

PEER REVIEW TEAM REPORT

Solano Community College
4000 Suisun Valley Road
Fairfield, CA 94534

This report represents the findings of the Peer Review Team that conducted a focused site visit to Solano Community College September 24-25, 2024. The Commission acted on the accredited status of the institution during its January 2025 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Mark Sanchez, Ed.D.
Team Chair

Table of Contents

Summary of Focused Site Visit.....	5
Findings and Recommendations of the Peer Review Team Report	6
Introduction	7
Eligibility Requirements	8
Checklist for Evaluating Compliance with Federal Regulations and Related Commission Policies	9
Public Notification of a Peer Review Team Visit and Third-Party Comment.....	9
Standards and Performance with Respect to Student Achievement.....	10
Credits, Program Length, and Tuition.....	11
Transfer Policies.....	12
Distance Education and Correspondence Education	13
Student Complaints	14
Institutional Disclosure and Advertising and Recruitment Materials.....	15
Title IV Compliance	16
Standard I	17
I.A. Mission	17
I.B. Assuring Academic Quality and Institutional Effectiveness.....	18
I.C. Institutional Integrity.....	21
Standard II.....	25
II.A. Instructional Programs.....	25
II.B. Library and Learning Support Services	30
II.C. Student Support Services	32
Standard III	34
III.A. Human Resources.....	34
III.B. Physical Resources	37
III.C. Technology Resources.....	37
III.D. Financial Resources.....	38
Standard IV	41
IV.A. Decision-Making Roles & Processes	41
IV.B. Chief Executive Officer.....	44
IV.C. Governing Board	45
IV.D. Multi-College Districts or Systems	47
Quality Focus Essay	48
Summary of Team ISER Review	51

Solano Community College
Peer Review Team Roster
TEAM ISER REVIEW

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Superintendent/President

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Monterey Peninsula College
Superintendent/President

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Mr. Christopher Howerton
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FOCUSED SITE VISIT**

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Vice President, Business and Financial Affairs

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Ms. Melynie Schiel
Vice President

Summary of Focused Site Visit

INSTITUTION: Solano Community College

DATES OF VISIT: 24-25 September 2024

TEAM CHAIR: Dr. Mark Sanchez

This Peer Review Team Report is based on the formative and summative components of the comprehensive peer review process. In March 2024, the team conducted Team ISER Review (formative component) to identify where Solano Community 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.

A five-member peer review team conducted a Focused Site Visit to Solano Community College, 24-25 September 2024 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 August 21, 2024 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 thirty-six faculty, administrators, classified professionals 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 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.

Findings and Recommendations of the Peer Review Team Report

Recommendations to Meet Standards:

Recommendation 1: To meet the Standard, the team recommends the College engage in continuous, broad based, systematic evaluation and planning. The College should integrate program review, planning, and resource allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. College planning should address short- and long-range needs for educational programs and services and for human, physical, technology, and financial resources I.B.1, I.B.9.

Recommendation 2: To meet the Standard, the team recommends the College defines and assesses student learning outcomes for all instructional programs and student-learning support services, communicate the results of student learning, and use them as the basis for improvement I.B.1, I.B.2, I.B.4, I.B.7, I.B.8, I.C.3, II.A.3.

Recommendation 3: To meet the Standard, the team recommends ensuring that there is regular and substantive interaction between the students and instructor(s) for fully online courses. II.A.7, *ACCJC Policy on Distance Education and on Correspondence Education*.

Recommendation 4: To meet the Standard, the team recommends the College ensures that the institution's governance and decision-making policies, procedures, and processes are regularly evaluated to assure their integrity and effectiveness. The institution widely communicates the results of these evaluations and uses them as the basis for improvement. IV.A.7.

Introduction

Solano Community College was founded in 1945 as Vallejo Junior College. In 1967, it was established as an independent California Community College and opened its central campus in Fairfield, California. In addition to the central campus, Solano Community College has educational centers in Vacaville and Vallejo California.

The College and centers serve approximately 10,000 students per year, enrolling students from throughout Solano and Yolo counties. Solano College also has a shared space located at Travis Air Force base. This relationship allows the College to serve Air Force personnel in their service area.

The College offers a wide range of Academic and Career/Technical Education programs from automotive technology to aeronautics. These programs and course offerings culminate in 88-degree offerings and 39 certificates. The College also hosts an Early College High School program on its central Fairfield campus, in partnership with Angelo Rodriguez High School. A comprehensive Rising Scholars program to support justice impacted students in achieving College degrees, certificates, and learning are also offered.

The county served by Solano Community College is a diverse community, often ranked as one of the most diverse communities in California and the country. The College enrollment of Latino, Black, and Asian/Pacific Islander students exceed the percentages of these ethnic groups in the community. The College works to ensure programming effectively engaging the students they serve.

The College has experienced an enrollment decline because of the COVID-19 pandemic, yet, through their work in outreach, course scheduling, and programming the College is beginning to experience an upward trend in their student enrollment. The College continues to work towards boosting their student enrollment numbers to pre-pandemic levels.

During the campus tour, it was evident the College prioritizes its students by offering essential support services. Their Basic Needs Program is particularly noteworthy, as it creates a welcoming environment that addresses food and housing insecurities through a Food Pantry, a clothing closet, and housing assistance with additional guidance to community-based resources. The team also valued the campus's collaborative spirit and its commitment to working together.

Eligibility Requirements

1. Authority

The team confirmed Solano Community College is authorized to operate as a postsecondary educational institution by the California Community College Chancellor's Office, the Accrediting Commission for Community and Junior Colleges (ACCJC), and the US Department of Education. Solano Community College first received accreditation in 1967 from ACCJC and was most recently affirmed in 2018.

2. Operational Status

The team verified Solano Community College is operational and serves students who are actively pursuing transfer, certificates, and/or degrees. The team verified operational status at the Vacaville, Vallejo, and Fairfield locations. Course enrollments in fall 2021 were 8,231; course enrollments in fall 2022 were 8,386.

All courses are published on the website and in the College catalog.

Established in 1945 as Vallejo Junior College, part of the Vallejo Unified School District, Solano Community College (SCC) became an independent community College district in 1967 and has been in continuous service since that time. The district currently includes centers in Vacaville and Vallejo and enrolls over 13,000 students from the communities of Benicia, Dixon, Fairfield, Suisun, Vacaville, Winters, and Vallejo.

3. Degrees

The team confirmed the College offers 62 associates in arts and science Degrees, and 26 associate degrees for Transfer, with most certificate programs within a guided pathway, offering the addition of general education requirements for degree completion. Degree programs offered meet the 60 unit (two-year requirement). The College offers a Bachelor of Science Degree in Biomanufacturing.

The College meets this Eligibility Requirement.

4. Chief Executive Officer

The team confirmed the College has a chief executive officer, Dr. Kellie Sims Butler, duly appointed by the governing board with the title of Superintendent/President and whose full-time responsibility is leadership and oversight of College operations. Dr. Sims Butler possesses the requisite authority to administer board policies. Solano Community College informs the Commission immediately when there are noteworthy changes.

5. Financial Accountability

The team confirmed Solano Community College performs audits for all financial records, which are conducted by an independent accounting firm. Audit reports are certified, and findings and associated College responses are appropriately documented. Audits for the College comply with federal programs.

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

Evaluation Items:

X	The institution has made an appropriate and timely effort to solicit third party comments 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 Commission <i>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 confirmed Solano Community College has solicited third-party comment via open forums, email, communication, website postings, and public comment during District Board of Trustees meetings. The team received third-party comments.

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: The team found the College maintains institution set standards for programs across the College. The College has defined elements of student achievement performance. 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.

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 College meets the standard by ensuring that credits, program length, and tuition comply in meeting the Commission's requirements.

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 has reviewed the transfer policies and finds that they are appropriately disclosed to students and the public, both for students seeking to transfer credits into the College and to transfer credits out. The Catalog pages clearly describe multiple ways to achieve transfer of credit into the College. The narrative additionally describes how transfer pathways from other community Colleges into the Bachelor of Science in Biomanufacturing have become more flexible.

Distance Education and Correspondence Education

Evaluation Items:

For Distance Education:	
	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> .
	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.
For Correspondence Education:	
X	The institution demonstrates comparable learning support services and student support services for correspondence education students. (Standards II.B.1, II.C.1)
X	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.
Overall:	
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):

	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.
X	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:

The team could not identify substantial evidence that certifies the College meets the distance education requirements of regular and substantive interaction as outlined in the Commission *Policy on Distance Education and Correspondence Education* and regular interaction between a student and an instructor(s). Thus, the College does not meet these Distance Education standards.

Recommendation 3: To meet the Standard, the team recommends ensuring that there is regular and substantive interaction between the students and instructor(s) for fully online courses. II.A.7, *ACCJC Policy on Distance Education and on Correspondence Education*.

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.
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	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 has a policy and student handbook on formal student grievances and provides links to file complaints with the Accrediting Commission for Community and Junior Colleges (ACCJC) and the California Community Colleges Chancellor's Office. The team notes that the College is working on piloting a software platform to assist in managing increasing student complaint cases. The College is compliant in following their established processes for communication and follow up with student complaints.

Institutional Disclosure and Advertising and Recruitment Materials

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:

The College publishes an annual College Catalog to provide essential information to current and prospective students. The catalog contains up-to-date information on facts, requirements,

policies, and procedures, as required by the ACCJC, including details about the College's accredited status. To ensure accuracy, precision, and currency, the College follows a multi-stage, multi-person review process (I.C.2).

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 financial aid data, and its student loan default rates are within the acceptable range defined by ED. (Standard III.D.15)
	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 College presented evidence on the required components of the Title IV program. Solano College's 2022-2023 external audit showed that the College was deficient (received audit

findings) in the following: Return of Title IV Funds, NSLDS Enrollment Reporting, Outstanding Title IV Checks and Student eligibility and awarding. The College provided a report addressing each finding and those responses were included in the 2022-23 audit report. The visiting team followed up on the recommendations from the external auditors and the College's responses to the auditor recommendations. The College has taken steps to enhance the training of financial aid staff, as well as improving collaboration between Financial Aid and Business Services offices. These efforts have achieved improvements in reporting. The College is ensuring federal government compliance on internal controls and will continue to verify that controls are adhered to going forward (III.D.15).

Standard I

Mission, Academic Quality and Institutional Effectiveness

I.A. Mission

General Observations:

Solano Community College has an explicit commitment to its culturally and academically diverse student population. The College offers a broad range of degrees and other credentials with a strong commitment to student learning and achievement. Additionally, the institution is striving to be a regional leader in higher education for the widely diverse communities it serves. The mission is reviewed through participatory governance and approved by the governing board.

Findings and Evidence:

Solano Community College presents their current mission statement in the submitted Institutional Self-Evaluation Report (ISER). This statement was updated recently, in fall 2023 through participatory governance, to expand and include the addition of bachelor's degrees after the College's successful approval to add a baccalaureate-level biomanufacturing degree. The team found that the College mission statement is complete and aligns with Eligibility Requirement 6. The mission describes a broad educational purpose: "helping our students achieve their educational goals"; an intended student population: "culturally and academically diverse student population drawn from our local communities and beyond"; types of degrees and other credentials: "transfer courses, career and tech education, basic skills, which culminate in certificate programs, associate degrees, bachelor's degrees, and lifelong learning"; and a commitment to student learning and student achievement. Additionally, the team also notes the institution's "Vision Statement" which furthers the College's mission to be a "recognized leader in educational excellence, transforming students' lives. Both the mission and vision statements are student-focused and reflect the broad purpose of serving their communities. (I.A.1).

The College uses and collects data in various ways to determine how effectively it is accomplishing its mission. The team was provided the most recent version of their program review handbook (2020) and examples of completed program reviews. The team found in the program review handbook the expectation for each program self-study report to “address the program’s status as it relates to the College and program mission, assessment, curriculum, campus and community outreach, student equity and success, resources, and planning.” This reflection and data collection expectation was affirmed and demonstrated in the provided program reviews. (I.A.2).

The College offers its programs and services at the main Fairfield campus, centers and specialized facilities in Vacaville and Vallejo, as well as shared space at Travis Air Force Base. Additionally, the College hosts an Early College program in partnership with a local High School and a well-established Rising Scholars program. Services and programs support the College’s mission and are assessed through an established program review process that informs planning and resource allocations. The team recommends the College engage in comprehensive and continuous broad-based planning through this process. The Academic Program Review Committee meets monthly to support this work. The team reviewed a sample of agendas and approved minutes from this committee as found on the committee’s website. The College is investing in state-of-the-art educational facility updates and construction with a funded Measure Q bond. Curriculum and program planning for these various sites includes the faculty academic senate input and recommendations from program reviews. (I.A.3).

The team affirmed that the current mission statement is published and found on the College’s website, documented in District Board Policy 1003 and on page 5 in the College catalog. Updates and reviews of the mission statement occur and are vetted in the College’s participatory governance structure, giving opportunity for input from the Academic Senate and College Governance Council (CGC) prior to Governing Board adoption. The team reviewed meeting agendas from the Academic Senate and College Governance Council. (I.A.4).

Conclusions:

The College meets the Standard.

I.B. Assuring Academic Quality and Institutional Effectiveness

General Observations:

Solano Community College demonstrates a collaborative approach in meeting the College’s overall mission in serving the community. There is a general sense of care centered around diversity, equity, and inclusion with an understanding of the needs of their students. The College maintains a commitment to fostering an inclusive and equitable learning environment. The Academic Senate is involved in the discussions centered on student outcomes, academic

quality, student learning and achievement. The team found the College can improve by defining and assessing student learning outcomes for all instructional programs and learning support services and using this data substantive and sustained ways to align their institution processes to continuous improvement of student learning and achievement.

Findings and Evidence:

The College demonstrates an overall focus on student equity in alignment with the demographics of the community. The College engages in collegial dialog on programs and services that will best meet the needs of students. Based on student survey feedback the College has developed programs and services to meet the evolving needs of students. The team found the College does not engage in substantive and sustained dialog focused on the continuous improvement of student learning and achievement. The team reviewed documentation from course outlines of record to determine if student learning outcomes were being used to drive academic quality and improvement of student achievement. The team was unable to find substantive evidence that this is happening. (I.B.1).

The team found the College has not defined and assessed student learning outcomes for all instructional programs and student and learning support services. The College is working to improve in this area. A dedicated Assessment Committee has been formed and is responsible for evaluating the efficacy of the assessment process. Recently, the committee has reexamined the policies and procedures for assessing learning outcomes, with a particular emphasis on distance education as the College has emerged from the pandemic. To aid in the assessment process, the Assessment Committee offers an Assessment Handbook containing detailed processes and guidelines, and the Assessment Coordinator continues to provide training sessions for all faculty members. To meet the standard, the College should continue to ensure they are assessing student learning outcomes in all programs. (I.B.2).

The College has established institution-set standards (ISS) that are directly aligned with its mission to enhance student achievement. The College evaluates these standards, reviewing their measures and metrics annually as part of its ACCJC (Accrediting Commission for Community and Junior Colleges) annual report updating process. The team reviewed documentation outlining the College's Institution Set Standards, Research Office planning documentation including data analysis. (I.B.3).

The College has implemented a Master Schedule of Assessment as part of its integrated planning process to enhance student learning and achievement across both student services and instructional departments. Utilizing a range of assessment tools, the College evaluates disaggregated student success data to assess achievements. However, the team did not find that the College reviews and utilizes assessment data to inform institutional planning as learning assessment is not occurring on a regular and consistent basis and there appears to be a lack of clarity regarding whether the decisions that are made for the area's improvement are

based on the evaluation results. The team reviewed program review documentation, Research Office planning documentation, and student learning and achievement data for the College. (I.B.4).

The College ensures alignment with its mission through a program review process, which evaluates goals, objectives, student learning outcomes, and overall student achievement. Every department / program is required to conduct regular and comprehensive program reviews to assess their goals and objectives. The team suggests the College operationalize this comprehensive broad-based system of evaluation and planning to drive decision making on continuous quality improvement. Oversight of the standardized academic program review process is provided by the Academic Program Review Committee, which presents recommendations to the Academic Senate for approval. The program review template incorporates data from student surveys, and both quantitative and qualitative data are analyzed to identify equity issues and achievement gaps. The team reviewed program review planning documentation, data from the College's Research Office, and College Governance meeting agendas. (I.B.5).

The College disaggregates and evaluates achievement data for specific student subgroups, including ethnicity, age, gender, foster youth status, and more, to pinpoint any existing achievement disparities. Subsequently, the College implements strategies, which may involve redistributing resources, to address and alleviate these gaps. The team reviewed College student success data and data analysis from the Research Office. (I.B.6).

The team found the College has begun the work to institutionalize policy and procedures assessment leading to institutional effectiveness. The team did not find evidence that the College regularly and systemically reviews and assesses its policies, processes, and practices across all areas of the institution, including non-instructional programs, student and learning support services, resource management, and governance processes through participatory governance to ensure their effectiveness in supporting academic quality and fulfilling the College's mission. (I.B.7).

While the College provided evidence of the distribution of data through the Online Factbook on the College's Institutional Research (IR) webpage, the team did not find evidence the College communicates the outcomes of assessment and evaluation activities. Additionally, various communication channels (governance committees, newsletters, and the Solano CARES website) are inconsistently employed as methods of communication to ensure internal and external stakeholders are informed about assessment and evaluation outcomes and events. (I.B.8).

The College provided examples of supporting improvements in institutional effectiveness. One example of institutional effectiveness is the College's program review process. The College follows a 6-year program review cycle, chosen to coincide with the program review for bridge programs. Through the program review process, divisions and departments can identify resource needs. From the perspective of Human Resources, the College prioritizes new faculty needs during the Fall semester. The prioritization list is developed in collaboration of Academic

Senate and Deans. The faculty prioritization list is provided to the Superintendent President by end of Fall semester. The College reports that this collaborative process has worked for them, as it includes constituency voices throughout the process. The College develops their Human Resources non-instructional prioritization list in the spring and works to align that process with the budget development process. This calendar provides the College ample time to review resources, verify the California Faculty Obligation Number (FON) and 50% regulation implications. The College self-identified the need to enhance their non-instructional resource request process and have begun a pilot program, where programs/departments identify their own metrics of measurement to justify growth or sustainability to their areas. The College demonstrates the ability to integrate data into program reviews with strategic planning in mind considering resource allocation alignment, with the focus being the College's vision and mission. The College implemented a new pilot resource allocation request for non-instructional programs and services this year. Due to the newness of the process, not enough time has elapsed to close the loop in planning, therefore, it will be imperative for the College to fully implement the process to meet the standard. (I.B.9).

Conclusions:

The College meets the Standard except for standards I.B.1, I.B.2, I.B.4, I.B.7, I.B.8 and I.B.9.

Recommendation 1: To meet the Standard, the team recommends the College engage in continuous, broad based, systematic evaluation and planning. The College should integrate program review, planning, and resource allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. College planning should address short- and long-range needs for educational programs and services and for human, physical, technology, and financial resources I.B.1, I.B.9.

Recommendation 2: To meet the Standard, the team recommends the College defines and assesses student learning outcomes for all instructional programs and student-learning support services, communicate the results of student learning, and use them as the basis for improvement I.B.1, I.B.2, I.B.4, I.B.7, I.B.8, I.C.3, II.A.3.

I.C. Institutional Integrity

General Observations:

The College endeavors to assure the clarity, accuracy, and integrity of information to all stakeholders regarding its mission statement, educational programs, and student support services. Additionally, the team finds that the College displays accurate information to stakeholders regarding its accreditation status with its accreditors.

The College provided some evidence of planning for improvement of institutional structures and processes, student achievement of educational goals, and improvement of the process for the assessment and evaluation of student learning outcomes.

The team did not find evidence that the College systemically reviews and assesses its policies, processes, and practices through participatory governance to ensure their effectiveness in supporting academic quality and fulfilling the College's mission. In addition, the team did not find evidence the College communicates the outcomes of assessment and evaluation activities through its shared governance committees.

Findings and Evidence:

The College ensures clarity, accuracy, and integrity in the information provided to students, staff, and related entities regarding its mission statement, educational programs, and student support services. This is evidenced by including the mission statement in various College materials, its periodic review, and its dissemination to the College community. Student learning outcomes (SLOs) are readily available on the website and course syllabi, following established review processes. While the College strives to continually assess student learning outcomes through regular review processes and integrating assessment practices into curriculum development and instructional practices, The team suggests the College follow through on establishing a thorough and consistent process for the assessment of Student Learning Outcomes. New courses and programs undergo approval procedures and are accessible online and in college publications. Clear links to student support services are provided on the website, with ongoing updates and communication through multiple channels like social media, email, and Canvas. The College maintains transparency regarding its accreditation status through its website, including relevant contact information for the accrediting body. Overall, the College employs various means to provide accurate information and maintain transparency regarding its accreditation status. (I.C.1).

The College displays precise, accurate, and current information for all items listed in the "Catalog Requirements" in the online catalog. Financial Aid information is included in the online and print catalog under their "Getting Started" page. The College prints yearly a limited number of catalogs to use by Admissions and Records, Counseling, academic departments, and other services. Additionally, their online version is a direct copy of the paper version and is available to stakeholders via a link on the homepage. (I.C.2).

The College utilizes their "Interactive Factbook," which is found on their Research & Planning webpage, as a main source of student learning and student achievement. In their "Interactive Factbook," disaggregation for student groups is possible and is accessible by the public. Other sources of evidence include their EMT Website Pass Rates and their "Job placement data of degree and certificate completers." It is unclear how the College makes determinations regarding the meaning of the data from the student learning outcomes.

The College is striving to meet this standard. The team did not identify evidence to verify the College's processes to document and assess student learning outcomes. Discussions between the program coordinator, the assessment coordinator, and the research team highlighted the need for improvements in closing the loop within the assessment cycle. While changes have been initiated, such as integrating assessment with program and curriculum review and utilizing eLumen to streamline data collection and reflection, these processes are still in development. The faculty are addressing reflection questions in outcome assessments, including Diversity, Equity, Inclusion, Accessibility and Justice (DEIAJ) components, and an updated Assessment Handbook is at the final stages of the approval process.

However, communicating academic quality outcomes to the constituencies and the campus community remains an area of growth. The College recognizes the need to implement a communication plan. Although the College is working toward more frequent and transparent reporting of results, the College currently does not meet this standard. The team reviewed College Governance Council meeting agendas and minutes, Research Office data, Program Review documentation, and Governing Board meeting agendas and minutes. (I.C.3).

The team finds that the College clearly describes its certificates and degrees in terms of their purpose, content, course requirements, and expected learning outcomes. This information is clearly displayed in the online catalog. Program mapping is included with course sequence, units, prerequisites, and admission requirements. For its BS in Biomanufacturing, the catalog clearly displays its purpose, content, course requirements, and learning outcomes, as well as possible jobs and salaries. (I.C.4).

The College Governance Council (CGC) is the main venue for regularly reviewing institutional policies, procedures, and publications for the integrity of all representations of their mission, programs, and services. CGC reviews College publications, including web content, social media posts, and outreach materials, on a regular basis for accuracy and integrity. The College's catalog, program, and course information is imported from the eLumen curriculum managements system and course schedules go through a series of verifications for accuracy. Additionally, they list their Governing Board Policies and Procedures 1000, which sets up their 5-year review cycle for policies and procedures for their Governing Board, Community Service, Administration, Business Services, Human Resources, Student Services, and Academic Affairs. (I.C.5).

The College clearly and accurately informs current and prospective students regarding the total cost of education. Most of this information is in the print and online catalog under "Getting Started." Students can also search for Zero Textbook Cost (ZTC) and Low Textbook Cost courses. The College utilizes the program review process to update the costs associated for each program. In addition, information regarding the price per unit for the Bachelor of Science in Biomanufacturing is also included in the "Getting Started" catalog page. (I.C.6).

The College assures institutional and academic integrity with their policies that ensure academic freedom and responsibility. BP 6430 outlines Academic Freedom, and their Student Handbook

outlines Academic Freedom for both students and faculty. Furthermore, their bargaining contract outlines Academic Freedom in support of an atmosphere of intellectual freedom. Finally, evidence shows that the College has held FLEX activities (Academic Freedom FLEX activity in March 2023) to distinguish between academic freedom and freedom of speech. The team finds that the College complies with ER 13. (I.C.7).

The College communicates the importance of honesty, responsibility, and academic integrity for its students, faculty, and employees. Evidentiary documents include BP 5300 (Student Conduct), their Student Handbook, their Student Conduct Form, BP 4100 (District Code of Ethics), BP 4770 (outlines disciplinary action for probationary and permanent employees). Faculty include Academic Honesty policies in their syllabi, as displayed in their EMT syllabus. The narrative details how the VPAA “start of the semester email” does talk about online cheating, however explicit evidence for the process of authenticating students for DE is not given in the narrative. (I.C.8).

The faculty distinguish between personal conviction and professionally accepted views in their disciplines. As stated, the “faculty at Solano Community College distinguish between personal conviction and professionally accepted views in a discipline, presenting data and information fairly and objectively. Faculty evaluations provide a routine and documented way for instructors to demonstrate their continued commitment....” Their contract (evidence CTA Article 16.9), along with language in the Faculty Handbook, outlines that faculty must distinguish between personal conviction and professionally accepted views, and they must be accurate in presenting information. Faculty evaluations and student evaluations also allow for the determination if faculty are sensitive to diverse backgrounds and if what they teach aligns with the goals of the class. From the evidence given, there is a clear expectation that faculty must distinguish between personal conviction and professionally accepted views. (I.C.9).

The College requires students, staff, faculty, administrators to conform to certain standards of conduct, as communicated in BP 5300. Student standards of conduct are also included in the catalog. Faculty and administrators must provide an atmosphere where there is “freedom to learn.” The College does not seek to instill specific beliefs or worldviews. College staff are allowed free expression of political beliefs in accordance with the rights of citizenship, subject to the conditions outlined in Board Policy 4210. (I.C.10).

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

The College demonstrates that they have publicly disclosed the dates for the upcoming comprehensive peer review visit and have solicited third-party comments, as demonstrated by their Board of Trustee minutes. The Accreditation page is one click away from the home page, and it lists required reports since the last accreditation visit for compliance. (I.C.12).

The team finds that their two supplied sources of evidence can be found in the program information on their website. Their nursing program information states that “The Solano Community College Nursing program is approved by the California State Board of Registered

nursing.” Their EMT program does not state that they are “accredited” per se, but that they prepare students to take the exam. (I.C.13).

The College explicitly states that “Solano Community College is a public, not-for-profit College and therefore is not indebted to investors, parent organizations, or external interests. “This is supported by their BP 1019 Conflict of Interest that stipulates that Board members must not be financially interested in college operations. Trustees and certain managers must also file the Form 700 annually. Another piece of evidence included (but not in the narration) is their “Budget and Administrative Update” which discloses budget assumptions. (I.C.14).

Conclusion:

The College meets the Standard except for I.C.3.

Recommendation 2: To meet the Standard, the team recommends the College defines and assesses student learning outcomes for all instructional programs and student-learning support services, communicate the results of student learning, and use them as the basis for improvement I.B.1, I.B.2., I.B.4, I.B.7, I.B.8, I.C.3., II.A.3.

Standard II

Student Learning Programs and Support Services

II.A. Instructional Programs

General Observations:

Solano Community College meets the majority of standards outlined in II.A by prioritizing its mission to serve a diverse student body through well-structured programs and curriculum development. The College's programs, including associate and bachelor's degrees in Biomanufacturing, align with Title 5 and accreditation standards. The faculty lead continuous improvement discussions through committee discussions and the program review process.

The College has yet to consistently implement processes to document and assess and communicate student learning outcomes across all courses and ensure that syllabi are systematically collected and reviewed. Additionally, faculty have engaged in distance education professional development along with policies to inform best practices in distance education, the College is working to improve RSI implementation and to ensure that Regular and Substantive Interaction (RSI) requirements are consistently met.

Findings and Evidence:

The College prioritizes its mission of educating a diverse student body, offering programs that align to varied educational, professional, and personal goals, including certificates, degrees, and pathways to employment or further education. Established curriculum approval processes ensure alignment with higher education standards, with regular updates every six years. Faculty adherence to established philosophies and criteria guides curriculum development, supported by the Curriculum Committee's oversight. The College is working to ensure learning outcomes undergo periodic review to enhance student learning experiences. Noteworthy programs include the innovative Bachelor of Science degree in Biomanufacturing and the Rising Scholars Program for incarcerated individuals. Distance education approval processes and faculty training ensure quality in online education design. Solano Community College's Guided Pathways website offers transparent program information, facilitating efficient navigation for students. Physical resources, like brochures and catalogs, further support accessibility to program details across all College locations. (II.A.1).

Faculty at the College, comprising of full-time and adjunct faculty, actively participate in ensuring that instructional content and methods align with established academic and professional norms. Through collaborative efforts, they are working to take collective responsibility for enhancing the student learning experience. Faculty conduct thorough and inclusive program reviews; they are working to improve the process by which they incorporate student learning outcomes data to drive continuous improvements in instructional courses and programs. This iterative process ensures the relevance of programs, enhances teaching strategies, and student success. By engaging in systematic evaluation and refinement, faculty uphold academic excellence and contribute to improving teaching and learning practices. The team review Course Outlines of Record, Academic Senate meeting agendas and minutes, Program Review Documentation, and Research Office data analysis and evaluation. (II.A.2).

The team could not verify that the College regularly assesses learning outcomes for courses, programs, certificates and degrees using established institutional procedures. In reviewing the evidence, the team noted that the College is working to improve the process of regularly assessing learning outcomes for all courses, programs, certificates, and degrees. Faculty-developed learning outcomes are officially approved and included in course outlines, outlining SLOs, evaluation methods, and sample assessment assignments. The curriculum technical review committee and full curriculum committee oversee these outlines. Guidelines for SLO and PLO creation and assessment are provided, supplemented by regular workshops and resources. The Solano College Assessment Schedule 2024 delineated the cycle of SLO review, facilitating assessment alignment with Program Review and Curriculum Review processes. Faculty are required to incorporate course SLOs into syllabi, with guidelines enforced by the Faculty Handbook and administrative oversight. The College is working to ensure syllabi are systematically collected, reviewed, and stored for reference and auditing purposes. This process improvement approach can ensure that student learning outcomes are consistently assessed and integrated into instructional practices at the College. (II.A.3).

The College effectively distinguishes between pre-collegiate and College-level curricula through a transparent course numbering system and catalog delineation. Pre-collegiate courses are identified and aligned with outcomes preparing students for collegiate success. In response to AB 705, the College reduced pre-collegiate offerings, ensuring alignment with Chancellor's Office-approved placement recommendations. Faculty-led efforts resulted in streamlined, co-requisite support options, minimizing stand-alone pre-collegiate coursework requirements. Student placement recommendations are communicated upon application, with counselors aiding in course selection. Additionally, robust support services like the Academic Support and Tutoring Center, Puente Program, and MESA initiative offer comprehensive assistance, further aiding student success in collegiate coursework. The team reviewed transfer, GE, AA, course patterns, Assessment process documentation, curriculum, and Program Service information. (II.A.4).

The College ensures that its degrees and programs align with common practices in American higher education. Oversight by the Curriculum Committee validates that programs meet requisite length, breadth, depth, and rigor, with clearly defined course sequencing plans. Associate degrees consist of at least 60 units of coursework, including major studies and general education. Transfer degrees adhere to intersegmental education curricula. Additionally, the recently established baccalaureate degree in Biomanufacturing mandates completion of 120 units, with detailed requirements outlined in board policies. Collaborative efforts among committees and faculty ensure compliance with state and local standards, ensuring students receive a quality education that meets established benchmarks for higher learning. The team reviewed Curriculum documentation, Academic Senate meeting agendas and minutes, degree pattern documents, and Curriculum Committee meeting agendas and minutes. (II.A.5).

Classes at the College are scheduled according to established higher education standards, accommodating various modalities and durations to meet student needs. Classes are offered on multiple campuses and in different formats, allowing for flexibility and accelerated learning. The schedule creation process involves collaboration between academic affairs, deans, and faculty to ensure timely program completion. Rigorous evaluation and adjustments are made to maintain program integrity and support student progress. Additionally, structured cohort programs offer convenient schedules tailored to student needs, facilitating full-time and part-time enrollment options. The team reviewed schedules of courses, curriculum documentation, and the College catalog. (II.A.6).

The College effectively designs its delivery modes, teaching methods, and learning support to cater to a diverse student body by offering a variety of face-to-face and online learning opportunities for all students. Through initiatives like the Teachers for Equity (T4E) program, faculty receive training to embed equity measures into their practices, supporting an inclusive learning environment. To ensure the College meets the evolving needs of its student population, the College is working on consistently evaluating its delivery modes and utilizes program review efforts to make data-driven improvements.

Faculty underwent extensive training for online instruction during COVID-19, meeting the evolving needs for remote learning. The College's transition to cloud-based data management aligns with joining the California Virtual College (CVC), facilitating statewide course completion. Preparation includes establishing the College as a "Local Peer Online Course Review (POCR) Badging" College, ensuring quality online offerings. Upon project completion, the College will be certified by the CVC to assign the POCR badge to qualifying course shells.

Although the College is progressing toward meeting the Regular and Substantive Interaction (RSI) requirements, the team did not find consistent RSI in the provided online course sample of 20 distance learning classes. In spring 2024, the Academic Senate approved an RSI Policy that outlines specific categories of interaction, such as direct instruction, facilitating group discussions, and providing feedback. Faculty are required to participate in ongoing professional development sessions centered on RSI. In addition, the College's approval process for faculty to teach online leverages an MOU signed in 2022 between the district and the faculty association. This MOU provides a framework incorporating formal Canvas training (or equivalent), peer mentoring, review of a Canvas shell, and final approval of the Distance Education Committee. However, despite these initiatives, the College is still working to fully integrate RSI practices across all distance education courses and ensure consistent, documented interaction. Although faculty engage in robust and continued discussions and training around RSI, there is a need for more comprehensive processes to ensure these requirements are verified in every distance education course. (II.A.7).

The College employs standardized exams, such as the TEAS for the Nursing program, to gauge student readiness for specialized fields. The institution offers various pathways for students to earn credit for prior learning, including credit-by-exam and evaluation of military transcripts. Professional development initiatives ensure consistency and reliability in awarding credit for prior learning across departments. The College established policies and procedures, and ongoing faculty training facilitates efficient progression toward certificate and degree completion for all students. The team reviewed Academic Affairs meeting agendas, curriculum, College board policies and procedures. (II.A.8).

The College follows Title 5 and California Code of Regulations standards for all degree- and certificate-applicable credit courses which the team confirmed align with generally accepted norms in higher education. The team confirmed policies and procedures are in place to ensure that the awarding of credit for coursework and the conferral of certificates and degrees is based on student achievement of specified learning outcomes as determined by faculty qualified in the discipline. (II.A.9).

The team confirms that the College has established policies and procedures that address the transfer of course credit from and to other institutions. Their policies are published and available on the College's website and in their catalog. In partnership with four-year institutions, the College works to establish and maintain articulation agreements to assist students in seamless transfer between institutions. (II.A.10).

The College maps program and course learning outcomes to established institutional learning outcomes in communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, the ability to engage diverse perspectives, and other program-specific learning outcomes. There is evidence to show that they infuse Diversity, Equity, Inclusion, Accessibility and Justice (DEIAJ) policies and practices throughout the institution by adding DEIAJ-focused outcomes and providing ongoing training for faculty. (II.A.11).

The College's general education requirements for its degree programs are in the catalog and on their website, which ensures students understand the graduation requirements. Faculty expertise has determined both the philosophies of general education for the associate and baccalaureate degrees and the courses that satisfy the GE requirements. The College's General Education Learning Outcomes include a broad range of coursework leading to competency in academic and civil areas. (II.A.12).

The College ensures that associate degree programs include a focused area of study of at least 18 units, in compliance with Title 5, Section 55063(c)(1). The College offers interdisciplinary Associate of Art degrees for non-transfer students and a bachelor's degree in Biomanufacturing, which requires 120 units, including 67 units within the degree. Faculty discipline experts lead the development of new degrees, ensuring program learning outcomes (PLOs) are relevant, measurable, and aligned with course-level student learning outcomes (SLOs). (II.A.13).

New and modified CTE programs include a narrative, labor market information, advisory committee input, and courses that have gone through Curriculum Committee approval. Evidence was provided showing that students completing programs leading to licensure are eligible to sit for exams and results are collected annually and submitted to the ACCJC. As demonstrated by their high employment rates, the students graduating with credentials in CTE programs possess the skills necessary for employment. (II.A.14).

The College has a policy that requires the College to make appropriate arrangements for enrolled students to complete their education in a timely manner with a minimum of disruption. The College demonstrated that they guarantee that students currently enrolled in the program will be given an opportunity to complete their studies through alternatives. (II.A.15).

Solano Community College conducts program reviews in each of its five Schools on a six-year cycle, with additional two-year abridged reviews for CTE programs, ensuring alignment with the needs of students and employers. Recent program reviews, such as the Fire Technology and Astronomy programs, demonstrate the College's responsiveness to industry demands and student interest, while institutional plans like the Strategic Plan, SEAP, and Guided Pathways help guide continuous improvements in student success and equity. (II.A.16).

Conclusions: The College meets the Standard except for II.A.3 and II.A.7.

Recommendation 2: To meet the Standard, the team recommends the College defines and assesses student learning outcomes for all instructional programs and student-learning support services, communicate the results of student learning, and use them as the basis for improvement I.B.1, I.B.2, I.B.4, I.B.7, I.B.8, I.C.3, II.A.3.

Recommendation 3: To meet the Standard, recommends ensuring that there is regular and substantive interaction between the students and instructor(s) either synchronously or asynchronously II.A.7, *ACCJC Policy on Distance Education and on Correspondence Education*.

II.B. Library and Learning Support Services

General Observations:

The College provides instructional programs through the new Learning Resource Center at the center of the Fairfield campus. The institution has an established evaluation process to determine it has sufficient depth and variety of library materials, including technology support, to meet the learning needs of its students. The team reviewed and found that the College satisfies the Standard addressing Library and Learning support services through various programming. The College provides online access support to students using the eReference chat widget and 24/7 librarian online support for students to get questions answered regarding library services. Further, the College connects with faculty through librarian faculty discipline-specific outreach, providing services related to the Flex programs and faculty outreach. In addition, the College offers a range of physical and electronic information resources.

The College extensively relies on the expertise of faculty, including librarians and other learning support service professionals, through collaboration and shared decision-making. The College aims to maintain library collections that are responsive to faculty curriculum needs through systematic reviews in which library resource for various academic disciplines are request through the program review process, increasing alignment of need for courses and student learning opportunities.

Findings and Evidence:

The team identified that the College is committed to providing library resources, training, access materials, and faculty support ensuring faculty support. For example, the College library resources webpage includes a central access point for students and the community to access digital collections that serve all three campus locations, highlighting distance education courses. Data shows tutoring and academic support reach students through peer-floor tutors, wherein in 2021, 68% surveyed indicated they were “Very likely” to return to in-person tutoring. As a result, since spring 2022, the College has scaled up math, chemistry, and statistics tutoring to meet student demand and increase student success. Moreover, the College places importance on providing well-set support to accommodate diverse students' learning requirements, embedding access to library services, and ensuring each campus provides services to all student populations.

Further, the team found that all campus locations, all types of students, and all College instructional programs are equally supported by library services and accessibility at the College. As mentioned in Standard II A.7, the team recommends the college works to ensure the DE/CE programs regularly evaluate the effectiveness of its delivery modes and uses results to guide improvements through program review PR process. (II.B.1).

Faculty and library personnel work together to inform the selection of educational equipment and materials to support student learning. The College strongly emphasizes establishing a comprehensive assessment of library resources that considers quantity, quality, depth, and variety of resources. The librarians' partnership with the Napa Valley College and Public Libraries provides students access to physical books accessed via Polaris Integrated library system ensuring currency of reference book materials. The team also noted faculty and learning support personnel work together to develop appropriate learning support services, equipment, technology, and learning spaces.

The team also found the College provides sufficient depth and variety of materials to meet the learning needs of its students using its academic success and tutoring center. This new space provides faculty with an environment where students can access learning support embedded with guidance from faculty that are committed to DEIAJ efforts. The College also provides a radically divers collection of new anti-racist curricula implemented across campus supporting social reform reading material for its students. The team reviewed curriculum and learning support planning team meeting agendas. (II.B.2).

The team reviewed and found that the College uses the program review process, surveys, and usage statistics to allocate funding, staffing, and promotion to determine spaces and resources needed for student learning support. For example, after the COVID pandemic, the library shifted its campus to online access of services with fully functional digital acquisitions and access points for students. Moreover, the College tracks student usage of services by location and modality to direct additional resources needed to service students. The College also uses pre- and post-surveys for the Library 010 course to validate corequisites of English 001 which guide decisions related to course assessment rubrics, and the development of student achievement metrics. The College evaluates the impact that learning support services have on student learning. The team reviewed data collected by the learning support services team on student achievement and data collected by the College's Research Office. (II.B.3).

The College collaborates with network, local, and regional libraries using elements of a service such as inter-loan and eReference information transfer process. This process connects the needs of students' resource needs through a partnership with Napa Valley College and Napa public libraries providing a collection through a network of 75 public and academic libraries throughout California and Nevada. Most recently, by partnering Napa County libraries, the College has been able to collect textbooks circulations using the Polaris Integrated Library system. The team noted it is unclear if the College carries out the necessary responsibility of assuring security maintenance and reliability of services provided through contractual

arrangements. The team was unable to find evidence of these contractual agreements. (II.B.4).

Conclusions:

The College meets the Standard.

II.C. Student Support Services

General Observations:

The College comprehensively offers traditional and tailored support services based upon data analysis and community needs. Traditional services such as Counseling, Outreach, Admissions and Records, Financial Aid, and Transfer services are offered in multiple modalities across the three campuses. As a result of a data review of the College's disproportionately impacted students, several new programs and events were created to ensure diverse and meaningful supports were designed to increase student success.

The College has worked diligently to increase student engagement, post-COVID, and engage with campus stakeholders to strategically plan and implement in-person events, as well as targeted recruitment and support based on data. Additionally, the College aims to connect co-curricular events with academic programs as demonstrated within the Athletic Department. By thoughtful implementation of its Wellness Center, the College demonstrates commitment to its students' sense of inclusion, cultural diversity, and student engagement.

Findings and Evidence:

The College utilized student survey data and program review outcome data to inform the Academic Support Tutoring Center (ASTC), leading the College to create a taskforce to address the demand for in-person services. Following College processes to acquire positions, the ASTC Taskforce leveraged the need to better serve Black and African American students for support in math and requested positions with the intent of addressing the need to increase in-person services. (II.C.1).

A comprehensive overview of the 2022-2025 Student Equity and Achievement Plan, which involved a deep dive into the stakeholders, policies and practices, and student data resulted in identifying Black and African American students as the most disproportionately impacted among all the College's student populations. Based upon this assessment, the College established events such as the Black Student Mixer, Black Family BBQ, and Black Falcon Summer Bridge.

The team notes that in-person services are limited by days offered and early end times available for working students who desire in-person counseling or other assistance. The College works to increase access through its outreach program and provide in-person summer orientations. The

College offers a variety of diverse programs, and recruit's students into its Students Overcoming Adversity and Recidivism Program, A2Mend Chapter, Puente Program, and IMANI Sisterhood Program in addition to more traditional programs such as EOPS. The team encourages the college to continue ensuring all student support programs and services are implementing a regular cycle of assessment to ensure improvement in the delivery of student support programs and services. The team reviewed the College's Student Equity and Achievement Plan, Student Support Program and Services calendar of events, Program Activity agendas, and College Information Listings. (II.C.2).

The College celebrates its Wellness Center, led by social services trained individuals to create alliances, a safe space for students, and facilitate support groups. The center had 400 students participate throughout its first year in many activities including field trips, painting, Divine Voices Support group, and Un Paso Junto to offer comprehensive support to engage all students. These presentations and events are offered at all three College campuses.

The Director of Student Development and Engagement facilitates co-curricular activities and events designed for cultural and social programming that celebrate a diverse range of the student population aligned with the Mission. The College has a formal process for creating clubs. Cultural programming meetings occurs to ensure cross campus engagement regarding decolonization of events and celebrations. The team reviewed documentation and calendars for co-curricular events and activities. (II.C.3).

The College offers an athletics program rooted in academic supports as evidenced through its "Falcons Four Pillars of Success." Additionally, the College connects athletics and academics by integrating sporting teams with majors such as Sports Medicine and Sports Broadcasting where students gain hands-on experience. The team reviewed documentation developed by their athletic programs, academic counseling, and the Four Pillars of Success advising program model. (II.C.4).

Counseling and advising is offered at the College in multiple modalities. Specialized counseling is provided to students in programs such as EOPS, Rising Scholars, and several other programs which require tailored counseling. Counselors use a Guided Pathways and degree audit model with counseling appointments to meet students' educational needs. The team notes that more in-person counseling may be needed on some campuses as it appears limited according to the schedule of availability. (II.C.5).

The College adheres to its mission and demonstrates such through its policies and efforts. Special admission opportunities are communicated with its feeder high school district and through the Early College High School on the Fairfield Campus. The College also boasts two Baccalaureate Degree programs, one with Sonoma State University. The College has committed time and resources to Guided Pathway leads to enhance clear pathways and raise awareness of student planning and mapping tools. (II.C.6).

Paper and electronic admissions applications are available to ensure access to all prospective students. The College has seriously undertaken the evaluation of assessment and placement reforms resulting from AB 1705 and evaluated the data. With this data evaluation, revision in math courses occurred with successful results. Self-reporting tools or transcripts minimize bias in student course placement. The College identified the need for an Improvement Plan for English placement and assessment. (II.C.7).

The College utilizes a secure document management system, Banner, for electronic files, and securely stores paper files behind locked doors and cabinets. Policies and procedures are established and maintained pertaining to student records. The team reviewed the board policy and administrative procedures for maintaining student records. (II.C.8).

Conclusions:

The College meets the Standard.

Standard III

III.A. Human Resources

General Observations

Solano Community College is committed to finding a diverse faculty to teach students. The College provides many topics in their flex-day activities, ranging from technical topics to transformational topics surrounding race consciousness and inclusion.

Findings and Evidence

The College focuses on selecting highly qualified individuals with the appropriate education, training, and experience to support the College mission in providing services and programs. The College develops and maintains job descriptions. The job descriptions for management and classified personnel are developed to include minimum job requirements and minimum qualifications. The College outlines their commitment to hiring qualified employees within the equal employment opportunity process in their Board Policies and Administrative Procedures. Solano also included, as evidence, a hiring manual for classified, ALG (Management level positions) and confidential employees. The hiring manual describes recruitment, interview committee selection process, interview level structure and selection methodology for final candidate. The College also included, as evidence, the student worker hiring process manual. The College ensures that job descriptions accurately reflect the position, duties, responsibilities and authority. The College creates job announcements and publicly posts them on various locations, including their own website. The institution makes efforts to advertise jobs in places where they can maximize the diversity of the applicant pools. (III.A.1).

The College provides a faculty hiring manual that details how faculty are hired. The faculty hiring manual also details the equivalency process. The College also has a Board Policy that focuses on faculty hiring, equivalency and minimum qualifications. At Solano, faculty job descriptions and announcements are also guided by the collective bargaining agreement, as described in CTA Contract Article 19 (III.A.2).

Solano College sets minimum qualifications for academic administrators that meet or exceed the qualifications stipulated by the CCCC Board of Governors and Educational Code. The Human Resource department develops job descriptions that clearly outlines job responsibilities that sets the qualifications necessary to perform the duties requires to sustain institutional effectiveness and overall academic quality. The College also allows for equivalency in administrator hiring. The College included a list of administrative positions and responsibilities within their Board Policy 4800. (III.A.3).

The College adheres to the California Code of Regulations and verifies that all degrees held by faculty, administrators and other employees are from accredited institutions, including verification from non-U.S. institutions. The College has an international transcript evaluation process. (III.A.4).

Solano has a developed evaluation process. Board Policy 4220 details how the governing board is committed to the evaluation of all faculty, administration and classified professional staff. The College established written criteria for evaluating all personnel. ALG is evaluated annually on five parts competencies. The ALG evaluation encourages improvement by seeking detailed information on selected employee goals. For faculty evaluations, the comprehensive evaluation processes are worked on with Academic Senate. The College developed a peer review handbook for faculty, which includes criteria to more accurately reflect current faculty responsibilities in instruction, service areas, and professional development. The College provided flex activity training on evaluation processes during the Spring 2023 semester. Training is provided to faculty during flex days, the topics chosen during these flex activities are wide ranging. Classified professional evaluations are based on specific timelines and methodologies. Classified professionals are evaluated on nine competencies. The Superintendent/President is evaluated annually by the governing board. (III.A.5).

III.A.6 (no longer applicable)

The institution maintains enough faculty to assure the quality of educational programs. The College was in compliance and met their Full-time Obligation Number (FON) requirement. Solano states that their Full-time to adjunct ratio is 68.5%. The College prioritizes faculty hiring. During the follow-up process, Solano indicated that academic faculty hiring is prioritized during the fall semester annually. The hiring process for faculty begins in the spring semester and they target the following fall semester as a start date. The team reviewed instructional program review planning and resource allocation documentation. The College developed an internal

process of prioritization that aligns to their policies (BPs outlined throughout the standard III.A section). (III.A.7).

Solano has processes to evaluate and assign course work to adjunct faculty. The College also provides a robust flex calendar that includes and integrates adjunct topics. Further integration occurs in the evaluation process, adjuncts are evaluated each of the first two semesters. The College implemented a peer review and self-evaluation component, providing adjuncts the means to be peer-reviewers for other adjuncts on campus. (III.A.8).

The College introduced a new classified professional position/non-academic request process through program review. The College is piloting this method. Through self-evaluation, departments can determine if they have enough staff to support the institution's effective operations. The team reviewed the first iteration of this pilot program review process. Efficacy cannot yet be determined as the process has yet to be operationalized. (III.A.9).

The College reviews each administrative position's scope when a vacancy occurs, to determine if enough administrators are on-hand to provide continuity and effective leadership to support the College's mission. Review of need is also assessed at the program review level. This process was outlined and reviewed by the visiting team. (III.A.10).

Solano College publishes and establishes written personnel policies and procedures to run the institution operationally and to comply with law. The College demonstrated this by providing evidence in Board Policies (BP 4000-4800) which govern personnel matters. (III.A.11).

The College provided management, faculty and staff demographics, which show the diversity within each classification. The College has policies and practices for nondiscrimination, EEO, and a policy on their commitment to diversity. The College developed a minority coalition in the 1970s, whose goal is to provide a sense of community and belonging for current, future and interested students, staff, faculty, administrators, and visitors to our Solano College campus. (III.A.12).

The College has a written code of professional ethics for all classifications. (III.A.13).

Solano College provides a robust number of flex activities. These activities are provided for all personnel and are opportunities for continued professional development. The College also has a professional development committee within their Academic Senate. The committee is responsible for developing the flex calendar and including programming on both optional and required days. The committee surveys all employees every two years, systematically evaluating their professional development inventory and utilizes the results of the survey as a basis for improvement. The team reviewed Academic Senate meeting agendas, the College's Flex Calendar, and Survey's administered by the College's Research Office. (III.A.14).

The institution makes provisions for the security and confidentiality of personnel records. The College designates the office of Human Resources as the official personnel file's holder. The College provides employees with the right to access their own personnel records, in accordance

with the law. The team reviewed Human Resources Policies and Procedures and College process documentation to employees. (III.A.15).

Conclusions:

The College meets the Standard.

III.B. Physical Resources

General Observations:

The College has planning processes to ensure safe and sufficient physical resources at all sites where courses and programs are delivered. The physical spaces are designed in a way to ensure access, safety, security, and an optimal learning environment for the community they serve. The College uses its facilities to meet its mission. The College has planning processes to ensure the effective maintenance of its facilities to deliver high quality learning and support to the communities served. This is reflected in their long-range capital planning to ensure the resources for total cost of ownership of all physical resources.

Findings and Evidence:

The team confirmed that the College engages in institutional planning to ensure adequate safety and sufficient resources at all their sites. Physical resources are designed and maintained to ensure optimal learning at all locations. The team reviewed Program Review and Resource Allocation documentation at the College. (III.B.1).

The team found that the College maintains all assets including physical resources, facilities, equipment, land, and other assets in a manner that maintains quality, safety, and security for optimal learning environments. In addition, the College maintains a Technology Plan which includes a timeline for updating equipment across the College. (III.B.2).

The team reviewed evidence that the College maintains a planning process to ensure the effective utilization of its physical resources in support of programs and services. The College uses data and planning to maintain their complete physical resources. (III.B.3).

The team confirmed that the College uses long-range capital plans to ensure improvement and replacement of physical resources and total cost of ownership. The team reviewed the capital planning documents maintained by the College. (III.B.4).

Conclusions:

The College meets the Standard.

III.C. Technology Resources

General Observations

The College provides a broad spectrum of professional technology services and expertise to support its operational, administrative, instructional, and student support programs. This level of service is held by a well-structured and comprehensive Technology Master Plan.

The College has a technology plan and is actively working to improve the technological infrastructure by following identified initiatives and work plans to continue their technological investment.

In summary, the College provides comprehensive and well-integrated technology planning, which is supported by policies and procedures. The process allows for significant input from stakeholders, resulting in a high level of community engagement. The outcome is a well-communicated plan to address the College's technology needs across various timelines.

Findings and Evidence

The team confirmed that College technology infrastructure is appropriate to maintain College operations. The technology plan provides a guide as to how the College would like resources to further their infrastructure needs. (III.C.1).

The College has a refresh program, which is a great way to update the student facing technology. The College also provided evidence of on-going technology purchases by sharing open purchase orders. The team verified the College plans for, updates, and replaces technology as appropriate. (III.C.2).

The team found that the College also appropriately identifies and manages resources to ensure technological needs for their centers are met. Technology at all centers is incorporated into the Technology Master Plan. (III.C.3).

The team confirmed that the College also provides training to faculty, staff, and students based on their technological needs related to programs, services, and institutional operations. (III.C.4).

The team confirmed that the College has appropriate policies and procedures in place to guide the use of technology in the teaching and learning process. The team reviewed Board Policy and Administrative Procedures. (III.C.5).

Conclusions:

The College meets the Standard.

III.D. Financial Resources

General Observations

The College provides investments in all their locations. Their prudent spending during the pandemic increased their reserve. The College disseminates financial information to internal constituency groups via committee.

Findings and Evidence

The College maintains sufficient financial resources to ensure the college provides student learning programs and services. The College appears to work well with their external auditors and is responsive when the audit team provides recommendations. The college plans and manages their finances with integrity and maintains a healthy budget reserve ensuring the fiscal stability of the college. The team reviewed copies of college budgets, 311 financial reports, audit documents, governing board meeting agendas. (III.D.1).

The College utilizes its mission, vision and strategic goals to develop and drive institutional planning. The College utilizes the Fiscal Advisory Committee (FAC) to ensure the budget supports the mission and goals of the district. As part of the College's financial planning model, the FAC is charged with oversight of the budget process, the committee is also able to make recommendations on process and ensure benchmarks and outcomes are being considered or met. Financial information is disseminated in FAC, College Governance Council and the Superintendent-President prior to being shared with the Governing Board. The College has policies and procedures in place to develop and ensure sound financial management practices. The Colleges utilizes the Fiscal Advisory Committee to disseminate financial information and uses board presentations to do the same. The team reviewed governance committee meeting agendas, Fiscal Advisory Committee (FAC) meeting agendas and minutes, as well as governing board meeting agendas. (III.D.2).

Solano College has a process for financial planning and budget development. The development of the budget is done with cross-constituent participation. The college follows board policy which outlines process for budget creation, the policy provides a legal and statutory requirement to develop financial planning documents. The FAC membership includes all constituency groups. Within this committee, part of the intent is to inform, educate and receive input from all groups. The college has a defined process for financial planning and the college provides opportunities for all groups to provide input and participate in the overall process. The team reviewed college governance meeting agendas/minutes, board policy, Fiscal Advisory Committee meeting agendas/minutes, and governing board agendas. (III.D.3).

College constituency groups reported being heard throughout the resource request process. Conversations on urgent development achieved similar results, constituency groups feel their voices are included in the governance process. This leads to a process of general understanding

of resource availability. The team reviewed college planning documentation, agendas and minutes from College Council, and program review. (III.D.4).

Financial integrity is built within the College's policies and external audits, plus their responses to corrective actions show a great level of transparency. External audit findings responses are comprehensive and are produced in a timely manner. The College responses to audit findings are attached and can be viewed within the audit report. Responses target the finding, and the solutions implemented at the local level to address the identified deficiencies. The College maintains processes for fiscal control notably at the Executive Leadership level. The team reviewed college planning documentation, budgets, and external audit documentation. (III.D.5).

Financial documents are posted and accessible via the College's website. Budgets, 311 reports, audit report, the bond audit report and fiscal advisory committee agendas and minutes are accessible online. The team reviewed these documents as well as the College's website. The posted financial documents reflect appropriate levels to support student learning and services. (III.D.6).

The College's responses to external audit findings are comprehensive, timely, and communicated appropriately. In addition, the College implements recommendations made by external auditing firms to improve programmatic functions. The team reviewed external audits conducted regarding the College's budget and Financial Aid program. (III.D.7)

Internal controls were evaluated through the response to an external audit finding. Financial processes focused on resource allocation procedures. The College has a process for instructional prioritization and has begun a non-instructional pilot prioritization process. Because the College recently began their non-instructional prioritization pilot, it is too soon to determine the outcome and effectiveness of the planning process. The team reviewed program review documentation, meeting agendas/minutes, and recommendations to the leadership team. (III.D.8).

The College has a healthy cash flow as well as budget reserve level, sufficient to implement contingency plans in case of financial emergencies and other unforeseen occurrences. The team reviewed college budget documents as well as annual fiscal audit documentation. (III.D.9).

The College practices effective oversight of all financial resources including financial aid, grant funded programs, externally funded programs and contracts. The College maintains practices to ensure integrity in their fiscal operations based on external audit unmodified opinions and bond credit rating levels. The team reviewed college financial documents, organizational charts, audit and credit rating reports. (III.D.10).

The College accounts for its liabilities in the short term, based on their annual budget process, and long term 5-year projection evidence. The College also accounts for technological and facilities/maintenance projects within their projection numbers. The college identifies plans and

funds liabilities through their resource allocation. The team reviewed the College's Technology Plan, program review documentation, and college budgets. (III.D.11).

The College accounts for and appropriates resources towards their OPEB liability. The College is part of a joint power's agency, in order to fund future OPEB costs. The College follows the Governmental Accounting Standards Board (GASB) requirement to have an OPEB actuarial report. The College also reserves funds to cover CalPERS and CalSTRS increases, and the College has caps on compensated absences, based on negotiated contracts, to curve overall costs. The team reviewed college budgets and OPEB liability resource allocations. (III.D.12).

The College reviews and assesses its resources in order to allocate towards incurred debt. The College also limits their annual debt service payment per board policy. The team reviewed the applicable board policy and college budget documentation. (III.D.13).

The College monitors their bond projects and debt, by committing to an oversight committee and by performing an annual audit on their bond activities. On auxiliary and grants, the College utilizes the Budget and Accounting Manual (BAM) as a basis to maintain their local chart of accounts. The College does have a 501(c)(3) Foundation. III.D.14).

The College submits their default rate, as required. The College default rate is within the federal requirement threshold. The College's Financial Aid Office leads the Title IV efforts at the College. The external auditors provided findings in the College's return to Title IV processes. The College responded timely and set up local training to address the findings. The team reviewed the College's budget documentation, Title IV audit documentation, and student loan default tracking documentation maintained by the College. (III.D.15).

The College has a process that governs the contractual agreements entered into. Board Policy 3225 acts as a guideline to the Finance and Business Office and the College as a whole, on the requirements and review process. The Finance and Business Office reviews contracts to ensure appropriate legal provisions and contract language protect the interest of the institution, allowing the College to maintain the integrity and quality of its programs and services. The team reviewed contract documentation maintained by the College. The team was unable to verify contracts maintained with their external Library partners. (III.D.16).

Conclusion

The College meets the Standard.

Standard IV

Leadership and Governance

IV.A. Decision-Making Roles & Processes

General Observations:

Solano Community College engages in an established participatory governance structure. Administrators, faculty, staff, and students have opportunities to engage in policy and process development and revisions when necessary. Leadership groups for the College communicate decisions to their constituents and to the public at-large with publicly available access to committee minutes and periodic constituency-directed communications.

Findings and Evidence:

The team observed that the College has an established participatory governance structure that includes the College Governance Council, Faculty Academic Senate, and Associated Students of Solano College (ASSC). The team saw this structure codified in BP 2005 as a delineation of responsibility in the decision-making process for each group. The College provided examples of recent systemic decision making that activated multiple constituencies, such as a COVID-19 Return-to-Campus Plan, and the consideration of pursuing student housing. The examples provided in the College's self-study demonstrate innovative considerations and engaging participatory governance for input and development. (IV.A.1).

In reviewing board policies, specifically BP 2005 (revised 2007) and Administrative Procedure AP 2005 (revised 2018), the team affirms that the College has established and implemented policies and procedures that authorize administrators, faculty members, and staff participation in the decision-making process. These policies also include provisions for student involvement, especially in areas where students have a direct and reasonable interest. Additionally, the constitution and bylaws for the ASSC and Faculty Senate reaffirm these roles and responsibilities. Using the College Governance Council, which meets bi-monthly, all constituencies can bring forward ideas and work collaboratively on policy and planning. (IV.A.2).

Administrators and faculty have a substantive and clearly defined role in institutional governance, with codified membership of Solano Community College Governance Council. Aligning with California's Title 5 (§51023), faculty have an additionally defined role in governance with the faculty academic senate, which codifies faculty roles in participatory governance as they relate to faculty roles in academic and professional matters. Appropriate representative groups appoint members to the College Governance Council. The team reviewed the College's Fiscal Advisory Committee webpage and a sample of committee minutes to affirm the representation and voice in the development and consideration of institutional policies, planning, and budget. (IV.A.3).

The team further reviewed the provided district policies and procedures, sample program reviews, College's program review handbook, academic senate constitution and bylaws, and curriculum handbook and saw well-defined structures and the clear responsibility of faculty, who hold primary responsibility, and administration for recommendations about curriculum and student learning. Formal recommendations that are presented to the governing board are reviewed within the College Governance Council. (IV.A.4).

In addition to the provided evidence, the team reviewed a sample of governing board agendas and found the expectation for regular reports on institutional performance from the College's Superintendent-President. The published schedule of the Solano Community College Governing Board shows two formal meetings per month, with the first meeting of the month used as a "study session" to allow the appropriate consideration prior to making any formal decision. The scheduled frequency of board meetings does allow for timely action when necessary. In addition to standing reports from the Academic Senate, College Governance Council, Associated Students of Solano College, and the Superintendent-President, the board holds open sessions and provides an opportunity for public comments during their meetings. (IV.A.5).

The College's process for decision-making is codified in board-adopted policies and procedures. The College will work to improve in the process when decisions that are made are communicated broadly. Minutes from each governing board meeting are publicly available after approval and can be found on the district website. The College's Superintendent-President provides consistent updates to the College community with a series of "Solano CARES" communications that are published and archived on the College's website. The Academic Senate and the Associated Students of Solano College also have minutes publicly provided on their respective websites. The team would like to acknowledge the additional constituency communication that happens in the form of periodic newsletters from the Academic Senate with their "SCC Academic Senate Hot Topics" newsletter and a semester summary newsletter to all students from the ASSC which is also available on the ASSC website. Other examples provided by the College included administrative management meeting minutes and curriculum committee meeting announcements. District plans are made available on the College website. (IV.A.6).

The team reviewed the College's policies and procedures and found an explicit plan for policy renewal and review on a five-year rotation. AP 1000 states, "At a minimum, board policies shall be renewed on a regular five-year cycle according to the following schedule..." However, a sample review of all policies, and the submission of a tracking document provided by the College demonstrate that many policies have not been renewed as outlined in their procedures or in alignment with their self-developed cycle. According to the ISER, in July 2023 the College's Board of Trustees approved revision to five board policies; but updated dates are not shown on the public-facing policies. The team was unable to confirm that the College's decision-making policies, procedures, and processes are regularly evaluated to assure their integrity and effectiveness (IV.A.7).

Conclusions:

The College meets the Standard except for standard IV.A.7.

Recommendation 4: To meet the Standard, the team recommends the College ensures that the institution's governance and decision-making policies, procedures, and processes are regularly evaluated to assure their integrity and effectiveness and ensures the institution widely

communicates the results of these evaluations and uses them as the basis for improvement. (IV.A.7).

IV.B. Chief Executive Officer

General Observations:

Solano Community College demonstrates the commitment of its chief executive officer to ensure the quality of the institution. The CEO is a key part of the institutional planning, organizing, and budgeting of the district including the overall quality of instruction in collaboration with governance groups. The CEO working collaboratively with personnel has established personnel development programs, processes which ensure the inclusion of student input, and processes for measuring institutional effectiveness. The CEO maintains a collaborative working relationship with the governing board and through the delegation of authority as outlined in board policy, leads the organization through participatory governance. The CEO works with faculty, classified professionals, administrators, and students to ensure fiscal stability, instructional quality, student success, and cycle of continuous improvement at the College.

Findings and Evidence:

The College's CEO assumes responsibility for the overall quality of the institution. The CEO provides effective leadership in working with constituent groups on campus to ensure the fiscal oversight of the College as well as quality instruction, program planning and implementation, personnel development, incorporation of student feedback, student success, and overall organizational effectiveness. The CEO has regular meetings with constituent groups to maintain active communication and publishes a regular campus communication for both internal and external College groups. This method of CEO and organizational operation is documented in meeting minutes, updated board policies, the College's governance structure, budget timeline, and an updated Solano CARES webpage. (IV.B.1).

The CEO works with the College's leadership teams to ensure staffing levels appropriate for the size and complexities of the College. The CEO works with senior level administrators who in turn work with their leadership teams to engage in planning the staffing and programming needs in their areas. This has resulted in an increased administrative structure based on programming needs. This method of planning and oversight of the organizational structure is documented in organizational charts, updated board policies, and programmatic updates. (IV.B.2).

The College has established board policies and administrative procedures that ensure the CEO oversees the quality of teaching and learning at the College. The College also has Institution Set Standards- goals and priorities established through the College Governance Council. The CEO

uses data provided by the Office of Research and Planning to guide decision-making, including the allocation of resources, and hiring aligned with institutional planning. The CEO engages in collegial consultation with the academic senate to determine the appropriate level of faculty hiring based on full-time faculty obligation number . This plan determines the number of faculty hires recommended to the governing board. The College has established procedures to determine resource allocation to maximize student learning and achievement. This CEO standard for leading institutional planning to improve teaching and learning is documented in Institution Set Standards, reassign time chart, Student Equity and Achievement Plan, Faculty Hiring Priorities Timeline, Academic Senate meeting minutes, and Faculty Obligation Number (FON) planning documents. (IV.B.3).

The CEO assumes the primary leadership role for accreditation at the institution. The CEO working with the accreditation team of faculty and staff, including the College's Accreditation Liaison Officer (ALO) ensure the College meets the Accrediting Commission for Community and Junior Colleges (ACCJC) Eligibility Requirements, Accreditation Standards, and Commission policies. The CEO ensures administrative leaders, faculty, and staff are also responsive to the required compliance of accreditation and the proper resources are dedicated to completion of the accreditation report. The responsibility for compliance with this standard is documented in the CEO's job description, faculty reassign time for accreditation work documentation, and the designation of the ALO role. (IV.B.4).

The CEO is working to ensure statutes, regulations and governing board policies are updated to ensure compliance and are aligned with the College's mission. The CEO ensures processes and procedures are in place to ensure the effective control of the College's budget and expenditures. The CEO ensures regular updates to the governing board on matters related to budget and fiscal matters. This is evidenced by updated board policies and administrative procedures, the Board Ad Hoc Committee on policies, district budget presentations, and quarterly progress report on bond projects and expenditures. (IV.B.5).

The CEO works effectively with the constituencies on campus as well as the external community served by the district. The CEO maintains a regular, consistent presence on and off campus and engages in regular dialog through service on various College governance committees and community serving boards. The CEO is engaged with local Chambers of Commerce, Rotary, K-12 partners, workforce development and economic development organizations in the region. This is evidenced by meeting agendas, the College's press release web page, and event fliers. (IV.B.6).

Conclusions:

The College meets the Standard.

IV.C. Governing Board

General Observations:

Evidence was provided that demonstrates the Governing Board of Solano Community College has overall responsibility for the academic quality and fiscal strength of the College. The provided policies and minutes illustrate they work as a single entity to make decisions and independently to ensure the College adheres to all policies. The evidence provided demonstrates that board members participate in annual training, evaluation, and ethics reviews.

Findings and Evidence:

Solano Community College's Board of Trustees has authority over, and responsibility for, policies to assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. There was evidence to demonstrate that the CEO regularly communicates with the Board in a variety of ways, including receiving updates from campus leaders through Board Meeting study sessions. (IV.C.1).

The team confirmed that the Board members act as a single entity in supporting decisions made by the Board for the purpose of supporting the College's mission, vision, and goals. (IV.C.2).

The team validated that the Board of Trustees follows their policies related to selecting and evaluating the CEO, and evaluation decisions are reported in Board meetings. (IV.C.3).

The team found that the Board represents the public in the service areas of the College and that a Code of Ethics ensures they remain independent. (IV.C.4).

The team found that the Board establishes policies consistent with the College's mission and ensures the quality, integrity, and improvement of student learning programs and services. (IV.C.5).

Evidence was provided and the team confirmed that the College publishes the bylaws and policies specifying the Board's size, duties, responsibilities, structure, and operating procedures. The evidence is clearly identified on a dedicated College webpage. (IV.C.6).

The team confirmed that the Board acts in a manner consistent with the Board's policies and bylaws. They regularly assess their policies and bylaws for their effectiveness in fulfilling the College's mission. (IV.C.7).

The team reviewed provided evidence and found that the Board takes great interest in key indicators of student learning, asking for specific metrics to be shared monthly. They

demonstrate they care about improving academic quality and supports College leadership in implementing improvement plans. (IV.C.8).

The Board has an ongoing training program, including a process for new member onboarding. Board policy also provides for continuity of board membership with staggered terms of office, ensuring at least one-half of the Board continues during each election cycle. (IV.C.9).

The team confirmed that the College has an established process for board evaluation. The board conducts an annual internal evaluation to ensure it is acting effectively and to improve board performance. (IV.C.10).

The Board holds itself to a strict code of ethics, as defined by the code of ethics and conflict of interest policies reviewed by the team. It is commendable that no ethical violations or conflicts of interest have been identified during the period under review. (IV.C.11).

The team confirmed that the Board delegates responsibility and authority to the CEO to implement and administer policies. They establish clear expectations and hold the CEO accountable for fulfilling leadership and management responsibilities. (IV.C.12).

The team found that the Board is informed through presentations at meetings about the Eligibility Requirements, the Accreditation Standards, Commission policies, accreditation processes, and the College's accredited status. The Board also participates in professional development around their role and functions in the accreditation process. (IV.C.13).

Conclusions:

The College meets the Standard.

IV.D. Multi-College Districts or Systems

Not applicable. Solano Community College is a single College district.

Quality Focus Essay

The team reviewed the three-quality focused essays submitted by Solano Community College. The team commends the College for its commitment in the first quality focused essay to expanding the Wellness Center. The College outlined specific services that would be focused on to better serving students, with a specific emphasis on positively impacting student learning and achievement. The College developed ten (10) outcome measures for students on the expanded services offered at the Wellness Center. The College also developed a comprehensive Project Outline Plan which focused on specific activities, responsible parties, resources required, and a timeline for implementation.

In quality focus essay two, the College is working on operationalizing the student equity plan with intention, focused on the specific needs of disproportionately impacted student groups. The College is planning to use internal data to drive programming intentionally designed for students who need additional support and services in order to complete their educational goals. The team commends Solano College for focusing their work intentionally on student groups that need additional assistance to eliminate equity gaps, particularly for Black and African American students.

In review of quality focus essay three, the team commends Solano College for working to expand support and services at the Vallejo Center. The College strategically aligned proposed expanded services with a positive impact on student learning and achievement. The College was intentional in focusing these services on all students at the center while also maintaining a focus on serving disproportionately impacted student groups. The team is confident Solano College will measure the impact of these expanded services with planned goals for meeting the mission of the College.

Core Inquiries

Solano Community College
4000 Suisun Valley Road Fairfield, CA 94534

The Core Inquiries are based upon the findings of the peer review team that conducted Team ISER Review on March 21, 2024.

Mark Sanchez, Ed.D.
Team Chair

Solano Community College
Peer Review Team Roster

Team ISER Review

March 21, 2024

Dr. Mark Sanchez, Chair Southwestern College Superintendent/President	Dr. Marshall T. Fulbright III, Vice Chair Monterey Peninsula College Superintendent/President
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Mr. Christopher Howerton Woodland Community College Professor of Communication Studies	Mrs. Kelly Fowler Mr. San Antonio College Vice President of Instruction
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Dr. Xiaohong Li Taft College Vice President, Information & Institutional Effectiveness	
Virginia "Ginni" May ACCJC Interim Vice President	

Summary of Team ISER Review

INSTITUTION: Solano Community College DATE

OF TEAM ISER REVIEW: March 21, 2024

TEAM CHAIR: Mark Sanchez

A nine-member accreditation peer review team conducted the Team Institutional Self-Evaluation Report (ISER) Review of Solano Community College on March 21, 2024. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report and supporting evidence. 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 report to be a comprehensive document detailing the college's alignment to the 2014 Accreditation Standards, Eligibility Requirements, and Commission policies. The College provided a thoughtful report, reflecting on the institution's transformational processes, equitable student outcomes, and planning for continuing institutional improvement.

In preparation for the Team ISER Review, the team chair attended a team chair workshop on December 6, 2023, and held a pre-review meeting with the college CEO on January 26, 2024. The entire peer review team participated in a team workshop provided by staff from ACCJC on February 1, 2024. Prior to the Team ISER Review, team members completed their assessment of the college's alignment to the Accreditation Standards and policies, 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 meets Accreditation Standards, Eligibility Requirements, and Commission policies. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and developed core inquiries to be pursued during the focused site visit, which will occur during the week of September 23, 2024.

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. During the focused site visit, the team will tour the facilities, conduct scheduled meetings and an open forum, gather additional information to further their analysis to determine whether all standards are met, and accordingly finalize their peer review team report which will identify 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. During 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.

Core Inquiry 1: The team seeks to better understand how the college engages in systematic evaluation and planning leading to resource allocation.
Standards or Policies: I.B.9
Description: While there were examples of how the college makes efforts to improve institutional effectiveness, the team is seeking evidence of a comprehensive process integrating resource allocation and program review.
Topics of discussion during interviews: <ul style="list-style-type: none">• How does the college engage in systematic evaluation and planning regarding resource allocation and program review?
Request for Additional Information/Evidence: <ul style="list-style-type: none">• Evidence, such as examples of how the institution integrates program review, planning, and resource allocation into a comprehensive process
Request for Observations/Interviews: <ul style="list-style-type: none">• Program review committee chair/members• Members of the Assessment Committee• Office of Institutional Research• Members of the Fiscal Advisory Committee• Any other persons the college feels would be helpful

<p>Core Inquiry 2:</p> <p>The team seeks to verify that the College consistently assesses learning outcomes for its courses and programs and to better understand how the College uses the outcomes assessment data to support student learning.</p>
<p>Standards or Policies:</p> <p>I.B.4, I.C.3, II.A.3</p>
<p>Description:</p> <p>The team reviewed the evidence provided in the ISER and the additional requested evidence in preparation for the Team ISER Review.</p> <p>The team seeks supporting evidence to validate the effective use of assessment data to support student learning. The team seeks to learn about how the college adequately documents assessments of student learning and the evaluation of student achievement, leading to actions to improve academic quality.</p>
<p>Topics of discussion during interviews:</p> <ul style="list-style-type: none"> • How does the College ensure consistent and regular student outcomes assessment across all courses and programs? • How is assessment data used for improvement to support student learning?
<p>Request for Additional Information/Evidence:</p> <ul style="list-style-type: none"> • The team seeks additional evidence of assessment outcomes • Reports that clearly indicate regular assessment of learning outcomes • Evidence that assessment data was used for improvement to support student learning
<p>Request for Observations/Interviews:</p> <ul style="list-style-type: none"> • Student learning faculty lead or coordinator • Assessment Committee • Academic Program Review Committee • Program review faculty lead or coordinator • Program review co-chair and committee members • Administrators that support the learning outcomes assessment process

<p>Core Inquiry 3:</p> <p>The team seeks to better understand how the College ensures that regular and substantive interaction occurs in distance education courses.</p>

<p>Standards or Policies:</p> <p>Standard II.A.7, and the Policy on Distance Education and Correspondence Education</p>
<p>Description:</p> <p>The team reviewed a sample of online courses provided by the college, Administrative Procedure 6115: Distance Education, college's Curriculum Handbook Distance Education Requirements, DE Addendum Elumen, and Online Instructor Certification guidelines.</p> <p>While the team found evidence of substantive interaction between students in online courses, the team seeks evidence of substantive interaction between faculty and students in online courses.</p>
<p>Topics of discussion during interviews:</p> <ul style="list-style-type: none"> • How does the College ensure regular and substantive interaction in online courses? • What processes are in place to address situations where it is determined that regular and substantive interaction is not occurring?
<p>Request for Additional Information/Evidence:</p> <ul style="list-style-type: none"> • Any documentation that might help address the questions above • New sample of online courses from the spring 2024 term to review • Documentation of substantive interactions between faculty and student
<p>Request for Observations/Interviews:</p> <ul style="list-style-type: none"> • Discussion with Academic Senate President, Director of Distance Education, Distance Education Coordinator, Vice President of Academic Affairs, Academic Deans, Faculty Department Chairs, and others who can speak to the questions above • Members of the Distance Education Committee

<p>Core Inquiry 4:</p> <p>The team seeks to better understand how the College's governance and decision-making policies and procedures are regularly evaluated for integrity and effectiveness.</p>
<p>Standards or Policies:</p> <p>Standard IV.A.7</p>
<p>Description:</p> <p>The team reviewed Administrative Procedure 1000 which outlines the institutional plan for reviewing policies and procedures. The team found evidence of a procedure and seeks to learn how the procedure is being utilized to meet the standard.</p>

<p>Topics of discussion during interviews:</p> <ul style="list-style-type: none"> • What is the process and timeline the college uses to ensure governance and decision- making policies are regularly evaluated to ensure integrity and effectiveness?
<p>Request for Additional Information/Evidence:</p> <ul style="list-style-type: none"> • Meeting agendas where policies and procedures were discussed and updated • Academic Senate meeting agendas highlighting policy/procedure review/updates • Academic Affairs/Student Services meeting agendas highlighting policy/procedure review/updates • Any documentation that might help address the questions above
<p>Request for Observations/Interviews:</p> <ul style="list-style-type: none"> • Chair, Academic Senate • Vice-President of Academic Affairs • Vice-President of Student Services • Governance Committee Chair/Co-Chair