

May 6, 2014



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Dr. Barbara Beno, President
Accrediting Commission for Community and Junior Colleges/WASC
10 Commercial Boulevard, Suite 204
Novato, CA 94949

**SUBJECT: CONFIDENTIAL to the Commission -
Spring 2014 Follow-Up Visit to Victor Valley College**

The team wishes to commend the Victor Valley College faculty, staff, administrators and trustees for their hard work in resolving the recommendations that remain from the 2011 Comprehensive visit. Since the time of the November 2013 visit, it is clear that the institution has rallied to the Interim president's leadership and continues to progress. Of particular note – several members of the governing board have provided substantial leadership in shaping the institution's work on financial stability. That being said, we are concerned about the institution's continued fragility particularly with respect to accreditation expertise and detailed fiscal planning.

Accreditation Expertise

As noted in the November Follow-up visit - the college has had three different Accreditation Liaison Officers during the course of the past three years and few faculty and administrative leaders have significant experience with ACCJC policies and standards. For this visit, the institution had improved in its ability to identify and provide evidences of practices that aligned with accreditation standards; but the team nevertheless still had to assist institution leaders in recognizing practices that met standards. This being said, the new Academic Vice President, who serves as the ALO, brings substantial transferable experiences from another regional accrediting commission and seems to have a clear grasp of the need to increase institutional expertise.

Fiscal Planning

The team is still concerned with institutional fiscal planning. The college has indeed refined its short-term financial planning in response to Recommendation 6; however, that plan is still highly contingent on forecasted increased enrollment-related apportionment ("growth") revenues at a time when enrollments are clearly declining. The plan is also highly dependent on negotiating concessions with employee labor groups. In that regard as noted in the report, the team determined that employee labor leaders seemed to have a change of heart regarding their previous skepticism of the college's fiscal deficit. This was attributed to the college president conducting informational forums regarding college finances and the governing board's public work to develop fiscal policies to eliminate deficit spending and bulwark various funds for fiscal stability. The team felt strongly that the institution needs a "Plan B" in the event labor costs could not be reduced through negotiations and/or the institution failed to achieve its budgeted enrollment growth.

In closing, again the team again acknowledges that college leadership, faculty and staff have accomplished a great deal even since the November visit. In this visit there was a palpable spirit of hope and confidence. The team feels that the institution has demonstrated the capacity to sustain this work particularly with the commitment of the governing board during the transition to a new president.

Respectfully,

A handwritten signature in blue ink, appearing to read 'D. Houston', with a long horizontal line extending to the right.

Douglas B. Houston, Ed. D Chancellor
Team Chair, Victor Valley College

Follow-up Report

**Victor Valley College
18422 Bear Valley Road
Victorville California 92395**

The report represents the findings of the External Evaluation Team that visited
Victor Valley College on April 15 and 17, 2014

Submitted to:

The Accrediting Commission for Community and Junior Colleges

Team Chair:

Dr. Douglas Houston, Chancellor, Yuba Community College District

Team Members:

Mr. Michael Carley, Associate Director of Institutional Research and Reporting, Kern CCD

Ms. Virginia Guleff, Vice-President of Education and Student Services, Mendocino College

Mr. Gary Whitfield, Vice President of Administrative Services, Columbia College

FOLLOW-UP VISIT REPORT

Date: May 5, 2014

To: Accrediting Commission for Community and Junior Colleges

From: Douglas B. Houston, Team Chair

Subject: Report of Follow-Up Visit Team to Victor Valley College,
April 16 and 17, 2014

Introduction:

A comprehensive visit was conducted of Victor Valley College in March 2011. At its meeting of June 8-10, 2011, the Commission acted to require Victor Valley to submit a Follow-Up Report by March 15, 2012, followed by a visit of Commission representatives. The visiting team, Mr. Michael Carley and Mr. Gary Whitfield, conducted the site visit to Victor Valley College on April 19, 2012. At the June 6-8, 2012 meeting, the Commission decided to continue Victor Valley College on Probation and require another Follow-Up Report and visit in October 2012. That visiting team, Dr. Henry Shannon, Mr. Michael Carley, Ms. Virginia Guleff and Mr. Gary Whitfield, conducted a site visit to Victor Valley College on November 7, 2012. At the January 9-11, 2013, meeting, the Commission decided to continue Victor Valley College on Probation and require another Follow-Up Report and visit in October 2013. In November, 2013 the Follow-Up visit was conducted, and at the January, 2014 meeting, the Commission decided to remove sanctions and require another Follow-Up Report and visit in March 2014.

The Follow-Up Report was completed and submitted on March 14, 2014. The current visiting team consisted of: Dr. Douglas Houston, Mr. Michael Carley, Ms. Virginia Guleff and Mr. Gary Whitfield. The purpose of the visit was to verify that the Follow-Up Report was accurate through the examination of evidence; to determine whether sustained, continuous improvements had been made at the institution; and to determine whether the institution had addressed the recommendations made by previous evaluation teams.

The team observed that the institution has accomplished a significant amount of work to address the remaining recommendations and commends the administration, faculty and staff for their efforts. The institution has experienced a significant change in administrative leadership since the time of the comprehensive visit; the interim President (the former Vice President of Instruction), and Vice President of Instruction are in their first year; a new Director of Human Resources had started at the beginning of April 2014. The team determined that these new leaders were enjoying the respect and appreciation of trustees, faculty and staff alike. That being said, as with the previous visit, the team feels strongly that the institution will benefit when the leadership team has developed a deeper institutional competency with the accreditation process and in particular with ACCJC Standards.

The Follow-Up Report and Visit were expected to demonstrate resolution of the following:

Recommendation 2: As noted in recommendations 1 and 6 of the 2005 Accreditation Evaluation Report, and in recommendations from the reports of 1993 and 1999, and in order to meet the Standards and the Eligibility Requirements, the College should establish and maintain an ongoing, collegial, self-reflective dialog about the continuous improvement of student learning and institutional processes. (I.B.1, ER19) This process should include:

- Goals to improve effectiveness that are stated in measurable terms so that the degree to which they are achieved can be determined and widely discussed. (I.B.2)
- An evaluation of all programs throughout the College so that it assesses progress toward those goals and ensures that participation is broad-based throughout the College. (I.B.3, I.B.4)
- Documented assessment results for all courses, programs, and the institution. (I.B.5, II.A.1.a, II.B.4)
- Formal processes to evaluate the effectiveness of its ongoing planning and resource allocation processes. (I.B.6, I.B.7)
- Integration of planning with decision-making and budgeting processes to ensure that decisions to allocate staff, equipment, resources, and facilities throughout the College are based on identified strategic priorities and to ensure a continuous cycle of evaluation and improvement based upon data. (I.B.2, I.B.3, I.B.6, III.C.2, IV.B.2.b)
- An integration of the total cost of facilities ownership in both the short and long term planning processes. (III.B.1.c) [NOTE: III.B.1.c does not exist; the team probably meant III.B.2.a, given context]
- An assessment of physical resource planning with the involvement of the campus community. (III.B.1.a, III.B.2.a, III.B.2.b)
- A systematic assessment of the effective use of financial resources, with particular regard to meeting the needs of Library materials and technological resources, and the use of the results of this assessment as the basis for improvement. (II.C.1, II.C.2, III.D.3)

Recommendation 3: As noted in recommendation 2 of the 2005 Accreditation Evaluation Report, and in order to meet the Standards and the Eligibility Requirements, the College should complete the development of student learning outcomes for all programs and ensure that student learning outcomes found on course syllabi are the same as the student learning outcomes found on the approved course outlines of record. The institution must accelerate its efforts to assess all student learning outcomes for every course, instructional and student support program, and incorporate analysis of student learning outcomes into course and program improvements. This effort must be accomplished by fall 2012 as a result of broad-based dialog with administrative, institutional and research support. Student learning outcomes need to become an integral part of the program review process, including incorporating detailed documented analysis from SLO assessments and data-based research. Additionally, faculty and others directly responsible for student progress toward achieving stated learning outcomes should have, as a component of their evaluation, effectiveness in producing those learning outcomes (I.B.1-7, II.A.1.c, II.A.2.a-b, II.A.2.e-f, II.B.4, II.C.2, III.A.1.c, Eligibility Requirement 10).

Recommendation 6: In order to meet the Standards, the College should develop long-term fiscal plans that support student learning programs and services that will not rely on using unrestricted

reserves to cover deficits. Additionally, the College should provide timely, accurate and comprehensive financial data and budget projections for review and discussion throughout the institution. (III.D, III.D.1.a, III.D.1.c, III.D.2.b, III.D.2.c, Eligibility Requirement 17)

College Responses to the 2011 External Evaluation Team Recommendations

Recommendation 2: As noted in recommendations 1 and 6 of the 2005 Accreditation Evaluation Report, and in recommendations from the reports of 1993 and 1999, and in order to meet the Standards and the Eligibility Requirements, the College should establish and maintain an ongoing, collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes. (I.B.1, E.R. 19) This process should include:

- **Goals to improve effectiveness that are stated in measurable terms so that the degree to which they are achieved can be determined and widely discussed. (I.B.2)**
- **An evaluation of all programs throughout the College so that it assesses progress toward those goals and ensures that participation is broad-based throughout the College. (I.B.3, I.B.4)**
- **Documented assessment results for all courses, programs, and the institution. (I.B.5, II.A.1.a, II.B.4)**
- **Formal processes to evaluate the effectiveness of its ongoing planning and resource allocation processes. (I.B.6, I.B.7)**
- **Integration of planning with decision-making and budgeting processes to ensure that decisions to allocate staff, equipment, resources, and facilities throughout the College are based on identified strategic priorities and to ensure a continuous cycle of evaluation and improvement based upon data. (I.B.2, I.B.3, I.B.6, III.C.2, IV.B.2.b)**
- **An integration of the total cost of facilities ownership in both the short and long term planning processes. (III.B.1.c)**
- **An assessment of physical resource planning with the involvement of the campus community. (III.B.1.a, III.B.2.a, III.B.2.b)**
- **A systematic assessment of the effective use of financial resources, with particular regard to meeting the needs of Library materials and technological resources, and the use of the results of this assessment as the basis for improvement. (II.C.1, II.C.2, III.D.3)**

Findings and Evidence: Since previous visits, the College has made continued progress on this recommendation.

As of the spring 2012 visit, the College had refined their program review processes for clarity and to engender greater participation. The team found reason for optimism as the College had adopted a definition of programs, created a list of programs to undergo review, and had established a cycle for review.

The team was concerned however that the definition of programs remained vague and unclear, that the length of the cycle (six years with annual updates) was too long and that many programs still did not appear to be participating in the program review process. In addition, of those that participate in program review, many did not include assessment information.

By the fall 2012 visit, the College had made continued progress, having clarified aspects of their program review process, reduced the time period of the program review cycle from six years to three with annual updates for instructional programs and an annual process for non-instructional programs, improved and clarified the number of programs actually completing, and added clarity in a number of areas.

By the fall 2013 visit, there had been additional progress. Further clarifications have been made to the definition of a program and more importantly, the College had a more accurate list of programs that are expected to complete program review and they appeared to be following that list. Much of the confusion apparent in previous visits had been reduced or eliminated.

Most importantly, the College was following through with program review more fully; programs were completing reviews as scheduled and most were engaging in assessment with assessment being documented in their TracDat system. Dialogue was improved and was being documented in the College's processes.

The team had a number of smaller remaining concerns regarding variation in the quality of reviews and accountability for programs who do not fully participate in the process. However, the team was optimistic that these issues were being addressed.

Overall, as of fall 2013, the team found that the College had fully met the recommendation. The Commission concurred and the College was removed from probation and its accreditation status was reaffirmed.

Continued progress has been made since the fall 2013 visit. The dialogue the College had begun last year has been formalized and is being documented in their program review processes. The College has taken a number of measures that continue to refine processes and procedures, streamlining and clarifying the links between program review, budget and other planning processes and improving the assessment aspect of program review.

There has been some continued improvement on accountability as well. Non-instructional program reviews are rated against a rubric and instructional program reviews have a voluntary peer technical review process. Both groups have used this process to improve the quality of the documents they receive. This accountability process could be improved however by having program reviews that are not of sufficient quality returned for improvement.

The team was happy to see that there is a practice of intentional integration between the instructional and non-instructional program review committees and the finance, budget, and planning committee, with two or all three of them holding joint meetings, and/or issuing joint memoranda. This practice should be formalized so as to prevent processes from diverging more than is necessary.

The College has also somewhat extended use of its Institutional Effectiveness Scorecard which tracks several student success and other measures the College views as critical to its continued effectiveness. The team suggests that this Scorecard continue to be used and become a larger point of focus for the College in its planning processes. Although there has been some dialogue about the Scorecard, it is not yet receiving the attention it deserves. It would be beneficial for the College to formalize the use of this Scorecard in several of its committees as appropriate.

There have been some delays and problems with timelines and communication associated with the program review and planning processes. The deans and vice presidents could improve the process by implementing formal rubrics and criteria to address resource allocations and by communicating to those who do and do not receive the requested funds pursuant to established procedures.

Another area that needs additional attention is enrollment management planning. The College seems to have been caught off guard recently by an enrollment shortfall that could impact its fiscal outlook in both the short and long term. By incorporating enrollment management planning more fully in the overall planning process, the College may be able to foresee and avoid such problems in the future.

There was one additional point of concern for the team. The chair of the Non-Instructional Program Review Committee (NIPRC) resigned from the position last fall, stalling continued progress in that area. A new chair has been identified, but the committee still has not met. In the time members of this team have been visiting the College, this is the second time a committee chair has resigned resulting in stalled progress on important issues and a committee not meeting at all. While the team is not issuing a new recommendation, this development is similar to concerns that came up during the 2011 visit with regard to climate (2011 recommendation #4) and leadership and succession planning (2011 recommendation #7). The College should be vigilant to ensure that their processes and procedures allow for continued operation and progress on important issues during changes in leadership at all levels. College policies, procedures, and work systems need to be clarified so that work continues despite changes in personnel and that no leadership absence can paralyze the continuous work of the College.

Overall, while there are several small areas listed above that could be improved, the team continues to view this recommendation as completed and is pleased with the continued progress the College has made since the last visit.

Conclusion: The team continues to view this recommendation as having been met. The College has made additional progress since the fall 2013 visit and the team believes that the College is now engaged in planning that is ongoing and continually improving.

Team Recommendation 3: Student Learning Outcomes

As noted in recommendation 2 of the 2005 Accreditation Evaluation Report, and in order to meet the Standards and the Eligibility Requirements, the College should complete the development of student learning outcomes for all programs and ensure that student learning outcomes found on course syllabi are the same as the student learning outcomes found on the approved course outlines of record. The institution must accelerate its efforts to assess all student learning outcomes for every course, instructional and student support program, and incorporate analysis of student learning outcomes into course and program improvements. This effort must be accomplished by fall 2012, as a result of broad-based dialogue with administrative, institutional and research support. Student learning outcomes need to become an integral part of the program review process, including incorporating detailed documented analysis from SLO assessments and data based research. Additionally, faculty and others directly responsible for student progress toward achieving stated learning outcomes should have, as a component of their evaluation, effectiveness in producing those learning outcomes. (I.B.1-7, II.A.1.c, II.A.2.a-b, II.A.2.e-f, II.B.4, III.A.1.c, E.R. 10)

Findings and Evidence: The College was not required by the Commission to respond to Recommendation 3 from the spring 2011 site visit until the fall of 2012. During the spring 2012 follow up visit, the visiting team noted that the College provided evidence indicating that substantial effort in training and dialogue on outcomes and assessment practices were in progress. However, a need or a sufficient mechanism for storing and reviewing assessments was noted along with the College's plan to adopt and implement TracDat for this purpose.

It was noted in the fall 2012 follow up visit that all courses had SLOs and all were on an assessment schedule; additionally, the course-level SLOs that appear on syllabi matched with those in the course outline of record.

However, it was noted that not all course-level SLOs had been assessed. In fact, for the institution as a whole, 51% of course-level SLOs had been assessed, based on a tally from the TracDat report. In terms of program-level SLO assessments, only two programs were participating in the process. Program-level SLOs did not appear in the catalog, nor did they consistently appear on program websites. Widespread discussion of SLO and PSLO assessment results was not evidenced.

Non-instructional program-level SLO assessments were observed as being more robust, with student services noted as using results to create action plans and implement change.

A review of the College catalog indicated that program-level student learning outcomes were not included. Additionally, effectiveness in producing learning outcomes as a component of evaluation had not been addressed.

Evidence of clear mappings between program and course-level outcomes to specific Institutional and General Education Outcomes was not evident. Widespread dialogue about assessment results was not observed nor was it clear how SLO assessment results were used in decision-

making processes to ensure continuous improvement. It was found that the College had made significant progress but that there were remaining components to address in this recommendation.

In the fall 2013 follow up visit, significant improvement in the tracking and completion of course-level and program-level student learning outcomes was noted. 86% of all course-level SLOs had been assessed and 85% of all program-level SLOs had been assessed. Significant improvement in the assessment of institutional student learning outcomes (ILOs) was also noted. The College assessed all of its existing ILOs in May 2013 using the ETS Proficiency Profile Exam; assessment results were compared with other two-year colleges and were discussed in the SLOAC committee. This spring 2014 an additional ILO was added regarding social and personal responsibility.

The visit in fall 2013 indicated that Division Deans ensure that student learning outcomes found on course syllabi are the same as the student learning outcomes found in the course outline of record. Evidence gleaned from the Follow Up Report as well as from the visit indicated that both course-level and program-level SLO assessment results are reported in program review documents. An improvement was noted in the listing of program-level SLOs in the College catalog.

In terms of widespread dialogue and the culture of evidence as related to student learning outcomes assessment results, the College provided evidence of dialogue at the August 2013 convocation day as well as previous campus communication days. During the fall 2013 visit, the visiting team was provided with further documentation of the use of SLO assessment results in both a staffing prioritization project through the Academic Senate and in a prioritization process in the Finance, Budget and Planning Committee. In particular, the prioritization rubric from FBPC includes an evaluation of assessment results as a factor in determining resource allocation.

Based on the evidence presented to the fall 2013 visiting team, it was concluded that the College continued to make progress on this recommendation and that their significant amount of work was commendable. Two areas were noted for further follow up: the use of the Assessment Dialog Form to increase institution-wide dialogue on student learning outcomes and the inclusion of student learning outcomes in faculty evaluations.

The spring 2014 Follow Up Report and the campus visit on April 16, 2014, have confirmed that the institution continues to maintain a high level of SLO assessment completion at the course and program level. 86% of course-level SLOs and 82% of program-level SLOs have been assessed. Additionally, documentation provided during this visit as well as during the visit in fall 2013 indicates that all ILOs have been assessed.

Department meeting minutes and evidence from interviews indicate that the Assessment Dialog Form has been successful in initiating broad discussion about course-level and program-level SLO assessment results. The success of these dialog forms has led to the development of a dialog form for ILOs. Evidence from the Finance, Budgeting and Planning Committee (FBPC) confirms that student learning outcome assessment results continue to be used in resource allocation.

One remaining issue is the inclusion of student learning outcomes in faculty evaluations. During the fall 2013 visit, it was noted that discussions were occurring between management and faculty regarding this issue. Further clarification was gained during the April 16, 2014, visit. According to interviews, the inclusion of student learning outcomes in faculty evaluations has been proposed for negotiations with the faculty union. Faculty union representatives have indicated they understand the importance of this collective bargaining piece.

Conclusion: The College continues to meet the first four sections of Recommendation 3. The College should complete the work on meeting the final section of the recommendation and include student learning outcomes as a component of faculty evaluations.

Recommendation 6: In order to meet the Standards, the College should develop long-term fiscal plans that support student learning programs and services that will not rely on using unrestricted reserves to cover deficits. Additionally, the College should provide timely, accurate and comprehensive financial data and budget projections for review and discussion throughout the institution. (III.D, III.D.1.a, III.D.1.c, III.D.2.b, III.D.2.c, E.R. 17)

Findings and Evidence:

At the time of the current visit, the College developed a plan to address a deficit projected in the current fiscal year of \$6.3 million dollars. The College identified revenue production amounting to \$3.26 million dollars and identified negotiated salary and benefit reductions of \$2.91 million dollars to reduce the deficit by \$6.17 million dollars. The following is the detail of the revenues and proposed negotiated reductions:

Revenue Production	
Interest earnings of the Guaranteed Investment Contract	\$2,000,000
Recovery of Mandated Costs	\$ 250,000
State Funded COLA	\$ 711,000
Growth Funds	\$ 300,000
Total Revenue Production	<u>\$3,261,000</u>
Negotiated Reductions	
Faculty summer session compensation	\$1,000,000 (proposed)
Instructional Assistant from 12 months to 10 months	\$ 164,000 (proposed)
Cap and employee contributions to benefits	\$1,000,000 (proposed)
Management salary schedule adjustment to front end *	\$ 750,000
Total reductions	<u>\$2,914,000</u>
Total of plan (Revenue plus negotiated reductions)	\$6,175,000

*Note * amount not identified in report so it was calculated*

The Board of Trustees placed three policies on the March 11, 2014, agenda. One policy was to address the use of the Guaranteed Investment Contract ("GIC") Fund and the other two to limit the percentages allowable for total salaries and benefits of the general fund expenditures and the other to limit the allowable percentage of instructional employee salary and benefits:

March 11, 2014 First reading of Board Policies

2515-Use and Distribution of the Guaranteed Investment Contract ("GIC") Fund

2520-Percentage of Budget Committed to Salary and Benefits

2525- Percentage of Budget Committed to Classroom Instructional Employee Salary and Benefits

The Board meeting was viewed online and policies 2515 and 2520 were opened for discussion and input from the audience. Policies 2515 and 2520 were moved forward for a second reading at the next Board Meeting on April 8, 2014. Policy 2525 was tabled for further review by the Board. At the April 8, 2014, Board Meeting policy 2515 - Use and Distribution of the Guaranteed Investment Contract ("GIC") Fund and 2520 - Percentage of Budget Committed to Salary and Benefits was tabled and the Board directed the policies be reviewed by governance committees after comments from the audience indicated the proposed policies were not reviewed by the governance process.

The Board's intention on Board Policy 2515 Use and Distribution of the Guaranteed Investment Contract ("GIC") Fund was to designate the use of the fund and to limit the time the interest could be used to cover the deficit spending in the General Fund. The policy would limit the use of the interest through the 2017-2018 Fiscal Year. The recommendation for a Board Policy for the use of the GIC "as an endowment fund, special revenue enhancement fund, or some other name that acknowledges the intent" was written on page 48 of the FCMAT report dated April 3, 2013.

The Follow-Up report indicates that the plan will negotiate \$2.9 million dollars in concessions from the bargaining groups, and the team interviewed leaders from the Victor Valley Faculty Association / California Teachers Association (CTA) Chapter 1169, AFT Part-Time Faculty United Local 6286 and California School Employees Association Chapter (CSEA) Chapter 584. The team also interviewed the new Director of Human Resources, the Vice President of Administrative Services and a contracted Chief Negotiator – all members of the bargaining team for the College.

The interviews indicated that two (CTA/CSEA) of the three bargaining units understand the current deficit spending of the College, but at the time of the interviews the bargaining process has not addressed compensation or benefits. Negotiations with AFT, the part-time faculty bargaining group, have reached impasse and moved to fact finding. AFT is negotiating for an increase in their hourly rate. The members representing the College have settled several articles for CSEA and have two meetings scheduled, within the next month, with CTA and CSEA to continue the negotiations on the remaining Articles which include compensation and benefits.

During the interviews it was noted that the College is experiencing declining enrollment and the summer session needs to generate approximately 900 FTE's to meet the College FTE target to meet both the restoration and the mid-size College funding. The College also rolled back 550 FTE's from the prior summer to meet the College FTE target for 2012-2013. The team is concerned the declining enrollment can materially affect State Apportionment if the College is categorized as a small college in future years and loses the \$1,000,000 funding for a mid-sized college.

Conclusion: While the creation of a plan to reduce deficit spending is in place the team is not sure of the outcome of the negotiated reductions to salaries and benefits since those items have not been addressed at the time of our visit. The Board has been proactive in defining the use of the GIC with a policy, but the policy has not been implemented yet. The declining enrollment is a concern to the future funding of the College and could add to the overall structural deficit. The team concludes that this recommendation will require more time to evaluate the progress of negotiations, the implementation of Board Policies and the declining enrollment concerns. The team suggests that the College create an Enrollment Management process to ensure that fiscal planning is predicated, in part, on enrollment forecasting. The team also suggests that the College develop alternative fiscal plans for unforeseen events that could have material affects to the deficit spending, i.e. results of negotiations and enrollment affects to funding.