

January 16, 2024

Dr. David Martin  
Chancellor  
City College of San Francisco  
50 Frida Kahlo Way  
San Francisco, CA 94112

Dear Dr. Martin:

The Accrediting Commission for Community and Junior Colleges, at its meeting January 10 - 11, 2024, reviewed the Institutional Self-Evaluation Report (ISER) and evidentiary materials submitted by City College of San Francisco. The Commission also considered the Peer Review Team Report (Team Report) prepared by the peer review team that conducted its site visit to the College October 2 - 4, 2023.

The purpose of this review was to determine whether the College continues to meet ACCJC's Eligibility Requirements, Commission Policies, and Accreditation Standards (hereinafter, the Standards). Upon consideration of the written information noted above, the Commission acted to **Issue Warning** and **require a Follow-Up Report<sup>1</sup>, due no later than March 1, 2025**, followed by a visit from a peer review team.

The accredited status of the institution continues during the warning period.

#### Compliance Requirements

The Commission determined that the College must demonstrate compliance with the following Standards, as identified in the requirements below. This demonstration must be addressed in the required Follow-Up Report.

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<sup>1</sup> Institutions preparing and submitting Midterm Reports, Follow-up Reports, Special Reports, or Teach-out Plans/Agreements to the Commission should review the Accreditation Handbook and applicable report template available on the ACCJC website at <https://accjc.org/accreditation-handbook-and-report-templates/>.

**Standard III.D.11 (College Requirement 1):** In order to meet the Standard, the Commission requires the Governing Board consider the College's long-range fiscal implications when making financial decisions in order to assure financial stability.

**Standard IV.C.7 (College Requirement 2):** In order to meet the Standard, the Commission requires that the Governing Board act in a manner consistent with its policies and bylaws.

**Standard IV.C.12 (College Requirement 3):** In order to meet the Standard, the Commission requires that the Governing Board allow the Chancellor to implement and administer Board policies without Board interference.

In accordance with federal regulations and the *Policy on Commission Actions on Institutions*, compliance requirements must be addressed and the institution must demonstrate that it aligns with Standards within three years, by January 2027. If the institution cannot document that it has come into compliance within the designated period, the Commission will take adverse action.

#### Recommendations for Improving Institutional Effectiveness

The Peer Review Team Report noted Recommendations 4 and 5 for improving institutional effectiveness. Improvement recommendations do not identify current areas of deficiency in institutional practice, but consistent with its mission to foster continuous improvement through the peer review process, the Commission encourages institutions to give serious consideration to these recommendations and the advice contained in the Peer Review Team Report. In the Midterm Report, the College will include actions taken in response to the improvement recommendations.

#### Next Steps

The Peer Review Team Report provides details of the peer review team's findings, including areas of noteworthy practice. The guidance and recommendations contained in the Peer Review Team Report represent the best advice of the team at the time of the visit but may not describe all that is necessary for the college to improve or to come into compliance. A final copy of the Peer Review Team Report is attached.

The Commission requires that you disseminate the ISER, the Peer Review Team Report, and this letter to all campus constituencies and the public by placing copies on the College website within seven business days of your receipt. Please note that in response to public interest in accreditation, the Commission requires institutions to post current accreditation information on a Web page no more than one click from the institution's home page. In keeping with ACCJC policy, the Commission action will also be posted on the ACCJC website within 30 days of the date of the Commission's action.

On behalf of the Commission, we wish to express appreciation for the diligent work and thoughtful reflection that City College of San Francisco undertook to prepare for this review.

These efforts confirm that peer review can serve the multiple constituencies of higher education by both ensuring and encouraging institutional quality and effectiveness.

If you have any questions about this letter or the Commission's action, please feel free to contact Dr. Mac Powell or the vice president assigned as liaison to your institution.

Sincerely,



Mac Powell, MBA, Ph.D.  
President



Lori Gaskin, Ph.D.  
Chair

Cc: Ms. Kristin Charles, Accreditation Liaison Officer

## **PEER REVIEW TEAM REPORT**

City College of San Francisco  
50 Frida Kahlo Way  
San Francisco, CA 94112

This report represents the findings of the Peer Review Team that conducted a focused site visit to City College of San Francisco from October 2, 2023 to October 4, 2023. The Commission acted on the accredited status of the institution during its January 2024 meeting and this team report must be reviewed in conjunction with the Commission's Action letter.

Erika Endrijonas, Ph.D., Team Chair

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Peer Review Team Roster  
FOCUSED SITE VISIT**

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Cuesta College  
Assistant Superintendent/Vice President, Administrative Services

**ACCJC STAFF LIAISON**

Dr. Kevin Bontenbal  
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## Summary of Focused Site Visit

INSTITUTION: City College of San Francisco

DATES OF VISIT: October 2-4, 2023

TEAM CHAIR: Erika Endrijonas, Ph.D.

This Peer Review Team Report is based on the formative and summative components of the comprehensive peer review process. In March 2023, the team conducted the Team ISER Review (formative component) to identify where the college meets Standards and to identify areas of attention for the Focused Site Visit (summative component) by providing Core Inquiries that the team pursued to validate compliance, improvement, or areas of excellence. The Core Inquiries are attached to this report.

A five-member peer review team conducted a Focused Site Visit to City College of San Francisco October 2-4, 2023, 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 arranged the Focused Site Visit details with the College through email exchanges with the Accreditation Liaison Officer in July, August, and September, and in phone conversations with the Chancellor in August and September to both discuss updates since the Team ISER Review and to plan for the Focused Site Visit. During the Focused Site Visit, team members met with approximately 10 faculty, administrators, classified staff, and students in formal meetings, group interviews, and individual interviews. Team members met with each trustee from the College and watched at least 8 board meetings. The team held one open forum, which was well attended and provided the College community and others with the opportunity 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 for ensuring a smooth and collegial process.

## **Major Findings and Recommendations of the Peer Review Team Report**

### **Recommendations to Meet Standards:**

**Recommendation 1: In order to meet the Standard, the Team recommends the Governing Board consider the College's long-range fiscal implications when making financial decisions in order to assure financial stability (III.D.11)**

**Recommendation 2: In order to meet the Standard, the Team recommends that the Governing Board act in a manner consistent with its policies and bylaws (IV.C.7).**

**Recommendation 3: In order to meet the Standard, the Team recommends that the Governing Board allow the Chancellor to implement and administer Board policies without Board interference (IV.C.12).**

### **Recommendations to Improve Quality:**

**Recommendation 4: In order to increase institutional effectiveness, the Team recommends the College continue to prioritize adequate resources to support a safe and healthful learning environment at all of its operating sites (III.B.1).**

**Recommendation 5: In order to increase institutional effectiveness, the Team recommends that the final budget adopted by the Governing Board that is made available to the public is comprehensive and accurate (III.D.6).**

## Introduction

City College of San Francisco (CCSF) was founded in 1935 to serve the academic and vocational needs of students in the San Francisco Unified School District (SFUSD). CCSF began with an enrollment of 1074 and 74 faculty members and soon was offering classes at 22 different sites. The current Ocean Campus site on 56 acres was identified in 1937 and the Science Building opened in 1940, with the majority of buildings following in the 1950s and 1960s. The San Francisco Community College District separated from SFUSD in 1970 and became City College of San Francisco in 1990 when the credit and non-credit programs were united under a single entity.

CCSF has expanded its footprint across the city through four different bond measures totaling \$491 million since 1997, with new buildings and renovations at the Ocean campus and five additional Centers.

In 2016, City College of San Francisco partnered with the City and County of San Francisco to develop “FreeCity,” which provides all San Francisco residents with free tuition and/or grants, a pre-cursor to the AB 19 California Promise and the use of “completion grants” to incentivize students to enroll full-time. The Focused Site Visiting Team was quite impressed with the College’s welcoming environment and passion for meeting the needs of students through their Guided Pathways and Student Equity and Achievement efforts.

# Eligibility Requirements

## 1. Authority

City College of San Francisco operates as a two-year community college under the authority of the State of California, the California Community Colleges' Board of Governors, and the duly elected members of the Board of Trustees of the San Francisco Community College District.

The College meets the Eligibility Requirement.

## 2. Operational Status

City College of San Francisco currently serves 25,377 credit students, 65% of whom have indicated earning a certificate or degree as a goal, while the remainder are seeking professional or personal development. CCSF also serves an estimated 12,500 non-credit students, although the actual number is unclear due to COVID attendance accounting challenges.

The College meets the Eligibility Requirement.

## 3. Degrees

The College offers 121 Associate Degrees, including 36 Associate Degrees for Transfer and 179 credit Career and Technical Certificates of Achievement approved by the California Community Chancellor's Office, and 41 locally-approved credit Certificates of Accomplishment. CCSF's non-credit offerings include 37 certificates and a high school diploma program.

The College meets the Eligibility requirement.

## 4. Chief Executive Officer

The Board of Trustees appointed the current CEO, known locally as the Chancellor, in September 2021. The Chancellor serves as the non-voting Secretary to the Board of Trustees and his office is located at CCSF's Ocean Campus. Board Policies exist that define the delegation of authority to administer the Board's Policies to the CEO.

The College meets the Eligibility Requirement.

## **5. Financial Accountability**

City College of San Francisco undergoes annual audits, conducted by an external independent certified public accounting agency, of all financial records. Audit summaries are certified, and all explanations of findings are documented and addressed by the College as appropriate. The audit is made available to the public and is presented annually to the Governing Board.

The College meets the Eligibility Requirement.

## 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 <i>Commission 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:** CCSF sufficiently and proficiently meets institutional compliance by explicitly publishing the public notification for all matters concerning the Standards required.

**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:** Based on the evidence provided, CCSF has defined institution-set standards and stretch goals. Data is analyzed for use in communicating and utilizing the results regarding achievement of those standards and goals.

**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:** Based on the evidence provided, the College demonstrates compliance with the Commission policy on Credit Hour, Clock Hour, and the Academic Year.



## **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:** There is comprehensive transfer information available to the public that includes policies for transfer, criteria for accepting transfer credit, policies and agreements with four-year institutions, as well as policies for credit for prior learning.

## Distance Education and Correspondence Education

### Evaluation Items:

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

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.
	The college does not offer Distance Education or Correspondence Education.

**Narrative:** The Team has reviewed a random sampling of online courses as well as evidence on technology infrastructure and has verified the College meets the regulations for distance education. The College does not offer correspondence courses.

**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 <i>Commission 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.
	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 that policies for student complaints and posting of complaints processes are in place. The Team reviewed the process for student complaints currently in use,

in addition to the impending implementation of a software solution to improve the student complaint process for students and College staff and faculty.

**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 <i>Commission 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:** CCSF produces a print and online catalog that contains all required elements, including appropriately detailed information about the College’s programs, locations, and policies.

**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)
NA	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)
NA	If applicable, the institution's student loan default rates are within the acceptable range defined by ED. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range. (Standard III.D.15)
NA	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 operates in accordance and is compliant with Title IV.

## Standard I

### Mission, Academic Quality and Institutional Effectiveness

#### I.A. Mission

##### General Observations:

City College of San Francisco (CCSF) demonstrates its commitment to students through its mission, which articulates its available educational opportunities based on identified student and community needs with a high level of integrity and transparency. The mission is reviewed on a regular cycle, updated, approved by the Board of Trustees, and communicated widely. CCSF aligns its programs, services, and resources toward its mission with a thorough review of the programs and planning, and the communities it serves. The college uses data systematically to evaluate its progress towards meeting its goals, develops plans for improvement, and assesses its effectiveness at achieving those goals as evident in documents such as Program Reviews, the Facilities Master Plan, and the Student Equity Plan. Their Integrated Planning Cycle illustrates the College's process of reviewing and assessing its goals of meeting their students' and community's needs. Processes are in place to assess and improve academic quality with a focus on equity as well as provide evidence of institutional integrity.

##### Findings and Evidence:

CCSF's mission supports its intended student population in their pursuit of educational, career, or personal development goals by offering associate degrees in arts, science, and associate degrees for transfer along with certificates in career and technical education, and non-credit coursework. The College demonstrates its commitment to student learning and achievement through its assessment of skills, knowledge, and behaviors acquired by students. The ISER narrative is clear, concise, and the supporting evidence is well documented. (I.A.1, ER 6)

CCSF uses institutional data, local service area data, and student/program/institutional outcome data to determine its effectiveness in accomplishing its mission. The College also reviews data through its program review, strategic planning, and educational master planning processes to identify problem areas and, in turn, to develop institutional priorities along with goals and objectives to meet the diverse educational needs of its students. (I.A.2)

CCSF aligns its programs and services with its mission through its annual program review and program assessment processes. All planning and resource allocation decisions go through a planning cycle that includes the Institutional Planning Committee, the Budget Committee, Executive Cabinet, and the Chancellor, with multiple checkpoints for mission alignment. The participatory governance process involves collegial consultation that is transparent with a feedback loop that is linked to planning, showing the institution's maturity. (I.A.3)

The mission statement is widely published via the CCSF website and the catalog and is posted in high-visibility areas throughout the District. The Executive Cabinet meets with all new hires in a mixed employee group session to introduce them to the institution's values, purpose, intended student population, and offerings. The current mission statement was affirmed by the Board of Trustees in Spring 2017 based on a review of data and community input. (I.A.4, ER 6)

Conclusions:

The College meets the Standard.

## **I.B. Assuring Academic Quality and Institutional Effectiveness**

General Observations:

CCSF prioritizes student learning, student achievement, and institutional effectiveness with an emphasis on diversity, equity, inclusion, anti-racism, academic quality, and continuous improvement. The institution ensures academic quality, equity, and institutional effectiveness through a variety of means including engaging in sustained and substantive dialog, defining and assessing student learning outcomes for both instructional programs and learning support services, and establishing and measuring progress toward institution-set standards for student achievement. In addition, program reviews, planning, and resource allocation are integrated into a comprehensive process that supports the College mission and improvement of institutional effectiveness by identifying needs and allocating resources toward addressing those needs.

Findings and Evidence:

CCSF defines learning outcomes for all courses, programs, and academic and support services. Faculty regularly assess outcomes and use the results of assessment for program improvement. The College engages in substantive and sustained college-wide dialog about student learning, student achievement, and institutional effectiveness with an emphasis on diversity, equity, inclusion, anti-racism, academic quality, and continuous improvement. Committees such as "Re-imagining the Student Experience" (RiSE) that focus on Guided Pathways efforts and "Equitable Access to Services Emergency" (EASE) were designed to develop strategies to increase students' success by reviewing institutional metrics and identifying needs. The College promotes opportunities for conversations in multiple venues that create participation from constituents across the College. One opportunity for employees is the "Equity Roadshow" which invites departments and programs to engage in dialog about disaggregated college-, department-, and course-level student success data. The Office of Student Equity hosts Equity Roundtables that seek input from all stakeholders. The College continually seeks ways to incorporate students into college-wide conversations. Venues include program review, participatory governance, professional development, and a variety of equity initiatives. (1.B.1)

CCSF defines learning outcomes for all courses, programs, and academic and support services. The College has established institution-set standards for student achievement appropriate to its mission, and it maintains and uses these standards. The College expressed interest in deepening its use of institution-set standards and accompanying stretch goals through explicit

and intentional incorporation of diversity, equity, inclusion, belonging, and anti-racism. (1B.2, I.B.3, ER 11)

Faculty regularly assess outcomes and use the results of assessment for program improvement. Like their interest in deepening its use of institution-set standards and stretch goals, the College continues to seek ways to further integrate the use of assessment findings into institutional processes including, for example, program review and professional development, and in which all processes intentionally center diverse, equitable, inclusive, and anti-racist practices. (1.B.4)

The College integrates disaggregated data on student achievement and learning outcomes into key processes of reflection and decision-making, including Program Review and the Student Equity and Achievement (SEA) Plan. The College uses achievement data to plan for and monitor specific actions to address gaps, including those implemented under the SEA Plan. Review of disaggregated student learning outcome data has influenced goal setting and requests for resources at the departmental level. The College has sought ways to better understand and utilize disaggregated SLO data to promote diversity, equity, inclusion, belonging, and anti-racism. (I.B.5, I.B.6)

It is observed, acknowledged, and appreciated through college visitation and interviews, that a standardized schedule has begun to assist the college in managing and reviewing policies and procedures that follow an articulated, inclusive process. Evaluation of governance processes and program review has led to system improvements to better support and continually improve institutional effectiveness and academic quality. (I.B.7)

In an effort to centralize and communicate institutional assessment and evaluation, data and analysis is posted on the College's Institutional Metrics Web page which invites reflection on institutional preparedness for student success. The results are also used in setting appropriate institutional priorities, both longer-term priorities articulated through published college-wide plans and annual priorities identified through the process of setting Board Goals. The College plans to continue expanding the information presented. (I.B.8)

The College's system for evaluation and planning incorporates these key assessment- and data-informed components such as the Comprehensive Program Review, annual planning and resource allocation, and long-range plans. The College has systematic planning cycles for annual and long-range plans as noted in the College's integrated planning cycle. The cycles integrate evaluation, program planning, institutional planning, in resource allocation. The College regularly reviews and updates written procedures that define roles and responsibilities and calendars that outline timelines. (I.B.9, ER 19)

#### Conclusions:

The College meets the Standard.



## **I.C. Institutional Integrity**

### General Observations:

CCSF demonstrates integrity in its policies, information, and communications. College personnel and Board members behave ethically in carrying out their responsibilities. The College identified a need to clarify website responsibilities and institute a regular, centralized review of content. As such, they have created an improvement plan. The College notes that it has structures and processes in place for reviewing board policies and administrative procedures, but maintaining a five-year review cycle has been challenging, particularly given senior leadership transitions over the past few years. However, they have worked to standardize those processes. While the College states that their catalog is “precise, accurate, and current,” and that may be true for the online version, it is difficult to achieve in the printed version.

### Findings and Evidence:

The College provides clarity, accuracy, and integrity of information related to its mission and vision, learning outcomes, educational programs, and student support services provided to students and prospective students, personnel, and all other individuals and organizations affiliated with the College. The Mission and Vision statements are available in multiple locations including the College’s website and catalog. Student Learning Outcomes (SLOs) are reviewed by the Curriculum committee at least once every six years and appear on all course outlines and syllabi. The online class schedule links to the course outline of record so that students can view the course SLOs when searching and registering for classes. Information about its educational programs and student support services is available in the print and online versions of its catalog and on its website. As noted in the ISER, while individual departments and offices of the College ensure that website content is clear and accurate, the College acknowledges a need to institute a regular, centralized review of content to ensure website information is accurate and presented in an inclusive and culturally responsive way. (I.C.1, ER 20)

The College catalog contains all of the required elements and updates to the catalog are published annually online and in print. (I.C.2, ER 20)

CCSF documents assessment of student learning and evaluation of student achievement which communicate matters of academic quality. The College’s Outcomes and Assessment webpage provides access to assessment data and reports that include course section-level outcomes, Institutional Learning Outcomes (ILOs), and General Education Learning Outcomes (GELOs). Evaluation of student achievement data, including student equity, workforce and adult education metrics along with the ACCJC Annual report, are posted on the College’s Accreditation webpage. The College acknowledges that information needs to be more accessible with a link to the Institutional Metrics webpage on the College website home page; the link now appears under “Public Information.” (I.C.3, ER 19)

CCSF describes its certificates and degrees in alignment with ACCJC accreditation standards. A complete listing of all certificates and degrees, including expected program learning outcomes, is available in the online and print catalog. Online and print program descriptions include

course sequences, units or credit hours, prerequisites, expected learning outcomes, and admission requirements. (I.C.4)

Although CCSF has structures and processes in place for reviewing board policies and administrative procedures, the College has not kept up with a five-year review cycle given the senior leadership turnover. The College addressed this issue by developing a BP/AP Review and Accountability Schedule. Their concern over sustaining this process was noted in the ISER, and through responses to the Core Inquiries and interviews, the College reported that it is moving to an eight-year review. The Team suggests that the College consider adding review/revision of BPs/APs as a standing Board agenda item to facilitate this rotating 8-year review cycle. (I.C.5)

Both in their catalog and website, CCSF provides information regarding the cost of attendance to current and prospective students. While the College states that all such information is available in the printed and online versions of the catalog, textbook costs and instructional materials are not. Evidence was provided that the costs of textbooks are available via the online CCSF Bookstore-Textbook Search, but there was no evidence of where the cost of other instructional materials is located. The Admissions and Registration website lists tuition and fees and the Financial Aid Office website provides information for students regarding the total cost of education. Although not addressed, printed materials are only as accurate as the date they were prepared. The College might consider adding a notation to the catalog that students should refer to the College's website for the most up-to-date cost of attendance in service of the College's goal of providing accurate and complete information. (I.C.6)

The College publishes Governing Board policies on academic freedom and responsibility. The Board policy is present in the Collective Bargaining Agreement, the College catalog, and the Faculty Handbook. (I.C.7, ER 13)

CCSF has established and published policies and procedures that promote honesty, responsibility and academic integrity. Board policies exist for an institutional code of ethics (BP 1.18) and a code of student conduct (BP 5.16). Information for employees exists in the Classified Staff and Faculty Handbooks. Such information is available to students, both in the College catalog and online, at the Office of Student Conduct and Discipline webpage. (I.C.8)

CCSF has established clear expectations that faculty distinguish between personal conviction and professionally accepted views. Board policies, the Collective Bargaining Agreement, the College catalog, and the Faculty Handbook communicate faculty's responsibility to present information fairly and objectively, while supporting the right of faculty to express diverse viewpoints. Faculty evaluations, which include student evaluations, and the student complaint process provide feedback to faculty to ensure this standard is met in their teaching. (I.C.9)

The College provides clear, prior notice regarding its codes of conduct through its employee handbooks, the College Rules and Regulations section of the College catalog, and on the Office of Student Conduct and Discipline website, as noted in Standard I.C.8. As a public institution, the College does not promote nor seek to limit specific worldviews. (I.C.10)

As CCSF does not operate in foreign locations, Standard I.C.11 is not applicable. (I.C.11)

Through Board policy and actions, CCSF acts with integrity in its relations with the Accrediting Commission (ER 21) and complies with all ACCJC Eligibility Requirements, Accreditation Standards, and Commission Policies. The College has provided evidence that it follows the guidelines and requirements for public disclosure, institutional reporting, team visits, and prior approval of substantive changes. When directed to act by the Commission, the College meets requirements within the timeframe set by the Commission and discloses information required by the Commission to carry out its accrediting responsibilities. (I.C.12, ER 21)

CCSF demonstrates integrity, honesty, and consistency in its communications with external agencies and complies with the policies of those agencies. Such agencies include the California Community Colleges Chancellor's Office (CCCCO), the Accrediting Commission for Community and Junior Colleges (ACCJC), and its many programmatic accreditors such as the Joint Review Committee on Education in Radiologic Technology (JRCERT), the Medical Assisting Education Review Board (MAERB), and the Commission on Dental Accreditation (CODA). (I.C.13, ER 21)

The College has demonstrated its commitment to high quality education, student achievement, student learning, and diversity, equity, inclusion, and anti-racism. This commitment is central to their mission and is reflected in their Board goals and college priorities. A public institution of higher learning, CCSF has no financial investors, external interests, and is not part of a parent organization. (I.C.14)

Conclusions:

The College meets the Standard.

## Standard II

### Student Learning Programs and Support Services

#### II.A. Instructional Programs

##### General Observations:

City College of San Francisco uses various modalities of instruction in online and hybrid credit and non-credit classes to serve their students. More than 300 degrees and certificates are offered to meet a variety of student educational goals and needs. Courses and programs are regularly evaluated and kept up to date through a variety of processes, including regular curriculum review, program review, advisory committee input, and a strong learning outcomes process. The team particularly appreciated the College's strong outcomes processes, alignment, and support both in the instructional area and in areas that support instruction.

##### Findings and Evidence:

City College of San Francisco's wide offering of instructional programs is consistent with the District's mission and is appropriate to higher education. The Team reviewed sample transfer and CTE programs from the CCSF Catalog and found that CCSF's programs reflect the District's broad mission. Processes for new and existing curriculum and programs are consistent and rigorous and include consideration of student attainment. CTE advisory committees participate in curriculum review, and student attainment of SLOs is enhanced by a consideration of aggregate data as part of the regular review process. Departments identify the percentage of courses that can be completed via distance education, and programs that can be completed fully online are clearly identified via the online portal. (II.A.1, ER 9, ER 11)

At the CCSF Curriculum Committee, faculty regularly discuss and ensure the content and methods of instruction meet generally accepted academic and professional standards and expectations. Curriculum Committee members receive regular training and use curriculum review to exercise collective ownership over the quality and appropriateness of their curriculum. The Team reviewed annual reports, which include an annual assessment of curriculum for currency. These annual reports are, in turn, tied to 3-year program reviews. Curriculum and program review processes include a consideration of aggregate assessment of SLO data, with SLO coordinators working with Curriculum Committee members for this analysis. The Team also reviewed minutes from two CTE advisory committees and found that these groups, composed of faculty members and business/industry professionals from the field of study, reviewed and discussed curricular needs and student achievement and preparation for employment. CCSF also demonstrates that part-time faculty participate in professional development opportunities through their flex day activities. (II.A.2)

CCSF has a robust process for regular assessment of learning outcomes for courses and degrees. Each course's learning outcomes are reviewed each term, and the College has an

average 90% course-level assessment rate. Courses may not undergo curriculum review unless an aggregate data report is completed 18 months prior to review, and this holds true for program reviews as well. The College employs CurriQūnet and an SLO Coordinator to facilitate this. A random sample review of course syllabi and course outlines of record demonstrates evidence of student learning outcomes being communicated to faculty and students through these key documents. Systems are in place to ensure syllabi themselves go through a regular review process, and the Academic Senate agreed that Canvas would serve as the syllabi repository to facilitate audits to ensure SLO's are present in all course syllabi. (II.A.3)

CCSF's catalog clearly labels pre-collegiate level curriculum, noncredit curriculum, degree-applicable credit courses, and non-degree applicable credit courses. This is reinforced by the class schedule. The Team analyzed a class schedule page for one discipline and found clear labeling for each course type. CCSF has Board policies and internal Curriculum Committee policies that further reinforce the differentiations and standards set for each course type. Starting in 2018, in response to AB 705, the College implemented data-based measures in math and English to support student success in college-level curriculum. Clear supports, including learning communities, counseling, tutoring, and many specialized programs such as Puente are in place to support students succeeding and advancing in college-level curriculum. (II.A.4)

CCSF's course catalog provides evidence that all associate-level degrees are in alignment with standards common to American higher education. CCSF's programs are at the expected associate level. All degrees require a minimum of 60 semester units. Board policies clearly lay out program standards. CCSF provides regular training to Curriculum Committee members on the requirements of Title 5 and guidelines from the statewide Program and Course Approval Handbook (PCAH). A robust program learning outcomes mapping process helps address issues of alignment with College and external licensing standards, and General Education course level learning outcomes, and GE learning outcomes help align GE courses with various standards. The District employs an articulation officer who ensures compliance with all applicable standards. (II.A.5, ER 12)

CCSF provides its students with schedule options that allow for the completion of certificates and degree programs within a timeframe that is consistent with established expectations for higher education. The team reviewed CCSF's Schedule of Classes from Fall 2022 and found in multiple-section, high-need courses such as English 1A, sections were offered in such a way as to give students a variety of in-person and remote options that fit a wide variety of student schedules. This includes evening classes in many cases. Moreover, the schedule of classes appears easy to navigate in terms of choosing a preferred class schedule throughout the week. (II.A.6, ER 9)

CCSF offers courses in a variety of modalities and employs teaching methodologies and learning support services that reflect the diverse and changing needs of their student population. CCSF is responsive to student needs in a variety of ways. Course review procedures ask faculty reviewers how the course meets various equity and/or learning needs. The College issued surveys at the height of the pandemic to assess student scheduling and online learning needs.

Recently, the College expanded its offerings of short-term job training courses. The College offers 24/7 NetTutor online tutoring to all of their students and provides other supports as well. Moreover, the Equitable Access to Services Evaluation (EASE) Taskforce regularly assesses how students access learning support services at each of the College's centers. (II.A.7)

CCSF moved away from pre-transfer math and English courses, and along with this, from placement exams. Credit and noncredit ESL students have the option to use a placement tool to identify courses appropriate for their learning level. This optional tool is not validated. However, the department exam used to promote students in noncredit classes to higher levels is externally validated. Moreover, the Curriculum Committee requires as part of the curriculum review process that any department-wide exams be validated for effectiveness, bias, and reliability. (II.A.8)

The Team reviewed the Curriculum Handbook directions, Board policies, curriculum review tracking sheets, and course outlines of record and confirmed that CCSF requires all degrees and certificates have program learning outcomes that are, in turn, mapped to course-level outcomes. The Curriculum Committee provides a conversion table for credit hour assignments that is consistent with Federal standards and typical of accepted practices of clock-to-credit hour conversions in higher education for courses, laboratory classes, and worksite learning. The Team also reviewed evidence of alignment between course outcomes and awarding of credit based on attainment of learning outcomes. (II.A.9, ER 10)

CCSF makes available to its students clearly stated transfer-of-credit policies to facilitate the transfer of credits between institutions. These appear in the catalog, and the Team found that the CCSF Articulation Office webpage explains articulation in a student-friendly manner and clearly lists the College's various articulation agreements. The College also employs an articulation officer to develop, maintain, and disseminate these articulation agreements. CCSF's counselors regularly employ C-ID and ASSIST tools to assess prior coursework from other Colleges. Department chairs are consulted for prior coursework that does not have C-ID or ASSIST equivalents. The degree petition form described in the ISER was easy to locate on the College website. (II.A.10, ER 10)

The Team reviewed learning outcomes documentation and found that CCSF includes learning outcomes in communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, and the ability to engage diverse perspectives in addition to program-specific learning outcomes. CCSF documented that their course-level learning outcomes map to their program learning outcomes (PLOs), general education learning outcomes (GELOs), and institutional student learning outcomes (ILOs). These are made appropriate to the program level as part of the curriculum review process as well as advisory committee and program review processes. Board policies support these processes. The College also has a well-developed support system in the form of three SLO coordinators to provide help as well as a comprehensive Outcomes and Assessment page. (II.A.11)

The Team found that CCSF has processes in place to ensure that General Education courses are mapped into ILOs and GELOs. The curriculum process places determination of which courses go in the different General Education patterns in the hands of faculty via the Curriculum Committee. The College's GE philosophy is evident in the GELOs and their link to ILOs, and a formal statement on the College's GE philosophy has been approved by the Senate and will soon become a Board policy. The GELOs are clearly designed to prepare students for participation and acceptance in civil society, and include skills for lifelong learning, application of learning, and a broad comprehension of the development of knowledge, practice, and interpretive approaches in the arts and humanities, the sciences, mathematics, and the social sciences. (II.A.12, ER 12)

CCSF offers degree programs in focused areas of study or inquiry and in established interdisciplinary areas. An analysis of the 2022-23 Catalog shows that the College offers over 120 associate degrees and over 170 certificates (primarily in CTE), with additional certificates of achievement and noncredit certificates. Specialized courses in each program are based around SLOs which are linked to PLOs, which are, in turn, linked to ILOs. The Curriculum Committee has processes in place that ensure all learning outcomes are at the appropriate level of mastery for the course and program. Advisory committees and the program review process provide additional levels of scrutiny of these levels. (II.A.13)

In a variety of ways, CCSF demonstrates that those completing CTE programs can meet the competencies employers require. Advisory committees are in place for these programs; their role in the determination of learning outcomes has been noted previously, and the ISER provides evidence of advisory committee discussions and input. The College regularly participates in the CTE Employment Outcomes Survey (CTEOS) of graduates. This is a good source of data to demonstrate program effectiveness. College personnel ensure programs are regularly reviewed by the local CTE consortium. Additionally, the Team reviewed evidence of programmatic accreditations as further external validation that the College is meeting all applicable standards and preparation for external licensure and certification. (II.A.14)

A review of the catalog indicates that the College makes appropriate arrangements for students to complete their education when core program courses are not offered or are eliminated. The College does the same when programs are eliminated or suspended. The College provided an example of how it followed internal procedures and Board policy when suspending the aviation maintenance program. The report provided showed a thorough analysis of the program, including the funding and staffing challenges. When the decision was made to suspend the program, students were assisted in finishing their degrees at other colleges. The Team also reviewed core course substitution petition language in the catalog. The College uses this petition process to support students trying to complete programs that have had changes in requirements or that otherwise have not offered core courses. (II.A.15)

CCSF regularly evaluates and improves the quality and currency of all instructional through a variety of methods, including a robust learning outcomes assessment process, the curriculum review process, and the program review process. The program review process has two

components: Annual Plans are completed every year and Comprehensive Program Reviews (CPRs) are completed every three years. The Program Review website indicates the scope of the CPRs. It includes consideration of learning outcomes aggregate data, staffing, and funding. CTE programs have additional requirements, including LMI data and advisory committee input. The team reviewed a list of completed program reviews as well as sample completed program reviews and annual plans that linked resource requests to learning outcomes data. (II.A.16)

Conclusions:

The College meets the Standard.

## **II.B. Library and Learning Support Services**

General Observations:

City College of San Francisco provides library and tutoring support to students through two major support structures: Library services and the Learning Assistance Department. The services are comprehensive and are provided at most campus locations as well as virtually. The College utilizes librarians and discipline experts in resource selection, and it coordinates closely with Information Technology to ensure that library and tutoring support technology is functional and up to date. The College regularly surveys stakeholders, including students, on the efficacy of library and learning support services.

Findings and Evidence:

CCSF provides library services at six separate locations. These services include course reserves, media centers, research guides, library workshops and instructions, and, notably, embedded librarians in Canvas courses. The Team reviewed the library's public-facing webpage, which appears comprehensive and includes information about open days/times, options to chat with the librarian, a "talk to a library in your language" that offers an English, Spanish, Chinese, and Vietnamese option, as well as resources and support for faculty. CCSF also has a variety of student services to support diverse needs, including CalWorks and EOPS. Alongside these structures are resources and support for personnel responsible for student learning and support. The Learning Assistance Department (LAD) offers LERN (tutoring theory) courses, workshops, peer and professional tutoring, open-access computer labs, and embedded tutoring. Students may access online tutoring options such as NetTutor through a variety of devices. LAD's public-facing webpage lists programs and services, virtual desk hours, and requests for embedded tutoring. Open-access computer laboratories are available at various locations and provide diverse student accessibility needs. (II.B.1, ER 17)

CCSF library services rely on the subject expertise of librarians and uses the Library Mission Statement and policy to guide processes and the development of library services and collections. The Team noted a Collection Management Team is in place to ensure that Library faculty, in coordination with faculty discipline experts and Information Technology staff, coordinate to make decisions on purchases of materials, equipment, and technology. This process is coordinated with program review and processes for material deselection. The Team reviewed evidence that the CCSF library also benefits from a district-wide technology



replacement plan to ensure timely upgrades to student computers in the library, media centers, and tutoring centers on a five-year cycle. (II.B.2)

CCSF Library services faculty and staff regularly evaluate and improve the quality and currency of all instructional programs through a variety of methods including surveys to student and faculty, self-reflections from embedded librarians, and database trials. Library services also administered a bottleneck survey to identify needed Open Educational Resources (OER). Library staff meet regularly to discuss the quality of services. The Team reviewed the Spring 2020 student satisfaction survey that was administered at the beginning of the pandemic which shows that the library is meeting student needs. The Learning Assistance Department administers regular research briefs and last administered the assessment in 2019. The 2019 assessment shows that the LAD is working collaboratively with various campus groups and the Office of Research to collect data. (II.B.3)

CCSF utilizes a number of external vendors in offering and maintaining services to students, including the CVC-OEI Equity Consortium, Canvas Cloud, STAC, STAR-CA, and NetTutor. Library services include provision of access to subscription databases and other library services, and CCSF is a member of the Community College League of California Library Consortium. The institution takes responsibility for the security, maintenance, and reliability of services. (II.B.4, ER 17)

Conclusion:

The College meets the Standard.

## **II.C. Student Support Services**

General Observations:

City College of San Francisco demonstrates its commitment and support for students through its student support services. The programs, policies, and procedures in place, which are regularly assessed, align with the Mission, and provide for equitable services across all locations and modalities, as demonstrated by the evidence that supports the provision of student support services.

Findings and Evidence:

CCSF regularly evaluates its student support services through the institution's program review cycle, which includes a comprehensive three-year plan as well as annual plans for student support programs. Students are able to access student support services in person and online. The ISER noted that most students reported ease of access to all student services. The Student Services Outcomes workgroup assesses the efficacy of these programs and services in conjunction with the Office of Research. There is a plan in place to link student support services outcomes to institution-wide planning. There is alignment with the College's mission through the ILO: Career and Personal Development. (II.C.1, ER 15)

Student Services Outcomes (SSO) and Service Areas Outcomes (SAO) are in place to assess learning support outcomes for its student population. Service areas assess outcomes every three years. Various assessment plans provided as evidence demonstrate that the services provided help the College to achieve its SSOs and SAOs. The continuous assessment to improve student support programs and services is evident. (II.C.2)

The College provides appropriate, comprehensive, and reliable services to students across all of their locations and delivery methods. At the main Ocean Campus and at each of their Centers, necessary core services are provided. CCSF offers student support services via zoom, email, phone, and through Canvas. Students have access to virtual assistance online or by phone 24/7. Health services are provided onsite as well as through telemedicine. The College has a workgroup, Equitable Access to Success Evaluation (EASE), to evaluate equitable access to the core services offered. Through EASE, a gap was found in services for noncredit students, and the committee noted the importance of collaboration across all sites. The Quality Focus Essay addresses awareness of resources and services available to students and ways to address these challenges. (II.C.3, ER 15)

CCSF has co-curricular programs that contribute to the social and cultural dimensions of the educational experience. These co-curricular programs are facilitated through the Student Activities Office. Oversight of student activities and student government is described in Board policies for student governance, student trustee, and student activities, as well as in comprehensive Associated Students governing documents. The Athletics Program adheres to the policies, procedures, and structures as administered by California Community College Athletic Association (3C2A). Evidence provided in the ISER includes student support services for student-athletes and general information regarding athletics. Compliance with Title IX and institutional control of programs and finances is evident. (II.C.4)

Counseling support is provided to support student development and success in CCSF's many student support programs and services. Counseling faculty attend bi-monthly meetings to keep abreast of new and/or changing information and attend conferences and workshops to remain current in their field. The Counseling program pages show that the various counseling and support programs orient students to their respective programs and to the campus. Evidence provided in the ISER demonstrates that students are advised of relevant academic requirements, including graduation and transfer. (II.C.5)

CCSF has adopted and adheres to admissions policies consistent with its mission. Students are admitted to credit programs based on the requirements for community college enrollment. Evidence shows there is a policy in place for admission, enrollment, and tuition. In addition, there are policies in place for non-credit, dual enrollment, and concurrent enrollment programs. The College provided evidence of engaging departments in Guided Pathway efforts

to develop program maps. The counselors use C-ID and ASSIST to advise students regarding articulation agreements and transfer requirements. (II.C.6, ER 16)

CCCApply is used for admissions, which is centralized through the Community College Technology Center. Credit, noncredit, and international student applications are all submitted through CCCApply. An online application satisfaction survey is administered upon completion of the application. CCSF places all students in transfer level math and English using high school transcript data. Noncredit ESL students use a guided self-placement tool for course placement. (II.C.7)

The College maintains student records permanently, securely, and confidentially in accordance with educational codes regulations. The College uses a variety of multi-level, secure technological solutions to scan, backup, and store records. CCSF adheres to FERPA and HIPAA regulations. District policies are in place for student records and are clearly outlined in the student catalog. (II.C.8)

Conclusions:

The College meets the Standard.

## Standard III

### Resources

#### III.A. Human Resources

##### General Observations:

The faculty, staff, and administrators of City College of San Francisco possess the requisite qualifications and are hired through appropriate processes to ensure the integrity of the educational programs and services provided by the College. The staffing levels of the College are adequate, and policies and procedures clearly articulate the job expectations, a Code of Ethics, and evaluation criteria and timelines for all employee groups. Professional development opportunities are provided to all employee groups as well.

##### Findings and Evidence:

City College of San Francisco's hiring processes and procedures ensure that all employees are qualified and hired through appropriate recruitment processes. Position announcements clearly state job duties and qualifications, and open positions are advertised broadly to ensure a diverse pool of candidates. Equal Employment Opportunity training is included in the orientation provided to search committee members to ensure that the process is fair and equitable to all candidates. (III.A.1)

All faculty hired at CCSF possess the requisite degrees and professional expertise. CCSF's faculty job descriptions include the expectation that they will be discipline experts and participate in curriculum development and student learning outcomes assessment. Candidates who have not earned the state-mandated degrees may apply for equivalency to meet the minimum qualifications. The Team did note that the faculty hiring procedure and handbook had not been updated for many years at the time of the ISER review. (III.A.2, ER 14)

Administrators and classified staff hired at CCSF possess the qualifications necessary to ensure institutional effectiveness and academic quality. Administrators hired reflect state-mandated minimum qualifications and according to Board policies. Sample job descriptions reveal CCSF's expectation that all administrators hired embrace diversity and demonstrate a commitment to serving students. As a member of the City and County of San Francisco's Civil Service Commission, CCSF is a "merit district" where classified job duties are determined by the City and County's Department of Human Resources (DHR), and the more specific college-related position specifications are developed by CCSF's Human Resources Department with approval from the DHR. Job announcements for both administrative and classified recruitments routinely include desirable qualifications that reflect CCSF's values and Mission. (III.A.3)

Human Resources ensures that all employees hired at CCSF either hold degrees earned at institutions accredited by recognized U.S. accrediting agencies or validates degrees earned at foreign institutions through a recognized foreign transcript service. (III.A.4)

The College has policies and procedures in place to ensure the evaluation of all employees at the college, and training is provided to ensure evaluations are conducted appropriately. Evaluations are used to both highlight what employees are doing well but also to identify areas for improvement. The Human Resources Department instituted an electronic system to manage classified and administrative evaluations in 2020, and due to the pandemic, only evaluated some classified staff and altered the evaluation process for administrators. The Team confirmed that the College has completed all outstanding classified and administrator evaluations and is currently up to date. Faculty and Department Chair evaluations are managed by the Office of Instruction, and the pandemic was similarly disruptive to ensuring timely completion of evaluations. Department Chairs are evaluated once per year and tenured faculty are evaluated once every three years. The Team confirmed that while the faculty and chair evaluations are not completely up to date, significant progress has been made. (III.A.6)

CCSF has a sufficient number of full- and part-time, credit and non-credit faculty to ensure the academic quality of the institution and to meet the College's Mission. The College is currently more than 150 full-time faculty above its state-mandated Faculty Obligation Number (FON), which means that more than 75% of instruction at the College is delivered by full-time faculty, which is a statewide goal to ensure instructional quality. The College has appropriate processes in place to prioritize faculty hiring. (III.A.7, ER 14)

Part-time faculty possess the requisite state-mandated minimum qualifications and are hired according to established policies and procedures. Part-time faculty are actively encouraged to attend Professional Flex Development activities even when participating is not required. They are also represented in the Academic Senate and are allowed to serve on hiring committees. (III.A.8)

CCSF employees a sufficient number of classified staff, although the total number of classified employees has been impacted by the pandemic, layoffs, and attrition. As the College continues to adjust to post-pandemic operations and finances, it employs both program review processes and the Vacancy Review Group to determine which positions are mission-critical and should be replaced. The Team noted the planned addition of custodial staff to address campus cleanliness issues. (III.A.9, ER 8)

### **General Observations - Enhanced Fiscal Monitoring**

Five administrative areas of the College – Academic and Institutional Affairs, Chancellor's Office, Finance and Administration, Human Resources, Student Affairs – are staffed by 43

administrative positions. All administrators meet the state-mandated minimum qualifications. While the number of administrative positions is sufficient, the high turnover of administrators means that some areas of the College lack leadership, consistent or otherwise, which could, over time, impact the College's ability to meet its Mission and to ensure institutional quality. The Team recognizes the role of the pandemic and other recent challenges to the College's stability and suggests the Governing Board take steps to remedy the leadership turnover. (III.A.10, ER 8)

CCSF has written personnel policies that are appropriately published and available online. Board policies and administrative procedures exist that meet all Education Code and federal and state requirements. CCSF has negotiated collective bargaining agreements and created employee handbooks that include references to appropriate policies and procedures, and all employees are provided their employee-group handbook at orientation. Information about policies and procedures is provided on the website and training is provided to all employee groups. (III.A.11)

The College's commitment to diversity, equity, inclusion, and belonging is evident through the Board policies and procedures, participatory governance structure, and through their professional development programming. In addition to BP/AP 2.30 (Unlawful Discrimination), BP/AP 2.31 (Harassment), BP/AP 2.32 (Sexual Assault and Other Assaults), BP/AP 2.34 (Gender Diversity and Inclusion), the College's policies include BP/AP 3.02 (Equal Employment Opportunity and Diversity) which informs the College's Equal Employment Opportunity (EEO) Plan. Administered by the Title 5/EEO/ADA Compliance Officer, the EEO Plan is designed to ensure not only that hiring practices are free of bias, but also to investigate allegations of EEO violations. The College's Diversity, Equity, Inclusion, and Belonging participatory governance committee works on college-wide diversity initiatives and helps determine professional development needed to create a bias-free environment for all employees and students. Anti-bias training for hiring committees and the use of a standardized rubric to assess candidates' understanding of diversity, equity, inclusion, accessibility, and anti-racism are two significant ways that CCSF works to diversify its workforce and to ensure an inclusive campus climate. (III.A.12)

Board policy 1.18 (Institutional Code of Ethics) articulates the Board's expectation for ethical behavior by all college employees. Employee Collective Bargaining Agreements, respectively, reflect those expectations and provide definitions of ethics violations and how to address alleged ethics violations. (III.A.13)

CCSF ensures the appropriate provision of Professional Development opportunities through the standing Professional Development Committee (PDC) and a Professional Development Plan that is directly linked to the College's Educational Master Plan. Professional Development Flex Day activities are developed using data from prior years' Flex Day activities by the PDC, which

solicits ideas for themes and proposals for the four Flex Days each academic year. Participant survey data is also used to identify continuous improvement of professional development activities. (III.A.14)

All personnel files are confidential and are housed and secured within the Human Resources department. One personnel file exists for each employee, who may access their own file in accordance with their respective employee handbook. (III.A.15)

Conclusions:

The College meets the Standard.

### **III.B. Physical Resources**

General Observations:

The College assures that it has safe and sufficient physical resources at all locations through planning and investment guided by its Facilities Master Plan (FMP). The buildings are constructed and maintained to ensure access, safety, security, and to provide a healthy learning and working environment. Access to general obligation bond funds (1997, 2001, 2005, 2020) has increased the safety, security, and efficacy of college infrastructure. The annual **program review process identifies facilities and equipment issues linked with the College's** goals and objectives. These issues are addressed along with other requests for funding in the resource allocation process.

Immediate facilities issues are reported to the SchoolDude system, which addresses the safety and security of all College sites. The College utilizes an operational handbook for the purpose of guiding custodial operations and allows reporting of needs through the SchoolDude system. While the College considers total cost of ownership in its facilities planning process, the College has identified a need to reduce its footprint to align staffing and costs with current enrollment needs. Campus safety is provided through the employment of Police Department officers and staff.

Findings and Evidence:

The **college's physical resources are guided by institutional planning, including its Education Master Plan, FMP, and the Five-Year Capital Outlay Plan, and other college planning documents reviewed by the Team.** The safety of facilities is monitored through regular **"walkthrough" inspections and work order requests. Through the college's Facilities Committee, institutional stakeholders have the ability to review and vote on recommendations made by the college's Participatory Governance Council. Further, the Board of Trustees has a Facilities Master Planning and Oversight Committee which allows for input as needed prior to actions at the full Board meetings.**

**The College's annual program review process includes physical resources, providing regular input into campus facilities issues. Evidence of the college's responsiveness to safety concerns included the improvement of the air filtration system during the COVID pandemic. The College has been able to fund improvements through general obligation bonds approved by the voters in 1997, 2001, 2005, and 2020. The bond program is reviewed by a Citizens' Bond Oversight Committee, as required by Proposition 39. Campus safety is provided through the**

employment of the **college's Police Department, which patrols campus sites and provides** safety information to staff and students.

The College has identified goals of moving away from SchoolDude into a more proactive management system and utilizing its bond funding to demolish, modify, and/or renovate facilities to better align with its Facilities Master Plan. Based on employee comments and Team observations, staffing has not been sufficient to properly maintain the college's **main** campus and its five other sites. The 2023-24 budget has authorized the hiring of additional staff, which may help to address the issue. The Team recommends that the College strive to maintain appropriate staffing levels to provide a safe and healthful learning environment at all of its sites. (III.B.1)

**The College's FMP reflects the Institution's mission and is the guiding document for facilities** planning. The FMP is implemented by qualified professionals through the Office of Facilities and Capital Planning with input from the participatory governance process. The College has general obligation bond funds which support the renovation and modernization of facilities pursuant to long-term College plans and capital outlay needs. Implementation of the bond is reviewed by a Citizens' Bond Oversight Committee (CBOC). This helps ensure that the bond proceeds are managed with integrity and are expended for the purposes intended by the **voters. The most recent annual financial and performance audits of the College's bond funds** reviewed by the Team show no concerns, though a finding in the previous year noted concern over a personnel expenditure. Additionally, the College budgeted \$2.5 million in unrestricted general funds in its 2022-23 budget to address scheduled maintenance needs. A similar amount was proposed for this purpose in the 2023-24 budget, but the Governing Board has not yet approved this allocation.

Physical resource planning is integrated within the **college's long-term** and short-term planning, which helps link physical resources to institutional goals. The College utilizes the program review process to allow for input from instruction, student services, and other areas. This helps to inform the upgrades and equipment replacements. The College notes that they are working to educate stakeholders as to when to utilize SchoolDude for immediate needs and when to pursue requests through the program review process. (III.B.2)

The College cites the development of the Facilities Master Plan as a tool for analyzing the condition of its facilities. The College employs specialized consultants to evaluate facilities and grounds when carrying out projects. The College further notes that its current classroom footprint is larger than necessary and that it is working toward consolidating space usage to ensure custodial and public safety staffing efficiency. The College is implementing the ONUMA system to aid this analysis.

The College is currently updating its Custodial Operations Handbook, which should help support efforts to maintain a safe learning environment. (III.B.3)

The College relies upon the institutional goals outlined in the Education Master Plan to drive capital planning in the FMP. The Team found that the FMP includes evidence of linkage **between the institution's educational goals and capital planning through clear tables and** text.



Total Cost of Ownership (TCO) is detailed in a manual reviewed by the Team entitled *Total Cost of Ownership - Facilities Management Standard 1*. The Team found that this document provides a transparent process by which to assess the TCO of capital projects. As noted in III.B.1., the College needs to ensure it has sufficient staffing and resources to maintain all of its sites. (III.B.4)

**Conclusions:**

The College meets the Standard.

Recommendation 4

In order to increase institutional effectiveness, the Team recommends the College continue to prioritize adequate resources to support a safe and healthful learning environment. (III.B.1)

**III.C. Technology Resources**

**General Observations:**

The College has prioritized the integration of the Technology Plan with the Education Master Plan, both of which supports the College’s Mission. Through surveys and assessments, the College has established an equipment replacement cycle and technology services that meet the hardware and software required to properly support the College’s academic and student support programs.

**Findings and Evidence:**

The College’s Information Technology Services (ITS) are integrated with the programmatic needs of all campuses across the district. ITS works closely with the Office of Online Learning and Educational Technology to support Canvas, the College’s Distance Education platform. The College provides standardized hardware and software technology to facilitate ease of support and technological upgrades. Requests for additional technology are part of the annual program review resource requests. The College’s Technology Committee also ensures that student learning and success are a primary component of technology decisions. (III.C.1)

The standardization of the equipment at every CCSF campus ensures that the College can support a viable replacement plan. The Technology Plan, developed with input from campus stakeholders, is comprised of five goals and strategic directions. A participatory governance committee, the Technology Committee, evaluates the technology needs of faculty, staff, and students and makes appropriate recommendations to ensure the College’s technology is updated on a regular basis. The College provides a wide range of technology options and support for students to facilitate student success. (III.C.2)

The College ensures that faculty, staff, administrators, and students have consistent and reliable access to data, voice, and wireless services. The College partners with the City of San Francisco Department of Technology to provide sufficient access to fiber-based wireless services at all CCSF locations. The College’s transition of its application technology services and

data center facilities to a cloud-based solution provides a secure computing environment that is reliable and allows for technology disaster recovery. College employees and students can access cybersecurity information on the College's webpage which also includes cybersecurity training options. (III.C.3)

The College provides training to all employees on a wide range of software products and utilizes the Chancellor's Office Vision Resource Center for additional professional development opportunities. Training options for faculty focus on instructional applications of technology to improve student success; similarly, training on Canvas and other instructional applications is available to students. The College's Professional Development Committee uses survey data to determine the training needs and options for Flex Day activities. (III.C.4)

CCSF Board policies and administrative procedures, such as BP/AP 7.41 (District Use of Computer and Network), BP/AP 8.18 (Information Security Standard), BP/AP 8.10 (Copyright), and BP/AP 6.28 (Student Authentication) articulate the appropriate use of computers and the College network. In concert with the Academic Senate, recommendations regarding online learning and the use of technology were developed by the Office of Online Learning and Educational Technology. Students are informed about how to use the email system safely and according to the established processes. (III.C.5)

Conclusions:

The College meets the Standard.

### **III.D. Financial Resources**

General Observations:

College management of its financial resources is guided by its mission and goals. The College's budget planning and development process is outlined through policies and procedures. The budget planning process provides transparency and allows opportunity for input from college stakeholders, though the College seeks a revision to current policy to allow for more stakeholder input. Policies, procedures, and internal controls are in place to ensure that audit findings are addressed, and financial resources are managed with integrity and comply with relevant regulations and generally accepted accounting principles.

The College provides detailed budget reports to the Board of Trustees, Executive Cabinet, and to the standing Budget Committee for input and review. Additionally, monthly Board Budget and Audit committees assess fiscal conditions and budget development. While the College has adequate financial resources to currently support student learning, the significant decline in enrollment over the past several years will require the college to continually plan and assess its fiscal condition to ensure long-term financial stability.

### Findings and Evidence:

The College's finances support learning programs and services. Internal college budget decisions are considered through a process of program review. The College's financial planning and resource allocation are integrated within its planning processes. A College planning group ensures a coordinated use of restricted funds to support learning programs and goals. The College's integrated planning processes allow for participation from constituent groups across the institution. Additionally, the College pursues external grants to enhance financial support for programs. While the College's 2020-21 annual audit included significant findings, the 2021-22 audit found all of the identified issues to have been addressed. Resolving the findings suggests responsiveness to auditor concerns.

The College has struggled in recent years to ensure that expenditures are sustainable. Prior to the 2022-23 fiscal year, the College had engaged in deficit spending and relied upon one-time transfers to maintain a reserve. The 2020-21 independent audit noted these issues and questioned the College's standing as a going concern. In 2020, the Board of Trustees adopted a Multiyear Budget and Enrollment Strategic Plan (MYBE) to better align expenditures with ongoing resources. Large staffing reductions were implemented in 2022 to help bring down expenditures in accordance with the MYBE. These reductions have helped to eliminate the operational deficit in the 2022-23 budget, but the MYBE still assumes ongoing enrollments of 18,000 to 20,000 FTES while the college is earning fewer than 14,000 actual FTES. To maintain sustainability, the College will likely need to make additional adjustments in future years. Recent action by the Governing Board expresses the expectation that the College will restore full-time faculty who were subject to layoffs in 2022. This may increase expenditure without a corresponding increase in revenue. (III.D.1, ER 18)

### **General Observations - Enhanced Fiscal Monitoring**

The College budget, as presented to the Board in September 2023, is narrowly balanced, but recent Governing Board actions raise concerns about the college's long-term commitment to financial stability. The actions include Board resolutions expressing the expectation that the College will restore laid-off faculty positions and a decision to reduce planned expenditures intended to meet the college's OPEB obligations. These actions suggest to the Team that the current Board is not committed to the MYBE plan, which was enacted to achieve long-term stability. (III.D.1)

The College's Mission and policies prioritize institutional plans in its budget development. The College engages in a program review process which prioritizes funding requests linked to strategic planning. Monthly committee meetings make budget information available to college stakeholders, and the Board regularly reviews budget performance as well. When major expenditure reductions were enacted in 2022, information was shared broadly through a variety of formats including public forums held by the Chancellor. The College has identified revising Board Policy 8.01 (Budget Preparation) to ensure more meaningful community

engagement as a priority. Existing policies reviewed by the Team sufficiently outline the budget development process. (III.D.2, III.D.3)

The College assesses information relevant to financial resource availability, such as proposals from the state budget, local revenue, bargaining agreements, and enrollment data. The College properly adjusts for annual repayments owed to the state Chancellor's Office. This information is shared in public forums such as participatory governance meetings and Board meetings. Appropriate policies are in place to allow for proper planning and budget development.

The College is allocated state general purpose funding through the "Hold Harmless" option, meaning that they are receiving funds beyond what their FTES and other factors would otherwise provide. To meet the standard, the College should provide evidence of planning in place to ensure long-term financial stability. (III.D.4)

### **General Observations - Enhanced Fiscal Monitoring**

Through the development of the MYBE, the difficult decision to reduce staffing in 2022, and the adoption of a Board-approved plan to fully fund OPEB, the College had demonstrated planning that reflected a realistic assessment of resources. The Team is concerned, however, that the Board actions noted in III.D.1 reflect a lack of awareness or concern by the Board about the difficult work the College has ahead to sustain balanced budgets as the College approaches the probable end of cost-of-living-adjustments in 2025-26. (III.D.4)

The College has adequate internal control processes, policies, and procedures to ensure the responsible use of resources. The College utilizes the BANNER program to manage financial resources and PeopleAdmin for human resource operation, which provide necessary controls for users based on their responsibilities. Financial information is regularly disseminated to the College community, and quarterly financial statements and budget reports are presented to the Board of Trustees. The Team verified evidence that appropriate purchasing requirements and checks are in place. Annual audits are conducted by an external independent auditor, as specified in the California Community Colleges Contracted District Audit Manual. While the College had several findings in the 2020-21 annual independent audit, the Team verified that these findings were not due to poor internal controls.

Recent actions by the Governing Board have made it difficult for the College administration to publicly post a comprehensive and accurate approved budget for the 2023-24 fiscal year. This reduces the credibility of one of the College's most critical financial documents. The Team advises that the final budget adopted by the Governing Board that is made available to the public is comprehensive and accurate. (III.D.5, III.D.6)

The College's findings in the 2020-21 annual independent audit concerned deficits in the Self-Insurance Fund, tracking of Load banking, and unrestricted general fund deficit spending that questioned the District's status as a "going concern." The College provided evidence that these

findings were shared with responsible program areas and that corrective actions were taken. Information was also communicated to relevant committees and to the Board of Trustees. While some items were addressed while the audit was still in draft form, other items required substantial actions in subsequent years, such as addressing deficits in the College's unrestricted general fund and in the Self-Insurance Fund. Through significant effort, the College was able to address concerns raised in the 2020-21 audit and received no findings in the 2021-22 audit. As such, the evidence reviewed by the Team demonstrates that the college meets the standard. (III.D.7)

### **General Observations - Enhanced Fiscal Monitoring**

The College managed to fully address the audit findings in the 2020-21 audit report by the subsequent audit for the 2021-22 year. While it remains to be seen if the College can sustain clean audit reports, there is evidence to demonstrate that the College's responses were comprehensive and timely. (III.D.7)

The annual audits reviewed by the Team have not identified any issues with the College's internal controls. As detailed in III.D.7, the College has demonstrated the ability to address deficiencies when they arise. The College runs regular reports and checks to ensure the accuracy and integrity of the systems and makes journal entries as needed. Information is regularly shared with the Board of Trustees and college committees as well. (III.D.8)

The College has experienced cash flow issues in recent years but has taken some steps to address the problem. Through significant staff and expenditure reductions enacted in 2022, the College was able to budget a cash reserve of \$17.5 million for the 2022-23 fiscal year, equal to approximately 10% of unrestricted general fund expenditures. This amount meets the requirements outlined in its BP 8.01 - Budget Preparation and Fiscal Accountability. The Team notes that the College has not consistently met this standard, often using one-time transfers from its OPEB fund and other sources to build a budget reserve. Further, the state Chancellor's Office has recently raised the recommended district minimum reserve to "two months of general fund expenditures" which is equivalent to 16.67%. The College will need to review the Chancellor's Office recommendation and consider the next steps to maintain sufficient reserves.

The College has taken steps to address financial emergencies by enacting the MYBE, building an operational surplus for the 2022-23 fiscal year, and by balancing the deficit identified in its Self-Insurance Fund. Additionally, the College budgeted a \$1.9 million general fund contingency in its 2022-23 budget. Further, the College addresses other potential liabilities through membership in the Alliance of Schools for Cooperative Insurance Program (ASCIP). (III.D.9)

### **General Observations - Enhanced Fiscal Monitoring**

The College proposed a balanced budget for the 2023-24 year, maintaining a modest reserve within Board policy parameters. The proposed budget would have contributed \$4M toward paying its OPEB obligations, supported capital outlay needs, and set aside unallocated funds to plan for bargaining unit agreements and unforeseen occurrences. Rather than adopting the budget as proposed, the Board took action to divert funds into a new 7900 account for further action. This questions the College's ability to maintain stability and to meet financial emergencies due to uncertain cash flow and reserves. (III.D.9)

The College practices oversight of all funds inclusive of financial aid, grants, externally-funded programs, and contractual relationships through its accounting unit. The Team confirmed that appropriate internal controls are detailed through appropriate policies and procedures that, among other criteria, provide for responsible stewardship over resources in accordance with the California Community Colleges Budget and Accounting Manual. Adherence to generally accepted accounting principles is reviewed through the College's annual audit, and no issues concerning the statement of funds or internal controls have been raised in the audits reviewed by the Team. (III.D.10)

### **General Observations - Enhanced Fiscal Monitoring**

The College maintains appropriate policies and procedures for the oversight of its finances. The 2021-22 independent audit identified no concerns with the College's internal controls or fiscal management of its finances, financial aid, grants, external programs, or other assets. (III.D.10)

The College's planning and resource allocation processes consider both current and future liabilities through its budget development policies and practices. The College produces multiyear projections that are shared through the participatory governance process. This includes projection of the Student-Centered Funding Formula (SCFF) factors, FTES, and local revenues. The College identifies long-term obligations such as bargaining agreements, OPEB, early retirement incentives, and the repayment of debt. The College shares monthly expenditure updates tracking revenue and expenditure information, in which assumptions are used to assess the College's ability to meet obligations. As discussed earlier, the College has a Board-approved MYBE plan intended to align the expenditures with resources. Board Policy 8.01 (Budget Preparation) requires the College to provide multiyear projections with the proposed annual budget.

The Team is concerned by recent Governing Board actions pertaining to the long-term financial solvency of the institution. The Board passed resolutions expressing its expectation that the College would rehire faculty positions laid off in the previous year and reduce its commitment to fully funding its OPEB obligations. Further, the Board voted to divert allocations proposed in the budget away from capital outlay, OPEB, and the Self-Insurance Fund for subsequent

discussion. Due to uncertainty surrounding the intentions of the Governing Board, the College did not feel it could produce an accurate multiyear projection as part of the 2023-24 budget. For these reasons, the Team has concerns that the Governing Board lacks commitment to the MYBE and is not appropriately considering the long-term ramifications of its financial decisions. (III.D.11)

The Team reviewed the College's actuarial plan and it found it up to date. The College's liability is assessed at \$148.4 million as reported to the governing board in September of 2023. To help balance the budget in the 2020-21 year, the College withdrew over \$21 million from their OPEB fund. The College enacted deep reductions in 2022 to restore balance to its budget and increase its ability to address long-term obligations. In addition to its pay-as-you go expenditures, the College contributed \$4 million to its OPEB fund in each of the 2021-22 and 2022-23 fiscal years pursuant to a plan to fully fund its obligation that was approved in 2020. Further, the College has negotiated bargaining agreements that transfer up to 1% to 2% of employee payroll to the OPEB Trust. Recently, the Governing Board took action to reduce payments to the OPEB trust, which will result in larger payments over time. The College will need to continually assess its net liability and prepare to manage these costs while maintaining adequate financial support for its academic and student support programs.

The College is facing difficult financial circumstances. Through the SCFF's hold harmless provision, the College receives approximately \$35 million more in apportionment funding than its actual enrollment generates. As of 2025-26, the hold harmless provision will no longer provide cost-of-living adjustments, so the College's funding could be flat for years. The Governing Board has approved a resolution communicating the expectation that the Chancellor will hire back full-time faculty laid off in 2022, increasing expenditures for compensation that will not increase the college's hold harmless apportionment funding.

Additionally, the Governing Board has taken action to reduce short-term payments to the OPEB trust account which will increase college costs over time. Due to the uncertainty created by Board decisions, College leadership did not believe it could produce a credible multiyear projection in the 2023-24 budget proposal, as required by Board Policy 8.01. For these reasons, the Team is concerned that the Governing Board of the College is not considering the long-term financial implications of its decisions as required by Standard III.D.11.

The College has two main sources of debt. The first is a repayment plan to the state Chancellor's Office stemming from a distance education finding from 2016-17. The College initially agreed to repay the \$24.8 million debt over 10 years but has since renegotiated a longer payment term with the state Chancellor's Office. Payments now extend through the 2029-30 year. As of 2022-23, the annual payment is \$1.9 million until the end of the payment term. The College has identified this payment in its MYBE and multiyear projections.

The second main source of debt is related to general obligation bonds approved by voters in 2005 and 2020. As of June 2022, total bond fund balances were \$260 million. Funds to repay

the debt are collected by the county through ad valorem taxes and placed in a debt service fund. The activities and internal control over bond funds are also audited annually by an independent auditor. The College received an unmodified opinion in the most recent audit reviewed by the Team. (III.D.11, III.D.12)

Grants and auxiliary funds are subject to appropriate expenditure policies and procedures. Compliance is monitored through the college's annual audit with no concerns identified in recent years. The Governing Board has adopted Board Policy 8.19 related to debt management. (III.D.13, III.D.14)

The College provides annual entrance and exit counseling concerning loan information and requires borrowers to attend a money management information session. This exceeds requirements. The annual independent audits confirm that the College complies with all federal requirements related to the management and disbursement of federal financial aid. The College's student loan default rates have declined from 17.4% in 2017 to 10.9% in 2018, which are well below federal regulations that require a rate of less than 30% default over three years. (III.D.15)

College processes place responsibility on its Purchasing Office to ensure contracts with external entities are consistent with the institution's mission and goals. Appropriate policies are in place, (e.g., BP 8.06 – Procurement of Supplies, Equipment, and Services) to provide authority for the Chancellor to enter into contracts on behalf of the college, as specified. Contracts are reviewed and signed by the Vice Chancellor of Finance and Administration. Criteria for Board approval or ratification are detailed in policies reviewed by the Team. The College also has appropriate policies in place regarding bidding of contracts and approval of pre-qualified bidders, which allows for transparency in its contracting efforts. The Team has reviewed contract agreements entered into by the College and confirmed that those agreements include appropriate provisions to protect the College from liability and other concerns. Annual audits reviewed by the Team have not identified any findings related to contract management. (III.D.16)

#### Conclusions:

The College meets the Standard, except III.D.11.

#### Recommendation 1

In order to meet the Standard, the Team recommends the Governing Board consider the College's long-range fiscal implications when making financial decisions in order to assure financial stability (III.D.11)

#### Recommendation 5

In order to increase institutional effectiveness, the Team recommends that the final budget adopted by the Governing Board that is made available to the public is comprehensive and accurate (III.D.6).



## Standard IV

### Leadership and Governance

#### IV.A. Decision-Making Roles & Processes

##### General Observations:

The institution recognizes and uses the contributions of leadership throughout the organization for promoting its goals. Decision making roles and processes are clearly delineated in the Roles, Responsibilities, and Processes Handbook (RRP). Applicable Board policies establish governance structures and define the relationships between the various leaders. Through established governance structures, processes, and practices, the Governing Board, administrators, faculty, staff, and students work together for the good of the institution.

##### Findings and Evidence:

Institutional leaders create and encourage innovation geared towards promoting institutional excellence. Administrators, faculty, and staff are encouraged to develop new practices and processes that will lead to improved programs and services. The College's participatory processes are outlined in the Roles, Responsibilities, and Processes Handbook (RRP). Evidence of these processes leading to innovative proposals can be found in a variety of program review resource requests, which are prioritized and fulfilled. (IV.A.1)

The institution has policies and procedures which authorize administrator, faculty, and staff participation in decision-making processes. BP/AP 2.07 codifies the College's commitment to participatory governance. BP/AP 2.08 provides policy-specific guidance for collegial consultation with the Academic Senate, and other channels for collegial governance. The RRP also demonstrates the ways all constituent groups can provide feedback and input, including students. (IV.A.2)

Administrators and faculty have a substantive and defined role in institutional governance including planning, policies and budgeting. Board policies 2.07 and 2.08 outline the importance of these constituent groups in governance, and the RRP provides its operationalization, specifying the applicable structures and mechanisms through which these roles are exercised. The College acknowledges that there have been areas where shared governance deviated from the proposed model. BP/AP 2.08 clarifies that the Chancellor serves as the representative of the Board, and a model of collegial consultation is provided so that faculty and other constituent groups have an opportunity to participate in this process, and attempt to reach mutual agreement, rather than taking concerns directly to the Board. (IV.A.3)

College policies, procedures, and structures address the responsibility of faculty and academic administrators to make recommendations about curriculum and student learning programs and services. Board policies and administrative procedures support this goal. BP 2.08 outlines collegial governance. BP 6.03 establishes institutional standards for the review of programs and curriculum. BP 6.15 designates the Curriculum Committee as responsible for establishing prerequisites, corequisites, and advisories. With regard to student services, the Student Services Outcomes (SSO) Workgroup supports the creation and analysis of service area outcomes (SAOs) and student service-learning outcomes (SSLOs). The workgroup utilizes the results as a basis for making recommendations for future program improvements. (IV.A.4)

Board policies and administrative procedures establish and define the College's participatory and collegial governance structures. The RRP handbook provides guidance about the role of each constituent group. The Participatory Governance Council (PGC), and its eight constituent subcommittees, demonstrate the inclusion of members of all constituent groups on campus. Many of the Academic Senate's collegial governance committees welcome participation from all college constituents. The process surrounding the expedited completion of the technology plan provides an example of timely action. (IV.A.5)

The processes for decision-making and the resulting decisions are documented and widely communicated across the institution. The RRP handbook outlines these processes and is available through the participatory governance webpage. All members of the Participatory Governance Council receive an orientation to these processes, and the council's actions are recorded through committee minutes. Finally, the Board policies and resulting procedures/plans are posted publicly. (IV.A.6)

Leadership roles and governance and decision-making processes are regularly evaluated. The College conducts an evaluation of the Participatory Governance Council and its standing committees annually and recently completed an extensive evaluation of the RRP Handbook. In addition, the Academic Senate conducts an orientation at the outset of each year, during which members cover goal setting, progress, and evaluation and analysis of surveys completed by members. (IV.A.7)

Conclusions:

The College meets the Standard.

#### **IV.B. Chief Executive Officer**

General Observations:

The Chancellor, the CEO of City College of San Francisco, demonstrates primary responsibility for the quality of the College. The Chancellor oversees an administrative structure and delegates authority to the appropriate administrators to directly oversee primary functions of the College. In collaboration with senior leadership, the Chancellor ensures institutional

improvement and adherence to regulations and Board policies. The Chancellor has primary responsibility for Accreditation with support from the College's Accreditation Liaison Officer. Through coordination with the Marketing Officer, the Chancellor works and communicates with the broader College community.

Findings and Evidence:

The Chancellor has primary responsibility for the quality of the institution. Board policies demonstrate delegation of responsibilities to the Chancellor and support the overall quality and effectiveness of the District (BP 1.02, BP 1.25, BP 1.37). The Chancellor provides effective planning and leadership by implementing a broad-based, comprehensive, systematic, and integrated system of planning that brings together appropriate segments of the College community. Beginning in 2018, the Chancellor led the College through the update or creation of critical planning efforts, including the Education Master Plan, Facilities Master Plan, and Multi-Year Budget and Enrollment Plan. (IV.B.1)

The Chancellor establishes administrative structures that are appropriate for meeting the needs of the District. The Chancellor delegates authority to the vice chancellors for the primary functions of the College. According to Board policy, the Chancellor plans, oversees, and evaluates the administrative structure of the organization. Over time, Chancellors have made changes to the administrative structure to reflect the changing needs of the institution. The Chancellor delegates authority to administrators and other designees consistent with their purview and responsibilities. Board policy and administrative procedure (BP/AP 1.37) codifies the delegation of authority to the Chancellor, which is evident in the organizational charts for the administrative units. (IV.B.2)

The Chancellor acts to ensure institutional improvement by supporting the College's processes related to setting values, goals, and priorities; setting institutional performance standards; utilizing high-quality research and analysis of the internal and external environments; integrating planning with resource allocation to improve learning and achievement; and evaluating institutional planning and implementation efforts. The Chancellor's effective leadership is demonstrated through implementing a broad-based, comprehensive, systematic, mode of planning that integrates appropriate segments of the College community. Beginning in 2018, the Chancellor led the College through the update or creation of critical planning efforts, including the Education Master Plan, Facilities Master Plan, and Multi-Year Budget and Enrollment Plan. (IV.B.3)

The Chancellor holds the primary leadership role for accreditation and ensures the institution meets or exceeds accreditation standards. The Chancellor shares responsibility for accreditation compliance with the ALO and participatory governance committees, which include faculty, staff, and administrative leaders from the institution. The Chancellor includes the Accreditation Liaison Officer (ALO) in the Chancellor's Cabinet and appointed the ALO as chair of the

Accreditation Steering Committee, which includes faculty, staff, students, and administrative leadership from across the College. The Chancellor, in concert with the ALO and accreditation processes developed in participatory governance, delivers regular and informative updates to the College community and Board of Trustees. (IV.B.4)

The Chancellor works with senior leadership to ensure that statutes, regulations, and Board policies are implemented appropriately, and that institutional practices are consistent with institutional mission, policies, and budgeting. The Chancellor, in partnership with appropriate vice chancellors and executive leadership, ensures all statutes, regulations, and Governing Board policies are implemented appropriately and clearly communicated widely and regularly. The Board policies and administrative procedures are posted on the College website, with review, changes, and updates circulated through all constituencies via the collegial (Academic Senate) and participatory governance systems according to the RRP Handbook. The Chancellor works closely with the Vice Chancellor of Finance and Administration. The Chancellor develops long-term planning and budgeting procedures, plans, audits, and audit responses. (IV.B.5)

The Chancellor works and communicates effectively with the communities served by the institution by providing regular reports and updates from the Chancellor's office, hosting open forums, and attending meetings and listening events with community members and leadership. In support of collegewide and community focused communications, the Office of Marketing and Public Information prepares and distributes press releases that spotlight City College programs, happenings, and the achievements of its faculty, staff, and students. The Director of Media, Governmental Relations and Marketing reports directly to the Chancellor to coordinate this communication. (IV.B.6)

Conclusions:

The College meets the Standard.

## **IV.C. Governing Board**

General Observations:

The Governing Board has authority over the policies of the institution. It acts as a collective entity and abides by a code of ethics. It follows a conflict of interest policy, in which Board members disclose any potential conflicts annually, and members abstain from votes where a conflict exists. It has clearly defined policy for selecting and evaluating the Chancellor. The governing board has ultimate responsibility for educational quality, legal matters, financial integrity and stability. However, the Governing Board as currently constructed has not acted in a manner consistent with its policies and bylaws. It also has not allowed the Chancellor to implement and administer Board policies without Board interference.

### Findings and Evidence:

The Governing Board has authority over and responsibility for policies to assure academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. This is evidenced through Board policies 1.02 (Powers and Duties of the Board), 6.01 (Instruction), 6.03 (Program, Curriculum and Course Development), 8.01 (Budget Preparation), 8.05 (Budget Management). (IV.C.1, ER 17)

The Governing Board acts as a collective entity and all Board members act in support of their decisions. BP 1.17A (Governing Board Code of Ethics) stipulates that the Board must function as a team, seeking to stay well-informed and to act objectively. BP 1.29 provides that an individual Board member does not have legal authority to act on behalf of the District or promise action or correction. (IV.C.2)

The College has clearly defined policies and procedures for selecting and evaluating the Chancellor. BP 1.02 (Duties and Responsibilities of the Board) describes that the Governing Board is responsible for selecting, hiring, and evaluating the Chancellor. BP 1.25 describes how the Board establishes the office of the Chancellor as that of Chief Executive Officer, and delegates to this office administrative authority “within its power.” BP 1.24 outlines the process and timeline for an annual performance evaluation of the Chancellor. These policies and procedures were evident in the most recent Chancellor search. (IV.C.3)

The Governing Board is publicly elected and independent. Board policies specify these qualities. BP 1.17 (Governing Board Code of Ethics), BP 1.18 (institutional Code of Ethics) and BP 1.19 (Conflict of Interest) all set the guidelines for Board behavior. Two recent actions regarding petitioning the city for funding and participating in formulating a response to civil grand jury recommendations provide evidence of the Governing Board’s independence. (IV.C.4, ER 7)

Governing Board policies ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them. The Governing Board has ultimate responsibility for educational quality, legal matters, financial integrity and stability. The following Board policies demonstrate adherence to this Standard: 1.02 (Powers and Duties of the Board), 1.28 (Control and Direction), 1.37 (Delegation of Authority to the Chancellor), 2.18 (Institutional Planning), 6.01 (Instruction-general), 6.07 (Standards of Scholarship), 8.01 (Budget Preparation and Fiscal Accountability), 8.03 (Audits), 8.05 (Budget Management), 8.12 (Fiscal Management and Accounting). (IV.C.5)

The Governing Board publishes bylaws and policies specifying its size, duties, responsibilities, structure, and operating procedures. Board policies 1.01 (Election and Membership), 1.02 (Powers and Duties of the Board), 1.03 (Organization of the Board), 1.04 (Officers’ Duties), 1.05 (Regular Meetings of the Board), 1.06 (Closed Sessions), 1.07 (Special and Emergency

Meetings), 1.08 (Quorum and Voting) and 1.10 (Public Participation at Board Meetings) fulfill this requirement. (IV.C.6)

Evidence that the Governing Board regularly assesses its policies and bylaws and revises them as necessary is sufficient. The College acknowledges that five-year evaluation cycles are not always met but has renewed efforts to regularly assess all policies in a timely manner. However, the Team found several instances where the Governing Board did not act in a manner consistent with its bylaws:

- The passage and amendment of a resolution to rehire previously laid off faculty during the May 18, 2023 and July 27, 2023 Board meetings violated BP 1.02. This resolution charged the Chancellor with rehiring faculty and provided a timeline of when the rehires were “expected” to occur. BP 1.02, section A states, “(the Governing Board will) Determine broad general policies, plans, and procedures to guide its officers and employees.” BP 1.02, section H states, “(the Governing Board will) delegate authority in all administrative matters to the Chancellor, including, but not limited to, hiring or promotion of specific individuals. The resolution violated BP 1.02 as the Board was not determining “broad general policies or plans”; rather, the Board engaged in administrative decisions, which are not within their operational purview. Only the Chancellor has the “administrative authority in hiring or promotion of specific individuals.”
- The final budget preparation and approval process has not occurred in accordance with Board policies. BP 8.01 states that, a final budget must be “approved by September 15,” and that it must include a “Multi-Year Budget Plan for the next three to five Fiscal Years.” As of October 4, 2023, no complete, final budget had been approved. Instead, the Governing Board had approved a budget, and the resolution to rehire, without the fiscal implications of the rehire resolution present in the budget document. The multi-year budget plan was also missing, and based on interviews with College staff, it was impossible to develop such a budget plan based on Board resolutions that included stipulations to add significant costs by rehiring employees not currently accounted for in the budget and which made changes to several budget line items.
- The evaluation of the Chancellor has not occurred in accordance with BP 1.24. According to BP 1.24, the Board is required to evaluate the Chancellor on an annual basis through a “collective process.” Interviews with individual Board members indicated that the Chancellor’s evaluation was “not a collective process, with evaluative instruments and criteria adopted as a result of consultation with all Governing Board members.” Instead, interviews revealed that the Board President developed the evaluative instrument and administered the surveys unilaterally and without concurrence of the Board as required by the Board’s policy.
- Board of Trustee meeting agendas were not constructed in accordance with BP 1.09. According to BP 1.09, Board of Trustee meeting agendas “shall be developed by the

Chancellor in consultation with the Board President and/or Vice President.” Based on Chancellor and Trustee interviews, the team found that agenda items were often placed on the agenda by the President of the Board of Trustees, without consultation with the Chancellor. (IV.C.7)

The Governing Board demonstrates regular review of key indicators of student achievement and institutional plans for improving academic quality to ensure that the institution is accomplishing its goals. Presentations from the student success and policy committee are regularly reviewed, and student success and achievement data are also accessible to the Board of Trustees on the College’s Institutional Metrics webpage, which the Board requested to support their access to a variety of data related to the College’s mission and operation. The Board reviews and approves the College’s Education Master Plan, which guides all planning at the College. (IV.C.8)

The Governing Board participates in ongoing training for board development, including new trustee orientations. This is evidenced by twice-a-year board retreats and attendance at annual conferences. (IV.C.9)

The Governing Board regularly evaluates its practices and performance, including full participation in board training, and makes public the results (BP 1.23). The Board conducts this evaluation during its annual retreats. The evaluation includes components that assess the Board’s effectiveness in promoting and sustaining academic quality and institutional effectiveness. The College publishes the evaluation results as part of the Board retreat agenda and uses the results for ongoing improvement. (IV.C.10)

The Governing Board upholds a code of ethics and conflict of interest policy and individual Trustees adhere to the code. No Board members have employment, family, ownership, or other personal financial interest in the institution, and each completes a statement of economic interest. (IV.C.11, ER 7)

Through BP 1.37 (Delegation of Authority to the Chancellor), the Board of Trustees “delegates to the Chancellor the executive responsibility for administering the policies adopted by the Board and executing all decisions of the Board requiring administrative action.” In addition, BP 1.02 delegates, “authority in all administrative matters to the Chancellor, including, but not limited to, hiring or promotion of specific individuals.” However, in key instances, the team noted that the Governing Board did not allow the Chancellor to carry out Board policies without Board interference:

- In order to maintain fiscal solvency, the Chancellor enacted layoffs which were voted on and supported by the previous Board of Trustees in May 2022. The Board of Trustees as currently constructed passed a budget resolution May 18, 2023, and revised it July 27,

2023, which ordered the Chancellor to rehire previously laid off faculty, and provided a timeline of when the rehires would occur.

- AP 1.09 requires the Chancellor, in consultation with the Board of Trustees President, to determine items to be placed on the Board of Trustees Agenda. Based on interviews with individual Trustees and with the Chancellor, the Team found that Governing Board members often bypass the Chancellor and go directly to the Board President to place items on the agenda. (IV.C.12)

The Governing Board is well informed about accreditation and supports improvement through policy. This is evident through regular updates provided to the Board regarding all aspects of accreditation, in line with their Board goals and associated activities. The Board's evaluation of its progress includes the review of progress toward meeting Board goals and activities related to accreditation. (IV.C.13)

Conclusions:

The College meets the Standard, except IV.C.7 and IV.C12.

Recommendation 1

In order to meet the Standard, the Team recommends that the Governing Board act in a manner consistent with its policies and bylaws (IV.C.7).

Recommendation 2

In order to meet the Standard, the Team recommends that the governing board allow the Chancellor to implement and administer board policies without board interference (IV.C.12).

**IV.D. Multi-College Districts or Systems**

N/A



## Quality Focus Essay

City College of San Francisco has identified two Quality Focus Action projects, both of which are focused on serving the needs of students in a more efficient, supportive manner. The first Action Project involves a coordinated effort to help students properly identify their major and indicate their major and goal accurately in the student system. When students' majors are current and accurate within the student information system, it allows representatives from academic departments and student services to help students choose their required courses and to connect them with other students on the same or similar path.

Similarly, CCSF's second Quality Focus Action project is focused on helping students understand what resources are available to help them be successful. Such resources range from financial aid to general and affinity-group focused supportive services and to transfer and career-focused services.

Both Action Projects further reflect the passion for student success that was evident in the ISER and during the Focused Site Team visit.

## Appendix A: Core Inquiries



ACCREDITING COMMISSION FOR  
COMMUNITY AND JUNIOR COLLEGES  
WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES

# CORE INQUIRIES

City College of San Francisco  
50 Frida Kahlo Way  
San Francisco, CA 94112

The Core Inquiries are based upon the findings of the peer review team that conducted Team ISER Review on March 22, 2023

Erika Endrijonas, Ph.D., Team Chair  
Team Chair

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City College of San Francisco

Peer Review Team Roster

**Team ISER Review**

March 22, 2023

Dr. Erika Endrijonas, Chair Superintendent/President Pasadena City College	Dr. Mike Muñoz, Vice Chair Superintendent/President Long Beach City College
<b>ACADEMIC MEMBERS</b>	
Ms. Chloe de los Reyes Assistant Professor, English/Multilingual Faculty Lead Crafton Hills College	Dr. Norman Lorenz Professor of Education Studies and First Year Seminar Sacramento City College
Dr. Jesse Mills Faculty, Political Science Compton College	Dr. Frank Nigro Assistant Superintendent/Vice President of Instruction Shasta College
Mr. Biju Raman Dean - Instruction and Student Services Palo Verde College	
<b>ADMINISTRATIVE MEMBERS</b>	
Ms. Jane Abell Vice President of Student Services Copper Mountain College	Dr. Elizabeth Balint Director of Institutional Effectiveness Lake Tahoe Community College
Mr. Daniel Troy Assistant Superintendent/Vice President, Administrative Services Cuesta College	
<b>ACCJC STAFF LIAISON</b>	
Dr. Kevin Bontenbal Vice President ACCJC	

## Summary of Team ISER Review

INSTITUTION: City College of San Francisco

DATE OF TEAM ISER REVIEW: March 22, 2023

TEAM CHAIR: Erika Endrijonas, Ph.D.

A seven-member accreditation peer review team conducted Team ISER Review of City College of San Francisco on March 22, 2023. Two peer review team members were unable to attend the in-person meeting near LAX due to illness and travel challenges. The Team ISER Review is a one-day, off-site analysis of an institution's self-evaluation report. 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 ISER to be a comprehensive, well written, document detailing the processes used by the College to address Eligibility Requirements, Commission Standards, and Commission Policies, although the team did find reviewing the evidence cited in the ISER challenging due to numerous broken links and the lack of access to the ISER on CCSF's website without a password. The team confirmed that the ISER was developed through broad participation by the entire College community including faculty, staff, students, and administration. The team found that the College provided a thoughtful ISER containing several self-identified action plans for institutional improvement. The College also prepared a Quality Focus Essay.

In preparation for the Team ISER Review, the team chair attended a team chair training workshop on December 1, 2022, and held a pre-review meeting with the college CEO on January 19, 2023. The entire peer review team received team training provided by staff from ACCJC on February 7, 2023. Prior to the Team ISER Review, team members completed their team assignments, 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 continues to meet Accreditation Standards, Eligibility Requirements, Commission Policies, and US ED regulations. In the afternoon, the team further synthesized their findings to validate the excellent work of the college and identified standards the college meets, as well as developed Core Inquiries to be pursued during the Focused Site Visit, which will occur the week of October 2, 2023.

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 that the team will explore to further their analysis to determine whether standards are met and accordingly identify potential 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. In the course of 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.

<p><b>Core Inquiry 1:</b></p> <p>The team seeks to better understand how the college utilizes and implements the evaluation of governance processes and program review to systematically improve institutional effectiveness and academic quality.</p>
<p><b>Standards or Policies:</b> I.B.7</p>
<p><b>Description:</b></p> <ol style="list-style-type: none"><li>a. The college reviews policies and procedures following an articulated, inclusive process.</li><li>b. Evidence of the inclusive and robust governance processes can be found in section 4 of the 'The Roles, Responsibilities, and Processes (RRP) Handbook' which outlines processes to review and update policies and procedures.</li><li>c. However, it is unclear how evaluation of governance processes and program review leads to system improvements to better support and continually improve institutional effectiveness and academic quality.</li></ol>
<p><b>Topics of discussion during interviews:</b></p> <ol style="list-style-type: none"><li>a. How does evaluation of governance processes and program review <i>lead</i> to system improvements?</li></ol>
<p><b>Request for Additional Information/Evidence:</b></p> <ol style="list-style-type: none"><li>a. Evidence showing how assessment of governance processes and program review has led to system improvements.</li></ol>

**Request for Observations/Interviews:**

- a. Academic Senate President
- b. Vice Chancellor of Academic & Institutional Affairs
- c. Vice Chancellor of Institutional Advancement & Effectiveness
- d. Committee(s)/Members responsible for conducting/evaluating assessments

**Core Inquiry 2:**

The team seeks to review and verify a current and updated BP/AP Review and Accountability Schedule.

**Standards or Policies:** I.C.5 and IV.C.7

**Description:**

- a. CCSF has structures and processes in place for reviewing board policies and administrative procedures
- b. The college acknowledges that “keeping up with a five-year cycle for review has been challenging, particularly given senior leadership transitions over the past few years.”
- c. The college addressed this issue by developing a BP/AP Review and Accountability Schedule.
- d. In the Schedule provided as evidence, a number of ‘next revision’ dates are missing or were due to be reviewed in Fall 2021.
- e. Given the college’s own concern with sustaining this process, the team would like to assess how the college is progressing with its scheduled review.

**Topics of discussion during interviews:**

- a. What is the status of the current BP/AP review and accountability schedule?
- b. How does the college plan to sustain the ongoing review of BP/APs?
- c. Who will be responsible for ensuring the college is accountable to its BP/AP review schedule?

**Request for Additional Information/Evidence:**

- a. Current, updated BP/AP Review and Accountability Schedule.

**Request for Observations/Interviews:**

- a. Individuals responsible for the five-year cycle of review of all Board Policies and Administrative Procedures.

**Core Inquiry 3:**

The team seeks to verify that the college is following its evaluation processes and timelines for all employees.

**Standards or Policies:** III.A.5 and III.A.8

**Description:**

- a. The team did not find evidence for a systematic evaluation process or timelines to ensure that evaluations for all full-time and part-time faculty and staff are occurring.
- b. The team was also unable to verify through evidence that actions taken based on the evaluation of faculty and staff are documented.

**Topics of discussion during interviews:**

- a. Explain how evaluations are occurring systematically and according to published timelines.
- b. How are actions taken based on the evaluation of personnel timely and documented.

**Request for Additional Information/Evidence:**

- a. Any evidence of the timeline/process being published and communicated to faculty and staff.
- b. Documentation of actions taken based on evaluations.



**Request for Observations/Interviews:**

- a. Vice Chancellor of Human Resources & Employee Relations
- b. Vice Chancellor of Academic & Institutional Affairs
- c. Vice Chancellor of Student Affairs
- d. Deans who oversee instructional and non-instructional faculty and staff.

**Core Inquiry 4:**

The team seeks to learn more about how the college maintains, upgrades, and evaluates its facilities and sites to ensure they adequately support instructional services and student needs.

**Standards or Policies:** III.B.2 and III.B.3

**Description:**

- a. The team verified that the college has multiple sites located throughout its service area.
- b. The college noted in its ISER a need to assess the college's footprint.
- c. The team verified that the college has a custodial handbook establishing processes and procedures for cleaning and maintenance standards.
- d. The team verified that the college utilizes the SchoolDude program to identify immediate physical resource needs. The college noted that it is seeking to upgrade to a more proactive system.
- e. It is unclear to the team how the college adequately supports the Total Cost of Ownership for all sites.
- f. It is unclear to the team that the program review process supports instructional and student support service needs across all sites.
- g. The team would like to learn more about how facilities at all sites are maintained and that issues are addressed on a regular basis.

**Topics of discussion during interviews:**

- a. How does the college ensure proper maintenance of all of its sites?
- b. Is the college reviewing or updating its custodial handbook?
- c. How does the college assess the cost-benefit analysis of its sites?
- d. How does the college evaluate the need for all its sites?

**Request for Additional Information/Evidence:**

- a. Documentation demonstrating process or plans of site assessment.

**Request for Observations/Interviews:**

- a. Vice Chancellor of Finance & Administration
- b. Associate Vice Chancellor of Facilities

**Core Inquiry 5:**

The team seeks to verify the college's plans for ensuring it has sufficient financial resources to support and sustain instructional and student support programs, and that the college's fiscal and operational planning is based on a realistic assessment of available financial resources.

**Standards or Policies:** III.D.1, III.D.4, and III.D.9

**Description:**

- a. The team verified that the college has experienced a pattern of deficit spending over many years, utilizing one-time transfers to support ongoing operations.
- b. The team verified that the college has experienced a significant decline in enrollment, which is critical to long-term resource availability.
- c. The team verified that the college operates many sites across its service area, creating a large and costly operational footprint.
- d. The team has reviewed evidence demonstrating that the college relies on program review to identify learning and student support needs.

- e. The team would like to learn more about the college's multiyear budget and enrollment plan to acknowledge and address its fiscal stability, and how the college has begun to take actions to align expenditures with available resources.
- f. The team would like to learn more about how the college is able to support critical learning and student support needs identified through program review.
- g. The team would like to learn more about how the college continues to update and refine its multiyear budget planning based on current information which includes implementation timelines.
- h. The team would like to learn more about how the college is ensuring its cashflow and reserves are sufficient and consistent with its approved budget.
- i. The team would like to learn more about how the college plans to avoid deficits in special funds (e.g., the Self-Insurance Fund).

**Topics of discussion during interviews:**

- a. Is there ongoing planning to address long-term financial conditions?
- b. What is the college doing to ensure that deficit spending will not re-emerge?
- c. Are the college's expenditure and resource estimates realistic?
- d. Are the current budget tracking estimates approved in the adopted budget?

**Request for Additional Information/Evidence:**

- a. Evidence of updated multiyear planning.
- b. Agendas and/or minutes demonstrating college communication and engagement on long-term fiscal issues.
- c. Current year revenue and expenditure data, such as the 2<sup>nd</sup> quarter 311 report.

**Request for Observations/Interviews:**

- a. Vice Chancellor of Finance & Administration
- b. Individuals involved with fiscal planning and leadership

**Core Inquiry 6:**

The team seeks to verify that the college is planning for and allocating resources to meet its long-term obligations, particularly its OPEB liability.

**Standards or Policies:** III.D.12

**Description:**

- a. The team has reviewed evidence demonstrating that the college withdrew over \$21 million from its OPEB fund to help balance its general fund budget in the 2020-21 fiscal year.
- b. The team has reviewed evidence that college has contributed \$8 million to its OPEB fund over the 2021-22 and 2022-23 fiscal years.
- c. The team has reviewed evidence demonstrating that the college's OPEB liability is \$118 million.
- d. The team would like to learn more about how the college plans to address its long-term OPEB liability in a permanent manner.

**Topics of discussion during interviews:**

- a. What is the college's plan to address its OPEB liability?
- b. How will the college ensure that transfers from the OPEB fund to the college's general fund will not re-emerge as a budget strategy?
- c. Does the college intend to develop policies and procedures to protect the OPEB fund from immediate budget needs?

**Request for Additional Information/Evidence:**

- a. Documentation demonstrating the college's plan to reduce the OPEB liability.
- b. Evidence of policy development that protects the OPEB fund from immediate budget needs.

**Request for Observations/Interviews:**

- a. Vice Chancellor of Finance & Administration
- b. Individuals responsible for OPEB management and planning.

**Core Inquiry 7:**

The team seeks to verify that that the college has appropriate policies and procedures relating to debt management.

**Standards or Policies:** III.D.13 and III.D.14

**Description:**

- a. The team has verified that the college owes a debt to the Chancellor's Office related to the repayment for disallowed FTES in prior years.
- b. The team has verified that college has renegotiated the payment plan in recent years and has accounted for the repayment in its long-term planning.
- c. The team has verified that the college has voter-approved debt in the form of general obligation bonds.
- d. The team has not been able to verify that the college has an approved policy for managing debt.

**Topics of discussion during interviews:**

- a. How does the college manage debt?
- b. Is there a policy in place outlining parameters for debt management, or are such policies in development?

**Request for Additional Information/Evidence:**

- a. Approved policies relating to debt management.

**Request for Observations/Interviews:**

- a. Vice Chancellor of Finance & Administration
- b. Individuals responsible for debt management

**Core Inquiry 8:**

The team seeks to verify that the governing board acts in a manner consistent with its policies and bylaws.

**Standards or Policies:** IV.C.7

**Description:**

- a. The team verified that board policies and procedures document how the governing board acts in a manner consistent with its approved policies and by-laws.
- b. The team was unable to verify through the evidence provided how the board regularly assesses the effectiveness of its policies and by-laws.
- c. The team was unable to verify through the evidence provided how the board acts in a manner consistent with its policies and by-laws

**Topics of discussion during interviews:**

- a. What are some examples of how the governing board acts in a manner consistent with its policies and bylaws.
- b. What are some examples of how the board regularly assesses its policies and by laws for their effectiveness.
- c. How is assessment data used to inform policy effectiveness?

**Request for Additional Information/Evidence:**

- a. Updated timeline and progress for review of Board policies and bylaws
- b. Meeting agendas/minutes/documents that demonstrates how the regular assessment of board policies and procedures are used to inform the Board's effectiveness

- c. Evidence from the Board’s self-evaluation that demonstrates how they operate within the Board’s policies and bylaws

**Request for Observations/Interviews:**

- a. Chancellor
- b. Board of Trustees Chair

**Core Inquiry 9:**

The team seeks to verify how the board empowers the Chancellor to implement and administer board policies without board interference and holds the Chancellor accountable for the operation of the district/college.

**Standards or Policies:** IV.C.12

**Description:**

- a. The team verified board policies are in place that delegate the executive responsibility for administering the policies adopted by the Board to the Chancellor.
- b. However, the team seeks to verify how the board holds the Chancellor accountable and how the Board delegates full responsibility to implement policies without interference from the Board.

**Topics of discussion during interviews:**

- a. What are some examples of how the Board holds the Chancellor accountable and how the board delegates full responsibility to implement policies without interference from the board.

**Request for Additional Information/Evidence:**

- a. Documentation demonstrating how the Board holds the Chancellor accountable for the operation of the district and college.

- b. Documentation demonstrating how the Board delegates full responsibility to the Chancellor to implement policies without interference.
- c. Any documentation that the Board follows its process for evaluating the Chancellor.

**Request for Observations/Interviews:**

- a. Chancellor
- b. Board of Trustee Chair