

**CONFIDENTIAL**

DEC 16 2008

**SHOW CAUSE VISIT REPORT  
NORTHERN MARIANAS COLLEGE**

**P. O. Box 501250  
Saipan, MP 96950**

**A Confidential Report Prepared for  
The Accrediting Commission *for* Community and Junior Colleges  
Western Association of Schools and Colleges**

**This report represents the findings of the evaluation team  
that visited**

**Northern Marianas College  
on  
November 3-5, 2008**

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**Northern Marianas College  
Report on Show Cause Visit**

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**November 3-5, 2008**

**Introduction**

Northern Marianas College underwent a comprehensive evaluation in October, 2006. As a result of that evaluation, the Accrediting Commission for Community and Junior Colleges took action at its January 2007 meeting to impose Probation, and to require the institution to correct several deficiencies. The College submitted a Progress Report in March 2007, and submitted a second Progress Report in October 2007. The October report was followed by an evaluation team visit. At its meeting of January 2008, upon review of the College reports and the October 2007 evaluation team report, the Commission acted to place Northern Marianas College on **Show Cause**. The Commission required the College to submit a special report in March 2008 on its actions to resolve some of the deficiencies identified by the accreditation teams. It was also required to submit a Show Cause Report, detailing why its accreditation should not be terminated, by October 15, 2008.

At its June 2008 meeting, the Commission acted to accept the Northern Marianas College March 2008 Special Report and continue the College on **Show Cause**. Because the institution had not addressed the findings of its external audit in a timely and effective manner, the College was also required to submit a Special Report in October 15, 2008, on its resolution of the 2007 fiscal year external audit findings. The report was to demonstrate that the College had resolved its recommendations on integrated planning and systematic program review (Recommendations 1 and 2). The report was to be followed by a visit of Commission representatives.

During the two-year period prior to this visit, the college experienced significant administrative turnover, did not have a permanent president until June 2007, and had a governing board that became inappropriately involved in operational issues.

The College submitted its Show Cause Report to the Commission on October 15, 2008. An evaluation team visit was conducted on November 3-5, 2008, by Dr. Sherrill L. Amador, chair; Dr. Steve Maradian; and Dr. Karen Graham, a representative from the ACSCU as the College offers a baccalaureate degree in education. The visit was arranged by the chair with the college president; and the College was prepared for the visit. The team room had all the necessary documentation and the team was sent all appropriate materials prior to the visit.

The team met with the Board of Regents, the College President, ALO/Dean of Academic Programs and Services, Director of Institutional Effectiveness, Acting Chief Financial & Administrative Officer, Bookstore Manager, Information Technology Director, Human Resources Manager, President of Associated Students and officers, Faculty Senate President and Executive Committee, Acting Staff Senate President and officers,



Accounting Department staff, Department Chairs, staff from Rota and Tinian instructional sites via video teleconferencing ; and members of the College Council (CC), Planning, Budgeting and Evaluation Committee (PBEC), Program Review, Outcomes and Assessment Committee (PROAC), and Institutional Priorities Ad Hoc Committee (IPAC). The Director of the School of Education (SOE) and the SOE faculty attended meetings with the ACSCU team member.

An open forum was scheduled by the team and was attended by approximately 180 participants consisting of faculty, staff, administration and students (the largest group of attendees). It should be noted that the open forum was held on Commonwealth of Northern Marianas Holiday: Citizenship and Election Day; and it appeared all in attendance were encouraged to wear red and black (the college's colors).

The team noted that the College had completed considerable institutional work since the last team visit. It was obvious to the team that the College took the Commission's Action Letter and its accreditation responsibilities very seriously and was focusing and prioritizing its work to comply with the Accreditation Standards. The team also noted that the physical appearance of the College had improved: an entrance road had been paved, all buildings painted, and many rooms refurbished.

### **College Response to the Commission Recommendations**

The visiting team's evaluation of the College's work to resolve Recommendations 1 and 2 from its October 2006 evaluation visit as well as the Commission's requirement that it resolve its 2007 year audit findings as requested in President Barbara Beno's action letter of June 30, 2008 follows:

**Recommendation 1. The College should review existing planning processes in order to establish and implement a shared vision for the future of the College with agreed upon priorities that:**

- a. develops and implements budgeting and resource allocations guided by institutional needs for human resources and services;
- b. includes the two centers on Tinian and Rota in the planning;
- c. integrates all aspects of planning, evaluation, and resources allocation;
- d. is driven by College mission and goals;
- e. relies on faculty and staff participation;
- f. is well documented and widely distributed.

(Standards I.B.2, I.B.3, I.B.4, I.B.5, I.B.6, II.A.1, II.A.2, II.B.4, II.C, III.A, II.B, III.C, III.D, IV.A, IV.B, including various subsections)

### **Team Findings and Analysis**

Northern Marianas College Board of Regents adopted its PROA Strategic Plan 2008-12 on September 25, 2008, which used its Strategic Plan 2006-10 as a foundation. (The letters PROA represent the first letters of the College's four strategic goals.) The PROA



Strategic Plan was based on both an external review and SWOT analysis conducted by staff and community using a visioning exercise in spring 2008 and strategic planning activities in summer 2008. The Key Trio consulting firm assisted the College with the processes and continues to work with the College on planning issues. The new plan was also informed by the results of the College's first cycle of program review. Coinciding with these activities the information from the Program Review and Assessment Committee (PROA) was used by the Institutional Priorities Ad Hoc Committee (IPAC) to determine budget priorities for the budget year beginning October 2008. The Strategic Plan goals and all planned activities are linked to those goals reflecting the college mission. Given the size of the College, the team found that there are many committees involved in the planning process, some without clearly stated or understood purposes and responsibilities. The team observed that the number of committees may broaden participation, but also serves to diffuse focused leadership and management for implementing the planning process.

The College had completed several planning and program review activities in a short period of time, and in many instances planning and actions were occurring almost simultaneously to meet College's self-imposed schedule established to comply with this Accreditation recommendation and visit. By September the College had used its program review informed plans to determine its 2008-09 budget. This represented the College's first effort to link program review and planning with resources allocation. What remained to be completed of the first cycle were the evaluation of the process and the results of the planned actions. By the campus community's own assessment, and the team agrees, the College had completed the development stage as defined by the ACCJC rubric for Institutional Effectiveness—Integrated Planning. The College must continue to move deliberately and capture historic data so that this integrated planning process moves to the Commission's sustainable level of that rubric. Absent of historic data, trends can neither be established nor assessed as benchmarks from which institutional effectiveness results. The College has an established timeline, based on its instructional calendar, to collect and analyze information to improve the planning processes where need improvements are identified.

The College's technology plans and funding for the 2008-09 budget year is one example and representative of integrated planning and resource allocation. Another is the decision to relinquish ownership of the KRNM radio station, freeing the College from any future financial liability associated with the station. The replication of these examples throughout the integrated planning process (personnel, facilities, resources, and instructional programs and services) is essential for the College to meet all elements of Standard III.

In the past, both the Rota and Tinian instructional sites had offered degree programs. However, due to the inability to serve these sites with quality support services and a consistency of activities, and as a response to a Commission recommendation and the College's own assessment of the situation, the institution reduced its educational programs and activities and no longer provides degrees at these sites. The requirements in the Commission recommendation (b and e above) were met, as the team verified that



the staff from the Rota and Tinian sites was involved in all processes and participation by faculty, administration, staff, students, Board of Regents and the community was at an appropriate level for the first part of the cycle of integrated planning.

At the time of the visit, the College had just begun to reflect on the planning activities that occurred in the past few months and recognized that the next steps were evaluation of the process and more importantly of the outcomes to be achieved. The College had recently completed a schematic of its planning and budgeting process model. The team determined the college had finished the first phase of integrated planning by determining resource allocations based on plans. However, when the team asked the question of about 20 people involved in all the planning groups “what governance group will oversee the continuous planning and budget processes and review the evaluation of the college’s planning activities based upon agreed criteria?”—no one could answer the question. It was unclear to the team if the schematic truly reflected the processes that were actually used because so many activities were occurring simultaneously. The team noted an absence of institutional trends based on data and analysis of that data which can serve as performance benchmarks to inform decision making. The initial decision for the College is to assign the office and/or oversight committee the responsibility for evaluating future institutional performance against the benchmarks. The College had recently hired a Director of Institutional Effectiveness to begin to address this deficiency.

Also, the college management had recently completed an Operational Plan (draft), which the team determined did follow the strategic plan and detailed the necessary actions to implement the 2008-09 plans. However at the time of the visit, this plan had not been communicated to the planning committees nor was this component detailed in the College’s planning model schematic. Again, this fact points to a lack of clarity in the model and the need for a well-defined and understood planning model. The informal nature of the College community lends itself to this lack of clarity; however, to sustain quality and institutional effectiveness, documentation and clarity is required.

The team suggests that the College simplifies its planning model and reduce the number of committees involved. It should also clarify what group(s) make recommendations and to whom and at what point in the planning process. The team observed that the college community had been so immersed in getting planning activities completed in time for this visit that its overall model and use had not been analyzed or recognized as a potential weakness. The planning model must define processes, reflect appropriate sequences and timelines, identify who is responsible for implementation of the plans, assign accountability for decision-making and oversight, and have a component of evaluation based on agreed upon institutional criteria. The team was concerned about the sustainability of the current planning model and finds that further institutional work is required to achieve proficiency, and ultimately continuous improvement as defined by the ACCJC rubric, Institutional Effectiveness—Integrated Planning.

The College Council has a Primer that outlines governance structures and processes. However, the team learned that the committees and councils have a limited number of faculty represented especially on those groups which make decisions on academic quality



issues (other than the Academic Council/Department Chairs), such as the Program Review, Outcomes, and Assessment Committee (PROAC), Institutional Priorities Ad Hoc Committee (IPAC), and Planning, Budgeting and Evaluation Committee (PBEC). The College administration and especially the faculty leadership must commit to the faculty fully participating in planning and budgeting deliberations and recommendations by increasing faculty representation on the planning committees. Greater faculty participation should improve understanding and communication among faculty about the relationship and importance of the program reviews to institutional planning, how data is used to support the decision-making processes, and most importantly, the faculty's responsibility to be active participants in those processes.

## **Conclusion**

The College has partially implemented this recommendation. Momentum has been established, which must be accelerated and completed to move the College from the development to a proficiency level of the rubric. The structure, processes, and cycle for a sustainable, integrated planning model, that includes an evaluation component, and that is implemented continuously must be completed and be monitored by the appropriate governance group(s). Active participation by the faculty in these processes must be achieved as well.

**Recommendation 2. The team recommends again that the College institutionalize a coordinated, systematic process for evaluating program effectiveness. This process should include definitions of learning outcomes for all programs, a determination of program relationships to labor markets, and objective measures of student performance, which can inform and guide decisions to improve programs. (Standards I.B.1, I.B.3, I.B.4, I.B.5, I.B.6, I.B.7, II.A.1, II.A.2, II.B.4, II.C, III.A, III.B, III.C, III.D, IV.A, IV.B.2.a, IV.B2.b)**

## **Team Findings and Analysis**

The team verified that the College has developed and implemented a comprehensive program review. The first annual cycle of implementation had been completed by August 2008. The Program Review and Outcomes Assessment Committee (PROAC) is the responsible group for program review and is held accountable for assessment of the process once it has been operational for several cycles. The program review process uses two templates to capture data for analysis: one for academic programs and one for academic support and administrative programs. The elements of the academic program consists of a brief history of the program, student achievement data (course completion, retention term-to-term, program completion or degree/certificate completion rates), human resources-faculty, technology resources, program SLO mapping, and recommendations for the program and for the institution. The elements of the academic support and administrative programs consist of a brief history, specific services/functions of the program, data/evidence, human , physical, technology resources, program



SLO/administrative unit outcomes mapping, and recommendations for the program and institution.

All institutional programs had completed its program review and the results were published in *Program Review 2008: A Composite Report of Academic Programs, and Academic Support and Administrative Programs*. Both PROAC and the Institutional Priorities Ad Hoc Committee (IPAC) used this information to determine plans and budget priorities for 2008-09. Based on the information and data gathered and analyzed the College deactivated many courses, programs and certificates. The process resulted in over 300 actions being identified for improvements institution-wide and had assigned the Office of Institutional Effectiveness the monitoring function.

The team's assessment of the program review program is that it is standardized, based on information and data available, and used for the purposes of program improvement, planning and budgeting. However, the data used for program review needs to be enhanced considerably and needs to be managed so that longitudinal analysis can be done. As part of the process to recapture information, the College is just beginning to build databases on past student enrollment, grades, performance, course loadings, etc. Therefore, the team found that much of the program review process was based on descriptions of what is and current data rather than comparison of trends to current performance. This first program review cycle did not include the college's mapping of SLOs because the complete cycle of assessing SLOs had not been completed yet.

The first program review process was completed by both academic and administrative programs and did result in the allocation of equipment and potential new positions for budget considerations. The program review program model as currently defined is appropriate and once the research capabilities are enhanced, it should inform the College's integrated planning decisions.

The Student Learning Outcomes Comprehensive Implementation Program (SLOCIP) was begun in fall 2007 and the College integrates student learning outcomes with its program review program model. The College has identified student learning outcomes at the course and administrative unit level and is refining SLO identification on general education courses. The College uses Nichols and Nichols' Five Column Model for reporting student learning outcomes (SLO) and administrative union outcomes (AUO). The columns are: (1) mission, (2) extended program/service outcomes, (3) means of assessment and success criteria, (4) summary of data collected, and (5) use of results. At the time of the visit, the College had submitted the first three columns, and by December 29 was to submit the five-column form for all courses.

The College currently lacks the research capacity to institutionally and systematically assess learning outcomes. More training for faculty and staff should improve individuals' assessment practices. The College is in the process of purchasing an assessment tracking software program, which should assist with systematizing assessments for use in decision making. The team noted that the program review program and the student learning outcomes processes were very complex and intensive



and the college community needs to evaluate the processes, and especially the outcomes achieved to date, to determine future revisions and enhancements. The taxonomy of general education courses reviewed in the first cycle resulted in the college recognizing it needed to establish general education student learning outcomes to reflect the college mission and the actual work on this project had begun. An outcome of these institutional processes has been the dialogue generated among faculty about learning outcomes and the curriculum revisions that resulted.

Participation in program review and outcomes assessment activities is listed in all job announcements, position descriptions, employment contracts, and professional services contracts.

### **Conclusion**

The College partially implemented this recommendation. Once the databases are fully developed and systematically used, the analysis of student learning outcomes assessment results will be more meaningful. Also, with a more data-based analysis component to the program review process, more informed decisions on curriculum, and educational program and services can be achieved. Staff training on all facets of program review and student learning outcomes needs to continue to maintain the dialogue and the institutional work accomplished to date. The College appears to understand it needs to step back and determine what was accomplished in this first cycle, and then it should evaluate the outcomes using agreed upon criteria and begin the next annual cycle. Again, since this whole process was begun a year ago, time has been a limiting factor to fully implementing the process.

**Commission Recommendation: The Commission requires the College to include in its October 2008 Show Cause Report its responses to the 2007 external audit findings.**

### **Team Findings and Analysis**

The College received the 2007 audit and has resolved each of the findings. Based on interviews with the president, members of the board, campus leaders, and business office personnel, it is apparent that the College now embraces and has adopted procedures to safeguard funds and implement processes which strengthen internal controls assuring the fiscal integrity of the College. It was clear at the time of the visit that previous audit findings had neither been shared with the Board of Regents nor the College President in a timely manner. Staff that was responsible for the functions which were found to be wanting was unaware of the issues and the need to take corrective action by following established procedures. The lack of communication and information sharing has been resolved; the president has taken a "hands-on" level of involvement demonstrating the seriousness of the audit and the institutional resolve to manage its resources appropriately.



Since the audit was issued, the chief financial officer resigned for another position and an interim appointment has been made. The president has inserted her leadership to monitor purchases, travel, accounts receivable, accounts payable, and cash management. Forms have been developed and are utilized to initiate purchases and other expenditures with appropriate signature requirements. All travel is reviewed and approved by the president. If there are unresolved travel expenditure issues from already-completed travel, no new approvals are done for that person until such time as the issues are resolved satisfactorily. Monthly reviews are conducted to ensure that documentation matches the various requirements (request, signature, inventory, and receipt forms). College staff was following the procedures and accountability measures are in place to address any staff member who fails to follow procedures. As an example of accountability, during the visit it was learned that one individual in the business office resigned due to that individual's mismanagement of funds.

During the visit, completed and blank purchase order forms, bid documents, awards, payments, and receipts were reviewed to verify that internal controls were implemented and being followed. Policies and procedures are in place with careful monitoring at the presidential level. The team interviewed the Board of Regents and each board member is aware of the internal weaknesses identified. The Board now requires an update on progress to resolve negative audit findings. Lastly, the College now communicates on a regular basis with the auditors to make sure that campus activities are appropriate and compliant with audit requirements.

### **Conclusion**

The College has fully addressed this Commission recommendation. The College has taken the audit findings seriously and responded with due diligence.

**There were other team recommendations remaining from the Comprehensive visit in October 2006, which the Commission did not request a report on in the June 30, 2008, action letter by Dr. Barbara Beno. However, the College in its October 2008 Show Cause Report provided an update on Recommendations 4, 5, 6 and Eligibility Requirement #5 Administrative Capacity; therefore, the team made an assessment of the College's status on each of these recommendations:**

**Recommendation 4. The team recommends the College complete the cycle of developing, measuring, analyzing, and discussing student learning outcomes, and acting on the findings, as part of a continuous effort of improvement. (Standards I.B.1, II.A.1.a, II.A.1.b, II.A.2, II.A.3, II.A.5, II.A.6, III.B.2.b, III.C.2, III.D.3, IV.A.5, IV.B.2.b)**

### **Team Findings and Analysis**

The College process uses the Nichols & Nichols' Five-Column Model, which includes columns on mission, intended program/service outcomes, means of assessment and success criteria, summary of data collected, and use of results. The College had



completed columns 1-3 by October 3, 2008, and the fourth column was due the Friday before the team visit. The complete five-column model for all courses is due December 29, 2008. Some early work by the Mathematics faculty and the General Education Committee has assisted the college in analyzing to date how the model is working. The results of the five-column process will hinge on the research capacities of the College. As mentioned in Recommendation 2 of this document, much work needs to be accomplished to systematize the data collection and analysis in order for the results to be used meaningful for decision making.

## **Conclusion**

The College had partially implemented this recommendation. The cycle of identifying, assessing, and evaluating the results of student learning outcomes is not complete; however, the model used and the participation of faculty to date is positive and appeared to the team that it would be completed as planned. However, the College must address its research capabilities to achieve the required capacity to meaningfully assess and analyze student learning. The College has achieved the development level on the ACCJC Rubric for Evaluating Institutional Effectiveness—Student Learning Outcomes.

**Recommendation 5. The team recommends that the College implement the employee evaluation processes that are in place in a timely manner in order to assure the effectiveness of its human resources and encourage improvement. (Standards II.A.2.a, III.A.1, II.D, IV.A.1, IV.A.4, IV.B)**

## **Team Findings and Analysis**

The College recognizes the central role the faculty has in quality instruction and student learning and has implemented an annual faculty evaluations and training to support the ongoing development of employees. The College has a written code of ethics for its employees. Evaluations are designed to improve institutional practice and service. Evaluations are done annually for faculty, staff, and administrators. At the time of the team's visit, the president had yet to be evaluated; however, in discussions with the board of regents and president, each recognized the importance of completing this no later than December 2008.

Faculty and others who have primary responsibility for student learning have, as a component of their evaluations, a specific section on the degree to which they are involved in program review and learning assessment. The form omits the component of student learning outcomes; however, it was noted in the team's review of completed forms that some faculty evaluations did contain narrative of their central role in student learning outcomes. The college needs to incorporate the results of learning outcomes assessment as a component of the evaluations of those responsible for learning outcomes.

The team conducted interviews, reviewed forms and documents, completed evaluations, and institutional faculty and staff development activities and confirmed that the College integrates human resource needs with institutional planning and actions. Human



resource planning is linked to program review. Several key positions have been identified as priorities; funding is in place. At the time of the visit, recruitment was underway to fill these positions. It was evident that the College understands the importance of program review and how information derived from that process can be incorporated into human resource planning leading to institutional improvement.

## **Conclusion**

The College will have implemented this recommendation when the Board of Regents completes its evaluation of the college president by December 2008. The faculty and others responsible for learning evaluation forms also need to contain student learning outcomes as a component of the overall evaluation process. (III.A.1.c)

**Recommendation 6. The College should pursue funding to renovate or replace aging building with facilities that are appropriate to meet the current and future needs of the College. (Standards II.B.1, III.B.1.a, III.B.1.b, III.B.2, III.B.2.a, III.B.2b, III.D.1.a, III.D.1.b, III.D.1.c)**

## **Team Findings and Analysis**

As a result of the Commission's action letter, the College pursued funding for facilities modernization and the campus master planning and was awarded \$417,166. In addition the College had allocated other funds for immediate facilities improvements. At the time of the visit, the team noted the improvements to the campus with a new road, buildings painted, and an "esprit de corps" throughout in the overall condition of the campus. The College has requested \$15 million from the legislature to implement the campus master plan. This request is based on an estimate of costs and may change with the development of the integrated facilities master plan. The president and board members expressed confidence in these funds being available as a current bond is being retired and a new bond is issues.

Facilities master planning will be linked to educational planning and integrated with the technology needs of a quality institution as noted in the grant awarded the institution for campus master planning. Technology planning is comprehensive, coupled with staff development, to assure the appropriate allocation of resources and the effective utilization of these technologies. Upgrades are underway for technology enhancements including a new communication network, standardized hardware and software, and a more secure connection to both Tinian and Rota sites. Procurement of technology upgrade services followed institutional policies and procedures.

It must be noted that campus development is a long term and continuous process. The College has made considerable progress in the acquisition of funds to retain the services of professionals who will guide the planning process. Funds are available and a request for professional services will be announced soon. The \$15 million request comes at a time when the Commonwealth will issue a new bond and this request is anticipated to be included. The development of the facilities master plan coupled with the potential for

Commonwealth funding via a new bond bodes well for the College. (The U.S. Department of Interior provides annual funding to retire the bond. The current bond is retired this year and the Commonwealth included the College's construction costs in its plan for the new bond.)

## **Conclusion**

Although the facilities plan is not completed, the planned activities and potential funding are in place to ensure completion in a timely manner. Bids for campus master planning consultants were being drafted at the time of the visit. The bid requires these consultants to conduct the educational master planning process and develop the educational plan. The team determined that the intent of this recommendation has been achieved, and once funded and constructed will result in a campus suitable for quality educational programming.

**Eligibility Requirement #5 Administrative Capacity: The institution has sufficient staff, with appropriate preparation and experience to provide the administrative services necessary to support its mission and purpose.**

## **Team Findings and Analysis**

Since the previous team's visit, the College has stabilized its leadership and administrative team. Currently, the chief financial and administrator officer's position is vacant due to a resignation. The College hopes to recruit a qualified and committed individual who will know the audit issues and be able to complete the cycle of integrated planning related to resource allocation. The director of institutional advancement, also a key member of the leadership team, is vacant due to a resignation. The team is satisfied that the interim chief financial and administrator is providing the leadership for that unit as well as being a valuable member of the management team.

During the visit, the team was provided a list of current vacancies and the recruitment status for each. Several are in the interview process; others have been re-announced due to an insufficient pool. Recruitment of qualified individuals, to the College (and Island) has proven difficult in the best of circumstances. The recent addition of an institutional effectiveness professionals and support staff professionals has strengthened the College's capacity in this area although institutional research remains an area needing more resources. At the time of the visit, a second person in institutional research had recently been hired. This individual holds a graduate degree in business. Once acquainted with the newly purchased software and data analysis requirements, the position will strengthen the capacity of this office.

## **Conclusion**

The College meets Eligibility Requirement #5.