

## **PEER REVIEW TEAM REPORT**

East Los Angeles College  
1301 Avenida Cesar Chavez  
Monterey Park, CA 91754

This report represents the findings of the Peer Review Team that conducted a focused site visit to East Los Angeles College from March 8 - 10, 2023. The Commission acted on the accredited status of the institution during its June 2023 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Dr. Carole Goldsmith  
Team Chair

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## Summary of Focused Site Visit

INSTITUTION: East Los Angeles College

DATES OF VISIT: March 8 - March 10, 2023

TEAM CHAIR: Dr. Carole Goldsmith

This Peer Review Team Report is based on the formative and summative components of the comprehensive peer review process. In October 2022, the team conducted Team ISER Review (formative component) to identify where the college meets Standards and to identify areas of attention for the Focused Site Visit (summative component) by providing Core Inquiries that the team will pursue to validate compliance, improvement, or areas of excellence. The Core Inquiries are appended to this report.

A four- member peer review team conducted a Focused Site Visit to East Los Angeles College (ELAC or College) and the South Gate Educational Center on March 8 – March 10, 2023, for the purpose of completing its Peer Review Team Report and determination of whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and U.S. Department of Education regulations.

The team chair and vice chair held a pre-Focused Site Visit meeting with the college CEO on October 11, 2022, to discuss updates since the Team ISER Review and to plan for the Focused Site Visit. During the Focused Site Visit, team members met with approximately twenty faculty, administrators, classified staff and students in formal meetings, group interviews and individual interviews. The team held one open forum, which was well-attended, and provided the College community and others to share their thoughts with members of the Focused Site Visit team. The team evaluated how well the College is achieving its stated purposes, providing recommendations for quality assurance and institutional improvement. The team thanks the College staff for coordinating and hosting the Focused Site Visit meetings and interviews and ensuring a smooth and collegial process.

## **Major Findings and Recommendations of the Peer Review Team Report**

### **Commendations**

Commendation 1: The team commends the college for an exemplary commitment to and significant evidence of continuous improvement. The team was deeply impressed that ELAC's leaders throughout all stakeholder groups have diligently encouraged and expanded innovation through the college's operational efforts, as well as thorough assessment, planning, and resource allocation processes in direct support of the mission statement, goals, and vision. Well thought out decision-making processes have led to the effective expansion of student support programs and improvements in instructional curriculum that is culturally competent and demonstrates a great deal of care. (I.B.9, IV.A.1)

### **Recommendations**

#### **Recommendations to Meet Standards:**

None

#### **Recommendations to Improve Quality:**

None

#### **District Commendations:**

District Commendation 1: The team commends the Board and the District on the development and implementation of a Districtwide Framework for Racial Equity and Social Justice: Taking Action to Root Out Racism and Internalize Anti-Racist Policies and Practices at LACCD. The District has successfully built upon the strong legacy of social justice and equity work amongst the campuses, by embedding this framework into existing planning process, developing systems of accountability, and investing in local, regional, and statewide legislative advocacy to support statewide systemic reform to improve racial and social justice initiatives. (IV.D.5)

#### **District Recommendations to Meet Standards:**

None

#### **District Recommendations to Improve Quality:**

None

## **Introduction**

East Los Angeles Junior College (ELAC) was established in June 1945 by the Los Angeles City Board of Education. The College opened its doors in September 1945 as a wing of Garfield High School, boasting 19 faculty members and 380 students, most of whom were World War II veterans.

The College quickly outgrew the borrowed high school facilities. In 1947, the Board of Education was able to purchase 82 acres of agricultural land with funding from a bond issue. Two years later, in January 1949, classes began at the College's present location in wooden bungalows moved to the campus from the Santa Ana Army Base. More than nineteen hundred students enrolled that year.

Permanent buildings were constructed to accommodate growing enrollment. In 1951 the stadium and auditorium were built. More classrooms, an administration building, library, planetarium, men's and women's gyms, a swim stadium, theater, and art gallery followed.

The same year, 1951, ELAC began a relationship with noted actor, collector and one of Los Angeles's great champions of the arts, Vincent Price. This relationship has grown into the establishment of the Vincent Price Art Museum (VPAM), the largest art museum associated with a community college. Currently, the museum houses over 9,000 objects of art, has held over 100 art exhibits, and continues to carry out Price's vision for a "teaching art collection."

During the 1960s and 1970s, buildings to house the nursing program, a new library, and the automobile technology center were added to the campus. Many of the original bungalows were still used as classrooms until 2007, when they were finally demolished to make way for new campus structures.

In 1969 the California State Legislature separated the (then) eight community colleges from the Los Angeles Unified School District and formed the Los Angeles Community College District. ELAC's service area was defined to include the communities of Alhambra, Bell, Bell Gardens, City of Commerce, Cudahy, East Los Angeles, Huntington Park, Los Angeles, Maywood, Montebello, Monterey Park, Rosemead, San Gabriel, South San Gabriel, South Gate and Vernon.

During the 1990s ELAC experienced unprecedented changes. Enrollment grew from 13,000 to approximately 30,000 students and the number of permanent faculty almost doubled. Outreach programs were located throughout the service area for the convenience of students who could not easily travel to the main campus. The full-service South Gate Educational Center was established in the southern part of the service area so students could complete a transfer program and several career programs without attending the main campus.

Since 2009, campus renovations also included the Helen Miller Bailey Library, a refurbished stadium, a new baseball diamond, the Administration Building, Student Services Building, two parking structures, a Social Sciences classroom building and a Visual and Performing Arts Complex that houses the Vincent Price Art Museum as well as theaters, labs, classrooms and studios for the art, music, dance, and theater programs.

ELAC continues to benefit and evolve from ongoing public support. In 2016, voters in Los Angeles County approved Measure CC, which provided the district with an additional \$3.5 billion dollars for the district. The implementation of this construction bond supported expansion of the physical capacity of the college, including new education buildings and a new site for the South Gate Educational Center.

In March 2019, the District officially broke ground for the \$65 million South Gate Educational Center. Covering about 18.5 acres, the project includes a three-story, 105,000-square-foot, LEED-certified building with a modern, multimedia library, 28 classrooms, offices, lecture hall and four lab spaces for use in career technology education, liberal arts and science programs. Estimated completion date for the project is the fall 2024. The location will support allied health programs and the completion of certificates and AA degrees in programs such as administrative justice, general education and job placement.

ELAC consistently had over 200,000 total enrollments per academic year between 2015-2016 and 2018-2019 between the Monterey Park campus and the South Gate Educational Center. Headcounts remained steady for Credit courses, yet declined for Noncredit, PSAs, and Dual Enrollments during 2020-2021. Female students represent 62% of the population and ELAC is a Hispanic Serving Institution with 79% of its credit enrollment identifying as Hispanic/Latino. The next largest identified ethnicity is Asian at 11%.

The team was impressed with the spirit of collegiality and support that was evident during the site visit. Long time and new employees spoke of their love for the college, many referring to ELAC as a family. There are intentional efforts for collaboration across the college and at the college's South Gate Educational Center to meet the basic needs of students. The Vincent Price Art Museum provides students and the community with access to over 9000 artifacts and an instructional program that seeks to diversify the field of museum studies for students throughout the Los Angeles Community College District. The College's South Gate Educational Center offers similar academic and student support for students to complete degrees and certificates. The College's foundation provides much needed additional financial support for student's basic needs in the form of scholarships, clothing, food vouchers, support for the Snack Shack, and other efforts on campus on campus to support diversity, equity, and inclusion.

# **Eligibility Requirements**

## **1. Authority**

ELAC provided evidence it is recognized as a college within the LACCD and the California Community College System and is thus authorized to operate as a degree-granting post-secondary educational institution. ELAC meets this eligibility requirement.

## **2. Operational Status**

The team confirmed that ELAC provides educational services leading to associate degrees and certificates. During the 2019-20 year, 1809 certificates and 3,082 degrees were awarded. ELAC meets this eligibility requirement.

## **3. Degrees**

ELAC's catalog outlines all state-approved associate degrees and certificates offered across its 59 programs. The majority of ELAC's offerings lead to an associate degree (local or AA/AS-T). The remainder lead to a certificate of achievement. Each program is two years in length. Except for any enrollment in non-credit or community service programs, ELAC's students are enrolled in these educational programs that lead to degrees/certificates. ELAC meets this eligibility requirement.

## **4. Chief Executive Officer**

Dr. Alberto Roman serves as the president and chief executive officer of ELAC. Dr. Roman was hired as the permanent president in July of 2020. Dr. Roman services on the executive leadership team of the Los Angeles Community College District (LACCD). Dr. Francisco Rodriguez serves as the chancellor of LACCD. Board Policy 2430 grants the chancellor administrative authority over the District. The chancellor delegates appropriate authority to the college president and holds them accountable for college operations and educational programs. ELAC meets this eligibility requirement.

## **5. Financial Accountability**

The institution has an independent auditor who conducts the annual external financial audits. The Los Angeles Community College District Board of Trustees receives and reviews the reports. ELAC meets this eligibility requirement.

## Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies

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

### **Public Notification of a Peer Review Team Visit and Third Party Comment: St 1**

#### **Evaluation Items:**

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

[Regulation citation: 602.23(b).]

#### **Conclusion Check-Off (mark one):**

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

#### **Narrative:**

The team found that ELAC and the South Gate Educational Center made an appropriate and timely effort to solicit third party comments in advance of a comprehensive evaluation visit starting before the Team ISER review through the March 2022 Focused Team Site Visit. The College cooperated with the Team in a collegial and accommodating manner throughout the comprehensive review process. The Team held an open forum and received feedback that was considered by the Team in the writing process and team visit.

## **Standards and Performance with Respect to Student Achievement**

### **Evaluation Items:**

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

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

### **Conclusion Check-Off (mark one):**

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

### **Narrative:**

ELAC'S data dashboards address course completion, success, and persistence across disciplines. The data is disaggregated and shared across the college. The College's student success data is available on ELAC's websites.

### **Credits, Program Length, and Tuition**

#### **Evaluation Items:**

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

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

#### **Conclusion Check-Off (mark one):**

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

#### **Narrative:**

The team confirms that ELAC meets the Commissions expectations for credit hours, program length, and tuition based on a review of ELAC's policies and procedures.

## **Transfer Policies**

### **Evaluation Items:**

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

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

### **Conclusion Check-Off (mark one):**

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

### **Narrative:**

The Team confirms that ELAC meets the ACCJC requirements regarding transfer policies and procedures.

## **Distance Education and Correspondence Education**

### **Evaluation Items:**

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

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

### **Conclusion Check-Off (mark one):**

|   |                                                                                                                                                              |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| X | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.                                    |
|   | The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended. |
|   | The team has reviewed the elements of this component and found the                                                                                           |

|  |                                                                            |
|--|----------------------------------------------------------------------------|
|  | Institution does not meet the Commission's requirements.                   |
|  | The college does not offer Distance Education or Correspondence Education. |

**Narrative:**

ELAC offers distance education options across its curriculum. ELAC has in place policies and practices designed to ensure DE offerings comply with Commission policies and are consistent in quality and appropriately support student needs.

ELAC requires training for faculty wishing to teach DE courses. Additionally, all courses with a DE component must have a curriculum committee-approved addendum that outlines how the course will meet certain standards, including regular and substantive interaction between faculty and students. ELAC has just begun an effort to have all DE courses POOCR-reviewed, which will enhance further their quality assurance efforts.

Evidence indicates DE courses are taught in a way that embeds regular and substantive interaction via various methods, thus complying with the Distance Education policy.

Provided evidence suggests ELAC's practices to verify that a student who registers in any course offered via distance education or correspondence is the same student who academically engages in the course or program are adequate. Students must log-in via the District portal with their student ID credentials to gain access to their specific course in Canvas.

**Student Complaints**

**Evaluation Items:**

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

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

**Conclusion Check-Off (mark one):**

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

**Narrative:**

The College meets the Federal Regulations and related Commission policies.

**Institutional Disclosure and Advertising and Recruitment Materials St 1C**

**Evaluation Items:**

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

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

**Conclusion Check-Off (mark one):**

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

**Narrative:**

ELAC' website provides up-to-date information on programs, locations, policies, and the college's accreditation status.

**Title IV Compliance****Evaluation Items:**

|   |                                                                                                                                                                                                                                                                                                                                                                                        |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| X | The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the U.S. Department of Education (ED). (Standard III.D.15)                                                                                                                                                     |
| X | If applicable, the institution has addressed any issues raised by ED as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements. (Standard III.D.15) |
| X | If applicable, the institution's student loan default rates are within the acceptable range defined by ED. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. (Standard III.D.15)                                                                                                                                             |
| X | If applicable, contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required. (Standard III.D.16)                                                                                                                       |
| X | The institution demonstrates compliance with the Commission <i>Policy on Contractual Relationships with Non-Accredited Organizations</i> and the <i>Policy on Institutional Compliance with Title IV</i> .                                                                                                                                                                             |

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

**Conclusion Check-Off:**

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

**Narrative:** The institution meets the Federal requirements as presented as well as the Commission's policies.

## **Standard I**

### **Mission, Academic Quality and Institutional Effectiveness**

#### **I.A. Mission**

##### General Observations:

East Los Angeles College (ELAC) has a strong commitment to its mission to improve student learning and achievement. ELAC utilizes data dashboards, program review, and other assessment tools to showcase its commitment to increasing student learning. The college uses both qualitative and quantitative data to assess goals related to student success and completion. Through an extensive PRPSE and AUP cycle, the college aligns its programs, services and resources toward its mission and institutional set standards. The mission is reviewed on a regular cycle and communicated widely.

##### Findings and Evidence:

ELAC's mission seeks to improve student learning and achievement (goal 1) by establishing clear goals around equity (goal 2), access and community support (goal 3), and institutional accountability (goal 4). The college has a number of planning tools to assess its mission. These documents include a Strategic Plan, Educational Master Plan, Technology Plan, and Facilities Master Plan. These plans outline the college's decision-making processes, resource allocation, and assessment tools to assess student learning and achievement. The college's mission seeks to increase the number of students pursuing educational, career, or personal development goals by offering associate degrees, opportunities for self-improvement, and civic engagement. The college's programs and services align with its mission to support student learning and achievement through data informed decision-making and ongoing assessment. (I.A.1, ER.6)

ELAC uses multiple data sources to assess the achievement of the college mission. Plan Alignment and Strategic Plan Scorecard maps the college's progress towards meeting Strategic Plan Goals. (I.A.2.)

According to the Governance Handbook "The ELAC Shared Governance Council (ESGC) serves as the central governing body for all planning decisions and makes recommendations directly to the college President as part of the shared governance process. In addition to the ESGC, the Strategic Planning Committee (SPC), Educational Planning Subcommittee (EPSC), Facilities Planning Subcommittee, (FPSC), Technology Planning Subcommittee (TPSC), Program Review and Viability Committee (PRVC), and the Budget Committee also play key roles in the development and implementation of the college planning agenda. The Office of Institutional

Effectiveness and Advancement (OIEA) facilitates the development of the college planning documents and assists in the implementation and evaluation of the planning agenda” (I.A.3.)

The College widely publishes its mission in places that are accessible to students, employees and the community. The college’s mission is updated periodically and approved by the District’s governing board. The mission statement is widely published via the college website and catalog. The mission is also posted in high-visibility areas throughout the campus. The mission was originally approved in 2015 and was recently reviewed as evidenced in ESCG’s 2019 and SPC’s 2021 respective meeting minutes. (I.A.4, ER.6)

#### Conclusions:

The College meets the Standard.

### **I.B. Assuring Academic Quality and Institutional Effectiveness**

#### General Observations:

ELAC’s demonstrates a firm commitment to academic quality and institutional effectiveness. The college has robust institutional dialogue around student equity, program review, course level assessments, ILO’s, and GELO’s. ELAC engages in thoughtful discussions on how best to increase student learning and achievement. The data dashboards are comprehensive and are able to disaggregate data by course and program in addition to identifying disproportionately impacted student groups.

#### Findings and Evidence:

ELAC demonstrates a sustained, substantive, and collegial dialogue regarding student success, student equity, academic quality, and continuous improvement. The college has a number of venues where dialogue regularly occurs, which include Closing Day activities and other campus discussions. Additionally, the campus community focuses on student equity in unique ways such as student self-evaluation and meetings devoted to addressing the college’s anti-racist agenda. The Learning Outcomes Assessment Report Card indicates that ELAC is focused on institutional effectiveness by clearly detailing where each instructional program falls in their assessment efforts. (I.B.1).

ELAC delineates assessment efforts for instructional programs and student services programs. Each group has access to an interactive website indicating outcomes for programs across the campus. The college provided evidence of several programs assessing their program level outcomes including Math, Psychology, Anthropology, Geology, and Geography. (I.B.2, ER.11).

ELAC assesses Institutional Set Standards (ISS) and results are posted on their website and data dashboards. ISS are displayed for 2015-2020 and results are listed on the data dashboards. The

data dashboards publicly convey ELAC's actual student achievement outcomes in relation to the ISS. (I.B.3, ER.11). For example, ELAC's Psychology program noticed that men were doing better than women in a particular class. Faculty used this data to take a deeper dive into challenges faced by women. This resulted in the program adding tutors in classes. (I.B.4)

ELAC utilizes program review, annual unit plans, institutional and programmatic goals, outcomes and assessments, and student achievement to assess its mission. Programs integrate qualitative and quantitative data in their Program Review Self-Evaluations (PRSE). (I.B.5)

The College's data dashboards disaggregate data by various subpopulations as well as by courses. Data dashboards allow users to drill down on disproportionately impacted groups. PRSE's and program disaggregated outcomes data reflect how programs assess outcomes. Evidence shows analysis of SLO data connects to goals and plans for improvement. When resources are needed to enact these plans, the institutional resource allocation process uses the learning assessment and program review data in the prioritization of resource allocations. Evidence also suggests the ensuing cycle of review and evaluation includes discussion of the efficacy of implemented/funded strategies. (I.B.6)

ELAC regularly evaluates its processes across the institution to ensure they are effectively supporting academic quality and accomplishment of the college mission. According to the Governance Handbook, the college addresses policies every seven years through its Strategic Plan, Educational Master Plan, Technology Plan, and Facilities Master Plan. The institution surveyed Annual Unit Plan (AUP) writers in all aspects of completing the document including the guiding questions to assess the effectiveness of the unit planning process. (I.B.7)

The Team confirmed that ELAC has processes in place to facilitate communication and create a shared understanding of the college's strengths and weaknesses. Their committee structure notes the specifics about representation, and committee representatives are expected to report out to their constituencies. ELAC broadly communicates the results of assessment and evaluation activities meeting minutes, program review documents, program status and dashboards. The assessment handbook indicates how each program assessing its outcomes. Committees are part of a self-evaluation process as well. (I.B.8)

ELAC engages in work to facilitate institutional effectiveness based on comprehensive program review, planning, and resource allocation processes. The college has extensive planning that involves faculty, classified professionals, supervisors, managers, and students in committees, planning and assessment. There is a clear commitment to family, community, collaboration in meeting the basic needs and success of their students. The college's documents show the presence of long-term goals and regular assessment. The college allocates resources to programs such as the Welcome Center, The Latina Transfer Academy, the Vincent Price Art Museum, Rising Scholars, the STEM Center, Professional Development Center, Basic Needs

Center, and other academic and student support services at the college. All of these efforts showcase a high level of compassion and care for how the college allocates its resources and assesses student success. (I.B.9)

#### Conclusions:

The College meets the Standard.

### **I.C. Institutional Integrity**

#### General Observations:

ELAC demonstrates truthfulness, fairness, and transparency in information provided to students, and the community. The College provides information about its mission, outcomes, programs, services, and accreditation status, and maintains clear online and printed materials.

#### Findings and Evidence:

ELAC provides accurate information to its students and community through online and printed materials. The mission and goals are included in the catalog and planning documents. ELAC's Vice President of Instructional Services reminded folks to review their online materials for accuracy. (I.C.1, ER.20)

ELAC's college catalog is available online and in print; it is thorough, complete and provides all required policies, procedures, and requirements. (I.C.2, ER.20)

ELAC communicates student achievement to current and future students through data dashboards, some of which specifically focus on course retention, success, and disproportionately impacted students and their relative retention and success rates. Annual Unit Plans are made available on SharePoint. AUPs integrate PLOs and assessments are performed on a regular cycle. (I.C.3, ER19)

ELAC provides detailed information about its degrees and certificates in the college catalog and on department and program websites. The college's catalog and website provide detailed descriptions of the college's certificate and degree programs. The college also provides information about its Guided Pathways on its website. (I.C.4)

The College maintains integrity within its policies, procedures, and publications through the East Los Angeles Shared Governance Council (EGSC). The Shared Governance Handbook states, "The East Los Angeles Shared Governance Council (ESGC) is the college's central governing body. Its charge is to ensure the implementation of shared governance on campus by ensuring the representation and involvement of all groups and constituencies in the development of

policies in a participative, objective, and constructive manner...The ESGC focuses on providing the President with advice and recommendations on a variety of policy matters regarding academics, business, and personnel. These matters also include processes for institutional planning and budget development.” (I.C.5)

ELAC informs students and prospective students regarding the total cost of education. The college catalog includes fees. ELAC’s website includes a net price calculator for the cost of education. Students can determine cost of textbooks by using the website for ELAC’s bookstore. (I.C.6)

ELAC assures institutional and academic integrity through BP 4030 which states, “Academic freedom is defined as the freedom to teach, learn, research, and express one’s views without fear of sanction, whether such expression takes the form of speech, writing, electronic communication, or the like, and whether it occurs on campus or off campus”. The policy is published in the catalog and the Faculty Handbook and is covered in the faculty contract. (I.C.7, ER.13)

ELAC ensures honesty, responsibility and academic integrity through BP 4030 and BP 5500 as documented publicly on BoardDocsPlus. The Faculty Handbook identifies items to be included in syllabi, which includes attendance/tardy policy, and academic honesty policy grading criteria/percentage/points among other items. (I.C.8)

ELACs’ Academic Senate maintains a Faculty Ethics Policy that addresses academic freedom and as well as the responsibility to distinguish professionally accepted views within a discipline from personal conviction. (I.C.9)

ELAC does not require staff, faculty, administrators, or students to adopt a specific code of conduct, belief, or world view. (I.C.10)

ELAC does not operate in foreign locations. (I.C.11)

ELAC complies with the Eligibility Requirements, Accreditation Standards, Commission policies, guidelines, and requirements for public disclosure as evidenced by the information posted on the accreditation webpage. The College is responsive in a timely manner to the Commission’s directives and requirements, and posts all official correspondence, including mid-term reports, follow-up reports, the Institutional Self Evaluation Report (ISER), and the third-party comment form and complaint policy on the College’s Accreditation Webpage. (I.C.12, ER.21)

ELAC demonstrates that it operates with honesty and integrity in its relationships with external agencies. The College adheres to regulations and statutes as detailed on its accreditation website and college catalog. On various program webpages, such as Nursing (BRN), Respiratory

Care (COARC), Health Information Technology (CAHIIM), and Automotive (ASE), the respective accreditation agencies are listed. The Nursing program provides evidence of changes in status; the program was previously on warning, but the Board of Registered Nursing (BRN) allowed a cohort of 20 students. (I.C.13, ER.21)

ELAC does not generate a return for financial investors or support external interests. (I.C.14)

Conclusions:

The College meets the Standard.

## **Standard II**

### **Student Learning Programs and Support Services**

#### **II.A. Instructional Programs**

##### General Observations:

ELAC offers quality instructional programs in line with common standards of higher education, CA law, and Federal requirements. ELAC has an extensive program review procedure and an impressive Learning Outcomes Committee and is striving to offer a quality higher education experience to a wide range of students with a focus on program completion and student support.

##### Findings and Evidence:

Based on a review of the General Catalog and AP 4015 the college is providing instructional programs that “are appropriate to higher education and culminate in student attainment of identified student learning outcomes, etc.” The Catalog lists Student Learning Outcomes for courses and programs. Based on review of AP4022 and 4023 the Curriculum Committee at ELAC is responsible for oversight of instructional programs to ensure appropriate rigor and connection to the college’s mission. (II.A.1, ER.11)

The Curriculum Committee, a subsidiary of the Academic Senate, is responsible for oversight of courses and programs and reviews them for both academic integrity and modes of instruction. ELAC notes that it is transitioning to new software for Curriculum and is aware of the need to update the Curriculum Committee Handbook. This update is included in ELAC’s internal Improvement Plan, and the newer software will “strengthen the curriculum approval process.” A review of course outlines of record include Student Learning Outcomes and East Los Angeles College has a robust and well-defined Program Review system which includes assessment of student learning outcomes and is focused on using this data to identify factors affecting student success and addressing areas of trouble. (II.A.2)

ELAC requires that all students are provided a syllabus for every course, that all syllabi include approved student learning outcomes for that course. This is required as an element of faculty evaluation. As a segment of their Improvement Plan, the Learning Assessment team is planning to develop an “annual report” to make sure that up to date CLOs are present in all syllabi. ELAC has an impressive Learning Outcomes Assessment Handbook with established policies and procedures outlining a three-year cycle for assessment of student learning outcomes, development of improvement plans, implementation, and reassessment. ELAC also provides

“Learning Outcomes Facilitators,” with required training and compensation, to each department to assist with this work. (II.A.3)

ELAC clearly defines pre-collegiate course offerings and distinguishes them from college level curricula using clear labeling in the General Catalog to define “Non-degree Applicable” or “NDA” courses and “continuing education” or CE courses. CE courses are also listed in a separate section of the Catalog. In response to AB705 and new requirements for Math and English courses regarding pre-collegiate level courses, ELAC has developed a series of responses including courses offered “with support” and “CE” courses designed to help students achieve collegiate preparedness. (II.A.4)

The team finds that ELAC’s degrees and programs meet common expectations for American higher education as shown by AP 4100 requiring 60 semester units with 18 units in the field of study to complete an AA. (II.A.5, ER.12)

ELAC offers a wide variety of classes in multiple modalities, locations, and times of day including morning, afternoon, evening, and weekend, and in different lengths such as “late start” to assist students in the completion of their course of study. ELAC offers a “Scheduling Considerations and Tools” feature to support departments in reviewing how students are working their way through programs of study and how best to schedule to assist in student completion. ELAC is also using its “Career and Academic Program” maps as a schedule guide for the completion of specific programs of study. (II.A.6, ER.9)

ELAC recognizes that post-pandemic a greater number of courses have been offered online than previously and in response to this growth requires instructors to complete two courses before teaching online. All online courses undergo Curriculum Committee review of their DE addendum which is required to “provide examples of teaching methodologies” and “samples of regular, substantive interaction”; this practice is reasonable with the stronger online course presence. ELAC also references the use of “data dashboards” to “analyze retention and successful course completion” and disaggregates by delivery mode at multiple levels. Team review of the data dashboard suggests both distance education and in-person delivery modes in aggregate meet the institution-set success rate of 63%. As noted by ELAC, success remains uneven, particularly for certain ethnic groups, not all of whom are meeting that institution-set success rate across the curriculum. (II.A.7)

ELAC has developed a robust Credit for Prior Learning policy. The section of the Credit for Prior Learning policy based on “direct assessment” appears to be based on the District level acceptance of CLEP testing. The only ELAC department that relies on a “department-wide” examination is Nursing. The exams used are validated by the Chancellor’s Office and determine readiness for the outside Nursing examination NCLEX-RN. (II.A.8)

Course Outlines of Record address grading, credit hour, and awarding of credit policies for courses at ELAC. Credit hour and grading policies are in alignment with higher education standards and state and federal regulations. (II.A.9, ER.10)

ELAC has an online Transfer Center to support students in transferring to other institutions. ELAC's policies regarding the transfer of credits are available online and in the General Catalog. Courses are evaluated for transfer by the Articulation Officer, and where relevant, discipline faculty. ELAC has articulation agreements with both in and out of state universities. (II.A.10, ER.10)

ELAC has program, general education, and institutional-level student learning outcomes. These outcomes are publicized in the General Catalog and are mapped in Elumen to demonstrate the link between course-level outcomes and program, general education, and institutional-level outcomes. These outcomes connect to the required competencies for this Standard. (II.A.11)

ELAC's Board Policy 4025 describes ELAC's philosophy in general education and awarding of Associate Degrees saying, "Central to an Associate degree, general education is designed to introduce students to the variety of means through which people comprehend the modern world. It reflects the conviction of colleges that those who receive their degrees must possess in common certain basic principles, concepts, and methodologies both unique to and shared by the various disciplines." This philosophy supports the development of an educationally well-rounded individual exposed to various relevant academic subjects and developing the skills to be an active and informed citizen and learner in line with the requirements of this standard. The curriculum committee, as a faculty-based committee, under the Academic Senate is responsible for determining course inclusion in general education requirements. (II.A.12, ER.12)

The team finds that ELAC's degree requirements meet those of the standard. (IIA.13)

ELAC has a number of CTE degrees and certificates including Nursing, Automotive, Respiratory Therapy, and Fire technology among others. Many of these are overseen by outside regulatory agencies to ensure graduates are meeting industry requirements. CTE programs have advisory committees to help guide students into the field and ensure that completing students have the skills needed to be successful. Pass rates for outside licensing exams are available on the college website. The ELAC Nursing program is listed on their website as in "warning status" suggesting that there have been previous issues with meeting outside requirements, but also notes that they are now enrolling a new class suggesting these challenges have been met. (II.A.14)

ELAC follows District level policy when considering the viability of programs. When programs are considered for termination students enrolled in the program are contacted and attempts are made to provide alternative methods for teaching them out. This can be seen in the case of the Electron Microscopy Tech program where repeated attempts were made to contact

enrolled students and to find out what their outcomes were, where they were in the program and what needs they had before decisions were made regarding closing the program. (II.A.15)

ELAC uses a Program Review Self-Evaluation (PRSE) process which is designed to, “utilize achievement and learning outcomes data as an opportunity to plan, implement, evaluate, and improve”. The process appears to be well established in ELAC’s policies and procedures and the provided departmental PRSE’s show amazing achievements and ambitious goals. The team also noted throughout the ISER ELAC’s emphasis on using data to make decisions. Within the PRSE there are references to using “equity tools” and “gender tools” for evaluation of student success and retention which suggest that faculty are making use of this data. (II.A.16)

#### Conclusions:

The College meets the Standard.

### **II.B. Library and Learning Support Services**

#### General Observations:

ELAC supports student learning and achievement by providing library and learning support services aligned with the College’s mission. These services are sufficient in quantity, currency, depth, and variety to support educational programs and student achievement in-person and online. The libraries and learning support centers use established processes to guide the selection and maintenance of educational materials, equipment, and services. Further assessment of resources and services are collected from student and faculty surveys which is then used to improve the quality of services offered. Library and learning support center staff rely on the expertise of and collaboration with instructional faculty and district colleagues to select and provide educational equipment, software, and materials to support student learning and achievement. The future completion of the South Gate Educational Center in 2023 will further expand support and service offerings to students.

#### Findings and Evidence:

East Los Angeles College and the South Gate Educational Center demonstrates that the libraries and learning support centers provide sufficient services, materials, and equipment to all students on the Monterey Park and South Gate campuses. The libraries offer access to print books, textbook collections, print periodicals, and research databases (articles, streaming videos, and eBooks). Research assistance is available in-person and online as well as chat service which is 24/7. The Library also provides ready-made research modules in Canvas that faculty can import into their courses. The College offers various tutoring services through The Learning Center, the Math Lab, the Reading and Writing Lab, and the Language Lab. Learning Center staff regularly collaborates with faculty to provide embedded tutoring services for some

courses. In addition to offering tutoring services to students in all math classes, Math Lab also provides access to textbooks, calculators, math software, and computers. Language Lab offers tutoring services for all modern language classes as well as ESL courses (both credit and non-credit). The learning support centers are also accessible for students in need of assistive technologies through DSP&S. During the pandemic, all student support services are now also available online. The team was impressed with the robust services and community at the South Gate Educational Center, and we encourage ELAC to update their website to make it easier to locate information about the South Gate Educational Center and better reflect the services available to students at the Center. (II.B.1, ER 17)

The College relies on the expertise of its faculty, librarians, and learning support services staff for the selection and maintenance of educational resources, equipment, and materials. The Library has a mission-centric collection development policy that supports the academic curriculum and programs, and faculty teaching and student learning at the college. The Library engages with faculty to grow and maintain resources in the collections through the use of online request forms. Computers throughout the libraries are also equipped with assistive technology software to support all students and staff with disabilities. The learning support centers collaborate with instructional faculty and district colleagues to provide and maintain equipment, software, and learning materials that support student learning and success (II.B.2)

The Library and learning support centers have established practices for evaluating their services through Annual Update Plans (AUP) and scheduled Program Review Self-Evaluations (PRSE). The Library aligns Student Service Outcomes and Course Learning Outcomes to the AUP to set goals. Through collaboration with the Learning Assessment Office, the Library has also developed formal assessment plans. The learning support centers follow assessment cycles and develop plans linked to Student Service Outcomes. The Library and learning support centers also use surveys to assess student and faculty needs. Feedback from past surveys have resulted in improvements in services, materials, and spaces (II.B.3)

The Library and learning support centers secure, maintain, and evaluate formal agreements and memberships with external partners to provide support for student learning and achievement. The South Gate Educational Center has similar efforts to ensure that students have access to library services and resources that are found at the main campus. Students can borrow items through the LACCD intra-library loan program which provides access to resources and materials that the college does not carry. District Library department chairs regularly review the reciprocal borrowing agreement to make sure they continue to improve and provide optimal access and services for intra-library loan. The Library also maintains a mutual use agreement with California State University, Los Angeles to provide students with a wider range of content and resources. As a member of the Chief Council of Librarians and the Community College Library Consortium, the Library acquires online research databases and receives access to the statewide Library Services Platform provided by ExLibris. The learning support centers collaborate with other directors within the district to implement common standards for effective practices and policies for tutoring. This collaboration has resulted in the recent purchase of common software Penji, which is an interface used for coordinating

communications and scheduling appointments between learning centers and students (II.B.4, ER 17)

Conclusions:

The College meets the Standard.

**II.C. Student Support Services**

General Observations:

East Los Angeles College's mission serves as the undergirding for student support services. The college offers comprehensive student supports services aligned with the college mission. Programs and services are all assessed for quality and effectiveness through a variety of methods including surveys, Student Service Outcomes (SSO) assessment and the college Program Review Self Evaluation (PRSE) process. The college provides equitable access to student support services in all locations and online and assesses access. Co-curricular offerings are aligned with the college mission. The college adheres to Board Policies and Administrative Procedures in student support offerings across the college and in all locations.

Findings and Evidence:

The Peer Review Team reviewed evidence and found that ELAC's student support programs regularly review and evaluate for quality and effectiveness and alignment with the college mission. The South Gate Educational Center has similar efforts in place that seek to mirror the approaches that are found on the main campus. The College utilizes the Program Review Self-Evaluation (PRSE) process to assess student support services.

The College's six-year Program Review Self-Evaluation (PRSE) cycle includes a comprehensive review along with Annual Update Plans (AUP). Regular SSO assessments are evaluated along with department and other periodic division or college wide surveys. Both the PRSE and AUP processes include analysis of numerous points of service surveys adhering to the student service outcome cycles. During the PRSE process, each student services units are required to demonstrate alignment with the College mission and goals, in particular goal #1: Increasing student success and academic excellence through student- centered instruction, student centered support services and dynamic technologies. The PRSE process has led to increased staffing such as an additional full-time counselor in the Veteran Resource Center to support remote service to students. Examples of assessment and the PRSE cycle include the Counseling, DSPS and VRC PRSE for 2021-2027. (II.C.1, ER.15)

The College's student support services units utilize AUPs and PRSEs to document student services outcomes assessment to improve student support programs and services. In addition to unit AUPs, the student services division completes a Cluster Update Plan (CUP) to provide a holistic view of overlapping needs across units by analyzing needs, goals, and resource allocation priorities to improve services. Evidence of Student Services Outcomes (SSOs) assessment are provided in the Admission and Records, Counseling, and Financial Aid AUPs for 2021-22. In addition, the Student Services Cluster Update Plan (CUP) was provided as evidence of a holistic view of annual assessment and evaluation leading to resource allocations. (II.C.2)

The College provides equitable access to services by documenting them in the College Catalog which includes descriptions, physical locations, websites and contact information. Services at the South Gate Educational Center could be better highlighted on the College's website. Online and remote services were bolstered during the pandemic and all services are now available in person and remotely. Students can ride a bus between the main campus and the South Gate Educational Center to ensure access to support services are complemented in both locations. Evidence provided includes the college webpages for counseling, DSPS, EOPS, Transfer Center and the VRC. Additional evidence included the ELAC Counseling and Transfer Center YouTube Channels. Data described as evidence included the Counseling department PRSE with satisfaction data. (II.C.3, ER.15)

ELAC co-curricular programs include Athletics Program and Associated Student Union (ASU) and the Inter-Club Council (ICC). ELAC co-curricular programs adhere to LACCD S-9 requirements detailing student eligibility and college bylaws and Board Policy. Each co-curricular program is aligned with the mission and goal #3: community-centered access, participation and preparation that improves the College's presence in the community. The College has fiscal and programmatic responsibility and co-curricular programs are integrated into the college budget process through the PRSE cycle. (II.C.4)

ELAC provides counseling and academic advising programs to orient and advise students on program requirements and graduation and transfer policies. These services are also present at the South Gate Educational Center. Counseling and advising are available face to face and in online formats. Faculty and staff receive periodic PeopleSoft training to ensure students receive accurate information. The ELAC Counseling department works closely with instructional faculty through the liaison structure. This partnership enhances the accuracy of information provided to students regarding the Career and Academic Pathways (8 meta majors). The College advises students on clear pathways to complete degrees, certificates, and transfer goals through a variety of methods including through workshops as evidenced in this standard. (II.C.5)

The team confirmed that the College adopted and adheres to admission, graduation, and transfer policies consistent with the college mission and that conform to Board Policy. ELAC has open enrollment policies, however special admissions including K-12 are detailed in the Catalog and Board Policy. ELAC established eight meta-majors or Career and Academic Pathways (CAP) to define and advise students on clear pathways to degree, certificate, and transfer completion. The CAPs are integrated into the college MyPath portal for student access and are published and available for students. (II.C.6, ER.16)

ELAC regularly evaluates admissions and placement practices to validate their effectiveness. The College adheres to AB705 changes in assessment practices and offers a Math, English, and ESL self-placement that is evaluated and validated through the College Office of Institutional Effectiveness and Advancement (OIEA). Evidence includes data for student success rates for English and transfer level Math courses. (II.C.7)

ELAC has established processes to ensure maintenance of records permanently, securely, and confidentially with a secure back up plan. The college adheres to Board Policies and Administrative Procedures. In addition, the Catalog details policies and procedures related to student records and confidentiality. Documents are scanned and stored in the college ViaTron Imaging system or Campus Logic. Hardcopies are stored in a fireproof and waterproof location in Admission and Records. The online District Information System (PeopleSoft) is secured with firewalls and employee and student specific login with access based on classification. Release of information practices adhere to Board Policy and Administrative Procedures requiring written consent by students. Financial Aid follows Title IV document storage requirements. (IIC.8)

### Conclusions:

The College meets the Standard.

## Standard III

### Resources

#### III.A. Human Resources

##### General Observations:

The institution has policies and procedures for all employees to follow and periodically reviews these policies and procedures. Required employee qualifications are verified through a robust vetting process and the hiring of employees is supported with onboarding and training plans. The College has planning processes in place to determine staffing levels and the resources that will be provided for college staffing. Faculty, staff, and administrators are evaluated annually, with a system in place to track the completion of evaluations. The College has an Ethics Policy that recently underwent review and was updated by the Academic Senate in 2018.

##### Findings and Evidence:

The Human Resources (HR) Department is responsible for hiring all personnel and has HR guides for the hiring of faculty and administrators. The HR Department has minimum qualifications stated in each job description and measures each candidate's qualifications against this. The HR Department asks each candidate to provide evidence of meeting the qualifications and criteria required. (III.A.1)

HR Guides are well crafted documents that outline the expectations and processes for selecting qualified candidates. The HR Department has minimum qualifications stated in each job description and measures each candidate's qualifications against this. The HR department asks each candidate to provide evidence of meeting the qualifications and criteria required for the position of interest. LACCD has a well-defined process for developing and posting positions and certifying minimum qualifications have been met prior to the offer of employment. (III.A.2, ER.14)

Employees and administrators meet the Colleges' qualification requirements and are vetted by multiple entities during the process to validate adequate qualifications prior to making formal offers to candidates. (III.A.3)

Candidates for consideration must possess the required qualifications and the College ensures that degrees held by faculty, administrators, and other employees are from institutions accredited by recognized U.S. accrediting agencies. Degrees from outside of the United States must undergo an evaluation through an approved foreign evaluation agency. (III.A.4)

ELAC has a formal process for performance evaluation that is published and distributed at the campus level. Probationary tenure track faculty are evaluated in each of their first four years, and once every three years following the granting of tenure. Part-time faculty are evaluated before the end of their second semester of employment and at least once every six semesters of employment thereafter. The College has taken action to complete all past due evaluations by December 21, 2022, and evaluations were completed at 90% at the time of the Focused Site Visit with firm structures in place to continue to complete timely evaluations. (III.A.5)

(III.A.6) Is no longer applicable.

The College utilizes a prescriptive process including an annual review of staffing to assess adequacy of faculty positions and make recommendations to the Human Resource Committee for review and prioritization as needed. Each department or unit has the opportunity to provide feedback and substantiate the need for new faculty hires. (III.A.7, ER.14)

The College provides a range of activities to onboard part time and adjunct faculty directed by the Office of Professional Development. The College also has a professional development website to support adjunct and part time faculty. Additionally, the College offers the 10-month New Faculty Institute and offers an opportunity to connect with colleagues and fosters community building within and across disciplines. (III.A.8)

The evidence suggests the college has sufficient and qualified staff to adequately support the operation of the institution in the fulfillment of its mission and has review processes in place to verify sufficiency and make requests for additional allocations. (III.A.9, ER.8)

The College has a Budget Allocation Model that is used to determine funding requirements for a baseline number of administration and personnel. Evidence indicates a sufficient number of qualified administrators are in place. (III.A.10, ER.8)

The College grants access readily to well-established HR protocols, collective bargaining agreements, and employee forms by posting them on the HR website. Evidence indicates policies are administered consistency. (III.A.11)

The LACCD advocates for diversity in its hiring and training of personnel through the use of its Equal Employment Opportunity Plan chaired by the Director of the Office of Diversity, Equity and Inclusion. The HR Department collaborates with the Office of Diversity, Equity and Inclusion to ensure all aspects of the screening and selection process of employees are fair and equitable. The Chancellor has established advisory committees to include many ethnic communities to discuss policies and procedures related to equity and diversity with faculty, staff, administrators and students. (III.A.12)

The college maintains an Ethics Policy, which is periodically reviewed and updated by the Academic Senate, most recently in 2018. (III.A.13)

The College offers employees a significant number of training opportunities and professional development opportunities. The Professional Development Office is charged with assessing and meeting the training and development needs of all employee groups and is well-utilized by faculty and staff across the institution. (III.A.14)

The HR Department stores personnel files in a secure location and only grants access to those employees who are designated HR employees. All requests for reviewing personnel filings must be made in writing. (III.A.15)

#### Conclusions:

The College meets the Standard.

### **III.B. Physical Resources**

#### General Observations:

The District and College, working collaboratively, assures its facilities are safe and sufficient. The District and College takes efforts to ensure that facilities are constructed and maintained to assure access, safety, security, and a healthful learning and working environment. The District and College plans, acquires or builds, maintains, and upgrades or replaces its physical resources which includes facilities, equipment, land, and other assets, in a manner that assures effective utilization and continuing quality necessary to support its programs and services. To assure the feasibility and effectiveness of physical resources in supporting College programs and services, the College plans and evaluates its facilities and equipment on a regular basis, taking utilization and other relevant data into account.

#### Findings and Evidence:

The assurance of safe and sufficient physical resources is the responsibility of both the District and College. The District assists the College with the facilities planning, capital improvements, higher cost deferred maintenance and developing District-wide standards. Facilities planning and capital improvements are tracked in the Fusion system where the facility condition index (FCI) and all Final Project Proposals (FPPs) submitted to the state are maintained. The College uses the Program Review Self-Evaluations (PRSEs) and Annual Unit Plans (AUPs) to guide decisions related to those previously mentioned and to guide the decisions made on local scheduled maintenance projects.

The College uses various methods for assuring access, safety, security and a healthful learning and working environment. An American with Disabilities Act (ADA) transition plan is in place and used in conjunction with other previously mentioned planning documents to prioritize and schedule projects identified in that plan to assure access and safety in the existing buildings. The College uses many methods to track maintenance on equipment such as safety records, maintenance contracts and site inspections with their Work Environment Committee (WEC). The WEC submits recommendations from these walks or for situations such as COVID. (III.B.1)

Both the District and College use their respective Facility Master Plans (FMPs) to guide decisions related to acquiring, building and planning for new facilities. The Five-Year Construction Plan located within Fusion maintains those plans. The FMPs have the goals and mission of the college as well as the stated outcomes from the Educational Master Plan (EMP). The PRSEs and AUPs provide much guidance and help with the prioritization process as they outline departmental needs. This was demonstrated with a review of all documents stated and minutes from committees with constituent groups in attendance. (III.B.2)

The College uses the recommendations from constituency groups to develop a Facilities Master Plan. There is a flow chart and instructions outlining the process that is clear. This starts the College's process for requesting new buildings or facilities updates that require district support. Some sources of information used include the capacity-to-load ratios and space inventory reports, as well as all of the documents mentioned above in Standard III.B.2. Surveys conducted by the WEC and walk-throughs conducted in conjunction with administration periodically help ensure a healthful learning and working environment. (III.B.3)

The District's Board of Trustees (Board) has a Facilities Master Planning and Oversight Committee (FMPOC) that reviews and adopts any revisions to the FMP. Recommendations for the Five-Year Construction Plan are derived from this process. There is a process in place for new buildings that requires the calculation of the total cost of ownership which includes administrative, instructional, personnel, and maintenance costs for decision making purposes. The District and College have policies and procedures in place to guide long-term decision making. (III.B.4)

#### Conclusions:

The College meets the Standard.

### **III.C. Technology Resources**

#### General Observations:

The College and the District, working collectively, provide and maintain effective technology resources in the form of facilities, hardware, and software to support the College's programs and services. The College, in conjunction with the District, effectively plans for regular updates

and replacement of technology in support of the College mission, operations, programs, and services. Technology resources at all College locations have reliable access, safety, and security. Professional development and support are provided to staff, faculty, and administrators to promote effective technology use. Finally, codified policies and procedures guide the appropriate use of technology in teaching and learning.

#### Findings and Evidence:

The District and College provide sufficient technology services, professional support, hardware and software appropriate and adequate for the management and operational functions, academic programs, teaching and learning and support services as demonstrated by the evidence provided. A third-party evaluator made recommendations that have provided guidance on the operations of the department and helped the College move to a shared services model.

The College has a dedicated team to serve the local needs of students, staff, and faculty. This team, led by a local manager, supports a large network of wireless access points, network switches, firewalls, and IP addresses. The resources are sufficient to support the needs of the College. (III.C.1)

The College has an updated Technology Master Plan (TMP) that is directly linked to the District Strategic Plan and contains strategic priorities that support the District and College's mission, operations, programs, and services. The priorities are outlined on a roadmap and monitored with a dashboard. There is a clear process that includes discussion of resources outlined for potential new projects embedded in planning structures.

The Information Technology Faculty Advisory Committee (ITFAC) conducts surveys about technology use, support, and planning at all campuses associated with the College. The information received from these surveys informs the TMP. Evidence shows the campus has invested in technology improvement. (III.C.2)

The College maintains a detailed fixed asset report with the status of equipment to properly maintain and refresh equipment in a timely manner according to established protocols. Backup and disaster protocols are outlined in Administrative Procedure 3724 for implementation should an event impact any of the Tier 1 technology systems identified. In this case, the Disaster Recovery and Business Continuity Plans would also be triggered to maintain services for the College and District connections. (III.C.3)

The College uses a variety of resources to train end users on technology, such as the Vision Resource Center and courses offered at the East Los Angeles College Distance Education and Profession Development departments. Faculty are required to complete training to be Distance Education (DE) certified, as evidenced by a past training schedule. The IT department also

provides links to updated informational resources regarding technology use. Further, additional resources are added when identified and supported through the PRSE process. (III.C.4)

A secure computing environment is regulated by Board Policy 3720 along with the various District and College standards, which include standards for cabling, technology equipment rooms, end user computing, and instructional classroom audio-visual equipment. The adherence to these standards helps to ensure the College maintains adequate and reliable services. (III.C.5)

#### Conclusions:

The College meets the Standard.

### **III.D. Financial Resources**

#### General Observations:

The District's and College's financial resources are sufficient to support and sustain student learning and support services. The College dedicates sufficient resources to assess and improve institutional effectiveness. The College's financial health and related processes are regularly communicated to the campus and constituency groups via committees, newsletters, updates from the College president, and other widely shared communications. The College's distribution of resources supports the mission and the development of programs and support services that seek to improve student success. The College and District plans and manages financial resources with integrity and in a manner that ensures financial stability. The College's mission and goals are the guiding force behind the College's integrated planning which includes financial planning. The internal control structure is evaluated both internally and externally as part of the internal audit review process and external audit review process conducted by an independent certified public accounting firm. Sufficient reserves have been established and continuously increased to meet one month of operating expenses in order to maintain fiscal stability and funding for liabilities and future obligations. The College ensures compliance with federal requirements including Title IV of the Higher Education Act.

#### Findings and Evidence:

The District Allocation Model was approved by the Board of Trustees in September 2019 and is designed to distribute general fund unrestricted resources and aligns with the State's Student-Centered Funding Formula. The Budget Allocation Model is a timeline that is followed for preparation of the budget, this was approved by the Los Angeles Community College District Budget Committee May 2019.

The District follows Administrative Procedure 6305 that requires the District to maintain a general reserve of six and a half percent (6.5%) and a contingency reserve of three and a half percent (3.5%). In February of 2021 the District provided to the Board the last several years of financial condition that indicated that the District maintained an ending balance ranging from 17% to 21%. This was presented in the Quarterly Financial Status Report, CCFS – 311Q for December 2020.

Special funding was established to support educational priorities. An example of this is the Racial Equity and Social Justice efforts. The document for action is presented along with documentation in the 2021-22 Centralized Accounts in the amount of \$2.5 million. Support for the LA College Promise program is presented in the Financial Status of Special Funds as of year-end 2021 close. The amount of allocation to East Los Angeles College is supported by documentation. The unrestricted budget of \$135,273,956 for the College is provided in 2021-2022 Final Budget Assessment and Adjustment Detail. (III.D.1, ER.18)

The budget development process used by the College is widely distributed to all constituency groups to ensure the steps taken to build a budget are known. These steps are reviewed and updated on a regular basis. The Budget Allocation Model is used by the District is used to provide projected revenues and budgets. After the College budget is finalized, it is presented to College groups and District groups based on the governance structure. Financial planning is followed by the Annual Update Plan (AUP) and the AUPs help support any position requests for faculty, which are reviewed by the Hiring Prioritization Committee and prioritized by the Human Resources Committee. (III.D.2)

The District and the College have a process for budget development which includes the District budget calendar. The District budget calendar is updated annually and approved by the Board. The evidence for making sure the process is known by College parties is that the Budget Committee membership represents the different constituency groups Also, based on the Governance Policy Handbook and campus constituencies are able to offer input into budget allocation.

The bylaws of the College Budget Committee indicate that voting representation from administration, faculty, classified supervisors, classified staff and Associated Student Union. An example of broad participation is when a survey was conducted to see how the Federal HEERF funds should be used, and this was presented at the College's Shared Governance Council May 2021. (III.D.3)

The District indicates that budget planning is a realistic assessment of financial resource availability. The District requires any college showing a budget deficit to create a corrective action plan. The college is reviewed by a Fiscal Intervention Team in which recommendations for improvement are given. The minutes of the College Budget Committee illustrated that the

meeting covered topics such as the budget forecast, HEERF funds update, and the budget review process. This indicates that the constituency groups of the College are involved in all areas of the use and stewardship of the College's financial resources. (III.D.4)

The District provides documentation that shows it is responsible for the use of its financial resources by disseminating dependable and timely information. The Budget Allocation Model is used to develop District and college budgets. The Office of Budget and Management develops districtwide revenue projections and is responsible for management of District resources as documented in technology reviews and review of financial plans.

The District uses a budget development calendar which promotes the engagement of all constituency groups. The College follows the policies and procedures of the District. The Procurement Audit Report as of December 31, 2014, demonstrates the goal of reviewing the procedures used for purchases at the College. (III.D.5)

The District follows a set budget development calendar which the colleges, Board of Trustees and District office staff are involved in. The Finalized District Budget is presented to each college's Budget Committee, The District Budget Committee and then to the Board. Full engagement by constituency groups is ensured.

The District disseminates and trains employees to use its "Budget Operational Plan Instructions" manual to reinforce internal control procedures. The Independent Auditor's Report for the fiscal year June 30, 2022, presents the financial statements of the District as a whole. (III.D.6)

The Independent Audit Report as of June 30, 2021 was presented to the Budget Finance Committee, District Budget Committee, Board of Trustees, and the Chief Financial Officer. The most recent audit report and the last several audit reports all had unqualified opinions. BP 6400 Financial Audits is followed. Corrective action plans for all audit findings are tracked by the Office of the Chief Financial Officer. This is to ensure that the findings are addressed in a timely manner.

The District audited financial statements includes the financial statements of the College. The District audit shows ELAC having an ending balance of approximately \$10 million dollars and longstanding reserve of nearly \$25 million dollars that is unique to the College. (III.D.7)

The District's internal control systems are evaluated and assessed for validity and improvement. The evidence is provided in the Schedule of Audit Department list. When deficiencies are found, the District implements corrective action. The District's financial and internal control systems are evaluated and assessed annually by external auditors. The District's internal control policies and procedures are regularly evaluated and monitored at the College. (III.D.8)

The District's Administrative Procedure 6305 provides that the District is to maintain a general reserve of six and a half percent (6.5%) and a contingency reserve of three and a half percent (3.5%). In February of 2021 the District provided to the Board the last several years of financial condition that indicated that the District maintained an ending balance ranging from 17% to 21%. This was presented in the Quarterly Financial Status Report, CCFS – 311Q for December 2020. Two major credit rating firms have given the District an AAA grade and an AA+ grade based on the fiscal stability of the District.

The District has established accountability at the college level through its Debt Policy to ensure that each college is operating within its budget. When a college spends beyond its allocated budget, the District conducts detailed reviews to ensure appropriate measures are undertaken to support continued fiscal stability. Various insurance coverage types are purchased, and the types, limits, and deductibles are regularly evaluated. (III.D.9)

The District has the following Board Policies; BP 6200 Budget Preparation, BP 6250 Budget Management, BP 6300 Fiscal Management, BP 6400 Financial Audits, BP 6410 District Audit Charter. The District has not had any compliance findings in the last several years. The District has a Central Financial Aid Unit based on BP 5130 and AP 5130 Financial Aid, that oversees the financial aid program.

The College Bookstore and the District Foundation are audited regularly. The East Los Angeles College Foundation July 2022 audit report reviewed the fiscal years 2021 and 2020, finding net assets and its cash flows were in accordance with generally accepted accounting principles. Additionally, the College Bookstore was audited in 2018 with similar findings. All audit reports are presented to the administration in case of compliance issues. (III.D.10)

The District prepares five-year forecasts of revenues, expenditures and fund balances which the Budget and Finance Committee reviews. Colleges are provided allocations based on the Budget Allocation Model. Colleges then use the projections to prepare college-level budgets. The District reviews the liability from faculty load banking based on information provided by the colleges.

The District reports as of June 30, 2021, that working capital was \$359,925,546 and cash and cash equivalent was \$359,925,546. Even though this is possible, it does seem to be just a typographical error. Based on a review of the audited financial statements as of June 30, 2021, cash and cash equivalents reported are \$288,081,961 from page 26 of the audit report.

The short-range financial decisions of the College are part of the long-term financial plans in areas of facilities maintenance and development, instructional technology, enrollment management, and hiring decisions. (III.D.11)

The District conducts regular reviews of its Other Post Employment Benefit Liability (OPEB). The District funds the OPEB annually at a rate of approximately 1.92% of the total full time salary expenditure. An actuarial study is conducted regularly, and no findings have been reported. As this is a District wide liability, the College is not involved in this liability. (III.D.12)

Based on the ISER, the District does not currently have any locally incurred debt. As this is a District wide matter, the College does not have any locally incurred debt. (III.D.13)

Board Policy 6307 Debt Insurance and Management is used to guide the issuance and management of debt. All projects for the bond are reviewed by the Board in accordance with BP 6600 Capital Construction. In addition, BP 6740 Citizen's Bond Oversight Committee creates the Bond Program Monitor which allows a third party to examine bond issues and report to the Board on a regular basis. Bond issues are audited annually. Grants and the District Foundation are audited annually. The College's entities such as the Foundation, the Bookstore, and the Trust Fund Account are audited and any plans to address recommendations are made. (III.D.14)

The District monitors and manages student loan default rates, revenue streams, and assets to ensure compliance with federal requirements. The Central Financial Aid Unit (CFAU) ensures the segregation of duties in a manner consistent with the requirements of Title IV. Financial aid disbursements are made by District Accounts Payable. Each college is reviewed by federal and state agencies, and any findings are resolved with the assistance of the CFAU. The College monitors the default rate of its students. The College suggests that students use the resources of the Financial Aid Office to help lower defaults. (III.D.15)

The District has Administrative Procedures that set out the practice for approval of contracts. AP 6365 Contracts - Accessibility of Information Technology and AP 6370 Contracts for Services are to ensure that contracts are properly developed. All contracts are reviewed by several layers of oversight and are created to advance the mission and goals of the College, especially to support student success. Evidence is provided from the minutes that the Board is presented with all contracts adopted by the colleges. The College provides two contracts as documentation to illustrate student success is the objective of contracts with outside parties. (III.D.16)

#### Conclusions:

The College meets the Standard.

## Standard IV

### Leadership and Governance

#### IV.A. Decision-Making Roles & Processes

##### General Observations:

The College leadership promotes student success, sustaining academic quality, integrity, fiscal stability, and continuous improvement of the institution. College leaders provide multiple opportunities for systematic and widespread participation in decision-making and high-touch, high-impact collaboration among all stakeholders group through its governance and multiple campus committees. Such processes are defined in policy and operationally implemented, which includes a philosophy and strong ethic of care that assures the involvement of students, faculty, staff, and administrators. The College gains input from all major constituent groups, including the Associated Student Governance, Academic Senate, Classified Senate, and labor and Management Council. Leadership and governance are valued and members from all of the College constituencies, as well as the community, are encouraged to participate. The College assesses, documents, and widely communicates decision-making policies, procedures, and outcomes to College stakeholders.

ELAC demonstrates through written policy and procedures that there are provisions for all constituent groups to participate in decision-making. Administration, faculty, staff, and student participation is insured through policy and procedure, and the College's committee system includes a variety of committees that ensure all constituent groups have a substantive and clearly defined role in governance processes that impact policies, planning, and budget.

##### Findings and Evidence:

ELAC's leaders create and encourage innovation through the college's mission statement, goals, and vision in decision-making processes. Leaders supported the academic senate with non-credit course opportunities and addressed students' basic needs concerns by directing \$1.1 million dollars towards developing a Student Basic Needs, Food and Clothing Pantry. College leaders, across constituency groups, support efforts to improve collaboration on increasing student success and meeting student's basic needs. Campus leaders share impressive family and community values toward supporting and improving student outcomes for their diverse student population, which include first generation, justice impacted, Latinx, Black, immigrant, Asian Pacific Islander, women, LGBTQ+, working adults and families, veterans, athletes, and other historically marginalized students on campus. College leaders encourage campus constituency groups in developing procedures for supporting historically marginalized groups to succeed socially and academically.

During the open forum, the classified union rep praised the college's family atmosphere where all constituency groups are empowered to actively participate in college processes. One example cited was the phone banking to call students during registration periods to ensure that students heard from staff, faculty, administrators, and students. This includes efforts such as paid internships, food

vouchers, student exhibits in the Vincent Price Art Center, support for faculty assessing student success and course outcomes, data coaching, and a host of other spaces that are intended to nurture learning, promote success and care for students, and foster equity minded professional development for the creation of culturally relevant curriculum. Additionally, with the help of a IEPI grant, the academic senate made recommendations to the President. (IV.A.1.)

ELAC's District Board Policy (BP) 2510 outlines participation by staff, faculty, administrators, and students in the local decision-making process. The Governance Policy Handbook states constituency involvement in the college governance council. The institution establishes and implements policies and procedures such as BP 2510 Local Decision Making that authorizes administrator, faculty, staff, and student participation in governance groups and their decision-making process. During the campus forum, participants praised college leaders for developing supportive spaces for dialogs in support of improving student success. (IV.A.2.)

Policy and procedure identified in ELAC's Governance Policy Handbook recognize faculty and administrators as participants in planning decisions. Additionally, article 32 of the AFT contract indicates that all full-time faculty must participate on one campus committee. As per A.S.'s list of committees, it's clear that faculty along with administrators participate together on committees addressing policy, planning, and budget. (IV.A.3.)

Faculty and administrators at ELAC have clearly defined policies and structures in place for curriculum recommendations. BP 2510 delineates that A.S. is responsible for curriculum development. Additionally in the Governance Policy Handbook, the curriculum development process is clearly defined. The Educational Master Plan is developed through EPSC, which has both administrator and faculty representation. (IV.A.4.)

ELAC has policies and procedures in place that ensure consideration of relevant perspectives from all constituent groups. The College's planning processes are informed by campus-wide and community input on college goals and objectives and encourages collegial dialogue among all stakeholders. Board policy and procedure (BP 2510) outlines the decision-making process at the college. For example, on May 24, 2021, the Budget Committee made a presentation of Higher Education Emergency Relief Fund (HEERF) II priorities based off survey data. ESGC approved the expenditure based off the recommended funding priorities. (IV.A.5.)

ELAC has a process in place for documenting and communicating processes for decision-making, which is accomplished through the Governance Policy Handbook. The College website posts the Governance Policy Handbook, committee bylaws, Academic Senate minutes, and recommendations. (IV.A.6.)

The College's Governance Policy Handbook provides guidance for evaluating the policies and procedures for effectiveness; it's a 7-year cycle. Committees are supposed to self-evaluate annually. (IV.A.7.)

### Conclusions:

The College meets the Standard.

### **IV.B. Chief Executive Officer**

#### General Observations:

District BP 2430 and Administrative Procedure 2431 allows the Chancellor to delegate any powers entrusted to them to the President for the quality of the College (IVB1-01). The job description further identifies the president as the chief administrative officer with full responsibility to develop quality programs and lead institutional improvement while being sensitive to the diverse cultural and socio-economic backgrounds of students, staff and the community. The position announcement also specifies the duties and responsibilities of the President, including the implementation of fiscal planning and accountability, improving effectiveness to address gaps in student outcomes, and encouraging innovation in academic and student support services. Dr. Alberto J. Roman stepped into his position in 2020 as an interim and in 2021 as the College's 9th permanent president. Since his arrival, he has demonstrated his commitment to being a caring and considerate leader, dedicated to ensuring quality in the areas of planning, budget, personnel, and institutional effectiveness.

The 2022 District Governance Handbook specifies the institutional leadership responsibilities of the President for ensuring the quality of the institution and providing effective leadership in planning, organizing, budgeting, selecting and developing personnel, and assessing institutional effectiveness as reflected in the President's membership in executive administrative councils.

#### Findings and Evidence:

The College President has primary responsibility for leadership in planning, organizing, budgeting, personnel, and institutional effectiveness. Under his leadership, the campus has strengthened ties between campus and the community, expanded the bonds of commitment to students between classified professionals, faculty and administration to advance the college's strategic goals, and educational planning effort to increase student access and success. The president is actively engaged in participatory governance and safeguards the voice of all constituent groups. Interviews with constituent leaders and open forums with students and community members, evidenced a strong validation of the perception that he is genuinely interested in ensuring that all voices are heard and transparency is maintained in short- and long-range planning. (IV. B.1)

The President works with President's Cabinet and Chancellor's Cabinet, and considers input from campus constituencies and collegial consultation committees to evaluate the College's administrative structure. He has stabilized the College administration and has built a strong, effective committee structure that has served the campus, the students and community well during and after the COVID-19 pandemic. (IV.B.2)

The visiting team validated the ISER evidence that the CEO effectively guides the College's efforts to improve teaching and learning to advance student achievement. The collegial process includes administrators in the governance process and recommends policies, procedures, and priorities to the President. College committees make recommendations, and the President has the right to reject or modify any participatory governance decision from the College. Also, when hiring personnel, the President reviews requests from the Hiring Prioritization Committee and Human Resources Committee annually and approves a hiring plan based on the available budget and other pertinent information. For example, in a February 2022 letter to the committee, the President discusses factors considered in their decision for Fall 2022 faculty hires. (IV.B.3)

The President leads the College's accreditation efforts, ensuring that College efforts align to the Standards within the context of the College Mission. The President ensures collegewide participation in the development of the ISER which is an accurate reflection of the College. (IV.B.4)

The President oversees the implementation of statutes, regulations and board policies at the college and serves on a number of district committees that facilitate the development of policies, procedures and budget. He meets regularly with his executive team and college governance and advisory committees to facilitate understanding, appropriate implementation to ensure compliance with all regulations. (IV.B.5)

The President has also taken responsibility for increasing enrollment with a variety of outreach strategies, inviting broader campus participation in such efforts. During the open forums, many participants spoke highly of the president and his leadership team for the work they are doing to support student success and create a culture of care. (IV.B.6)

#### Conclusions:

The College meets the Standard.

### **IV.C. Governing Board**

#### General Observations:

The Los Angeles Community College District (LACCD) has a seven-member Board of Trustees elected at-large by the citizens of the District, and one non-voting student trustee determined through an election by all enrolled students. The Board has established five Standing Committees: Institutional Effectiveness, Student Success, Budget and Finance, Legislative and Public Affairs, and Facilities Master Planning and Oversight; and one over-arching committee entitled Committee of the Whole. The Board meets monthly and the Standing Committees meet regularly with report out to the Board at their monthly meeting. This structure allows members to be engaged in developing a foundational knowledge to facilitate building consensus for taking

action at the Board meeting each month. Through established policies and procedures aligned with the District's mission, the Board has the ultimate authority for educational quality, legal matters, and financial integrity. The Chancellor reports directly to the Board and the Board has delegated authority to implement and administer board policies to the chancellor.

#### Findings and Evidence:

LACCD's Board policies outline the scope of the Board's duties and responsibilities. Board Policies and Board Rules outline Board membership, the duties and responsibilities of the Board, which include the Board's role in monitoring fiscal health, institutional performance, integrity, and educational quality, as well as the Board's committee structure. (IV.C.1, ER 7)

The governing board speaks with one voice, and once they reach a decision all members support that decision. *Board Policy 2715- Code of Ethics*, affirms the notion that the Board acts as a whole and that authority rests only with the Board and not with individual Board members. (IV.C.2)

*Board Policy 2531* and related administrative procedures provide guidance in the selection of the chancellor. *Board Rule 10105.13* states that the Board will conduct an evaluation of Chancellor annually. The evaluation of the Chancellor culminates with a recommendation for contract renewal. (IV.C.3)

*Board Policy 2200* defines the Board's role and responsibility in protecting the public interest and affirms that the Board is an independent policy-making entity. Furthermore, *Board Policies 2710 and 2715* define the Board's responsibilities and obligations concerning conflict of interest and establishes ethical rules in protecting the District from undue influence. (IV.C.4, ER7)

*Board Policy 2200* defines the Board's role and responsibilities for establishing policies that are consistent with the District's mission, ensuring educational quality, integrity, and continuous improvement. The Board has established five subcommittees to assure quality and improvement in core areas including: institutional effectiveness, student success, Budget and Finance, Legislative and Public Affairs, and Facilities Master Planning and Oversight. The Board has also established a Committee as a Whole to review general and special topics of interest. (IV.C.5)

Board policies and administrative procedures are published on the District's website under "Board Rules" and can also be found on the District's Board Docs website. The District has policies and procedures in place specifying the Board's size (*Board Policy 2010 – Board Membership* and *Board Policy 2015 – Student Trustee*), duties and responsibilities (*Board Policy 2200 – Duties and Responsibilities*), structure (*Board Policy 2210 – Officers*) and *Board Policy 2220 – Committees of the Board*). Where appropriate, the District, through the chancellor, has established related administrative procedures to operationalize Board Policies. (IV.C.6)

The Board acts in a manner consistent with its policies as indicated by a review of Board minutes. The District has started the process of converting their Board Rules over to a standard used most California Community Colleges for Board policies and administrative procedures. The Board has delegated responsibility and authority to the Chancellor for a

periodic review of policies and procedures. The Chancellor has created a triennial review schedule beginning in 2023 for all policies and procedures as outlined in Administrative Procedure 2410 – *Board Policies and Administrative Procedures*. (IV.C.7)

The District keeps the Board of Trustees informed of student academic performance through a review of the data with the Board’s Institutional Effectiveness and Student Success (IESS) Committee. After review and discussion of the data, the IESS periodically refers the information to the Board’s Committee of the Whole. During its annual retreat the Board uses the data to establish annual goals and to update the District’s strategic plan, as well as in other related plans. (IV.C.8)

As outlined in BP 2740 – *Board Education* the Board is committed to ongoing development as a Board and to a trustee education program, including a new trustee orientation. Board Members attend conferences, such as the Community College League of California (CCLC) and the Association of Community College Trustees (ACCT) for professional development. The Committee of the Whole often holds in-depth sessions to allow for better understanding of major focus areas, for example budget and AB 705. Board member terms of office are outlined in BP 2100 – *Board Elections*, which provides for staggered terms to ensure continuity of leadership. (IV.C.9)

*Board Policy 2745* defines the Board’s annual self-evaluation process. The Board has complied with their policies as evidenced by the Board’s meeting minutes (January 2022) and the report of their findings. The Board has implemented and participated in a variety of training programs in order to improve Board performance. (IV.C.10)

The Board has adopted both a conflict-of-interest policy (*Board Policy 2710 – Conflict of Interest*) and code of ethics (*Board Policy – Code of Ethics-Standards of Practice*) policy, which assures that individual board members maintain impendence from the District and also defines a process for sanctioning an individual Board member who violates Board Policy. Also, Board members file a Statement of Economic Interest form annually. (IV.C.11)

*Board Policy 2430* and *District Governance Handbook* detail how the Board delegates responsibility and authority to the chancellor to administer board policies. The Board has a policy for evaluating the chancellor, which assures that the Board is holding the chancellor accountable for the operation of the District and the administration of Board Policies. (IV.C.12)

The Board of Trustees Special Meeting was held on June 25, 2022 where the Board discussed Board roles and responsibilities. The Board’s Institutional Effectiveness and Student Success (IESS) Committee had an Accreditation 101 training on May 18, 2022. The Board of Trustees approved the ISERs on July 6, 2022. The Board has been appropriately informed and involved with the accreditation process throughout the reaffirmation process and continuing to meet accreditation standards are an on-going focus of the LACCD Board. (IV.C.13)

### Conclusions:

The College meets the Standard.

#### **IV.D. Multi-College Districts or Systems**

##### **General Observations:**

The Los Angeles Community College District (LACCD) is a nine-college district. The Board of the LACCD delegates authority for administering board policies and overall operations to the chancellor. The chancellor, in turn, delegates appropriate authority to the college presidents to administer and operate each college. As part of the evidence, the District provided an accreditation matrix, which delineates responsibility for meeting accreditation standards between the colleges and the district. LACCD regularly assesses the effectiveness of its central services, its budget allocation model, and the efficacy of its district-level planning and participatory governance processes and makes changes to these systems to effectuate continuous improvement. Through its data assessment and planning processes, LACCD has maintained its leadership role in social justice and equity by adopting a districtwide framework for social justice and equity.

##### **Findings and Evidence:**

*Board Policy 2430* delegates executive authority to the chancellor to administer Board policies. The chancellor delegates authority to the college presidents to administer relevant board policies and related operational activities. *Board Policy 6100* delegates authority to the chancellor or his designee to oversee the general administration of District business functions. Finally, *Board Policy 7110* provides authority to the chancellor to execute personnel actions. (IV.D.1)

*Board Policies 2430, 6110, and 7110* provides a clear delineation of roles and responsibilities between district and the colleges. The district and colleges administer regular surveys at the college and central services level to ensure that the needs of the colleges are being met by the district service offerings. The District works proactively with the colleges to assure that each college has adequate resources, and that there is an equitable distribution of resources among the colleges. (IV.D.2)

The district maintains a clearly defined Budget Allocation Model (BAM), which is implemented and evaluated on a three-year cycle by the District Budget Committee, a committee which includes membership from all colleges and the district office. The BAM acknowledges and accommodates the varying needs of the colleges; ensures that each college receives sufficient resources to operate and sustain the colleges and district; and is perceived as an open, fair, equitable and transparent allocation model by members of the District Budget Committee. Expenditures are adequately controlled and stay within the available budget. On a quarterly basis, projections of expenditures compared to budget are performed and reviewed in detail with the District Budget Committee; if anomalies exist or are identified, they are reconciled and agreed upon before presentation to the Board of Trustees. (IV.D.3)

*Board Policy 2430* addresses delegation of authority to the college presidents. According to the policy, college presidents have full responsibility for the implementation of district and local policies. This includes organizational structure, hiring, and other critical functions. The college presidents are held accountable for their performance by the chancellor and the Board. (IV.D.4)

The colleges derive their strategic plans from a district-wide strategic plan that is updated every five years, through a participatory process that includes all colleges and the district CEO. The self-assessment indicates that the district is working to produce better alignment between the college planning processes and district plan and related communications. The district office has issued recommendations to this end including measurement and data standards.

The team was impressed with the Districtwide and campus-level response to social justice and equity, which provides an example of how District system planning and evaluation is integrated with college planning and evaluation. Recent events at the national level prompted the District and the colleges to work together to develop a districtwide framework for racial equity and social justice. The framework is heavily influenced by campus-level work and input. At the same time, the Board and the District were able to provide an operational structure and the resources necessary to support the overall framework. The structure of program review, resource allocation decisions, and the development of programs and services are all influenced by this common districtwide framework. The District has funded a districtwide equity and justice fellow to ensure that the work continues and that the colleges are supported. LACCD enjoys a well-earned reputation as a leader in social justice and equity initiatives. The Board and the District are to be commended for developing a model that could be replicated at other member institutions. (IV.D.5)

The District implemented Board Docs, an enterprise level software package, in 2019 to improve districtwide communications, and to facilitate committee operations. The chancellor communicates regularly with the colleges' academic senates, unions, as well as the college presidents through Chancellor's Cabinet and Presidents Council. The district governance and planning processes include several opportunities for cross-communication between groups.

LACCD is a large entity and the District has increased its reliance digital communications. As an example, stakeholders now receive regular updates from the chancellor summarizing activities of the District and the colleges, including a quarterly *Governance Update* that provides a summary of all major participatory governance recommendations. (IV.D.6)

The district has regular, intentional cycles to assess and improve planning, governance, and decision-making processes. A survey is administered every two years to assess the efficacy of district-level participatory governance processes. This process culminates in results that are shared and used for future action and planning. The recent action to re-align strategic planning processes between colleges and district, and to improve communications is an example of how this assessment process is used to improve planning, governance, and decision making. (IV.D.7)

### Conclusions:

The College meets the Standard.

Commendation:

The team commends the Board and the District on the development and implementation of a Districtwide Framework for Racial Equity and Social Justice: Taking Action to Root Out Racism and Internalize Anti-Racist Policies and Practices at LACCD. The District has successfully built upon the strong legacy of social justice and equity work amongst the campuses, by embedding this framework into existing planning process, developing systems of accountability, and investing in local, regional, and statewide legislative advocacy to support statewide systemic reform to improve racial and social justice initiatives. (IV.D.5)

## Quality Focus Essay

QFE1: The College has made considerable progress with implementation of Guided Pathways. In a process of continuous improvement, they have examined the data and are now prepared to implement targeted Pathway strategies to close gaps and ultimately improve student success. The College's plan is well thought-out and with a detailed timeline and should be instrumental in further improving student learning and success.

QFE2: The College recognizes the barriers that young students face in a Hispanic, low-socioeconomic status community. The statistics indicate that many students in their service area will not graduate high school or consider attending college. In this plan the College focuses on the expansion of dual enrollment efforts to provide college access to their service area and help students enter a path toward higher education. The detailed plan through 2026 includes outreach, workshops, orientations, and mentoring which should all assist in expansion of a successful dual enrollment program.

## Appendix A: Core Inquiries



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

## CORE INQUIRIES

### East Los Angeles College

1301 Avenida Cesar Chavez  
Monterey Park, CA 91754

The Core Inquiries are based upon the findings of the peer review team that conducted Team ISER Review on October 6, 2022

Dr. Carole Goldsmith  
Team Chair

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## East Los Angeles College

### Peer Review Team Roster

#### Team ISER Review

October 6, 2022

|                                                                                          |                                                                                                                            |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Dr. Carole Goldsmith, Chair<br>Chancellor<br>State Center Community College District     | Dr. Ricky Shabazz, Vice Chair<br>President<br>San Diego City College                                                       |
| <b>ACADEMIC MEMBERS</b>                                                                  |                                                                                                                            |
| Ms. Neeka Aguirre<br>History Instructor<br>Mendocino College                             | Mr. Jonathan Eldridge<br>Asst. Superintendent/Vice President of<br>Student Learning & Student Services<br>College of Marin |
| Mr. Jeffrey Haig<br>Faculty<br>Copper Mountain College                                   | Dr. Tiffany Sarkisian<br>Communication Arts Instructor & Program<br>Review Coordinator<br>Fresno City College              |
| Ms. Jennifer Thompson<br>Librarian<br>College of the Canyons                             |                                                                                                                            |
| <b>ADMINISTRATIVE MEMBERS</b>                                                            |                                                                                                                            |
| Ms. Russi Egan<br>Vice President Administrative Services<br>Lake Tahoe Community College | Mr. Jonathan Sherman<br>Senior Dean of Regulatory Affairs and<br>Compliance/ALO<br>Carrington College                      |
| Dr. Tina Vasconcellos<br>Vice President of Student Services<br>College of Alameda        |                                                                                                                            |
| <b>ACCJC STAFF LIAISON</b>                                                               |                                                                                                                            |
| Dr. Kevin Bontenbal<br>Vice President<br>ACCJC                                           |                                                                                                                            |

## **Summary of Team ISER Review**

INSTITUTION: East Los Angeles College

DATE OF TEAM ISER REVIEW: October 6, 2022

TEAM CHAIR: Dr. Carole Goldsmith

A ten-member accreditation peer review team conducted Team ISER Review of East Los Angeles on October 6, 2022. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. The peer review team received the college's institutional self-evaluation report (ISER) and related evidence several weeks prior to the Team ISER Review. Team members found the ISER to be a comprehensive, well written, document detailing the processes used by the College to address Eligibility Requirements, Commission Standards, and Commission Policies. The team confirmed that the ISER was developed through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful ISER containing several self-identified action plans for institutional improvement. The College also prepared a Quality Focus Essay.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on August 3, 2022. and held a pre-review meeting with the college CEO on Sept 30, 2022. The entire peer review team received team training provided by staff from ACCJC on August 30, 2022. Prior to the Team ISER Review, team members completed their team assignments, identified areas for further clarification, and provided a list of requests for additional evidence to be considered during Team ISER Review.

During the Team ISER Review, team members spent the morning discussing their initial observations and their preliminary review of the written materials and evidence provided by the College for the purpose of determining whether the College continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and identified standards the college meets, as well as developed Core Inquiries to be pursued during the Focused Site Visit, which will occur in March, 2023.

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

## Core Inquiries

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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| <b>Core Inquiry 1:</b> The team seeks to understand how the institution uses assessment data to inform decision making that leads to improved student outcomes.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>Standards or Policies:</b> I.B.5, I.B.6, II.A.2; II.A.16, II.C.4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Description:</b> <ul style="list-style-type: none"><li>a. The team acknowledges the college's culture of inquiry and use of data as evidenced by tools such as ELAC's data dashboards.</li><li>b. The team recognizes the use of both quantitative and qualitative data throughout the ISER, however, the evidence provided did not demonstrate use of data to inform the program review and planning processes. While quantitative was provided, the data was anecdotal in nature and did not clearly inform college plans.</li><li>c. The team further reviewed PRSE for Math, Psychology, Architecture, and Biology. The team verified that PRSE writers are using data dashboards to review their data and that programs are planning, but how Student Learning Outcomes assessment data is being used to plan within programs to support students' success was not evident.</li><li>d. In addition, the team acknowledges that valuable data are present in the PRSE process and goals are set within the PRSE, but the team was not able to verify how the data informs goals and resource allocation.</li></ul> |
| <b>Topics of discussion during interviews:</b> <ul style="list-style-type: none"><li>a. How do Learning Outcomes Assessment Facilitators support faculty in using data to improve student outcomes?</li><li>b. How is data used in PRSE to inform program changes, goals, and resource allocation?</li><li>c. How is the alignment between goals and planned outcomes integrated with the college's program review and planning processes?</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Request for Additional Information/Evidence:</b> <ul style="list-style-type: none"><li>a. Examples of how the college uses the assessment process to improve courses, teaching and learning, and student outcomes based on data.</li><li>b. Examples of requests from programs/departments that requested funding to address an equity or performance gap that are data informed where interventions were allocated resources to implementation that aligns with the college's mission.</li><li>c. Examples where the data cited directly informed decisions demonstrating a continuous improvement cycle.</li><li>d. Evidence of how athletic programs are funded.</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                          |

**Request for Observations/Interviews:**

- a. Learning Outcomes Assessment Facilitators
- b. Faculty PRSE writers
- c. Program Review Coordinator
- d. The Athletics Director

**Core Inquiry 2:** The team seeks to verify that Distance Education courses meet the Commission Policy on Distance Education's requirement for regular and substantive contact between instructors and students.

**Standards or Policies:** Policy on Distance Education and Correspondence Education

**Description:**

- a. The access provided to the team to view the sample of fifty DE courses from Spring 2022 did not allow appropriate access for team members to see key indicators of regular and substantive interaction, such as considerable instructor comments on assignments/exams/discussions or individualized feedback connected to grades.
- b. Given this limited access, the team was unable to verify that regular and substantive contact between instructors and students meets the Commission's Policy on Distance Education and Correspondence Education.

**Topics of discussion during interviews:**

- a. The methods DE faculty use in their DE courses to ensure regular and substantive interaction with students.

**Request for Additional Information/Evidence:**

- a. Appropriate access to Distance Education courses that facilitates the ability to view indicators of regular and substantive interaction as defined by the college.

**Request for Observations/Interviews:**

- a. Meetings with a sample of faculty teaching DE courses and administrators/staff responsible for DE policies and procedures.

**Core Inquiry 3:** The team seeks an update on the implementation of the plan to complete overdue evaluations and execution on the deliverables outlined in the plan by December 2022.

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| <b>Standards or Policies:</b> III.A.5                                                                                                                                                                                     |
| <b>Description:</b> <ul style="list-style-type: none"> <li>a. The team reviewed the July 19, 2022 memo from President Roman on how the college can complete outstanding employee evaluations by December 2022.</li> </ul> |
| <b>Topics of discussion during interviews:</b> <ul style="list-style-type: none"> <li>a. Update on the status of evaluations.</li> </ul>                                                                                  |
| <b>Request for Additional Information/Evidence:</b> <ul style="list-style-type: none"> <li>a. Percentage of evaluations completed by employee group.</li> </ul>                                                           |
| <b>Request for Observations/Interviews:</b> <ul style="list-style-type: none"> <li>a. Human Resources</li> <li>b. College administrators</li> </ul>                                                                       |

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| <b>Core Inquiry 4:</b> The team is impressed with the college's ending balance of \$25 million and would like to learn more about the college's approach to budgeting and planning.                                                                                                |
| <b>Standards or Policies:</b> III.D.9                                                                                                                                                                                                                                              |
| <b>Description:</b> <ul style="list-style-type: none"> <li>a. The team acknowledges that the college's \$25 million ending balance far exceeds the district's required amount.</li> </ul>                                                                                          |
| <b>Topics of discussion during interviews:</b> <ul style="list-style-type: none"> <li>a. What is the role of the college's foundation in raising funds for the college?</li> <li>b. How did the college reach the point of having a \$25 million dollar ending balance?</li> </ul> |
| <b>Request for Additional Information/Evidence:</b> <ul style="list-style-type: none"> <li>a. Accounts contributing to the \$25 million ending balance.</li> <li>b. Documents highlighting decisions for establishing ending fund balance.</li> </ul>                              |

**Request for Observations/Interviews:**

- a. College President
- b. Director of Foundation
- c. College CBO
- d. College Budget Manager/Controller

## **DISTRICT CORE INQUIRIES**

Los Angeles Community College District  
770 Wilshire Blvd  
Los Angeles, CA 90017

The Core Inquiries are based upon the findings of the peer review team that  
conducted Team ISER Review on October 7, 2022

Mr. Michael Claire  
Team Chair

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Los Angeles Community College District

Peer Review Team Roster

**Team ISER Review**

October 7, 2022

|                                                                                                |                                                                                                      |
|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| Michael Claire, Team Chair<br>San Mateo County Community College District<br>Chancellor        | Dr. David Martin, Vice Chair<br>San Francisco Community College<br>District<br>Chancellor            |
| <b>ACADEMIC MEMBERS</b>                                                                        |                                                                                                      |
| Dr. Fail Cammin<br>Foothill College<br>Program Director, Humanities Mellon Scholars<br>Program | Dr. Bridget Herrin<br>San Diego Mesa College<br>Dean, Institutional Effectiveness                    |
| Dr. Michelle Miller-Galaz<br>Porterville College<br>Dean of Instruction                        | Dr. Jia Sun<br>Imperial Valley College<br>Associate Professor/Accreditation<br>Coordinator           |
| <b>ADMINISTRATIVE MEMBERS</b>                                                                  |                                                                                                      |
| Ms. Kelly Avila<br>Merced College<br>Associate Vice President of Human Resources               | Ms. Ann-Marie Gabel<br>South Orange Community College District<br>Vice Chancellor, Business Services |
| Mr. William McGinnis<br>Butte-Glenn Community College District<br>Trustee                      | Dr. Ivan Peña<br>Crafton Hills College<br>Dean of Student Equity and Success                         |
| <b>ACCJC STAFF LIASON</b>                                                                      |                                                                                                      |
| Dr. Kevin Bontenbal, Vice President                                                            |                                                                                                      |

## **Summary of District Team ISER Review**

INSTITUTION: Los Angeles Community College District

DATE OF TEAM ISER REVIEW: October 7, 2022

TEAM CHAIR: Michael Claire

A ten-member accreditation peer review team conducted Team ISER Review of the Los Angeles Community College District (LACCD) on October 7, 2022. The primary focus of the team was to review standards IV.C and IV.D. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. The peer review team received the institutional self-evaluation report (ISER) for each college in the LACCD and related evidence several weeks prior to the Team ISER Review. Team members found the narrative for Standards IV.C and IV.D of the ISERs to be comprehensive and well written.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on August 3, 2022 and held a pre-review meeting with the district ALO on October 3, 2022. The entire peer review team received team training provided by staff from ACCJC on August 31, 2022. Prior to the Team ISER Review, team members completed their team assignments, identified areas for further clarification, and provided a list of requests for additional evidence to be considered during Team ISER Review.

During the Team ISER Review, team members spent the meeting discussing their initial observations and their preliminary review of the written materials and evidence provided by the colleges for the purpose of determining whether the colleges continue to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations with an emphasis on Standards IV.C and IV.D. The team developed Core Inquiries to be pursued during the Focused Site Visit, which will occur in March 2023

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

## District Core Inquiries

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
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| <b>District Core Inquiry 1:</b> The team seeks to verify the board has an orientation for new board members as outlined under policy.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Standards or Policies:</b> IV.C.9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>Description:</b> <ul style="list-style-type: none"> <li>e. As outlined in BP 2740 – <i>Board Education</i> the Board is committed to ongoing development as a Board and to a trustee education program, including a new trustee orientation.</li> <li>f. Board Members attend conferences, such as the Community College League of California (CCLC) and the Association of Community College Trustees (ACCT) for professional development.</li> <li>g. The Committee of the Whole often holds in-depth sessions to allow for better understanding of major focus areas, for example budget and AB 705.</li> <li>h. The team did not find evidence of a formal new trustee orientation.</li> </ul> |
| <b>Topics of discussion during interviews:</b> <ul style="list-style-type: none"> <li>d. How are new board members informed of board orientations?</li> <li>e. What orientation opportunities are provided for new board members?</li> <li>f. When was the last new board member orientation?</li> <li>g. Who participates in board orientation?</li> </ul>                                                                                                                                                                                                                                                                                                                                           |
| <b>Request for Additional Information/Evidence:</b> <ul style="list-style-type: none"> <li>e. New board member orientation agenda.</li> <li>f. Documentation of Professional Development Opportunities.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Request for Observations/Interviews:</b> <ul style="list-style-type: none"> <li>e. Board members</li> <li>f. Chancellor</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

|                                                                                                                                                                                                      |
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| <b>District Core Inquiry 2:</b> The team seeks to better understand how the district determines resource allocation and reallocation is adequate to support effective operation across the district. |
| <b>Standards or Policies:</b> IV.D.3                                                                                                                                                                 |

|                                                                                                                                                                                                                                                                                                                                                                                |
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| <p><b>Description:</b></p> <ul style="list-style-type: none"> <li>a. The team reviewed the district’s allocation model and evidence that the district is following its model.</li> <li>b. The team was unclear on how the district assess its resource allocation model to determine its adequacy and effectiveness in supporting all colleges across the district.</li> </ul> |
| <p><b>Topics of discussion during interviews:</b></p> <ul style="list-style-type: none"> <li>a. What are the effective controls of expenditures?</li> <li>b. What is the process for evaluating the resource allocation model?</li> <li>b. What is the process for colleges in the district to request more resources in order to meet operational needs?</li> </ul>           |
| <p><b>Request for Additional Information/Evidence:</b></p> <ul style="list-style-type: none"> <li>a. Resource model evaluations.</li> <li>b. Evidence of district-wide discussions regarding the evaluations of the resource allocation model.</li> </ul>                                                                                                                      |
| <p><b>Request for Observations/Interviews:</b></p> <ul style="list-style-type: none"> <li>a. Chancellor</li> <li>b. District Chief Business Officer (or CFO)</li> <li>c. District budget committee</li> </ul>                                                                                                                                                                  |

  

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| <p><b>District Core Inquiry 3:</b> The team would like to learn about the process of development and what follow-up has occurred from the release of the district’s framework for racial equity and social justice.</p>                                                                                                                                                                                          |
| <p><b>Standards or Policies:</b> IV.D.1</p>                                                                                                                                                                                                                                                                                                                                                                      |
| <p><b>Description:</b></p> <ul style="list-style-type: none"> <li>a. The team was impressed with the district's Framework of Equity and Social Justice and its alignment with district mission, board goals, and district goals.</li> </ul>                                                                                                                                                                      |
| <p><b>Topics of discussion during interviews:</b></p> <ul style="list-style-type: none"> <li>a. Where did this framework originate?</li> <li>b. How did the district determine a Race, Equity, and Inclusion workgroup?</li> <li>c. How does this district use these principles to guide decision-making?</li> </ul>                                                                                             |
| <p><b>Request for Additional Information/Evidence:</b></p> <ul style="list-style-type: none"> <li>a. Committee roster of Race, Equity, and Inclusion workgroup.</li> <li>b. Agendas and minutes from the district’s Race, Equity, and Inclusion workgroup.</li> <li>c. Evidence of district-wide communication regarding actions and/or recommendations of the Race, Equity, and Inclusion workgroup.</li> </ul> |

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|                                             |
| <b>Request for Observations/Interviews:</b> |

- |                                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"><li>a. Chief Human Resources Officer</li><li>b. Race, Equity, and Inclusion workgroup</li><li>c. Individuals involved in the development of the Framework of Equity and Social Justice</li></ul> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|