

Peer Review Team Follow-Up Report

Napa Valley College
2277 Napa-Vallejo Highway
Napa, CA 94558

This report represents the findings of the Peer Review Team that conducted a Follow-up visit to Napa Valley College on April 8, 2024. The Commission acted on the accredited status of the institution during its June 2024 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Submitted by:

Dr. Lori Bennett
Team Chair

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Napa Valley College
Peer Review Team Roster

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Purpose of Follow-Up Visit

INSTITUTION: Napa Valley College

DATES OF VISIT: April 8, 2024

TEAM CHAIR: Dr. Lori Bennett

Purpose of Site Visit

The peer review team conducted its comprehensive peer review of Napa Valley College on October 10-12, 2022. At its January 11-12, 2023 meeting, the Commission determined noncompliance with Standard I.B.2 (College Requirement #1), Standards I.B.7, I.C.5, and IV.A.7 (College Requirement #2), Standards III.B.4 and III.C.2 (College Requirement #3), Standards III.D.1, III.D.2, III.D.3, and III.D.4 (College Requirement #4), Standards IV.A.1, IV.A.2, IV.A.3, and IV.A.5 (College Requirement #5), and Standard IV.C.12 (College Requirement #6) and acted to require a Follow-Up Report due no later than March 1, 2024, followed by a visit from a peer review team. Members of the peer review team conducted its follow-up site visit to Napa Valley College on April 8, 2024.

The purpose of the visit was to verify that the Follow-Up Report prepared by the college was accurate, through examination of evidence and interviews with college representatives, to determine if the college now meets the Standards noted in the following compliance requirements:

Standard I.B.2 (College Requirement 1):

In order to meet the Standard, the Commission requires that the College implement processes, including consistent program review and student learning outcome assessment, to ensure the effectiveness of all of its services in meeting student needs.

Standards I.B.7, I.C.5, and IV.A.7 (College Requirement 2):

In order to meet the Standards, the Commission requires that the College develop and implement a regular cycle of review and evaluation of institutional practices, board policies, and administrative procedures to ensure effectiveness.

Standards III.B.4 and III.C.2 (College Requirement 3):

In order to meet the Standards, the Commission requires that the College plan for and evaluate total cost of ownership of its physical and technological resources.

Standards III.D.1, III.D.2, III.D.3, and III.D.4 (College Requirement 4):

In order to meet the Standards, the Commission requires that the College integrate its planning and resource allocation for institutional and annual unit plans to ensure that resources meet both short-term and long-term needs of the institution and support and sustain student learning programs and services.

Standards IV.A.1, IV.A.2, IV.A.3, and IV.A.5 (College Requirement 5):

In order to meet the Standards, the Commission requires that decision-making roles and processes throughout the institution be clarified and clearly defined to ensure all constituencies have shared understanding for appropriate participation.

Standard IV.C.12 (College Requirement 6):

In order to meet the Standards, the Commission requires that the Board delegate full responsibility and authority to the CEO without Board interference.

During the visit, team members met with approximately twenty-five administrators, faculty, classified staff, and students in formal meetings, group interviews, and individual interviews. The team thanks the College staff for hosting the site visit, coordinating meetings, providing additional documentation, and ensuring a smooth and collegial process.

Over the course of the day, the team met with the following individuals/groups:

- Dr. Torence Powell, College President
- Dr. Alejandro Guerrero, Vice President, Student Affairs
- Ms. Jessica Erickson, Dean of Enrollment Services
- Dr. Aaron DiFranco, Puente Program and English Professor
- Ms. Angie Moore, Counselor and Program Coordinator, Counseling
- Dr. Matthew Kronzer, Academic Senate President, English Professor
- Ms. Danielle Alexander, Classified Senate President, Instructional Support Specialist
- Ms. Cristina Tapia, Administrative/Confidential Senate President, Manager of Dual Enrollment & Educational Partnerships
- Ms. Priya Sharma, ASNVC President
- Mr. Jim Reeves, Vice President, Administrative Services
- Mr. Ricardo Guzman, Faculty Co-Chair, Respiratory Care Professor
- Ms. Michele Villante, Classified Representative, Financial Aid Analyst
- Ms. Shawntel Ridgle, Administrative Representative, Director, Continuing Education & Community Partnerships
- Ms. Lauren Winczewski, Faculty Representative, Psychology Professor
- Mr. Terry McKinney, Ellucian, Administrator responsible for Technology
- Mr. Emery Stafford, Technology Committee Faculty Co-Chair, Mathematics Professor
- Mr. Chris Farmer, Technology Committee, Administrative Representative, Dean of Science, Engineering and Distance Education
- Mr. Brandon Tofanelli, Technology Committee, Classified Representative, Distance Ed Technician
- Mr. Miguel Vargas, Facilities Committee, Administrator, Director of Facilities Services
- Ms. Lauren Lee, Facilities Committee, Classified Representative, Administrative Assistant
- Mr. Matthew Cowell, Facilities Committee, Administrative Representative, Arts & Humanities Technical Director
- Ms. Cari Roughley, Facilities Committee, Faculty Representative, Geology Professor

Team Analysis of College Responses to Compliance Requirements

Standard I.B.2 (College Requirement 1):

In order to meet the Standard, the Commission requires that the College implement processes, including consistent program review and student learning outcome assessment, to ensure the effectiveness of all of its services in meeting student needs.

Findings and Evidence:

The team confirmed that the College is following a consistent program review and student learning outcomes assessment process. These findings were strongly supported by the evidence provided and confirmed during the in-person interviews.

Napa Valley College provided evidence of twelve Student Support Service area outcomes assessments scheduled to be measured relative to the Program Review Cycle. The College also provided evidence of their revised Program Review template with Student Services Outcomes included. This form provides space for analysis of these outcomes by the College research office. The College provided evidence of the Student Affairs Vision and Outcomes Statements. Evidence shows that this vision was the basis for a meaningful outcomes assessment tool based on “equity-minded practices, creating welcoming spaces and a sense of belonging, and the impact of support services on the student experience.” The outcomes assessment work is intended to align with the program review schedule.

The team found that Napa Valley College has modified the program review template to include the evaluation of student support services. The revised program review document includes an evaluation of the effectiveness of the service areas. The alignment is intended to meet the needs of Napa Valley College’s students.

The College gave evidence of the Transfer Center Program Review with Student Learning Outcomes/Student Services Outcomes Assessment Findings data and analysis. This Student Support Service Area evidence was dated Spring 2023; however, the Transfer Center appears as AY 25-26 on the Student Services Program Review cycle chart provided in the evidence.

Conclusion:

The institution has addressed the requirement, corrected the deficiencies, and now meets Standard I.B.2.

Standards I.B.7, I.C.5, and IV.A.7 (College Requirement 2):

In order to meet the Standards, the Commission requires that the College develop and implement a regular cycle of review and evaluation of institutional practices, board policies, and administrative procedures to ensure effectiveness.

Findings and Evidence:

The team confirmed that Napa Valley College has developed and implemented a regular cycle of review and evaluation of institutional practices, board policies, and administrative procedures. Its revision of AP 2410 Board Policy and Administrative Procedure provides new clarity about the roles of each constituency at the College in reviewing policies so that necessary revisions can be completed in a timely and orderly way. This revision, along with joint workshops to expedite policy and a close

adherence to the review timeline, has enabled the College to keep pace with its established timeline in the past two years. (I.B.7)

With its implementation of a new website in December 2022, the College established new practices to ensure the consistency of the information it provides about its mission, vision, and values, as well as for programs and services. These include linking each board policy reference to the official document and establishing a single web location for the mission, vision, and values, and for each program and service area. (I.C.5)

The College indicated it has begun to incorporate a more deliberate evaluation of effectiveness in its review of institutional practices, providing examples that included its survey and evaluation of the mission statement. In addition to this, the College has done a great deal of work to clarify the appropriate roles of different constituencies in the regular review and evaluation of its governance and decision-making policies, procedures, and processes— by establishing mutual agreement between Senate and the District regarding the BPs and APs subject to collegial consultation, by revising AP 2410 to reflect this, and by adding references to AP 2410 to their Council of Presidents agendas. As confirmed by campus interviews, these steps have helped the College work collaboratively to meet its obligation to regularly evaluate its policies and processes, share the results, and make improvements. (IV.A.7)

Conclusion:

The institution has addressed the requirement, corrected the deficiencies, and now meets Standards I.B.7, I.C.5, and IV.A.7.

Standards III.B.4 and III.C.2 (College Requirement 3):

In order to meet the Standards, the Commission requires that the College plan for and evaluate total cost of ownership of its physical and technological resources.

Findings and Evidence:

Based on the team’s review of evidence and interviews, the College is developing tools to plan for and evaluate total cost of ownership of its physical and technological resources. However, the tools have not been fully developed and applied to inform its long-range planning and resource allocation process and thus the College has not fully implemented College Requirement 3.

The College has developed a template to evaluate Total Cost of Ownership for facilities and is in the process of developing a similar template to evaluate the Total Cost of Ownership for technology. The College has not yet conducted the analysis. When completed, the College intends to use this analysis to inform its Facilities and Technology Master Plans, which will include short-term and long-term planning for these areas. The Educational Master Plan has been drafted and will be brought to the Board for approval in May 2024, after which the College is planning to develop its Facilities and Technology Master Plans.

One of the five strategic priorities identified in the Educational Master Plan development process was Infrastructure and Fiscal Sustainability, which, along with the TCO templates, will be used to inform

the development of the Facilities and Technology Master Plans, which in turn should be used to inform short and long-term planning and resource allocations. (III.B.4, III.C.2)

Conclusion:

The College has not satisfied the requirement and does not meet Standards III.B.4 and III.C.2.

Standards III.D.1, III.D.2, III.D.3, and III.D.4 (College Requirement 4):

In order to meet the Standards, the Commission requires that the College integrate its planning and resource allocation for institutional and annual unit plans to ensure that resources meet both short-term and long-term needs of the institution and support and sustain student learning programs and services.

Findings and Evidence:

Based on the team's review of the evidence and interviews, the College has begun to integrate its planning and resource allocation for annual unit plans for both instructional and student services programs. However, the College has not fully implemented and engaged in these practices to ensure the ability to meet both the short-term and long-term needs of the College.

The team verified that the College has sufficient financial resources to support and sustain student learning programs and services and improve institutional effectiveness and that it manages its financial affairs with integrity. However, the team confirmed that the College is still working on developing long-range plans and has not begun integrating its long-term plans with its resource allocation process to ensure long-term financial stability. The College receives the majority of its funding from local property taxes, which exceed the amount the College would receive from the State funding formula, and is thus more stable because it is not subject to fluctuations in enrollment and State income and sales tax revenues. Changes in the College's budget development practices have resulted in some improvement in the College's financial stability. However, evidence and interviews confirmed that the College has not developed the Facilities and Technology Master Plans to identify the short-term and long-term needs of the College and that the College budget process does not include long-term planning to meet College future needs and goals. While the College meets the first part of the Standard, the team saw no evidence that the institution plans and manages its financial affairs in a manner that ensures long-term financial stability. (III.D.1)

The College's mission and goals are the foundation for financial planning. However, the team found that financial planning is not integrated with all institutional planning. The College has drafted an Educational Master Plan (EMP), which identifies Infrastructure and Fiscal Sustainability as one of the five strategic priorities. Following Board approval of the EMP in May 2024, the EMP strategic priorities will be used to inform the development of the Facilities Master Plan (FMP) and the Technology Master Plan (TMP). The EMP, FMP, and TMP should then be used to guide short-term and long-term financial plans. The College plans to develop the FMP and TMP during the 2024-2025 academic year.

The College has policies and procedures to ensure sound financial practices and financial stability. Administrative Procedure 6200 was developed to describe how to implement and comply with BP 6200. AP 6250 was changed to increase the minimum reserves from 5% to two months of general

operating expenses (nearly 17%) to support long-term fiscal stability. It has also implemented operational procedures to closely monitor the revenue and expenses in the current year, as well as forecast revenue and expenses for future years, with regular updates to the governing board and constituency groups. As noted in College Requirement 3, the College contracted for a Total Cost of Ownership Report and analysis template to inform resource needs and allocations for facilities and technology but has not completed the analysis, used it to inform long-term planning, or to inform resource allocation. (III.D.2)

The College clearly defines and follows its guidelines and processes for financial planning and budget development, with all constituencies having appropriate opportunities to participate in the development of institutional plans and budgets. Administrative Procedures (APs) to guide Budget Preparation (6200), Budget Management (6250) and Fiscal Management (6300) were added or revised to increase definition and clarity and ensure compliance with Board Policies and financial goals. AP 6300 was revised to include the Planning and Budget Committee as a stakeholder group that would be regularly apprised of the College's financial status and a reporting calendar was incorporated into the AP. In addition to revisions to APs and updating its institutional plans (EMP, FMP, TMP), the College has revised its annual planning and resource allocation process, improving the effectiveness, documentation, and communication of the process and results. (III.D.3)

Institutional planning reflects a realistic assessment of financial resource availability, development of financial resources, partnerships, and expenditure requirements. The College's primary funding source is local property taxes, which are more stable and predictable than other state revenues. Projections of property tax revenues are provided by the County Treasurer's office, based on realistic assessment of tax revenues as indicated by the consistency between the budgeted and actual revenues. The College provides monthly budget updates to the board, which compare multiple years of actual expenses with the current year budget and actual expenses. Whereas in 2020-21 actual expenses exceeded the budgeted appropriations, the actual expenses in subsequent years are less than was budgeted, resulting in surpluses that increased the reserves, exemplifying more conservative budget practices. (III.D.4)

Conclusion:

The College has not satisfied the requirement. Of the four Standards identified for compliance, the College has corrected the deficiencies and now meets Standards III.D.3 and III.D.4. The College does not meet Standards III.D.1 and III.D.2.

Standards IV.A.1, IV.A.2, IV.A.3, and IV.A.5 (College Requirement 5):

In order to meet the Standards, the Commission requires that decision-making roles and processes throughout the institution be clarified and clearly defined to ensure all constituencies have shared understanding for appropriate participation.

Findings and Evidence:

The team found that the College has done a significant amount of work to clearly define decision-making roles and processes throughout the institution and now meets the requirement. The College updated its AP 2410 Board Policy and Administrative Procedure to more clearly define the

appropriate pathways for institutional stakeholders to participate in the development and review of board policies and administrative procedures. The College also developed a Governance Handbook to provide guidance and information to all stakeholders about governance roles and responsibilities for each constituency, and this has been made available on the website. To ensure a more comprehensive review process for decisions and planning, the president created an Extended Cabinet by adding constituency and bargaining unit leaders to share information. (IV.A.1)

Several improvements have been made to bring the College into compliance with Standards IV.A.2 and IV.A.3. The College revised AP 2410 and AP 2510 to clarify decision-making roles and strengthen communication, and in addition created a Governance Handbook that seeks to further clarify “roles of constituents in governance and decision-making, types of groups engaged in governance and decision-making, roles of committee members, and descriptions of District and Academic Senate committees.” The Handbook includes membership for district committees, all of which include student representation. This work completed, campus committees were alerted to their roles in and responsibilities for reviewing and revising board policies and procedures, and ongoing training in campus governance has been offered for all constituencies. The Council of Presidents is meeting regularly, and to provide additional avenues for feedback on decisions from all constituencies and improve transparency, the president restructured the Extended Cabinet to include faculty, classified professionals, and students. (IV.A.2, IV.A.3)

In its shared review and revision of core governance and planning policies and administrative procedures to clarify authority, roles, and responsibilities for their review and maintenance (AP 2410, AP 2510, AP 3250), in its cooperative development of the Governance Handbook, and in its expansion of the Extended Cabinet to include all constituencies, the College has provided evidence not only of stronger, clearer governance policies and structures, but also of a functioning culture of consultation and decision-making. These changes address the deficiencies observed within the Peer Review Team Report. (IV.A.5)

Conclusion:

The College has addressed the requirement, corrected the deficiencies, and now meets Standards IV.A.1, IV.A.2, IV.A.3, and IV.A.5.

Standard IV.C.12 (College Requirement 6):

In order to meet the Standards, the Commission requires that the Board delegate full responsibility and authority to the CEO without Board interference.

Findings and Evidence:

The team found that Napa Valley College embraced the standard and used the recommendation to make significant improvements to support the Board in delegating full responsibility and authority to the CEO without Board interference. The College provided several training opportunities for the Board to help them understand their role versus the role of the president. The Board has implemented a twice-annual Board Retreat cycle to provide an opportunity for the trustees to focus on Board-level goals. The president has worked closely with the Board as a group, with individual trustees, and with faculty to help identify appropriate channels of communication to provide timely information to the Board, such as regular Board reports and weekly written updates by the president.

The College has also worked to clarify roles and expectations among members of the campus community. The College has updated several Board Policies, updated email group lists, and revised committee membership to help normalize relationships, roles, and behaviors.

The team reviewed a variety of evidence, including sample Board meeting agendas, Board Policies, weekly updates from the President to the Board of Trustees, and College committee meeting notes.

Conclusion:

The College has addressed the requirement, corrected the deficiencies, and now meets Standard IV.C.12.