Review Dashboard

Number	Title	Rating
1	Mission	
1.A	Core Component 1.A	Met
1.B	Core Component 1.B	Met
1.C	Core Component 1.C	Met
1.D	Core Component 1.D	Met
1.S	Criterion 1 - Summary	
2	Integrity: Ethical and Responsible Conduct	
2.A	Core Component 2.A	Met With Concerns
2.B	Core Component 2.B	Met
2.C	Core Component 2.C	Met
2.D	Core Component 2.D	Met
2.E	Core Component 2.E	Met
2.S	Criterion 2 - Summary	
3	Teaching and Learning: Quality, Resources, and Support	
3.A	Core Component 3.A	Met
3.B	Core Component 3.B	Met With Concerns
3.C	Core Component 3.C	Met
3.D	Core Component 3.D	Met
3.E	Core Component 3.E	Met
3.S	Criterion 3 - Summary	
4	Teaching and Learning: Evaluation and Improvement	
4.A	Core Component 4.A	Met With Concerns
4.B	Core Component 4.B	Met With Concerns
4.C	Core Component 4.C	Met
4.S	Criterion 4 - Summary	
5	Resources, Planning, and Institutional Effectiveness	
5.A	Core Component 5.A	Met With Concerns
5.B	Core Component 5.B	Met
5.C	Core Component 5.C	Met With Concerns
5.D	Core Component 5.D	Met
5.S	Criterion 5 - Summary	

Review Summary

Interim Report(s) Required

Due Date
6/1/2021

Report Focus
Monitoring: Correction of Concerns Identified in the 2017 Audit from the Arizona Auditor General: Financial Reporting, Student Financial Assistance Cluster, TRIO Cluster, Information Technology, and Purchasing Controls

The Team recommends that Pima Community College submit a follow-up interim monitoring report on Federal Compliance: Title IV Program Responsibilities; Criterion 2, Core Component 2.A; and Criterion 5, Core Component 5.A. The report will address two fiscal years of corrective action and data. The report will detail status on the identified items with the time to correspond with the release of the Fiscal Years 2019 and 2020 Single Audit Report findings to ensure that the college can address federal compliance and auditor concerns.

1. The report will provide documentation that concerns within the Student Financial Assistance Cluster have been addressed
   1. Provide a plan and timeline for ongoing tracking of data and participating students to prevent further lapses
2. The TRIO Cluster audit finding resolution be verified on the Fiscal Year 2018 audit and compliance activities be noted on the previously recommended monitoring report.
   1. Document that audit findings were found to be resolved in the FY 2018 audit.
   2. Document what compliance activities have been implement and how they are monitored for consistency.
3. The Higher Education - Institutional Aid program which reappeared for Fiscal 2017 and has been identified on and off in past audits.
   1. Provide the plan and timeline that has been developed to ensure the Aid program remains in federal compliance.
   2. Describe the monitoring and improvement activities that have been implemented to ensure ongoing compliance.
4. Concerns over information technology: Security risk-assessment, Access controls, Configuration management, Information security policies and procedures, Information technology contingency planning.
   1. For each of the identified areas provide a description of the plans/procedures that are being implemented to correct concerns.
   2. For each of the identified areas describe the processes that have been developed to monitor and continue to improve how each of the area remains in compliance.
5. Internal controls over purchasing.
   1. Document the controls that have been put in place to bring purchasing into audit compliance.
   2. Describe the processes that have been created to maintain compliance and improve procedures.

Due Date
6/1/2021

Report Focus
Monitoring: Assessment of General Education, Course, and Program Learning Outcomes; Faculty Participation; Integration of Assessment and Program Review results into the Budgeting Processes

The team recommends a required follow-up interim report on Criterion 3, Core Component 3.B; Criterion 4, Core Component 4.A and Core Component 4.B; and Criterion 5, Core Component 5.C. The report should be submitted no later than June 2021. The report will demonstrate that PCC has maintained its focus, has implemented established practices, and has documented the results in order to achieve a meaningful process for the assessment of the general education (GELOs), course, and program learning outcomes and that those practices are being used to improve student learning. The report will also document growing participation of faculty in assessment, the use of eLumen to record results, and the use of data for improvement of content delivery and student learning. Finally, the report will demonstrate the processes developed for using learning outcome and program review data to substantiate funding for initiatives designed to improve student learning.

1. The interim report should contain the following documentation of the assessment of GELOs:
    1. Detailed documentation of faculty training on the eLumen system, faculty work with the office of AQI, and participation in the Assessment Academy events during 2019 and 2020.
    2. The rubrics used for GELOs assessment and a demonstration of how the rubric will result in data that are comparable and trackable.
    3. Detailed assessment that has been completed up to the reporting time for GELOs, including a list of courses, programs, and co-curricular activities utilized for the assessments.
    4. Several representative examples, data, and analysis of results from GELO assessment.
    5. A detailed summary providing specific examples of how analysis of assessment data has been used at the program and course levels for focused improvement of content delivery and student learning.
2. The interim report should contain the following documentation of the assessment of Program Learning Outcomes:
    1. Documentation of measurable program outcomes for all degrees, including Transfer Degree Programs.
    2. Detailed documentation of program assessment of those outcomes, including samples of the assessment of program learning outcomes**.**
    3. Several representative examples of how analysis of assessment data has been used at the program level for focused improvement of content delivery and student learning.
3. The interim report should contain the following documentation of the assessment of Course Learning Outcomes:
    1. Documentation of measurable course learning outcomes for all courses.
    2. Detailed documentation of course assessment of those outcomes.
    3. Several representative examples of how analysis of assessment data has been used at the course level for focused improvement of content delivery and student learning.
4. The interim report should contain the following documentation of the assessment of learning outcomes in co-curricular activities.
    1. Documentation of measurable learning outcomes for co-curricular activities (ideally connected to GELOs and/or program learning outcomes).
    2. Detailed documentation of assessment of the outcomes in activities.
    3. Representative examples of how analysis of assessment data is being used to improve activities.

5. The interim report should contain documentation of faculty participation.
    1. Description of a plan and timeline for increasing faculty participation.
    2. Description of professional development designed introduce faculty to effective rubric use, sharing of data through eLumen, and analyzing aggregated data.
6. The interim report should contain the following documentation of integration of learning outcomes and

program review data into the budgeting processes.

1. Description of the process/procedures that can be used to request funding support for initiatives developed as the result of assessment of learning outcomes and program review to improve content delivery and student learning
2. Description of how funds are set aside for funding of initiatives
3. Representative examples of initiatives funded, data used to support the requests, and the evaluation plan for the initiatives.

Conclusion

The Team recognizes that Pima Community College began the current evaluation period with several enormous challenges. The college was faced with addressing six separate concerns in embedded reports focused on assessment, planning, budgeting processes, and a redesign of developmental education. In addition, a Formal Complaint and the previous Comprehensive Evaluation Report brought to the Team's attention the stressors and divisiveness that existed on the campus at the time of the previous visit. During the Visit and the Multi-Campus Visits the Team had the opportunity to meet with over three hundred constituents coming from administration, middle management, staff, faculty, students, and external stakeholders. The Team was gratified at the collegiality, cooperation, and transparency it experienced from each of the groups at each of the locations it visited. While the Team is recommending two monitoring reports for the college, it also found that the college has moved forward in all the embedded report areas. The Team believes that the college begins addressing the monitoring areas with groundwork already laid. The Team also found the college moving forward with a structure which encourages collaboration and the sharing of best practices across campuses. The Team encourages PCC to maximize its foundational work and its functioning as a single accredited institution as it resolves the assessment, budget process, and Federal Compliance concerns.

The Team recommends that Pima Community College be limited to selecting the Standard Pathway. Remaining in the Standard Pathway will provide the college with more frequent touch points for assessing its progress as well as opportunities for receiving mentoring as it practices continuous quality improvement.

Overall Recommendations

Criteria For Accreditation
Met With Concerns

Sanctions Recommendation
No Sanction

Pathways Recommendation
Limited to Standard