Standard I.B: Assuring Academic Quality and Institutional Effectiveness

Academic Quality

Standard I.B.1.
The institution demonstrates a sustained, substantive and collegial dialog about student outcomes, student equity, academic quality, institutional effectiveness, and continuous improvement of student learning and achievement.

Evidence of Meeting the Standard

Los Angeles Pierce College structures sustain substantive and collegial dialogue through a variety of forums, including its committee and participatory governance structure. As documented in the *Decision Making and Planning Handbook 2015* (DMPH), the Pierce College Council (PCC) and the Academic Senate are the overarching bodies that facilitate dialogue. Through these two bodies, recommendations are made to the college president (I.B.1).

Student Outcomes
Ongoing dialogue about outcomes occurs at the department and program level (I.B.2, and I.B.3). As part of the annual planning process, the Office of Institutional Effectiveness (OIE) provides a core dataset to academic departments, including longitudinal data on course success rates and degrees awarded (I.B.4). The OIE provides student survey results to units in Students Services throughout the year (I.B.5, I.B.6, I.B.7, I.B.8, and I.B.9). During the annual program planning process, departments and units summarize information related to outcomes assessment and student achievement (I.B.10, I.B.11, I.B.12, and I.B.13). To further ensure dialogue is taking place within departments, the Annual Program Plan (APP) templates were revised for the 2015-2016 academic year to include a listing of staff members who participate in developing the annual program plans (I.B.14). Dialogue takes place during the Comprehensive Program Review (CPR) process as well (I.B.15).

Dialogue about student learning outcomes (SLOs) also occurs within campus committee meetings, particularly the College Outcomes Committee (COC) and the Student Success Committee; both are subcommittees of the Academic Senate (I.B.16 and I.B.17). SLOs were discussed at the College’s annual leadership retreat as well as through breakout sessions during annual opening day activities (I.B.18, I.B.19, I.B.20, I.B.21, I.B.22, and I.B.23). Achievement data, including the institution-set standards (ISS) were discussed at Departmental Council (DC), the Educational Planning Committee (EPC), Academic Senate, and PCC meetings (I.B.24, I.B.25, and I.B.26).

Student Equity
The Student Success Committee (SSC) established a Student Equity Advisory Committee (SEAC) in May 2014 to revise and update the College’s student equity plan (I.B.27). The *Student Equity Plan 2014* (SEqP) was vetted through the Academic Senate, Diversity Committee, and PCC (I.B.28, I.B.29, and I.B.30); and, it was approved by the governing board on December 3, 2014 (I.B.31). The SEAC was also charged with implementing a
process for faculty to submit initiative proposals that align with the plan to address the equity gaps in student achievement (I.B.32). The College’s plan is listed as one of four exemplary plans state wide on the California Community College Chancellor’s Office (CCCCO) Web site (I.B.33).

**Academic Quality**
Faculty members review curricula on a six-year cycle to ensure the course outline of record is current and meets articulation requirements (I.B.34). Programs are regularly reviewed on the four-year cycle for comprehensive program review. Career and technical education programs are reviewed every two years (I.B.35). To further ensure academic quality, faculty are evaluated at least every three years as described in Article 19 and Article 42 of the Agreement 2014-2017 between the Los Angeles Community College District and the Los Angeles College Faculty Guild (I.B.36 and I.B.37).

**Institutional Effectiveness**

The College reports annually to the governing board’s Institutional Effectiveness and Student Success Committee (IESS) on metrics established by the District (I.B.47 and I.B.48). Data are provided to the College from the District’s Office of Institutional Effectiveness and the College is asked to respond to strengths and weaknesses shown in those reports (I.B.49 and I.B.50).

**Continuous Improvement of Student Learning and Achievement**
As described above, the College engages in ongoing dialogue to improve student learning and achievement. Through the various planning processes, improvement plans are developed and implemented with respect to student learning and achievement. For example, through implementation of the Student Equity Plan 2014, the College discussed how best to improve outcomes for identified population subgroups. Through outcomes assessment, plans to improve student attainment of learning outcomes are developed and implemented (I.B.51). The annual planning process provides a mechanism for departments to report out on plans to improve student learning and achievement. A department’s annual planning goals are mapped to a goal in the SMP to ensure integrated planning between departments and overall College goals (I.B.52). The College has set specific goals in the SMP to increase overall student achievement, which are monitored semiannually (I.B.53). The College Planning Committee, a subcommittee of PCC, reviews all College plans for alignment with the strategic master plan (I.B.54).
Analysis and Evaluation

The College engages in ongoing dialogue to improve student learning and achievement. The annual planning form prompts departments and units to reflect on and discuss data, including looking for trends over time with respect to learning outcomes, student achievement, and student equity. Beginning in fall 2015, the data provided to academic departments will be disaggregated by subpopulation identified with achievement gaps in the Student Equity Plan 2014. Additionally, academic departments will be provided with the institution-set standards for analysis and discussion. The annual planning form for both academic and student services departments requires evaluation and reflection about the significant findings from outcomes assessment data throughout the year. Based on a discussion of this data, departments set goals for the following year to improve their effectiveness and, if applicable, request resources to meet those goals. In spring 2015, the College piloted its “Secret Shopper” program, which is designed to provide data to areas in Student Services and Administrative Services about the consistency of service provided to students (I.B.55).

At the institutional level, dialogue takes place through the College’s participatory governance committees. The PCC monitors and evaluates the College’s progress in achieving the SMP goals. The Office of Institutional Effectiveness provides updates semiannually on achievement of the SMP goals. In the spring 2015 Faculty and Staff Survey, over 80 percent of employees agreed that they have engaged in dialogue over the past year on four key areas:

<table>
<thead>
<tr>
<th>Over the past year, I have engaged in dialog about:</th>
<th>% Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>…Student learning outcomes (SLO) or service area outcomes (SAO).</td>
<td>91%</td>
</tr>
<tr>
<td>…Student achievement (e.g. graduation rates, course success rates, basic skills progression, etc.).</td>
<td>87%</td>
</tr>
<tr>
<td>…Student equity (i.e. improving outcomes for subpopulations of students, e.g. gender, ethnicity, disability status, etc.).</td>
<td>79%</td>
</tr>
<tr>
<td>…Establishing and evaluating goals (e.g. reviewing whether annual program plan goals from the prior year were achieved, and setting new goals for next year).</td>
<td>81%</td>
</tr>
</tbody>
</table>

(I.B.56)

Standard I.B.2

The institution defines and assesses student learning outcomes for all instructional programs and student and learning support services. (ER 11)

Evidence of Meeting the Standard

Pierce College conducts student learning outcomes assessment on a continuous cycle, which is overseen by the College Outcomes Committee (I.B.57). For the instructional programs, SLOs are defined at the course, program, general education, and institutional levels. Course level SLOs are mapped to the general education learning outcomes (GELOs), which are a subset of the institutional learning outcomes (I.B.58). The course level SLOs are attached to the course outline of record as an addendum in Section VIII (I.B.59). Departments submit
course assessment reports on a regular cycle (I.B.60). Prior to spring 2015, outcomes data was collected and analyzed manually and assessment reports were stored in a locally created online database (I.B.61). Beginning spring 2015, the College adopted eLumen, a third party learning outcomes software, to collect course level data and allow for electronic submission of course assessment reports. The eLumen system has capabilities to aggregate and disaggregate data as needed.

Departments within Student Services have identified learning and service area outcomes (I.B.62). Each area assesses their outcomes on a regular basis and reports out in the annual program plan (I.B.63). The outcomes data and assessment results are maintained locally in each department’s office. As part of the annual planning process, areas within Students Services report on outcomes assessment and reflect on the data to improve learning and support services.

Analysis and Evaluation

The College has been defining and assessing learning outcomes for all instructional programs and student and learning support services on a continuous cycle. Prior to spring 2015, the College used a locally developed, static database to maintain assessment reports for the instructional program. This database had limitations, including the following:

- The local system does not collect student level data, which prevents the College from disaggregating SLO data by demographics.
- The local system does not collect learning outcomes data for student support services. Therefore, Students Services outcomes data is maintained in each respective department and not in a centralized location.
- The local system does not automatically roll up SLO data to assist in the assessment of program learning outcomes (PLOs) and GELOs. The PLO data does not roll up to assist in the assessment of the Institutional Learning Outcomes (ILOs).
- The local system has limited tracking capabilities, which requires time consuming manual querying to determine which courses and programs had completed their outcomes assessment cycle.

To remedy these issues, the College transitioned to eLumen in spring 2015. With the implementation of eLumen, the College is now able to collect data and assessment reports for both Academic Affairs and Student Services, roll up SLO data to PLO, GELO, and ILO data, disaggregate learning outcomes data, and provide institutional and departmental leaders with various tracking and notification tools to ensure SLO data is collected from all scheduled classes (I.B.64, I.B.65, I.B.66). The locally designed database remains online for faculty and staff to review prior data and assessment reports while the College continues to transition to eLumen, (I.B.61).

Standard I.B.3

The institution establishes institution-set standards for student achievement, appropriate to its mission, assesses how well it is achieving them in pursuit of continuous improvement, and publishes this information. (ER 11)
Evidence of Meeting the Standard

The College has established institution-set standards (ISS) for all required student achievement metrics, as well as additional standards for percentage of students completing assessment, orientation, and a student education plan (I.B.67). The metrics were discussed and approved by the Educational Planning Committee (EPC) on March 17, 2015 and, subsequently, by the Academic Senate on April 13, 2015 (I.B.25 and I.B.26). The ISS were also discussed at Departmental Council (I.B.24). The ISS are reported out annually to the Accrediting Commission in the College’s Annual Report (I.B.68). The Office of Institutional Effectiveness (OIE) provides an annual update to EPC on the progress of meeting the ISS (I.B.69).

In May 2015, the Strategic Master Plan 2013-2017 was updated so that every ISS metric is included within the SMP to ensure integration of the ISS with resource allocation (I.B.70). With the revised SMP metrics, if the College falls below on any of the ISS, by definition, it is also not meeting its target metric for that particular goal. Therefore, resource requests that are mapped to that SMP goal are likely to have a better ranking during the resource allocation prioritization process, since the College prioritizes resources towards goals that are behind on meeting the target metrics (I.B.71).

In addition to setting standards at the institutional level, the College also set standards at the program level using the same formula as the institution-set standards (95 percent of a five-year average). This data is provided to academic programs as part of their annual program plan datasheets (I.B.72). The Annual Program Plan template prompts departments to review any metrics that fall below the ISS for that program, and establish goals to increase these rates. These annual goals are then mapped to the respective SMP goals containing the institution-set standards, thereby ensuring integrated planning. If a department has multiple goals and resource requests, the department is instructed to prioritize its requests towards meeting any ISS, which has fallen below the standard (I.B.14).

Analysis and Evaluation

The College has engaged in dialogue to establish the institution-set standards and has adopted additional standards beyond those required by the Accrediting Commission. The ISS are integrated into the College’s strategic plan and annual planning process. ISS data and annual performance updates are published on the OIE Web site. Program level set standard data is provided to instructional departments during the annual planning process as well as published on the OIE Web site (I.B.73).

Standard I.B.4
The institution uses assessment data and organizes its institutional processes to support student learning and student achievement.
Evidence of Meeting the Standard

As discussed in Standard I.B.1, the College uses assessment data to improve student learning and achievement. The assessment data is integrated into College processes, including the outcomes assessment process, the annual planning process, and comprehensive program review. Committees also use data in decision-making effecting student learning and achievement. For example, the Student Equity Advisory Committee reviewed data included in the student equity plan disaggregated by gender, ethnicity, and other categories (I.B.74), and it identified the following gaps:

- Access for foster youth and veterans;
- Course completion for African-American students and foster youth;
- English as a Second Language (ESL) and basic skills completion for Hispanic students and veterans;
- Basic skills to college-level preparation in English for African-American, Hispanic, and Pacific Islander students;
- Basic skills to college-level preparation in mathematics for African-American, American Indian/Alaskan Native, Hispanic, and Pacific Islander students;
- Degree and certificate completion rates for males and African-American and Pacific Islander students; and,
- Transfer rates for students with disabilities, veterans, and African-American, American Indian/Alaskan Native, Filipino, Hispanic, and Pacific Islander students.

Student learning and achievement data is thoroughly embedded in the College’s Strategic Master Plan (SMP). Of the 47 target metrics established, over half are directly related to student learning and achievement; specifically, course success rates, retention and persistence rates, job placement rates, transfer rates, completion rates, licensure exam passage rates, and completion of the matriculation process (I.B.53). The PCC or its committees and Academic Senate committees oversee the College’s key planning documents related to student learning and achievement.

| College Structures and Planning Processes Related to Student Learning and Achievement |
|---------------------------------------------|-------------------------------------------------|
| Pierce College Council (PCC) | Academic Senate |
| **Strategic Master Plan** | College Outcomes Committee (COC) |
| Enrollment Management Committee (EMC) | SLO, PLO, GELO, and ILO processes |
| **Plan for Enrollment Management** | Educational Planning Committee (EPC) |
| Technology Committee | Educational Master Plan |
| **Technology Master Plan** | Student Success Committee (SSC) |
| | Basic Skills Action Plan |
| | Student Equity Plan |
Analysis and Evaluation

The College uses assessment data to improve and support student learning and achievement. At the department level, data is collected and analyzed through the SLO assessment process at the course, program, and institutional level. Through annual program plans, departments summarize the results of outcomes assessment as well as trends in student achievement data. College committees regularly review and analyze achievement data that form the basis for future improvement plans.

Institutional Effectiveness

Standard I.B.5
The institution assesses accomplishment of its mission through program review and evaluation of goals and objectives, student learning outcomes, and student achievement. Quantitative and qualitative data are disaggregated for analysis by program type and mode of delivery.

Evidence of Meeting the Standard

Pierce College implemented an annual academic planning process in fall 2007 for academic programs to plan for the 2008-2009 academic year (I.B.75). Over time, the annual planning process expanded to include all divisions of the College: academic affairs, student services, administrative services, and the president’s office. In the annual plans, departments and units set short-term goals for the following year, provide an assessment of the prior year’s goals, discuss progress in the outcomes assessment cycle and results of assessment, provide an analysis of trends in student achievement data, request resources based on analyses of data, and indicate future facility and technology needs (I.B.11, I.B.13, and I.B.76). The goals in the annual plans are linked directly to the goals of the strategic master plan, which are aligned with the College’s mission. Beginning in spring 2015 with the implementation of eLumen for outcomes assessment, the College is able to disaggregate learning outcomes by demographics as well as mode of delivery (I.B.77). For student services and administrative services, the OIE provides qualitative data such as student survey results, as well as feedback from Secret Shopper evaluations (I.B.5 and I.B.6).

The annual planning process cycle culminates with comprehensive program review (CPR) for instructional departments and student services areas. Prior to the adoption and implementation of the Integrated Planning Calendar 2013-2026, CPR occurred on a six-year cycle. The last CPR took place in 2010. The next CPR process is scheduled for spring 2016. After 2016, CPR will occur on a four-year cycle as detailed in the planning calendar (I.B.35). CPR is intended to be a reflective process that builds on the information gathered in the prior annual program plans and sets long-term goals for the program’s future direction (I.B.15). In fall 2015, the College is scheduled to begin its review of the prior CPR process and make revisions to CPR, if needed. The long-term goals set through CPR inform the revision of the College’s strategic master plan.
As described in Standard I.B.1, the OIE provides to the Pierce College Council a semiannual status report on the College’s progress toward achieving the goals and objectives of the strategic master plan. The goals of the strategic master plan support the mission of the College, thereby providing a measurable assessment of the mission.

**Analysis and Evaluation**

Annual program plans and CPR are an integral part of College processes. These processes are integrated into the overall College planning by:

- linking short-term goals in annual plans to the current strategic plan;
- summarizing major trends, challenges, and opportunities from annual plans into CPR;
- setting long-term goals in CPR that inform the review and revision of the next strategic plan.

**Standard I.B.6**

_The institution disaggregates and analyzes learning outcomes and achievement for subpopulations of students. When the institution identifies performance gaps, it implements strategies, which may include allocation or reallocation of human, fiscal and other resources, to mitigate those gaps and evaluates the efficacy of those strategies._

**Evidence of Meeting the Standard**

The College disaggregates and analyzes student achievement data for subpopulations of students. Traditionally, the data have looked at ethnicity and gender with little analysis to determine achievement gaps. In spring 2014, the College began work to revise its equity plan and a more thorough analysis of the data became the basis for the College’s _Student Equity Plan 2014_ (I.B.74). Through review of the data, achievement gaps were identified in five areas: access, course completion, English as a Second Language and basic skills completion, degree and certificate completion, and transfer rates. The subpopulations of students examined were in the categories of gender, ethnicity, disability status, foster care students, low-income students, and veterans. Different subpopulations were identified with achievement gaps within the five areas. Goals and activities were developed to close the identified gaps in each of the five areas (I.B.74 pp.25-37).

Faculty and staff submitted proposals to the Student Equity Advisory Committee to implement activities outlined in the equity plan (I.B.32). The Committee used a rubric to assess each proposal for funding (I.B.32). For 2014-2015, Pierce College was allocated close to one million dollars to address equity gaps (I.B.78). A data collection and evaluation schedule has been established for each funded project to determine its effectiveness (I.B.79). The results of these evaluations will be reviewed annually by the Student Equity Advisory Committee to determine which projects are having an impact on closing equity gaps and should continue to receive funding.

In addition to student achievement data, beginning in spring 2015, the College had the capacity to analyze disaggregated learning outcomes data through eLumen. In fall 2015, the
OIE provided a report to the Student Success Committee and College Outcomes Committee, which showed that X out of six Institutional Learning Outcomes (ILO) had performance gaps for at least one subpopulation of students (I.B.80). Included in the 2015-2016 annual program plan dataset is SLO and PLO information disaggregated by subpopulations and mode of delivery. During annual planning, departments will respond to the gaps identified in the outcomes data (I.B.14).

**Analysis and Evaluation**

The College has disaggregated achievement data for at least the last decade. In 2014, the College began analyzing data for additional subpopulations of students. Beginning in 2015, the College has the ability to disaggregate outcomes data at the institutional, program, and course level by subpopulations. Course-level data will also be disaggregated to compare outcomes for students taking classes face-to-face compared to those online.

**Standard I.B.7**

_The institution regularly evaluates its policies and practices across all areas of the institution, including instructional programs, student and learning support services, resource management, and governance processes to assure their effectiveness in supporting academic quality and accomplishment of mission._

**Evidence of Meeting the Standard**

The College evaluates its practices across all areas of the College through a variety of mechanisms. Annual program plans provide a means for all areas to review the learning or service outcomes, identify resource needs, set short-term goals, and evaluate achievement of prior year goals. The annual program planning process is reviewed annually and adjustments are made, if necessary, to the template. The Annual Program Plan template for the instructional areas is revised through the Educational Planning Committee (EPC), vetted through the Academic Policy Committee, and approved by the Academic Senate (I.B.81, I.B.82, and I.B.83). The Annual Program Plan templates for Student Services and Administrative Services are reviewed in their respective areas.

The comprehensive program review process is evaluated prior to the start of a new cycle. As indicated in the _Integrated Planning Calendar 2013-2026_, the EPC will begin review of the prior CPR process for instructional programs in fall 2015 and make changes based on data from the prior process and changes in external reporting requirements (I.B.35). The College Planning Committee (CPC) will do the same for the non-instructional areas.

In July 2011, the PCC approved the first Committee Self-Evaluation Template used to evaluate the PCC and its committees (I.B.84). In December 2011, the CPC was formed; it is responsible for overseeing the committee self-evaluation process (I.B.54). During the committee self-evaluation process, the form prompts the committee to address changes in membership, meetings held, progress on achieving prior year goals, and it sets goals for the following year (I.B.85). CPC forms a workgroup to validate, through a peer review process, the committee self-evaluations. The workgroup consists of two members from each
committee, who use a rubric to validate the self-evaluations (I.B.86). The purpose of this external review is to provide an outsider’s perspective of each committee’s performance over the past year; it is intended to be collegial and helpful rather than punitive (I.B.87). Committees are expected to address and resolve deficiencies in practices noted by the peer reviewers. Actions taken by committees to resolve deficiencies are documented in the following year’s self-evaluation, which are then validated by the peer review team process.

Beginning in the 2014-2015 academic year, the Academic Senate adopted the PCC committee self-evaluation form and in spring 2015 the Academic Senate and its committees completed the evaluation form. The Educational Planning Committee (EPC) revised its charter in spring 2015 to oversee the committee self-evaluation process (I.B.88 and I.B.89). The Senate approved the revised EPC charter on September x? 2015 allowing EPC to initiate its coordinating role for the evaluation process. Once approved, EPC can begin developing its process for review of the committee evaluation forms (I.B.90).

As discussed in Standard I.A.3, the College reviewed its resource allocation process. Over time, using data as a foundation, the committee charged with prioritizing resource allocations changed. Initially a Resource Allocation Committee (RAC) was formed to serve as the College’s prioritization committee (I.B.x 2012 FMR discussing the BC and the RAC). After reviewing the RAC’s functions and determining the prioritization process happened over a couple of months each year, it was determined that the work of this group did not warrant the designation of “committee.” The result of this evaluation process was the recommendation that a task force should complete the annual resource prioritization process; thus, the Resource Allocation Task Force (RATF) was created. In spring 2015, after another evaluation, the RATF was disbanded and the College’s Budget Committee assumed the responsibility for the annual resource prioritization process (I.B.91).

As discussed in Standard I.B.2, the College also undertook a review of how SLO data was collected and stored. After reviewing the limitations of the locally developed database, the College underwent a review of third party SLO software systems and adopted eLumen. In transitioning to eLumen, the COC also changed how data would be collected at the course level. On December 2, 2014, the COC recommended that course-level data would be collected in fall and spring for all sections of a course (I.B.92). The Academic Senate approved the recommendation on February 23, 2015 (I.B.93).

**Analysis and Evaluation**

The College has a long-standing tradition of reviewing its practices across all areas. Through regular self-evaluation processes such as annual program plans, program review, or committee self-evaluations, the College has a solid foundation to build on as needed. For example, as a result of the 2013-2014 self-evaluation review process, the 2014-2015 committee self-evaluation form was revised to require the committee to align its goals with the College’s strategic master plan. As the College concludes the current four-year integrated planning cycle, a meta-evaluation process involving both the integrated planning cycle and the overall structure and functioning of the College’s governance process will be evaluated and revised, if necessary.
Standard I.B.8

*The institution broadly communicates the results of all of its assessment and evaluation activities so that the institution has a shared understanding of its strengths and weaknesses and sets appropriate priorities.*

**Evidence of Meeting the Standard**

The primary means of communicating the results of assessment and evaluation activities is through committee minutes posted on the College’s committee Web sites. In addition, the president communicates with the campus as whole through the First Monday Report (FMR). Matters of college wide interest, including changes in or clarification of college processes are communicated through the FMR. For example, the May 4, 2015 FMR discussed the changes in the prioritization of resource allocations and clarified the difference between an emergency budget need and one that should have been planned (I.B.91). The president also uses opening day activities to raise issues of importance to the entire College community. At opening day in 2014, the president presented information regarding the number of degrees and certificates awarded by the College (I.B.94). The data presented compared the College to other community colleges throughout the State to provide a context for the strengths and weaknesses of the College is this area.

At the department and unit level, department/unit meetings and the annual program plans are the primary means of communicating strengths and weaknesses. The supervising administrator and the appropriate vice president review annual program plans and comprehensive program review before they are posted on the OIE Web page (I.B.73 and I.B.95). SLO assessment reports are another means by which departments communicate strengths and weakness related to learning.

**Analysis and Evaluation**

Results of assessments and evaluations are communicated through department/unit meetings. College processes, such as annual planning, allow for the departments and units to assess and communicate strengths and weakness. Comprehensive program review provides a means for departments and units to communicate the trends and changes over a longer period of time. The College president uses forums to communicate the overall strengths and weaknesses of the College. While minutes of committee meetings and reports are publically available on the College’s Web site, it is unclear whether all College employees are aware of the strengths and weaknesses reported in the committee meeting minutes. To improve, the College should explore additional ways of communicating results of assessments with the intent of creating a shared perspective across the entire College.

Standard I.B.9

*The institution engages in continuous, broad based, systematic evaluation and planning. The institution integrates program review, planning, and resource allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. Institutional planning addresses short- and*
Evidence of Meeting the Standard

As described in Standards I.B.1, I.B.5, I.B.6, and I.B.7, the College has a robust integrated planning cycle. Systematic evaluation and planning occurs annually at the department and unit levels leading to comprehensive program review every four years, which feeds into a revised strategic master plan. Within the annual planning process, area goals are aligned with the goals of the strategic master plan. Requests for resource allocations are also linked to the strategic goals and objectives. The College has an established process for prioritizing resource allocations. The strategic master plan is designed to fully support the College’s mission and is monitored on a regular basis to ensure institutional effectiveness. Departments, units, and college wide committees establish short-term goals, while long-term goals are established during comprehensive program review, which inform the development of long-term goals in the strategic master plan. Institutional planning at all levels addresses the need for human, physical, technological, and financial resources.

Human Resources
The need for additional faculty is expressed in the annual program plans and through the process established by the Faculty Position Prioritization Committee (FPPC [I.B.96]). As required in the Agreement 2014-2017, a committee of the Academic Senate prioritizes the faculty positions each year and forwards the recommendation to the college president. The need for additional classified staff and administrators is also expressed in the annual program plans. These requests are forwarded with other resource requests to the Budget Committee for prioritization.

Physical Resources
Through the annual planning process, departments and units identify their physical resource needs. The College has two dedicated plans for facilities: the 2014 Facilities Master Plan Update and the Facilities Strategic Plan 2014-2018. The 2014 Facility Master Plan Update is the planning document that guides all bond-funded capital outlay projects. The Facilities Strategic Plan 2014-2018 was created by the Facilities Advisory Committee and “is the guiding document of all goals for all college facilities covering new construction and facilities maintenance to ensure safe and sufficient physical resources; the feasibility and effectiveness of these physical resources to support the institutional programs and services in alignment with the Strategic Master Plan 2013-2017 (SMP) and mission statement for the College” (II.B.45).

Technology Resources
At the departmental and unit levels, the annual program plans provide a mechanism to address technology issues and concerns. At the institutional level, the College has adopted the Technology Master Plan 2014-2018. The plan sets overarching goals for campus wide technology needs and is aligned with the SMP.
Financial Resources
At the department and unit level, areas request financial resources, either one-time allocations or ongoing core funding needs, through the annual program plans. These requests roll up through the area vice presidents or president to the Budget Committee for prioritization.

Analysis and Evaluation

The College has maintained ongoing planning across departments and units. Through the annual planning process and to address goals in the strategic master plan, resources have been allocated based on a college wide prioritization process. For example, for 2014-2015 and 2015-2016 academic years, the College hired a total of ten additional custodians to address the concerns expressed by students regarding the cleanliness of the campus. In particular, only 36.4 percent of students who responded to the LACCD fall 2014 student survey agreed or strongly agreed that “the restrooms on this campus are clean and well maintained” (I.B.97). On the same fall 2014 student survey, only 48.4 percent of the respondents agreed or strongly agreed that “the College’s Wi-Fi is accessible and secure.” As a result, two additional positions in Information Technology (IT) are being filled in 2015-2016 to support the campus network. Resources to upgrade the technology infrastructure are being dedicated. As indicated in Standard III.C, an assessment of the technology on campus is underway and supports the IT Action Project in the Quality Focus Essay.

Standard I.B: Assuring Academic Quality and Institutional Effectiveness Evidence List

I.B.1 Decision Making and Planning Handbook – pshare ID 619
I.B.2 School of Culture, Community, and Wellness Agenda 9-16-2013 – pshare ID 695
I.B.3 Sample Department Minutes
I.B.5 GO Days Survey 2014 – pshare ID 679
I.B.6 Student Services APP Survey 2014 – pshare ID 678
I.B.7 Special Services Student Evaluation Spring 2014 – pshare ID 677
I.B.8 Child Development Center Survey Spring 2015 – pshare ID 676
I.B.9 Student Health Center Survey Spring 2015 – pshare ID 680
I.B.10 2014-2015 APP Template for Academic Affairs – pshare ID 520
I.B.11 2015-2016 APP Template for Academic Affairs – pshare ID 522
I.B.13 2015-2016 APP Template for Student Services – pshare ID 691
I.B.14 2016-2017 APP Template for Academic Affairs – pshare ID 505
I.B.15 Comprehensive Program Review 2010 Template – pshare ID 593
I.B.16 COC Minutes (for SLO dialogue)
I.B.17 Student Success Minutes (for SLO dialogue)
I.B.18 Leadership Retreat 2013 Agenda – pshare ID 355
I.B.19 Opening Day 2013 Agenda – pshare ID 354
I.B.20 Leadership Retreat 2014 Agenda
I.B.21 Opening Day 2014 Agenda – pshare ID 685
I.B.22 Opening Day 2015 Agenda – pshare ID 692
I.B.23 Leadership Retreat 2015 Agenda – pshare ID 674
I.B.24 Departmental Council Minutes 2-10-2015 – pshare ID 694
I.B.25 EPC Minutes 3-17-2015 – pshare ID 681
I.B.26 Senate Minutes 3-17-2015 – pshare ID 239
I.B.27 Student Success Committee Minutes (approving SEqP)
I.B.28 Senate Minutes 10-20-2014 – pshare ID 687
I.B.29 Diversity Committee Minutes 10-9-2014 – pshare ID 696
I.B.30 PCC Minutes 10-23-2014 – pshare ID 690
I.B.31 Board Minutes 12-3-2014 – pshare ID 688
I.B.32 Equity Funding Proposal and Rubric – pshare ID 683
I.B.33 Chancellor’s Office Web site – pshare ID 689
I.B.34 Curriculum Committee Course Outline Update Schedule – pshare ID 446
I.B.35 Integrated Planning Calendar 2013-2016 – pshare ID 300
I.B.36 Article 19 of the Agreement – pshare ID 305
I.B.37 Article 42 of the Agreement – pshare ID 311
I.B.40 PCC Minutes 12-11-2014 – pshare ID 221
I.B.41 PCC Minutes 4-23-2015 – pshare ID 697
I.B.42 Technology Master Plan 2014-2018 – pshare
I.B.44 Educational Master Plan 2014-2018 – pshare
I.B.45 Facilities Strategic Plan 2014-2018 – pshare
I.B.47 Annual Report to the IESS Presentation 2014 – pshare ID 701
I.B.48 Annual Report to the IESS 2014 – pshare ID 700
I.B.50 Annual Report Executive Summary 2013 – pshare ID 702
I.B.51 Sample Course SLO Assessment Report
I.B.54 CPC Charter – pshare ID 698
I.B.55 Secret Shopper Results – pshare ID 742
I.B.56 Faculty and Staff Survey Results 2015 – pshare ID 743
I.B.57 COC Charter – pshare ID 673
I.B.58 Institutional Learning Outcomes – pshare ID 708
I.B.59 Biology 10 Sample Course Outline – pshare ID 287
I.B.60 Course Assessment Cycle
I.B.61 Archived SLO Database – pshare ID 303
I.B.62 Student Services SLOs
I.B.63 Student Services Sample Library APP Report – pshare ID 705
I.B.64 SLO Tracking in eLumen Screenshot – pshare ID 707
I.B.65 SLO to PLO Report
I.B.66 PLO to ILO Report
I.B.67 Approved Institution-set Standards – pshare ID 573
I.B.68 2015 ACCJC Annual Report – pshare ID 304
I.B.69 ISS Progress Report to EPC
I.B.70 SMP to ISS Mapping Spreadsheet – pshare ID 744
I.B.71 2015-2016 Initial Resource Allocation List – pshare ID 494
I.B.73 OIE Screenshot of APP Posting
I.B.74 Student Equity Plan 2014-2017 – pshare ID 216
I.B.75 Sample Library AAPP 2008-2009 – pshare ID 706
I.B.76 2015-2016 APP for Administrative Services – pshare ID 521
I.B.77 Sample SLO Report with Disaggregated Data
I.B.78 2014-2015 Equity Budget Allocation
I.B.79 Equity Evaluation Cycle Gantt Chart – pshare ID 745
I.B.80 ILO Report with Disaggregated Data
I.B.81 EPC Minutes (approving 2016-2017 APP template)
I.B.82 APC Minutes (review 2016-2017 APP template)
I.B.83 Senate Minutes (approving 2016-2017 APP template)
I.B.84 PCC Minutes 7-28-2011 – pshare ID 709
I.B.85 Committee Self-Evaluation Form – pshare ID 710
I.B.86 Committee Self-Evaluation Rubric – pshare ID 741
I.B.87 Sample Committee Feedback from Self-Evaluation – pshare ID 746
I.B.88 EPC Minutes (revising charter)
I.B.89 EPC Charter (revised 2015)
I.B.90 Senate Minutes (approving EPC charter)
I.B.91 May 2015 First Monday Report – pshare ID 711
I.B.92 COC Minutes 12-2-2014 – pshare ID 703
I.B.93 Senate Minutes 2-23-2015 – pshare ID 359
I.B.94 Opening Day 2014 PowerPoint Presentation
I.B.95 OIE Screenshot of CPR Posting
I.B.96 FPPC Charter
I.B.97 LACCD Fall 2014 Student Survey – pshare ID 187