

# **FOLLOW-UP VISIT PEER REVIEW TEAM REPORT**

**Lassen Community College  
478-200 Hwy 139  
Susanville, CA 96130**

**This report represents the findings of the Peer Review Team that conducted a Follow-Up Visit to Lassen Community College November 8, 2022. The Commission acted on the accredited status of the institution during its January 2023 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.**

**Submitted to:**

**The Accrediting Commission for Community and Junior Colleges**

**Submitted by:**

**Dr. Char Perlas---Superintendent/President, College of the Siskiyous  
Dr. Anna Badalyan, Dean of Institutional Effectiveness---Los Angeles City College**

## Introduction

The Peer Review Team for Lassen College (LCCD) completed its initial visit to the college from March 9 through March 12, 2020. At its meeting June 10-12, 2020, the Commission acted to place Lassen College on Warning and require a Follow-Up Report, due no later than October 1, 2021, followed by a visit from a peer review team. Members of the peer review team conducted the Follow-Up site visit to Lassen College on November 15-16, 2021. The Follow-Up site visit resulted in a January 27, 2022 Action Letter noting the Commission's action to continue warning and require a Follow-Up Report in response to two remaining requirements no later than October 1, 2022, followed by a visit from a peer review team. Members of the peer review team conducted the Follow-Up site visit on November 8, 2022.

The team found that the College had prepared very well for the visit by arranging for meetings with the individual groups agreed upon earlier with the team chair and by providing requested, additional evidence. Over the course of the visit the team met with the following individuals/groups:

Carie Camacho, Interim Superintendent/President  
Colleen Baker, Interim Dean of Instruction  
Tom Robb, Instructional Designer/SLO Coordinator  
Lisa Gardiner, Faculty Tri-Chair  
Adam Runyan, Academic Senate President  
Chad Lewis (via Zoom), Accreditation Liaison Officer

Members of:

Academic Senate  
Accreditation Workgroup  
Budget Committee  
Cabinet  
Consultation Council  
Curriculum Committee

The primary task of the team was to review the Follow-Up Report, conduct the visit and document resolution of the following compliance requirements:

**Standard I.A.3, I.B.5, I.B.6, I.B.8, I.B.9, II.A.2, II.C.1, III.D.1 (Requirement 1):** In order to meet the Standards, the Commission requires the College assess the accomplishment of its mission through program review, student learning outcomes, and student achievement. The College must engage in continuous, broad-based, systematic evaluation and planning by conducting and implementing program review and resource allocation into a comprehensive process that, in turn, leads to improvement of institutional effectiveness and academic quality. The College must broadly communicate the results so that the institution has a shared understanding of its strengths and weaknesses and sets appropriate priorities.

**Standard I.B.2, I.B.4, II.A.3, II.A.11, II.A.14 (Requirement 2):** In order to meet the Standards, the Commission requires the College regularly assess student learning outcomes at the course, program, and institutional level.

## **Team Analysis of College Responses to the compliance requirements:**

### **Standard I.A.3, I.B.5, I.B.6, I.B.8, I.B.9, II.A.2, II.C.1, III.D.1 (Requirement 1)**

In order to meet the Standard, the Commission requires the College assess the accomplishment of its mission through program review, student learning outcomes, and student achievement. The College must engage in continuous, broad-based, systematic evaluation and planning by conducting and implementing program review and resource allocation into a comprehensive process that, in turn, leads to improvement of institutional effectiveness and academic quality. The College must broadly communicate the results so that the institution has a shared understanding of its strengths and weaknesses and sets appropriate priorities.

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

Based on the follow-up report and interviews with Lassen College administration, staff, and faculty, it is evident that the College made significant progress in conducting and documenting assessment of student learning outcomes, program review, and student achievements. The College reported in the follow-up report and confirmed during the visit that all instructional and non-instructional areas have clearly define program review schedules which are documented in the Instructional Program Review (IPR) and Non-Instructional Program Review (NIPR) Handbooks. In particular, Career Technical Education instructional programs are on two-year program review cycle, and all other instructional and non-instructional programs are on four-year program review and cycle.

As identified in the IPR an NIPR handbooks and demonstrated in the evidence provided, regular review and assessment of learning outcomes are embedded in the program review process. The instructional program review documents include assessment of course (SLO), Program Student Learning Outcomes (PSLO), General Education Student Learning Outcomes (GESLO), and Institutional Student Learning Outcomes (ISLO) using a “roll-up” methodology. Based on the follow-up report, and verified during interviews, 100 percent of all active course learning outcomes are mapped to ISLOs and GESLOs. These maps were all reviewed and approved by the Curriculum Committee. In addition, ISLO’s are linked to the institution’s Strategic goals, which are based on the College’s mission driven Strategic Plan.

Administrative Unit Outcomes (AUOs) are mapped to the College’s strategic goals. These maps indicate the assessment measure, target, baseline, and the data source used to measure the AUO. A comprehensive training program was held in Spring 2022 for all 26 areas that are required to write an NIPR. It is evident that the College is committed to and continues to strengthen its planning processes and trainings on SLO assessment. The college has a special assignment, SLO coordinator who has assisted in streamlining the SLO process through the development of a SharePoint SLO Dashboard. The SLO coordinator in collaboration with faculty chairs and administrators, have spearheaded compliance efforts which have strengthened the evaluation and planning processes.

The College has also reviewed and updated its budgeting and resource allocation processes to address campus community recommendations to simplify, provide more meaningful data, and align the timelines with IPR and NIPR. In particular, program review and planning are now aligned with the new budget process allowing programs to be funded in a timely manner.

Additionally, together with student learning outcome data, the Office of Institutional Effectiveness will provide data on enrollment, efficiency measures, student achievement, and Institutional Set-Standards (ISS) for any needed program review addendum reports. A welcomed addition to the program review process is “Reflection of data and a plan for improvement and closing the loop”. This is a new update to the process.

The College appropriately communicates IPR, NIPR and Outcome Data to inform budget allocation decisions. Each are presented to the Consultation Council and funded requests are then shared with the campus as a whole.

**Conclusion:**

The institution has addressed the requirement, corrected the deficiencies, and now meets the Standards (I.A.3, I.B.5, I.B.6, I.B.8, I.B.9, II.A.2, II.C.1, III.D.1)

**Standard I.B.2, I.B.4, II.A.3, II.A.11, II.A.14 (Requirement 2)**

In order to meet the Standards, the Commission requires the College regularly assess student learning outcomes at the course, program, and institutional level.

**Findings and Evidence:**

The College has made substantial strides in addressing this requirement. With the assistance of a dedicated SLO Coordinator, they have developed a regular Outcomes Assessment Calendar, Instituted an Outcomes Assessment Process and have developed a Student Learning Outcomes and Assessment Dashboard. Since the last visit, 100% of all courses have been mapped and assessed. Additionally, all programs are transitioning to comply the new Outcomes Assessment Calendar.

The College has developed a Learning Outcomes Assessment schedule which require courses (not offered on a regular basis) to assess outcomes each time the course is offered. Courses offered on a regular basis assess the even numbered outcomes on even years (ex. 2022 assesses outcomes #2, #4 and #6) and odd numbered outcomes are assessed during odd years (ex. 2023 assesses #1, #3 and #5).

A variety of online trainings as well as in-person trainings have been made available to those using the SLO Dashboard. SLO Data Analysis is being regularly discussed at the Department, Division and College-level as well as being used to justify resource requests.

It was evident that the culture of assessment to improve student outcomes has been reinforced by the easy to use, readily accessible SLO Dashboard. Furthermore, it has been negotiated and included in the Faculty CBA that faculty are to contribute towards SLO compliance as outlined in the applicable ACCJC Standards.

**Conclusion:**

The institution has addressed the requirement, corrected the deficiencies, and now meets the Standards (I.B.2, I.B.4, II.A.3, II.A.11, II.A.14).