of its processes through program review. All locations/students, regardless of learning modality have access to the services and resources (II.B.1).

Evidence indicates that faculty and staff work together to maintain appropriate library resources. Given the institution's size, the amount/scope of the materials being lent to students is impressive. As noted elsewhere, the institution appears responsive to changing needs by the variety and amount of material available for lending. There was a mention of collaboration on technology adoption including a survey that asked for student input regarding technology needs. The program review suggested that collaboration between stakeholders occurs and those collaborations lead to plans for improvement (II.B.2).

The institution provided evidence that they participate in the program review process. That process includes assessment of use and access involves reflection among faculty and staff engaged in providing the services. The library, tutoring center, and related programs have documented outcomes, with some evidence of assessment demonstrated in the self-evaluation. The library and learning center may want to continue to evaluate assessment practices to ensure engagement with all stakeholders is fully considered (II.B.3).

All third-party services where collaboration occurs are widely recognized high-quality providers and most serve as non-profit agencies. Only online reference services and online tutoring

services have interactions with students. In both cases, the systems collect adequate information to evaluate the services provided (II.B.4).

Conclusions:

The College meets the Standard.

II.C. Student Support Services

General Observations:

The institution has a wide variety of support services to ensure students are admitted, supported, and guided towards success. Support services included counseling and academic advising, co-curricular and athletic options, and admissions and placement processes to guide the students. The institution has evaluation and assessment processes in place to maintain compliance, integrity, and effectiveness. The services provided are available in multiple modalities and locations to ensure students engaging with the institution can access the support services.

Findings and Evidence:

Evidence indicates that the College has sufficient student support services and has institutionalized evaluation processes for both in-person and online services. Additionally, federal grant programs also comply with evaluation processes required by the granters. Technology is utilized to provide adequate student support services in an online format for counseling, orientation, and other services. Evaluations disaggregate (II.C.1). Evidence indicates student support services have identified learning outcomes and have structures and activities to assess the outcomes. That said, the Admissions and Records student survey included only 30 respondents. The assessments are utilized to improve support services (II.C.2).

Evidence indicates the college provides access to student support services to students coming from locations at the main campus, offsite partners, and online. Assessment is being done to understand student needs with technology and student support services. At the time of the visit, the team could confirm that student support services were being evaluated by modality to ensure that students are provided equitable services regardless of modality and location. Evaluation by modality is being built into the infrastructure of the institution, such as within program review and institutional effectiveness. More support from the district institutional effectiveness team could allow the college institutional effectiveness to meet its goals. The College may need more autonomy in its approach to evaluation (II.C.3).

Evidence indicates the college provides co-curricular and programs suited for the institutions

mission adding to the social and cultural development of students. The institution evaluates the co-curricular activities and has policies and procedures in place to support the standards of the operations (II.C.4).

Evidence indicates the college is providing adequate counseling and academic guidance for students to support their academic and personal development. Evidence indicates the college is providing sufficient information and in a timely manner to keep the student aware and on-track to meet academic goals. Evidence demonstrates that counselors and personnel are adequately trained. Evidence indicates that the learning outcomes for students enrolled in counseling courses is sufficient; moreover, evidence shows the college is evaluating counseling and advising services through the program review process to understand if they enhance student development and success (II.C.5). Evidence indicates the college has adopted admission policies consistent with its mission, and it specifies qualifications of students for specific programs. The college advises students on clear pathways to meet their educational goals (II.C.6).

The college demonstrates that it is evaluating established processes for admissions placements through program review processes, district committees, and working groups (II.C.7). Evidence indicates the college has established processes to maintain student records permanently, securely, and confidentially using various technologies and storage methods. The processes are adequately published (II.C.8).

Conclusions:

The College meets the standard.

Standard III

Resources

III.A. Human Resources

General Observations:

The institution employs administrators, faculty and classified staff all fully engaged at all levels in the efficient and effective operations of the college. The institution supports its work for student success and achievement through robust planning and assessment processes. It has policies and procedures for recruitment and selection of a highly qualified and diverse workforce, administering performance evaluations, onboarding, and professional development programs.

Findings and Evidence:

The Team reviewed the BPs, APs and sample job announcements. The College assures that all employees have the appropriate training, background, and experience. Job positions are clearly and publicly stated on various websites and with accurate descriptions related to the institution's mission and goals (III.A.1).

The Team reviewed sample postings, prescreening form, criteria, and degree verification processes. Faculty qualifications include knowledge of subject matter and requisite skills, including appropriate degrees, background, expertise, and other factors. Job descriptions include curricular responsibilities and assessment of learning (III.A.2).

The Team reviewed the APs related to administrator qualifications, which outlined the processes for hiring a College President and academic managers. The procedures ensure that administrators and other employees responsible for educational services possess the necessary qualifications (III.A.3).

The Team reviewed the National Association of Credential Evaluation Services (NACES) website and the AP related to equivalency. The District also convenes a District-Wide Equivalency Committee to determine faculty qualifications when needed. Degrees from non-US institutions are recognized only if the agency is recognized by the NACES as equivalent (III.A.4).

The Team reviewed sections of the collective bargaining agreements for the various units and evaluation worksheets as evidence of established evaluation cycles and criteria. The Team also reviewed the spreadsheet with current evaluation completion rates for only classified employees, which indicated name/title but did not specify status of evaluations. The College

has identified gaps in completion rates and noted that Human Resources has established a position for an HR Specialist to follow-up on evaluation gaps and developed a tracking plan (III.A.5).

(III.A.6)

The Team reviewed the College's FON and District provided FON analysis to assure that the institution maintains a sufficient number of qualified faculty essential to educational programs and services (III.A.7).

The Team reviewed the part-time faculty orientation slide deck and appropriate evaluation forms, as well as a variety of Fall 2021 professional development workshops. The College also maintains a faculty handbook online to ensure that faculty are integrated into the life of the institution (III.A.8).

The Team reviewed the College's organizational chart, classified hiring flowchart, and form to request the establishment of a new position. The process to replace or create new staff positions are tied to resource requests based on program review data and goals (III.A.9).

The Team reviewed the College's organizational charts, AP, and sample job announcement for an administrative position. Like the preceding standard, the College utilizes the program review process to identify the need for an additional or new administrator. The announcement contains language to ensure that administrators have appropriate preparation and expertise to support the institution (III.A.10).

The Team reviewed the screenshots of the BoardDocs sites where policies and procedures are generally established. The College maintains an accessible website for the Personnel Commission and Collective Bargaining Agreements, which also include sections that address grievance procedures. Orientation materials, trainings, and announcements also reflect accessibility to personnel policies and procedures (III.A.11).

The Team reviewed District BPs and APs that address commitment to support diverse personnel, equal employment opportunity, and the Mission Statement that explicitly focuses on equity. District organizational structure analysis and recommendations addressed diversity, equity, and inclusion as a priority area for employees and students (III.A.12).

The Team reviewed codes of ethics and statements that faculty and administrators have adopted. The District also maintains a code of ethics within its BPs and APs and addresses consequences for violation (III.A.13).

The Team reviewed the sampling of professional development activities offered through the College's Professional Development activities from 2021-2022. PD opportunities ranged from addressing technology use, course accessibility, and classroom management strategies, to name a few. Participants also were surveyed. PD opportunities extended to classified staff and administrators as well (III.A.14).

The Team reviewed the personnel file review process found in the collective bargaining agreements. The Personnel records can only be reviewed by employees and their direct supervisors in the presence of an HR staff member. The College provides security and confidentiality of personnel records (III.A.15).

Conclusions:

The College meets the standard.

III.B. Physical Resources

General Observations:

Oxnard College has safe and sufficient resources to meet the needs of programs and associated support services. The facilities are effectively utilized and planned to meet the mission of the College. Evidence indicates that the College generally has strong governance and planning processes aimed at supporting student success. Evidence also indicates that further refinement of total cost of ownership analysis and projection is needed.

Findings and Evidence:

The College demonstrated that they have processes and systems in place for ensuring campus facilities are safe. The primary mechanism for addressing safety concerns is the Campus Use Development and Safety (CUDS) committee. The committee has open meetings where any constituents/stakeholders can share concerns or ideas for improving safety. The College shared a list of significant actions they have taken to improve safety including: safety lighting, HVAC upgrades, door locks, and a wide variety of renovations and maintenance activities as evidence of meeting the Standard (III.B.1).

The College assures effective utilization of physical resources through the planning process. The College has an Educational Master Plan, Facilities Master Plan, and Technology Master Plan to support planning processes. Needs of programs are considered through the program review

process and evidence suggested robust conversations and assessments support decision-making regarding renovation, maintenance, and replacements (III.B.2).

A primary means for requesting facility changes appears to be through the program review process and all facility requests are reviewed by the Campus Use Development and Safety (CUDS) committee. Requests are assessed based on utilization and incorporated into the Facilities Master Plan where appropriate. The evidence indicates that processes for assessment and evaluation of facilities and planning ensure relevant considerations are made that support institutional programs and services (III.B.3).

Long-term projects are effectively linked to institutional planning through the Program review process, the Facilities Master Plan, and various governance committees. The ISER noted the difficulty in developing total cost of ownership algorithm and there is an associated improvement plan. Evidence cited elsewhere in the ISER included evidence that long term costs are considered. These pieces of evidence include components of the FMP, Facilities Building Analysis. The adopted budget suggests the College is planning for associated needs (III.B.4).

Conclusions:

The College meets the standard.

III.C. Technology Resources

General Observations:

The College and the District provide effective technology support and resources to maintain the College's programs and services. The College effectively plans for technology needs including regular updates and replacements. Technology resources at all College locations have reliable access, safety, and security. Professional development and support are provided to employees and students to use the technology effectively. There are policies and procedures to guide the appropriate use of technology in teaching and learning.

Findings and Evidence:

The resources and support for information technology at the college and district level appear to be sufficient to maintain effective academic, student services, and administrative functions. The college reviews the effectiveness of technology resources through the ITS department program review as well as through the college's Technology Effectiveness Committee which focuses on the enhancement and development of technology needs across the campus. (III.C.1)

The College has a ten-year Technology Master Plan which provides long-term direction for the goals and initiatives related to technology. Additionally, the District has a three-year Strategic Information Technology Plan and an ongoing advisory committee to support college and district initiatives. Annually, technology requests are collected through program review and prioritized by the Technology Effectiveness Committee at the College. If a request is funded, a plan is made for how to acquire, implement, and maintain the technology. (III.C.2)

Technology support is provided to all programs and services, including off-campus locations. The College requires the use of networked shared folders that are backed up nightly with secured access through active directory security groups and multi-factor authentication. A firewall is used to protect sensitive data and authorized users are provided access to a VPN connection for remote access to secure systems. (III.C.3)

The College provides technology support to students and employee groups through regular training and the newly implemented Tech Bar. Focused trainings are provided on the use of the college's Canvas Learning Management System by the Instructional Technology Designers for students and faculty at multiple times throughout the year. There are also regular and as needed trainings on specific hardware or software implementations and the College has implemented the Cornerstone Learning Management System to provide access to ongoing professional development. (III.C.4)

The College and District have adopted and implemented appropriate policies and procedures to guide computer and network use. All employees are required to agree to the relevant Board Policy and Administrative Procedure before accessing District networks or using District Computers. (III.C.5)

Conclusions:

The College meets the standard.

III.D. Financial Resources

General Observations:

Oxnard College, in concert with its sister colleges and the District Operations Center demonstrate financial management that they have aligned their financial resources with their mission to support students in achieving their educational goals. Their program review, institutional planning documents, and resource allocation processes all support their stated goals.

Findings and Evidence:

The College cites a number of sources that support its budget and financial management planning processes: BPs 6200, 6250 and 6300, the VCCCD Budget Allocation Model and the Infrastructure Funding Model which were developed through the District's participatory governance structures. The College also cited external sources for guiding their planning processes contained in Title 5 and the CCC Budget and Accounting Manual. The College's budget and financial statements, along with minutes from the District and College Budget and Planning Committees satisfactorily demonstrate that the College meets this standard (III.D.1).

The College's Strategic Plan for years 2021-2027, Educational Master Plan both point to a robust and continual planning process. Minutes from both the College and Districtwide planning and budget committees are further evidence that financial planning that drives resource allocation is practiced routinely at the College (III.D.2).

Several sets of minutes from the DCAS, CPC, BC committees all point to a robust and active planning cycle supporting annual resource allocation. The Program Review process is supported by documentation of minutes, forms, memos to the campus community and other correspondence regarding the budget planning process (III.D.3).

Minutes of the DCAS, local and districtwide budget and planning committees, demonstrate that budget assumptions are derived from Department of Finance, and State Chancellor's Office directives regarding future apportionment and other revenue and cost information. Budget instructions from the District's Fiscal Services Office, Multi-Year Projections, and Budget Calendar demonstrate a clear and realistic understanding of resource availability (III.D.4).

Agendas and minutes from monthly Board of Trustee meetings which list purchase orders, expenditures, budget transfers, etc. made in the previous month demonstrate transparency of internal financial controls and compliance with District expenditure policies. The frequency of the reporting (monthly) allows for timely and immediate information to be transmitted for financial decision making (III.D.5).

Minutes from the meetings where the budget is presented and discussed: DCAS, Board of Trustees, etc. demonstrated clear and transparent communication regarding the budget process and outcomes. Additionally, copies of the annual audit are also demonstrated evidence of the accuracy of the College's/District's financial reporting and the resources allocated to student learning. Compliance with the State 50% law also demonstrates that the College is supporting their student learning goals (III.D.6).
The Corrective Action Plan in response to the audit findings, minutes of the Administrative Services Committee and subsequent audits demonstrate that the College responds to external audits in a timely and transparent manner (III.D.7).

The College provides BP 6300, BP 6400, minutes of the District Operations Committee (DOC) and copies of the last two annual financial audits as evidence that adequate internal controls exist and are working as they should (III.D.8).

The College has provided copies of the annual operating budget containing the Unrestricted and Restricted General Fund Balances demonstrating that the College and District maintain adequate resources to provide cashflow and reserves for future needs. Additionally, audits provided for the past two fiscal years show adequate cash on hand for contingencies (III.D.9).

BP 6250 and BP6300, along with the supporting administrative procedures (AP6250 and 6300) are followed as evidenced by the annual budgets and financial reporting system that reflect all financial transactions recorded in both the general and subsidiary ledgers. These systems ensure that the College and the District are following generally accepted accounting practices (GAAP) and governmental accounting standards. These procedures are also verified as evidenced by the annual audits performed by the District's independent audit firm (III.D.10).

Review of the College and District's annual operating budget and other published financial documents (minutes from the DOC, DCAS, annual audits) demonstrate that the College/District would be able to maintain both short term and long-term financial solvency. The District manages multiple reserves that are in excess of the state-required minimum of 5% (III.D.11).

The District manages the OPEB obligation centrally and in accordance with GASB 74 and 75 per the published annual audits and actuarial study provided. As the District's net OPEB liability has decreased, its financial position with respect to this unfunded liability is appropriate (III.D.12).

The District has debt obligations under the Measure S general obligation bond. It provided the annual reports of the Citizens Bond Oversight Committee and audits which show it to be in compliance with all legal reporting and expenditure requirements. Debt repayments are managed by the County Treasurer and there do not appear to be any issues with default or defeasance. The District does not have any other debt obligations (III.D.13).

The College provided BP 6307, annual Bond audit, and minutes of the Citizen's Bond Oversight Committee as evidence of compliance with this standard. The District has no other long term debt obligations beyond the Measure S general obligation bond. The Oxnard College Foundation is the auxiliary organization that is organized to fund-raise and receive funds on behalf of the College. Its operations are overseen by a Board and ultimately by the VCCCD Board of Trustees. Minutes of the Foundation Board and annual Foundation audits demonstrate compliance with District policy BP 3600. The grants process is governed by BP 3280 and provided as evidence of compliance with federal and state laws, the intended purpose of the grant and appropriate oversight by management (III.D.14).

The College monitors its student loan default rate and provided the various mechanisms it uses to ensure that its default rate does not exceed 30%. It has documented default rates of 0% for 3 fiscal years and partners with Student Connections to develop and implement a default prevention plan. The College's Financial Aid website provides students with resources, information, and assistance. Other evidence supplied through audits and the District's ERP (Banner) system Financial Aid module documents compliance with US Department of Education return to Title IV regulations (III.D.15).

The College has many contractual agreements and obligations that are managed through a system of joint oversight by College and District personnel. BP 6330, AP 6330, and minutes of Board of Trustee meetings ensure that contractual agreements are approved by the legal entity of the District, i.e., the Board of Trustees and that terms and conditions are consistent with both the College and District Missions and goals. Evidence indicates that the College and District have procedures in place whereby the appropriate Vice Chancellor, Vice Chancellor of Business and Administrative Services and general counsel review and approve all agreements. Where warranted, additional review and approvals are obtained from the College's Executive Council and tracked though the District's workflow system (III.D.16).

Conclusions:

The College meets the standard.

Standard IV

Leadership and Governance

IV.A. Decision-Making Roles & Processes

General Observations:

The College relies on Board policy and its *Participatory Governance Manual* to establish the roles of all constituent groups in governance. It is not clear how governance is designed to facilitate decisions that support student learning programs and services and improve institutional effectiveness. There may be a need to improve processes for evaluating governance structures. The College has made progress in establishing inclusive governance structures, processes, and practices for the good of the institution.

Findings and Evidence:

The College has recently updated its *Educational Master Plan, Facilities Master Plan*, and developed a *Participatory Governance Manual* (PGM). The PGM outlines the roles of each constituent group and provides the committee structure, roles, and responsibilities, and it outlines how the committees relate to each other and function in participatory governance. The PGM contains diagrams of governance and decision-making lines of communication. Committee recommendations are vetted with the College Planning Council which make final recommendation to the College President. The College President, in turn, reports back final decisions to the CPC and campus. (IV.A.1)

The College's policy and procedures for participatory governance include all constituent groups, with the College electing to use a tri-chair model in support of participatory governance. In support of the students' voice, the *Participatory Governance Manual* outlines that students have membership on all participatory governance committees, and they are considered equal partners in decision making. (IV.A.2)

The College has established policies and procedures that describe the roles for each group in governance. The P*articipatory Governance Manual* identifies the participatory governance committees including purpose, membership, and responsibilities in decision making. (IV.A.3)

As outlined in Board policy and the College's Curriculum Handbook, faculty are the primary source for curriculum development and they collaborate with administration to assurer, the Curriculum Committee includes voting members from administration. In addition, faculty must review all new courses and programs with the division's dean and gain approval before development. All curriculum is approved by the College's Curriculum Committee, with the Distance Education and the General Education Subcommittees providing additional

recommendations related to these two curricular areas. Once approved by the College, it is reviewed by the District Council on Curriculum and Instruction, an advisory group to the Chancellor through Cabinet and the District Consultation Council. (IV.A.4)

The College relies on Board Policy and the *Participatory Governance Manual* to establish governance structure and explain constituents' roles in institutional decision making. Communication of these roles and carrying out by the committee chairs who attend training at the start of each semester on the elements of the *Participatory Governance Manual,* including philosophy and guiding principles. Some of the participatory governance committees have tri chairs to provide diverse perspectives. The College holds all-campus forums to provide an opportunity for a wide range of perspectives in governance. (IV.A.5)

The College communicates committee recommendations via publicly posted minutes, Committee members relay information back to constituent groups, with an end-of-year survey used to evaluate the effectiveness of the report back process. The president communicates decisions publicly at planning retreats and All College Day in the fall each year. It is reported that Budget and Resource Allocation decisions are published annually, but no evidence is provided to support this statement, however budget meeting minutes show resource allocation decisions. When a presidential decision is at odds with the recommendations of College Planning Council or Senate bodies, the rationale for the decision is published in writing. (IV.A.6)

The College has recently revised the governance manuals. This work was completed by the Senates and management representation. The update resulted in changes to the college participatory governance structure. The College relies on an annual survey to evaluate each committee's effectiveness. While the results data of a recent survey were provided, there was no evidence of how these results are analyzed and used to create improvement plans. It was also noted by the team that the survey evaluated committees but not the effectiveness of overall governance processes. (IV.A.7)

Conclusions:

The College meets the standard.

IV.B. Chief Executive Officer

General Observations:

The President is the CEO of the College, overseeing planning, organizing, and budgeting, selection personnel, and assessing institutional effectiveness. The President manages and delegates authority as appropriate. The President guides all matters of overall institutional improvement in alignment with the plans and mission of the College, ensures compliance with accreditation requirements, implementation of board policies, and communicates with the surrounding community.

Findings and Evidence:

The Educational Master Plan and Participatory Governance Manual are both certified by the President in alignment with the College's participatory governance committees. The Team reviewed submitted minutes that demonstrate the President's role in organizing and budgeting, selecting and developing personnel, and assessing institutional effectiveness (IV.B.1).

The September 2021 Executive Council agenda/minutes includes follow-up items to demonstrate that the President oversees an administrative structure that reflect the institution's purposes, size, and complexity. Their weekly Executive Council meeting serves as one of the major channels in which authority and responsibilities are discussed and delegated as appropriate (IV.B.2).

The Team reviewed the Educational Master Plan and an earlier reference to the Executive Council and the President's role in the revision of the Participatory Governance Handbook and creation of a College Planning Council. The evidence demonstrates that the various levels of planning, resource allocation, and evaluation are aligned with the College's goals for student achievement and learning and guided by the President (IV.B.3).

The President confers regularly with key leaders overseeing the College's accreditation efforts. Accreditation information is relayed through Cabinet meetings, and the campus is informed about the importance of continuous improvement to comply with accreditation requirements (IV.B.4).

The College utilizes extensive participatory governance processes that involve both District and local committees regarding implementation of various statutes and policies, including budget and expenditures. The College committees ultimately provide recommendations to the President, as evidenced in the Participatory Governance Flowchart (IV.B.5).

The President utilizes the monthly Advisory Council to reach out to communities served by the institution, which includes surrounding K-12 districts, local officials, and other civic leaders. The

President also utilizes local media outlets and townhalls to foster closer relationships with the community (IV.B.6).

Conclusions:

The College meets the standard.

IV.C. Governing Board

The Ventura Community College District is governed by an elected board of five trustees. BP2200 Board Duties and Responsibilities outlines the responsibilities of the Board of Trustees, which include establishing academic standards and graduation requirements, improvement of the quality, integrity, efficiency, and effectiveness of district student learning programs and services, and oversight of the stability and sustainability of finances necessary to support student learning programs and services within the District's mission. BP 2205 Delineation of System and Board Function further clarifies the role of the board and its relationship to each college, also illustrated in greater detail in the District's Participatory Governance Handbook. BP and AP 2410 Board Policy ensure regular review of board policies with a five-year review cycle. The most recent cycle includes an additional two years, now 2016-2023, due to pandemic challenges.

Findings and Evidence:

The Ventura Community College District (VCCD) is governed by an elected board of trustees. The Board ensures regular review of board policies, as it relates to quality, integrity and effectiveness. Board Policies also clarify the role of the relationship to the board and the college in the District's participatory governance handbooks (IV.C. 1).

The Board acknowledges it has struggled at times to act as a collective entity. The Board established Ground Rules during the August 4, 2020, Board of Trustees Meeting, which included an outline of the trustees' commitment to working as a transparent, effective, and respectful entity. The Ground Rules now appear on every board meeting agenda. One of the ground rules established addresses acting as a unit and reads "once the Board has heard and considered the views of its members and acted, all members will respect the action of the quorum, unless and until the Board takes up the matter again."

The team had an opportunity to observe recent meetings electronically where the Board exhibited continuing struggles to consistently adhere to its ground rules. The team also met with three members of the Board and observed that some individual members of the Board may not have a full awareness of the impact of behavior that is counterproductive to acting as a collective entity. However, the Board is aware of this issue and in recognition of these challenges, the Board has sought outside consultation to assist in ongoing efforts to improve and strengthen its ability to act as a collective entity. The team encourages the Board to continue these efforts to ensure sustained alignment with this Standard. (IV.C.2)

The Board of Trustees oversees the hiring and evaluation of the Chancellor. BP 2431 CEO Selection outlines the framework for recruiting a Chancellor. The most recent CEO hiring took place in 2022. The Board discussed and publicly shared its recruitment process during multiple meetings, affirming recruitment committee membership, district and community representation and participation, the position description, and timelines. Similarly, the evaluation process for the Chancellor is specifically codified in BP 2435 Evaluation of the Chancellor and further delineated in AP 2435, requiring formal evaluation at least once each fiscal year. The Board uses evaluation criteria based on the Board Policy, the Chancellor's job description, performance goals and objectives, and mutual agreement with the Chancellor as listed in BP 2430 Delegation of Authority to Chancellor. (IV.C.3).

Members of the Board of Trustees are elected by the electorate in five designated trustee areas, as outlined in BP 2100 Board Elections. They are an independent group of elected officials who represent the public's interest to ensure educational quality at all three colleges of the District. A student Board member is selected each year by the students from each of the three colleges, as detailed in BP 2105 Election of Student Member. The Board has the responsibility to advocate for and defend the District and the three colleges, while protecting the institutions from undue influence or political pressure. Current Board members serve four-year terms and elections are staggered to ensure continuity. (IV.C.4).

The Board's policies include guidelines for the roles and responsibilities of the Board with its main focus on serving as an independent, policy-making body that ensures the Colleges' educational quality in service to the public interest. Policies on conflict of interest and Board ethics clearly outline the responsibility of the Board to avoid political pressure and advocate on behalf of the institutions and the students served. (IV.C.5).

The Board of Trustees publishes policies that specify its size, duties, responsibilities, structure, and operating procedures along with meeting agendas and related documents on the public district BoardDocs site. The Board consists of five members serving four-year terms elected by the public from corresponding areas of the county, with staggered elections so that roughly half the trustees are elected each election cycle. In addition, the Board includes one student member serving a one-year term with an advisory vote, elected by the student body. The duties and responsibilities of the Board are summarized in BP 2200 Board Duties and Responsibilities, outlining how the Board provides broad oversight and develops policy for the district. Officers of the Board are the chair, vice-chair, and secretary. The chair and vicechair are elected annually, while the Chancellor serves as the secretary to the Board, each with respective duties. Additional responsibilities of the chair are designated in BP 2215 Role of the Board Chair. BP 2220 Committees of the Board summarizes committee responsibilities and meeting frequency. Board Policies are regularly reviewed and updated (IV.C.6).

The Board regularly assesses its policies and ground rules for effectiveness in fulfilling the District and Colleges' missions and revises them as necessary. The Board recently noted the need to revise the five-year policy/procedure review cycle, extending the review timeline by two years due to global pandemic challenges. Consistent review is conducted through existing Colleges and 159 Standard IVC: Governing Board District governance bodies as outlined in the VCCCD Participatory Governance Handbook. (IV.C.7).

The Board is regularly and effectively informed on key indicators of student learning and achievement. The Board discusses key indicators with all vital District and College employees present. Board agendas and minutes provide evidence of the board conducting a regular review of student success and academic quality improvement. In addition, they have reviewed and accepted institutional plans including Educational Master Plans from each College and the VCCCD Strategic Plan. (IV.C.8).

The Board participates and supports ongoing training for Board development. Trustees annually review a list of professional development opportunities and attend professional development activities. Trustees provide updates during agendized Board of Trustee Meeting Reports to report on completed training and professional development. (IV.C.9).

The Board has a policy on evaluation that includes the Board's effectiveness in promoting and sustaining academic quality and effectiveness and which guides its annual review. Trustees review and revise their evaluation process on a regular basis. Most recently in spring 2021, the Board adopted a new evaluative procedure and participated in Board training to address evaluation feedback. In addressing challenges noted in this report, the Board's continued focus on evaluation of its effectiveness will be important for the future of the District. (IV.C.10).

The Board of Trustees has approved two policies that relate to the code of ethics and exclusions for conflicts of interest. BP 2715 Board Code of Ethics/Standards of Practice includes the expected 162 Standard IVC: Governing Board behavior for all Board members as well as avenues for responding to any concerns regarding those standards: "All board members are expected to maintain high standards of conduct and ethical behavior. To maintain public confidence in the board, and in the institutional integrity of the colleges under its governance, the board will be prepared to investigate the factual basis behind any charge or complaint of trustee misconduct." The corresponding AP 2715(A) Board Code of Ethics further specifies action that may be taken when a violation is suspected, including consultation with legal counsel and/or referral to law enforcement in cases involving a violation of law. The College ISER indicated that the Board complies with requirements for disclosure of financial-self-interest. (IV.C.11).

Authority to operate and control District business is delegated to the Chancellor by the Board of Trustees is outlined in BP 2430 Delegation of Authority to the Chancellor. This Board Policy describes delegation of authority to the Chancellor, including but not limited to, granting the authority to supervise the general business procedures of the District and budget, to authorize employment and fix job responsibilities, and act as the professional advisor to the Board in policy formation. BP 2434 Chancellor's Relationship with the Board further clarifies that the "Board delegates full responsibility and authority to him or her to implement and administer board policies without board interference and holds him or her accountable for the leadership and operation of the District and the colleges". The relationship between the Board and the Chancellor is also addressed in BP 2200 Board Duties and Responsibilities stating that the Board develops policy and provides broad oversight and delegates the implementation of its policies and performance of District duties and obligations to the Chancellor.

The College cited and the Team confirmed several examples where the Board actions have impeded the Chancellor's ability to exercise his delegated authority, including, but not limited to:

- The Board declining to take action on an administrative recommendation pertaining to Student Rights and Grievances;

- Operational decisions pertaining to instructional modalities (on ground and on line);

- Individual Board Members contacting college presidents requesting specific funding of a project outside of shared governance processes. (IV.C.12).

Accreditation ensures that the Board of Trustees is kept informed of accreditation processes, reports, and accreditation status and that the Board is included in processes for which their involvement is required. The Board of Trustees received training on accreditation processes for governing boards by Dr. Catherine Webb on June 21, 2021, in advance of the accreditation cycle. The Board is kept informed of reports due to the Commission; for example, ACCJC Mid-Term reports are reviewed by the Board. During the development of Institutional Self-Evaluation Reports, a standing agenda item on accreditation updates keeps the Board informed of progress on and timelines for the ISER, sometimes taking written form and sometimes delivered as an oral report. When made aware of possible areas of concern for accreditation, the Board contracted with an outside consultant for assessment and help developing strategies for improvement. (IV.C.13).

Conclusions:

The College meets the Standard, except for Standard IV.C.12.

District Recommendation 1: In order to meet the Standard, the team recommends that the governing board delegates full responsibility and authority to the CEO to implement board policies without board interference. (IV.C.12)

District Recommendation 2: In order to increase effectiveness, the team recommends the Board consistently acts as a collective entity. (IV.C.2)

IV.D. Multi-College Districts or Systems

General Observations:

Oxnard College's CEO provides leadership in consultation with the Consultation Council, and upholds policies and procedures of the Board following the District Participatory Governance Handbook. There are a series of district committees through which various functions are coordinated. These committees are assessed annually through a survey. District Strategic Plan (and CCCCO Vision for Success) provides a framework from which the colleges can align their specific strategic goals. There is a VCCCD Decision-Making Handbook. Minutes and action items are posted, and committees are assessed on an annual basis.

As described in BP 2430 Delegation of Authority to Chancellor, the chancellor provides leadership in setting and communicating expectations of educational excellence and integrity throughout the district and assures support for the effective operation of the colleges, engaging the Board of Trustees and districtwide committees in the development and execution of plans (e.g. districtwide strategic planning). The team found evidence of chancellor communications through various presentations on district goals and priorities. Working with the colleges, the chancellor establishes clearly defined roles, authority and responsibility between the colleges and the district as directed in BP 3100 Organizational Structure and evidenced within the district's functional map. (IV.D.1)

It is through the district's functional map that the chancellor delineates, documents, and communicates the operational responsibilities and functions of the district from those of the colleges, as directed through BP 2205 Delineation of System and Board Functions, updating the map to reflect changes as they are implemented.   This delineation is carried out in practice through the processes described within the Ventura County Community College District Participatory Governance Handbook. The district Chancellor ensures that the colleges receive effective and adequate district provided services to support the colleges in achieving their missions through the district's participatory governance councils and committees. District services are evaluated through surveys related to both the annual assessments of the districtwide committees and district services as part of the program review process, and the District Council on Accreditation reviews the districts' responsibilities and functions as they relate to the accreditation standards. Having identified a gap in services at the district level, two positions were added, a vice chancellor of institutional effectiveness and a Director of Public Affairs and Marketing. (IV.D.2)

The district has a policy for allocation and reallocation of resources that are adequate to support the effective operations and sustainability of the colleges and district, as evidenced through BP 6200 Budget Preparation. The policy directs the chancellor to present a budget that supports the district's and the colleges' master and educational plans, as well as institutional planning and goals and objectives. The district chancellor ensures effective control of expenditures through the district's Budget Allocation Model and Infrastructure Allocation Model to allocate resources between the sites and works with the district to submit an annual Adoption budget detailing the next year's expenses against projected revenue to the Board of Trustees for approval. (IV.D.3)

The district's BP 2430 Delegation of Authority to Chancellor direct the chancellor of the district delegates full responsibility and authority to the CEOs of the colleges to implement and administer delegated district policies without interference by stating "the chancellor will ensure the District college presidents have primary authority for institutional quality and provide effective leadership in planning, organizing, budgeting, selecting, and developing employees and assessing campus effectiveness." This is further evidenced through AP 7120-C Recruitment and Hiring: Academic Managers, providing signatory authority to the president for hiring, and

backed up within the district's Functional Map. and holds college presidents accountable for the operation of the colleges through the annual formal evaluation of communication, leadership, administrative skills, and progress on goals/objectives set in the prior year's evaluation. (IV.D.4)

The Ventura County Community College District Strategic Plan 2021-2027, outlines goals, measures of achievement, and major strategies, provides the framework for integration into college planning and evaluation to improve student learning and achievement and institutional effectiveness. The goals are included in a crosswalk with CCCCO's Vision for Success Goals. The district provides dashboards tracking the progress made towards achieving the VCCCD Plan's measures, allowing for disaggregation by college. Through the various participatory governance committees and councils, and the use of Tableau dashboards, common activities colleges can work on towards meeting objectives are identified. (IV.D.5)

The communication between college and district is conducted primarily through the processes outlined within the VCCCD Participatory Governance Handbook wherein the district's and college's numerous committees and councils ensure the effective operation of the colleges. The agendas and minutes of the participatory governance councils and committees are posted online in order to provide timely, accurate, and complete information from which the college can effectively make decisions and provide evidence of the communication between the district and the college. (IV.D.6)

The team found that Leadership roles and the institution's governance and decision-making policies, procedures, and processes are evaluated on an annual basis in order to assure their integrity and effectiveness through the District's Institutional Effectiveness Advisory Committee (IEAC), a participatory governance committee. The IEAC did not appear to have broad representation of stakeholder groups typical of committees described as participatory governance committees, those including faculty, classified, and administration. We noted that the revised charge and composition included "others as determined by the Chancellor." The survey calendar provided evidence that self-appraisal surveys for all governance committees are scheduled annually as outlined within the Ventura County Community College District's Participatory Governance Handbook, the results of which are reviewed within each of the committees surveyed. Minutes suggest that the results of these evaluations are made available and the institution uses them as the basis for improvement, however, evidence of the changes made as a result of evaluating the effectiveness of leadership and governance committee surveys would provide more assurance of the effectiveness of the existing processes. (IV.D.7)

Conclusions:

The College meets the Standard.

Quality Focus Essays

Based on Oxnard College's Educational Master Plan, participatory governance processes, and input from its Focused Innovation Groups, the College has defined three Quality Focus Essay projects to enhance student outcomes and success over the next five years:

1) Expanding Mentorship Opportunities: The College has already established an array of mentorship programs that serve to onboard new students, connect faculty with students, and pair students with each other. The next few years outline steps to track success and develop review processes to evaluate the outcomes of its mentorship programs. Based on current successes, the College should be able to increase its mentorship capacity and meet student needs over the next several years.

2) Enhancing Online Services and Resources: With a shift toward an increased online presence, the need to provide appropriate support services has been identified as an area for enhancement. The College has identified necessary steps to develop evaluative tools, survey students, and should be able to expand its range of online services and resources.

3) Increasing Student Transfer Rates: While the College has increased the number of students who have received ADTs, it also realizes the need to continually improve transfer rates. The College has outlined a plan to expand upon its current successes, including the provision of workshops, promotion of transfer materials, and development of new resources such as online materials. Based on these activities, the College should be able to augment current support for students and increase transfer rates.

Appendix A: Core Inquiries

ACCJC

Outcomes | Innovation | Improvement

ACCREDITING COMMISSION FOR
COMMUNITY AND JUNIOR COLLEGES
WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES

CORE INQUIRIES

Oxnard Community College
4000 South Rose Avenue * Oxnard CA 93033

The Core Inquiries are based upon the findings of the peer review team that
conducted Team ISER Review on March 23, 2023.

Dr. Carla Tweed
Team Chair

Contents

Oxnard Community College

Peer Review Team Roster

Team ISER Review
March 23, 2023

Dr. Carla Tweed, Team Chair West Hills College Coalinga President	Dr. P. Wesley Lunderburg, Vice Chair San Diego Miramar College President
ACADEMIC MEMBERS	
Mr. William Breitbach Shasta College Executive Dean Educational Technology, Learning Services & Research	Mr. Jeremy Brown Yuba College Vice President of Instruction
Dr. John Hannigan West Valley College Department Chair, Communication Studies	Dr. Anna Hanlon Orange Coast College Professor, Public Health; IE Coordinator; Accreditation, Faculty Chair
Mr. David Song East Los Angeles College Faculty Chair, Accreditation	
ADMINISTRATIVE MEMBERS	
Ms. Michelle Barton Palomar College Sr. Director Planning, Research, Institutional Effectiveness, Grants	Ms. Iris Ingram Rancho Santiago Community College District Vice Chancellor, Business Services
Dr. Joshua Moon-Johnson College of San Mateo Vice President of Student Services	
ACCJC STAFF LIAISON	
Dr. Catherine Webb, Vice President	

Summary of Team ISER Review

INSTITUTION: Oxnard Community College

DATE OF TEAM ISER REVIEW: March 23, 2023

TEAM CHAIR: Dr. Carla Tweed

A 10-member accreditation peer review team conducted Team ISER Review of Oxnard College on March 23, 2023. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. The peer review team received the college's institutional self-evaluation report (ISER) and related evidence several weeks prior to the Team ISER Review. Team members found the ISER to be a comprehensive, well written, document detailing the processes used by the College to address Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the ISER was developed through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful ISER containing several self-identified action plans for institutional improvement. The College also prepared a Quality Focus Essay.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on December 1, 2022, and held a pre-review meeting with the college CEO on January 11, 2023. The entire peer review team received team training provided by staff from ACCJC on February 9, 2023. Prior to the Team ISER Review, team members completed their team assignments, identified areas for further clarification, and provided a list of requests for additional evidence to be considered during Team ISER Review.

During the Team ISER Review, team members spent the morning discussing their initial observations and their preliminary review of the written materials and evidence provided by the College for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and identified standards the college meets, as well as developed Core Inquiries to be pursued during the Focused Site Visit, which will occur in [add dates] Fall 2021.

Core Inquiries are a means for communicating potential areas of institutional noncompliance, improvement, or exemplary practice that arise during the Team ISER Review. They describe the areas of emphasis for the Focused Site Visit that the team will explore to further their analysis to determine whether standards are met and accordingly identify potential commendations or recommendations. The college should use the Core Inquiries and time leading up to the focused site visit as an opportunity to gather more evidence, collate information, and to strengthen or develop processes in the continuous improvement cycle. In the course of the Focused Site Visit, the ACCJC staff liaison will review new or emerging issues which might arise out of the discussions on Core Inquiries.

Core Inquiries

Based on the team's analysis during the Team ISER Review, the team identified the following core inquiries that relate to potential areas of clarification, improvement, or commendation.

Core Inquiry 1: The team seeks to better understand the implementation of improvements/redesign to systems for the assessment of student learning outcomes at the course, program, and institution level.
Standards or Policies: I.B.2, II.A.3, II.A.11

Description:
    a. The Team reviewed the evidence in the ISER related to SLO assessment and noted that assessment of Student Learning Outcomes is a college improvement plan. Additional evidence provided by the college indicated that it has hired a Faculty Peer Mentor. Also, the college is working on a handbook that will include guidelines on how to develop, review, and revise SLOs and information about the updated review cycle
    b. The Team is interested in learning about progress in this area including information about the timing of the cycle.

Topics of discussion during interviews:
    a. Progress the institution has made on the Student Learning Outcomes handbook.
    b. Description of the updated review and assessment cycle.
    c. Using assessment results to support decision-making, in particular at the program and institutional levels.

Request for Additional Information/Evidence:
    a. Examples of how assessment results are used to improve programs.
    b. Student Learning Outcomes handbook, including description of the updated cycle.
    c. Any progress related to addressing the College's improvement plan for SLO assessment.

Request for Observations/Interviews:
    a. Faculty SLO Peer Mentor
    b. Administrators and faculty involved in assessment process.
    c. Faculty Inquiry Group on SLO assessment

Core Inquiry 2: The team would like to better understand how the college evaluates its college-level processes and practices on a regular cycle.

Standards or Policies: I.B.7, I.C.5

Description:
   a. The team reviewed several instances where the college is reviewing its processes such as the participatory handbook and program review. The team reviewed data that shows that the institution reviews its APs and BPs, including APs and BPs on admissions and placement.
   b. It is not yet clear to the team how the college implements regular review and evaluation cycles for its policies and processes (e.g., integrated planning, program review, resource allocation).

Topics of discussion during interviews:
   a. Regular cycle of evaluation for college processes (i.e., program review, outcomes assessment, etc.)

Request for Additional Information/Evidence:
   a. Evidence of evaluation of college-level processes (in addition to APs & BPs).
   b. Evidence of CPC:
        a. Evaluating committee goal progress
        b. Evaluating committee/college process and policies
        c. Review of recommendations of PG committees
        d. Final recommendation to college president regarding organizational structure, functions, planning, budget, etc.

Request for Observations/Interviews:
   a. Representative from Institutional Effectiveness
   b. Representative from College Planning Team

Core Inquiry 3: The Team would like to better understand how the institution evaluates student services regardless of location or means of delivery to ensure they are equitable.

Standards or Policies: II.C.3.

Description:
    a. The team reviewed the website which showed how to access student support services from various locations and modalities. The team reviewed the program review process for student services.
    b. It is not yet clear to the team how the services provided in various locations and modes of delivery are being evaluated to ensure they are equitable.

Topics of discussion during interviews:
    a. The team would like more information on how student support services are being evaluated and disaggregated by location and/or mode of delivery.

Request for Additional Information/Evidence:
    a. Sample of evaluation that examines student services by location and/or mode of delivery.

Request for Observations/Interviews:
    a. CSSO, Deans) of Student Services, and/or representative from institutional research and planning.

Core Inquiry 4: The Team would like to better understand how the college establishes regular and substantive interaction with its asynchronous online courses.
Standards or Policies: Policy on Distance Education and Correspondence Education

Description:
    a. The team reviewed samples of synchronous and asynchronous courses and noticed inconsistency in regular and substantive interaction.
    b. The team would like to know more about how the college ensures substantive interaction within asynchronous courses

Topics of discussion during interviews:
    a. Ensuring regular and substantive interaction in asynchronous online courses
    b. Professional development opportunities related to regular and substantive interaction
    c. Processes for review of online courses for regular and substantive interaction.

Request for Additional Information/Evidence:
    a. Process to evaluate online courses
    b. Additional sample of asynchronous courses from Spring 2023 (to be reviewed during site visit in Fall 2023).

Request for Observations/Interviews:
    a. Instructional Technologist/Designer
    b. Administrative oversight of DE courses
    c. Distance Education Committee

Core Inquiry 5: The Team was impressed with the college's mission, vision, and guiding principles. The Team would like to learn more about how the college carries out its mission, vision, and guiding principles with respect to supporting underserved and marginalized student populations, including Latine students .
Standards or Policies: I.A.1, I.B.1, II.A.7

Description:
   a. The college student body is comprised of 71% Hispanic/Latine students.
   b. The Team was impressed that within one of the college's guiding principles, Social Justice and Equity, it specifically identifies Oxnard as a Hispanic Serving Institution. Further, the Educational Master Plan's Goal Three is focused on advancing social justice and equity minded practices.
   c. The Team noted that college has a new Title V grant focused on implementing Guided Pathways, and initiatives to increase transfer.
   d. The Team also noted during the open forum that the college's faculty, staff, and students are committed to the students they serve, with many recognizing and expressing that they are most proud of the student they serve.

Topics of discussion during interviews:
   a. Traditional and innovative approaches the college community is employing to serve Hispanic or Latine students.
   b. Other ways the college is infusing Diversity, Equity, Inclusion, Accessibility, and Antiracism approaches to better meet its mission and serve it diverse student body and community.

Request for Additional Information/Evidence:
   a. Examples or programs of impact for Hispanic or Latine and/or other marginalized student groups.
   b. Progress on the College's Title V grant focused on Guided Pathways and transfer.

Request for Observations/Interviews:
   a. College representatives working on Educational Master Plan's Goal 3
   b. College representatives (including the Faculty Inquiry Group on Transfer) working on Guided Pathways and Title V initiatives
   c.
   d. Other College representatives involved in DEIAA work

District Core Inquiry 1: The District Team noted the commitment of the Ventura Community College Board of Trustees to "working as an effective, transparent, and respectful entity." The Team is interested in confirming that the Board of Trustees is translating the commitment into tangible progress on behalf of the students and employees of the Ventura Community College District.

Standards or Policies: IV.C.2, IV.C.7, IV.C.10

Description:

a. The Team reviewed statements contained in the ISER and relevant Board Policies and minutes.

b. A positive, supportive, healthy Board of Trustees is essential to the success of Ventura Community College District. The Team wants to confirm that the Ventura Board of Trustees has taken actions and is continuing to make progress in addressing past behaviors and practices that may have been detrimental.

Topics of discussion during interviews:

a. Working together as a unit to support outcomes, decisions, and Chancellor

b. Adherence to board policies

c. Practices for board trainings and retreats

d. Results of board self-evaluations and how they are used in making improvements

Request for Additional Information/Evidence:

a. Evidence related to board trainings

b. Evidence related to board retreats

c. Examples showing how board self-evaluations are used to improve Board effectiveness

Request for Observations/Interviews:

a. Governing Board members

b. College CEOs

c. Members of Chancellor's senior staff/cabinet

District Core Inquiry 2: With a new Chancellor in place, the Team noted an opportunity for the Board of Trustees establish shared goals with the Chancellor, delegate appropriate responsibility, and evaluate the progress of the Board and Chancellor in achieving agreed upon goals. The ISER narrative indicated examples of interference by the Board in operational decisions and "bypassing the District participatory governance process."

Standards or Policies: IV.C.12

Description:

   a. The ISER and supporting materials indicated past problems involving the Board's inappropriate actions and behaviors, including the need for an outside consultant to address substantive issues.

   b. A positive, supportive, healthy Board of Trustees is essential to the success of Ventura Community College District. The Team wants to confirm that the Ventura Board of Trustees has taken actions and is continuing to make progress in addressing past behaviors and practices that may have been detrimental.

Topics of discussion during interviews:

   a. Relationship between Board and its CEO

   b. Delegation from Board to CEO

Request for Additional Information/Evidence:

   a. Examples showing how delegation from Board to CEO works in practice

   b. Evidence from third session of Board training with Dr. Benjamin and results of the assessment related to delegation of authority

Request for Observations/Interviews:

   a. Board members

   b. Chancellor

   c. College Presidents and other senior staff

District Core Inquiry 3: The team would like to understand how the college monitors compliance with completion of faculty and staff performance evaluations per District policy.

Standards or Policies: III.A.5

Description:
  a. In the ISER and evidence, the team observed sample evaluation templates, District BP/AP regarding evaluations, and cycles of evaluation with respect to job titles. The team would like to better understand what percentage of evaluations are currently complete and processes for ensuring completion.

Topics of discussion during interviews:
  a. Determining compliance with stated evaluation intervals

  b. Monitoring/tracking compliance/completion of evaluations for all constituencies

Request for Additional Information/Evidence:
  a. Tracking documents displaying completion of evaluations, if they exist

  b. Sample email notifications regarding which evaluations are due

  c. Written procedures/HR manuals showing annual workflows

Request for Observations/Interviews:
  a. Administrator(s) responsible for managing/tracking evaluation processes