

# LPC GOVERNANCE WORKSHEET FOR 2024-2025 – V2

Committee Name: Student Learning Outcomes Committee

Form Completed by: John J. Rosen

Position: Committee Chair

**LPC Mission Statement:**

*Las Positas College provides an inclusive learning-centered, equity-focused environment that offers educational opportunities and support for completion of students’ transfer, degree, and career-technical goals while promoting lifelong learning.*

**Instructions**

The purpose of this worksheet is to allow each Committee, Subcommittee, Senate, or Union to review its charge, responsibilities, and membership yearly as documented in the [LPC Shared Governance Handbook](#). Committees should ensure that their charge supports the LPC Mission Statement and Accreditation Standards. This form will serve to document changes, if needed. If changes are requested, committees must obtain approval from any constituency groups involved prior to returning this form to the President’s Office to be reviewed by College Council. Once approved by College Council, updates will be made to the Shared Governance Handbook.

**Committee Academic Year Timeline**

Month	Activity
February	<ul style="list-style-type: none"> <li>• Committees discuss and finalize committee changes and/or structure.</li> <li>• Chair completes Governance Worksheet with or without changes and signs on behalf of the committee.</li> </ul>
March	<ul style="list-style-type: none"> <li>• Governance Worksheet goes forward to Academic Senate (if appropriate).</li> <li>• Governance Worksheet goes forward to College Council for approval.</li> <li>• College Council Meeting – Approvals of Governance Committee Changes.</li> <li>• If there are significant changes, Committee Chair or Designee must attend the Council Meeting.</li> </ul>
April	<ul style="list-style-type: none"> <li>• Shared Governance Participants’ Document and Governance Handbook updated with committee changes.</li> <li>• President’s Office sends reminder to Academic and Student Services Divisions, Classified Senate, and Administrators to update membership.</li> <li>• Student Services Division Meeting agenda item: committee memberships.</li> <li>• Admin Staff Meeting agenda item: committee memberships.</li> <li>• Classified Senate Meeting agenda item: committee memberships.</li> <li>• Academic Divisions Meeting agenda item: committee memberships.</li> </ul>
May	<ul style="list-style-type: none"> <li>• Admin Staff finalizes committee memberships.</li> <li>• Student Services Division finalizes committee memberships.</li> <li>• Classified Senate finalizes committee memberships.</li> <li>• Academic Divisions finalizes committee memberships.</li> <li>• Academic Divisions, Student Services Divisions, Classified Senate, and Admin Staff sends committee representation to President’s Office for web site updates.</li> </ul>
August	<ul style="list-style-type: none"> <li>• President’s Office posts DRAFT Governance Participants on website.</li> </ul>
September	<ul style="list-style-type: none"> <li>• Faculty Association sends list of appointments.</li> <li>• LPCSG sends list of appointments to President’s Office.</li> <li>• Committees send President’s Office Committee Chair selection.</li> <li>• President’s Office posts FINAL Governance Participants on website.</li> <li>• Committee Chair/Support updates committee web site with changes and committee representation.</li> </ul>

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## Committee Tasks for 2023-24

Committee Name: **Student Learning Outcomes Committee**

Form Completed by: **John J. Rosen**

Position: **Committee Chair**

### **LPC Mission Statement:**

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### **Instructions**

List tasks the committee completed in 2023-2024 in support of the committee charge.

1. Reviewed and approved new and revised SLOs, PSLOs, and SAOs
2. Held Flex Day workshop on developing, completing, and submitting 3-Year Assessment Plans
3. Assisted the Program Review Committee with the reading and summarizing of annual program reviews
4. Provided regular assistance/training for faculty on how to assess and analyze SLOs and PSLOs in eLumen
5. Presented to the New Faculty Workshop about the SLO Committee and LPC's SLO assessment process
6. Joined administrators, members of the Curriculum and Program Review Committees in regular meetings with our CurrIQunet Meta representative to help set up our curriculum and assessment forms as we prepare to transition from eLumen to CurrIQunet Meta.
7. Provided monthly reports to the Academic Senate

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Use the information from the [Shared Governance Handbook](#) and the [Committee Participants](#) list to determine whether changes need to be made for 2024-2025.

### 1. Charge:

The Charge is satisfactory, no changes.

The Charge will change. The updated Charge is attached.

### 2. Reporting Relationship:

It is recommended the reporting relationship remains the same.

It is recommended the reporting relationship changes.

The committee will report to:

Academic Senate

College Council

Faculty Association

President

Vice President of \_\_\_\_\_

Other \_\_\_\_\_

### 3. Chairmanship:

It is recommended that the chair:

Selection remains the same

Selection method changes to: Selected by ex-Officio: Vice President of Academic Services with approval of the Academic Senate

### 4. Membership:

The committee has the expertise and collegial representation to successfully meet the charge; it is recommended membership remains the same.

The committee recommends membership changes to ensure expertise and collegial representation to successfully meet the charge.

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**Voting Members (list positions, not actual names):** (e.g., V.P. of Student Services, 4 Classified, 1 faculty from each Division, etc.)

1. 2 Administrators \_\_\_\_\_
2. 2 Faculty from each Division \_\_\_\_\_
3. Curriculum Specialist \_\_\_\_\_
4. 1 Classified Professional (preferably from Student Services) \_\_\_\_\_
5. 2 students \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_

Total Voting Members: 14

Quorum (50% + 1): 8

**Non-Voting Members:** (e.g., President, 2 students, 1 faculty from each Division, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**Members appointed by: (check all that apply)**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Academic Senate | <input type="checkbox"/> Faculty Association |
| <input type="checkbox"/> Classified Senate          | <input type="checkbox"/> SEIU                |
| <input checked="" type="checkbox"/> Administration  | <input type="checkbox"/> Student Senate      |

**5. Term: (check one)**

- 1 year       2 years       Other

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## 6. Accreditation

This committee supports the following [Accreditation Standards](#) dated January 2024:

**PLEASE HIGHLIGHT THE STANDARDS YOUR COMMITTEE SUPPORTS.**

### Standard 1: Institutional Mission and Effectiveness

The institution has a clearly defined mission that reflects its character, values, organizational structure, and unique student population. The mission outlines the institution's explicit commitment to equitable student achievement and serves as a guiding principle for institutional planning, action, evaluation, improvement, and innovation.

- 1.1. The institution has established a clearly defined mission that appropriately reflects its character, values, structure, and unique student demographics. The institution's mission articulates its commitment to ensuring equitable educational opportunities and outcomes for all students. (ER 6)
- 1.2. The institution establishes meaningful and ambitious goals for institutional improvement, innovation, and equitable student outcomes.
- 1.3. The institution holds itself accountable for achieving its mission and goals and regularly reviews relevant, meaningfully disaggregated data to evaluate its progress and inform plans for continued improvement and innovation. (ER 3, ER 11)
- 1.4. The institution's mission directs resource allocation, innovation, and continuous quality improvement through ongoing systematic planning and evaluation of programs and services. (ER 19)
- 1.5. The institution regularly communicates progress toward achieving its mission and goals with internal and external stakeholders in order to promote understanding of institutional strengths, priorities, and areas for continued improvement. (ER 19)

#### ***Required Documentation – Institutional Mission and Effectiveness***

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Institutions must also include documentation of the required items below. This documentation can be included as supporting evidence for the Standard narratives if appropriate, or they may be provided as stand-

alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- 1i. Documentation of the institution's authority to operate as a post-secondary education institution and award degrees (e.g., degree-granting approval statement, authorization

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to operate, articles of incorporation) (ER 1)

- 1ii. Procedures/practices for periodic review of mission/mission-related statements, including provisions for revision (if/when revisions are needed) that allow for participation of institutional stakeholders, as appropriate for the character and context of the institution
- 1iii. Documentation of the governing board's approval of the institutional mission (ER 6)
- 1iv. Procedures/processes for setting institutional goals, including provisions for the inclusion of input from relevant institutional stakeholders, as appropriate for the character and context of the institution
- 1v. Documentation that the institution has established standards and goals for student achievement (i.e., institution-set standards), including but not limited to standards and goals for successful course completion, certificate completion, degree completion, transfer rates, job placement rates, and licensure examination pass rates, at the institutional and program levels (ER 2, ER 11)

### Standard 2: Student Success

In alignment with its mission, the institution delivers high-quality academic and learning support programs that engage and support students through their unique educational journeys. Academic and learning support programs promote equitable student success, and the institution evaluates student learning and achievement data to inform improvements and advance equitable outcomes.

2.1. Academic programs at all locations and in all modes of delivery are offered in fields of study consistent with the institution's mission and reflect appropriate breadth, depth, and expected learning outcomes. (ER 3, ER 9, ER 12)

2.2. The institution, relying on faculty and other appropriate stakeholders, designs and delivers academic programs that reflect relevant discipline and industry standards and support equitable attainment of learning outcomes and achievement of educational goals. (ER 3, ER 9, ER 11, ER 14)

2.3. All degree programs include a general education framework to ensure the development of broad knowledge, skills, and competencies related to communication, quantitative reasoning, critical thinking, information literacy, civic responsibility, and the ability to engage with diverse perspectives. (ER 12)

2.4. The institution communicates clear, accurate, and accessible information regarding programs, services, and resources that foster success in students' unique educational journeys. (ER 20)

2.5. The institution holds itself accountable for students' success by scheduling courses in a manner that ensures degree and certificate programs can be completed in the expected period of time. (ER 9)

2.6. The institution uses delivery modes and teaching methodologies that meet student and

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curricular needs and promote equitable student learning and achievement.

- 2.7. The institution designs and delivers equitable and effective services and programs that support students in their unique educational journeys, address academic and non-academic needs, and maximize their potential for success. Such services include library and learning resources, academic counseling and support, and other services the institution identifies as appropriate for its mission and student needs. (ER 15, ER 17)
- 2.8. The institution fosters a sense of belonging and community with its students by providing multiple opportunities for engagement with the institution, programs, and peers. Such opportunities reflect the varied needs of the student population and effectively support students' unique educational journeys. (ER 15)
- 2.9. The institution conducts systematic review and assessment to ensure the quality of its academic, learning support, and student services programs and implement improvements and innovations in support of equitable student achievement. (ER 11, ER 14)

### ***Required Documentation – Student Success***

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Institutions must also include documentation of the required items below. This documentation can be included as supporting evidence for the Standard narratives if appropriate, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- 2i. Documentation that the institution's practices for awarding credit reflect generally accepted following norms in higher education, including:
- commonly accepted minimum program lengths for certificates, associate degrees, and baccalaureate degrees;
  - written policies for determining credit hours that are consistently applied to all courses, programs, and modalities;
  - adherence to the Department of Education's standards for clock-to-credit hour conversions, if applicable; and
  - methodology to reasonably equate the direct assessment program to credit or clock hours, if applicable

(ER 10, [Policy on Credit Hour, Clock Hour, and Academic Year; Policy on Competency Based Education](#)) 2ii. Documentation that the institution's transfer of credit policies include the following:

- Any established criteria the institution uses regarding the transfer of credit earned at another institution
- Any types of institutions or sources from which the institution will not accept credits
- A list of institutions with which the institution has established an articulation agreement
- 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

([Policy on Transfer of Credit](#))

2iii. Documentation of the institution's advertising and recruitment policies, demonstrating alignment with the [Policy on Institutional Advertising and Student Recruitment](#) (ER 16)

2iv. Documentation of clear policies and procedures for handling student complaints, including

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- Evidence that these policies/procedures are accessible to students in the catalog and online;
  - Evidence that that institution provides contact information for filing complaints with associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs
- 2v. Verification that the institution maintains files of formal student complaints received throughout the current accreditation cycle (i.e., since the last site visit), demonstrating
- Accurate and consistent implementation of complaint policies and procedures;
  - No issues indicative of noncompliance with Standards
- 2vi. Verification that student records are stored permanently, securely, and confidentially, with provision for secure backup
- 2vii. Documentation of the institution’s policies and/or practices for the release of student records
- 2viii. Documentation that the institution’s policies and procedures for program discontinuance provide enrolled students with opportunities for timely completion in the event of program elimination

### **FOR TITLE IV PARTICIPANTS**

- 2ix. Documentation of the institution’s implementation of the required components of the Title IV Program, including
- Findings from any audits and program/other review activities by the U.S. Department of Education (ED)
  - Evidence of timely corrective action taken in response to any Title IV audits or program reviews ([\*Policy on Institutional Compliance with Title IV\*](#))

### **FOR INSTIUTIONS WITH DISTANCE EDUCATION AND/OR CORRESPONDENCE EDUCATION**

- 2x. Documentation of the institution’s
- Procedures for verifying that the student who registers in a course offered via distance education or correspondence education is the same person who participates in the course and receives academic credit;
  - Policies and/or procedures for notifying students of any charges associated with verification of student identity (if applicable);
  - Policies regarding protection of student privacy
- ([\*Policy on Distance Education and on Correspondence Education\*](#))

### **REQUIRED ONLY IF APPLICABLE**

- 2xi. Documentation demonstrating how the institution distinguishes its pre-collegiate curriculum from its college-level curriculum
- 2xii. Documentation of policies and/or procedures for awarding credit for prior learning and/or competency- based credit
- 2xiii. Documentation of agreements with other external parties regarding the provision of student and/or learning support services
- 2xiv. Policies and/or other documentation related to institutional expectations of conformity with any specific worldviews or beliefs



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### Standard 3: Infrastructure and Resources

The institution supports its educational services and operational functions with effective infrastructure, qualified personnel, and stable finances. The institution organizes its staffing and allocates its physical, technological, and financial resources to improve its overall effectiveness and promote equitable student success. The institution actively monitors and assesses resource capacity to inform improvements to infrastructure and ensure long-term health and stability.

- 3.1. The institution employs qualified faculty, staff, administrators, and other personnel to support and sustain educational services and improve student success. The institution maintains appropriate policies and regularly assesses its employment practices to promote and improve equity, diversity, and mission fulfillment. (ER 8, ER 14)
- 3.2. The institution supports its employees with professional learning opportunities aligned with the mission and institutional goals. These opportunities are regularly evaluated for overall effectiveness in promoting equitable student success and in meeting institutional and employee needs.
- 3.3. The institution evaluates its employees regularly, using clear criteria that align with professional responsibilities and reflect the institution's mission and goals.
- 3.4. The institution develops, maintains, and enhances its educational services and operational functions through the effective use of fiscal resources. Financial resources support and sustain the mission and promote equitable achievement of student success. (ER 18)
- 3.5. The institution's mission and goals are the foundation for financial planning. Financial information is disseminated to support effective planning and decision-making and provide opportunities for stakeholders to participate in the development of plans and budgets.
- 3.6. The institution ensures the integrity and responsible use of its financial resources and regularly evaluates its fiscal outcomes and financial management practices to promote institutional mission fulfillment.
- 3.7. The institution ensures financial solvency. When making short-range financial plans, the institution considers its long-range financial priorities and future obligations to ensure sustained fiscal stability. (ER 18)
- 3.8. The institution constructs and maintains physical resources to support and sustain educational services and operational functions. The institution ensures safe and effective physical resources at all locations where it offers instruction, student services, and/or learning supports.
- 3.9. The institution implements, enhances, and secures its technology resources to support and sustain educational services and operational functions. The institution clearly communicates requirements for the safe and appropriate use of technology to students and employees and employs effective protocols for network and data security.
- 3.10. The institution has appropriate strategies for risk management and has policies and procedures in place to implement contingency plans in the event of financial, environmental, or technological emergencies and other unforeseen circumstances.

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### *Required Documentation – Infrastructure and Resources*

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Evidence sources will vary from institution to institution. Institutions must also include documentation of the items below. These required items can be included as supporting evidence for the Standard narratives, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- 3i. Written policies and procedures for human resources, including hiring procedures
- 3ii. Employee handbooks or similar documents that communicate expectations to employees
- 3iii. Annual financial audit reports (3 prior years, include auxiliary organizations, if applicable) (ER 5)
- 3iv. Practices for resource allocation and budget development (including budget allocation model for multi- college districts/systems)
- 3v. Policies guiding fiscal management (e.g., related to reserves, budget development)
- 3vi. Policies, procedures or agreements (e.g., AUAs) related to appropriate use of technology systems

### **FOR TITLE IV PARTICIPANTS**

- 3vii. Documentation that the institution's student loan default rates are within the acceptable range defined by ED, or – if rates fall outside the acceptable range – documentation of corrective efforts underway to address the issue

### **REQUIRED ONLY IF APPLICABLE**

- 3viii. Documentation of any agreements that fall under ACCJC's [\*Policy on Contractual Relationships with Non- accredited Organizations\*](#)
- 3ix. Written code of professional ethics for all personnel including consequences for violations

## **Standard 4: Governance and Decision-Making**

The institution engages in clear and effective governance practices that support the achievement of its mission. Governance roles and responsibilities are delineated in widely distributed policies, and institutional decision-making processes provide opportunities for meaningful participation and inclusion of relevant stakeholders.

- 4.1. The institution upholds an explicit commitment to principles of academic freedom, academic integrity, and freedom of inquiry. (ER 13)
- 4.2. Roles, responsibilities, and authority for decision-making are clearly defined and communicated throughout the institution. The institution's structure for decision-making provides opportunities for stakeholder participation and ensures the inclusion of relevant perspectives.
- 4.3. The institution's decision-making structures are used consistently and effectively. Institutional decision-making practices support a climate of collaboration and innovation that advances the mission and prioritizes equitable student outcomes.

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- 4.4. Acting through policy, the governing board takes responsibility for the overall quality and stability of the institution, and regularly monitors progress towards its goals and fiscal health. (ER 7)
- 4.5. The governing board selects and evaluates the institution’s chief executive officer (CEO). The governing board gives the CEO full authority to implement board policies and ensure effective operations and fulfillment of the institutional mission.
- 4.6. The governing board functions effectively as a collective entity to promote the institution’s values and mission and fulfill its fiduciary responsibilities. The governing board demonstrates an ability to self-govern in adherence to its bylaws and expectations for best practices in board governance. (ER 7)

### ***Required Documentation – Governance and Decision-Making:***

Within the Institutional Self-Evaluation Report, the institution will provide narratives and a variety of evidence sources to describe and demonstrate alignment with each Standard. Institutions must also include documentation of the required items below. This documentation can be included as supporting evidence for the Standard narratives if appropriate, or they may be provided as stand-alone files. Peer Review Teams will confirm these items during the comprehensive review process using a checklist.

- 4i. Governing board policies/procedures for selecting and regularly evaluating its chief executive officer
- 4ii. Documentation or certification that the institution’s CEO does not serve as the chair of the governing board (ER 4)
- 4iii. Governing board policies/procedures/bylaws related to Board Ethics
- 4iv. Governing board policies/procedures/bylaws related to conflict of interest

*Adopted June 2023; Edited January 2024.*

### **Committee Chair/Co-Chair Approval**

**Printed Name**

**Signature**

**Date**

John J. Rosen

*John J. Rosen*

March 19, 2024

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