

Follow-Up Visit

Grossmont College
8800 Grossmont College Drive
El Cajon, CA 92020

This report represents the findings of the Peer Review Team that conducted a virtual visit to Grossmont College on March 23, 2022. The Commission acted on the accredited status of the institution during its June 2022 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Submitted to:

The Accrediting Commission for Community and Junior Colleges

Submitted by:

Dr Vince Rodriguez - President, Coastline College
Dr. Robert Curry - Associate Superintendent/Vice President,
Academic Affairs, Allan Hancock College

Date: April 13, 2022
To: Accrediting Commission for Community and Junior Colleges
From: Dr. Vince Rodriguez
Subject: Report of Follow-up Team Report to Grossmont College, March 23, 2022

Introduction

The Peer Review Team for Grossmont College completed the Follow-up visit to the College from April 8-9, 2021. At its meeting June 9-11, 2021, the Commission determined continued noncompliance with Standards I.B.2, II.A.3, and II.A.16 (College Compliance Requirement 2) and acted to defer action and require a second Follow-up Report, due no later than March 1, 2022, followed by a visit from a peer review team. Members of the peer review team conducted the second Follow-Up site visit to Grossmont College on March 23, 2022. The purpose of the team visit was to verify that the Follow-up Report prepared by the College was an accurate, thorough examination of the evidence, to determine if the institution has resolved the deficiencies noted in the compliance requirements and now meets Eligibility Requirements, Accreditation Standards, and Commission policies.

The team found that the College had prepared very well for the visit by arranging for meetings with the groups agreed upon earlier with the team chair and by providing relevant evidence and access to courses and Student Learning Outcomes (SLO) data and systems for review. Over the course of the day the team met with the following individuals/groups:

Dr. Denise Whisenhunt, President
Dr. Marshall Fulbright, Vice-President, Academic Affairs
Dr. Marsha Gable, Vice-President, Student Services
Bill McGreevy, Vice-President, Administrative Services
Dr. Joan Garcia Ahrens, Accreditation Liaison Officer/Interim Sr. Dean of College Planning & Institutional Effectiveness
Dr. Tate Hurvitz, Faculty Accreditation Co-chair
Accreditation Steering Committee Members
Danielle Feliciano, Planning & Institutional Effectiveness Committee Co-Chair
Dr. Pearl Lopez, Academic Senate President
Michele Martens, Classified Senate President
Felicia Kalker, SLO Coordinator
Natalie Ray, SSO Coordinator/Student Services Program Review Coordinator
Joyce Fries & Kelly Menck, Academic Program Review Co-chairs
Dee Aceves, Faculty Curriculum Co-chair
Instructional Deans: Agustin Albarran, Javier Ayala, Shawn Hicks, Nancy Saks, and Eric Klein
Student Services Deans: Martha Clavelle, Aaron Starck, Sara Varghese, and Courtney Willis
Victoria Rodriguez, Interim Dean, Student Success & Equity
Kelly Jackson, Interim Research & Planning Analyst
Additional Faculty Members: Liz Barrow, Bonnie Ripley, Roxanne Tuscany, Lara Braff, Adam Deustch, and Gabrielle Gosselin

Additional Classified Members: Cindy Emerson, Rochelle Weiser, Veronica Rosales, and Kay Watson
David Ogul, Interim Director, College & Community Relations

The Follow-Up Report and Visit were expected to document resolution of the following compliance requirements:

1. Continued noncompliance with Standards I.B.2, II.A.3, and II.A.16 (College Compliance Requirement 2). In order to meet the standards, the Commission requires that the College fully implement the assessment, collection, and use of student learning outcomes for all courses, programs, and units (I.B.2, II.A.3, II.A.16).

Team Analysis of College Responses to the 2021 compliance requirements

Findings and Evidence:

The Team met with and interviewed the College President, Vice Presidents, Accreditation Liaison Officer, Faculty Accreditation Co-chair, Accreditation Steering Committee, Planning & Institutional Effectiveness Committee, and other members of the College. The Team found that Grossmont College fully implemented the assessment, collection, and use of student learning outcomes for all courses, programs, and units. Furthermore, the College is using student learning outcomes data for continuous improvements across all divisions of the college.

Academic Affairs

The college created timelines for the assessment and review of SLO data for the purposes of continuing improvement. All academic programs completed course SLO collection in fall 2021. Using the Course SLO Results Entry Form, departments provide SLO data that includes the semester, summary of results, reflections from the department, and recommendations for changes based on the analysis. Program SLO data was collected for all departments in spring 2022, and Program Assessment Plans submitted for each department. The Annual Unit Planning Report allows for analysis of outcomes data and progress on department goals. Furthermore, all instructional programs are scheduled to complete comprehensive program reviews on a six-year cycle.

Student Services

The Student Services Division has a timeline which includes annual, three-year, and six-year components for Student Service Outcomes/Service Area Outcomes (SSO/SAO). All student services programs are required to complete an annual review. In fall 2021, SSO/SAO data was collected for all student services departments. Programs scheduled for a three-year review provide information related to their goals, outcomes, and processes. Programs providing their comprehensive six-year review are required to submit a report and presentation to the Student Services Program Review (SSPR) committee.

Administrative Services

Service Area Outcomes (SAO) have been developed for each Administrative Services Department, and assessments data for SAOs are collected through surveys. The Annual Unit

Planning Reports for Administrative Services include the department's analysis and reflections based on the survey results. These reports are also used for resource allocation requests. A six-year assessment schedule has been developed for Administrative Services departments.

Resource Allocation

Annual Unit Plans are completed by each department in the fall semester, and resource allocation requests are submitted in the spring based on the annual plans. All programs at Grossmont College collected SLO, SSO, or SAO data in fall 2021, and reflections from those outcomes are included in the annual unit plans. Information from the annual unit plan is required for any resource allocation requests, which are to be submitted in spring.

Centralized Data Collection System

The College completed the design and implementation of Nuventive Improve to provide a single centralized data collection system. Course and program level assessment data has been entered into the Nuventive Improve system for all programs and departments. The Course SLO Results Entry Form data, Program Assessment Plans (program SLO data), Annual Unit Planning Reports, and assessment schedules are all entered into the Nuventive system for easy retrieval, archiving, and reporting. Furthermore, all program review reports are now being entered into the Nuventive system as of spring 2022.

The Team reviewed the Nuventive Improve system and verified that six-year assessment schedules were created for all departments, with some Student Services departments having completed a three-year assessment. In addition, all units completed the SLO/SSO/SAU assessments in fall 2021. The Team also verified that SLO assessment data was collected and annual unit plans submitted for the program/departments that were not available at the time the College follow-up report was submitted.

Conclusion:

The institution has addressed the requirement, corrected the deficiencies, and now meets Standards I.B.2, II.A.3, and II.A.16.