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August 29, 2012

Dr. Beverly S. Simone
President
Southeastern Community College
P.O. Box 180
1500 West Agency Road
West Burlington, IA 52655-0180

Dear President Simone:

Attached is the report of the team that conducted Southeastern Community College's Quality Checkup site visit. In addition to communicating the team's evaluation of your compliance with the Commission's Criteria for Accreditation and the Commission's Federal Compliance Program, the report captures the team's assessment of your use of the feedback from your last Systems Appraisal and your overall commitment to continuous improvement.

I Hope you will read and study the report carefully, because the team invested heavily in preparing for and conducting this visit, and its perceptions and advice are valuable to your institution. Please consider distributing it widely throughout your institution, since its positive feedback can be helpful in strengthening and broadening involvement in your quality improvement efforts.

A copy of the report will be read and analyzed by the AQIP Panel that reviews institutions for Reaffirmation of Accreditation at the time your review is scheduled. Prior to that review, we will send you a listing of the materials the Panel will consider, and give you an opportunity to update or supplement them if you so desire.

To comply with federal requirements, we need you, as CEO of your institution, to formally acknowledge receipt of this report within the next two weeks, and to provide us with any comments you wish to make about it. Your response will become a part of the institution's permanent record.

Sincerely,

A handwritten signature in black ink that reads "Stephen D. Spanghel".

Stephen D. Spanghel
Vice President for Accreditation Relations

QUALITY CHECKUP REPORT

Southeastern Community College

West Burlington, IA
August 13 – 14, 2012

Quality Checkup team members:

Al Reed
Director, Higher Education
Innovate+educate

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Bay de Noc Community College

Background on Quality Checkups conducted by the Academic Quality Improvement Program

The Higher Learning Commission's Academic Quality Improvement Program (AQIP) conducts Quality Checkup site visits to each institution during the fifth or sixth year in every seven-year cycle of AQIP participation. These visits are conducted by trained, experienced AQIP Reviewers to determine whether the institution continues to meet The Higher Learning Commission's *Criteria for Accreditation*, and whether it is using quality management principles and building a culture of continuous improvement as participation in the Academic Quality Improvement Program (AQIP) requires. The goals of an AQIP Quality Checkup are to:

1. Affirm the accuracy of the organization's online Systems Portfolio and verify information included in the portfolio that the last Systems Appraisal has identified as needing clarification or verification (System Portfolio Clarification and Verification);
2. Review with organizational leaders actions taken to capitalize on the strategic issues and opportunities for improvement identified by the last Systems Appraisal (Systems Appraisal Follow Up);
3. Alert the organization to areas that need its attention prior to Reaffirmation of Accreditation, and reassure it concerning areas that have been covered adequately (Accreditation Issues Follow Up);
4. Verify federal compliance issues such as default rates, complaints, USDE interactions and program reviews, etc. (Federal Compliance Review); and
5. Assure continuing organizational quality improvement commitment through presentations, meetings, or sessions that clarify AQIP and Commission accreditation work (Organizational Quality Commitment).

The AQIP peer reviewer(s) trained for this role prepare for the visit by reviewing relevant organizational and AQIP file materials, particularly the organization's last *Systems Appraisal Feedback Report* and the Commission's internal *Organizational Profile*, which summarizes information reported by the institution in its *Annual Institutional Data Update*. The report provided to AQIP by the institution is also shared with the evaluator(s). Copies of the Quality Checkup report are provided to the institution's CEO and AQIP liaison. A copy is retained by the Commission for the institution's permanent file, and will be part of the materials reviewed by the AQIP Review Panel during Reaffirmation of Accreditation.

Review of the organization's quality assurance oversight of its distance education activities.

The Team met with the Coordinator of Online Learning and with the Coordinator of the Iowa Community College Online Consortium (ICCOC), who is a Southeastern Community College employee. SCC has acted as the fiscal agent for the seven-college online consortium since the creation of the consortium in 1999. SCC also provides the technical support for ICCOC. The Learning Management System is eCollege, set up and provided by ePearson. Twenty-four-hour technical support is available to students, in addition to such services as Smart Thinking for tutoring, library services, and Student Success, a third-party resource that provides students help in time management and study skills.

While the quality of courses offered by individual institutions is the responsibility of each ICCOC member, ICCOC hosts a spring conference every year for faculty professional development opportunities. Approximately 200 faculty attend this conference. ICCOC also offers training opportunities for consortium members. Thirty-eight percent of ICCOC's budget is devoted to professional development for members in the consortium. ICCOC is an impressive, successful consortium and will be used as a model by ePearson to help establish online consortiums in other states.

At SCC, an extensive quality checklist, based on the Quality Matters Rubric, is used for course development, and all faculty teaching online are required to take a two-part mandatory training program. "Mentor trainers" provide opportunities for faculty to learn from one another. Online course evaluation is mandatory, as students cannot proceed to the final exam without responding to the survey.

The course proposal process through ICCOC has evolved over the years, but begins at the local level with administrative approvals and then progresses to ICCOC for approvals. Courses can be proposed and offered through ICCOC and locally at each campus.

Overall, online learning support for students and faculty at SCC is strong. The Team learned at the lunch session with students that some students feel the online courses are more rigorous than the on-ground courses. The Team's review of the comparison of grade distributions of online learning and on-ground learning courses indicates a 3.9% higher withdrawal rate in online courses in Spring 2012 and a 6.3% higher rate in Fall 2011, but the comparison of actual A-F

grades indicates no excessive gaps.

The one recommendation that the Team would make about online learning at SCC is that all faculty be strongly urged—perhaps required—to use e-Companion to provide on-going feedback to students about their progress in their online courses. Apparently, there is inconsistent use of this mechanism to provide on-time electronic feedback to students. Both students and administration emphasized the importance of making grades and other kinds of feedback to students available at any time students log into their courses. Consistent implementation of such a mechanism could close the data gap in online and on-ground classes.

In the Team’s judgment, the institution has presented satisfactory evidence that its distance education activities are acceptable and comply with the Commission’s standards and expectations.

Review of the organization’s quality assurance and oversight of distributed education (multiple campuses, additional locations, off-campus course sites)

In conversations with Cabinet and other staff at SCC, including employees at the Keokuk Campus, the Team determined that the Keokuk Campus is well-represented on AQIP Committees as well as on Cabinet and other cross-institutional committees. To facilitate communication between the two campuses, ITV is used to include employees who cannot attend meetings on the main campus. Keokuk was formerly Keokuk Community College and was merged with Burlington Junior College in 1967, the two institutions becoming the north and south campuses of Southeastern Community College. While students are able to complete a limited number of unique programs at Keokuk, programs at both campuses share common core requirements and provide similar support available to students.

The Team determined that the institution presented satisfactory evidence that its distributed education activities are acceptable and comply with Commission’s standards and expectations.

Review of specific accreditation issues identified by the institution’s last Systems Appraisal

The Systems Appraisal Feedback Report did not identify specific accreditation issues. In the Team’s judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup and that it complies with Commission and AQIP’s expectations.

Review of the institution’s approach to capitalizing on recommendations identified by its last Systems Appraisal in the Strategic Issues Analysis.

The following are Strategic Issues that the Systems Appraisal Feedback team identified:

1. Develop systematic process for assessing student learning: As noted above, SCC has been assessing student learning outcomes in the occupational programs. The institutional IR site contains a spreadsheet indicating occupational programs that have been assessed, how many students are eligible to assess, number of students assessed, how many attempts, pass rates, percent proficient, and some graphs to show trend information. After receipt of the Systems Portfolio Feedback Report, SCC revised the institution’s Core Competencies, with input from all appropriate constituencies, and invited a speaker from HLC to address assessment of student learning outcomes. In 2011, SCC joined the HLC Assessment Academy. In 2012 the Assessment Committee piloted the Communications Core Competency. Results data were provided to the Team at the Site Visit. Initially, the Assessment Committee was chaired by the President, but beginning in Fall 2012 this Committee will be chaired by a faculty member. Providing faculty the opportunity to lead the assessment initiative is a positive change and indicates that leadership understands the importance of employees owning processes and results at the work level. The Quality Checkup Team suggested to faculty and institutional leaders that the assessment process begin to pick up some momentum and move quickly beyond piloting a single Core Competency. It is important for the institution to build a “culture of assessment” across programs and units, and implement assessment activities into the rhythm of the academic year. The results of assessment of student learning outcomes should also be clearly integrated into the program review process, which should feed into strategic planning, and then link to the budget process. In other words, assessment of student learning outcomes—determining if students are indeed learning what SCC says they should learn—will drive Academic improvement and help students succeed.
2. Develop formal institutional process for collecting and analyzing student

complaints: This issue is addressed in the Compliance Section below.

3. Reporting structure of IR and involvement of leaders in streamlining and aggregating the flow of data at SCC: SCC still has a part-time IR employee who works remotely, but who is able to provide a great deal of “reporting” data for the institution and makes herself available on campus, as necessary. This individual reports to the IT Director who reports directly to the President. Faculty and staff have access to the data on the College’s IR website and can request information, as needed. Some information on the site is password protected. The institution could benefit by training employees, especially faculty, in how to query for data and analyze results data to make improvements.
4. Few comparative and trend data in support of activities: This Strategic Issue has been addressed in (1.) above. In addition, SCC indicates that it has four years of data for its Key Performance Indicators (KPIs), located on the secure IR website, which was made available to the Quality Checkup Team. The institution has also addressed this Strategic Issue by participating in the National Community College Benchmark Project (NCCBP) and is using that data for comparative purposes in a number of initiatives. Likewise, the institution has trend results from the administration of CCSSE on which to make plans for improvement. SCC also gathers data from multiple surveys. After discussions with a variety of cross-functional teams and institutional leaders, the Team feels confident that SCC will include plenty of supporting data in the results (R) section of the next Portfolio, as that data relates to the success of the institution’s processes (P), and the extent to which the data is used to drive improvement (I).

After meeting with Board members, institutional leaders, faculty, and staff, the Team has determined that SCC has presented satisfactory evidence that the institution met this goal of the Quality Checkup. The institution’s approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP’s expectations.

Review of organizational commitment to continuing systematic quality improvement

SCC has made Continuous Process Improvement (CPI) one of its three Strategic Initiatives. Internal facilitators had been trained in the use of improvement tools and in the philosophy of continuous improvement in 2007-08. A systematic process for determining the success of the implementation of CPI was determined in 2011, and plans were put in place for Professional Development Day 2012 to train all staff and faculty in how to implement CPI at every level of the institution, and to help employees understand where they fit into the continuous improvement process cycle. The AQIP leaders and committee members appear to be earnest in attempts to gather input from all employees, and in giving employees the tools and training they need to be successful at their own work levels.

In response to feedback provided in the Systems Appraisal Feedback Report, SCC created a spreadsheet to respond to every opportunity statement the Report and to indicate progress on improvements. Critical among SCC's opportunities are assessment of student learning outcomes—addressed in the Strategic Issues—and effective data gathering, analysis, and presentation of data. These issues have been addressed elsewhere in this report.

As evidence CPI at work, the Team met with the Program Review Committee and determined that a systematic, well-documented process for program review is in place. This process involves collecting data on post-graduate employment, student competency, recruitment/retention, program currency, articulation, and improvement plans.

Recommendations resulting from Program Review are presented to the Board of Trustees for approval. The Program Review process is also used to make decisions about program closures. This process was used recently to close an occupational program, and while there was some concern about this closure expressed in third-party comments, relevant faculty and other employees and community members were included in two Program Reviews leading up to the decision to close the program.

Further commitment to continuous improvement is evident by SCC's putting in place a set of customer service standards after being inspired by a visit to the Disney Quality Institute in 2011 and joining the Continuous Quality Improvement Network (CQIN) that organized the trip to Orlando.

Beyond these initiatives, SCC has aligned its Strategic Planning with the AQIP process. The Quality Checkup Team met with employees engaged in two Strategic projects that the institution

is addressing through its Strategic Planning process: First Year Experience (FYE) and Strategic Enrollment Management (SEM). The First Year Experience has been piloted in the past and data was collected that showed that because the course was not a requirement, students did not enroll for it. Having been inspired by presentations at an annual FYE conference, the two faculty involved in this project have created a new course and expect to roll it out in Fall 2012. The SEM plan is the result of a year of systematic planning and researching by a cross-functional team of employees who are addressing four focus areas: (1) Connection, (2) Entry, (3) Progress, and (4) Completion. Each of these four areas has pinpointed many initiatives across the institution associated with the four areas. The actual plan for SEM is detailed and complex. The institution may want to select a single focus area (as an example, Completion) and make that area a priority.

The Quality Checkup Team was also presented with the results of a successful Action Project that led to the creation of a manual for Disaster Recovery for Technical Resources. This manual provides a useful prototype for documentation of subsequent action projects. The project is well presented with a project statement, goals and objectives, composition of the team members, context, improvement plan, visuals for clarifying the relationship of individual tasks and actions, and so forth. SCC may want to consider using the format of this project to provide evidence of other successful projects.

Perhaps the most laudable commitment to continuous quality improvement is the Board of Trustees' approval of a \$2 tuition fee to be dedicated to funding the Strategic Issues. The Board of Trustees has made this commitment for two years. The alignment of resources with Strategic Planning and AQIP initiatives is an important step in ensuring success of the projects.

In the Team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Other AQIP issues)

The Quality Checkup Team concludes that SCC has a number of AQIP opportunities:

1. A new President had just been hired prior to the Quality Checkup visit, and he was able to attend sessions during the visit, as was the former President. The Quality Checkup

Team had conversations with the Presidents and the Chair of the Board of Trustees and the Vice Chair about the Team's meetings with faculty and staff. The Team indicated that the faculty appear to have a strong commitment to AQIP and to the continuous quality improvement process. The faculty's passion and desire to play a more visible role in projects and initiatives is a strength that can be nurtured. While it's obvious that faculty do have a voice on Cabinet, and faculty are provided opportunity to have input into the strategic planning process and other CPI issues, it may be worthwhile for SCC's leaders to clarify the decision-making process for Action Project recommendations and other recommendations made to the leaders.

2. SCC may want to consider separating the grant and accreditation functions. Regardless of the size of an institution, these are two very different positions with different kinds of job skills and experiences required. Likewise, the distributed structure of the gathering, reporting, and analysis of data for accreditation purposes may be hampering efforts for clarity and consolidation overall, and an appropriate focus on Results and Improvements in AQIP, in particular.
3. Based on conversations with students, staff, and administration, it became clear to the Quality Checkup Team that SCC has an opportunity to involve faculty more fully and systematically in student advising. In order to make progress on the SEM plan (student connection, entry, progress, completion, etc.), SCC should implement a faculty advisor plan as soon as possible. There are many good models for faculty advising among peer institutions, some that require faculty to advise, some that use faculty volunteers. Since faculty know their courses, programs, and curriculum better than anyone else at an institution, they are probably some of the best people to help students make good academic choices.
4. In reviewing syllabi to determine credit hours of courses and programs, the Team noted that there is a lack of standard elements on faculty syllabi. As an example, some syllabi include learning outcomes, some include the course credit/contacts, some include a topical outline or course schedule—and some do not. As part of SCC's vision to be a dynamic leader in innovation, the institution offers a wide range of course formats: 7 X 7's, 2-week, 4-week, 12-week, 16-week, and so forth. It's important that the institution

ensures that compressed, or shortened course formats, are indicated on the course syllabus. It may be useful for faculty to develop a best practices list of standard elements that each syllabus should contain for students' sake. In addition, SCC's definition of a credit hour needs to be more detailed, and broadly understood so that students are reminded of the institution's expectations for independent work beyond direct instruction. Course formats must conform to the institution's definition of a credit hour.

5. The Team detected some AQIP committee weariness. With new leadership coming on board, there is an opportunity to rejuvenate the continuous improvement process. The Team recommends there be more of a celebratory component to SCC's AQIP endeavors. The Team also noted that at the work-group level, there appears to be a number of processes leading to results that are not surfacing to the Action Project level or to the Cabinet level, and that there can be value in recognizing more of the results-driven processes growing organically in areas across the campuses.
6. SCC staff have attended AQIP functions, and there is broad understanding of AQIP and continuous quality improvement at the institution. To better capture the progress that SCC is making in its improvement projects, however, SCC may find it beneficial to provide professional development opportunities for one or more employees to attend training to become a Peer Reviewer. The insights these employees gain may bring a fresh perspective to the portfolio process, and help integrate the portfolio into the SCC culture as a living document.

Appendix A

Worksheet for The Evaluation Team on Federal Compliance Requirements

Instructions: The team reviews each item identified in the Federal Compliance Guide and documents its findings in the appropriate spaces below. Generally, if the team finds in the course of this review that there are substantive issues related to the institution's ability to fulfill the Criteria for Accreditation, such issues should be raised in appropriate sections of this AQIP Quality Checkup Report. This Worksheet must be completed for all Quality Checkup visits after January 1, 2012.

Institutional Materials Related to Federal Compliance Reviewed by the Team:

- *Judicial Code of Conduct and Students' Rights, Article X –Student Rights Complaints, Article XI—Grade Appeals*
- *SCC's webpage, "Transfer Credits to SCC"*
- *Southeastern Community College Credit Course Catalog—2012-13*
- *Southeastern Community College Handbook—2012-13*
- *Southeastern Community College Financial and Compliance Report, June 30, 2011*
- www.scciowa.edu (multiple pages)
- *Administrative Guideline 114, School Term and Academic Year Guidelines*
- *Log of Student Complaints, 2009-2012*
- *Student in Distress (SID) Protocol*
- *Administrative Guideline 333, Transfer Credit Evaluation*
- *Independent Auditor's Letter to SCC Board, December 7, 2011*
- *Consumer Info Disclosures: Annual Security and Fire Safety Reports*
- *Administrative Guideline 321, Satisfactory Academic Progress*
- *Invitation for Third-Party Complaints*
- *Worksheet for Use by Institutions on Credits and Program Length and Clock Hours*
- *Southeastern Community College Fall 2012 Schedule*
- *Eight Syllabi for six different courses in a variety of course-length formats*
- *Thirteen pieces of advertising literature*
- *Approval letters from the Commission on Accreditation of Allied Health Education Programs (CAAHEP) for the Respiratory Therapy and the Emergency Medical Technician-Paramedic programs, the Medical Assisting Education Review Board (MAERB), the Iowa Board of Nursing, the National Automotive Technicians Education Foundation (NATEF), and I-CAR Academic Alliance.*

Evaluation of Federal Compliance Program Components

1. Credits, Program Length, and Tuition: *The institution has documented that it has credit hour assignments and degree program lengths within the range of good practice in higher education and that tuition is consistent across degree programs (or that there is a rational basis for any program-specific tuition). New for 2012: The Commission has a new policy on the*

Credit Hour. Complete the Worksheet in Appendix A and then complete the following responses. Attach the Worksheet to this form.

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

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

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

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

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

Comments: Program lengths seem appropriate and consistent, with longer lengths in such applied programs as Dental Hygiene, where practice is critical for success.

Additional Monitoring, if any: None

2. Student Complaints: *The institution has documented a process in place for addressing student complaints and appears to be systematically processing such complaints as evidenced by the data on student complaints for the three years prior to the visit.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

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

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

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

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

Comments: The Systems Appraisal Feedback Report indicated that "SCC would benefit from a more formal institutional process for collecting and analyzing student complaint

information.” The Quality Checkup Team reviewed SCC’s complaint process and database of student complaints and found them satisfactory.

Additional Monitoring, if any: None

3. Transfer Policies: *The institution has demonstrated it is appropriately disclosing its transfer policies to students and to the public. Policies contain information about the criteria the institution uses to make transfer decisions.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM’S CONCLUSIONS:

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

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

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

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

Comments: The Team reviewed the Administrative policy relevant to this issue.

Additional Monitoring, if any: None.

4. Verification of Student Identity: *The institution has demonstrated that it verifies the identity of students who participate in courses or programs provided to the student through distance or correspondence education and has appropriate protocols to disclose additional fees related to verification to students and to protect their privacy.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM’S CONCLUSIONS:

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

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

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

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

Comments: The Team reviewed relevant information and held discussions with the Coordinator of the Iowa Community College Online Consortium (ICCO) and the Southeastern Coordinator of Online Learning.

Additional Monitoring, if any: None

5. Title IV Program and Related Responsibilities: *The institution has presented evidence on the required components of the Title IV Program.*

- **General Program Requirements:** *The institution has provided the Commission with information about the fulfillment of its Title IV program responsibilities, particularly findings from any review activities by the Department of Education. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area.*
- **Financial Responsibility Requirements:** *The institution has provided the Commission with information about the Department's review of composite ratios and financial audits. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area. (Note that the team should also be commenting under Criterion Two if an institution has significant issues with financial responsibility as demonstrated through ratios that are below acceptable levels or other financial responsibility findings by its auditor.)*
- **Default Rates.** *The institution has provided the Commission with information about three years of default rates. It has a responsible program to work with students to minimize default rates. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area.*
- **Campus Crime Information, Athletic Participation and Financial Aid, and Related Disclosures:** *The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution's policies and practices for ensuring compliance with these regulations.*
- **Student Right to Know.** *The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution's policies and practices for ensuring compliance with these regulations. The disclosures are accurate and provide appropriate information to students. (Note that the team should also be commenting under Criterion One if the team determines that disclosures are not accurate or appropriate.)*

- **Satisfactory Academic Progress and Attendance.** *The institution has provided the Commission with information about policies and practices for ensuring compliance with these regulations. The institution has demonstrated that the policies and practices meet state or federal requirements and that the institution is appropriately applying these policies and practices to students.*
- **Contractual Relationships:** *The institution has presented a list of its contractual relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for contractual relationships (The institution should review the Contractual Change Application on the Commission’s Web site for more information. If the team learns that the institution has a contractual relationship that may require Commission approval and has not completed the appropriate Commission Contractual Change Application the team must require that the institution complete and file the form as soon as possible.)*
- **Consortial Relationships:** *The institution has presented a list of its consortial relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for consortial relationships (The institution should review the Consortial Change Application on the Commission’s Web site for more information. If the team learns that the institution has such a consortial relationship that may require Commission approval and has not completed the appropriate Commission Consortial Change Application the team must require that the institution complete and file the form as soon as possible.)*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM’S CONCLUSIONS:

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

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

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

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

Comments: The institution provided relevant documentation in this area.

Additional Monitoring, if any: None

6. Institutional Disclosures and Advertising and Recruitment Materials: *The institution has documented that it provides accurate, timely and appropriately detailed information to current*

and prospective students and the public about its accreditation status with the Commission and other agencies as well as about its programs, locations and policies.

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

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

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

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

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

Comments: The institution's website and catalog contain the HLC Mark of Affiliation. The Team reviewed other advertising materials and reminded the institution to include HLC's Mark of affiliation on other materials, as appropriate, when accreditation is mentioned.

Additional Monitoring, if any: None

7. Relationship with Other Accrediting Agencies and with State Regulatory Boards: *The institution has documented that it discloses accurately to the public and the Commission its relationship with any other specialized, professional or institutional accreditor and with all governing or coordinating bodies in states in which the institution may have a presence. Note that if the team is recommending initial or continued status, and the institution is currently under sanction or show-cause with, or has received an adverse action from, any other federally recognized specialized or institutional accreditor in the past five years, the team must explain the action in the body of the Assurance Section of the Team Report and provide its rationale for recommending Commission status in light of this action. In addition, the team must contact the staff liaison immediately if it learns that the institution is at risk of losing its degree authorization or lacks such authorization in any state in which the institution meets state presence requirements.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

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

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

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

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

Comments: The institution provided copies of letters of approval from other accrediting agencies.

Additional Monitoring, if any: None

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

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM’S CONCLUSIONS:

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

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

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

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

Comments: The Team reviewed eight third-party comments and discussed them at length with the Chairman and Vice Chair of the Board of Trustees, and the outgoing and incoming President. The Team also clarified issues in the complaints with faculty, staff, and students. In the Team’s judgment, the issues raised in the third-party comments are being addressed through multiple means, including by a change in the senior leadership team.

Additional Monitoring, if any: None

Appendix B Credits and Program Length

Instructions: The team reviews the “Protocol for Peer Reviewers Reviewing Credit Hours Under the Commission’s New Policies” before completing this Worksheet. This Worksheet must be completed for all Quality Checkup visits after January 1, 2012.

A: Answer the Following Questions

Institutional Policies on Credit Hours

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

Yes No

Comments: The institution’s policy does not specifically address online or other delivery modes—although it does address laboratory work, internships, practica, and studio work.

- Does that policy relate the amount of instructional or contact time provided and homework typically expected of a student to the credit hours awarded for the classes offered in the delivery formats offered by the institution?

Yes No

Comments: The policy indicates “a minimum of two hours of out-of-class student work each week for approximately fifteen weeks for one semester . . . of credit”

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

Yes No

Comments: SCC has expanded the number of courses its offers in alternative time formats, including 13 7x7 3-credit Humanities and Social Science courses that meet for seven hours with a three-day ‘weekend’ break in the middle. This format makes it nearly impossible for a student to meet the outside class time requirements. While none are occupational courses or courses that require practicing skills, nonetheless there is not sufficient evidence that students taking 7x7’s are meeting the required outcomes and competencies that students taking the traditional 16 week courses do.

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

Yes No

Comments: The institution's policy should address alternative delivery modes and/or learning outcomes as these relate to the credit hour.

Application of Policies

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

Yes No

Comments: There needs to be further clarity on syllabi about how students will meet competencies.

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

Yes No

Comments:

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

Yes No

Comments: As noted above, there needs to be additional clarity on syllabi about expectations for students to meet study requirements outside of instruction.

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

Yes--potentially No

Comments: SCC should conduct comparative and longitudinal studies of student success in the compressed formats to demonstrate that students are meeting the competencies.

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

Yes No

Comments: See comments above about compressed formats.

B: Identify the Sample Courses and Programs Reviewed by the Team. For the programs the team sampled, the team should review syllabi and intended learning outcomes for several of the courses in the program, identify the contact hours for each course, and expectations for homework or work outside of instructional time.

- Automotive Collision Repair—Management Option (AAS, 77 credits); CRR-300 Preparation (3 credits)
- Automotive Technology (AAS, 80-82 credits); AUT-244 Manual Drivetrains I (3 credits, 5 contacts)
- Criminal Justice (AS, 63 credits); CRJ-100, Introduction to Criminal Justice
- Animation for Television, Film, and New Media (AAS, 62-71.7); ANI-100 Story Development for Animation (3 credits)

C: Recommend Commission Follow-up, If Appropriate

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

Yes No

Rationale:

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

D: Identify and Explain Any Findings of Systematic Non-Compliance in One or More Educational Programs with Commission Policies Regarding the Credit Hour