REPORT OF A COMPREHENSIVE EVALUATION VISIT

TO

PIMA COUNTY COMMUNITY COLLEGE DISTRICT
Tucson, Arizona

September 15-17, 2014

FOR

The Higher Learning Commission
A commission of the North Central Association

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I. CONTEXT AND NATURE OF VISIT

A. Purpose of Visit
The team conducted a comprehensive evaluation visit and multi-campus review as mandated by the Commission as the result of Pima Community College District being placed on Probation.

B. Institutional Context
Pima Community College District (PCC), located in Tucson, Arizona, consist of six campuses and a District Office. The District Office provides support and direction to the campuses, as well as provides various central administrative functions. PCC’s six campuses, located throughout the city and county consist of the following: Community, Downtown, East, West, Northwest, and Desert Vista. Each campus provides certain unique program such as: Culinary Arts, Early Childhood Education, and Aviation (Desert Vista); Nursing, Healthcare, Sciences, and Performing Arts (West); Workforce Development, Continuing Education and Distance Education (Community); Pharmacy and Veterinary Tech (East); Occupational, Business, and Automotive (Downtown). There are also several instructional sites, including a site at Davis-Monthan Air Force Base.

Based on 2013-14 reported figures PCC offers associate degrees and certificates to 11,893 full-time and 21,095 part-time students. PCC is classified as a Hispanic Serving Institution by the U.S Education Department. Out of the 26,613 students who indicated an ethnicity/race, 41.2 percent, or 10,959 self-identified as Hispanic/Latino. An additional 858, 3.2 percent of the students indicated two or More Races. The remaining reported data show that Whites were 11,965 (45% of the enrollment), Black or African-American were 1,217 (4.6%), Asian were 887 (3.3%), American Indian or Alaskan Native were 638 (2.4%), and Native Hawaiian or Pacific Islander were 89 (0.3 %). The Desert Vista Campus had the largest percentage of enrollment of Hispanic/Latinos at 67%.

PCC has an elected, five-member Board of Governors to whom the Chancellor reports. In addition to the Chancellor, PCC has a district leadership team that includes a Provost and Vice Chancellor for Academic Services, and Executive Vice Chancellors for Finance and Administration, Institutional Advancement, Information Technology, as well as a General Counsel and Chief Human Resource Office (currently vacant and filled by one of the campus presidents). In addition, each campus has a President, Vice President for Instruction, Academic Dean, and other campus vice presidents, deans, and administrative officers.

Between April and December 2012, the Higher Learning Commission (HLC or Commission) received a series of complaints from individuals and two community groups regarding the institution and its practices. In November 2012 the Commission determined that it would send a fact-finding team to investigate the complaints and determine the actual facts. The team conducted the visit on January 16-18, 2013. Based on the Fact-Finding Visit and report, at its meeting on April 6, 2013, the Commission placed PCC on Probation because the College was out of compliance with the following Criteria of Accreditation: Criterion Two, Core Component 2.A (Integrity) and Criterion Five, Core Component 5.B (Governance) and 5.C (Planning). In addition, the College was out of conformity with Assumed Practice A.4 (Complaints Policies and Procedures) and B.2.C (Faculty Oversight of the Curriculum). The Commission also determined that PCC changed its policy on admission without adequate internal engagement and community support, thus affecting its stated mission of serving its community. This change raised questions regarding the College’s ability to comply in the future with Criterion One, Core Component 1.A (Mission). As a result, the Commission directed the institution to initiate a self-study and submit a comprehensive self-study report by July 2014. In addition, the Commission required that PCC host an evaluation visit by no later than September 2014 to determine whether the concerns identified by the Commission were successfully resolved and the Criteria for Accreditation met.
Since the fact-finding visit, PCC has experienced a number of changes in leadership. These changes include a new Chancellor, who had been in office just over a year at the time of the visit. In addition, PCC hired a new Provost who started in July 2014. In the last year and a half, PCC has worked diligently and quickly to conduct a self-study, respond to the Commission’s concerns, and implement necessary changes to come into compliance, while at the same time continuing to serve the educational needs of the community. As a result, the team encountered an institution in flux with an array of newly developed and implemented policies, structures, and processes—some adopted or implemented just weeks before the visit. The culture and morale at PCC has improved since the fact-finding visit, with many individuals expressing a sense of “cautious optimism” that the institution in moving in the right direction. The College has many supporters and vocal advocates in the community, including but not limited to individuals, private and public groups, businesses, and education providers. It also faces considerable scrutiny from some individuals and community advocacy groups. Yet, the significant level of attention it receives, both positive and negative, attest to the significant role PCC plays in the community. It is evident that PCC and the services it provides are important and vital to Tucson and Pima County.

C. Unique Aspects or Additions to the Visit
The team reviewed a considerable number of third-party comments received by the Commission, both in advance and during the visit. Team members reviewed hundreds of pages of comments and complaints. In addition, the team held open community meetings and, over the course of the visit, met and conducted interviews with two community groups (C-FAIRR and POAC), as well as a number of drop-in and individually arranged meetings with members of the college community. To assure access to the team and avoid any appearance of impediment in the part of the institution, many of these meetings were scheduled through HLC. Through these meetings, the team met with over forty individuals or small groups.

The complex nature of the institution and the number of interviews required the team to divide into pairs to cover sufficient ground. During the first day, the team met at the District Offices to conduct interviews, meet with groups, including community groups, and review central functions. On the second day, the team split into small teams of two to visit all six campuses. At each campus, team members met with campus leadership, faculty, students, and individuals requesting private meetings with the group. The team also conducted interviews of key persons or groups at each campus. The team chair also conducted additional interviews at the district office before visiting three campuses and participating in the interviews being conducted. On the third day, the team convened at the District Offices and conducted follow-up interviews with the Chancellor, a Board member, General Counsel, and various individuals or groups. The team also reviewed additional data requested, met to discuss findings and recommended action, and held its exit meeting.

D. Additional Locations or Branch Campuses Visited (if applicable)
- Community
- Downtown
- Desert Vista
- East
- Northwest
- West

E. Distance Delivery Reviewed
The team reviewed the distance delivery programs offered by PCC, primarily offered through the Community Campus. These included courses and programs offered through Pima Online and self-paced courses (off-campus). Team members also sampled online classes, reviewed the online curriculum, and met with the Online Committee and the acting Dean of Online Development. Details on the online review can be found in the relevant sections of the report. The institution is operating within the Commission’s stipulation regarding distance education.

II. COMMITMENT TO PEER REVIEW

A. Comprehensiveness of the Self-Study Process

Pima Community College District had less than two years to complete a comprehensive self-study, respond to the Commission’s concerns, and make the necessary changes to rectify areas of non-compliance. In spite of these challenges, PCC was able to provide the team with a comprehensive report. Through various interviews, the team found evidence that a large number of constituents were informed about the self-study and participated in different ways in the process.

The self-study committees included faculty, administrators, staff, and volunteer members of the community. In addition, members of the Board of Governors also participated in some of the committees. Over 250 employees, students, and community members, with representation from the various campuses, participated in different aspects of the process. In addition to the self-study committees, PCC also established Fast Action Teams tasked with processes and procedures in certain areas to ensure that the institution would be able to come into compliance with HLC’s criteria for accreditation and assumed practices. It is evident that PCC made a good-faith effort to include broad representation from all its constituents in the self-study process.

B. Integrity of the Self-Study Report

The report covered all of the Criteria and responded to the areas of non-compliance. In addition, the report had hyperlinks to some evidence referenced in the narrative. The electronic resource room provided additional evidence and documentation. The team recognizes the time constraints faced by PCC in preparing the self-study report, but noted that the narrative in the report did not always provide clear links to all of the necessary documents and evidence required to support the narrative in the report. In many instances, team members had to request additional documentation, review data, and connect the evidence to the criteria. Many team members commented that unlike other visits, they often had to “dig” for the evidence and expressed frustration on having to work harder to locate evidence that should have been readily available to the team.

Upon request from the team, PCC was able to provide the necessary documentation, data, and information for the team to make an informed determination. However, PCC could have made more of an effort to offer a stronger link between the self-study report narrative and the available evidence. In addition, PCC should have had better organization of the documentation available, clearly connecting the evidence and documents to the Criteria. Some of the necessary worksheets that could have helped the team obtain information were also absent from the report, such as the credit-hour worksheets. In addition, the team found the campus reports formulaic, repetitive of the self-study report, and lacking in the details and narrative that could provide the team with a clear picture of the uniqueness and work that occurs at each of the campuses.

While the institution had less time than typical to conduct the self-study, these problems with the report are not new. The 2010 Evaluation Team Report noted similar concerns regarding the 2010 self-study
report and documentation. This raises the question as to whether PCC has a clear understanding of the necessary evidence that it needs to demonstrate compliance with the Criteria, as well as its ability to organize the information in accordance to the Commission’s expectations. It is important that PCC take the necessary steps to identify and organize the documentation, data, and evidence it gathers in alignment with the criteria for accreditation to prevent such problems in the future.

C. Adequacy of Progress in Addressing Previously Identified Challenges
PCC is an institution in flux, with numerous changes in policies, processes, and structures taking place. Many of these changes are ongoing or were recently implemented. In some instances, policies or processes were adopted just weeks prior to the team’s visit. While it was clear to the team that the basic necessary structures and policies were in place, it was too early at the time of the visit to determine the long-term effect of these recently adopted policies and procedures. For instance, while it was evident that the College had engaged in a comprehensive and inclusive planning process, the Board did not adopt the Strategic Plan until after the team’s visit and it is too early to assess the effectiveness of the plan. The team also noted that in some areas, previously identified as challenges, PCC should be further along in the process. For example, the process for implementing a comprehensive and sustained plan for assessing student learning outcomes and using the data to make improvements is still ongoing and not finalized.

Nevertheless, the team did feel confident that the institution had made significant progress in addressing its major challenges, in particular, those that led to probation. While the team and many of the institution’s constituents are optimistic that PCC is moving in the right direction, it is still a fragile process. Whether the changes made are effective and sustainable only time will tell.

D. Notification of Evaluation Visit and Solicitation of Third-Party Comment
PCC made a good-faith effort to inform the public of the visit and solicited Third-Party Comments. The College provided information to the public on its website: https://www.pima.edu/about-pima/probation/public-comment.html. In addition, it provided press releases to inform the community of the process. As a result, there was sufficient coverage in local media regarding the visit to keep the community informed. As noted earlier, an unusually large amount of comments, including documentation provided by two community groups, as well as numerous individual requests for meetings, indicate that the public was well informed. Both positive and negative comments were noted and evaluated by the team, including interviews of community members and individuals who requested meetings with the team.

The analysis of the institution’s compliance with the Criteria for Accreditation reflects the team’s consideration of the comments and complaints it reviewed before, during and after the visit. The team adhered to the established protocol of the Commission for reviewing documentation and allowing an opportunity for the institution to respond. No person who provided a comment or complaint is named in the report although some sections of the report specifically reference information the team learned through this consideration. The fact that a comment or complaint is not specifically referenced in the report does not mean that it was not considered by the team, along with other evidence collected by the team during the visit, in the analysis of the institution’s compliance with the Criteria for Accreditation. It is important to note, however, that not all issues identified in the comments and complaints, although important to the individual or group presenting the comment or complaint, were directly germane to the institution’s compliance with the Criteria for Accreditation. While the level of scrutiny of the institution by different community members and groups attest to the importance of PCC to the community, it may also hinder PCC from moving forward as it continues to consume time responding to complaints that
could be more effectively devoted to implementing the necessary changes that will enable it to overcome the challenges of the past.

III. COMPLIANCE WITH FEDERAL REQUIREMENTS
The team’s report regarding compliance with federal requirements is attached at the end of the report.

IV. FULFILLMENT OF THE CRITERIA FOR ACCREDITATION

CRITERION ONE: MISSION. The institution’s mission is clear and articulated publicly; it guides the institution’s operations.

Core Component 1A: The institution’s mission is broadly understood within the institution and guides its operations.

Subcomponent 1. The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.

Subcomponent 2. The institution’s academic programs, student support services, and enrollment profile are consistent with its stated mission.

Subcomponent 3. The institution’s planning and budgeting priorities align with and support the mission.

Team Determination: ___ Core Component is met
___ X ___ Core Component is met with concerns
___ Core Component is not met

Evidence:
- The mission of Pima Community College includes a set of clearly stated mission elements that is published on its website and in its College catalog. The set encompasses the following: Mission Statement, College Vision, College Values and College Goals.

- Through a Noel-Levitz survey administered college-wide to employees in 2013 and completed by 25%, results indicated that the majority of employees completing the survey is generally supportive of the mission, purpose and values of Pima.

- In face to face meetings with various employees and employee groups, including faculty, staff and the recently formed Governance Council, a clear understanding of and support for the current mission of Pima is evident.

- Examples of partnerships to meet multiple student needs include the High School Outreach project; the High School Dual Enrollment Program; numerous demand-driven occupational programs; a transfer student partnership with Arizona University; Adult Education programming; and the unique partnership with Pima County OneStop and the Job Path initiative, which focuses upon providing students with accelerated training for immediate entry into the workforce.

- In various student gatherings during the accreditation visit, programs and services were noted as meeting student needs within the umbrella of the currently stated College mission. Examples include the Student Support Services Trio grant targeted to first generation college students; interactive campus learning centers; and tutoring services. The one area cited as needing improvement to better meet student needs was in the area of counseling and advising.
While the stated mission of Pima Community College -- “Pima Community College will provide access to learning without the limits of time, place or distance.” -- appears to have a reasonable base of understanding among internal constituents, it is key that the College's commitment to conduct a formal review in 2015 is realized, particularly because 1) the last formal review took place a decade ago; 2) the College approved changes in the admissions and placements policies two years ago without properly considering the relationship of these changes with its mission and without properly whether an appropriate mission evaluation should then have been conducted; and 3) it should be formally documented that the 2014-17 Strategic Plan and Pima’s mission statement, in its current or revised form, are aligned. The lack of a recent evaluation of the mission statement, especially given the College’s recent consideration of changing its admissions and placement policies, has led to team to conclude that this Core Component is met with concerns.

Core Component 1B: The mission is articulated publicly.

Subcomponent 1. The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.

Subcomponent 2. The mission document or documents are current and explain the extent of the institution’s emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.

Subcomponent 3. The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.

Team Determination: 

_ X_ Core Component is met with concerns

Core Component 1C: The institution understands the relationship between its mission and the diversity of society.
Subcomponent 1. The institution addresses its role in a multicultural society.

Subcomponent 2. The institution’s processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.

Team Determination:  

__  Core Component is met  
_X_ Core Component is met with concerns  
__  Core Component is not met  

Evidence:  

- A College Diversity Committee has been formed and charged with the task of “…providing ideas and recommendations to the Chancellor to enhance the recruiting, hiring and retention of minorities, women and other protected classes.” While the committee is scheduled to meet monthly on a year-round basis, to date metrics and measurable outcomes are not available in other than draft form. This Committee is yet to produce a strategic diversity plan, but acknowledges a mandate to implement such a plan. In addition, recent government contracts with the institution require adherence to federal affirmative action guidelines and expectations. The Diversity Committee includes representation from HR, which might assist in training search committees on diversity concerns.

- The student demographics of Pima Community College are reflective of the demographics of Pima County.

- Multiple programs, services and partnerships are in place in order to serve a diverse student body. They range from English as a Second Language to Adult Education/GED to Development Education to College-level and Honors. During the student forums at each of the College’s campuses, students from a variety of academic and socio-economic backgrounds as well as range of age indicated high levels of satisfaction with the span of academic offerings and the available student support services. Additionally, in meetings with community representatives serving on the technical program advisory committees and partnering service agencies, the College consistently was commended for meeting the significantly varied needs of the broader community and the students served by Pima.

- While select Board Policies and stated values recognize and support the value of diversity and a commitment has been made by the Board to review its policies on a three-year cycle, it is key that the institution establish a formal means to assess the impact of its revised policies and to be transparent in sharing the outcomes with all stakeholder groups, including the Higher Learning Commission.

- Some community groups have expressed concerns that the leadership does not reflect the diversity of the community. While the team noted diversity in the College’s leadership, including members of a number of protected classes, it would benefit the institution to clearly articulate its on-going efforts to recruit diverse leaders and the resulting outcomes internally and externally.

- The team has concluded that this Core Component is met with concerns because the work of the Diversity Committee has only begun and, thus, has not yet stood the test of time, and there remains a concern among two community groups that the College has yet to address their articulated issues regarding the lack of diversity relative to Hispanic/Mexican American individuals among senior leadership. It also is not clear yet as to how the Diversity Committee will incorporate assisting students, faculty and staff to function effectively in an ever-increasing global society that affects even place and time bound individuals.
Core Component 1D: The institution’s mission demonstrates commitment to the public good.

Subcomponent 1. Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.

Subcomponent 2. The institution’s educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.

Subcomponent 3. The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

Team Determination:  
[X] Core Component is met  
__ Core Component is met with concerns  
__ Core Component is not met

Evidence:

- In meetings with multiple occupational program advisory council representatives, they consistently expressed exceptional levels of satisfaction with Pima’s programs and services and commended the College’s responsiveness to recommended curriculum changes and to identify student needs.

- Pima was cited repeatedly as a partner of choice for area industries and service agencies due to its responsiveness, its collaborative spirit and its innovative approaches to meet area needs. As stated in a meeting with a diverse group of advisory board members, “Pima listens to employers.”

- The Workforce Investment Board selected Pima Community College as the location of choice for its meetings, although several other organizations offered space. The consensus of attendees at a meeting that included external constituents indicated this decision as significant affirmation of Pima’s contributions to workforce development in the region.

Team Determination on Criterion One:  
__ Criterion is met  
[X] Criterion is met with concerns  
__ Criterion is not met

Summary Statement on Criterion: Pima Community College District’s mission is published on its website and catalog. The mission is also consistent with the stated mission of community colleges. It includes a set of clearly stated mission elements that encompass a mission statement, college vision, values, and goals. PCC’s various constituents understand the mission and generally support the mission and purpose of the college. PCC various programs, which include dual enrollment, work force development, and community partnerships, demonstrate that the programs and services support its mission and meet the needs of the students. Even in difficult times the faculty and staff continued to provide for the academic needs of the students.

PCC’s enrollment profile reflects the diversity of the community, although some community groups have expressed concerns that the leadership, which does include members of various protected classes, does not reflect the diversity of the community. Given the concerns voiced by two community groups during the on-site accreditation visit, it is recommended that the institution consider developing a strategy, including a communication plan, which could be part of the Diversity Strategic Plan that the institution plans to create, to assist the broader community in understanding 1) the diversity that currently exists, particularly within the administrative ranks, and 2) the College’s plans to enhance its work in this arena.
While the stated mission of Pima Community appears to have a reasonable base of understanding among internal constituents, it is key that the College’s commitment to conduct a formal review in 2015 is realized, particularly because 1) the last formal review took place a decade ago; 2) the College approved changes in the admissions and placements policies two years ago without properly considering the relationship of these changes with its mission and without properly whether an appropriate mission evaluation should then have been conducted; and 3) it should be formally documented that the 2014-17 Strategic Plan and Pima’s mission statement, in its current or revised form, are aligned. It is also critical that PCC conduct a formal review of the current mission statement with external stakeholders, particularly following the advent of altered but later rescinded admissions and placement policies that created the perception and/or reality that Pima was no longer an open admissions community college.

Criterion One is met with concerns for the following reasons: 1) there has been no formal review of the College’s mission for over a decade; 2) significant changes to the institution’s admission and placement policies were made and then rescinded without any formal consideration in either circumstance regarding if and how the changes aligned with the currently stated mission, and 3) the 2014-17 Strategic Plan was developed exclusive of a formal review of the currently stated mission, which is the norm for the first step in developing or updating a strategic plan. Ensuring that this review takes place as planned is critical to be able to continue to comply with Criterion. Further and partly in response to address concerns and perceptions within the external community regarding the lack of diversity within senior leadership, especially within one particular minority group, the College recently formed a Diversity Committee. While the purpose and scope of work of the committee are outlined formally, sufficient time has not taken place to assess the committee’s effectiveness in ensuring that the institution continues to meet the core component criteria in a sustained manner.

CRITERION TWO: Integrity: Ethical and Responsible Conduct. The institution acts with integrity; its conduct is ethical and responsible.

Core Component 2A: The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows fair and ethical policies and processes for its governing board, administration, faculty, and staff.

Concerns articulated by the Board of Trustees in its April 2013 action:

By failing to follow its own policies on fair bidding on institutional contracts the College did not operate with integrity. The fact-finding team found that members of the senior leadership in the College followed the former Chancellor’s instructions to form these contracts without questioning the lack of fair bidding or insisting that College policy be followed. The Board of Governors appears to have no processes in place to adequately oversee these financial practices. The Arizona Auditor General’s recent financial audit of the institution also identified concerns with financial management. In addition to the contracted services under review by this team, the Auditor General found “significant deficiencies” in the institution’s internal financial controls.

The College has also not operated with integrity in its handling of personnel policies and procedures and implementation of those policies and procedures. The fact-finding team found that the processes by which administrators are hired, terminated, and reassigned are not clearly stated and are not understood by the institution’s personnel. Many policies, including the sexual harassment policy, have not been updated for more than a decade. Senior administrators do not appear to have enforced and applied institutional policies consistently and uniformly.
The College has not operated with integrity in that it failed to conduct a timely investigation of numerous serious allegations related to the former Chancellor and his conduct. The fact-finding team found that the institution’s Board of Governors failed to conduct a prompt serious investigation or otherwise take timely action when it was aware of serious allegations against its Chancellor related to his behavior towards the institution’s employees.

Team Determination:  
_ _ Core Component is met  
_ X _ Core Component is met with concerns  
_ _ _ Core Component is not met

Evidence:

- The institution appears to have the necessary internal controls in place to provide for appropriate processes and oversight for its financial, academic, personnel and auxiliary functions. The Board’s Meet and Confer with employee representatives policy provides for direct communication between employee groups and management on issues of compensation, benefits and terms and conditions of employment. The recent establishment of a Board of Governors’ Finance and Audit Committee, a Board HR Advisory Team, and a twelve-member College Governance Council, with three representatives from each employee group, are important steps to increase transparency, improve communications, effectively address and resolve issues, and strengthen internal controls. However, at the time of the visit, these bodies have not yet had sufficient time to prove their effectiveness.

- Pima Community College’s Governing Board formed a new citizens’ committee to help it oversee College financial policies and procedures in November 2013 to help it assure the integrity of PCC financial information, audits, internal monitoring, and investment policies and performance. The committee will comprise five community representatives and two Governing Board members. PCC’s chief financial officer will serve as an ex officio member and will provide the committee with staff support. The committee will convene at least four times a year in public meetings and will report at regular Board meetings twice a year. Information about the committee, including minutes, agendas and briefing materials, is part of a new page on the PCC website.

- The Board of Governors received special training on adequately overseeing financial practices. A special meeting on July 25, 2012 presented areas of contract management. The Chief Financial Officer presented additional material on purchasing policies at a special meeting on September 14, 2013. A retreat facilitated by the Association of Community College Trustees (ACCT) in September 2013 provided Board training on how to oversee policies on fair bidding and financial practices effectively.

- The College revised SPG-4201/BA: Filling Authorized Vacant Regular Positions to emphasize that job related processes must be defensible in the filling of open positions. Recruitment request forms and business-case justifications must be completed when filling interim, direct appointments, and reassignments. The Chief Human Resources Officer must approve interim, direct appointments, and reassignments. Direct appointments must be reported to the Board of Governors. The business-case justification, requirement approvals, and Board notice would provide a system of checks and balances meant to mitigate excessive movement. On June 25, 2014 the Board approved the 2014/2015 employee Personnel Policy Statements that are aligned with SPG-4201/BA.

- All administrators have received training on all revised and/or new policies as overseen by the Human Resources Department. Tracking of participants and completed evaluations are documented in that office. Additionally, the new sexual harassment policy has been singled out for stand-alone training, which has been provided to the Board, training delivered to the board, senior administrators and mid-level managers and an Office of Dispute Resolution incepted. The Office of Dispute Resolution serves
as the single portal for any complaints and was fully functional at the time of the accreditation visit. That office oversees a third party ethics hot line that has been put in place and has created a tracking mechanism for complaints and their status through the resolution stage, which includes closing the feedback loop with the complainant.

- Administrators, Directors, and Advanced Program managers were engaged in July 2014 to review policy and procedure updates. The campus presidents’ retreat in June 2014 developed an orientation program for new campus presidents that will include a primer on college policies, regulations, standard practice guides and other policy documents.

- Policies and procedures now are in place that clearly spell out the Board’s duties when receiving any complaint, including one against the Chancellor or fellow Board members. The Office of Dispute Resolution is the sole manager of the complaint process and answers only to the College’s internal auditor. The Director of the Office of Dispute Resolution is afforded the authority to call in an independent third-party auditor if deemed appropriate and necessary. These actions appear to be achieving the intended outcomes in terms of addressing previously stated HLC concerns; yet, they are relatively new. Thus, it is key that further evidence of their intended effects over a larger time span be documented.

- PCC adopted a Chancellor Evaluation Process that clearly defines what is expects from its Chief Executive Officer. The College has provided sexual harassment training for its Board and employees, and it has revised its protocols for investigating complaints to prevent conflicts of interest that may hinder and impartial investigation. BP-1103: Delegation of authority to the Chancellor requires the Board to evaluate the Chancellor annually and identifies two key sources of information – those being, input for the Chancellor and input from the employees, students and community.

- The new Director of Internal Audit has been in place since April 2012. The Director is a Certified Internal Auditor. This current department is staffed with the incumbent Director, one temporary auditor, and one full-time staff auditor that is to be hired at some future point. The College’s new Office of Dispute Resolution also reports to the Director of Internal Audit and is staffed with a director and full time investigator. The Auditor created a 2014/2015 Engagement Plan divided into three types:

  **Operational Audits**
  - Clery Act
  - Fair Labor Standards Act
  - Health Insurance Portability and Accountability Act

  **Special Reviews**
  - Veteran’s Benefit Compliance Review Follow-up Audit
  - Title IV Program Review Follow-up Audit
  - Aviation Controls Follow-up Audit
  - Contracts and Procurement Follow-up Audit

  **Other Services, Duties, and Special Projects**
  - Fiscal Year 2013/2014 Carry over Contract and Aviation Compliance Coordination Committee Participation
  - Disaster Recovery and Business Continuity
  - HLC Self Study and Site Visit Preparation
  - Governance Special Project
Management and/or Board Requested Special Reviews, Audits Investigations

- Under the direction of the internal auditor, a new Office of Dispute Resolution is established for the purpose of investigating complaints from students, faculty and staff. The complaint may be submitted via a call, email or online form via Ethics Point reporting mechanism. Upon receipt of an issue, the Office of Dispute Resolution will review the complaint, determine if an investigation is necessary, and enter the issue into a tracking mechanism, as appropriate. At the conclusion, a report will be prepared detailing the outcomes, findings, and/or recommendation for resolution. The Office of Dispute Resolutions investigated 57 complaints in 2013 and 27 cases thus far in 2014. As documented through the tracking mechanism the vast majority of cases have been resolved and, thus, considered to be addressed. The process has included closing the feedback loop with the complainant. At the time of the site visit six cases were still in the investigative process or had been deemed to be personnel matters and thus, channeled on to the appropriate supervisor to be addressed.

- Pima has undertaken changes in its purchasing processes especially as it relates to non-competitive purchases. The college categorizes its purchases into three groups that include PCC bids, Cooperative Agreements that are aligned with the State of Arizona, and non-competitive purchasing requests. For the fiscal year of 2014, the college engaged in $52.1 million in agreements. For this fiscal year 16 of these purchases were non-competitive for a total value of $3.2 million or approximately 6% of total purchases. Of the total $3.2 million in non-competitive contracts, $2.5 million were for legacy systems and software to support Apple computers, its Oracle database, and similar enterprise-wide software.

- The institution now has the infrastructure in place that includes a comprehensive array of policies and procedures that provides for appropriate guidance to ensure ethical and responsible actions in the area of human resources. The Board of Governors has undertaken an aggressive approach to review and revise the existing Board by-laws and policies. Documentation of discussion and approval of revisions and additions are reflected in Board minutes and videos of respective Board meetings. The by-laws and policies are readily accessible on the College’s website. That said the amended and new by-laws and policies have been implemented only recently, with some still to be reviewed, revised and approved. Thus, there will need to be an extended period of time for the intended outcomes to be assessed systematically.

- The Standard Practice Guide (SPG) for filling authorized vacant regular positions has been revised to ensure a defensible process is followed that is fair and equitable for applicants. Additionally, procedures have been revised/developed to outline the process for interim and acting appointments. The SPG does provide for direct appointments (absent a search process) in certain situations; however, safeguards have been put into place to ensure such appointments are only made in limited situations. For instance, written justification is required from the requesting department and approval by the vice chancellor for human resources and the chancellor are required. Since July 1, 2013, six direct appointments have been made, including one acting assignment and two appointments at the administrative level. A review of the justification documentation in support of these appointments indicates that these appointments are consistent with policy guidelines.

- Additionally, in an effort to increase transparency and fairness in the hiring process, the college has provided opportunities for greater participation of faculty and staff on a number of high-level search committees. A review of the composition of a number of recent search committees for several administrative-level positions indicate that the committees included appropriate representation from different employee groups and from various race/ethnicity/gender groups.

- Although appropriate fair and ethical HR policies and processes have been established, the college
must continue its efforts to increase transparency and awareness in order to uphold the integrity of these policies/processes. The policies must be communicated effectively and supervisors and managers must be trained appropriately. Policy owners must be given the authority and support to ensure that these policies and processes are followed. The college has taken significant steps to improve and strengthen the sole source process provided for in the college’s purchasing procedures manual, including oversight and authorization. Additionally, steps have been taken to improve awareness of these protocols. College-wide training was offered to campus cabinets and district office units to emphasize the importance of following competitive processes and providing sufficient information in requisitions and special presentations have been made to the board of governors.

- Although the College has made significant progress towards improvements in the HR arena, the department remains in transition. Currently the associate vice chancellor positions for the area is vacant and the current East Campus president is also acting in this role. Additionally, the HR office is in process of contracting with a company to conduct a comprehensive assessment of the HR office, including structure and staffing. This study will define further opportunities for the college to strengthen and reinforce its support for its human resources.

- It was noted that the office has not, in the past, used metrics to improve. The new HR Advisory Committee is charged with recommending performance goals and measures to Human Resources. Again, given the recent establishment of the committee, there has not yet been time for the members of the committee to do its work. Subsequently, the assessment measures have not yet been identified and the development of strategies and initiatives to reach the established goals are yet to come.

- As previously noted the College has made significant progress toward updating its policies, including the sexual harassment policy and the policy and procedures for complaints of discrimination, harassment and retaliation. To date all Board of Governors, Chancellor’s Cabinet, and supervisors have participated in mandatory sexual harassment training. Additionally the Office of Dispute Resolution has been established and serves as the single portal for all complaints and grievances from employees, students and community members. The director of the office answers to the Internal Auditor and has the ability to refer complaints or grievances against the Chancellor and/or the Board of Governors to a third party investigator. Since inception of the office in mid-July, 2014, 27 cases have been entered into a complaint hotline, Ethics Point, with six cases remaining open. Of those cases four are related to processes and are in the investigative stages and two have been referred for resolution. These actions are indicative of the College’s commitment to ensuring fair and equitable treatment of its employees. That said there is not sufficient data available yet to assess trends with respect to levels and topics of complaints and grievances.

- During meetings with faculty on individual campuses it was noted consistently that they had the authority and responsibility to oversee matters related to academics. As an example, a developmental education committee has been assembled and charged with the task of redesigning of the College’s developmental education program.

- It was concluded during the site visit that a significant amount of work had been undertaken by the institution to address previously cited concerns as well as core component criteria as exampled by 1) the development and approval of revised and/or new policies, 2) focused training of the Board and senior and mid-level managers regarding the changes and additions, and 3) strengthened controls to ensure the integrity of purchasing and bidding practices as well as the effective and timely addressing of complaints brought forward by any employee, student of community member. That said several of the policies were implemented during the summer while many faculty members and students were not on campus. While they may have become aware of the new/amended policies through the call for
comment period, at the time of the visit there had been neither the opportunity for other than electronic communication nor training for faculty/students in a formal setting. Additionally, at the time of the visit there were still revised policies that the Board was slated to, but had yet to, approve. For these reasons coupled with the key finding of the team that there has not been sufficient time to test and assess the referred to policies regarding intended impact as well as any unforeseen, unintended consequences, this Core Component is met with concerns.

Core Component 2B: The institution presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships.

Team Determination:  
_X_ Core Component is met  
_ _ Core Component is met with concerns  
__ Core Component is not met

Evidence:

- PCC provides students and the public information on its programs, requirements, faculty, staff, cost, and control through PCC’s website and college catalog. This is evident through the following websites: https://www.pima.edu/programs-courses/index.html; www.pima.edu/paying-for-school/index.html; and www.pima.edu/faculty-staff/index.html. The information can also be found in the online college catalog: www.pima.edu/programs-courses/college-catalog/1415/1415-catalog.pdf.

- PCC publishes information on its accreditation, including contact information for the accrediting organizations and a list of accredited programs. In addition, it has made available information on the institution’s probation, self-study reports, visit, and evaluation reports. This information is available in PCC’s website: www.pima.edu/about-pima/accreditation/index.html.

- To any end user the Pima Community College website is readily navigational. Information is appropriately segmented depending on the user’s status (ex: student, employee, community member, business…). While the first page of the website is dedicated to providing current and prospective students with key information, which is standard among best practice websites, the next page contains accurate information regarding Pima’s current accreditation status.

- During interviews, students expressed some frustration in their ability to find some information available on the website. PCC could benefit from reviewing the architecture, information placement, and ease of use of the website (including student focus groups) to make any necessary changes that could facilitate the use of the website information.

Core Component 2C: The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity.

Subcomponent 1. The governing board’s deliberations reflect priorities to preserve and enhance the institution.

Subcomponent 2. The governing board reviews and considers the reasonable and relevant interests of the institution’s internal and external constituencies during its decision-making deliberations.

Subcomponent 3. The governing board preserves its independence from undue influence on the part of donors,
elected officials, ownership interests, or other external parties when such influence would not be in the best interest of the institution.

**Subcomponent 4.** The governing board delegates day-to-day management of the institution to the administration and expects the faculty to oversee academic matters.

**Team Determination:**

- __ Core Component is met
- _X_ Core Component is met with concerns
- __ Core Component is not met

**Evidence:**

- A comprehensive review of Board by-laws and policies has been undertaken to ensure that reasonable, current board policies and rules are in place to outline and limit the board’s role to governance and to assure integrity. The updated by-laws and policies are clearly stated and designed to foster independence and to protect against advancing self-interests and/or those of vested-interest groups. As evidence Article X of the Board by-laws specifies the obligation of the Board to delegate authority to the Chancellor as the Board’s chief executive officer and to confine Board action to policy determination, priority setting, evaluation of College performance, and maintenance of fiscal stability. Additionally, this article includes a Code of Ethics that also defines and addresses the topic of conflict of interest for individual Board members. Board Policies (BP) 5502 and 5503 clearly state the parameters regarding receipt of gifts and naming opportunities within the sole framework of benefit to the College.

- A new policy regarding governance, BP 1401, is based upon the following principles: contribution, cooperation, collaboration, civility, transparency, and respect, and a process has been incorporated to ensure that by-laws and policies are revisited and updated on a regular schedule. Although the Board has made significant progress in creating a framework to ensure an appropriate scope of work and its integrity in all its decisions, the changes are relatively new and now must stand the test of time.

- BP 1101 enables any College constituent to initiate a Board policy proposal related to institutional priorities and policies. The process includes a 21-day comment period that allows for internal and external comments prior to final approval by the Board.

- In response to the HLC’s sanctions, Pima have implemented a series of actions to further develop and inform board members of College issues and operations so they are better prepared to make decisions in the best interest of the college. Through working with the American Association of Community College Trustees, a series of professional development and training opportunities has been provided to the Board. However, there appears as yet to be a formal means for assessing the impact of the recent and planned for training and development.

- While a good faith effort, coupled with obvious significant work, has been undertaken to ensure autonomy and integrity in all Board of Governors’ decision-making endeavors, the amendments, revisions and additions still are relatively new and, thus, lacking in sufficient measurable outcomes to determine their overall impact, quantitatively and qualitatively.

- A variety of methods is being employed to improve communication flow and to enhance decision-making processes. The new Governance Council, the Finance and Audit Committee, and the HR Advisory Team provide the framework for an improved flow of current, relevant information to the Board for its consideration regarding critical decisions. Additionally, an annual Board calendar for monitoring reports from key areas of the College is in the process of being developed. However, many of these structures are new; therefore, their effectiveness is yet to be realized. For example, the HR Advisory Team was only established in June 2014 and the Board monitoring calendar has not been implemented...
yet. As a result, the team determined that

- The College website contains a Board of Governors web page that lists the contact information for each Board member. The web page also contains a link to the following: Public meeting notices for formal meetings and study sessions; Board meeting agendas and accompanying supporting materials; minutes and videos of all regular Board meetings; and an open invitation to attend Board meetings with time allotted for public comments/input.

- The Board recently completed a formal evaluation of the Chancellor based on an ACCT proprietary document and the Chancellor’s goals. The newly defined CEO evaluation process not only assists the Board in assessing the effectiveness of the Chancellor in leading the day-to-day management of the College, but also serves as a prompt for a clear delineation between the Chancellor’s and the Board’s roles. The Board also recently conducted its own formal self-assessment. A summary of the Chancellor’s evaluation process and the Board self-assessment are to be presented to the public during an upcoming Board meeting. While these undertakings are key, it remains unclear how the Board will apply the results of its self-assessment in ways that can be measured. This is a cause of concern for the team. Thus, it would be beneficial to formalize and monitor an action plan based up the self-assessment and to ensure that one is conducted each year in order to capitalize on strengths and to identify areas in need of improvement.

- The above cited evidence is indicative that amended and/or new structures and policies are in place to provide the necessary framework for sustainable responsible, autonomous decision-making by a governing board that is held accountable to its internal and external stakeholders. Formal mechanisms and controls, such as, but not limited to, the code of ethics and conflict of interest policies along with board training, have created a solid foundation to ensure that this Core Component is met in an ongoing manner. However, much of the work relative to institutional structures, mechanisms and controls has taken place over the past several months. As such there remains the need to provide on-going evidence that the work referenced above is sustainable in terms of the institution’s ability to continue to meet the criteria associated with this Core Component.

**Core Component 2D:** The institution is committed to freedom of expression and the pursuit of truth in teaching and learning.

**Team Determination:**

- [ ] Core Component is met
- [X] Core Component is met with concerns
- [ ] Core Component is not met

**Evidence:**

- PCC adheres to higher education standards regarding academic freedom and has policies protecting it as noted on the *Faculty Personnel Policy Statement* (Article IV. A).
- Similarly, academic freedom protections conforming to higher education standards are provided for students.
- Interviews with faculty did not indicate any problems with academic freedom. However, some areas of study may get less support due to student interest and state support, which a few faculty members felt limited their ability to do work in their particular area of interest and a limitation to their academic freedom. However, these decisions appear to stem from fiscal and scheduling concerns than a direct attempt to limit research.
- In the past, some limitations in the ability of individuals to express publicly concerns or criticism about the institution and/or administration without fear of retribution had led to concerns regarding freedom of
expression. Recent shifts in the institutional culture are creating more openness and PCC is encouraged to continue making progress in those areas. Because not sufficient time has elapse to demonstrate the effectiveness of these measures for the long term, the team felt sufficient concern to determine the core component was met with concern.

- Some students expressed concerns about their ability to take courses in certain fields of inquiry, such as Mexican-American/Latino studies. While the limitations appear to be due to scheduling or cancelations, the institution might benefit from taking into consideration and examining the role of those courses in the curriculum, particularly in light of Arizona laws, such as HB 2281 that bans ethnic studies in public schools, and how that might affect the pursuit of knowledge, which is another source of concern.

**Core Component 2E:** The institution ensures that faculty, students, and staff acquire, discover, and apply knowledge responsibly.

**Subcomponent 1.** The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students.

**Subcomponent 2.** Students are offered guidance in the ethical use of information resources.

**Subcomponent 3.** The institution has and enforces policies on academic honesty and integrity.

**Team Determination:**

- X Core Component is met
- Core Component is met with concerns
- Core Component is not met

**Evidence:**

- The faculty handbook and student handbook offer policies on responsible acquisition and application of knowledge, as well as ethical practices. This is also noted in the Adjunct Faculty Guide, for example: [www.pima.edu/administrative-services/human-resources/personnel-policy-statements/pps-general/AdjunctFacultyGuide.pdf](http://www.pima.edu/administrative-services/human-resources/personnel-policy-statements/pps-general/AdjunctFacultyGuide.pdf); [www.pima.edu/current-students/code-of-conduct/docs/Student-Code-of-Conduct.pdf](http://www.pima.edu/current-students/code-of-conduct/docs/Student-Code-of-Conduct.pdf).
- PCC also publishes standards on the use of copyrighted material: [www.pima.edu/current-students/library/copyright-resources.html](http://www.pima.edu/current-students/library/copyright-resources.html).
- PCC also publishes a guide on human subject research, has a process for applications to conduct human subject research, which are reviewed by the Director of Planning and Institutional Research ([https://www.pima.edu/administrative-services/planning-institutional-research/docs/Human-Subjects-User-Guide.pdf](https://www.pima.edu/administrative-services/planning-institutional-research/docs/Human-Subjects-User-Guide.pdf)).
- Based on document review, minutes, and selected interviews with faculty, it appears that these policies are currently followed.

**Team Determination on Criterion Two:**

- Criterion is met
- X Criterion is met with concerns
- Criterion is not met

**Summary Statement on Criterion:**

The institution appears to have the necessary internal controls in place to provide for appropriate processes and oversight for its financial, academic, personnel and auxiliary functions. The recent
establishment of a Board of Governors’ Finance and Audit Committee, a Board HR Advisory Team, and
twelve-member College Governance Council, with three representatives from each employee group, are
important steps to increase transparency, improve communications, effectively address and resolve issues,
and strengthen internal controls. In addition, the Office of Conflict Resolution (OCR) has been established
to address complaints and grievances. However, at the time of the visit, these bodies have not yet had
sufficient time to prove their effectiveness. Similarly, a number of Board policies recently adopted aim to
provide guidance on ethical behavior and practices, but at the time of the visit there was not yet sufficient
time since their implementation to determine their effectiveness.

PCC has made a good faith effort to provide training for the board and establish both greater transparency
and engagement with its various constituencies; however, it is still too early to determine the long-term
effectiveness of these changes. The newly defined CEO evaluation process not only assists the Board in
assessing the effectiveness of the Chancellor in leading the day-to-day management of the College, but
also serves as a prompt for a clear delineation between the Chancellor’s and the Board’s roles. The Board
also recently conducted its own formal self-assessment. A summary of the Chancellor’s evaluation
process and the Board self-assessment are to be presented to the public during an upcoming Board meeting. While
these undertakings are key, it remains unclear how the Board will apply the results of its self-assessment in
ways that can be measured. Thus, it would be beneficial to formalize and monitor an action plan that is
based on the self-assessment. In addition, PCC should ensure ongoing yearly assessments in order to
capitalize on strengths and to identify areas in need of improvement.

While PCC is on a positive trajectory, it needs to continue its forward momentum and assess the
effectiveness of these changes on an ongoing basis. A plan to assess the new structures, policies, and
procedures should be developed and implemented, as well as a process to ensure that PCC makes any
necessary revisions based on the outcomes. Ensuring a transparent process for developing such a plan
and documenting outcomes of the changes can benefit the institution and instill greater public confidence.

PCC has made quite a number of changes in a short time. While the team felt that the newly developed
policies, structures, procedures, and trainings put in place the necessary measures and procedures to
address previous deficiencies and conform to established good practices, sufficient time had not elapse to
determine the effectiveness of these changes, which need to be monitored. Failure to successfully and
fully implement these changes can once more put at risk the institutions ability to continue to meet the
Criterion. As a result, the team determined that the Criterion was met with concern.

CRITERION THREE: Teaching and Learning: Quality, Resources, and Support. The
institution provides high quality education, wherever and however its offerings are delivered.

Core Component 3A: The institution’s degree programs are appropriate to higher education.

Subcomponent 1. Courses and programs are current and require levels of performance by students appropriate
to the degree or certificate awarded.

Subcomponent 2. The institution articulates and differentiates learning goals for its undergraduate, graduate,
post-baccalaureate, post-graduate, and certificate programs.

Subcomponent 3. The institution’s program quality and learning goals are consistent across all modes
delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through
contractual or consortial arrangements, or any other modality).

Team Determination:  

Core Component is met
Core Component is met with concerns
Core Component is not met

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11/20/2014
Evidence:

- Interviews with faculty at all Pima campuses confirmed that faculty oversee curricula through the College Discipline Area Committees (CDACs). Each course is reviewed at least every five years for quality and currency. In 2012-2013, 570 non-workforce courses were reviewed. Related, program reviews are conducted every 3-5 years on a set schedule. Occupational programs have advisory committees which meet once or twice a year and give feedback on the currency of the programs and how well graduates perform in the workplace. HLC team members convened a joint meeting of Pima faculty and advisory board members on the Northwest Campus, during which program faculty expressed their appreciation for business owners who volunteered their time and expertise to supervise interns as well as attend advisory board meetings to share their advice for ongoing program improvements. Likewise, business owners/employers commended faculty in their respective fields (Therapeutic Massage, Clinical Research Coordinator, and Hotel/Restaurant Management) for providing well-prepared, dedicated employees for the local workforce. Many of the occupational programs have their own programmatic accreditation as well as licensing examinations, both of which provide PCC with information on quality and currency. As for whether Pima’s students who transfer on to baccalaureate institutions are prepared at a level suitable for undertaking junior and senior level work, the college receives information about the transfer students from the receiving institutions (see Criterion 4A6).

- Pima Community College offers three different types of academic programs – transfer, occupational, and workforce. Students earn certificates or degrees as a result of completing one or more of these program requirements. A transfer program requires 60 or more credit hours and a general education core as stipulated by the state of Arizona. A certificate in electronic assembly requires 16 credits of coursework in electronic assembly and 8 credits in supporting classwork, in this case mathematics. Each course in one of PCC’s programs – whether transfer, occupational, or workforce – has stated course performance objectives appropriate to the program. For example, students enrolled in CHM 130 lecture and CHM 1301N had as a learning objective to employ chemical problem solving methods using dimensional analysis and formulas, maintaining physical units and significant figures. 41 students met this learning goal; the other 6 were below 60%. These results met the set assessment goal of 75% of the students being able to meet this learning objective. Not all PCC syllabi are this specific about learning goals, however, indicating that this is an area in which Pima has an opportunity for improvement.

- In keeping with its stated vision to provide “access to learning without the limits of time, place, or distance,” PCC offers courses in a variety of modalities. In addition to the “regular” classroom format, students can take a class online, in a computer lab, in a self-paced format, in an accelerated format, in a hybrid format, as an honors course, or in an open entry/open exit format. To assure program quality and consistency across the modalities, PCC follows a uniform process of creating objectives, standards, and an outline for each course. A faculty subject matter expert works with an instructional designer to create template courses based on established course objectives. They draw on training they have received through participation in the national Quality Matters program and through online study and certification in the college’s Desire2Learn system. Faculty build their syllabi using this information so that no matter the mode of presentation, the class will follow the established parameters. In addition, all PCC programs on all campuses participate in program and service reviews on a 3-5 year cycle. HLC team members reviewed several syllabi from courses with both online and on-ground sections and confirmed in these examples that student learning outcomes are consistent in both modalities. During HLC meetings at the Northwest campus, faculty and instructional designers provided examples of courses that were determined to be better suited to on-ground than on-line delivery. In one example given, a science course was taken off-line because assessment revealed it was better suited for in-class delivery.
As for dual enrollment offerings in multiple high schools, PCC uses a Dual Enrollment Handbook to monitor its offerings to dual enrollment high school students. The students are held to the same standards as other PCC students, and those who are hired to teach dual enrollment classes must meet the same faculty standards as other adjunct faculty. However, because there is not one person to coordinate all the different dual enrollment classes, but rather faculty liaisons from each campus, there is not always consistency in review of syllabi and in mentoring of dual enrollment adjunct faculty.

Although Pima Community College’s degree programs are appropriate to higher education and require levels of performance by students appropriate to the degree or certificate awarded, the consistency in maintaining program quality and learning goals is uneven. For examples, not all syllabi have stated learning goals and the supervision of dual enrollment classes is uneven. Therefore, the HLC team feels that PCC has met Core Component 3A but with concerns that need to be addressed.

Core Component 3B: The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to its educational programs.

Subcomponent 1. The general education program is appropriate to the mission, educational offerings, and degree levels of the institution.

Subcomponent 2. The institution articulates the purposes, content, and intended learning outcomes of its undergraduate general education requirements. The program of general education is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.

Subcomponent 3. Every degree program offered by the institution engages students in collecting, analyzing, and communicating information; in mastering modes of inquiry or creative work; and in developing skills adaptable to changing environments.

Subcomponent 4. The education offered by the institution recognizes the human and cultural diversity of the world in which students live and work.

Subcomponent 5. The faculty and students contribute to scholarship, creative work, and the discovery of knowledge to the extent appropriate to their programs and the institution’s mission.

Team Determination:  
_X_ Core Component is met
__ Core Component is met with concerns
__ Core Component is not met

Evidence:

- Pima Community College follows Arizona’s statewide general education curriculum (AGEC), which requires a minimum of 35 credit hours in stipulated areas, such as English composition and mathematics. PCC students earning an Associate of Arts, Business, Fine Arts, or Science degree follow these requirements. Students completing occupational or workforce degrees must complete 18 credit hours of specified general education courses. Students earning a certificate of 30 or more hours must complete 6 credit hours of general education; certificates of less than 30 credit hours do not have a general education requirement.

- The PCC 2014/2015 catalog explains the value and processes of general education (p. 55): “General education helps students to gain an understanding and appreciation of themselves, their history and
The catalog goes on to explain how its general education requirements link with Arizona’s according to bachelor’s degree intentions – a) Arizona General Education Curriculum A (AGEC-A) for bachelor of arts or fine arts programs; b) AGEC-B for bachelor’s degrees in business; and c) AGEC-S for bachelor of science degrees. PCC’s general education outcomes are referred to as “college-wide outcomes.” Recently revised, these outcomes are communication; critical and creative thinking; quantitative and scientific literacy and analysis; information literacy; and diverse cultural, historical, and global perspectives.

- Collecting, analyzing, and communicating information; and thinking critically and creatively are both PCC college-wide outcomes. Therefore, these outcomes appear in some form in each PCC program. For example, stated student learning outcomes for the Computer-Aided Drafting/Design program are to read drawings, communicate ideas and digitally collaborate. The student learning outcomes for the Translation and Interpretation Studies program include translating texts and communicating the translation, demonstrating the ability to perform consecutive interpretations and sight translations, and differentiating between interpretation and translation. Conversations between HLC staff members and Honors students and Student Government representatives on the Northwest campus provided specific examples of how PCC students learn to collect and analyze information and think both critically and creatively in both curricular and so-curricular programs. Students who are interested in obtaining honors credit for a specific class have to complete additional assignments for the class that involve analyzing information, thinking critically about that information, and communicating the results. SGA members are often involved in problem solving situations. For example, when it appeared that perhaps the orientation that students new to PCC were receiving was not sufficient, the student government members designed a Connect Camp in which continuing PCC students oriented new PCC students to college life from a student’s perspective.

- Students who earn a degree from PCC have to take a class that meets either cultural awareness or global awareness criteria (PCC Catalog, p. 56). The Arizona General Education Curriculum (AGEC) reinforces this requirement by stating that “students are required to take courses that meet . . . cultural diversity highlighting ethnic, race, and/or gender awareness.” (PCC Catalog, p. 58) HLC team review of syllabi provided evidence that numerous courses were clearly identified as “C,” denoting cultural diversity, and “G,” denoting global awareness, and thus address issues of inclusiveness and understanding and meet the requirements as outlined in AGEC.

- Faculty can contribute to sharing their research and creative work through the Faculty Speaker’s Series, the Teaching Strategies Workshops, and Professional Development Day. Students can share their research and creative work through Sandscript, an annual literary magazine; their participation in music, theater and/or dance; their work in the college’s fashion design program, through which a line of clothing for children with cancer has been created; the Arizona NASA Space Grant project; and the Honors in Action project, which involves students researching and implementing a project to serve the community.

- Through its general education program which is anchored in Arizona’s general education requirements for college graduates, PCC demonstrates that the acquisition of broadly based learning is integral to its education programs. HLC team members, therefore, find that PCC has met Core Component 3B.

**Core Component 3C:** The institution has the faculty and staff needed for effective, high-quality programs and student services.

**Subcomponent 1.** The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for
student performance; establishment of academic credentials for instructional staff; involvement in assessment of student learning.

**Subcomponent 2.** All instructors are appropriately credentialed, including those in dual credit, contractual, and consortial programs.

**Subcomponent 3.** Instructors are evaluated regularly in accordance with established institutional policies and procedures.

**Subcomponent 4.** The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.

**Subcomponent 5.** Instructors are accessible for student inquiry.

**Subcomponent 6.** Staff members providing student support services, such as tutoring, financial aid advising, academic advising, and co-curricular activities, are appropriately qualified, trained, and supported in their professional development.

**Team Determination:**

- __ Core Component is met
- _X_ Core Component is met with concerns
- __ Core Component is not met

**Evidence:**

- PCC employs 363 full-time faculty (338 are instructional, and the rest are counselors and librarians) and 951 adjunct faculty. These numbers create a ratio of 3.7 adjuncts for every full-time faculty member, placing PCC in the mid-high range of its peers. Those two-year peer colleges with a smaller adjunct to full-time faculty ratio are Portland CC (3.3), El Paso CC (3.0), Tarrant County (1.9), and Austin CC (2.2). The faculty to student ratio at PCC is 27/1, again falling into the mid-high range when compared to their peers. Founding faculty expressed to HLC team members their growing concern about the need to hire additional full-time faculty to better serve the students in general education courses and other courses/programs with substantial enrollment. Their reasoning is that continuing full-time faculty provide stability for courses and programs as well as mentoring for the adjunct faculty. Faculty were therefore clearly pleased about Pima’s commitment to hiring additional full-time faculty to teach developmental courses and hoped that in the near future this commitment would extend to other content areas.

- PCC Board Policy 3001, Faculty Standards and Qualifications, mandates that all faculty be credentialed according to the standard practice in higher education of the faculty member holding a degree a level higher than the courses she or he is teaching. For example, a PCC instructor teaching academic transfer courses that lead to a baccalaureate degree must have a master’s degree; those teaching occupational courses leading to an associate’s degree must have earned a bachelor’s degree or its equivalent in coursework and work experience. As part of their duties, CDACs determine which degrees in which fields adequately prepare faculty to teach courses within the disciplines under their purview.

- All applicants for faculty positions must submit a resume, official transcripts, and appropriate licenses or certificates. A Certification Analyst from the Faculty Certification Office reviews these documents, then submits the application to the Vice Provost for final approval. If approved, the applicant is issued a PCC Faculty Standards Teaching Certificate showing that he or she is able to teach in a certain discipline. HLC team members conducted an impromptu, random review of both full-time and part-time faculty files and were impressed not only by the comprehensiveness of the files in demonstrating that faculty possessed the appropriate credentials to teach their respective courses but also with the care and pride with which the employees in the Faculty Certification Office performed their duties.
• All full-time and part-time faculty members are evaluated annually by their students using college-wide student evaluations. The evaluation has been paper-and-pencil, but Fall 2014 is moving to online using the Class Climate evaluation tool. In addition, full-time faculty are evaluated annually during the college’s Annual Collegial Conference. During these conferences, faculty and their supervisors confer about student evaluations as well as the challenges and accomplishments of the past year. They then develop a plan for the coming year. Faculty can also participate in peer review, and the evaluation of workforce faculty involves in addition comparison of their performance to best practices models.

• Prior to their first year of teaching, full-time faculty participate in the Faculty Learning Academy, which orients faculty to PCC. Adjunct faculty orientation is provided at each campus in August and January as well as online throughout the year. The Faculty Success Program provides all full-time faculty with $1,000 per year for professional development, such as coursework, membership in professional organizations, and attendance at conferences. In conversations with Pima faculty, it was evident that Pima is invested in professional development of its faculty. Several faculty expressed to HLC team members that they had rarely been denied funding above and beyond the allotted $1,000 per year if they could provide evidence that the activity would enhance their teaching and benefit students. Full-time faculty are eligible for a sabbatical after their fifth year and can also participate in the Faculty Exchange Program, which allows them to swap jobs with faculty members at other institutions. The Step Progression Plan also encourages professional development. In the fall participating faculty members submit a Step Progression Plan to their supervisors that identifies activities what will contribute to professional growth. In March, the faculty member resubmits the plan with evidence that the activities have been completed. If approved and funds are available, faculty will receive a pay increase to the next step.

• Each full-time faculty member is given an office, an official PCC address and telephone number that students can use to contact them. All campuses provide spaces for adjunct faculty to meet with students. This commitment shows adjunct faculty that they are valued by the institution, and it increases their visibility and access to students and to other faculty in their disciplines. All faculty are required to put office hour information on their syllabi, and full-time faculty are required by policy to hold 15 office hours over the semester for every three credit hours of instruction. Faculty who teach online may hold up to 80% of their office hours online; PCC policy also dictates that online faculty must respond to student questions within 24 hours.

• Applicants for tutoring positions at PCC must have earned A’s in the subjects they are applying to tutor and must have a recommendation from an instructor in that discipline. Once hired, they must also participate in CRLA training and complete level 1 during their first year of employment. Exempt Student Support Services employees (advisors, coordinators, and managers) hold college degrees, with 50% having obtained a master’s degree. Once hired, these employees attend a two-day orientation on the data management system and on FERPA followed by on-the-job training in their specific areas. During the year these employees participate in a nine-week training program focusing on student development concepts. Advising and Financial Aid staff members are encouraged to apply for funding to attend meetings of their national professional organizations – NACADA and NASFAA.

• Although the HLC team believes that PCC hires qualified faculty and staff needed for quality programs and services, it shares the concern of some faculty members about the growing number of adjunct faculty, especially when compared to PCC’s peer institutions. Therefore, Core Component 3C is viewed as met with concerns in the hope that PCC will monitor its full-time to part-time faculty ratio and bring it more in line with the lower range of its peer institutions.
Core Component 3D: The institution provides support for student learning and effective teaching.

Subcomponent 1. The institution provides student support services suited to the needs of its student populations.

Subcomponent 2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.

Subcomponent 3. The institution provides academic advising suited to its programs and the needs of its students.

Subcomponent 4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites, museum collections, as appropriate to the institution’s offerings).

Subcomponent 5. The institution provides to students guidance in the effective use of research and information resources.

Team Determination:  
__ Core Component is met  
_X Core Component is met with concerns  
__ Core Component is not met

Evidence:

- PCC provides advising based within the Student Services Centers located on every campus as well as at off-campus sites like Davis-Monthan Air Force Base Education Center and the Adult Education Learning Centers. Faculty counselors are also available to help students with career planning and developing college success skills. They also refer students in crisis to the appropriate offices or agencies.

- PCC provides free tutoring at each of its campuses and 24-hour online through a contract with BrainFuse. During the Fall 2013 semester, the 5 learning centers served a total (unduplicated) of 6,115 students during 41,878 tutoring visits. As mentioned above, tutors go through CRLA training. Of the 120 tutors employed during Spring 2014, 21 were working on Level 1 CRLA certification, 75 were Level I certified, 20 were Level II certified, and 4 were at Level III. One student told the HLC team that she had started working with a math tutor at the beginning of the semester, stating “they (tutors) are always willing to help as much as they can, especially in the hard classes like math.”

- PCC offers Student Success workshops on topics ranging from note taking to personal finance, from career choices to stress management. While lauding this type of program, the HLC team did not receive information about the number of students taking advantage of these opportunities. The college also offers special, targeted services to disabled students through a Disabled Student Resources Center and operates a Veterans Center at the Downtown Campus, dedicated in March 2014.

- Students entering PCC who have not completed a college course within the last three years and who are intending to complete a degree or certificate, who wish to be dual-enrolled students, or who are enrolling in reading, writing, or mathematics general education classes take the Basic Skills Assessment test in reading, writing, and mathematics. The results of these assessments place students into the classes that match the level of their skills and knowledge, according to the assessment tests.

- To ensure that students who place into developmental education classes receive the instruction and support they need, PCC undertook an 8-month review of its developmental education courses with the
result that these courses are now organized into a developmental education program under a district-wide Developmental Education Council. Fall 2014 enrollments show that there are 238 sections of developmental math serving 5,452 students, 52 sections of developmental reading serving 1,076 students and 87 sections of developmental writing serving 1,221 students. Plans are underway to hire a Director of Developmental Education. CDACs have been redesigning the curricula for the developmental classes. For example, developmental mathematics has been redesigned into an emporium model like that used at Virginia Tech, the University of Alabama, Cleveland State CC, and Northeast State Technical Community College. Under the emporium model, math courses are redesigned into modules based on competencies. Students who complete all of the modules are eligible to take the Pima placement exam for entry into college algebra. Student services available to these students are tutoring in all subjects, supplemental instruction, mentoring/coaching, and an early alert process to signal advisors and counselors if a student is having challenges.

- As mentioned in previous sections of this report, PCC offers tutoring to help students with concepts and skills in specific courses and Student Success workshops to help them develop study strategies for successful completion of the classes. During the Fall 2014 semester, the East Campus is building a learning community for students registered in both developmental reading and College Success Skills.

- PCC’s Adult Education Program fulfills a significant need in Pima County since over 83,000 adults in that county do not have a high school diploma. Adult Education offers classes in ABE, ASE, and English Language Acquisition for Adults. The target population for the program from the Arizona Department of Education is 6,000 adults in Pima County, age 16 and over, who are not enrolled in secondary school and lack mastery of basic educational skills. These individuals are served through classes and services in PCC’s Adult Basic Education (ABE), Adult Secondary Education (ASE), Distance Learning, and English Language Acquisition for Adults programs.

- In 2009 PCC redesigned its Student Services Centers on each of its campuses. This redesign included a remodel of its advising services such that advisors now provide a variety of information to students throughout their time at PCC from admissions and orientation to graduation. One such service is the development of academic plans which are then recorded in the MyDegreePlan program, a degree-audit system which students can access through the MyPima portal. Fall 2014 advisors are developing an Assigned Advising program as a way to connect to high-risk students through a case management model. Distance Education students are advised through Virtual Advising and PimaChat.

- Information Technology (IT) is a college-wide unit what supports instructional needs of students and faculty in all enterprise systems and at six campuses, the district office, and off-site locations. All campuses have computer commons that students use to check e-mail, conduct on-line research, log in to MyPima. All computer commons have PCs, copiers, printers, and assistive technology. IT’s User Support Services offers 24/7 helpdesk services for students, faculty, and staff and manages the technology in over 400 classrooms. The Web Services unit manages MyPima, the web-based portal for students. Network Services manages wired and wireless access and internet access and services. Wireless supports more than 5,000 unique users, and 100% of the common and public areas are wireless. In Summer 2012, the college increased its bandwidth for internet access from 200 megabits to one gigabit. The Center for Learning Technology maintains access to the college’s gateway to distance learning, PimaOnline, and the learning management system Desire2Learn.

- Classrooms are equipped with Smartboards, projectors, and WiFi access. The library has on-line research support, such as web pages on writing and documenting a research paper. The different campuses offer students various types of learning support equipment and spaces, depending on the types of programs offered. For example, the East Campus Veterinary Technology program has a
specialized classroom, lab, and kennels for animals. The West Campus is home to the Center for the Arts and hosts two art galleries, the music recital hall, and the proscenium and black box theatres. The Northwest Campus has a new STEM building that features state-of-the-art science labs.

- As mentioned above, the PCC library offers on its webpage information literacy resources and LibGuides tailored to specific courses and developed by librarians and faculty in partnership. Librarians also provide in-person instruction to classes or individual students working on research projects. To fulfill their general education requirements, Pima students take two courses in English composition, both of which require students to research and synthesize information and to cite sources responsibly.

- The HLC team was appreciative of the extensive array of support for student learning and teaching at PCC; however, because of the recent restructuring of developmental education with a director still to be hired, the HLC team believes that PCC meets criterion 3D with concerns. The team also encourages PCC to be more proactive with the Pima County adults who need to be served through adult education. Failure to implement the necessary changes to support developmental education would affect PCC’s ability to meet the needs of many of their students and could put at risk their continued ability to meet the criteria.

Core Component 3E: The institution fulfills the claims it makes for an enriched educational environment.

Subcomponent 1. Co-curricular programs are suited to the institution's mission and contribute to the educational experience of its students.

Subcomponent 2. The institution demonstrates any claims it makes about contributions to its students’ educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Team Determination: _X_ Core Component is met

__ Core Component is met with concerns

__ Core Component is not met

Evidence:

- PCC provides a number of co-curricular programs and activities that allow students opportunities to develop and practice leadership skills, continue to develop knowledge and skills related to their majors and targeted career paths, and interact with fellow students who have common interests. Some examples of these co-curricular programs and activities are student governments on each campus, the Pima Leadership Institute, student clubs, student publications like the Aztec Press and Sandscript, performing arts – theatre, dance, music – and academic achievement organizations like Phi Theta Kappa. PIMA also offers ROTC and intercollegiate athletics through the Arizona Community College Athletic Conference.

- The stated mission of Pima Community College is to “develop our community through learning.” Related, the stated vision of PCC is to provide “access to learning without limits of time, place or distance.” Contributions PCC makes to its students’ educational experiences, therefore, are part of its mission to develop the community of Tucson, Arizona, though providing learning opportunities to its students that benefit the community. For example, PCC maintains multiple partnerships with business and industry, utilizes internships and externships with area organizations, and partners with the Pima County One Stop Center. PCC also connects the community and the students through its Adult Education Program, which offers Refugee Education, Civic and Student Leadership, and Family
Literacy. PCC students have opportunities to serve as student representatives at Arizona Town Hall meetings, and specific PCC occupational programs connect with businesses and services in the community. For example, the nursing program contracts with healthcare organizations to provide clinical training at every major hospital and health center in the college’s service area.

- PCC offers an array of educational enrichment activities for its students. Therefore, the HLC team believes this component has been met.

**Team Determination on Criterion Three:**

- Criterion is met
- X Criterion is met with concerns
- Criterion is not met

**Summary Statement on Criterion:**

There is sufficient evidence that Pima faculty are in control of the curriculum. In addition, the faculty for each program take the necessary measures to stay current in their field and ensure instruction remains relevant to the discipline and/or profession. Faculty have appropriate credential and opportunities to engage in academic pursuits in their field. PCC also has processes in place for evaluating faculty. In addition, PCC offers opportunities for the adjunct faculty to participate in the institution and feel included in the college.

While most programs and syllabuses have learning objectives, not all syllabi have specific learning goals, indicating that this is an area where PCC has opportunity for improvement. Student learning outcomes appear to be consistent in both on-ground and online course modalities. In addition, sufficient resources are available for online and campus based student to have access to comparable services.

PCC uses a Dual Enrollment Guidebook to monitor its offerings to dual enrollment high school students, but each have different directors that oversee them. Because there is not one single person to coordinate all the different dual enrollment classes, it leads to inconsistencies in the review of syllabi and in mentoring dual enrollment adjunct faculty.

The infrastructure exists to support students and encourage their intellectual pursuits, including tutoring and learning resources. To insure that students who place into developmental education classes receive the instruction and support they need, PCC undertook an 8-month review of its developmental education courses with the result that these courses are now organized into a developmental education program under a district-wide Developmental Education Council. Plans are underway to hire a Director of Developmental Education, which will benefit the program. It will be critical for PCC to ensure continued support for its Developmental Education program and assess the effectiveness of the changes that are currently underway but not yet completed.

As noted above, the consistency in maintaining program quality and learning goals is uneven. For examples, not all syllabi have stated learning goals and the supervision of dual enrollment classes is uneven. In addition, although PCC hires qualified faculty and staff needed for quality programs and services, the growing number of adjunct faculty, especially when compared to PCC’s peer institutions is a cause for concern. Further, PCC needs to implement the necessary changes to support developmental education. Failure to do so would affect PCC’s ability to meet the needs of many of their students and could put at risk their continued ability to meet the criteria. As a result, the team determined the Criterion
was met with concerns.

**CRITERION FOUR: Teaching and Learning: Evaluation and Improvement.** The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

**Core Component 4A:** The institution demonstrates responsibility for the quality of its educational programs.

- **Subcomponent 1.** The institution maintains a practice of regular program reviews.
- **Subcomponent 2.** The institution evaluates all the credit that it transcribes, including what it awards for experiential learning or other forms of prior learning.
- **Subcomponent 3.** The institution has policies that assure the quality of the credit it accepts in transfer.
- **Subcomponent 4.** The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.
- **Subcomponent 5.** The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
- **Subcomponent 6.** The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).

**Team Determination:** __ Core Component is met
X Core Component is met with concerns
__ Core Component is not met

**Evidence:**

- PCC programs, disciplines, and services participate in a Program and Service Review on a 3-5 year cycle. The year-long process is led by a workgroup composed of faculty and staff from the appropriate discipline or service area. The Student Learning Outcomes Discipline Leader form the appropriate area is also a member of the program review team. To begin the process the workgroup receives and analyzes data on enrollment, grade distribution, degrees per program area and TracDat assessment data. The group then conducts a comprehensive review of curriculum and instruction, enrollment and completion, student learning outcomes, and resources. Occupational programs conduct a labor market survey in addition. After reviewing all reports, the work group does a SWOT analysis, then develops an action plan which outlines 3-5 action steps. The draft action plan is then submitted to a team of administrators for suggestions before the plan is submitted to the Vice President of Instruction or appropriate dean and the Program Services Office. All final action plans are posted on the intranet for access by all college faculty and staff. An examination of several program reviews/action plans, including those for Pharmacy Technology, Clinical Research Coordinator, and Digital Arts and Game Design) by HLC team members demonstrated that, in addition to outlining action steps for each of the programs, the plans provide a chart identifying the linkage between the respective action steps and the specific College Strategic Plan initiative.
• Pima’s Office of Admissions and Records is responsible for transcript evaluation. The general criteria that determine whether PCC might accept credits are: coursework was completed at a regionally accredited institution, student earned at least a C in the course, and the student attended another Arizona community college to fulfill general education requirements. In addition, a transcript evaluation is carried out using various mechanisms such as the statewide Course Equivalency Guide, evaluation of a course syllabus, and review by an appropriate PCC faculty member. The 2014-15 college catalog clearly outlines the policy for transfer of credits into Pima (p. 27).

• PCC follows the PCC District Standard Practice Guide (SPG3101-AA) in the awarding of credit for prior learning as demonstrated by national standardized tests (College-Level Examination Program [CLEP], Advanced Placement [AP], and International Baccalaureate [IB]); challenge exams; military service; professional certifications; and portfolio evaluation. Acceptance of credit earned through portfolio evaluation is at the discretion of the departments/discipline faculty and/or CDAC. Credits earned through portfolio evaluation are not applicable toward completion of the AGEC. This caveat assures that students who receive credit for prior learning complete the general education courses required of all degree-seeking students at PCC.

• PCC accepts transfer credits from regionally accredited institutions of higher learning and only accepts sealed, official transcripts from these institutions. PCC uses tools such as CollegeSource Transfer Evaluation System to assist in determining the accreditation of the transferring institution. PCC accepts international transfer credit via the National Association of Credential Evaluation Services. Military transcripts are accepted according to the following guidelines: a) CCAF transcripts are treated as normal community college transcripts, b) Joint Services Transcripts are accredited by ACE and will be evaluated for training only, c) JST military coursework will be articulated to the current catalog.

• PCC uses the statewide Course Equivalency Guide for evaluation of transfer coursework from in-state, public colleges and universities; this process assures consistency. However, the process for evaluating all other transfer credit is not so clear-cut. PCC staff and faculty report that transcript evaluators review course descriptions in the respective catalog and/or through CollegeSource and “sometimes” refer to an institution’s general education or degree requirement and “may” ask for a course syllabus for additional information or, “if necessary,” ask a faculty member in the discipline to review materials and make a recommendation. HLC Team members recommend that PCC implement a standard process in which faculty in the discipline must review the syllabus (whether the course is a general education or major course) to determine if learner outcomes are aligned prior to posting the course to a student’s academic transcript or adding it to the transfer equivalency tables in Banner. This would standardize the process and assure that credits are consistently reviewed and posted.

• Two entities evaluate the depth, breadth, and rigor of each course – the College Curriculum Council and the relevant College Discipline Area Committee. Course outlines are established to insure consistency in course content and learning objectives no matter the place or delivery of the course. Faculty reported to HLC team members that while the course outlines and Student Learning Outcomes assure consistency in content, “freedom of thought still exists in the classroom.”

• Faculty certification is based on the type(s) of courses a faculty member will teach: instructors must have attained an educational credential a step above the course(s) they will teach. Qualifications of dual enrollment instructors are equivalent to those required of all faculty. HLC team members reviewed a random sample of both adjunct and full-time faculty credentials housed in the Central Office and
verified that the process for determining certification was followed consistently. All faculty whose files were reviewed possessed the appropriate credentials for the course(s) they were teaching.

- As detailed in Criterion 3D(4), faculty and students have access to learning resources on each campus. For example, classrooms are equipped with Smartboards, projectors and WiFi access. IT User Support Services oversees this technology available in over 400 classrooms and offers 24/7 helpdesk service to faculty, students, and staff. Pima’s library services include online access to books and articles and LibGuides for students that were developed by faculty in partnership with librarians.

- Fifteen of PCC’s occupational degree and certificate programs have external accreditations, such as nursing and automotive technology. These accreditations help ensure the quality and currency of the programs. In addition, state boards, such as the Arizona State Board of Nursing, require certain PCC programs to conform to criteria in areas such as curricula, course content, practices, and graduation scores.

- Planning and Institutional Research (PIR) conducts various surveys to evaluate the success of PCC graduates. These include an annual graduate report, a Graduate Exit Survey, graduation information reported to IPEDS, data aggregated for the Voluntary Framework of Accountability, research on student transfers using the Arizona State System for Information on Student Transfers ASSIST), the National Student Clearinghouse, and available employment data.

- According to the 2012-2013 Graduate Report, 3,565 students graduated from PCC in Academic Year 2012-2013. Although this equates to a 3% decrease from the previous year, data from the past three years show a 15% increase in the number of Associate Degrees awarded, rising from 2,282 in 2010-11 to this year’s 2,634. The number of certificates awarded also increased 15% over 2010-11.

- There are concerns about the low graduation, transfer, and success rates as reported in the Student Right to Know Reporting for July 2014: the 2010-2011 graduation rate for full-time students was 6.8%, the transfer rate was 20%, and the success rate (number of graduating and/or transferring students divided by the number of entering students) was 22.9%. Goal 5 of the Chancellor’s Goals, Objectives, and Timelines 2013-14 is “to improve the operational effectiveness of the College guided by data informed and evidence based decision(s).” While there is reference here to a review of student retention and success, there is no specific graduation, transfer, or success rate benchmark by which to measure success. As is the case in many instances, PCC is just beginning the process of utilizing national benchmarking in conjunction with program review, assessment, and student reporting. This failure to set specific benchmarks by which to determine success, along with little evidence of analysis of student retention and graduation date for informed decision-making, is a concern of the HLC Team in this area as well as in others.

- An HLC review of several reports compiled by Planning and Institutional Research, including a graduate exit survey and an annual graduate report, reveals that although there is a great deal of demographic information and degree completion information, data on employability of graduates is not readily available to students, parents, and the public. Similarly, the 2013 Student Progress and Outcomes Report shows that 91% of occupational students at Pima earn an industry recognized credential; however, there is no data identifying the percentage of those students who are either employed with a livable wage or enrolled in further education. The Report notes that “this indicator is in development. It will be incorporated into the Strategic Vision once adjustments have been made to account for disparities in wages across various community college service areas.” This lack of employment data is an additional area of concern in Criterion 4.
• The ASSIST data base allows a way for PCC to determine which students transfer to other Arizona institutions and whether or not they graduate from those institutions. For PCC students who transfer to the University of Arizona, data show that between 65 and 70 percent graduate six years after enrolling at UA.

**Core Component 4B:** The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.

- **Subcomponent 1.** The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.
- **Subcomponent 2.** The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.
- **Subcomponent 3.** The institution uses the information gained from assessment to improve student learning.
- **Subcomponent 4.** The institution’s processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.

**Team Determination:**

- __ Core Component is met
- __ Core Component is met with concerns
- __ Core Component is not met

**Evidence:**

- PCC’s approach to student learning assessment is to ask these basic student learning outcome (SLO) questions: What do we want our students to learn? How do we know they have learned it? How do we capture that information? How do we use that information? How do we share and report that information? (PCC Employee Intranet) All courses, disciplines, and programs have stated student learning outcomes. In addition, there are college-wide stated general education outcomes which cover communication, critical and creative thinking, quantitative and scientific literacy, information literacy, and diverse and global perspectives.

- Discipline leaders are responsible for managing assessment processes. There are 65 discipline leaders who work with the student learning outcomes facilitators and the student learning outcomes task force in carrying out this assessment process: 1) the discipline leader works with faculty in that discipline to choose a student learning outcome to assess, as well as the courses and students to assess. The faculty in that discipline then conduct the assessment, analyze the results, and develop an action plan of 3-5 items slated to improve the program/discipline.

- Co-curricular programs have also developed student-learning outcomes as part of the Student Services Review Process. Co-curricular program outcomes to be developed and measured in 2014-2015 are 1) mandatory assessment preparation, 2) assigned advising, and 3) career and employment services.

- Faculty members assess outcomes using faculty-agreed-upon measures and report results to their discipline leaders who aggregate the information collected and enter the results in TracDat, a software package the college uses for recording and tracking student learning outcomes. To support the implementation of the student learning assessment process, the Office of Planning and Institutional Research has undertaken the following items: created a training program for faculty; recorded outcomes and assessments of outcomes in TracDat; reviewed and analyzed the assessment data; utilized a continuous improvement model for PCC.
• As an example of the process at work at the course level, during the Fall 2012 assessment review process, faculty involved with WRT 100 found two “open loops” – one on grammar and sentence structure proficiency and one on research integration. Through the development of a “correction log” now used in WRT 100, student proficiency in grammar and sentence structure has increased from 67% (pre-intervention) to 89% (post-information). The open loop on research integration remains a work in progress. One intervention improved student proficiency in judging the quality of sources to 90%. However, efforts to improve contextualization and citation in research still have not improved student skill level above 61 -62%. Therefore, a new intervention is being tested Fall 2014 according to email communication from a SLO Discipline leader.

• Interviews with faculty and administrators confirmed that assessment is an ongoing process at PCC and that programs are at various stages in the process; however, improvement is occurring. From January 2013 to April 2014, the number of programs that had fully completed the assessment cycle increased from 6 to 49. Currently, 65 percent of the College’s programs now have successfully completed a full cycle of assessment as defined under the new procedures; an additional 20 percent have completed the assessment, implemented changes and are preparing for the reassessment of the curriculum changes. In isolated cases, data collected has informed improvements in program delivery. For example, the Computer Aided Drafting/Design program has completed the 4 action items that resulted from the 2010 program review. These action items include expanded software offerings, service learning projects, and curriculum review with the aid of the advisory committee. The Program Review Groupings indicate that, by 2015, all occupational, transfer, and academic programs will have completed a program review. Based on numerous stops and starts in PCC’s attempt to establish a culture of assessment and maintain momentum, however, sustained progress in the program review process is an issue. PCC has also started using the results from national benchmarking projects like the Community College Survey of Student Engagement to improve student learning.

• PCC has adopted a continuous improvement model for assessing student learning. The number of faculty participating in the process has grown substantially as a result of several policies to engage faculty in the process. These policies include a Faculty Personnel Policy Statement that formalizes student learning outcomes as a faculty job duty, incorporating student learning outcomes participation into the Professional Progression Plans of full-time faculty, and requiring all programs that lead to an associate degree or certificate to map their courses to program-level outcomes.

• There is a Student Learning Outcomes work group that meets monthly. Planning and Institutional Research has developed a series of Student Learning Outcomes training modules that are offered every semester. These modules include topics like rubric development and use; and closing the loop. However, there has not been sufficient progress in fully implementing the assessment process given the time since it was first noted in 2010 as a challenge. Thus, while not an issue for continued compliance, the time it has taken to fully implement assessment is an issue for concern.

Core Component.

Subcomponent 1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.

Subcomponent 2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.

Subcomponent 3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.
Subcomponent 4. The institution’s processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Team Determination:  
__Core Component is met
_X_Core Component is met with concerns
__Core Component is not met

Evidence:

- The goal for retention set in 2014 is to increase the retention percentage (fall to fall or spring to spring) by 1 percentage point for 5 years running. The persistence goal set in 2014 is to increase by 1% each year for 5 years the rate at which students persist from fall to spring. Starting with 2014-2015, the stated completion goal is to increase completion by 5% above the average of the numbers for years 2010-11, 2011-2012 and 2012-2013. Since these goals have just been set, there are no data to see if they are attainable, especially since enrollment is declining.

The Student Success Indicators webpage posts data for spring and fall 2012 and spring and fall 2013 in these categories: course grades by age, college, course classification, district, general education, instructional delivery, race/ethnicity, gender; and GPA by age, district, race/ethnicity, gender. Course completion and retention data are posted on the webpage for Spring 2013 and Fall 2013. The Office of Planning and Institutional Research also posts mandated IPEDS reports. Data on program completion are collected in the Graduate Report (2011-2012, 2012-2013) by CIP code. There is currently little to no evidence to verify that analysis is taking place and/or that analysis is resulting in improvements to student success. It is difficult to tell how much analysis is being conducted on these forms of collected data, which is an issue of concern.

As part of the Program Review process, PIR provides each discipline group with a dashboard that includes information on enrollment, grades, and student completion. Persistence, retention, and completion metrics are being added Fall 2014. Future plans include providing faculty with these data during program reviews so that individual faculty can develop action plans based on the data. Because critical metrics are just now being added to the dashboards, it is not yet clear what mechanism will be implemented to ensure that the data being added will, in fact, be utilized in program review reports for informed decision making. Thus, this is a further issue of concern for the team.

Student data, including registration data, withdrawal, and end-of-term term data are collected through the Banner system. For analyses, PCC uses Web Intelligence, Crystal Reports, Toad, and Access. The process involves the work of the lead analyst who completes the research, prepares the report, and checks for internal consistency with other studies. There is also a project verifier who checks the report’s source validity, analysis process, calculations, as well as a final review by the Assistant Vice Chancellor. To improve these processes and methodologies, PCC has established an Executive Director of Enrollment Management position, formed an Enrollment Management Standing Committee, and contracted with an external consultant. The goal is to develop an infrastructure to support a comprehensive strategic enrollment management approach at PCC. This undertaking forms one aspect of the new strategic plan. How the new Executive Director, committee members, and outside consultant will work together to move the institution forward in its use of data to improve student persistence, graduation, and employment rates is not clearly articulated and therefore a concern identified by the HLC team.
Team Determination on Criterion Four:

- Criterion is met
- X Criterion is met with concerns
- Criterion is not met

Summary Statement on Criterion:
PCC programs, disciplines, and services participate in a Program and Service Review on a 3-5 year cycle. There is also sufficient evidence that the reviews are used to make changes to the program. The College also has policies and procedures to adequately evaluate transcripts and assist transfer students. PCC uses various databases to successfully track student success after transferring to other institutions.

To support the implementation of the student learning assessment process, the Office of Planning and Institutional Research has undertaken the following items: created a training program for faculty; recorded outcomes and assessments of outcomes in TracDat; reviewed and analyzed the assessment data; utilized a continuous improvement model for PCC. However, as of April 2014, only 65% of the programs had completed an assessment cycle. While there is sufficient evidence of some assessment activity at different levels, with some programs offering more robust and sustained processes than others, over a third of the programs have yet to complete a full assessment cycle. As a result, it is too early to determine the long-term sustainability and effectiveness of the assessment process for making changes to teaching and learning based on thoughtful program review and attention to selection, monitoring and purposeful evaluation of learning outcomes. Previous HLC evaluation team visits to PCC have noted assessment as an ongoing concern and required follow-up monitoring; PCC has successfully responded in previous monitoring reports to those concerns. Due to PCC’s recurring struggle with ongoing assessment and its current probationary status with the HLC, the Team is troubled by the fact that the College’s current outcomes assessment process is not further along in its implementation at this time. While this might not lead to non-compliance, the length of time it has taken to fully implement the assessment process is a cause of concern.

The persistence goal set in 2014 is to increase by 1% each year for 5 years the rate at which students persist from fall to spring. Starting with 2014-2015, the stated completion goal is to increase completion by 5% above the average of the numbers for years 2010-11, 2011-2012 and 2012-2013. Since these goals have just been set, data is not available to see if they are attainable, especially given that enrollment is declining. This raises the concern that the goals could be unrealistic because the institution has not yet implemented a plan to achieve such ambitious goals. In addition, while IR provides programs with enrollment data, grades, and basic student demographic information as part of the program review, it has not added persistence, retention, and completion metrics to the dashboard for each program. PCC plans to add this metrics in Fall 2014. Future plans include providing faculty with these data during program reviews so that individual faculty can develop action plans based on the data. Because critical metrics are just now being added to the dashboards, there has not been enough time to see if or how PCC programs are using this information to make improvements. The addition of an Executive Director of Enrollment Management position, integral to the development of a feasible and strategic enrollment management plan, will be crucial to long-term success in this area.

Given the slow progress on fully implementing the assessment process and what appears to be an unrealistic completion goal, given the lack of an enrollment plan and retention dashboard, the team found that the institution met the criteria with concerns.
CRITERION FIVE: Resources, Planning, and Institutional Effectiveness. The institution’s resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

Core Component 5A: The institution’s resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.

Subcomponent 1. The institution has the fiscal and human resources and physical and technological infrastructure sufficient to support its operations wherever and however programs are delivered.

Subcomponent 2. The institution’s resource allocation process ensures that its educational purposes are not adversely affected by elective resource allocations to other areas or disbursement of revenue to a superordinate entity.

Subcomponent 3. The goals incorporated into mission statements or elaborations of mission statements are realistic in light of the institution’s organization, resources, and opportunities.

Subcomponent 4. The institution’s staff in all areas are appropriately qualified and trained.

Subcomponent 5. The institution has a well-developed process in place for budgeting and for monitoring expense.

Team Determination: __X__ Core Component is met
___ Core Component is met with concerns
___ Core Component is not met

Evidence:

- In December 31, 2013 the Arizona Auditor General issued an opinion that the College’s financial statement presented fairly in all material respects the respective financial position of the business-type activities and discretely presented Pima County Community College in accordance with U.S. generally accepted accounting principles. Further ratings of Moody’s Investor’s Service and Standard and Poor’s were Aa1 and AA, respectively which confirm the College’s management of debt and strong financial position. The college has six campuses.

- The 2013/2014 Statement of Revenues indicates the college received $208 million of revenues versus $214.6 million for expenses that represent a decrease of $6.6 million in its net position. Further, the college has about $222.2 million in assets in all categories. The college is funded by three primary sources that include local property taxes, tuition and fees, and grants. The state support has significantly decreased in recent years. The college is adequately funded to support its fiscal, human resources, and its 1.7 million physical infrastructure that supports its operations and delivery of educational programs.

- As a public community college, PCC does not disburse revenue to any superordinate entity. Thus, a process similar to this does not adversely affect its goals.

- The college utilizes a resource allocation model for distributing funding throughout the district. With the hiring of a new chancellor, the college is guided and better prepared to meet the goals of its constituencies. The college has engaged in a new strategic planning process, an updated set of goals, as well as updated Board and college policies and practices. The 2015 budget allocated funding to restructure the Developmental Education and distance learning.

- In the main faculty and staff appear to be qualified for the myriad positions that exist in the college. In particular, faculty members are certified using district-wide certification standards applied across all locations. Prior to 2002 faculty must possess an Arizona Community College teaching certificate. In
March 2002 the Arizona State Board of Community Colleges divested its responsibility for certifying community college faculty. Therefore, under the oversight of the Provost, Pima established minimum qualifications for courses under classifications of Academic, Developmental, and Occupational/Workforce courses. Minimum standards were established for each of the categories.

- The college has a well-developed resource allocation model that serves as a blueprint for monitoring and controlling ongoing operations and expenses. The model translates funding allocations based on student loading, as well as its strategic plan into itemized and authorized dollars for a particular fiscal year.

**Core Component 5B:** The institution’s governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission.

**Subcomponent 1.** The institution has and employs policies and procedures to engage its internal constituencies—including its governing board, administration, faculty, staff, and students—in the institution’s governance.

**Subcomponent 2.** The governing board is knowledgeable about the institution; it provides oversight for the institution’s financial and academic policies and practices and meets its legal and fiduciary responsibilities.

**Subcomponent 3.** The institution enables the involvement of its administration, faculty, staff, and students in setting academic requirements, policy, and processes through effective structures for contribution and collaborative effort.

**Concerns articulated by the Board of Trustees in its April 2013 action:**

The College did not engage appropriately or collaboratively with faculty and administration when it failed to involve these constituencies meaningfully as it changed its admissions policies over public opposition; this failure was in regard to an important institutional decision with a clear effect on the academic program. Senior administrators had used administrative protocols to curtail discussion among the College’s constituents regarding the proposed policy change.

The College’s Board of Governors had not engaged in regular review and updating of the College’s financial and personnel policies and procedures and had not taken steps to ensure that policies and procedures then in effect in such areas as contracting and sexual harassment were appropriately followed at all levels. Moreover, the College’s Board of Governors had not routinely revised and updated its own policies and procedures and lacked a robust committee structure to provide oversight of human resources or other functional areas of the College. The fact-finding team noted a culture of fear and retribution that pervaded the administration of the College. Finally the fact-finding team, as previously noted, found that the Board of Governors did not act with regard to the former Chancellor after it had become aware of allegations of misconduct. These findings further indicate a situation in which the College failed to have effective structures for consultation and collaboration and failed to exercise leadership effectively.

**Team Determination:**

- Core Component is met
- X Core Component is met with concerns
- Core Component is not met

**Evidence:**

- The Governing Board has put into place systems, policies, processes, and structures to address the concerns about its ability to exercise leadership effectively as articulated by the HLC Board of Trustees.
in its April 2013 action. Recent Board actions have included the inception of a robust committee structure (e.g., Board Finance and Audit Committee; Board Human Resources Advisory Team; College Governance Council); a complete review and revision of Board by-laws, Board policies and related institutional policies facilitated by the American Community College Trustee Association; and the establishment of a formal policy review cycle. Further, an independent Office of Dispute Resolution has been put into place to serve as the single portal for all complaints lodged by employees, students and community members against any Board member or the Chancellor as well as any other employee. Given these and other activities of the institution since its probationary status, it appears that the College has alleviated the finding of non-compliance with this Core Component, but minimally so, thus, coupled with other team findings as described below, leading to a Met with Concerns designation.

- The framework for Board governance is outlined in a revised set of by-laws and Board policies adopted on March 12, 2014. The process was facilitated by an American Association of Community College Trustees consultant as a result of a HLC finding of fact in January 2013 that stated “The College did not engage appropriately or collaboratively with faculty and administration when it failed to engage those constituencies meaningfully as it changed its admissions policies over public objections.” Board Policy 1401 includes a set of three tenets: 1) a commitment to a defined governance model; 2) a climate that emphasizes contribution, cooperation, collaboration, civility, transparency and respect; and 3) engagement of College functional groups to provide input. In addition to this policy Standard Practice Guide SPG-1401/AA adopted on August 28, 2014 implemented a Governance Council that consists of three representatives each from faculty, staff and students embraced enthusiastically by its members, who have stated that they have been empowered to play a meaningful role in the communication and decision-making processes. As observed by one member of the Council and agreed to by all, “We matter. We are part of the team.” Even so, this entity is relatively new and its intended outcomes are to be assessed no later than the first November meeting of each year. At this point it is impractical to think that sufficient time will pass to adequately assess this governance model during November 2014. The next opportunity to assess this approach would be November 2015.

- The January 2013 HLC finding of fact posited “the College’s Board of Governors had not engaged in regular review and updating of the College’s financial and personnel policies and had not taken steps to ensure that policies and procedures were in effect in such areas as contracting and sexual harassment were in effect at all levels. Moreover, the College’s Board of Governors had not routinely revised and updated its own policies and procedures and lack a robust committee structure to provide oversight of human resources or other function areas of the College.” In response the institution hired The Association of Community College Trustees (ACCT) to train the Board on strategies and revision of its policies. This training occurred in September 2013 over all areas appropriate for policy review and formation including but not limited to financial policies, student and employee complaint processes. These policy changes also address in principle the inaction of the Board of Governors with respect to the former Chancellor. sexual harassment, as well as contracting. The Board revised all 12 Bylaws at its November 19, 2013 Study Session and approved them at the December 11, 2013 Special Meeting. Additional revisions were affirmed at their February 4, 2014 meeting. A provision to their Article IX mandated that bylaws be reviewed every three years or more frequently, if needed.

- The Governing Board formed a Finance and Audit Committee and a Human Resource Advisory Team on November 19, 2014 to strengthen Board oversight of College finances and internal controls and human relations. These sub-groups are in their formative stages. Members were appointed to this committee on May 14, 2014 with their initial meeting on July 1, 2014. This committee is also staffed by two members of the Board of Governors. In addition the team noted the formation of an Office of Dispute Resolution under the general supervision of the Internal Auditor in April 2014 to address complaints for students, faculty, staff and the community. The purpose of this office is to investigate the
validity of the particular complaint and resolve the issues. Technology such as the use of EthicsPoint is used to track the progress of these complaints.

- Insofar as a culture of fear that is perceived to exist at this institution, a College Culture Workgroup was created in spring 2013. The Work Group hosted several meetings, forums, and workshops facilitated by a local non-profit that resulted in the *Blueprint for Healing*. This document was presented to both the interim-chancellor and the incoming chancellor in June 2013 recommending three tenants, those being (1) the Chancellor publish a core set of expectations that measureable, (2) the College engage in a systematic process to review and revise policy and procedure, and (3) the College make community outreach and dialogue a priority. The team noted that constituents note that Chancellor Lambert has led a coordinated effort to systematically define the vision, values, goals, and strategic priorities of the institution. During September 2013, the Board of Governors adopted the Chancellor’s Goals, *Objectives and Timelines* document that became the foundation of the College’s strategic planning efforts.

- A formal Meet and Confer group established by BP-4001 revised on September 19, 2000 comprised of College representatives from the various employee groups works to address wage, salary and working condition matters. Memoranda from these meetings are then submitted to the Board of Governors (BOG) for consideration, approval and adoption into policy. For issues on which there is disagreement, either side may present the issue to the BOG for them to determine the appropriate course of action. Ultimate authority for approval of any outcomes of the Meet and Confer group rests with the Board of Governors. Persuasive evidence was not found if this process is consistently being utilized by the Board.

- There are specific Board policies that define the role and scope of faculty in matters related to academics resulting from BP-4001. The Faculty Personnel Policy Statement 2014/2015 contain 12 articles and appendices that cover topics inclusive of work conditions, faculty employment, professional status, compensation, leaves, professional development, transfers, complaints concerning faculty, miscellaneous conditions of employment, retrenchment, and faculty representative group rights. These areas seem both appropriate and followed.

- Board Policy 1502 addresses the structure of the College. Additionally, a team of district and campus administrators are in place to oversee specific responsibilities and a Chancellor’s Cabinet meets every two weeks to review and discuss a variety of topics relevant to Pima’s current and future well-being. Twenty-one standing committees are in place to focus on specific operations within the College. The team notes that committees were being formed since late fall 2013 into late summer 2014. For example, evidence was presented the College Culture Work Group created a plan for healing the institution, and this informed the Chancellor’s goals, as well the College’s strategic plan. At the other extreme the Finance and Audit Committee was recently formed at met only one time prior to the team visit. On balance a number of policies and committees were adopted and/or formed in late spring 2014. A sampling of posted minutes of committees indicated that other than the only recently formed groups, they were functioning appropriately and accomplishing their written stated purposes. Time is needed to see the total efficacy of these committees and sufficient time as not passed to determine their effectiveness at addressing outstanding issues.

- Although a well-defined administrative structure exists, a consistently expressed concern relates to the heretofore rapid turnover in senior administrators, particularly at the level of campus presidents. Consistency of leadership and a stable work environment for faculty and staff are necessary from this point forward. The team noted interim leadership positions such as campus presidents, as well as the interim-director of the Veterans Center, but note the Chancellor has been at Pima Community College for just over a year. While steps were articulated to the team during its site visit to alleviate the turn-
over, it is too soon to assess the impact of the steps. Additionally, the recently formed entities referenced above are pivotal to the institution’s on-going ability to meet this Core Component. Thus, the team concluded that this condition of accreditation is met with concern.

- During the on-site visit the team observed and documented through face to face meetings with key internal constituency groups (ex: Governance Council, campus administrative teams, Staff Council) a climate of openness and inclusiveness to expression of individual perspectives. As stated in the Governance Council and affirmed by all members present, “…our voices are being heard [and respected]”. Additionally, during each campus leadership team meeting members affirmed their leaders and expressed not only a sense of hope, but one of reality that stability of leadership was being restored within the College.

- Evidence exists that strides have been made relative to the heightened engagement of internal and external constituents in the development of a new strategic plan for the College and that the plan is grounded in documented trends across the country and within the state and region relative to the needed work of Pima Community College. Additionally, evidence is present regarding linkages between the planning and resource allocations processes. Yet, there remains the need to document that those linkages are yielding the intended outcomes in the present state of the College and that those linkages will continue to create the ability of the institution to meet the current needs, as well as those yet to be identified, of the constituents served by Pima. Thus, this Core Component is met with concerns.

Core Component 5C: The institution engages in systematic and integrated planning.

Subcomponent 1. The institution allocates its resources in alignment with its mission and priorities.

Subcomponent 2. The institution links its processes for assessment of student learning, evaluation of operations, planning, and budgeting.

Subcomponent 3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.

Subcomponent 4. The institution plans on the basis of a sound understanding of its current capacity. Institutional plans anticipate the possible impact of fluctuations in the institution’s sources of revenue, such as enrollment, the economy, and state support.

Subcomponent 5. Institutional planning anticipates emerging factors, such as technology, demographic shifts, and globalization.

Concerns articulated by the Board of Trustees in its April 2013 action:

The College has not engaged in appropriate systematic and integrated planning. The College’s use of interim and acting administrative leaders and constant turnover in administrative positions led to reports from senior administrators during the fact-finding visit of discontinuity in meeting institutional goals. This administrative instability appears to have made it difficult for the College to engage in the systematic and integrated planning activities required by this Criterion. The fact-finding team noted that the culture of fear and retribution further limited the institution’s ability to engage internal and external constituents in systematic planning. Key stakeholders were not sufficiently involved in the discussion or evaluation of the change in mission and degrees offered.

Team Determination: 

__ Core Component is met
_X Core Component is met with concerns
__ Core Component is not met
Evidence:

- The January 2013 finding of fact by the HLC included in part “The College has not engaged in appropriate systematic and integrated planning. The College’s use of interim and acting administrative leaders and constant turnover in administrative positions led to reports from senior administrators during the fact-finding visit of discontinuity in meeting institutional goals.” In Core Component 5B the team noted evidence of a variety of changes that will hopefully enhance a systematic and integrated planning process. The institution also reaffirmed a number of changes in Core Component 2A in their submission. In sum the Board reaffirmed under the training of (ACCT) their ability to revise and reform their policy tenants. The Chancellor created in conformity with BP-1502 21 standing committees to tackle a broad range of policies that include but are not limited to financial policies, sexual harassment, procurement, as well as the reshaping of the institution’s culture through the development of its Blueprint for Healing which has been folded into their strategic plan.

- A Futures Conference attended by over 200 external and internal constituents has resulted in a 2014-17 Strategic Plan that includes six Strategic Directions and 31 system-wide goals. Following the Futures Conference, the College’s Strategic Planning Committee held a Strategic Planning workshop on March 25-26, 2014 at the East Campus. This committee included approximately 70 individuals including College students, administrators, faculty and staff as well as community members. This committee reviewed the background resources and findings from the Futures Conference to develop the District-wide plan. The culmination of this process was the identification of the College’s six strategic directions and specific goals within each. Each campus has been charged with developing supporting campus plans. The campus plans are works in progress with work unit plans to follow. The draft campus plans have been posted to the website. The development of key performance indicators for the Strategic Plan has not been completed yet, but is key to accurately assessing progress of the 2014-17 plan.

- The College’s Futures Conference held in February 2014 was an opportunity to external and internal constituents to inform the strategic planning documents. However, given the level of community interest in the strategic direction of the college, Pima may want to consider other, additional, alternative modes of input for external constituents to provide more opportunities rather than the one.

- The college’s strategic planning process engages all constituencies to a greater extent than in the past. The Downtown Campus’ Strategic Action Plan contains initiatives to include different stakeholders in the educational process. In the meeting with the Career Technical Advisory Committee, many clearly stated they worked with faculty and staff to enable changes particularly to academic programs.

- PCC has addressed the concerns and has established a strategic planning process and district-wide strategic plan, although the status of the development of plans at the campuses was uneven, with some campuses further in the process than others. Not enough time has transpired to allow for full implementation of the strategic plan and even less to demonstrate outcomes and effectiveness. Many of the vacant or interim positions at the campuses and district are now filled with permanent appointments, which will hopefully provide stability, which can only be assessed once sufficient time has elapsed.

Core Component 5D: The institution works systematically to improve its performance.

Subcomponent 1. The institution develops and documents evidence of performance in its operations.
Subcomponent 2. The institution learns from its operational experience and applies that learning to improve its institutional effectiveness, capabilities, and sustainability, overall and in its component parts.

Team Determination:  

- Core Component is met
- Core Component is met with concerns
- Core Component is not met

Evidence:

- The college recognizes that it could better use data to inform operations, strategic planning, and measure operational performance. It has committed to strengthening the use of data by participating in various surveys and studies but has not yet had time to translate the findings into actionable plans for improvement.

- The college is making efforts to develop a strategic enrollment management plan so that it may more effectively address retention, persistence and completion.

- The draft Institutional Effectiveness plan will provide an effective tool to link student reporting, monitoring of the Strategic Plan, Program Review, assessment of student learning outcomes and national benchmarking. The college should consider how this information could then be used to link these efforts with the budget process.

Team Determination on Criterion Five:

- Criterion is met
- Criterion is met with concerns
- Criterion is not met

Summary Statement on Criterion:

Pima manages its debts well and has a strong financial position. Pima has an established resource allocation model for distributing funding throughout the district. With the hiring of a new chancellor, the college is well guided and better prepared to meet the goals of its constituencies. Although a well-defined administrative structure exists, concern exists regarding the rapid turnover in senior administrators, particularly at the level of campus presidents. In order to ensure consistency of leadership and a stable work environment for faculty and staff from this point forward, this issue must be addressed.

The college engaged in a new strategic planning process that reflects a good-faith effort to include input from its constituencies through such venues as the Futures Conference. However, given the level of community interest in the strategic direction of the college, Pima may want to consider other, additional, alternative modes of input for external constituents to provide more opportunities rather than the one. Further, the Board of Governor did not formally adopt the new strategic plan until after the visit and many of the campus strategic plans are yet to be finalized. Nevertheless, the strategic initiatives contain budget requirements that will be funded.

The link between assessment and budgeting is weak. PCC lacks documented evidence that priorities identified through its assessment of student learning are linked or sufficiently inform the budget process. The establishment of an office of assessment demonstrates an ongoing commitment to the task. However, since the office was not established until recently, it has not had enough time to demonstrate its effectiveness in improving assessment.
The College has an updated set of goals, as well as updated Board and college policies and practices, but these changes still remain recent and lack the test of time to determine their effectiveness. The 2015 budget allocated funding to restructure Developmental Education and distance learning, both areas that require on-going attention and sufficient resources. In particular, given the needs of many of its students and the College’s mission, these areas cannot be ignored or underfunded. Finally, while the college acknowledges the need to improve how it uses data to inform operations, strategic planning, and measure operational performance, PCC still has not fully engaged in the analysis of available data. However, the College has developed a draft Institutional Effectiveness plan to link student reporting, monitoring of the Strategic Plan, Program Review, assessment of student learning outcomes and national benchmarking. The college should consider how this information could then be used to link these efforts with the budget process.

As is the case in other areas, PCC has recently established many of the necessary processes, functions, and structures to improve its use of data, governance, and budgeting. However, these changes are new and lack sufficient time to yield the necessary measurable results to assess their effectiveness.

V. TEAM RECOMMENDATION

A. Affiliation Status

Recommendation: To remove the institution from Probation and place the institution on Notice.

Timing for Next Reaffirmation Evaluation: 2024-25

Rationale: While PCC has made significant progress in addressing the concerns that led to Probation, many of the policies, plans, functions, and structures were recently implemented. These newly implemented policies and procedure demonstrate substantial progress and provide the necessary structures to meet HLC expectations. However, these newly implemented changes are new, with some put into practice just before the team’s visit. The majority of the core components listed above were met with concerns primarily because not enough time has elapsed to provide evidence of the necessary outcomes to determine the long-term viability and effectiveness of these changes. Failure to demonstrate the effectiveness of these changes and sustained progress in these areas can lead to future findings of non-compliance. Thus, the institution should be monitored closely to ensure that these changes are effectively implemented in the long-term, as well as evaluated on an on-going basis.

A year from the time of the Commission’s action will provide the institution sufficient time to obtain the necessary outcomes and evidence to document the effectiveness of these changes, although additional monitoring may be necessary beyond the year. Since the majority of these changes involve new structures, functions, and processes, a focus visit will be necessary for verification and evaluation. The focus visit should expect to see strong patterns of evidence that the new/amended policies, procedures and structures are yielding documentable patterns of evidence that alleviate any concerns regarding past cited issues and the fulfillment of any Core Components; that an internal climate of inclusiveness and trust has been fully restored; and that the expressed concerns of any external groups expressed in the recent past to the HLC have been alleviated.
1. **Criterion-related Monitoring Required (report, focused visit):**

   **Monitoring:** Federal Compliance Monitoring Required (report, focused visit):

   Monitoring: None

   **Rationale:**

   **B. Commission Sanction or Adverse Action**

   The team is recommending that the institution be placed on Notice because the following Core Components are Met with Concerns: (Criterion 1) 1A: The institution’s mission is broadly understood within the institution and guides its operations; 1B: The mission is articulated publicly; 1C: The institution understands the relationship between its mission and the diversity of society; (Criterion 2) 2A: The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows fair and ethical policies and processes for its governing board, administration, faculty, and staff; 2C: The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity; 2D: The institution is committed to freedom of expression and the pursuit of truth in teaching and learning; (Criterion 3) 3A: The institution’s degree programs are appropriate to higher education; 3C: The institution has the faculty and staff needed for effective, high-quality programs and student services; 3D: The institution provides support for student learning and effective teaching; (Criterion 4) 4A: The institution demonstrates responsibility for the quality of its educational programs; 4B: The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning; 4C: The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs; (Criterion 5) 5B: The institution’s governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission; 5C: The institution engages in systematic and integrated planning, and 5D: The institution works systematically to improve its performance. Given the changes yet to be implemented and evaluated, the institution may be at risk of non-compliance of continuing to meet the Commission’s Criteria for Accreditation if it does not aggressively follow-through on changes it plans to make or has already made but has yet to demonstrate their efficacy in resolving the issues identified by the Commission. The institution must demonstrate the ability to follow-through and implement all the initiatives that were presented to the team.

   The team is recommending a focused visit report to occur no later than March 31, 2016 to review the following:

   1. a well-defined, inclusive formal review process of the institution’s mission, including a description of its implementation and resulting outcomes (Criterion 1: A&B);
   2. Evidence of the work of the College Diversity Committee, including, but not limited to the development of strategies to enhance the recruiting, hiring and retention of minorities, women and other protected classes, as well as key metrics and measurable outcomes (Criterion 1: C);
   3. Evidence of the effectiveness of newly adopted policies, processes, and procedures, including but not limited to the effectiveness and outcomes of the newly established Governance Council and Board of Governors' Finance, Board HR Advisory Team, and Audit Committee (Criterion 2: A & 5:A, B);
   4. evidence of a comprehensive assessment of the HR office, including structure and staffing, the resulting action plan, including goals, metrics, and key performance indicators, as well as the outcomes of the recently established HR Advisory Committee, and documentation of progress toward full implementation of the plan (Criterion 2: A);
   5. the number and type of complaints and grievances filed with the Office of Dispute Resolution and the status of each complaint or grievance, as well as a process for assessing the effectiveness of the ODR, including measures and documented outcomes (Criterion 2: A);
   6. evidence that syllabi have specific learning goals, including a process for reviewing syllabi to ensure that they have proper and specific learning goals (Criterion 3: A);
   7. Establishment of a process to coordinate and ensure consistency in the review of dual learning courses and dual training faculty training (Criterion 3: A);
   8. Progress to date of the Developmental Education Task Force and Council, including evidence of its effectiveness and outcomes.
resulting from it, as well as the allocation of sufficient resources to Developmental Education to serve the student population (Criterion 3: D); (9) evidence of the of the effectiveness of the assessment process for making changes to teaching and learning based on the learning outcomes, including documentation of the completion of assessment cycles in all programs and of the changes made to improve learning and teaching (Criterion 4: B); (10) Evidence that persistence, retention, and completion metrics are used for making changes in programs, including metrics, action plans, and improvements made, as well as documentation of the development and implementation of a strategic enrollment plan that addresses retention, persistence, and completion to support the institution’s established goals (Criterion 4: C); (11) evidence of stability in leadership, including campus presidents, and the hiring of key vacant positions, including the director of HR (Criterion 5: B); Evidence of the implementation of the 2014-17 Strategic Plan, including completion of the campus plan, establishment of measurable key performance indicators to assess progress toward completion, and direct linkages to the budgeting process, as well as outcomes to date (Criterion 5: C).

Rationale: While the institution has made significant changes, some of the changes have not been fully implemented. It is essential that the monitoring report demonstrates the effectiveness of these changes and its outcomes, as well as demonstrates that the changes are sustainable. The focus visit should evaluate and verify these changes, in particularly the effectiveness of the new offices, councils, and committees, as well as continued commitment of the institutions to carry out these changes.

VI. EMBEDDED CHANGES IN AFFILIATION STATUS

Did the team review any of the following types of change in the course of its evaluation? Check Yes or No for each type of change.

( ) Yes  ( x ) No  Legal Status
( ) Yes  ( x ) No  Degree Level
( ) Yes  ( x ) No  Program Change
( ) Yes  ( x ) No  Distance or Correspondence Education
( ) Yes  ( x ) No  Contractual or Consortial Arrangements
( ) Yes  ( x ) No  Mission or Student Body
( ) Yes  ( x ) No  Clock or Credit Hour
( ) Yes  ( x ) No  Additional Locations or Campuses
( ) Yes  ( x ) No  Access to Notification
( ) Yes  ( x ) No  Access to Expedited Desk Review
( ) Yes  ( x ) No  Teach-out Arrangement
( ) Yes  ( x ) No  Other Change

VII. ADDITIONAL COMMENTS AND EXPLANATIONS

None
Appendix A

Interactions with Constituencies
Pima Community College Meetings - Attendance Lists
September 15-16, 2014

Governing Board

Board Members – 5 attendees
Board of Governors Secretary (Board of Governors Member)

Board of Governors Finance and Audit Committee

Executive Vice Chancellor of Finance and Administration
Community Representative
Board of Governors Member
5 Community Representatives
Board of Governors Member

Leadership

Chancellor

Assessment Committee

Assistant Vice Chancellor for Academic Services and Vice Provost
Assistant Vice Chancellor of Planning and Institutional Research
Research Project Manager
Director of Program Services
Director of Curriculum and Articulation Services
Writing Faculty East Campus
Math Faculty Downtown Campus
Computer Information Systems Faculty East Campus
Vice President of Instruction West Campus
Vice President of Student Development West Campus

College-Wide Student Leadership Meeting

Student Representative, PCC Governance Council
President, PCC Phi Theta Kappa Chapter
Public Relations Officer, PCC Phi Theta Kappa Chapter
Chair, Honors In Action Committee, PCC Phi Theta Kappa Chapter
President, PCC West Campus Student Government Association
Inter-Campus Council Rep, PCC Northwest Campus Student Government Association
Staff Representative, PCC Aztec Press
Student Representative, PCC Law Enforcement Academy
Student Representative, PCC Fire Science Academy

Community Group Meetings

C-FAIRR Representatives
POAC Representatives

Developmental Education Redesign Committee

Math faculty
ESL faculty
Executive Assistant to the West Campus president
Dean of Adult Education
President-Community Campus
Senior Assistant to the Provost
Provost

Director of Internal Audit

Diversity Committee

East Campus President
Instructional Faculty
2 Student Services Advanced Specialists
Instructional Faculty
Executive Director
Human Research Analyst
Director-Employee Relations
Senior Assistant to the Provost
IT Principle Analyst
Materials Management Specialist

Enrollment Management

Executive Director of Enrollment Management
Vice Chancellor for Institutional Advancement (Acting)
Outreach and Recruiting Program Manager (Acting)

Executive Vice Chancellor of Finance and Administration

Executive Vice Chancellor of Finance and Administration
Director Business Systems
Executive Assistant Finance and Administration
Director of Contracts, Risk Management and Operational Improvements
Director Employee Services Center
Assistant Vice Chancellor of Finance Operations
Director of Purchasing
Director of Student Accounts
Director of Budget and Reporting

Facilities

Vice Chancellor for Facilities
Director, Fiscal and Management Operations
Chief, College Police
Director, Environmental Health and Safety
Facilities Operations and Construction
Superintendent of Operations
2 Facilities Operations Managers
Environmental Program Coordinator
Dispatch Supervisor
Facilities IT Analyst
Manager, Transportation & Support Services
Crew Lead, HVAC
Materials Management Supervisor
Trades Supervisor
Faculty Senate

Librarian (West Campus)
History Faculty (Downtown Campus)
Mathematics Faculty (Desert Vista Campus)
Computer Info Systems/Computer Software Applications Faculty (East Campus)
Computer Aided Drafting Faculty (Downtown Campus)
Business Faculty (Downtown and West Campus)
Spanish Faculty (East Campus)
Social Services Faculty (West Campus)
Counselor (Downtown Campus)
History Faculty (West Campus)
Biology (Desert Vista Campus)
Science and Fitness (Desert Vista Campus)
Art and Humanities (Downtown Campus)
Performing Arts and Music (West Campus)

General Counsel

General Education Committee

Director of Curriculum & Articulation
Arts & Humanities Academic Dean
Biology Faculty
Social Services Faculty
Aviation Technology Faculty
Writing Faculty
Translation Studies Faculty
English as a Second Language Faculty
Librarian, Educational Support Faculty
3 Curriculum Coordinators
History Faculty

Governance Council

Assistant Vice Chancellor
Police Chief
Vice President of Student Development
General Counsel
Campus President
Educational Support Faculty Librarian
Adjunct Faculty
Laboratory Specialist
Laboratory Supervisor
Student Services Advanced Specialist
Student

Higher Learning Commission Forum

9 attendees

Human Resources Advisory Team

Advisory Team Members
Human Resources Leadership Team

East Campus President
Director-EEO/Affirmative Action & ADA
2 Directors
Director-Employee Relations & Policies
Director-Records & Research, Talent Acquisition
General Counsel

Institutional Climate Steering Group

East Campus President
Educational Support Faculty Librarian
Educational Support Faculty Counselor
Instructional Faculty
Adjunct Faculty
Media Designer-Professional Development
Advanced Program Coordinator
Student Services Advanced Specialist
Support Specialist
Vice Chancellor-Facilities
Our Family Services

IT

Interim Vice Chancellor
IT Supervisor User Support Services
IT Principle Analyst User Support Services
IT Systems Architect IT Technical Services
Director Development Services
Director Technical Services
Director IT Network Services
IT Manager

Marketing and Communications

Lead Marketing Coordinator
Director, Web Systems
Executive Director, Communications
Program Manager, Media and Publications
Executive Director, Enrollment Management
Marketing Manager, Communications
2 Marketing Coordinators
VC for IA (Acting)
Marketing & PR Coordinator

Office of Advancement

Lead Marketing Coordinator
Director, Web Systems
Executive Director, Foundation
Executive Director, Communications
Program Manager, Media and Publications
Executive Director, Enrollment Management

Office of Dispute Resolution
Director of Internal Audit
Director of Office of Dispute Resolution
Investigator Office of Dispute Resolution

**Online Committee**

Executive Vice Chancellor of Finance and Administration
Dean of Online Development (Acting)
History Faculty (Downtown Campus)
Provost and Executive Vice Chancellor for Academic and Student Services
Vice President of Student Development (Community Campus)
Dean of Business, Science and Occupation (east Campus)

**Project Management Team**

Assistant Vice Chancellor for Academic Services and Vice Provost
Executive Director of Enrollment Management
Vice Chancellor for Institutional Advancement (Acting)
Vice President of Instruction (West Campus)
Assistant Vice Chancellor of Planning and Institutional Research
Senior Assistant to the Provost
Humanities Faculty (West Campus)
Government Relations Advanced Analyst
Advanced Program Manager Provost Office
VP of Student Development (NW Campus)

**Staff Council**

Curriculum Coordinator
Fiscal Advanced Analyst
Program Coordinator Early Childhood Education
Laboratory Supervisor
Support Specialist
IT Principal Analyst
Director Fiscal and Management Operations
Assistant Program Manager Adult Education Services
Senior Buyer
Advanced Program Manager Student Services
IT Analyst
Student Services Advanced Specialist

**Steering Committee**

Director Center for Training and Development
President (West Campus)
Advanced Fiscal Analyst
Biology Faculty (Downtown Campus)
Advanced program Manager Instruction (Downtown Campus)
President (East Campus)
Vice President of Instruction (Acting) Northwest Campus
Director Web Systems
Director Library Technical Services
Laboratory Supervisor (West Campus)
Advanced Program Manager
Vice Chancellor of Institutional Advancement (Acting)
Advanced Program Manager Program Services
Advanced Program Manager President’s Office (Desert Vista Campus)
Laboratory Supervisor (Northwest Campus)
Vice President of Instruction (West Campus)
Humanities Faculty (West Campus)
Research Program Manager
Advanced Program Manager Instruction (Northwest Campus)
Assistant Vice Chancellor Planning and Institutional Research
Advanced Program Manager Student Services (West Campus)
Vice President of Instruction (Desert Vista Campus)
Academic Dean
Executive Director of Enrollment Management
Vice President of Student Services
Assistant Vice Chancellor
Vice President of Instruction (East Campus)

**Strategic Planning**

Board of Governors Member
4 Community Members
Vice Chancellor for Facilities
Assistant Vice Chancellor of Planning and Institutional Research
Research Project Manager
Vice President of Instruction (Downtown Campus)
President Downtown Campus (Acting)
Humanities Faculty (West Campus)
Biology Faculty (Downtown Campus)
Assistant Vice Chancellor for Pima Community College Foundation
Advanced Program Manager Instruction (Northwest Campus)
History and Political Science Faculty (Northwest Campus)
Executive Director for Media and Public Relations
Facilities IT Analyst
Reading Faculty (West Campus)
Writing Faculty (Downtown Campus)
Executive Director of Enrollment Management
Vice Chancellor for Institutional Advancement (Acting)
Assistant Vice Chancellor for Academic Services and Vice Provost
Outreach and Recruiting Program Manager (Acting)
Vice President of Instruction (Acting) Northwest Campus
Laboratory Supervisor
Advanced Program Manager, Teacher Education Program-Community Campus

**MULTI-CAMPUS VISITS**

**Community Campus: Leadership Team**

President
Dean of Online Development (Acting)
Academic Dean
Dean of Adult Education
Vice President of Student Development
Community Campus: Faculty

Faculty, Dept. Chair Online Sciences
Faculty, Dept. Chair Arts & Comm.
Counselor
Faculty, Writing
Faculty, Dept. Chair Teacher Ed.
Faculty, Post-Degree Teacher Ed.
Faculty, Post-Degree Teacher Ed.
Faculty, Math

Community Campus: Career & Technical Advisory

2 U.S. Border Patrol
2 Tucson Fire Department
Carondelet Health Network

Community Campus: Learning Support (On-Line/Resources)

Program Manager
Student Services Advisor
Student Services Program Manager
Student Services Advanced Specialist
Student Services Specialist
Education Support Faculty Counselor
4 Instructional Designer
Advanced Program Manager

Desert Vista Campus: Leadership Team

Campus President
Vice President of Instruction
Vice President of Student Development
Academic Dean
Advanced Program Manager
Director of CTD/HPOG
Director of Administrative Services

Desert Vista Campus: Career & Technical Advisory

El Rio Health Center
NextCare
University of Arizona Medical Center, South Campus, Kino Hospital
JobPath
Aclivity Staffing
Arizona Inn and Arts Institute
Ice Tea Carvings
Zona 78 Properties
Pascua Yaqui TANF
Pascua Yaqui Education Division
Pima County Superintendent of Public Schools

Desert Vista Campus: Library/Learning Center/Tutors

Program Manager Academic Services
Advanced Program Manager, Adult Ed
Advanced Program Coordinator Learning Center
Writing Lab Specialist
Math Lab Specialist
Math Tutor
Staff Instructor-CTD/Tutor
2 Educational Support Faculty Librarians

Desert Vista Campus: Student Forum

Students – 8 attendees

Desert Vista Campus: Faculty

Faculty representing: Counseling, Student Success, Biology, Culinary Arts, Chemistry, ESL and Center for Training and Development

Downtown Campus: Leadership Team

Campus President
Vice President of Instruction
Vice President of Student Development
2 Academic Deans
Director of Admin Services
Advanced Program Manager
Support Coordinator

Downtown Campus: Career & Technical Advisory

JTED (BCT/CAD)
Pima County Clerk of the Superior Court
TechSolve
Mesch, Clark & Rothschild
Novak Environmental
Old Pueblo Medical
Style by Design
Santa Rita High School-TUSD
Texas Instruments
Buffalo Exchange
Watson Chevrolet
Solar Institute
Cypress Civil Development
Acclivity HealthCare
Pima County One-Stop
AECOM Transportation
Industrial Tool, Die and Engineering
Haralson, Miller, Pitt, Feldman & McAnally
A La Carte Translation
Jerome E. McGetrick & Associates
British Car Services/JTED
Seligman & Company
M3 Engineering & Technology Corporation
CAID
Pima County Superior Court
Stantec Consulting

Downtown Campus: Learning Center and Tutors

Learning Center Coordinator
ESL/Russian Tutor
Lab Technician
ESL/Reading Tutor
Accounting Tutor

**Downtown Campus: Library**

3 Educational Support Faculty Librarians
Library Services Technician
Library Director

**East Campus: Leadership Team**

President
Vice President of Instruction
Academic Dean
Director of Administrative Services
Advanced Program Manager (Acting)
Student Services Program Manager

**East Campus: Library/Learning Center/Tutors**

Educational Support Faculty Librarian
2 Library Services Specialists
Learning Center Coordinator
Tutor

**East Campus: Career & Technical Advisory**

Veterinary Tech program
2 Logistics & Supply Chain Management program
2 Pharmacy Tech program

**East Campus: Student Forum**

Students – 9 attendees

**East Campus: Faculty**

Faculty representing: Writing, Reading, Computer, Psychology, Vet Tech, Philosophy/Religion, EMT, Administration of Justice, Chemistry, Microbiology, Counseling, Math and Biology

**Northwest Campus: Leadership Team**

President
Vice President of Instruction (Acting)
Vice President of Student Development
Academic Dean (Acting)
Director of Administrative Services
Advanced Program Manager

**Northwest Campus: Library/Learning Center/Tutors**

Library Director
Advanced Program Manager
Educational Support Faculty Librarian
Program Manager
Support Specialist
3 Support Technicians
3 Tutors

**Northwest Campus: Career & Technical Advisory**

2 Clinical Research Coordinator s
3 Therapeutic Massage
3 Hotel & Restaurant Management  
PCC Dept. Chair of Bus & Prof

Northwest Campus: Learning Support

Staff, Student Services
Staff, Post Degree Teacher Certification
6 Staff, Center for Learning Technology
Staff, Producer/Director
Staff, Support Specialist, Teacher Ed. Dept.
Staff, Program Coordinator, Teacher Ed. Dept.
Staff, Advanced Program Coordinator, Adult Ed.

Northwest Campus - Faculty

Faculty – 13 attendees

Northwest Campus - Students

Students – 28 attendees

West Campus: Leadership Team

Campus President
Vice President of Instruction
Vice President of Student Development
Academic Dean of Business, Computers, World Languages, Social & Behavior Sciences, Fitness & Sports Sciences
Acting Academic Dean of Arts, Communications & Humanities
Acting Academic Dean of Science, Technology, Engineering & Mathematics
Assistant Dean of Nursing/Director
Advanced Program Manager Instructional Services
Advanced Program Manager Student Services
Director of Administrative Services
Executive Assistant to Campus President

West Campus: Learning Center and Tutors

Learning Center Director
Lab Specialist, Math
Lab Technician
Computer Commons Coordinator
2 Lab Specialists
5 Tutors

West Campus: Library

3 Educational Support Faculty Librarians
3 Library Services Specialists

West Campus: Nursing

Director and Assistant Dean
7 Instructional Faculty

West Campus: Career & Technical Advisory

4 attendees
Appendix B
Principal Documents, Materials, and Web Pages Reviewed

2013 Noel Levitz Employee Satisfaction Survey Results
2013-14 Chancellor’s Goals and Objectives
2014-15 Chancellor’s Goals, Objectives and Timelines
2014-17 Draft Campus Strategic Plans
2014-17 Strategic Plan
Accreditation Information on Website: www.pima.edu/about-pima/accreditation/index.html.
Additional strategic planning documents provided during visit.
Administrative Personnel Policy Statement 13-14
Administrative Services web page and links
AGEC
Annual Institutional Effectiveness Plan July 2014
Annual Leadership Assessment Form 2013
Archive of College Plans webpage
Arizona Revised Statues ARS 15-1461
Arizona Revised Statues ARS 42-17051
Assessment website
Blueprint.for.healing.pdf
Board agenda standing items
Board Bylaws
Board Committees webpage
Board meeting and study session minutes: 9/18/13; 10/17/13; 11/7/13; 11/19/13; 12/2/13; 12/16/13; 3/3/14; 4/16/14; 5/14/14; 7/9/14; 7/2/14; 7/29/14; and 8/13/14
Board of Governors Finance and Audit Committee webpage 2014
Board of Governors Minutes 2011-2014
Board of Governors webpage
Board Policies (all)
Board Priorities for the College webpage
Board Roles and Processes
Board training and development records: 7/25/12; 9/14/13; 9/18/13
Board web page and links, including Board Roles and Processes; Board of Governors membership and contact information; PCC Board of Governors meeting calendar from Jan 2014 – Sept 2014
Board’s College Priorities
BP 1101 Prime Policy
BP 1103 Delegation of Authority to the Chancellor
BP 1401 Governance
BP 1502 College Organization
BP 2402 Audits
BP 2403 Budget Control
BP 2404 Approval of In House Capital Improvements Projects
BP 2405 Interfund Loans
BP 2409 Risk Management
BP 2411 Warrants and Disbursements
BP 2412 College Travel Expense
BP 2602 Disposition of Equipment and Personal Property and Supplies
BP 3015 Curriculum Board Policy
BP 3101 Assessment of Credit for Prior Learning
BP 3103 Attendance
BP 3104 Catalog
BP 3105 Curriculum
BP 3108 Grading
BP 3109 Honors
BP 3110 Student Classification and Standing
BP 3111 Transfer Student and Credit
BP 3113 Class Orientation
BP 3114 Developmental Education/College Preparatory Programs
BP 3115 International Education
BP 3116 Educational Contract Training and Services
BP 3117 General Education
BP 3118 Access to Learning
BP 3122 Academic Advising
BP 3201 Occupational Program External Advisory Committees
BP 3202 Course Materials
BP 4001 Meet and Confer with Employee Representatives
BP 4101 Employment and Reassignment of Executive Level Administrators
BP 4102 Appoint of Acting Administrators
BP 5601 Institutional Research
BP 5702 Information Technology Resource Management
Brief Summaries of Documents Used to Determining Strategic Planning Directions 2014
Capital Budget and Project List Fiscal Year 2015
Certification Standards Webpage
Chancellor’s Cabinet Webpage
Chancellor's Cabinet Minutes 2012-2014
Chancellors Goals, Objectives Timelines 2013-2014
College Budget webpage
College Catalog 2014-15
College Committee Structure 2014-15 and Faculty and Staff Governance Bodies: 7/1/14
College Mission webpage
Community Perceptions Survey 2014
Computing Resources webpage
Course Content Forms (random sample)
D2L Migration Request Form webpage 2014
Department Chair Evaluation Form
District Standards Practice Guide
Documents provided regarding direct appointments between 7/1/2013-9/17/2014 including forms documenting Business Case for Non-Competitive Placement
Downtown Campus Strategic Action Plan
Dual Enrollment Handbook
Economic Contribution of PCC
Employee Grievance Policy
EthicsPoint FAQs for PCC Employees
EthicsPoint Investigations Protocol May 2013
Exempt Annual Job Expectations Form 2007
Exempt Personnel Policy Statement 2013-2014
Expectations for Successful Leadership
External Complaints
Faculty and Staff Handbooks, including adjunct handbook
Faculty Annual Collegial Conference and Evaluation
Faculty Personnel Policy 2013-2014
*Faculty Personnel Policy Statement*
Faculty Senate Minutes
Faculty Senate webpage
Federal Reporting webpage
Finance webpage
Financial Audit Division: Report on Internal Control and Compliance
Financial Reports webpage
Fiscal Year 2014-2015 Budget Update
Fiscal Year 2014-2015 Proposed Budget
Fiscal Year 2015 Proposed Budget, Tax Rate and Tax Levy
Futures Conference Board Presentation
Futures Conference Brief Summary
FY 2014 Audit Plan: Office of the Auditor
Governance Council Agenda: 9/8/14
Governance Council minutes: 4/10/14
Governance Council webpage
Grievance Procedure
HLC Self-Study Steering Committees
HLC communication and complaints
Information Technology Capital Project Proposal 2015-2016
Information Technology Contact Us webpage
Institutional Effectiveness Plan
Letter from Property Tax Oversight Commission 2013
National Benchmarking Studies webpage
New Employee Orientation webpage
New Financial Statement format
News Releases Findings from Employee Satisfaction Survey news release 2014
Noel Levitz Employee Satisfaction Survey
Noel-Levitz College Employee Satisfaction Survey 2013 Executive Summary
Non Exempt Personnel Policy Statement 2013-2014
Non-Competitive Awards of Top 40 Awards
Noncompetitive Purchase Form Information and Instructions
Noncompetitive Purchase Request Form
Office of Dispute Resolution Summary of Activity: 7/21/14-9/12/14
One Year and Five Year Percent Changes in State Support
Online Courses via Online Course Management System (Selected)
OPD Utilization Report April 1 to June 30. 2013
Operation and Status of Policies document: 6/16/14 (provided by Sylvia Lee on 9/17/14)
Organizational Effectiveness and Development (OED) – Sexual Harassment Training overview: 9/16/14
Other Reports webpage
Pathways to Healthcare Program webpage
PCC Organizational Chart
PCC Strategic Plan 2014-2017
Peer Institution List
Personnel Policy Statement for College Employees (Common) 2013-2014
Personnel Policy Statement for College Employees 2014-15
Pima website (including sub-sections on accreditation, programs, faculty, cost, etc.)
Planning Process Participation for the New Science Building G at Northwest Campus
Priorities for the College approved by the Board on 11/11/13
Program Review Data Changes
Program Reviews
Proposal for the Office of Assessment
Public Meeting Notices webpage 2014
Purchasing Award Justification Award Form
Purchasing Award Justification FY14
Purchasing Procedures Manual: Administered by the District Office -- Purchasing
Random selection of 10 HR files documenting instructor credentials (full-time faculty)
Reasons for Direct Appointments
Recommendations of the Adjunct Faculty Task Force and Temporary Employees Task Force 2014
Report to the Community
Request for Proposal Enrollment Management Consultant 2013
RG-2402/A Internal Audit Regulation
RG-3001/A - Faculty Standards and Qualifications
Safety and Security Update April 2014
Self-Study and Fast Action Committee Memberships, charges, and structure
Social Media and Mobile webpage 2014
SPC 4201/BB – Faculty Hiring Process
SPG 1501/AA - Procedure for Complaints of Discrimination, Harassment and Retaliation
SPG 1501/AC - Americans with Disability Act Reasonable Accommodation Guideline for Employees/Applicants
SPG 1502/BA - Cyclical Review of Job Classification
SPG 3105/DA Program and Service Review
SPG 4201/BA - Filling Authorized, Vacant, Regular, Staff and Administrator Positions
SPG 4201/BB Faculty Hiring Process
Staff Council webpage
Standard Purchase Order Terms and Conditions 2013
Standing Committee charges, membership and meeting schedule
State of Arizona Office of the Auditor General
Strategic Plan 2014-2017 -- Presentation for the Board July 2014
Strategic Planning Committee Membership 2014
Strategic Planning webpage 2014
Student Learning Outcomes Discipline Leader Handbook
Student Tuition and College Finances for Fiscal Year 2015
Student webpage and links, including Student Code of Conduct
Syllabi from the following on-ground courses: HIS 114, CIS 100, GAM 101, NRS 202, MUS 102
ACC 100, WRT 101, PSY/SOC 215, ACC 215 syllabus (online only)
Technology Standards FY14
Vendor Spend Analysis FY14
Veterans Services: Update to the PCC Board of Governors from the Provost's Office
Voluntary Framework of Accountability and the 2020 Vision 2014
Working Groups purposes and contact information
## Appendix C
### Federal Compliance Worksheet

### Federal Compliance Worksheet for Evaluation Teams

Effective September 1, 2013 – August 31, 2014

## Evaluation of Federal Compliance Components

The team reviews each item identified in the Federal Compliance Guide and documents its findings in the appropriate spaces below. Teams should expect institutions to address these requirements with brief narrative responses and provide supporting documentation, where necessary. Generally, if the team finds in the course of this review that there are substantive issues related to the institution’s ability to fulfill the Criteria for Accreditation, such issues should be raised in appropriate sections of the Assurance Section of the Team Report or highlighted as such in the appropriate AQIP Quality Checkup Report.

This worksheet outlines the information the team should review in relation to the federal requirements and provides spaces for the team’s conclusions in relation to each requirement. The team should refer to the Federal Compliance Guide for Institutions and Evaluation Teams in completing this worksheet. The Guide identifies applicable Commission policies and an explanation of each requirement. The worksheet becomes an appendix to the team’s report. If the team recommends monitoring on a Federal Compliance requirement in the form of a report or focused visit, it should be included in the Federal Compliance monitoring sections below and added to the appropriate section in the team report template.

### Institution under review: Pima Community College

#### Assignment of Credits, Program Length, and Tuition

*Address this requirement by completing the “Team Worksheet for Evaluating an Institution’s Assignment of Credit Hours and on Clock Hours” in the Appendix at the end of this document.*

#### Institutional Records of Student Complaints

*The institution has documented a process in place for addressing student complaints and appears to be systematically processing such complaints as evidenced by the data on student complaints since the last comprehensive evaluation.*

1. Review the process that the institution uses to manage complaints as well as the history of complaints received and processed with a particular focus in that history on the past three or four years.

2. Determine whether the institution has a process to review and resolve complaints in a timely manner.

3. Verify that the evidence shows that the institution can, and does, follow this process and that it is able to integrate any relevant findings from this process into its review and planning processes.

4. Advise the institution of any improvements that might be appropriate.
5. Consider whether the record of student complaints indicates any pattern of complaints or otherwise raises concerns about the institution’s compliance with the Criteria for Accreditation or Assumed Practices.

6. Check the appropriate response that reflects the team’s conclusions:

   _X_  The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

   ___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

   ___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

   ___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: None.

Additional monitoring, if any: None.

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**Publication of Transfer Policies**

_The institution has demonstrated it is appropriately disclosing its transfer policies to students and to the public. Policies contain information about the criteria the institution uses to make transfer decisions._

1. Review the institution’s transfer policies.

2. Review any articulation agreements the institution has in place, including articulation agreements at the institution level and program-specific articulation agreements.

3. Consider where the institution discloses these policies (e.g., in its catalog, on its web site) and how easily current and prospective students can access that information.

   Determine whether the disclosed information clearly explains the criteria the institution uses to make transfer decisions and any articulation arrangements the institution has with other institutions. Note whether the institution appropriately lists its articulation agreements with other institutions on its website or elsewhere. The information the institution provides should include any program-specific articulation agreements in place and should clearly identify program-specific articulation agreements as such. Also, the information the institution provides should include whether the articulation agreement anticipates that the institution under Commission review: 1) accepts credit from the other institution(s) in the articulation agreement; 2) sends credits to the other institution(s) in the articulation agreements that it accepts; or 3) both offers and accepts credits with the other institution(s).

4. Check the appropriate response that reflects the team’s conclusions:

   _X_  The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

   ___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

   ___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

   ___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).
Practices for Verification of Student Identity

The institution has demonstrated that it verifies the identity of students who participate in courses or programs provided to the student through distance or correspondence education and appropriately discloses additional fees related to verification to students and to protect their privacy.

1. Determine how the institution verifies that the student who enrolls in a course is the same student who submits assignments, takes exams, and earns a final grade. The team should ensure that the institution’s approach respects student privacy.

2. Check that any fees related to verification and not included in tuition are explained to the students prior to enrollment in distance courses (e.g., a proctoring fee paid by students on the day of the proctored exam).

3. Check the appropriate response that reflects the team’s conclusions:
   - X_ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.
   - ___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.
   - ___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.
   - ___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: None.
Additional monitoring, if any: None.

Title IV Program Responsibilities

The institution has presented evidence on the required components of the Title IV Program.

This requirement has several components the institution and team must address:

- **General Program Requirements.** The institution has provided the Commission with information about the fulfillment of its Title IV program responsibilities, particularly findings from any review activities by the Department of Education. It has, as necessary, addressed any issues the Department raised regarding the institution’s fulfillment of its responsibilities in this area.

- **Financial Responsibility Requirements.** The institution has provided the Commission with information about the Department’s review of composite ratios and financial audits. It has, as necessary, addressed any issues the Department raised regarding the institution’s fulfillment of its responsibilities in this area. (Note that the team should also be commenting under Criterion Five if an institution has significant issues with financial responsibility as demonstrated through ratios that are below acceptable levels or other financial responsibility findings by its auditor.)
- **Default Rates.** The institution has provided the Commission with information about its three year default rate. It has a responsible program to work with students to minimize default rates. It has, as necessary, addressed any issues the Department raised regarding the institution’s fulfillment of its responsibilities in this area. Note for 2012 and thereafter institutions and teams should be using the three-year default rate based on revised default rate data published by the Department in September 2012; if the institution does not provide the default rate for three years leading up to the comprehensive evaluation visit, the team should contact Commission staff.

- **Campus Crime Information, Athletic Participation and Financial Aid, and Related Disclosures.** The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution’s policies and practices for ensuring compliance with these regulations.

- **Student Right to Know.** The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution’s policies and practices for ensuring compliance with these regulations. The disclosures are accurate and provide appropriate information to students. (Note that the team should also be commenting under Criterion One if the team determines that disclosures are not accurate or appropriate.)

- **Satisfactory Academic Progress and Attendance.** The institution has provided the Commission with information about policies and practices for ensuring compliance with these regulations. The institution has demonstrated that the policies and practices meet state or federal requirements and that the institution is appropriately applying these policies and practices to students. In most cases, teams should verify that these policies exist and are available to students, typically in the course catalog or student handbook. Note that the Commission does not necessarily require that the institution take attendance but does anticipate that institutional attendance policies will provide information to students about attendance at the institution.

- **Contractual Relationships.** The institution has presented a list of its contractual relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for contractual relationships. (If the team learns that the institution has a contractual relationship that may require Commission approval and has not received Commission approval the team must require that the institution complete and file the change request form as soon as possible. The team should direct the institution to review the Contractual Change Application on the Commission’s web site for more information.)

- **Consortial Relationships.** The institution has presented a list of its consortial relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for consortial relationships. (If the team learns that the institution has a consortial relationship that may require Commission approval and has not received Commission approval the team must require that the institution complete and file the form as soon as possible. The team should direct the institution to review the Consortial Change Application on the Commission’s web site for more information.)

1. Review all of the information that the institution discloses having to do with its Title IV program responsibilities.
2. Determine whether the Department has raised any issues related to the institution’s compliance or whether the institution’s auditor in the A-133 has raised any issues about the institution’s compliance as well as look to see how carefully and effectively the institution handles its Title IV responsibilities.
3. If an institution has been cited or is not handling these responsibilities effectively, indicate that finding within the federal compliance portion of the team report and whether the institution appears to be moving forward with corrective action that the Department has determined to be appropriate.
4. If issues have been raised with the institution’s compliance, decide whether these issues relate to the institution’s ability to satisfy the Criteria for Accreditation, particularly with regard to whether its disclosures to students are candid and complete and demonstrate appropriate integrity (Core Component 2.A and 2.B).
5. Check the appropriate response that reflects the team’s conclusions:

_X_  The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: Of the findings cited in the 2013 A-133 Audit Report, all findings have either been fully resolved or have an appropriate corrective action plan in place.

Additional monitoring, if any: None.

Required Information for Students and the Public

1. Verify that the institution publishes fair, accurate, and complete information on the following topics: the calendar, grading, admissions, academic program requirements, tuition and fees, and refund policies.

2. Check the appropriate response that reflects the team’s conclusions:

_X_  The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: None.

Additional monitoring, if any: None.

Advertising and Recruitment Materials and Other Public Information

The institution has documented that it provides accurate, timely and appropriately detailed information to current and prospective students and the public about its accreditation status with the Commission and other agencies as well as about its programs, locations and policies.

1. Review the institution’s disclosure about its accreditation status with the Commission to determine whether the information it provides is accurate and complete, appropriately formatted and contains the Commission’s web address.
2. Review institutional disclosures about its relationship with other accrediting agencies for accuracy and for appropriate consumer information, particularly regarding the link between specialized/professional accreditation and the licensure necessary for employment in many professional or specialized areas.

3. Review the institution’s catalog, brochures, recruiting materials, and information provided by the institution’s advisors or counselors to determine whether the institution provides accurate information to current and prospective students about its accreditation, placement or licensure, program requirements, etc.

4. Check the appropriate response that reflects the team’s conclusions:

   _X_ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

   ___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

   ___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

   ___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

   Comments: Reviews of college catalog, website, and other promotional materials demonstrates consistency and accuracy in accreditation information for both the college and the program levels.

   Additional monitoring, if any: None.

**Review of Student Outcome Data**

1. Review the student outcome data the institution collects to determine whether it is appropriate and sufficient based on the kinds of academic programs it offers and the students it serves.

2. Determine whether the institution uses this information effectively to make decisions about academic programs and requirements and to determine its effectiveness in achieving its educational objectives.

3. Check the appropriate response that reflects the team’s conclusions:

   _X_ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

   ___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

   ___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

   ___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

   Comments: None.

   Additional monitoring, if any: None.

**Standing with State and Other Accrediting Agencies**
The institution has documented that it discloses accurately to the public and the Commission its relationship with any other specialized, professional or institutional accreditor and with all governing or coordinating bodies in states in which the institution may have a presence.

The team has considered any potential implications for accreditation by the Higher Learning Commission of sanction or loss of status by the institution with any other accrediting agency or loss of authorization in any state.

Important note: If the team is recommending initial or continued status, and the institution is now or has been in the past five years under sanction or show-cause with, or has received an adverse action (i.e., withdrawal, suspension, denial, or termination) from, any other federally recognized specialized or institutional accreditor or a state entity, then the team must explain the sanction or adverse action of the other agency in the body of the Assurance Section of the Team Report and provide its rationale for recommending Commission status in light of this action. In addition, the team must contact the staff liaison immediately if it learns that the institution is at risk of losing its degree authorization or lacks such authorization in any state in which the institution meets state presence requirements.

1. Review the information, particularly any information that indicates the institution is under sanction or show-cause or has had its status with any agency suspended, revoked, or terminated, as well as the reasons for such actions.

2. Determine whether this information provides any indication about the institution’s capacity to meet the Commission’s Criteria for Accreditation. Should the team learn that the institution is at risk of losing, or has lost, its degree or program authorization in any state in which it meets state presence requirements, it should contact the Commission staff liaison immediately.

3. Check the appropriate response that reflects the team’s conclusions:

   _X_ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.

   ___ The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.

   ___ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.

   ___ The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: None.

Additional monitoring, if any: None.

Public Notification of Opportunity to Comment

The institution has made an appropriate and timely effort to solicit third party comments. The team has evaluated any comments received and completed any necessary follow-up on issues raised in these comments. Note that if the team has determined that any issues raised by third-party comment relate to the team’s review of the institution’s compliance with the Criteria for Accreditation, it must discuss this information and its analysis in the body of the Assurance Section of the Team Report.

1. Review information about the public disclosure of the upcoming visit, including sample announcements, to determine whether the institution made an appropriate and timely effort to notify the public and seek comments.
2. Evaluate the comments to determine whether the team needs to follow-up on any issues through its interviews and review of documentation during the visit process.

3. Check the appropriate response that reflects the team’s conclusions:
   
   _X_  The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements.
   
   ___  The team has reviewed this component of federal compliance and has found the institution to meet the Commission’s requirements but recommends Commission follow-up.
   
   ___  The team has reviewed this component of federal compliance and has found the institution not to meet the Commission’s requirements and recommends Commission follow-up.
   
   ___  The team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: None.

Additional monitoring, if any: None.

Institutional Materials Related to Federal Compliance Reviewed by the Team

Provide a list materials reviewed here:

- 2014-2015 College Catalog: Accreditation, p.6
- 2014-2015 College Catalog: Transfer of Credits into Pima CC, p.27
- ACC 100, WRT 101, PSY/SOC 215 syllabi in both online and on ground format; HIS 114, CIS 100, GAM 101, NRS 202, MUS 102 (on ground only); ACC 215 (online only)
- Accreditation: https://www.pima.edu/about-pima/accreditation/
- Additional Fees: https://www.pima.edu/paying-for-school/costs/fees.html
- Arizona Board of Regents, Policy Manual, Chapter 2: Academic Policies
- Arizona Department of Education
- Arizona Department of Health Services
- Arizona Medical Radiologic Technology Board of Examiners (MRTBE)
- Arizona Peace Officer Standards & Training Board (AZPOST)
- Arizona Revised Statutes ARS 15-1445
- Automotive Program Certification 2010
- Aviation Program FAA Certification 2004
- Aviation Program FAA Certification Supplement 2012
- Calendars: https://www.pima.edu/calendars/
- Consumer Information webpage
- Costs - Differential Tuition
- Costs – Tuition and Fees webpage
- Course Catalog 2014-2015 webpage
- Courses with Six or More Credit Hours 2014
- Credit Programs and Degrees webpage
- CTD Nursing Assistant Program Approval 2012
- CTD Practical Nurse Program Approval 2011
- CTD Practical Nurse Refresher Program Approval 2009
- Degree Program Materials: AAS Pharmacy Technology (direct employment), AA Elementary Education (transfer), AAS Clinical Research Coordinator (direct employment), AS Degree (transfer) Dental Assisting, Hygiene and Laboratory Tech Accreditation 2011
- Dental Laboratory Technology Accreditation 2012
- Dropping, Adding or Withdrawing webpage
- Early Childhood Education AAS Accreditation 2013
- EMT-B Program Certification 2011
- EMT-Paramedic Accreditation 2012
- Enrollment Trend Reports
- Ethics Point portal page
- Fast Action Team on Definition of Credit Hour
- Federal Compliance Filing 2013 Assignment of Credit Hours Part One 2014
- Federal Compliance Filing 2013 Overview of Credit Hour Allocations 2014
- Federal Reporting webpage
- Financial Reports website
- Fiscal Year 2014-15 Outlook (BOG Dec. 11, 2013)
- FY 2013 Single Audit Reporting 2013
- Graduate Exit Survey, 2012-2013
- Graduate Report, 2012-2013
- Medical Assisting Accreditation 2013
- Medical Laboratory Technology Accreditation 2011
- Net Price Calculator
- Non-Resident Tuition webpage
- NSLDS 3-Year Official Cohort Default Rate for Schools webpage
- Nursing AAS Accreditation 2010
- Office of Dispute Resolution (ODR)
- Online Financial Aid Orientation 2014-15
- Paying for School webpage
- Paralegal Program Approval 2011
- Pharmacy Technician Accreditation 2011
- Pima Addresses Probation webpage
- Pima Community College A-133 Audit Report, Year Ending June 30, 2013
- Pima Community College Annual Crime Report, 2013
- Pima Community College Definition of Credit documents.
- Pima Community College’s Worksheet for Use by Institutions on the Assignment of Credit Hours and Clock Hours
- Public Comment Sought as PCC Prepares for Accreditor’s Visit news release 2014
- Radiologic Technology AAS Accreditation 2012
- Respiratory Care AAS Accreditation 2011
- Request for Transcript Evaluation Form: [https://www.pima.edu/new-students/apply/docs/TranscriptReview.pdf](https://www.pima.edu/new-students/apply/docs/TranscriptReview.pdf)
- Student Complaint Log, 2011-2014 (Community Campus, East Campus)
- Student Complaint Log, 2013-2014 (Desert Vista Campus, Northwest Campus, West Campus)
- Student Characteristics Report
- Success Indicators Report
- Surgical Technology Accreditation 2005
- Therapeutic Massage Program Approval 2012
- Third Party Comments
- Transcript Evaluation Appeal From: Request for Transcript Evaluation Form: [https://www.pima.edu/new-students/apply/docs/TranscriptReview.pdf](https://www.pima.edu/new-students/apply/docs/TranscriptReview.pdf)
- Credit Programs and Degrees: [https://www.pima.edu/programs-courses/credit-programs-degrees/index.html](https://www.pima.edu/programs-courses/credit-programs-degrees/index.html)
- Transfer Student Instructions: [https://www.pima.edu/new-students/apply/transfer-to-pima.html](https://www.pima.edu/new-students/apply/transfer-to-pima.html)
- Veterinary Technician Accreditation 2014
Team Worksheet for Evaluating an Institution’s Program Length and Tuition, Assignment of Credit Hours and on Clock Hours

Institution under review: Pima Community College

Part 1: Program Length and Tuition

Instructions
The institution has documented that it has credit hour assignments and degree program lengths within the range of good practice in higher education and that tuition is consistent across degree programs (or that there is a rational basis for any program-specific tuition).

Review the “Worksheet for Use by Institutions on the Assignment of Credit Hours and on Clock Hours” as well as the course catalog and other attachments required for the institutional worksheet.

Worksheet on Program Length and Tuition

A. Answer the Following Questions

Are the institution’s degree program requirements within the range of good practice in higher education and contribute to an academic environment in which students receive a rigorous and thorough education?

___X__ Yes    ____ No

Comments: PCC Catalog and website clearly state that associate degrees require 60 or more credits, 15 of which must be completed at Pima.

Are the institution’s tuition costs across programs within the range of good practice in higher education and contribute to an academic environment in which students receive a rigorous and thorough education?

___X__ Yes    ____ No

Comments: PCC’s tuition is among the lowest in the state of Arizona; however, tuition for some of the more costly programs is higher (differential tuition).

B. Recommend Commission Follow-up, If Appropriate

Is any Commission follow-up required related to the institution’s program length and tuition practices?

_____ Yes       ___X__ No

Rationale:
Identify the type of Commission monitoring required and the due date:

**Part 2: Assignment of Credit Hours**

**Instructions**

In assessing the appropriateness of the credit allocations provided by the institution the team should complete the following steps:

1. Review the Worksheet completed by the institution, which provides information about an institution’s academic calendar and an overview of credit hour assignments across institutional offerings and delivery formats, and the institution’s policy and procedures for awarding credit hours. Note that such policies may be at the institution or department level and may be differentiated by such distinctions as undergraduate or graduate, by delivery format, etc.

2. Identify the institution’s principal degree levels and the number of credit hours for degrees at each level. The following minimum number of credit hours should apply at a semester institution:
   - Associate’s degrees = 60 hours
   - Bachelor’s degrees = 120 hours
   - Master’s or other degrees beyond the Bachelor’s = at least 30 hours beyond the Bachelor’s degree
   - Note that one quarter hour = .67 semester hour
   - Any exceptions to this requirement must be explained and justified.

3. Scan the course descriptions in the catalog and the number of credit hours assigned for courses in different departments at the institution.
   - At semester-based institutions courses will be typically be from two to four credit hours (or approximately five quarter hours) and extend approximately 14-16 weeks (or approximately 10 weeks for a quarter). The description in the catalog should indicate a course that is appropriately rigorous and has collegiate expectations for objectives and workload. Identify courses/disciplines that seem to depart markedly from these expectations.
   - Institutions may have courses that are in compressed format, self-paced, or otherwise alternatively structured. Credit assignments should be reasonable. (For example, as a full-time load for a traditional semester is typically 15 credits, it might be expected that the norm for a full-time load in a five-week term is 5 credits; therefore, a single five-week course awarding 10 credits would be subject to inquiry and justification.)
   - Teams should be sure to scan across disciplines, delivery mode, and types of academic activities.
   - Federal regulations allow for an institution to have two credit-hour awards: one award for Title IV purposes and following the above federal definition and one for the purpose of defining progression in and completion of an academic program at that institution. Commission procedure also permits this approach.

4. Scan course schedules to determine how frequently courses meet each week and what other scheduled activities are required for each course. Pay particular attention to alternatively-structured or other courses with particularly high credit hours for a course completed in a short period of time or with less frequently scheduled interaction between student and instructor.

5. **Sampling.** Teams will need to sample some number of degree programs based on the headcount at the institution and the range of programs it offers.
At a minimum, teams should anticipate sampling at least a few programs at each degree level.

For institutions with several different academic calendars or terms or with a wide range of academic programs, the team should expand the sample size appropriately to ensure that it is paying careful attention to alternative format and compressed and accelerated courses.

Where the institution offers the same course in more than one format, the team is advised to sample across the various formats to test for consistency.

For the programs the team sampled, the team should review syllabi and intended learning outcomes for several of the courses in the program, identify the contact hours for each course, and expectations for homework or work outside of instructional time.

The team should pay particular attention to alternatively-structured and other courses that have high credit hours and less frequently scheduled interaction between the students and the instructor.

Provide information on the samples in the appropriate space on the worksheet.

6. Consider the following questions:

- Does the institution’s policy for awarding credit address all the delivery formats employed by the institution?
- Does that policy address the amount of instructional or contact time assigned and homework typically expected of a student with regard to credit hours earned?
- For institutions with courses in alternative formats or with less instructional and homework time than would be typically expected, does that policy also equate credit hours with intended learning outcomes and student achievement that could be reasonably achieved by a student in the timeframe allotted for the course?
- Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that the Commission will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)
- If so, is the institution’s assignment of credit to courses reflective of its policy on the award of credit?

7. If the answers to the above questions lead the team to conclude that there may be a problem with the credit hours awarded the team should recommend the following:

- If the problem involves a poor or insufficiently-detailed institutional policy, the team should call for a revised policy as soon as possible by requiring a monitoring report within no more than one year that demonstrates the institution has a revised policy and evidence of implementation.
- If the team identifies an application problem and that problem is isolated to a few courses or single department or division or learning format, the team should call for follow-up activities (monitoring report or focused evaluation) to ensure that the problems are corrected within no more than one year.
- If the team identifies systematic non-compliance across the institution with regard to the award of credit, the team should notify Commission staff immediately and work with staff to design appropriate follow-up activities. The Commission shall understand systematic noncompliance to mean that the institution lacks any policies to determine the award of academic credit or that there is an inappropriate award of institutional credit not in conformity with the policies established by the institution or with commonly accepted practices in higher education across multiple programs or divisions or affecting significant numbers of students.
A. Identify the Sample Courses and Programs Reviewed by the Team (see #5 of instructions in completing this section)

Courses Reviewed: ACC 100, WRT 101, PSY/SOC 215 in both online and on ground format; HIS 114, CIS 100, GAM 101, NRS 202, MUS 102 (on ground only); ACC 215 (online only)

Programs Reviewed: AAS Pharmacy Technology (direct employment), AA Elementary Education (transfer), AAS Clinical Research Coordinator (direct employment), AS Degree (transfer)

B. Answer the Following Questions

1) Institutional Policies on Credit Hours

Does the institution’s policy for awarding credit address all the delivery formats employed by the institution? (Note that for this question and the questions that follow an institution may have a single comprehensive policy or multiple policies.)

_X__ Yes    ____ No

Comments: For a traditional lecture class, Pima defines a credit as a minimum of 15 contact hours of instruction and a minimum of 30 hours of out-of-class student work, for a total of at least 45 hours to be completed within a term. A contact hour is defined as the equivalent of 50 minutes of class time. Out-of-class student work is defined as a 60 minute hour. Courses in other formats such as laboratory, performance, or fitness course are defined differently. (See Pima Community College Definition of Credit).

Does that policy relate the amount of instructional or contact time provided and homework typically expected of a student to the credit hours awarded for the classes offered in the delivery formats offered by the institution? (Note that an institution’s policy must go beyond simply stating that it awards credit solely based on assessment of student learning and should also reference instructional time.)

_X__ Yes    ____ No

Comments:

For institutions with non-traditional courses in alternative formats or with less instructional and homework time than would be typically expected, does that policy equate credit hours with intended learning outcomes and student achievement that could be reasonably achieved by a student in the timeframe and utilizing the activities allotted for the course?

_X__ Yes    ____ No

Comments: Courses outside the traditional 15 week delivery format use the same syllabi with the same SLOs and equate to 45 hours of outside work/contact hours/clock hours.

Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that the Commission will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

_X__ Yes    ____ No

Comments:
2) Application of Policies

Are the course descriptions and syllabi in the sample academic programs reviewed by the team appropriate and reflective of the institution’s policy on the award of credit? (Note that the Commission will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

__X__ Yes    ____ No

Comments:

Are the learning outcomes in the sample reviewed by the team appropriate to the courses and programs reviewed and in keeping with the institution’s policy on the award of credit?

__X__ Yes    ____ No

Comments: The SLO process assures that courses, no matter the delivery format, utilize the same student learner outcomes.

If the institution offers any alternative delivery or compressed format courses or programs, were the course descriptions and syllabi for those courses appropriate and reflective of the institution’s policy on the award of academic credit?

__X__ Yes    ____ No

Comments: Courses reviewed demonstrated that the same syllabi and course descriptions were used for both online and on ground modalities.

If the institution offers alternative delivery or compressed format courses or programs, are the learning outcomes reviewed by the team appropriate to the courses and programs reviewed and in keeping with the institution’s policy on the award of credit? Are the learning outcomes reasonably capable of being fulfilled by students in the time allocated to justify the allocation of credit?

__X__ Yes    ____ No

Comments: SLOs are consistent across delivery formats.

Is the institution’s actual assignment of credit to courses and programs across the institution reflective of its policy on the award of credit and reasonable and appropriate within commonly accepted practice in higher education?

__X__ Yes    ____ No

Comments:

C. Recommend Commission Follow-up, If Appropriate

Review the responses provided in this section. If the team has responded “no” to any of the questions above, the team will need to assign Commission follow-up to assure that the institution comes into compliance with expectations regarding the assignment of credit hours.

Is any Commission follow-up required related to the institution’s credit hour policies and practices?
___ Yes  ___X__ No

Rationale:

Identify the type of Commission monitoring required and the due date:

D. Identify and Explain Any Findings of Systematic Non-Compliance in One or More Educational Programs with Commission Policies Regarding the Credit Hour  N/A
Part 3: Clock Hours

Does the institution offer any degree or certificate programs in clock hours?

____ Yes        ____X__ No

Does the institution offer any degree or certificate programs that must be reported to the Department of Education in clock hours for Title IV purposes even though students may earn credit hours for graduation from these programs?

____ Yes        ____X__ No

If the answer to either question is “Yes,” complete this part of the form.

Instructions

This worksheet is not intended for teams to evaluate whether an institution has assigned credit hours relative to contact hours in accordance with the Carnegie definition of the credit hour. This worksheet solely addresses those programs reported to the Department of Education in clock hours for Title IV purposes.

Complete this worksheet only if the institution offers any degree or certificate programs in clock hours OR that must be reported to the U.S. Department of Education in clock hours for Title IV purposes even though students may earn credit hours for graduation from these programs. Non-degree programs subject to clock hour requirements (an institution is required to measure student progress in clock hours for federal or state purposes or for graduates to apply for licensure) are not subject to the credit hour definitions per se but will need to provide conversions to semester or quarter hours for Title IV purposes. Clock-hour programs might include teacher education, nursing, or other programs in licensed fields.

For these programs Federal regulations require that they follow the federal formula listed below. If there are no deficiencies identified by the accrediting agency in the institution’s overall policy for awarding semester or quarter credit, accrediting agency may provide permission for the institution to provide less instruction provided that the student’s work outside class in addition to direct instruction meets the applicable quantitative clock hour requirements noted below.

**Federal Formula for Minimum Number of Clock Hours of Instruction (34 CFR §668.8)**

1 semester or trimester hour must include at least 37.5 clock hours of instruction
1 quarter hour must include at least 25 clock hours of instruction

Note that the institution may have a lower rate if the institution’s requirement for student work outside of class combined with the actual clock hours of instruction equals the above formula provided that a semester/trimester hour includes at least 30 clock hours of actual instruction and a quarter hour include at least 20 semester hours.

**Worksheet on Clock Hours**

**A. Answer the Following Questions**

Does the institution’s credit to clock hour formula match the federal formula?

____ Yes        ____X__ No
NOTE: Pima uses the State of Arizona’s Clock Hour formula of one clock hour equals 60 minutes/640 clock hours equal one Full-Time Equivalent (FTSE). Arizona has not yet revised its formula to align with the Department of Education’s formula.

Did the team determine that the institution’s credit hour policies are reasonable within the federal definition as well as within the range of good practice in higher education? (Note that if the team answers “No” to this question, it should recommend follow-up monitoring in section C below.)

____X__ Yes    ____ No

Comments:

Did the team determine in reviewing the assignment of credit to courses and programs across the institution that it was reflective of the institution’s policy on the award of credit and reasonable and appropriate within commonly accepted practice in higher education?

____X__ Yes    ____ No

Comments:

B. Does the team approve variations, if any, from the federal formula in the institution’s credit to clock hour conversion?

____X__ Yes See A. above    ____ No

(Note that the team may approve a lower conversion rate than the federal rate as noted above provided the team found no issues with the institution’s policies or practices related to the credit hour and there is sufficient student work outside of class as noted in the instructions.)

C. Recommend Commission Follow-up, If Appropriate

Is any Commission follow-up required related to the institution’s clock hour policies and practices?

_____Yes    ___X__ No

Rationale:

Identify the type of Commission monitoring required and the due date:
Appendix D
Multi-Campus Reports

Multi-Campus Visit
Peer Reviewer Template

Name of Institution: Pima Community College

Name/Address of Branch Campus: Community Campus

Date and Duration of Visit: September 16, 2014 – ½ a day

Reviewer(s): Billie Unger and Karen Hodges

Campus Overview
The Community Campus of Pima Community College specializes in continuing education and workforce/business training. The campus also serves as the hub of the college’s distance learning programs and oversees the off-campus sites for the Adult Education program, the 29th Street Coalition Center (adult education and Public Safety and Emergency Services Institute) and the Davis Monthan AFB Education Center. Northern Arizona University has administrative offices and classrooms on the campus as well. Those who work at the Community Campus view their work as a “college building a community.”

History, Planning, and Oversight
The Community Campus of Pima Community College began in 1975 as a learning center in a small cluster of buildings near downtown Tucson. The strategic role of this fledgling campus was to provide outreach to the Tucson public schools and to the community of Nogales. The present campus at 401 North Bonita Avenue was constructed in the late 1990’s as part of PCC’s master plan to serve all of the constituents of Tucson and especially adult life-long learners, business and industry, and those students needing special access to higher education because of other constraints in their lives, such as jobs and family obligations.

On July 1, 2014, PCC’s 2014 -2017 Strategic Plan went into effect. The Community Campus faculty, staff, and senior leadership are now working on a campus strategic plan to further the district-wide priorities while continuing to serve the specific needs of its particular constituents – adults, business and industry, and distance education learners. Campus oversight is provided by a campus president, a vice president of instruction, a vice president of student development, an acting dean of online education, a dean of workforce and business development, and a dean of adult education.

Judgment of reviewer(s) (check one):

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.

Facilities and Technology
Pima Community College’s Community Campus is centralized in a 68,224 square foot facility near downtown Tucson. Although the facility itself is the smallest of the district’s main campus building(s), the size is deceptive. For example, the continuing education programming coordinated through the Community Campus is offered at 100 locations throughout Pima County (PCC Continuing Education Fall 2014 publication), and, of course, the distance learning offerings create a global campus for PCC.

The building has 4 parts organized in a square. A visitor enters through a Welcome Center; Area A to the right houses the Center for Learning Technology, the Continuing Education program, the Conference and Training Center, and the High Tech Training Rooms. Area B to the left of the Welcome Center is home to Administrative Services, Admissions, Advising and Counseling, the Campus Resource Center which contains an Online Help Desk, and Student Development. Area C, to the right of Area B, is home to Telecommunications and Production Services, the Telecourse and Interactive Classroom Distribution Center, a Broadcast Studio, and an integrated Instructional Resource Center.

Effective technology is critical to this campus. All students need to connect into MyPima, the student portal enabling students to register and pay for classes, receive information about financial aid, receive PCC e-mails, and conduct degree audits. The students’ learning management system is Desire2Learn, and the campus has a computer commons for students who wish to access their classes on campus. Also available to students are on-line tutoring and e-library holdings. The counselors and advisors can also be accessed on-line.

**Judgment of reviewer(s) (check one):**

- X The evidence indicates that the institution fulfills the expectations of the category.
- [ ] The evidence indicates that there are concerns related to the expectations of the category.

**Human Resources**

Community Campus is home to the 6 administrators mentioned above, 22 full-time faculty, and 160 part-time faculty, plus adequate support staff. Like the faculty on the other campuses of Pima Community College, the faculty, both full-time and adjunct, are all certified according to district-wide standards. The criteria for faculty certification are based on the type of courses they are applying to teach – academic (transfer), developmental, or occupational.

Staff are likewise hired according to district-wide standards. Candidates for positions are screened for meeting minimum job qualifications and evaluated according to the core competencies for the job. Candidates must also provide evidence of educational credentials and pass a background check.

All new full-time employees from all campuses attend a two-day orientation to learn about benefits and personnel policies. In addition, faculty attend a Faculty Learning Academy that covers topics like the use of instructional technology and the college’s curriculum and program review processes. In addition, Community Campus holds a campus-based orientation for adjunct faculty, which includes the same topics covered in the Faculty Learning Academy plus topics such as learning assessment, classroom management, and technology in the classroom.

PCC has an ongoing professional development program, which includes online courses and books available through the Employment Development portal, funding to attend conferences, and tuition waivers. Community Campus employees have access to these services.
All Community Campus employees are evaluated annually by their supervisors. During these evaluations, employees set goals and professional development plans for the coming year.

**Judgment of reviewer(s) (check one):**

- X The evidence indicates that the institution fulfills the expectations of the category.
- □ The evidence indicates that there are concerns related to the expectations of the category.

**Student and Faculty Resources and Support**

Community Campus provides the following on-site services for students: admissions, advising/counseling, assessment, career services, police, cashier, disabled student resources, veterans services, financial aid, orientation, student ID cards, official transcripts, tutoring by CRLA-credentialed tutors, a computer lab, and an IT help desk. In addition, the following online services are available: library resources, advising, tutoring, guidance about the college’s processes like admissions and financial aid, MyPima student portal, and information about college policies like graduation requirements and residency.

Students who have concerns about their experiences at PCC are encouraged to consult Community Campus’s ombudsperson for assistance. If the concern is not resolved, then the student can follow the college’s formal complaint process and contact the Office of Dispute Resolution in person, by phone, by e-mail, or through the EthicsPoint mechanism.

PCC policy stipulates that all faculty have suitable clerical and technology support. On the Community Campus, an academic support position provides curriculum support for the faculty and provides a repository for course materials. All Community Campus full-time faculty have offices, and the adjunct faculty have areas within the second floor Campus Resource Center where they can conference with students. As mentioned above, both full-time and adjunct faculty have access to professional development opportunities, and both are represented in the Faculty Senate.

**Educational Programs and Instructional Oversight**

To provide consistency and quality in the educational courses and programs, PCC uses two college-wide faculty-based entities – the College Curriculum Council and the College Discipline Area Committees (CDACs). The appropriate CDAC develops course objectives, course outlines, and student learning outcomes for each course, regardless of where or in what modality it is taught. While individual faculty have some leeway in presentation, the faculty member must adhere to the course objectives and student learning outcomes. The course outlines are made available online to students.
to further insure consistency. The CDACs review each course for currency at least once every five years and measure annually the degree to which student learning outcomes are met.

The College Curriculum Council, a college-wide standing committee, also reviews curricula but from a college-wide rather than discipline-focused perspective.

As on the other campuses, Community Campus faculty are evaluated annually by the appropriate academic dean.

**Evaluation and Assessment**

As mentioned above, the evaluation of programs and assessment of student learning are handled on a district-wide basis. Therefore Community Campus participates in the same process as the other campuses, which is a combination of CDAC and SLO (student learning outcomes) review. The CDAC process is described above. The SLO process, which originated Fall 2011, begins each semester with training sessions for faculty, department chairs, campus presidents, and discipline leaders to make sure everyone is on the same page. A SLO task force made up of SLO facilitators coordinates both this training and the subsequent process of assessment. There is also training on the use of TracDat (housed in the office of planning and institutional research) so that when the discipline leaders (CDAC) go to enter data at the end of the semester from student exams and papers, they know how to enter it appropriately for subsequent review.

In evaluating the data related to a particular learning outcome, the discipline-based team will look to see the degree to which a learning outcome is met, such as what percentage of students in sections of a math course were able to work a particular problem on the course final. When asked about follow-up to assessed course deficiencies, Community Campus faculty cited instances of both an online chemistry class and an online biology class that were taken offline to be worked on because the students were not making adequate progress through the material.

**Continuous Improvement**

The district-wide 2014-2017 Strategic Plan went into effect on July 1, 2014, after the institution’s first Futures Conference in which 200 community members provided input on the needs of the district.
served by the college. This input was combined with input from the college’s faculty and staff and distilled into six strategic initiatives, which provide the framework for the strategic plan. Each campus, including Community Campus, is now working on its own strategic plan to support the district’s strategic plan.

Because this process has just begun, it is too soon to tell if the process will lead to continuous improvement of Pima Community College.

Judgment of reviewer(s) (check one)

X The evidence indicates that the institution fulfills the expectations of the category.

The evidence indicates that there are concerns related to the expectations of the category.
Multi-Campus Visit
Peer Reviewer Template

Name of Institution: Pima Community College

Name/Address of Branch Campus: Desert Vista Campus

Date and Duration of Visit: September 15, 2014; 8:00 am – 1:00 pm

Reviewer(s): Jacqueline Vietti and Jacqueline Parrill

Campus Overview
Desert Vista Campus is the smallest of Pima’s six campuses and is located in south Tucson. The campus provides general education and transfer coursework as well as signature vocational training in Culinary Arts, Child Development Associate, Early Childhood Education, and Aviation Technology. The Center for Training and Development (CTD) is located at the campus and the campus is part of the Pathways to Healthcare network and administers the Health Professions Opportunity Grant (HPOG), providing health care training to low-income students.

History, Planning, and Oversight
Desert Vista recently engaged in a strategic planning process for the campus. The process used a philosophy of appreciative inquiry, and was inclusive and transparent. Both internal and external constituents were invited to participate in the plan development. Although a campus plan has been developed, the process is still in its infancy. More time is needed to implement the plan and determine its effectiveness.

In addition to offering general education/transfer courses and programs, the campus houses the Center for Training and Development that offers Business Technology, Medical Assistant, Early Childhood Education, Practical Nursing and other employment-focused programs designed to serve undereducated students seeking gainful employment.

Numerous partnerships are in place with area industries and service agencies to maximize pooled physical, human and financial resources. Examples include Job Path, Pima County OneStop, and the First Things First (early childhood certification) initiative.

Capital requests for equipment are developed at the campus level and forwarded on to the district office. While some state of the art equipment has been acquired for courses/programs (ex: organic chemistry), there is a sense among faculty that the feedback loop on their budget requests is not closed.

Judgment of reviewer(s) (check one):

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.
Facilities and Technology
The teaching and learning spaces on the campus are appropriate for campus programming and student needs. For example, the Surgical Technology program has a simulated emergency room for mocking up real life experiences.

Classrooms are equipped with smart boards.

The campus provides effective learning support through the Library and the Learning Center, which houses a state of the art computer commons. Different from other Learning Centers (LC) on the other Pima campuses, Desert Vista’s LC includes an Adult Education division. The philosophy in the center is that “a student is a student”, regardless as to whether they are in a credit program or not. The center supports many non-traditional students and provides GED preparation and works with Center for Training and Development students to raise test scores. The LC also serves TRIO and Upward Bound students.

Desert Vista equipment and facilities are cited consistently as a strength by occupational advisory committee representatives.

Judgment of reviewer(s) (check one):

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.

Human Resources
In order to improve consistency in the services provided by tutors, the Learning Center recently implemented tutor training standards for all tutors. All tutors are required to obtain College Reading and Learning Association (CRLA) Level 1 training within one year. Additional levels of training are available for tutors who are interested in continuing their development. Additionally, the center is using more stringent requirements when hiring tutors.

The number of staff and faculty on the campus appears to be sufficient to support the operation and serve students. However, it is noted that no technical support staff are available to students in the evenings and the ratio of part-time to full-time faculty positions is somewhat high (37 FT v. 150 PT), an issue noted in the over-all report for the district.

All faculty are required to be certified based upon district-wide certification standards. Additionally, new faculty must attend two orientations – a two-day district-wide one for all new employees and a campus-based one. New adjunct faculty undergo a campus-based orientation that is available in August, January and continuously on-line.

While human resources appear adequate to support the programs and services offered through the campus, the turnover rate in administrative leaders over the recent past is a cited as a faculty concern. That said the new president at Desert Vista has been described as embracing his role, particularly in terms of focusing upon faculty/campus support and connecting with the external community.

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.
Student and Faculty Resources and Support

Students note that “If you need help, you can find it anywhere.” and cite the strong sense of community, class size, quality and caring faculty, and excellent tutoring services as major strengths. Two noted areas for improvement, however, are ready access to counselors/advisors and real or perceived lag time in disbursement of financial aid.

During the student forum, participating students rated student life at Desert Vista as a 10 on a scale of 1-10 due to the varied opportunities for students to become engaged in student organizations and community service.

Although the budgeting process merits some improvement, especially in terms of closing the feedback loop relative to faculty requests for supplies and equipment, the faculty appear to have the necessary resources to meet the needs of Desert Vista students. They note a strong sense of community and “fabulous students” as key campus assets.

Judgment of reviewer(s) (check one):
- X The evidence indicates that the institution fulfills the expectations of the category.
- □ The evidence indicates that there are concerns related to the expectations of the category.

Educational Programs and Instructional Oversight

Desert Vista faculty engage in regular program review. Of note is the cooperative, collaborative effort between the clock hour and credit hour culinary programs. The two programs worked collectively to conduct their most recent program review. The credit program honors clock hour courses.

Collaborative work to ensure consistency and relevance in disciplinary courses across all Pima campuses also is noted as a strength.

Faculty cite the restored enforcement of pre-requisites and faculty oversight of the curriculum as significant positives.

Judgment of reviewer(s) (check one):
- X The evidence indicates that the institution fulfills the expectations of the category.
- □ The evidence indicates that there are concerns related to the expectations of the category.

Evaluation and Assessment

Desert Vista’s connection to the community it serves is remarkable. Many business and industry representatives serve on the campus’s Career and Technical Advisory Boards to ensure that programming is relevant and current. For example, representatives from the Medical Office program indicated that based upon their input to faculty, transcription has been eliminated from the curriculum since it is no longer required in the workplace due to changes in technology.
CDACs (Curriculum Discipline Area Committees) meet at least twice a year to discuss curriculum matters and to define/refine student learning outcomes.

Counselors and Student Success faculty currently are meeting 6 times per year to formulate recommendations for development of an improved model of support for students.

Based upon previous pass rates, tutors have been imbedded in developmental math courses for Early Childhood students and the new passage rate during the most recent academic term rose to 75%. Now tutors are being embedded into Computer Literacy.

Judgment of reviewer(s) (check one)

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.

Continuous Improvement

The campus established a student engagement committee to facilitate ongoing conversation on how faculty, staff and students might increase student engagement on the campus. “Coffee on the Go”, a program where administrators and faculty provide coffee to students in the common area and encourage conversation, and “Career Café”, a monthly career services mentoring opportunity for students, were developed as a result of this committee.

A number of strategies have recently been employed on campus in order to facilitate more effective communication across campus. Department heads are now meeting on a regular basis. Business office staff goes out and meets with various office staff members to provide training to ensure business process are conducted in a consistent way. Advisors are focusing on training for staff. Again, these strategies have only recently been employed. More time is necessary to evaluate their effectiveness.

Given the needs of students on the campus (high ESL population), Desert Vista is changing its model of service delivery for advising services. In addition to self-service, the campus is moving back to providing face-to-face services and moving towards assigned advising.

Based upon previous pass rates, tutors have been imbedded in developmental math courses for Early Childhood students and the new passage rate during the most recent academic term rose to 75%. Now tutors are being imbedded into Computer Literacy.

Judgment of reviewer(s) (check one)

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.
Name of Institution: Pima Community College

Name/Address of Branch Campus: Downtown Campus

Date and Duration of Visit: September 16, 2014

Reviewer(s): Mr. Tom Sonnleitner, Dr. James O. Smith

Campus Overview
The Downtown Campus is an urban campus established in 1974 and home to approximately 8,000 students. The campus is located near downtown Tucson and the University of Arizona. This campus offers a balance of occupational programs that include Building Constructions Technology, Automotive Technology, and Welding, as well as heavily involved in university transfer. The campus is currently under interim-presidential leadership. This campus does not engage in any contractual or consortia relationships.

History, Planning, and Oversight
Campus leadership provided a copy of the Downtown Campus Strategic Action Plan 2014 to 2017. Campus leadership asserted its strategic planning process modeled loosely on the District’s planning methodology, and the campus plan aligns with the strategic goals established at the District level. Twenty-eight (28) individuals comprised campus leadership team devising goals and plans for the campus.

Every two weeks the Chancellor, Campus Presidents, and senior district administrators meet as the Chancellor’s Cabinet. This group serves as the college-wide advisory committee to the Chancellor that is responsible for the review of college operations, strategic directions, resource allocation, as well as development of policies and procedures. Additionally, each campus has a President’s cabinet to serve an aligned role for each location.

Judgment of reviewer(s) (check one):

X The evidence indicates that the institution fulfills the expectations of the category.

☐ The evidence indicates that there are concerns related to the expectations of the category.

Facilities and Technology
The Downtown campus occupies the physical infrastructure sufficient to support its operations at this campus. A tour of the campus revealed appropriate classrooms, conference spaces, and office space to support student learning. On balance the technology infrastructure is appropriate to meet the needs of students, faculty and staff. Both the staff and faculty groups were highly appreciative of the Pima campus.
Most impressive at the Downtown Campus was the veterans’ office. This office of approximately 1,500 square feet support veteran students. This office is current under interim leadership; however, the area housed both advising and computer support for these students. This office was arranged to provide support for veteran students both academically and socially.

**Judgment of reviewer(s) (check one):**

- [x] The evidence indicates that the institution fulfills the expectations of the category.
- [ ] The evidence indicates that there are concerns related to the expectations of the category.

**Human Resources**

Faculty are certified using district-wide certification standards applied across all locations. Prior to 2002 faculty must possess an Arizona Community College teaching certificate. In March 2002 the Arizona State Board of Community Colleges divested its responsibility for certifying community college faculty. Therefore, under the oversight of the Provost, Pima established minimum qualifications for courses under classifications of Academic, Developmental, and Occupational/Workforce courses. Minimum standards were established for each of the categories.

In review of the campus, student and faculty services are fully supported at the Downtown Campus. This campus serves a diversity of students, and the campus had support services for tutoring, developmental support, academic advising, counseling, library and a community learning center, and the Pima Veterans Center appropriate for student success.

**Judgment of reviewer(s) (check one):**

- [x] The evidence indicates that the institution fulfills the expectations of the category.
- [ ] The evidence indicates that there are concerns related to the expectations of the category.

**Student and Faculty Resources and Support**

Most notable at the Downtown Campus is the community learning center that was included in the library space. This space was adjacent to the library and supported by tutors. Computer terminals were included in this learning space divided by courses including mathematics, accounting, and the sciences. During the visit period, this space was utilized extensively by students.

The student grievance procedures is undergoing change since the last site visit. Pima established the Office of Dispute Resolution that students may use to submit a complaint to the college. The complaint may be submitted via a call, email or and online form via Ethics Point reporting mechanism. Upon receipt of an issue, the Office of Dispute Resolution will review the complaint, determine if an investigation is necessary, and enter the issue into a tracking mechanism, as appropriate. At the conclusion, a report will be prepared detailing the outcomes, findings, and/or recommendation for resolution.

**Judgment of reviewer(s) (check one):**

- [x] The evidence indicates that the institution fulfills the expectations of the category.
- [ ] The evidence indicates that there are concerns related to the expectations of the category.
Educational Programs and Instructional Oversight

PCC oversees all educational offerings through the Office of the Provost. Two entities evaluate the depth and rigor of the curricula and course offerings that include the College Curriculum Council and the relevant College Discipline Area Committee. These committees periodically review student learning outcomes, conduct appropriate program reviews, and maintain the currency of the courses and programs.

Currently, the campus has an interim-president, vice president of instruction, vice president of student affairs, two academic deans responsible for general education and occupational programs, and a director of administration. In particular, two vice presidents and the academic deans are directly responsible for engaging students in both academics and student support necessary for student success.

Judgment of reviewer(s) (check one):

X The evidence indicates that the institution fulfills the expectations of the category.
☐ The evidence indicates that there are concerns related to the expectations of the category.

Evaluation and Assessment

Pima develops Student Learning Outcomes by disciplines and individual courses. Course descriptions include the established outcomes. Currently, the Planning and Institutional Research office conducts reports and surveys evaluating student success.

Planning and Institutional Research is working to strengthen how the college uses data to support improvement, as well as providing data to support student learning.

Judgment of reviewer(s) (check one)

X The evidence indicates that the institution fulfills the expectations of the category.
☐ The evidence indicates that there are concerns related to the expectations of the category.

Continuous Improvement

The institution from the Board of Governors to individual faculty and staff are participating in the renewal and continuous improvements. Specifically to this campus, the Strategic Action Plan includes goals to improve access and student success, improve the responsiveness to the needs of the business community, as well as to develop a culture of organizational learning. The achievement of these goals demonstrate continuous improvement undertaken by the campus and college.

The Veteran’s Center at the Downtown Campus is a model of continuous improvement. This center was designed to support veteran students both at the campus specifically and the college generally. This center provides both advising and academic support for veteran students.

Judgment of reviewer(s) (check one)

X The evidence indicates that the institution fulfills the expectations of the category.
☐ The evidence indicates that there are concerns related to the expectations of the category.
Appendix E
Assumed Practices Worksheet

Pima Community College District
Assumed Practices within the Criteria for Accreditation
Worksheet A

Foundational to the Criteria and Core Components is a set of practices shared by institutions of higher education in the United States. Unlike Criteria and Core Components, these Assumed Practices are (1) generally matters to be determined as facts, rather than matters requiring professional judgment and (2) unlikely to vary by institutional mission or context.

The Assumed Practices are organized by four areas: (A) Integrity: Ethical and Responsible Conduct; (B) Teaching and Learning: Quality, Resources, and Support; (C) Teaching and Learning: Evaluation and Improvement; and (D) Resources, Planning, and Institutional Effectiveness. These areas link the Assumed Practices to their respective Criteria.

Institutions seeking candidacy will be required to meet all of the Practices prior to admission to candidacy. Institutions in candidacy that do not maintain these Assumed Practices during the candidacy period may have that status withdrawn. Institutions seeking initial accreditation will be granted that status only when all Assumed Practices and all Criteria for Accreditation are in place at the level expected of accredited institutions. In addition, accredited institutions on Show-Cause will be required to demonstrate that they meet all of the Practices prior to being removed from Show-Cause.

A. Integrity: Ethical and Responsible Conduct

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<th>Not Met¹</th>
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<tr>
<td>1. The institution has a conflict of interest policy that ensures that the governing board and the senior administrative personnel act in the best interest of the institution.</td>
<td>X</td>
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<tr>
<td>2. The institution has ethics policies for faculty and staff regarding conflict of interest, nepotism, recruitment and admissions, financial aid, privacy of personal information, and contracting.</td>
<td>X</td>
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<tr>
<td>3. The institution provides its students, administrators, faculty, and staff with policies and procedures informing them of their rights and responsibilities within the institution.</td>
<td>X</td>
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<tr>
<td>4. The institution provides clear information regarding its procedures for</td>
<td>X</td>
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¹ Documenting the Unmet Assumed Practices
In addition to documenting the specific reason the Assumed Practice is not met on this form, the team should also reference any unmet Assumed Practice in the appropriate area of the main team report; i.e., the related eligibility requirement, Federal Compliance requirement, or Core Component(s).
receiving complaints and grievances from students and other constituencies, responds to them in a timely manner, and analyzes them to improve its processes.

5. The institution makes readily available to students and to the general public clear and complete information including:

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<td>a.</td>
<td>statements of mission, vision, and values</td>
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<td>b.</td>
<td>full descriptions of the requirements for its programs, including all pre-requisite courses</td>
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<tr>
<td>c.</td>
<td>requirements for admission both to the institution and to particular programs or majors</td>
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<tr>
<td>d.</td>
<td>policies on acceptance of transfer credit, including how credit is applied to degree requirements. (Except for courses articulated through transfer policies or institutional agreements, the institution makes no promises to prospective students regarding the acceptance of credit awarded by examination, credit for prior learning, or credit for transfer until an evaluation has been conducted.)</td>
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<tr>
<td>e.</td>
<td>all student costs, including tuition, fees, training, and incidentals; its financial aid policies, practices, and requirements; and its policy on refund</td>
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<td>f.</td>
<td>policies regarding academic good standing, probation, and dismissal; residency or enrollment requirements (if any)</td>
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<td>g.</td>
<td>a full list of its instructors and their academic credentials</td>
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<td>h.</td>
<td>its relationship with any parent organization (corporation, hospital, church, or other entity that owns the institution) and any external providers of its instruction</td>
</tr>
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6. The institution assures that all data it makes public are accurate and complete, including those reporting on student achievement of learning and student persistence, retention, and completion.

7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.

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| a. | An institution offering programs that require specialized accreditation or recognition in order for its students to be certified or to sit for licensing examinations either has the appropriate accreditation or discloses publicly and clearly the
consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.

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<td>b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status of the program at each location.</td>
<td>X</td>
</tr>
<tr>
<td>c. An institution that advertises a program as preparation for a licensure examination publicly discloses its licensure pass rate on that examination, unless such information is not available to the institution.</td>
<td>X</td>
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8. The governing board and its executive committee, if it has one, include some “public” members. Public members have no significant administrative position or any ownership interest in any of the following: the institution itself; a company that does substantial business with the institution; a company or organization with which the institution has a substantial partnership; a parent, ultimate parent, affiliate, or subsidiary corporation; an investment group or firm substantially involved with one of the above organizations. All publicly-elected members or members appointed by publicly-elected individuals or bodies (governors, elected legislative bodies) are public members. *

*Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.

9. The governing board has the authority to approve the annual budget and to engage and dismiss the chief executive officer.*

*Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.

10. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.  

   |   |
|---|---|
11. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.

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<tr>
<th>Rationale for Assumed Practices indicated as unmet:</th>
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<td></td>
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<tr>
<td>B. Teaching and Learning: Quality, Resources, and Support</td>
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<td>---------------------------------------------------------</td>
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<tr>
<td>1. Programs, Courses, and Credits</td>
</tr>
<tr>
<td>a. The institution conforms to commonly accepted minimum program length: 60 semester credits for associate’s degrees, 120 semester credits for bachelor’s degrees, and 30 semester credits beyond the bachelor’s for master’s degrees. Any variation from these minima must be explained and justified.</td>
</tr>
<tr>
<td>b. The institution requires that 30 of the last 60 credits earned for a bachelor’s degree that the institution awards and 15 of the final 30 for an associate’s degree it awards be credits earned at the institution.* Institutions that do not maintain such a requirement, or have programs that do not, are able to demonstrate structures or practices that ensure coherence and quality to the degree. (Consortial arrangements are considered to be such structures. In addition, an institution that complies with the criteria for academic residency requirements of the Servicemembers Opportunity Colleges (SOC) will not be deemed out of conformity with this Assumed Practice provided that its policy is an exception for active-duty servicemembers and not for students in general.)</td>
</tr>
<tr>
<td>c. The institution’s policy and practice assure that at least 50% of courses applied to a graduate program are courses designed for graduate work, rather than undergraduate courses credited toward a graduate degree. (An institution may allow well-prepared advanced students to substitute its graduate courses for required or elective courses in an undergraduate degree program and then subsequently count those same courses as fulfilling graduate requirements in a related graduate program that the institution offers. In “4+1” or “2+3” programs, at least 50% of the credits allocated for the master’s degree – usually 15 of 30 – must be for courses designed for graduate work.)</td>
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<sup>2</sup> **Documenting the Unmet Assumed Practices**

In addition to documenting the specific reason the Assumed Practice is not met on this form, the team should also reference any unmet Assumed Practice in the appropriate area of the main team report; i.e., the related eligibility requirement, Federal Compliance requirement, or Core Component(s).
d. The institution adheres to policies on student academic load per term that reflect reasonable expectations for successful learning and course completion.

e. Courses that carry academic credit toward college-level credentials have content and rigor appropriate to higher education.

f. The institution has a process for ensuring that all courses transferred and applied toward degree requirements demonstrate equivalence with its own courses required for that degree or are of equivalent rigor.

g. The institution has a clear policy on the maximum allowable credit for prior learning as a reasonable proportion of the credits required to complete the student’s program. Credit awarded for prior learning is documented, evaluated, and appropriate for the level of degree awarded. (Note that this requirement does not apply to courses transferred from other institutions.)

h. The institution maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor’s degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any variation is explained and justified.

2. Faculty Roles and Qualifications

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<td>a.</td>
<td>Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process.</td>
</tr>
<tr>
<td>b.</td>
<td>Instructors teaching at the doctoral level have a record of recognized scholarship, creative endeavor, or achievement in practice commensurate with doctoral</td>
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</table>
c. Faculty participate substantially in:
   1) oversight of the curriculum—its development and implementation, academic substance, currency, and relevance for internal and external constituencies;
   2) assurance of consistency in the level and quality of instruction and in the expectations of student performance;
   3) establishment of the academic qualifications for instructional personnel;
   4) analysis of data and appropriate action of assessment of student learning and program completion.

3. Support Services
   a. Financial aid advising clearly and comprehensively reviews students' eligibility for financial assistance and assists students in a full understanding of their debt and its consequences.
   b. The institution maintains timely and accurate transcript and records services.

Rationale for Assumed Practices indicated as unmet:

<table>
<thead>
<tr>
<th>C. Teaching and Learning: Evaluation and Improvement</th>
<th>Met</th>
<th>Not Met&lt;sup&gt;3&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) have the authority for the assignment of grades. (This requirement allows for collective responsibility, as when a faculty committee has the authority to override a grade on</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

<sup>3</sup> Documenting the Unmet Assumed Practices
In addition to documenting the specific reason the Assumed Practice is not met on this form, the team should also reference any unmet Assumed Practice in the appropriate area of the main team report; i.e., the related eligibility requirement, Federal Compliance requirement, or Core Component(s).
2. The institution refrains from the transcription of credit from other institutions or providers that it will not apply to its own programs.  X

3. The institution has formal and current written agreements for managing any internships and clinical placements included in its programs.  X

4. A predominantly or solely single-purpose institution in fields that require licensure for practice is also accredited by or is actively in the process of applying to a recognized specialized accrediting agency for each field, if such agency exists.  X

5. Instructors communicate course requirements to students through syllabi.  X

6. Institutional data on assessment of student learning are accurate and address the full range of students who enroll.  X

7. Institutional data on student retention, persistence, and completion are accurate and address the full range of students who enroll.  X

**Rationale for Assumed Practices indicated as unmet:**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The institution is able to meet its current financial obligations.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2. The institution has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3. The institution has future financial projections addressing its long-term financial sustainability.</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

[^4]: *Documenting the Unmet Assumed Practices*

In addition to documenting the specific reason the Assumed Practice is not met on this form, the team should also reference any unmet Assumed Practice in the appropriate area of the main team report; i.e., the related eligibility requirement, Federal Compliance requirement, or Core Component(s).
4. The institution maintains effective systems for collecting, analyzing, and using institutional information. | X |

5. The institution undergoes an external audit by a certified public accountant or a public audit agency of its own financial and educational activities and maintains audited financial statements. For private institutions the audit is annual; for public institutions it is at least every two years.*

*Institutions under federal control are exempted provided that they have other reliable information to document the institution’s fiscal resources and management.* | X |

6. The institution’s administrative structure includes a chief executive officer, chief financial officer, and chief academic officer (titles may vary) with appropriate credentials and experience and sufficient focus on the institution to ensure appropriate leadership and oversight. | X |

Rationale for Assumed Practices indicated as unmet:

**Team Determination:** *(Insert one of the following statements.)*

The team has reviewed all Assumed Practices within the Criteria for Accreditation and the institution meets all expectations.

**Team Recommendation Related to the Assumed Practices:**

All assumed practices were reviewed by the team and met.

*(If the institution does not meet every Assumed Practice, the institution cannot be granted Candidacy or Initial Accreditation. If the institution is currently in Candidacy and fails to meet one or more Assumed Practices, then the team may determine if the Candidacy should be terminated or another course of action taken.)*

**Rationale for Team Recommendation Related to the Assumed Practices:**

Since the time of the fact finding visit the institutions has put in place the proper procedures to document that at the time of the visit all assumed practices were met.