



Midterm Report

Submitted by

California Preparatory College
245 E Redlands Blvd
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to

Accrediting Commission for Community and Junior Colleges

March 15, 2024


Certification

To: Accrediting Commission for Community and Junior Colleges

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This Midterm Report is submitted to the ACCJC for the purposes of 1) highlighting recent improvements or innovations and 2) providing an update on institutional performance with regard to student outcomes since the last comprehensive peer review. The Midterm Report reflects the nature and substance of this institution, as well as its best efforts to align with ACCJC Standards and policies, and was developed with appropriate participation and review by the campus community.

Signatures:



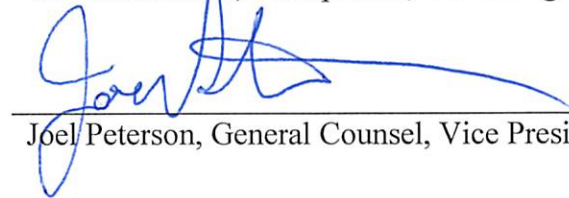
Gene Edelbach, Chief Executive Officer

Mar 15, 2024
March 15, 2024



Glenn Elssmann, Chairperson, Governing Board

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March 15, 2024

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A. Reflections on Continuous Improvement Since Last Comprehensive Review

1. Briefly describe major improvements or innovations since the time of the last comprehensive peer review, focusing on areas where your institution is excelling or showing significant improvement with regard to equitable student outcomes, educational quality, and/or mission fulfillment.

Improvements in Measuring Equitable Student Outcomes

Prior to our accreditation approval in 2020 we developed a rudimentary level of disaggregated data for the evaluation of our students and their success in our programs [see [Exhibit 2](#)]. It was not as comprehensive as we thought it should be, but it did give us an understanding of who and what our students were and how successful they were by category. As a very small, very diverse institution that has consistently maintained close to a 90% retention rate, a 90% or better completion rate, and over a 95% placement rate into either a higher level education program or an occupation - it is hard for us to find a way to increase or improve any particular disaggregated category [see [Exhibit 12](#)]. Our small student enrollment has allowed us to personally know each student and our initial disaggregated measurements showed a large level of success in every area.

Seeing the need to improve in this area, we have continued to gather, develop and organize more student data categories and classifications. Significantly, last Spring we worked toward adding additional categories of diversity, equity, and inclusion data. Because it's been less than a year in development, it has yet to be developed and put into utilization. However, one area that we have started disaggregating is the measurement of students who leave us in any given term vs. those students who complete their program - the completion rate. We have included a listing of students from Summer of 2023, our first time to evaluate, and have shown the new categories and the data that we have for those completing or dropping out during the summer of 2023 [see [Exhibit 3](#)].

Our plan to improve our disaggregation process will include the following:

1. Continue to evaluate the categories and decide if we need additional categories of data;
2. Develop full implementation of the evaluation of disaggregation data for each semester term;
3. Add an equitable disaggregation section to our annual reporting process from every operational area. The ARRAP form will include new reporting sections that require each operational area to determine if equity gaps exist and to evaluate and promote procedures that support equitable student outcomes [see [Exhibit 10](#)].
4. Continue developing our information system procedures to organize and report the disaggregated data in an accurate and user friendly manner so such data can be readily and easily accessible
5. Continue to gather additional categories of disaggregated data to measure the intake of students and, most importantly, to measure the applicable data categories showing

success or failure for each semester so we can have timely reporting and take appropriate action to quickly remedy equity gaps should they occur.

While we are dedicated to improving the disaggregation process, we maintain that with a 90% success rate or better in all relevant student outcomes and with our high job placement and higher education placement rates, there is not much room for improvement in our equitable student outcomes.

While our current equitable student outcome data will be hard to improve due to our current success, it is important to continue to improve this area as we grow to become a larger school when the discovery of equity gaps will become more difficult to discover without the proper disaggregation methodology in place. One small outlier that was recently discovered was information relating to the ESL students in our certificate program. Generally, the purpose of these students is to simply learn English and not to utilize the certificate or completion of the program to find a job or to enroll in another institution to pursue a higher degree. We discovered that this group is the least likely to finish a certificate, continue their education, or get a job.

Due to the disaggregated data that we recently started to analyze, it has shown that most students in this category are Hispanic. Using this data, we can develop procedures to assist this group to understand the value of pursuing a higher education to further their opportunities or to use their newly acquired English language proficiency to enter into the workforce immediately.

Educational quality/mission

Because we are a relatively new school and only accredited a few years ago, we have not spent a great deal of time creating anything new to refine our measurements of success or failure. Rather, we have spent time perfecting our ARRAP process (Annual Report Review and Assessment Plan). The ARRAP is a tool we created to have regular and systematic review in every academic and service area each year. It is a process that allows each department to report upward to three management areas. Those management areas are: 1) finance, 2) academic, and 3) general management. These reports are reviewed and evaluated at each level. Detailed information relating to the college's services and quality of the academic programs are provided.

Continuing to improve this evaluation tool, we have recently added a new section on diversity, equity, and inclusion to the ARRAP report [see [Exhibit 10](#)]. We are more confident than ever that this ARRAP tool informs and empowers administration at each level to get a detailed view of the college's operations on a regular basis. This empowers management to use relevant and recent data to make decisions that result in the improvement in the college's processes and procedures - while improving student outcomes. Most importantly, it forces every employee to have a role in evaluation and adjustments made each year. It gives a vehicle for every student, staff, or faculty member to have input into the overall institutional operation so that quality assessment results in improvement [see [Exhibit 6](#), [Exhibit 7](#), [Exhibit 8](#), and [Exhibit 9](#)].

Another area of measurement that we have continued to perfect is tracking data on our students who finish their programs or leave the college prior to program completion. We continue to maintain an approximate 90% retention rate and 90% completion rate. Of the students who complete their program, more than 95% of them either go into the workforce in a related field or move on to enroll in a higher level educational program [see [Exhibit 1](#)].

In addition to these two data measurements, we also have regular communication relating to student outcomes from our life counselors and department managers. This communication occurs on a regular basis in our general operations meeting that is scheduled to occur on a bi-weekly basis. And finally, and very importantly, our student surveys conducted each semester provide valuable input as well [see [Exhibit 4](#) and [Exhibit 5](#)].

All of the above methods of assessment; whether it be analyzing student data or from direct communication from our students, faculty and staff; has led to several recent examples of institutional improvement. Those examples are more fully outlined below.

Samples of Service Improvement

- A. Information from our 2022 ARRAP revealed that the QuickBooks accounting program the college was using was not functioning as well as it should and that a subscription for the online e-version of Quickbooks had more functionality.

Improvement: During the fall of 2023 we implemented the change to the online e-version of Quickbooks.

- B. Input from life counselors, student surveys, and faculty revealed that our previous facility was considered more and more unsafe in the evenings and in early mornings. This was due to the high incidence of crime in the area and the increasing population of homeless camping and sleeping near or around our building.

Improvement: This input, combined with our inability to get a long-term lease agreement or the ability to acquire the building from the building owner, strongly influenced the college's move to the new building at 245 East Redlands Boulevard. The move enabled us to sign a multi-decade lease agreement, improve the security issue immensely, and occupy a newer, better facility at a lower cost, that has more room for expansion than the prior building.

- C. Input from our students account area using the ARRAP led management to discover that an update to our billing and collections process was needed.

Improvement

The college found new and faster methods to process credit card and student payments.

- D. Information generated from the 2021 ARRAP process resulted in the Operations Committee learning that both faculty and students had requested better and faster access to college ID cards.

Improvement

We solved the problem by buying a software that allows each student to download an app on their phone and update each term. School has full control of turning off and on depending on attendance and a messaging system that goes to the holders of each ID

- E. Request given by committee input and 2021 ARRAP report for students to have better access to their updated grades

Improvement

We implemented a better training system for our ThinkWave operations. Whenever a new student arrives they receive training and we are also doing a more complete onboarding training with new employees so that they will use the system effectively

Samples of Course and Program Improvement

- A. Input from the ARRAP report, life counselors, and department chairs given to the Operations Committee suggested that students desired that the college offer more certificate programs. Students desired to work on certificate programs concurrently while earning their associate degree programs.

Improvement

A Certified Nurse Assistant certificate was added to the college's programs. In addition, the college is developing the curriculum and state approvals for certificates in phlebotomy and healthcare worker.

- B. Input from student surveys and academic dean review showed poor performance from a microbiology teacher.

Improvement

The poorly rated teacher was not rehired and a new, more highly qualified microbiology teacher from a minority race classification was hired.

- C. Input from the ARRAP report and from life counselor staff revealed that the immigrant student Curricular Practical Training work experience was not well managed.

Improvement

To solve this problem beginning in the summer of 2023 an instructor has been given a contract to treat it as a regular classroom experience and not just a management job.

Students are required to do additional reporting and monthly observation and are given assigned grades rather than a pass fail

- D. Business department ARRAP reports and student surveys indicated that we need more strength in the accounting area.

Improvement

The college has hired an experienced CPA with a master's degree who has taught accounting at several 4-year colleges or universities in the area. We have also added a second part-time instructor that has significant accountancy experience.

- E. Input from the life counselors and students revealed that the times scheduled for science labs were at inconvenient times.

Improvement

Students and instructors were consulted to assist with solving this problem and most of the science labs starting in the 22/23 school year were moved to Sundays and offered for longer periods of time on individual days

2. Briefly describe actions taken in response to any recommendations for improving institutional effectiveness or feedback noted in the Peer Review Team Report for the last comprehensive peer review.

The Peer Review Team Report had only one recommendation for improving institutional effectiveness. That was the following recommendation:

Recommendation 1 (Compliance): In order to achieve initial accreditation, the team recommends the College continue to refine its learning outcomes assessment process and tracking framework so that the work that the staff are doing to continuously improve instructional courses and programs through systematic evaluation are documented and recorded. (II.A.3)

The college, in its Follow-up Report, divided the peer review team recommendation into three related concepts and addressed each systematically in the content of the college's report: 1) an implementation of the learning outcomes assessment and tracking framework, 2) a regular and systematic assessment of those learning outcomes, and 3) documentation of resulting improvements to courses and programs based on those learning outcomes. This Report provided sufficient evidence to show full compliance with Standard II.A.3 [see [Exhibit 13](#)].

Subsequently, at its June 10-12, 2020 meeting, the Commission accepted the Follow-up Team's Report and stated the following:

Upon consideration of the written information noted above, the Commission acted to Grant Initial Accreditation. The Commission finds that California Preparatory College has

addressed the compliance requirements and meets Standard II.A.3. [see [Exhibit 14](#), June 20 Initial Accreditation Letter]

3. How are the actions described above helping your institution deepen its practices for continuous improvement and transformation in relation to the 2024 Accreditation Standards?

The improvements and changes to the college's gathering, analyzing, and reporting of disaggregated data to ensure more equitable student outcomes is probably the most significant area where we are adjusting to meet the new standards. Because such data must be collected over the entire enrollment life of the student at the college, the process will have slow implementation.

As noted above, we have added a new section and questions to our ARRAP yearly reporting process to address DEI categories and to address possible equity gaps to student outcomes [see [Exhibit 10](#)]. We have added DEI data categories to our student graduation results [see [Exhibit 2](#) and [Exhibit 3](#)]. We have also begun a disaggregation data collection and analysis relating to the status of our students who are completing or not-completing their program [see [Exhibit 3](#)].

We are also working on several additional processes and adding relevant, equitable statistical categories as data can be collected over time. These processes include using disaggregation data as a way to get a better understanding of our students, semester by semester, as they receive their grades and we measure their completion, transfer or placement rates. We will increasingly use such data, where allowed and relevant, in our admissions process as well.

Finally, in order to better ensure that the disaggregation information is utilized on campus for efficient resource allocation, for institutional program improvement and review, and to reduce or prevent equity gaps, a policy and procedure for disaggregation is being developed.

B. Reflections on Institution-Set Standards and Other Metrics of Student Achievement

- 1. Review the most recent ACCJC Annual Report and other meaningful metrics of student achievement. Has the institution met its floor standards? Exceeded its stretch goals? Describe any patterns or trends you see in performance against your institution-set standards and other metrics of student achievement.**

Standards as They Relate to the Most Recent ACCJC Annual Report

The metrics from the most recent annual report show that the college has exceptionally high rates of retention and completion. One of the main reasons we obtain such strong results is because we do a good job of educating and taking care of our students. We acknowledge, however, another reason for the high success rates is due to our high concentration of international students. These students must maintain their student visa until they move into the

job force or move on to another higher level of education. We know and understand that our student population is exceptionally loyal due to this student visa obligation.

On the other hand, these international students could transfer to other schools, choose not to enroll with us in the first place, or could communicate their displeasure with the quality of education through our surveys or via our “open door” policy. None of these things are happening, which indicates that even our international student population is content and feels they are receiving a quality education. In addition, the metrics show that both international and domestic students are having successful outcomes, so we believe our programs are providing the quality education that is required and that we continually strive to improve.

Reviewing the statistics from our Institution-Set Standards: Course Completion Rates [see [Exhibit 12](#), number 12 from the Annual Report], we have an actual successful student course completion rate of between 94% and 96% over the past 3 years. The Institution Set Standard, or floor, is 90% and the stretch or aspirational goal is 95%.

As the metrics show, the college comes very close to meeting its aspirational goal. These high numbers are a result of the following reasons:

- Many of our students already have degrees and are utilizing us to move to the next level of education or complete prerequisites in order to receive a nursing license in this country. These students need our courses to add to what they've already accomplished in their home country.
- A number of our students are older and are taking prerequisite courses prior to gaining admission into affiliated nursing programs or business programs. Our institution is the low cost, efficient way of reaching those goals.
- Our success is also because we have a life counselor system where each student has a personal guide to help them with all aspects of learning: academic, personal life issues, degree completion, and moving on to their next level of life - either via the job market or a higher level of education.
- We consistently have small classes and heavily involved instructors and counselors.
- Many of our students are also on F1s and if they are happy with the school they tend to move less often than students who are not F-1.

Another metric presented in the annual report is the institution set standard for transfers [see [Exhibit 12](#), number 16]. This metric shows that the college has successfully transferred between 39% and 51% each year, depending on the year, for the last 3 years. Our average floor and aspirational goal is 50%. We have adjusted our floor downward to 45% and still have not reached that goal.

One of the goals of our institution is actually to be a transfer school - where our students transfer to other institutions of higher learning seeking a higher level degree or program. This information has shown us a need for improvement. One method to get closer to our aspirational goal is to begin admitting more students who are seeking transfer and a lower ratio of students who are enrolled to go directly into the job market. It is our goal over the next several years to put more marketing energy into students wishing to transfer - while still maintaining our students who are wishing to go directly into the job market.

The last significant metric from the annual report that we wish to discuss is found at number 18 - Job placement rates [see [Exhibit 12](#), no. 18]. As outlined, all of the rates from this section of the annual report are listed to be 99%. At first glance, this placement rate seems highly suspect - however, we believe and promote that anything less than the 99th percentile would not be acceptable.

A large number of our students come to us with nursing degrees or other medical degrees already earned in other countries. We also have a large number of our students come to us with bachelor's or Masters degrees in business and wanting to get exposure to an American associate degree or prerequisites completed to get into a graduate program. These students are highly motivated to either transfer or go into the job market. Most students have years of experience and after they learn English from our ESL training, earn the prerequisite classes they need, participate in our contracted internships, or gain exposure to American business or medical education, they have a relatively easy time of finding jobs.

Again, as an institution we are wanting to create a better balance and have at least half of our students who go on to graduate school or advanced learning also obtain employment even while pursuing their higher education goals.

Standards as They Relate to the ARRAP Report

The ARRAP process that we have developed on our campus provides a yearly analysis from every academic, service, and operational area and provides administration with a tool to analyze our successes, failures, and highlights areas needing change or improvement [see [Exhibit 6](#)]. This report heavily utilizes input of every employee from their respective operational area. It then moves reporting of such information to the management of each operational area, and then such information is reviewed by our operations group which meets bi-weekly. Finally, the relevant information gleaned from the ARRAP then reaches the president and the board. The ARRAP gives us a system to strongly encourage input on all institutional topics, from all operational areas, and then have that input synthesized into areas of success and areas that need improvement.

In Section A of this midterm report (see above) we outlined a number of examples of how the ARRAP process influences and measures success in each area. This quality improvement tool allows our institution to receive data and communication from students, faculty, staff, and administrators - essentially **all areas** of the college are reviewed in order to improve our

processes and outcomes on a regular basis [see [Exhibit 6](#), [Exhibit 7](#), [Exhibit 8](#), and [Exhibit 9](#)].

Standards as They Relate To Student Satisfaction and Student Outcomes

Each semester we provide an anonymous online survey to every student, in every course. Examples of these surveys can be found in [Exhibit 4](#). [Exhibit 5](#) is a summary reflecting all of the student responses from the course survey for the most recent term.

We continue to strive as an institution to have all our courses rated in several categories. These categories include teaching quality, learning quality, classroom experience, and instructor support for student learning. Our standing goal is to reach a 75% rate of exceptional and 25% rate of good or higher for each course each semester. [Exhibit 5](#) shows that almost every course meets these goals. These results are shared with our instructors, academic managers, operational manager, and president. If persistent measurements below our high standards are indicated from these surveys, departmental managers and higher levels of administration first will give supportive communication and teaching support to the instructor. Then, if success is not met, additional outside learning can be recommended. Finally, after reasonable support and a chance for adjustment and outside learning is given, if no improvements are made, instructors are not rehired.

Again, we are happy with our results as demonstrated in [Exhibit 5](#).

2. When you disaggregate the data for the institution-set standards and other meaningful metrics of student achievement, what do you see related to equitable student achievement outcomes (i.e., equity gaps)? What patterns or trends excite you? What patterns or trends concern you?

As a brief explanation, prior to receiving accreditation from ACCJC in 2020, the college's disaggregation of data processes were minimal. Upon learning of the change of measurements implemented by ACCJC - beginning in 2022 - efforts were made to update not only the collection of data, but the methods of categorizing, analyzing and disaggregating such data. The original categories of disaggregation used prior to 2022 can be seen in [Exhibit 2](#). Our more complex categories of disaggregation can be seen in the data that we are collecting for our graduates that began in the summer of 2023 [see [Exhibit 3](#)].

Our disaggregated graduate data, as outlined in [Exhibit 3](#), is only the beginning of what we are planning on doing. We are now measuring our program completion and drop-out rates using the revised method which outlines more categories of disaggregated data. Due to our high rate of retention, high rate of completion, and very high rate of transfer or movement into the workforce, we do not have a lot of variables that are impactful - no matter how they are disaggregated. Our students, in general, are a very diverse group. They represent a broad spectrum of ethnicity, countries of origin, gender identity, sexual orientation, and even hold a large diversity of religious backgrounds - especially for a Christian school. As can be seen from the metrics outlined, our students tend to spread equally across all groups.

We are proud and excited about the general success of the college being able to prevent glaring equity gaps or inequalities. For the last several years we have been pleased with the strength of our diverse student body that receives an equitable, nondiscriminatory and diverse education by attending our institution [see [Exhibit 1](#)].

One trend that stands out more since our newer process of disaggregation is the trend for ESL students of Hispanic backgrounds to generally attend, but not receive, certificates or move on to the job market or transfer into other schools. While it is an exceedingly small number, we do need to find a better way to have successful outcomes and rates of completion for this group

3. What actions has your institution taken/is your institution taking in response to the patterns and trends discussed above? How will you monitor the results of these actions in order to inform future improvements and innovations in support of equitable student achievement?

Two adverse trends that we have discovered through the analysis of our data (and previously mentioned in this midterm report), while not indications of severe problems, are significant enough to analyze and explore methods of improvement. These adverse trends are outlined below.

The first trend is that more students go into the workforce than go on to higher levels of education at other institutions. Some of the ways we will deal with this issue is to market and admit more students whose plan is to continue on in higher education. We will look to make more transfer programs available, and push those programs at a more aggressive rate. We will also have our life counselors, staff, and instructors give additional support for those wishing to transfer.

The second area that we found a need for improvement was that the Hispanic student group's completion rate was lower than other groups. Although this difference was small, we have determined that Hispanic ESL students have tended to take enough classes to improve their English, but not complete their program and instead utilize their new English proficiency to move directly to job placement or to higher education prior to program completion. Some, but not all of the methods to increase this group's completion rate includes having Spanish-speaking counselors work with these ESL students early in their ESL certificate program to give them clearly defined educational opportunities and goals, and to have our life counselors become more engaged with the ESL students to help them not only understand the educational goals but provide clear roadmaps on how to reach these goals while outlining the benefits of program completion to job placement success.

To monitor the results of these actions we will continue to expand and disaggregate our data to not only include the graduate statistics that we have today, but to also include more disaggregated measurements for our incoming students. We will also measure our students who are receiving "Cs" or lower each semester and look for trends by newly collected disaggregated categories. Our department managers, instructors, service personnel, life

counselors and management will then develop new methods of solving problems to further prevent and minimize the equity gaps revealed.

C. Reflections on Assessments of Student Learning

- 1. Review the results of learning outcomes assessment. Describe any patterns or trends related to attainment of learning outcomes observable in these data that may be relevant as you implement improvements and innovations in the design and delivery of academic programs?**

Descriptions of our more common methods of assessing learning outcomes.

- ARRAP assessment tool [see [Exhibit 6](#)]. This tool allows and requires each department on campus, both academic and service areas, to do a yearly assessment of learning, quality of service, quality of product, and many other areas. Each one of our academic areas completes an ARRAP report each year. This requires a committee to be formed which is composed of academic personnel in each learning area. It then requires discussion time and evaluation of most every area of learning. It requires forward thinking to determine methods and processes to improve areas that are needing adjustment and have been shown to be deficient. This academic information is then passed along to academic management, then to the president, and eventually the board.
- Graduation results [see [Exhibit 1](#)]. Beginning over 13 years ago, the college, even before ACCJC accreditation standards began requiring it, began keeping records of student completion rates, retention rates, and placement into the job market or into other institutions of higher learning to finish degrees. Beginning in late 2018 we began disaggregating this information. This data is widely shared with academic and service managers, and finally to administrators on campus.
- Course surveys [see [Exhibit 4](#)]. Our Survey policy and procedure requires every student in every academic course to complete a rather complex survey once a semester to evaluate over 20 different learning factors for the class. [Exhibit 5](#) demonstrates how this information is summarized and then disseminated to the instructor, academic area manager, and administration.
- Operations Committee, open door policy, and open communication. The remainder of our assessments come from more informal sources but are of equal or greater importance. Academic managers and some instructors meet with other managers and administration bi-monthly in an operations committee meeting. Every operational component of CPC is welcome at the table and is given time for input two times each month. Our life counselor system is also a very effective way of sharing student learning outcomes with administration. Life counselors meet with their students several times each term and work with every aspect of their learning. Students freely share their difficulties and successes. These are passed on to instructors, academic managers and administration. Finally, due to our small size and the close proximity of our faculty and staff offices to administration, there are many informal communications that occur due to our “open door policy.” These discussions address potential problems or weaknesses in our

processes and suggest ways we can strengthen our programs to achieve more successful student outcomes and positive performance.

- E. Our standard grading system. Our grading system is processed and stored on a software called ThinkWave. Students are given logins. They can check their grades often and make adjustments based on success. Midterm, the records office reaches out to all instructors and academic managers to get results of students who are either receiving a D or F and/or having attendance issues. This information is passed on to the life counselors who intervene and give support to the student. It also triggers tutoring or additional ESL learning.

Samples of patterns or trends related to the attainment of learning outcomes which are observable and these data

- A. From our graduation data over several years we were made to understand that we were not having the completion success rate with our Hispanic ESL students the way we were with everyone else [see [Exhibit 1](#)]. This has encouraged discussion and action on finding better methods of taking care of our Hispanic ESL students and giving them focus and direction toward completion and to achieve that completion before their voluntary transfer into the workplace or higher education elsewhere. Some methods to improve this metric are: more involvement by the life counselors, more involvement from the ESL faculty and staff to give the benefits of program completion early in their education, and more counseling time by people who speak Spanish even as they are concurrently completing their ESL program. Finally, adding additional goal setting and training will encourage these students to see bigger goals and the possibilities and rewards of program completion in seeking opportunities in higher education or the job market.
 - B. From our course survey results [see [Exhibit 5](#)] we have been able to measure weaknesses in certain classroom experiences. It is our goal to have our survey results be at least 75% “excellent” and the remaining 25% be “good” or higher. When the results do not fall in this category it triggers our academic managers and administration to spend more time encouraging, training and giving support to the instructors. If this is not successful, then eventually, after extensive support and training to the instructor at issue has failed, the instructor’s contract will not be renewed. Recent examples where this process was followed was in our CPT instruction and also in our microbiology instruction.
 - C. A final example comes from counselor input and from ARRAP reporting in 2022. The length of our labs and timing of our science labs were not meeting the needs of our many working adults. These labs were being offered at random times during the work day. With some pre-planning and input from students and instructors we have rescheduled almost all of our science labs to large blocks on Sundays. Not only are students happier, but our instructors are pleased because they are able to get longer lab learning periods in one block.
- 2. How (i.e., for what subpopulations, modalities, etc.) does your institution disaggregate its assessment results? When you review disaggregated assessment results, what patterns or**

trends do you see related to equitable attainment of student learning? What patterns or trends excite you? What patterns or trends concern you?

Prior to accreditation in 2019 we implemented several categories of disaggregation. With the need to do the midterm review and learning of the new reporting requirements, our operations committee built a new list of additional data and categories to add to our disaggregation data. Because implementation of disaggregating these new categories has only been in the past year, we do not yet have a depth of data or results.

One area where we have measured disaggregation data is in students departing our program either through transfer, workplace, attendance at a new institution of higher learning, or drop out. [see [Exhibit 3](#)].

The recent categories that have been added for measurement are: race, country of birth, age, gender, sexual orientation, religion, and marital status. We are also in the process of collecting college generational status as well. This list may be adjusted as we move through the process. Currently we are attaching it to our graduation results starting summer of 2023. We are also in process of adding the same categories to our admissions data, our midterm reviews of low grades, and we have added relevant questions to our ARRAP process relating to DEI issues to ensure equitable student outcomes [see [Exhibit 10](#)]. We will also be disaggregating the results of our surveys each semester if we can determine a way to make them anonymous and still have disaggregation.

In general, with our very diverse group of students, our earning successes as measured through retention, completion, and placement into the job market, or into higher education, tend to not disaggregate dramatically since they all are above 90% in almost every category. In addition, our first measurement was with a summer graduate group who tend habitually be our WHPC students who are primarily foreign Asian or African students. As we watch the trends through several completions and combine it with our other areas of measurement, we will undoubtedly find more information that will assist us in better taking care of each disaggregated group.

A few immediate observations are that our learning groups are more culturally divided than initially expected. Even though we are a very diverse campus representing 27 countries among only a few hundred students, we have observed that most of the Asian students are on a cycle that graduates in summer and that many of our African and South American students are on a cycle that graduates in winter and spring. This probably has them learning more separately than we expected. We have also always known that we have a significantly higher number of female students due to our nursing intensive programs. It is a reminder, however, that we should work towards and promote more gender equity in all programs.

3. What actions has your institution taken/is your institution taking in response to the patterns and trends discussed above? How will you monitor the results of these actions in order to inform future improvements and innovations in support of equitable student learning?

Actions that the institution has taken or will be taken in response to the patterns and trends.

We will continue to move disaggregation into a number of different measurement areas. As already mentioned, we will add admissions, midterm grade responses, and class evaluations to these disaggregated measurements. As an operations group we will keep this as a topic at least once each semester to evaluate if we need to add different category groups to the data set to achieve further disaggregation, and to discuss if we need to add different breakout categories. Because we do not have any glaring or observable inequalities or equity gaps, we have not taken any major steps to correct them. Rather, in these early stages we are able to see that there is something for us to learn in using disaggregated data as we grow in size and complexity. Having these equitable categories measured, will help us become a more balanced and supportive institution for every subset category of student.

Monitoring the results of action.

Our once each year ARRAP [see [Exhibit 6](#)] process with its extensive questioning and the inclusion of a new DEI section[see [Exhibit 10](#)] will keep this in the forefront of every operational group on campus. Evaluations will then move to the management of each area, and finally to the operations committee of the institution, the president, and the board.

Implementing disaggregation into our once a semester evaluation of each course will trigger monitoring each semester three times a year. [see [Exhibit 4](#)]

The participation of our life counselors, operational matters that are raised in our bi-weekly administrative meetings, and our commitment to bringing up DEI issues, as needed, will provide review and analysis of potential equity gaps at least once every semester.

D. Looking Ahead to the Next Self-Evaluation and Comprehensive Review

Your institution will begin its next comprehensive self-evaluation in 1-2 years. What opportunities, changes, or other internal or external factors do you see on the horizon that are likely to affect the context of your self-evaluation and/or comprehensive peer review?

The college's past 3.5 years as a newly accredited ACCJC institution have been heavily focused on maturing into the processes that we had developed preparing for the ISER and prior to achieving initial accreditation in June of 2020. During this time we experienced a need to relocate our facilities, we went through COVID which stopped our ability to get approval from the DOE to give financial aid to our students, and we also had two years where we were unable to bring in international students that we rely on for tuition revenues. All of these difficulties together have made us more focused and strong. We believe now that we are at the midpoint in our seven years of operation, we are finally shaking the devastating impacts of COVID, settling into a new multi-decade facility, regaining our international student population, and are about at the point where we can for the second time (our first application timed out due to the DOE closing its offices during COVID) submit our DOE application to receive Title IV funding which will allow our students to apply for Pell Grants.

Because of this maturing and due to improving conditions, we believe that most of the factors that will be affecting the context of our ISER, or comprehensive peer review, will be positive. We have already weathered the proverbial storm and through it all have managed to maintain and increase our enrollment nearly 50%, improve our academic offerings, diversify and strengthen our instructor credentials and experience, and move into a much more useful and supportive facility, among many other improvements.

The process of implementing a more comprehensive procedure for the disaggregation of our student data will lead to more equitable student learning. Going through the process of preparing for and writing this midterm report has given us a better understanding of this process and will assist us in our efforts to make this process and analysis a fully functioning part of our institution - long before our seven-year evaluation and next ISER is due.

We believe the next few years will be a time of significant growth, financial stability, and the continued process of improving our services and support for our students. Despite the recent difficult few years, our students have continued to be extremely satisfied and happy with us. We have obtained our growth, even during these difficult years, primarily through word of mouth from our students who are satisfied and happy enough with the quality of their education that they have encouraged others to apply. Our success rate in retaining, graduating, and placing our students into the workplace or at other institutions of higher learning has exceeded our expectations.

As we look to begin preparing for our ISER and the process of self-evaluation and comprehensive review, we have many areas we need to evaluate very extensively. We are certain there will be areas of improvement that have yet to be revealed and will be better understood as we proceed in the very process of evaluation. In our next ISER we anticipate that we will be able to report that our financial condition; the ability to process student aid, our student enrollment; learning outcomes; our program offerings, and our administration, faculty and staff development will all show marked improvement. And, we will report on the plans for improvement for those areas we discover need additional work and development. We will begin this process in the next several months and know it will continue to help us improve our institutional effectiveness as we continue to grow into our successful future.

Exhibit List

[EX. 1 Graduation Results](#)

[Ex. 2 Graduation Results 2019 Disaggregated](#)

[Ex. 3 Graduation Results 2023 New Disaggregation](#)

[Ex. 4 Course Survey Samples](#)

[Ex. 5 Course Survey Summary](#)

[Ex. 6 ARRAP Policy and Procedure](#)

[Ex. 7 Academic ARRAP Report Samples](#)

[Ex. 8 Service ARRAP Report Samples](#)

[Ex. 9 Oversight Committee ARRAP Report Sample](#)

[Ex. 10 Revised ARRAP with DEI Inclusion](#)

[Ex. 11 New Location Substantive Change Application and Approval](#)

[Ex. 12 ACCJC Annual Report 2023](#)

[Ex. 13 ACCJC Follow-Up Visit Report](#)

[Ex. 14 ACCJC Initial Accreditation Letter 7.20.2020](#)