

# **Evaluation Team Report**

## **Follow Up Report of Kapi`olani Community College**

**November 8, 2014**

*Submitted by:*

**Jowel C. Laguerre, Ph.D.**

*Submitted to:*

**Accrediting Commission for Community and Junior Colleges,  
Western Association of Schools and Colleges**

**This report represents the findings of the evaluation team that visited  
Kapi`olani Community College on November 7, 2014**

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**DATE:** November 7, 2014  
**TO:** Accrediting Commission for Community and Junior Colleges  
**FROM:** Jowel C. Laguerre, Team Chair  
**SUBJECT:** Report of Follow-Up Visit Team to Kapi`olani Community College

### **Introduction**

Kapi`olani Community College (KCC) underwent a comprehensive accreditation review in the fall of 2012. A separate team conducted the University of Hawaii Community College (UHCC) system evaluation; that team's report and recommendations were appended to and made part of the 2012 team report. In January of 2013, the Accrediting Commission for Community and Junior Colleges/Western Association of Schools and Colleges (ACCJC) reaffirmed Kapi`olani Community College's accreditation.

As required by the Commission, Kapi`olani Community College submitted a follow-up report on October 15, 2014 addressing the five college recommendations, one commission requirement, and two system recommendations contained in the Commission's Action Letter. The report was followed by a visit on November 7, 2014 by the present evaluation team consisting of Dr. Jowel C. Laguerre (Chair), Ms. Kelly Fowler, Ms. Virginia May and Dr. Paul Murphy.

Prior to its visit, the evaluation team studied the 2013 Team Report, the Commission's Action Letter, Kapi`olani Community College's October 2014 Report to the Commission and the evidence which the college supplied as background to the report including Kapi`olani Community College's Technology Plan 2013-2017.

During its visit, the team interviewed or met with approximately 50 members of the college community including administrators, faculty, staff members, and students. During its visit, the team also reviewed additional written evidence the College provided the team.

Kapi`olani Community College did an outstanding job preparing for our visit. The physical facilities for our visit were excellent. Any request we made was met quickly and completely. We were made to feel totally at home by all those whom we met. The team was impressed and grateful that so many faculty, students, staff, and administrators were on hand to visit with us and to take care of all our needs for a successful visit. Everyone cooperated well with the team and our questions were answered to our satisfaction.

Our team found that there is a productive dialogue involving all constituents at the college, and the different constituents acknowledged the progress the College has made in greater transparency than previously experienced at the College. Faculty, administrators, and students demonstrated an eagerness to adhere to accreditation standards.

The following are the recommendations made by the team that evaluated the Kapi'olani in 2012.

**Recommendation 1.**

In order to meet the Standard and the recommendation made in 2006, to ensure improvements in planning processes, including program review, are integrated with resource allocations, the team recommends that the College provide clear descriptions of the planning timeline to demonstrate integration with the budgeting process. (I.B)

**Recommendation 2.**

In order to meet the Standards, the College planning processes should be effectively communicated to all College constituencies and reviewed on an annual basis to ensure that resource allocation leads to program and institutional improvement. (I.B.4, I.B.6)

**Recommendation 3.**

In order to meet the Standards, the team recommends that the College assess student learning outcomes for every course, instructional program, and student support program and incorporate the findings into course and program improvements. (ER 10, I.B, I.B.1, II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.e, II.A.2.f, II.A.2.i, II.A.3, II.B.4, II.C.2)

**Recommendation 4.**

In order to meet the Standards, the team recommends that the College utilize student learning outcomes assessment to support institutional planning decisions. (I.B, I.B.1, II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.e, II.A.2.f, II.A.2.i, II.A.3, II.B.4, II.C.2)

**Recommendation 5.**

In order to fully meet the Standards, the team recommends the College: 1) identify student learning outcomes for all student services programs, 2) assess student attainment of these outcomes, and 3) conduct dialogue to use assessment results to implement program improvements. (Standards II.B.4, II.C.2)

**Recommendation 6.**

In order to meet the Standard, the UHCC and the colleges shall take appropriate actions to ensure that regular evaluations of all faculty members and others directly responsible for student progress toward achieving stated student learning outcomes include, as a component of the evaluation, effectiveness in producing student learning outcomes. (Standard III.A.1.c)

**Recommendation 7.**

In order to meet the Standard, and the recommendation made in 2006, the team recommends that the College fill the vacancies deemed essential to the running of the College and remedy the time lag between the verbal commitment and an employee's start day of effected employees. (Standard III.A.2)

**Recommendation 8.**

In order to meet the Standard, the team recommends that the College develop a technology plan to identify technology needs and inform the budgeting process. (III.C.)

**Recommendation 9.**

In order to fully meet the Standards, it is recommended that the College clarify and strengthen the review, assessment and planning recommendation roles of the Policy, Planning and Assessment Council to better serve and inform the College community and better align governance decision-making structures with those of the UH System. (IV.A., III.D., IV.B.)

**Commission Requirement.**

The Commission also requires Kapi`olani Community College to demonstrate that it has adopted, implemented, and is adhering to the UH Policy on faculty (full- and part-time) evaluations to include, as a component, effectiveness in producing learning outcomes. (Standard III.A.1.c).

**UH Recommendation 4: Resources**

In order to meet the Standards, it is recommended that a comprehensive UH system wide technology plan that includes and supports distance education be developed and implemented and is integrated with institutional planning. (Standards II.A.1.b, II.A.1.c, II.A.2.c, III.C.2, III.C.1, III.C.1.c, III.C.2)

**UH Recommendation 5. Board and Administrative Organizations.**

In order to meet the Standards, it is recommended that the UH Board of Regents (BOR) adopt a regular evaluation schedule of its policies and practices and revise them as necessary. In addition, the UH BOR must conduct its self-evaluation as defined in its policy and as required by ACCJC Standards. (Standards IV.B.1, IV.B.1.g)

## **THIS TEAM’S ANALYSIS OF FINDINGS AND CONCLUSIONS REGARDING EACH RECOMMENDATION AND THE COMMISSION REQUIREMENT**

Our report is divided into three parts. Part I contains the recommendations the 2013 team found the College has met the standards: Recommendations 1, 6, 7 and 9. Part II contains the recommendations where the College had made progress, but was not in compliance with the standards. Part III addresses the Commission requirement and the UH System recommendations.

What follows are the Current Team’s Findings and the Analysis of those Findings for each recommendation. Where appropriate we have referenced the evidence, which we reviewed or interviews which support each finding.

### **General Observations**

Overall, the team was very impressed with the progress the College has made over the last two years. Representatives from the College were very proud to have been part of the processes that have had such a significant impact on the College. There were two main themes that were repeated in every interview with College representatives: transparency and effective communication. In addition, it was clear that the entire campus was working together to not only implement processes to meet the requirements of accreditation, but to also implement process that benefited the students of Kapi`olani Community College. While the College understands the importance of accreditation, they shared with the team that the College’s commitment is to student success. With each interview, it was evident the College was engaged, passionate, exhausted yet elated regarding the progress they have made; but also proud and pleased with the work that had been done over the past two years.

## **PART I**

### **Recommendation 1.**

In order to meet the Standard and the recommendation made in 2006, to ensure improvements in planning processes, including program review, are integrated with resource allocations, the team recommends that the College provide clear descriptions of the planning timeline to demonstrate integration with the budgeting process. (I.B)

### **Findings and Analysis**

Through interviews, evidence and an addendum report, the team was able to verify that the College continues to be in compliance with Standards cited in the 2012 team recommendation. There has been an ongoing improvement of the planning processes. The College was able to provide specific examples of integration of resources with the planning process.

### **Conclusion**

Kapi`olani Community College has sustained its compliance with the Standard.

### **Recommendation 6.**

In order to meet the Standard, the UHCC and the colleges shall take appropriate actions to ensure that regular evaluations of all faculty members and others directly responsible for student progress toward achieving stated student learning outcomes include, as a component of the evaluation, effectiveness in producing student learning outcomes. (III.A.1.c)

### **Findings and Analysis**

The Commission requirement recommendation further proves that both UHCC and Kapi`olani Community College meet the requirements of the recommendation. Much work has continued to be done in compliance with the standards.

### **Conclusion**

Kapi`olani Community College continues to meet the Standard.

### **Recommendation 7.**

In order to meet the Standard, and the recommendation made in 2006, the team recommends that the College fill the vacancies deemed essential to the running of the College and remedy the time lag between the verbal commitment and an employee's start day of effected employees. (III.A.2)

### **Findings and Analysis**

The team verified that the College has continued to fill positions at a regular pace. There are few vacant positions, and the ones that exist are on a schedule to be filled. Interviews with faculty and staff verify that there have been major changes that have made the system work better. The lag time between acceptance and start dates is much shorter than previously.

### **Conclusion**

Kapi`olani Community College continues to meet the Standard.

### **Recommendation 9.**

In order to fully meet the Standards, it is recommended that the College clarify and strengthen the review, assessment and planning recommendation roles of the Policy, Planning and Assessment Council to better serve and inform the College community and better align governance decision-making structures with those of the UH System. (IV.A., III.D., IV.B.)

### **Findings and Analysis**

The institution has refined the planning process and the different planning groups and activities. The College and the system have aligned their decision-making process. The College continues to improve its planning process. Faculty and staff have overwhelmingly supported the work in planning and assessment.

### **Conclusion**

Kapi`olani Community College continues to meet the Standards.



## PART II

### Recommendation 2.

**In order to meet the Standards, the College planning processes should be effectively communicated to all College constituencies and reviewed on an annual basis to ensure that resource allocation leads to program and institutional improvement. (I.B.4, I.B.6)**

### Findings and Analysis

In 2013, the team concluded that, "*Kapi`olani Community college meets the first part of the standard, which calls for effectively communicating the planning and budgeting processes to all parts of the college community. It is making progress toward assessing the effectiveness of the process to ensure that resource allocation leads to program and institutional improvement.*"

As a result of the last follow-up accreditation visit in October 2013, Kapi`olani Community College indicated that it "will assess the effectiveness...of [its] planning processes and related resource allocations to ensure that these allocations leads [sic] to program and institutional improvement." The College has been actively involved in developing and implementing a new resource allocation process that integrates core components of the planning process. This process was led by the interim Vice Chancellor of Administrative Services which included working closely with administration, faculty, staff, and students. The Chancellor's Advisory Council (CAC) utilized a budget and planning workgroup to assist with establishing an effective resource allocation process. This new process directly links key planning college documents into the resource allocation process and has completed one full cycle and is in the second cycle of the process this academic year.

Kapi`olani Community College continues to engage the campus in effective communication regarding planning and the resource allocation process. The new resource allocation process begins with the submission of an *Allocation Request and New Proposal Form (ARF)*. The ARF directly links the planning process of the College with the resource allocation process by requiring justification from at least one of these four criteria: Critical health and safety, Annual Report of Program Data (ARPD), Comprehensive Program Review (CPR), or the College's Strategic Plan. The ARF consists of six major areas: 1.) Information on Request; 2.) Relationship to Program Outcomes; 3.) Strategic Plan; 4.) Communicating the Request; 5.) Administration Review and Comments; and 6.) Authorized Governance Organization Comments.

Within the section of Information on Request, the ARF asks how the request supports the College's and the University System's mission and to indicate the objectives that relate to either the ARPD and/or the CPR. After the individual submits the ARF, the request goes through the department chair or unit head for prioritization, then the dean and/or Vice Chancellor for prioritization, before submission to the four Authorized Governance Organizations (AGOs).

After review and prioritization of all requests by the AGOs, requests are submitted to the CAC Budget and Planning Workgroup for a recommendation, then the CAC for recommendation. Finally the CAC's recommendation goes to the Chancellor for final review and prioritization. The Chancellor determines a final allocation plan and documents any rationale for changes in priorities. This vetting process was included to ensure transparency and clear communication regarding the allocation process. Once the state appropriation is received, the final allocation plan is reviewed and finalized for any needed adjustments.

In addition, another process that included programs to establish a five-year budget plan was also initiated. This included all program administrators, department chairs, and unit heads to identify and project program budgets for the next five years. The interim Vice Chancellor of Administrative Services met individually with every department chair to ensure that the planning process was understood and to provide support for the five-year budget planning process. In addition, two training workshops were held in June 2014 to assist the campus in understanding and implementing the new resource allocation process.

Coupled with the implementation of this new resource allocation process, the College continued to engage in effective and regular communication with the campus. Committees such as the AGO groups and standing council committees met regularly and held forums to provide information about the process and to gather feedback for improvement. In addition, minutes of meetings are posted in a timely manner, and information is also shared in the News & Events emails that are continually shared with the college. College representatives consistently reported to the team that communication was clear, concise, and consistent.

Overall, in speaking with campus representatives (administration, department chairs, and faculty), the overwhelming message was that the College was very pleased with the new budget allocation process. Repeatedly, team members were told by College representatives that the process increased trust, transparency, and campus-wide participation. As a result, this process has increased flexibility and the College is comfortable with the increased accountability. Not only are people informed by the various means of communication (forums, website, emails, etc.), but the campus is involved, informed, and feels proud to be a part of this new budget allocation process. College representatives feel that the process is transparent, effective, and communication continues to be a priority of the administration. Constituents know that the process depends on the planning process and is not a mystery or a secret.

## **Conclusion**

The College is actively engaged in the integration of the resource allocation process. The newly implemented resource allocation process successfully integrates components of the ARPD, CPR, and the Strategic Plan. In addition, the College is systematically reviewing the process and making improvements for the second cycle of the process. This includes changes to the ARPD report to include additional data measures, distance education, and refining effectiveness measures such as fall-to-fall persistence data. The college is also planning to conduct a faculty and staff survey to assess the effectiveness of the resource allocation model and to collect feedback regarding improvement strategies for the next budget allocation cycle.

The team concluded that Kapi`olani Community College has made every effort to meet the requirements of the recommendation related to standards I.B.4 and I.B.6. Kapi`olani Community College ensures that an integrated resource allocation process leads to program and institutional improvement. In addition, the College engages in effective communication to the campus in a systematic manner regarding the planning and budgeting processes. The College took every opportunity to ensure increased participation and transparency. The team confirmed that the college has fulfilled the requirements of this recommendation.

Kapi`olani Community College meets the Standards.

### **Recommendation 3.**

In order to meet the Standards, the team recommends that the College assess student learning outcomes for every course, instructional program, and student support program and incorporate the findings into course and program improvements. (ER 10, I.B, I.B.1, II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.e, II.A.2.f, II.A.2.i, II.A.3, II.B.4, II.C.2)

### **Findings and Analysis**

According to 2013 Follow-Up visiting team, “At this point the college has assessed SLOs for all courses and programs, including most student services. Still, there is a need to:

1. refine the processes;
2. demonstrate how results are incorporated into course and program improvements; and,
3. improve how results are archived and available for review.

#### *1. Refining the processes:*

The Faculty Senate Ad Hoc Student Learning Outcomes and Assessment Committee revised the Course Learning Report (CLR). This report originally documented fall and spring assessment results and next steps to improve student learning. The form now includes an additional emphasis on implementation of strategies identified in the previous academic year course-level assessments. The CLR prompts faculty to not only document assessment results, but to also document improvements.

The College is engaging in ongoing refinements and improvements to the Annual Report of Program Data (ARPD) and the Comprehensive Program Review (CPR). Support and training for faculty to conduct assessment is provided by Assessment Coaches. KCC has funded reassigned time equivalent to two courses for three coaches that are selected by the college Chancellor and Faculty Senate. These coaches provide workshops on SLO skills and support for SLO assessment. They also provide assistance for faculty on completing the CLRs, and for program and discipline coordinators as well as department chairs on completing the ARPDs and CPRs.

Exemplary work in the assessment area is evidenced by the College’s participation in the Lumina-funded Degree Qualifications Profile (DQP) Project, where 20 faculty mapped and aligned the College’s five general education outcomes to the DQP outcomes in the context of the

new AA in Hawaiian Studies Degree. This work and other evidence indicate that there is broad scale participation in assessment of SLOs.

*2. Demonstrating how results are incorporated into course and program improvements:*

There are two documents that house the results of faculty dialogue on course and program outcomes assessments: the Master Course Outline and the ARPD. These documents inform planning and implementation for both improvement of assessment and improvement of instruction. Documentation from the ARPD is also used to submit resource requests in the ARF.

The results of program learning outcomes assessment are integrated into the ARPD. Faculty analyze strengths and weaknesses of each program using performance indicators and the results of program learning outcomes assessment. Sample ARPD's were examined, which corroborated the use of these documents to support the assessment process and the alignment of course and program SLOs. As an example, the Liberal Arts ARPD provides rich evaluation of the program SLOs (PLOs), which serve as General Education Outcomes. These outcomes are assessed primarily by three programs: Writing across the Curriculum (WAC), Service Learning, and Cornerstone.

All College learning programs undergo a three-year Comprehensive Program Review (CPR). Each CPR includes an examination of the previous three-year's ARPD analyses and results of program learning outcomes assessment. This culminates in an action plan for improvement to take place over the next three years. Action plans that require additional resources are funded through the revised planning process discussed in Recommendation 2. Interviews with College personnel supported the buy-in of the CPR process for tactical planning driven by SLOs assessment and system supported program data (ARPDs).

*3. Improving how results are archived and available for review:*

Currently, the results for course and program learning outcomes, outcomes assessments, and analyses are housed online in the ARPDs and CPRs. Furthermore, the CLRs are archived at a public website in order to provide access to the entire college community as well as the general public. Additionally, up-to-date tracking of course competency assessment over time is maintained in the Learning Assessment Schedule Report (LASR).

Because assessment results are maintained in separate reports (APRD, CPR, CLRs), the Faculty Senate's Ad Hoc Student Learning Outcomes and Assessment Committee along with the SLO Coaches determined the need for an Assessment Management System (AMS) to more effectively document student learning outcomes assessment for instructional faculty, counselors, administrative services, student services, and library faculty. In January 2013, the Faculty Senate made the decision to task the Ad Hoc Student Learning Outcomes and Assessment Committee with coming up with a plan and a solution to streamline the student learning outcomes assessment and improvements. It started with a qualitative survey sent to all faculty asking them what they liked best, liked least, and what needs improvement regarding student learning outcomes assessment. The results indicated that time, uncertainty, and lack of "faculty ownership" were the most common themes. Following this, Faculty Forums were held for both

faculty and administrators to attend and discuss solutions. The Ad Hoc Student Learning Outcomes and Assessment Committee gathered all input and made a proposal to recommend a proprietary Assessment Management System. The College Chancellor, upon the request of the Faculty Senate, provided Title III funds in order to purchase the Taskstream AMS. To facilitate implementation and support of Taskstream, an assessment coordinator position was funded.

### **Conclusion**

The College has done considerable work in addressing this recommendation, and the evidence provided supports that college has refined the processes, demonstrated how results are incorporated into course and program improvements, and has improved (and continues to improve) how results are archived and available for review.

Kapi'olani Community College meets the Standards.

### **Recommendation 4.**

In order to meet the Standards, the team recommends that the College utilize student learning outcomes assessment to support institutional planning decisions. (I.B, I.B.1, II.A.1.a, II.A.1.c, II.A.2.a, II.A.2.b, II.A.2.e, II.A.2.f, II.A.2.i, II.A.3, II.B.4, II.C.2)

### **Findings and Analysis**

The concern from the previous Follow-Up Report visiting team was that, "...it is unclear how programmatic and institutional decisions based upon aggregated SLO assessment results, including trends and issues, is being accomplished at this time."

Through the College's initial response to this recommendation, as well as the current response, evidence, and interviews with various College personnel, it is clear that the College reviews its planning processes annually, and ensures that resource allocation leads to program and institutional improvement by revisions and improvements to the following processes: annual review of Strategic Plan Outcome Data; reporting and analyses of the course and program SLO assessments; and the Annual Integrated Program Review, Planning, and Budget Allocation Cycle. Essentially, data based on program student learning outcomes assessment from the ARPDs and the CPRs, student achievement outcome data from the Strategic Plan, and the Executive Administration Assessment Report are all integral in resource allocation decisions for the purpose of program and institutional improvements. These processes were described in detail in the college's responses to Recommendations 2 and 3.

In addition, the College has collected and provided extensive evidence that they have used aggregated student learning outcomes assessment results to support planning decisions and implement course and program improvements in areas that include, but are not limited to:

- Developmental mathematics program
- Accelerated learning instruction
- First Year Experience

- Professional development for Mathematics and Chemistry Student Success
- College-developed PLUS program
- Peer mentors for STEM
- Undergraduate Research Experience for STEM
- Expansion of Service Learning options
- High Impact Practice
- Carry-over Title III funds for expansion of testing center
- Carry-over Title III funds to upgrade campus to Windows 7
- Student Success Campus-wide Initiative

## **Conclusion**

The College has fully addressed this recommendation. The College community systematically uses student learning outcomes assessment to support institutional decision-making. The following statement about the Student Learning Outcomes Assessment Coaches sums up the current climate at the College, “The Assessment Coaches describe student learning outcomes assessment as not just compliance with accreditation standards, but as a rich conversation about learning that informs decision-making campus wide.”

Kapi`olani Community College meets the Standards.

## **Recommendation 5.**

In order to fully meet the Standards, the team recommends the College: 1) identify student learning outcomes for all student services programs, 2) assess student attainment of these outcomes, and 3) conduct dialogue to use assessment results to implement program improvements. (Standards II.B.4, II.C.2)

## **Findings and Analysis**

The 2013 Follow-Up Team stated that, “In order to fully meet the standards, Kapi`olani Community College needs to engage all aspects of Student Service and other unit services in assessment of student learning outcomes.”

The College developed an Assessment Team in spring 2013 in order to engage all aspects of Student Services in student learning outcome assessment. This work was given more support in November of 2013 by the Office for Institutional Effectiveness (OFIE). In addition, the College supplied a counseling faculty member with .25 release time to serve as Counseling Assessment Coordinator. As mentioned in the response to Recommendation 3, there are three Assessment Coaches. These coaches have also worked with the Counseling Assessment Coordinator in the following ways: development of a coordinated SLO matrix; calibration of a common rubric for all counseling SLOs; development of an SLO reporting schedule; updating of reporting templates; an assessment site in Laulima; and individual and group training sessions.

The College has developed student learning outcomes for all student services programs. The college's decentralized counseling services structure consists of 13 counseling Student Services units. Each of these units has identified student learning outcomes, and has an assessment reporting schedule dating from fall 2013 through to Spring 2021. Analyses and dialogue regarding the student services learning outcome assessment results are evident in all 13 areas. Implementation of improvements to programs has begun, and all programs have either developed new student learning outcomes or improved existing student learning outcomes for more robust and coordinated assessments. This led to the development of five Counseling Learning Goals and 14 Counseling Student Learning Outcomes. In each program, counseling faculty are updating and developing their assessment tools to better measure these new student learning outcomes.

There are also Service Area Outcomes for Services for Students. The College received the recommendation to include learning outcomes in these areas with the February 2014 action letter from the ACCJC. The College immediately responded with the development of Service Area Outcomes in three areas: Admissions, Financial Aid, and Graduation and Commencement. Each of the Service Area Outcomes has been assessed, and one has been revised. Those assessments have been analyzed, and through dialogue, improvements to current processes are being made:

- Admissions – Submitting a complete application is a successful result of the SAO for Admissions. The college's registrar decided to discern why students were not submitting complete applications. A survey was sent to students but did not yield conclusive information. Upon investigation by the registrar, it was found that the entire UHCC system was experiencing problems with students not submitting complete applications. Currently, there is a proposal to centralize admissions with the UHCC System to improve the number of complete applications.
- Financial Aid – Student understanding of the Satisfactory Academic Progress (SAP) Policy is the goal. A survey was sent to students to assess whether or not there was a connection to understanding the SAP and student success. Results of the survey showed that there were both students that understood and students that did not understand the SAP policy. To increase the number of students that understand the SAP policy, there will be a focus on this policy with all first-year new students at the New Student Orientation.
- Graduation and Commencement – Students determining their graduation eligibility through the STAR online Academic Plan is the goal here. After assessment of the SAO, it was determined that the SAO needed to be revised, since it led to no real determination of students' abilities to determine their graduation eligibility.

## **Conclusion**

The College has addressed this recommendation. The faculty and staff in the student service areas have really embraced the student learning outcome assessment process, and are excited about the improvements that they are able to implement from informed decisions based on student assessment data and resulting dialogue.

Kapi`olani Community College meets the Standards.

### **Recommendation 8.**

**In order to meet the Standard, the team recommends that the College develop a technology plan to identify technology needs and inform the budgeting process (III.C.)**

### **Findings and Analysis**

The College developed a thorough technology plan. As indicated by the last team, the College needed to show more active steps in the plan and responsibilities. The new plan responded well to the recommendations and met the expectations laid out as a result of the last visit. There are seven goals that are divided into several objectives. Each objective has an activity, and each activity has a person responsible for making it happen. Each action step has a start date and then a status point. The team verified this through interviews and evidence provided by the College.

The plan is tied to the budget process. The plan is looking at the technology needs of the institution and how resources are allocated even in difficult times. The plan was created with input from a broad sampling from the College. Departments used to crave the existence of a central group to support the needs of the department. The plan has allowed for a good partnership between the academic departments and the Center for Excellence in Learning Teaching and Technology (the college's information technology department).

The plan has centralized the information technology efforts. The uniformity will make the function more efficient. A uniform schedule can be followed for maintenance and replacement. For example, faculty spoke of the difficulty they used to run into when a projector did not work and they had no resources to replace it. With the plan and a unified service area, the replacement may take hours as opposed to months.

The process of developing the plan allows the College to see what the needs are on the campus and be able to put the priorities together. Directions used to be vague and communication was haphazard. The comprehensive nature of the plan makes it take into account a broad view of technology needs without neglecting anything: Emergency management system, security, improvement of two-way communication and the telephone system.

The plan is intimately tied to the budgeting process. The timeline synchronizes with the budget process. The plan goes under a yearly review process to make sure that the needs are still relevant. The workgroup reviews the requests to see how they are tied to the budget process.

Faculty and staff have taken to heart the process to develop a technology strategic plan. The report was comprehensive as the visiting team in 2013 asked for. The plan was not only developed, but it is being followed. Of the several dozens of action steps the team examined, there was only one that was behind in its implementation. The integration of the plan as a centralized system is well accepted by the College community: faculty, staff, and students.



## **Conclusion**

As required by the recommendation, the College has attended to the concerns noted by the visiting team by developing an outstanding technology plan. The plan follows the planning model of the College and is in tune with the planning and budgeting philosophy.

Kapi`olani Community College meets the Standard.

## **PART III**

### **Commission Requirement.**

**The Commission also requires Kapi`olani Community College to demonstrate that it has adopted, implemented, and is adhering to the UH Policy on faculty (full- and part-time) evaluations to include, as a component, effectiveness in producing learning outcomes (Standard III.A.1.c).**

### **Findings and Analysis**

The University System worked with the faculty leadership and within their policy to provide policy directions to Kapi`olani Community College. The College in turn worked with the Faculty Senate to institutionalize the evaluation process that incorporates student learning outcomes as an element of the faculty evaluation. Using guidelines from the ACCJC standards, the College has adopted measures to ensure faculty evaluation includes effectiveness in “producing” and “using” student learning outcomes.

The guidelines were included in a Senate Resolution dated May 5, 2014 that is incorporated in the full-time and part-time faculty evaluations. There are detailed descriptions of steps that may be followed to arrive at the evaluation. Because timelines have been established and momentum points in the process have been achieved, the team believes that the process has a likelihood of being successful.

### **Conclusion**

Both the community college and the University of Hawai`i Community College system have worked well to advance the evaluation process that incorporates the production of student learning outcomes in the evaluation process of all faculty. The team believes that the Kapi`olani Community College satisfies the requirements of the 2012 and 2013 visiting teams.

Kapi`olani Community College meets the Standard.

## **UHCC System Recommendations**

### **UH Recommendation 4: Resources**

In order to meet the Standards, it is recommended that a comprehensive UH system-wide technology plan that includes and supports distance education be developed and implemented and is integrated with institutional planning (Standards II.A.1.b, II.A.1.c, II.A.2.c, III.C.2, III.C.1, III.C.1.c, III.C.2).

The University of Hawaii Interim Vice President for Technology developed a plan posted on the web that is addressing the technology needs of the system. The plan provides the necessary guidance for the community colleges to develop their own plan. Some parts of the plan will address some needs at the system level. For example, student management system, data collection, and infrastructure need to deliver technology services, distance education, and curriculum management system. The campuses are responsible for the services at the campus level. It is at that level the planning process integrates technology with the overall planning process. This division of responsibilities facilitates the work of the College to follow its planning processes.

The system is planning to use open educational resources. Both the university faculty and the colleges' faculty are working on it. As shared by some and by the Vice President for the Community Colleges, the current plan is balancing faculty initiative versus strategic decisions to serve students: moving to meeting the needs of students and not just what the faculty want to do. This paradigm shift is possible because of the amount of trust the system and Kapi`olani Community College (KCC) have built among the faculty and staff.

The system and the colleges are working together to address critical needs of the islands' workforce development and educational needs. They have undertaken a study of what courses are offered and not offered via distance education. This analysis has allowed them to decide where to focus their efforts in the development of new online courses and to base those choices on students' needs and not simply faculty interests. The distance education plan will allow the institutions to determine what programs are offered and not offered and what should be offered in whole or in part and the reason for the offerings: workforce needs or access. The system is working with the colleges to put in place professional development activities to support course and program design as well as sharpening faculty skills to teach online. Finally, the strategic directions are leading toward the exploration of "Open Educational Resources" that may include online course resources to replace printed textbooks.

The guidance from the system has been followed by KCC in the development of its plan as described in Recommendation 8 Findings and Analysis above.

#### **Conclusion:**

The UH system has developed a system-wide technology plan that includes and supports distance education. This plan is being carried out by Kapi`olani Community College and is well integrated with the institutional planning process. The team concludes that the system satisfies the requirements of the recommendation.

Kapīolani Community College meets the Standards.

### **UH Recommendation 5. Board and Administrative Organizations.**

In order to meet the Standards, it is recommended that the UH Board of Regents (BOR) adopt a regular evaluation schedule of its policies and practices and revise them as necessary. In addition, the UH BOR must conduct its self-evaluation as defined in its policy and as required by ACCJC Standards. (Standards IV.B.1, IV.B.1.g)

### **Findings and Analysis**

For the past two years, and by requirements of the recommendation, the University of Hawai`i has undertaken a thorough review of its policies. This work has allowed the system to add necessary policies and revise outdated policies. As part of this work the system changed the format of its policy. The policy format has dates for the inception of the policy, the title of the person who is accountable to maintain it, and the date it is scheduled to be reviewed. Both policies and procedures follow a standard format.

The second part of the recommendations was for the University of Hawai`i Board of Regents to conduct a self-evaluation to be in compliance with its policy and ACCJC standards. Such an evaluation was scheduled for the spring of 2014, but had to be postponed until November 2014. The Board self-evaluation was conducted with the help and support of the Association of Governing Boards (AGB). The results of the assessment appeared to be frank and candid. The board has identified the next steps it wants to take to improve itself and how it conducts business.

### **Conclusion**

The policies of the Board have been updated and new policies have been adopted. The Board has conducted its self-evaluation and identified next steps for its improvement.

Kapīolani Community College meets the Standards.

### **Final Observations**

The team visit in 2012 found that although all of the 24 degree and certificate programs had gone through one cycle of assessment, only 66 percent of courses had assessed SLOs (referred to as competencies at the course level). Since that time, the College, and especially the Faculty Senate, have done considerable work to address remaining issues observed by the 2012 team. The 2013 team reported that all courses taught within the prior three years had SLOs that were assessed. Student Support Services changed from student developmental outcomes (SDOs) to SLOs, and their work became more fully integrated into program review. All course outcomes are aligned with program outcomes as part of the development of a master course outline. This alignment is archived with the master course outline in Curriculum Central, the UHCC system's web-based curriculum management system.

Faculty have given considerable attention to improving the assessment process through refinements in reporting and analysis; additionally, the Course Learning Report (CLR) was revised to help document the implementation results that come from course and program assessments. Data and analysis of course learning outcomes inform analysis of program learning outcomes, and this assessment in turn is discussed in the ARPD, which frames program planning. As a result of these assessments, several changes over the last 3-5 years to the ARPD process have expanded the information in the ARPD reports to support planning and resource allocation decisions. The CPR draws from ARPDs and reports a 3-year view of the program's health and plans as related to the College's Strategic Plan goals and outcomes. It is also used to analyze, from a broader perspective, student success at learning outcomes at both the course and program levels.

Salient efforts to improve the assessment process include collegial support from three faculty SLOs coordinators (referred to as coaches), broad scale effort to embed SLOs results into program improvements, and movement forward to identify technology to archive assessment results. The outcomes of these efforts are supported by evidence and interviews that took place at the College. Samples of APRDs, master course outlines, and Allocation Request and New Proposal Forms (ARFs) supported the use of SLOs assessment in course improvement and resource allocation requests.

Furthermore, the system and the College have taken great strides to tighten up their planning efforts to move in a mutually supportive direction in regard to strategic planning and technology planning. These efforts have borne significant and observable changes at Kapi'olani Community College.

The Team commends the staff, the administration, the students, the system of community colleges, and the Board of Regents for their tremendous progress over the past two years.