## College of DuPage

**HLC ID 1084**

### PROBATION

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Position</th>
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<tbody>
<tr>
<td>President</td>
<td>Dr. Ann Rondeau</td>
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<tr>
<td>HLC Liaison</td>
<td>Barbara Johnson</td>
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<tr>
<td>Review Team Chair</td>
<td>Kristin Mallory</td>
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<tr>
<td>Federal Compliance Reviewer</td>
<td>Linda Stacy</td>
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<tr>
<td>Team Member</td>
<td>Marty Bachman</td>
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<td>Team Member</td>
<td>Sheri Barrett</td>
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<td>Team Member</td>
<td>Steven Lewis</td>
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<td>Team Member</td>
<td>Jeanne Swarthout</td>
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<td>Team Member</td>
<td>Cindy Krueger</td>
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<td>Team Member</td>
<td>Peter Wielinski</td>
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Context and Nature of Review

Visit Date

4/17/2017

Mid-Cycle Reviews include:

- The Year 4 Review in the Open and Standard Pathways
- The Biennial Review for Applying institutions

Reaffirmation Reviews include:

- The Year 10 Review in the Open and Standard Pathways
- The Review for Initial Candidacy for Applying institutions
- The Review for Initial Accreditation for Applying institutions
- The Year 4 Review for Standard Pathway institutions that are in their first accreditation cycle after attaining initial accreditation

Scope of Review

- Reaffirmation Review
- Federal Compliance
- On-site Visit
- Multi-Campus Visit (if applicable)

There are no forms assigned.

Institutional Context

The College of DuPage is celebrating its 50th anniversary since its initial formation as an institution serving 10 high school districts. Now serving over 27,000 students each year, the College of DuPage is the largest of the publicly funded Illinois community colleges and the second largest provider of public undergraduate education in the state of Illinois. The college offers nine associate degrees and over 170 certificates with programs offered through traditional, online, hybrid, and fast-track delivery models.

The Higher Learning Commission placed the College of DuPage on probation following an advisory visit in 2015, noting non-compliance with several criteria and areas of concern in others. The peer review team was charged with reviewing the institution as a whole, through a comprehensive evaluation.

Since the notice of probation, the college has hired a new president, added the position of general counsel and several cabinet level changes have occurred through reorganization and retirement. Additionally, the composition of the Board of Trustees has continued to change through the last few election cycles.

Interactions with Constituencies
• Academic Testing Supervisor
• Accounts Receivable Cashier Supervisor
• Adjunct Faculty (12)
• Administrative Assistant, Support Center
• Administrative Assistant, Admissions, Registration & Records
• Administrative Assistant, Human Resources
• Administrative Assistant, Library
• Administrative Supervisor, Registration
• Advisory Committee Members (16)
• Assistant Controller
• Assistant Coordinator, Radio Operations
• Assistant Manager Learning Resources
• Assistant Manager, Learning Commons
• Assistant Vice President Development,
• Executive Director COD Foundation
• Associate Dean, Homeland Security Training
• Associate Dean, Learning Resources
• Associate Dean, Liberal Arts
• Associate Dean, Social/Behavioral Sciences and Nursing
• Associate Dean, Technology
• Associate Registrar, Student Records
• Associate Vice President, Academic Affairs
• Budget Manager
• Buildings & Grounds Manager
• Business Manager, Art Center
• Chief of Police
• Community Relations Coordinator
• Coordinator, Academic Assessment & Reporting
• Coordinator, Academic Testing
• Coordinator, Community Relations
• Coordinator, Corporate Relations
• Coordinator, Development
• Coordinator, Enrollment Support Center
• Coordinator, Hazardous Material
• Coordinator, Human Services
• Coordinator, Study Abroad
• Counselor
• Counselor, Students with Disabilities
• Custodial Manager, Facilities Operations
• Dean Continuing Education, Extended Learning
• Dean of Students
• Dean, Continuing Education, Extended Learning
• Deputy Chief of Police
• Director Labor, Employee Relations & Benefits
• Director Marketing
• Director of Annual Giving
• Director of Athletics, Associate Dean, Physical Education
• Director of Development, COD Foundation
• Director of Enrollment Services & Registrar
- Director of Grants
- Director of Internal Audit
- Director of Labor, Employee Relations and Benefits
- Director, Business Affairs
- Director, McAninch Arts Center
- Discipline Support Specialist
- Enrollment Operations Supervisor
- Faculty (67)
- Faculty, President CODFA
- Financial Operations Manager
- General Counsel
- Information Center Specialist III
- Instructional Assistant, Learning Commons
- Instructional Designer
- Instructional Technologist
- Interim Associate Dean, Business
- Interim Associate Dean, Learning Resources
- Interim Associate Dean, Continuing Education
- Interim Associate Dean, Learning Technologies
- Interim Controller
- Interim Dean, Learning Resources
- Interim Dean, Liberal Arts
- Interim Vice President, Academic Affairs
- International Student Services
- Information Specialist I
- Latino Outreach Center
- Learning Commons Coordinator, Operations Outreach, Technical Support
- Librarian (4)
- Library Computer Support Supervisor
- Library Supervisor, Reference Support Services
- Library Technical Services
- Library, Supervisor Acquisitions
- Local Business Leaders (5)
- Local Government Officials (2)
- Manager, Accounts Receivable
- Manager, Carol Stream Learning Commons
- Manager, College Curriculum
- Manager, Community Relations
- Manager, Multimedia
- Manager, Network Services
- Manager, Veteran Services
- Manager, Academic Outreach
- Manager, Admissions, Outreach
- Manager, Campus Central
- Manager, Career Services Center
- Manager, Communications
- Manager, Compensation & HRIS
- Manager, Early Childhood Center
- Manager, Employee Relations
- Manager, Employment
Manager, Field and Experiential Learning, Study Abroad
Manager, Financial Aid/Construction Accountant
Manager, Latino Outreach Center
Manager, Learning & Organizational Development
Manager, Learning Resources
Manager, Library
Manager, Office & Classroom Technology
Manager, Purchasing
Manager, Student Financial Assistance
Manager, Student Life
Manager, Veterans Services
Manager, Advising Services Training & Coordination
Manager, Employment
Marketing & Social Media Coordinator
Marketing Coordinator
Marketing Director
McAninch Art Center Marketing & Donor Relations
Media Lab Supervisor, Library
Mental Health Counselor
Micro Computer Tech Supervisor
Partner Colleges (3)
Past President
Police Investigator
Police Lieutenant
President
Program Advisor, CIS & CIT
Program Assistant, Learning Technologies
Program Manager
Program Manager, Continuing Education
Program Manager, Youth Academy & Personal Enrichment
Program Support Specialist
Programming Supervisor, Information Systems
Purchasing Expeditor
Purchasing Manager
Research Associate, Office of Research & Analytics
Senior Accountant II
Staff Services Manager
Student Body President
Student Body Vice-President
Student Diversity & Inclusion
Student Success Counselor (2)
Students (10)
Suburban Law Enforcement Academy
Supervisor Print & Mail Service
Supervisor Warehouse
Supervisor, Addison Center
Supervisor, Addison Learning Commons
Supervisor, Carol Stream Center
Supervisor, Computer Support
Supervisor, FA Support Services
- Supervisor, Greenhouse, Horticulture
- Supervisor, Library
- Supervisor, Naperville Center
- Supervisor, Naperville Learning Commons
- Supervisor, Westmont Center
- Supervisor, Westmont Learning Commons
- Vice President, Administrative Affairs & CFO
- Vice President, Human Resources
- Vice President, Information Technology
- Vice President, Marketing & Communications
- Vice President, Planning and Institutional Effectiveness
- Vice President, Student Affairs
- Web & Design Coordinator, Marketing

**Additional Documents**

Annual Security Report 2016-2017

Board of Trustees – Governance Policy No. 5-5, 15-5, 15-10, 20-5,

Board of Trustees Meeting Minutes for July 27, 2016, August 18, 2016, September 15, 2016, October 20, 2016

Board of Trustees videos of meetings 7/21/15 through 3/20/17 (except period of no quorum)

Center for Diversity and Inclusion: Vision, Mission, Goals (bi-fold)

Faculty credential files, sample of 10 each dual credit, Career and Technical Education, adjunct

ICCB Program Review 2017-2021 Requirements

Illinois Open Meetings Act (5 ILCS 120/), online at: http://www.ilga.gov/legislation/ilcs/ilcs3.asp?
    ActID=84&ChapterID=2

Illinois Public Community College Act (110 ILCS 805/), online at: http://www.ilga.gov/legislation/ilcs/ilcs3.asp?
    ChapterID=18&ActID=1150

Learning Commons: Promotional Folder

Program Reviews for Anatomy & Physiology, Accounting, Nursing, Art, Cosmetology, Electro-Mechanical
    technology, and Dental

The Power Card: Building Social Understanding (Center for Student Diversity and Inclusion)

The Power Card: Expanding Cultural Awareness (Center for Student Diversity and Inclusion)

The Power Card: Fostering Unity (Center for Student Diversity and Inclusion)

Student Outcomes Assessment Project Documentation

Student Success Council: Charge Document
Student Success Council: Top 10 Priority Action Items – Spring 2017

Student Success Team Membership Roster
1 - Mission

The institution’s mission is clear and articulated publicly; it guides the institution’s operations.

1.A - Core Component 1.A

The institution’s mission is broadly understood within the institution and guides its operations.

1. The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.
2. The institution’s academic programs, student support services, and enrollment profile are consistent with its stated mission.
3. The institution’s planning and budgeting priorities align with and support the mission. (This sub-component may be addressed by reference to the response to Criterion 5.C.1.)

Rating

Met

Evidence

The College of DuPage (COD) mission is “to be a center for excellence in teaching, learning, and cultural experiences by providing accessible, affordable, and comprehensive education.” The COD’s values are stated as being integrity, honesty, respect, and responsibility. The college’s mission statement documents are part of COD's Core Statements, which are reviewed annually by the Strategic Long Range Plan Advisory Committee (SLRPAC). Review of the 27-member SLRPAC roster confirms the college’s statement that this planning is representative of “faculty, administrators, classified staff, student leadership and Board members.”

The July 27, 2016 Board meeting on management ethics and governance training documents the Board responsibility to “ensure ongoing long-range planning through direction to, participate in, and annual approval of a strategic long range plan” was among the training topics conducted. Review of Board meeting minutes document the Board’s review and discussion of the SLRP during its meetings beginning with its January 21, 2016 meeting and continuing into its August 18, 2016 and September 13, 2016 meetings. The Board of Trustees officially adopted the 2017-2021 SLRP in October 2016, as documented in its October 20, 2016 meeting minutes.

The mission statement's focus on being "a center for excellence in teaching, learning, and cultural experiences" is largely evidenced by the structure, support services, and academic resources made available to students and faculty. Comments made during interviews with students and employees attested to the availability of on-campus and asynchronous tutoring support, robust library and research services, and a rich roster of in-house professional development opportunities. Tours of the Learning Commons and the COD Library verified the college's dedication of resources sufficient to encourage excellence in teaching and learning.
The college's 2017-2021 SLRP and 2014-2015 Fact Book document the process of planning and budget commitment through its consideration of student, faculty and staff demographics along five-year trends in gender, full-time/part-time status, age classification, previous education, ethnicity, residency and educational goal. COD also reviewed environmental scan trends for competitive, demographic, economic, education, workforce, political, social and technological factors specific to its service region. Upon completion of a SWOT analysis, the college's strategic long range planning process identified 56 specific objectives organized within eight goal themes, with each goal theme demonstrating clear alignment to the college's mission and values.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
1.B - Core Component 1.B

The mission is articulated publicly.

1. The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.
2. The mission document or documents are current and explain the extent of the institution’s emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.
3. The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.

Rating

Met

Evidence

Review of multiple college documents and webpages confirm that the institution’s statements of mission, vision and values are included in its 2015-2017 college catalog, comprehensive annual financial report, college fact book, fiscal year 2017 budget, 2017-2021 Strategic Long Range Plan (SLRP), and “About COD” web page. In addition, the college's mission statement was prominently displayed in the Board of Trustee's meeting room, and both on the public website and within the COD Employee Portal. Finally, a tour of the campus facilities readily showed at least seven instances of the college's mission statement on display.

The mission documents are current, having been most recently reviewed, revised, and adopted in October of 2016 as part of the strategic long range planning process. As noted in the evidence cited in 1.A, the college's mission documents and 2017-2021 SLRP define the institution's nature as being "a center of excellence in teaching, learning and cultural experiences." Furthermore, the college articulates scope of its mission by focusing on "providing accessible, affordable and comprehensive education." The goals of the SLRP not only address accessibility through ensuring "equality and inclusiveness," and financial stewardship in order to "keep tuition and property taxes as affordable as possible," but also directly speak to the components of "accountability," "value-added education," and "infrastructure" in meaningful ways that outline support for providing a comprehensive education. Finally, in conversations with the President's Cabinet, Student Success Council, Board of Trustees, and various faculty and staff groups, it is apparent that the college recognizes its role as an educational "center" to the larger community which both supports the college through millages and is served by the college via its educational and experiential offerings.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.
**1.C - Core Component 1.C**

The institution understands the relationship between its mission and the diversity of society.

1. The institution addresses its role in a multicultural society.
2. The institution’s processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.

**Rating**

Met

**Evidence**

The college’s 2016 Affirmative Action Plan states that “meetings will be conducted as appropriate with administrators and supervisory staff to explain the intent of the [Equal Employment Opportunity and Affirmative Action] policy and to reiterate the college’s commitment, as well as the expectations regarding each individual administrator/supervisor’s responsibility for effective implementation of the plan.” Meeting minutes document that this review of the policy does take place. The EEO/AA policy is available upon request and for download via the COD portal. Both the Affirmative Action Plan and the Long Range Strategic Plan document awareness of the race/ethnic mix of college employees, students and within the community served.

The college’s Long Range Strategic Plan demonstrates attention to human diversity in its Goal 4, stating intention to “foster a culture of inclusiveness to students, employees, and the community through programs, activities, policies and procedures,” as well as to “develop and implement programs and services to enhance institutional diversity.” Evidence of such programs can be found in the college’s 2013-2014 establishment of the Center for Student Diversity and Inclusion, the Latino Outreach Center, the Center for Access and Accommodations, the Autismerica program, and a variety of cultural and ethnic clubs.

Meetings with the directors of these programs stressed the freedom they enjoy to exercise their passions in support of student success and in pursuit of "inclusive excellence." Students confirmed the directors' statements that the student body desires an umbrella center for "multiculturalism and inclusive excellence" under which all centers of diversity might be located. Considering the diversity of the student body, the resources designated to these centers is not proportional and appears to provide only marginal support. By the next review however, the team recommends facilities allocation should move beyond simply labeling a director's office as a "center" to providing adequate space for specific populations to explore and share the richness of their cultural identities.

**Interim Monitoring (if applicable)**

No Interim Monitoring Recommended.
1.D - Core Component 1.D

The institution’s mission demonstrates commitment to the public good.

1. Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.
2. The institution’s educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.
3. The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

Rating

Met

Evidence

Review of the July 2016 training topics on ethics and governance affirms that the Board of Trustees was appropriately oriented to the responsibilities of decision-making with regard to fiscal stewardship and accountability, preservation of institutional assets, "good" use of public resources (efficient operation, minimal waste and quality service), long-range planning, aligning budgets with strategic plan, and focusing on outcomes. A random sampling of Board minutes from 2016 demonstrated the Board's attention to institutional matters reflective of attending to the public good.

The college also documents its dedication to the region it serves through the objectives listed in Goal 5 of its 2017-2021 Strategic Long Range Plan (SLRP). Goal 5 of the SLRP articulates nine objectives to increase partnerships with District 502, business leaders, elected officials, and community organizations such as Rotary clubs and chambers of commerce throughout DuPage, Will, and Cook counties. The college also seeks to strengthen community connection through its outreach activities, with "a focus on the visual and performing arts." Review of the summer 2017 calendar for the college's McAninch Arts Center (the "MAC") reveals the scheduling of dozens of performances, shows, and other arts events, all open to the general public. Meetings with faculty, staff, and community members further confirmed the MAC's importance to the region as an artistic hub.

The college evidences its commitment to educational responsibilities taking primacy over other interests not only through the 17 objectives detailed in the SLRP's goals focusing on Value-Added Education and Student Centeredness, but also through the work of the 27-member Student Success Council. The charter of the Student Success Council is to "develop and implement a Student Success Model focused on learning." Based on recommendations from a 2016 sub-team, the larger council has identified their Top 10 Priority Action Items, which focus in part on such topics as transfer support, learning community curricula, course guides for liberal arts and sciences, promoting co-curricular activities in every class, and adopting meta-majors.

Interim Monitoring (if applicable)
No Interim Monitoring Recommended.
1.S - Criterion 1 - Summary

The institution’s mission is clear and articulated publicly; it guides the institution’s operations.

Evidence

The College of DuPage has conducted a thorough review of its mission documents as part of its 2017-2021 Strategic Long Range Plan (SLRP). The 27-member SLRP committee was comprised of students, faculty, staff, administrators and community members, who presented their mission document recommendations to the Board of Trustees for approval in October 2016. The Board of Trustees have recently received training to orient them as to their responsibilities for reviewing and adopting the mission statement documents, and meeting minutes display that the appropriate process of review and approval was conducted. The COD mission statement and related documents are on prominent public display, and are reflective of both the institutional priority of education and of the region served.
2 - Integrity: Ethical and Responsible Conduct

The institution acts with integrity; its conduct is ethical and responsible.

2.A - Core Component 2.A

The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows policies and processes for fair and ethical behavior on the part of its governing board, administration, faculty, and staff.

Rating

Met With Concerns

Evidence

The College of DuPage (COD) has approved a number of policies and procedures; some are new and others are revised and updated. Consistent with Public Act 93-615 from Illinois statutes regarding Board of Trustees ethical behavior, the college adopted an Ethics Ordinance which applies to all employees. Board policy 5-15 governs the ethical responsibilities of the board regarding finances. Board policy 5-220 established an Audit, Budget and Academic Committees comprised of at least three board members; on May 20, 2016, the board moved to revise the authority of the Audit Committee in Policy 5-220. The Audit Committee is a board committee and as such has authority to initiate investigations where warranted. While some of these ethics policies have been in place since at least 2009, others are new to the college. Regardless, the college has been previously cited by the Commission for non-compliance with ethics requirements.

A majority of policy changes and new policies resulted from the Illinois Office of the Auditor General Performance Audit of COD ending FY 2014. The audit was requested by the Board of Trustees through BOT Resolution 15-430-11. The Illinois Office of the Auditor General made 19 recommendations for improvement at the institution including performance evaluation of the president, oversight of construction projects, recurrent discrepancies in procurement, Open Meeting Law lack of compliance and matters of internal controls. Many of these recommendations have been addressed in policies and procedures but documented evidence in some areas of actual change is lacking.

Board of Trustee meeting minutes indicate that the board is currently receiving all policy-mandated information regarding the financial position of the college and its expenditures. The board is receiving monthly financials including actual to budget, frequent update on investments and how those investments relate to board policy on investments (approximately quarterly), and audit position. The board has contracted with an investment consultant (BMO Global Asset Management; board minutes 2/25/16) to maintain adherence to board investment policy and provide frequent investment updates to the board.
The Board of Trustees received extensive ethics training, conducted by an external consultant. Board minutes summarize the extent and content of that training. However, board minutes indicate that not all board members attended the complete training in all areas. For example, the board received training in Human Resources on 10/20/16 and procurement on 11/17/16 but two board members were either missing, arrived late or left early. The same pattern is documented for ethics training. Training in ethics and compliance has also been conducted with college staff; the institution anticipates conducting that training on a regular basis. Employees with specific financial roles also received training appropriate for their responsibilities.

The Board of Trustees has participated in a retreat focused on improving board functioning and communication. There have been additional retreats with the president and the executive team; as well, there are stated plans to continue to hold board retreats regularly with a retreat scheduled immediately after new board members are seated in April, 2017 as noted during the site visit meeting with COD Board of Trustees.

The recent addition to the institution of the position of General Counsel is designed to provide ethical and legal oversight over college operations from board activity through procurement procedures. General Counsel standardly reviews legal, compliance and investigatory matters. As part of an interview with General Counsel during the team visit, General Counsel provided evidence of the immediate effects of his position such as board packets now include all payment information and complete transparency on all board agenda items. General Counsel also pointed to the robust whistle-blower hotline as additional documentation. Counsel indicates the hotline has been used and all incidents reported are fully investigated. The Ethics Hotline is accessible from the board's front page. The Ethics Hotline is an anonymous reporting system which can be accessed either by email or phone.

Faculty and staff documents indicate the ethics requirements for those members of the college community. Meetings with the managers during the site visit indicate that all have undergone ethics training with a resulting heightened awareness of the significance of appropriate controls and ethical behavior.

In the context of several meetings with COD personnel, the visiting team noted an underlying element of fear and distrust, possibly a residual of previous issues. At times, employees voiced their concerns privately. In on-campus meetings concerns were also expressed regarding administrative areas, an overall lack of a cultural shift in accountability, and those in areas of power who have not changed or are still a problem within the organization. The underlying mistrust most often focused on how and by whom various performance reviews were conducted, and the lack of shared governance in decision-making.

Criterion 2, Component A is assessed as "Met with Concerns" because the institution is not yet able to document that the policy and procedures resulting from the Probation sanction have yielded the results needed to demonstrate that the college and its elected board operates with integrity in all aspects of the college's operations. The Visiting Team understands that the lack of demonstrated evidence of the effectiveness of changes is tied closely to the timelines associated with the sanction. Nevertheless, documented evidence of the policy and procedure changes is significant in evaluating whether the institution meets HLC expectations of all accredited institutions of higher education. The visiting team also includes its concerns regarding the adequacy of COD's Assurance Argument. The Assurance Argument lacked a comprehensive scope and adequately-documented evidence throughout. As a result, the visiting team found it challenging to assess many areas of the comprehensive visit. COD is encouraged to grow its relationship with HLC and increase its understanding of HLC's expectations of all institutions.
Interim Monitoring (if applicable)

By December 1, 2019, the College of DuPage will provide an interim report to include the following:

- Documented evidence of application of new and revised BOT policies and procedures;
- Documented evidence of compliance with Open Meeting Law per Illinois Statute;
- Documented evidence of continued BOT training in matters of ethics, open meeting law, and fiduciary responsibility;
- Documented evidence of continued professional relationships within the BOT and between the BOT and college employees; and
- Documented evidence that COD is using the results of an anonymous Climate Survey of college employees to provide evidence that the previous climate of fear and mistrust has been remedied.

See Criterion 5.B.
2.B - Core Component 2.B

The institution presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships.

Rating

Met

Evidence

A review of the College of DuPage's website and college catalog both document the institution's compliance with presenting information about the college clearly and consistently. The college maintains program information and associated program requirements, admissions information, financial data, and accreditation information (both regional and program related) in a variety of accessible methods. Students and the public know what to expect with regard to transfer credits, financial commitments and program-specific expectations. In addition, external program-specific accreditation information is available on the college's website. Faculty contracts clearly express the institution's relationship with full and part-time faculty members.

Through interactions with all constituents, it is evident that the College of DuPage clearly stated the probation status with the Higher Learning Commission in documents and correspondence with stakeholders. During the community forum, advisory committee members and elected officials expressed their support of the institution noting the value the college brings to the community, and acknowledged the recent changes in leadership that have made significant positive changes for the college.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.
2.C - Core Component 2.C

The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity.

1. The governing board’s deliberations reflect priorities to preserve and enhance the institution.
2. The governing board reviews and considers the reasonable and relevant interests of the institution’s internal and external constituencies during its decision-making deliberations.
3. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests or other external parties when such influence would not be in the best interest of the institution.
4. The governing board delegates day-to-day management of the institution to the administration and expects the faculty to oversee academic matters.

Rating

Met

Evidence

A thorough review of board minutes, archived videos and associated power point presentations of board meetings since July 2015 indicate a clear improvement in deliberations among members and information available to the board. New BOT procedures and transparencies provide sufficient information to allow the board to make independent decisions which are in the best interests of COD students. It should be noted that both the minutes and videos indicate that some board members are frequently absent and vote against the majority of the board, suggesting that past board issues are not completely at rest. Board conflict from the past is evident in specific behaviors on the part of a few board members. The seating of new board members in April will provide an opportunity to put previous issues between members behind and allow the BOT to continue to move forward.

In its most recent board meeting video, the board continued to hear comments from external stakeholders regarding the issues that have hampered the college recently and spoke to optimism about the future. The President has established a practice of responding to public comment, where appropriate, in written form and posts those responses to the president's page on the website.

The institution has made considerable effort recently to hold more frequent community listening and outreach sessions, leading to a more positive relationship with external stakeholders. A recent example is an agreement with the City of Glen Ellyn, cooperative in nature. All involved in forging the agreement concur that the issues between the college and the City are in the process of healing. This agreement is a direct result of the community outreach effort.

The College of DuPage is governed by Illinois statutes regarding public education institutions. Statutes speak to the independence of the Board of Trustees from any undo external influence as well as Open Meeting Law requirements. All college business, with the exception of items covered under Executive Session, must be conducted in a formal meeting for which the meeting time, location and agenda have been made available to the public to ensure there is no inappropriate influence over the
board and its decisions. While the Illinois statute regarding governing board behavior has been in law for some time, the institution has not always operated in compliance. Examination of board documents, presentations in board meetings, and videos of such meetings provides evidence of recent compliance with Illinois statutes, improved practice and clear respect for Open Meeting Law requirements.

Finally, board policy clearly states that the board is responsible for setting policy; the president and administration are charged with implementing board policy (Board Policy 15-205). Recent board actions and minutes document compliance with this policy. Further, visiting team interviews with administration and management indicate that the board operates at an appropriate level, setting policy and delegating implementation of policy and operations to the president and staff.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
2.D - Core Component 2.D

The institution is committed to freedom of expression and the pursuit of truth in teaching and learning.

Rating

Met

Evidence

The College of DuPage is committed to the freedom of expression through Board Policy 15-335 which covers both students and faculty. Faculty freedom of expression and pursuit of truth is further protected through the Faculty Contract, Section C2. While there is a brief statement for students regarding freedom of expression in the college catalog, students might be well-served if a statement regarding freedom of expression and pursuit of truth was displayed in a manner more noticeable and easily accessed.

COD BOT Policy No. 10-110 regarding Assemblage on College Facilities pertains to freedom of expression. However, General Counsel acknowledged in an interview that the institution will need to develop new policy around freedom of expression and is in the process of consultation with other legal entities prior to proceeding. Additionally, BOT Policy No. 10-115 addresses issues related to freedom of expression in its requirements for Outside Speakers and Programs. This policy relates directly to external individuals and groups but does not legislate freedom of expression behavior for faculty, staff and students except in the incidence that any of these COD employees participate in such an event.

By the next review, COD will have a more prominent statement regarding freedom of expression for students. In addition to a more prominent statement, the institution will have a clear policy on freedom of expression for students, faculty and staff.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.
2.E - Core Component 2.E

The institution’s policies and procedures call for responsible acquisition, discovery and application of knowledge by its faculty, students and staff.

1. The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students.
2. Students are offered guidance in the ethical use of information resources.
3. The institution has and enforces policies on academic honesty and integrity.

Rating

Met

Evidence

The College of DuPage has a well-articulated policy related to academic honesty and integrity; it is available to students in the college catalog. As well, there is a clearly described procedure for addressing issues of academic honesty. Board Policies 20-30, 20-35, and 20-41 provide thorough summaries of Student Rights and Responsibilities, Code of Conduct and Academic Misconduct. Review of institutional records regarding academic honesty and integrity indicate that the institution appropriately addresses cases and resolves these cases in a manner consistent with policies and procedures.

The institution's Library provides a variety of tools which support students and faculty in their responsible acquisition, discovery and application of knowledge. Best practice tools include reference services, information literacy instruction (both on the web and in-classroom), and technical services. Students and faculty can reserve time for research assistance as well as use of citations and correct search procedures.

COD has an Institutional Research Board (IRB) with specific guidelines. The IRB, accessible for student and faculty research, provides protection in instances where human subjects are the research focus. The IRB process functions through the Intranet Portal and is not easily located, however, Section "J" of the IRB guidelines does provide specific guidance regarding external research requests.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.
2.S - Criterion 2 - Summary

The institution acts with integrity; its conduct is ethical and responsible.

Evidence

COD has made numerous changes in Board of Trustees policies in response to the audit report provided by the Illinois Office of the Auditor General and the HLC finding of Not Met on Core Component 2A. The institution provides limited documented evidence of improvement in BOT performance. Core Component 2A is Met with Concerns based on limited performance evidence that new and revised policies are fully implemented and meeting best board practices.

New BOT policies, procedures and transparency do provide sufficient information to allow the board to make independent decisions in the best interests of the institution, its students, and the public. The BOT now follows Illinois Open Meeting Law and operates at an appropriate level.

COD provides clear and accessible information to its students and the public regarding transfer of credits, accreditation, costs to students and program-specific data. The institution commits to freedom of expression in teaching and learning; however, student access to statements of freedom of expression is limited. A clear BOT policy on freedom of expression needs to be developed. COD provides evidence regarding responsible acquisition, discovery and use of knowledge through both policy and robust support services primarily provided through the library.
3 - Teaching and Learning: Quality, Resources, and Support

The institution provides high quality education, wherever and however its offerings are delivered.

3.A - Core Component 3.A

The institution’s degree programs are appropriate to higher education.

1. Courses and programs are current and require levels of performance by students appropriate to the degree or certificate awarded.
2. The institution articulates and differentiates learning goals for undergraduate, graduate, post-baccalaureate, post-graduate, and certificate programs.
3. The institution’s program quality and learning goals are consistent across all modes of delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through contractual or consortial arrangements, or any other modality).

Rating

Met With Concerns

Evidence

In general, the College of DuPage's (COD) degree programs are appropriate to higher education. Conversations with representatives from the program academic faculty as well as a review of the minutes from the President's Cabinet meetings confirm that academic deans collaborate with community members, ensure programs are current, and meet the workforce needs of the profession.

The college has taken action on its probation issue related to the awarding of credit for the non-credit SLEA program by instituting many processes and procedures. On March 4, 2016 the Academic Committee of the Board of Trustees and the Continuing Education Committee with Credit Bearing Faculty was put into place. Also, the Continuing Education Department has a formal vetting process which includes taking a program/course suggestion to the leadership team who reviews it for fit and financial capability and then it goes to the VPAA, the Divisional Curriculum Committee and back to the VPAA for final approval. It was noted during the visit that students were unharmed by the SLEA Academy event that happened in the past. To assure procedures have been implemented, by the next review the campus should demonstrate how the processes and procedures put into place will prevent another event similar to the SLEA Academy from occurring.

COD faculty create an Active Course File for each course in the curriculum which includes a course description, course learning outcomes, assessment measures, and usually a sample syllabus. Faculty preparing any section of a course should extract the information from the Active Course File in preparing the course syllabus and structuring the course content. The team reviewed multiple sections of syllabi from 16 different courses to compare course learning outcomes, course descriptions, and other identifying elements of a course. Inconsistencies were noted in student learning outcomes in
four of these cases (25% of the courses). Additionally, in discussion with adjunct faculty, there were inconsistent experiences with the directive to follow the Active Course File among the various departments. Of the faculty present, some attested to the consistent use of the learning outcomes and course descriptions, while other faculty noted little direction, oversight, or adherence to the common learning outcomes.

The college needs to bolster its process for ensuring that all courses are teaching to and assessing the established course student learning outcomes, including all delivery formats and locations (on campus, off-campus, dual-credit, online, hybrid, etc.). Faculty should take greater ownership of what learning outcomes should be learned from each course, and then ensure that the course meets those outcomes whenever and wherever the course is taught. Also noted in the Federal Compliance Review, the college is lacking a clear, concise policy on awarding credit. The current policy does not address all delivery formats employed by the COD.

**Interim Monitoring (if applicable)**

By May 15, 2018, the college will submit an interim report identifying how the issue of inconsistent course learning outcomes has been resolved. The report must include:

- Consistent process and practice demonstrating adherence to the course outcomes as listed in the Active Course File by full-time and part-time faculty,
- Consistent process and practice demonstrating adherence to the course outcomes as listed in the Active Course File regardless of course delivery (in-seat, on-line, hybrid, dual-credit, etc.)
- A clear policy on awarding credit that addresses all delivery formats employed by the college, including the explanation on how credit hours are calculated for distance learning formats.

See Criterion 4.A.

The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to its educational programs.

1. The general education program is appropriate to the mission, educational offerings, and degree levels of the institution.
2. The institution articulates the purposes, content, and intended learning outcomes of its undergraduate general education requirements. The program of general education is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.
3. Every degree program offered by the institution engages students in collecting, analyzing, and communicating information; in mastering modes of inquiry or creative work; and in developing skills adaptable to changing environments.
4. The education offered by the institution recognizes the human and cultural diversity of the world in which students live and work.
5. The faculty and students contribute to scholarship, creative work, and the discovery of knowledge to the extent appropriate to their programs and the institution’s mission.

Rating

Met

Evidence

COD follows the Illinois Articulation Initiative General Education Standards, which requires a minimum of 37 credit hours in stipulated areas, such as English, science and mathematics. COD students earning an Associate of Arts or Science Degree follow these mandatory requirements. Students completing occupational or workforce degrees may complete up to 10 credit hours of specified general education courses. The general education core at COD aligns with its mission and eight student learning outcomes as these core principles are interwoven through academic programs to achieve the general education aims. Through its general education program which is anchored in Illinois’s general education requirements for college graduates, COD demonstrates that the acquisition of broadly based learning is integral to its education programs.

A review of COD’s general education and career-specific curriculum documents confirmed that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to their programs, articulating academic program goals and individual course objectives that highlight broad learning skills in each program. Community representatives reported that they meet with program directors and others to help keep programs current with employer needs.

Students who earn a degree from COD have the opportunity to take classes that address cultural and/or global awareness. Faculty members are free to do research and have the opportunity to share their research and creative work, including presenting at state and national conferences. The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and
integration of broad learning and skills are integral to its educational programs.

COD recognizes the importance of scholarship, discovery of knowledge, and human cultural diversity and consider them as guiding principles for their curriculum. The site-visit team found these guiding principles threaded throughout the courses and support the mission of the college. Furthermore, the team concluded through discussions with various groups and after reviewing the Assurance Argument, that the college included these elements because there is a general understanding and appreciation for graduating well-rounded individuals who are prepared to meet the demands of their professions.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
3.C - Core Component 3.C

The institution has the faculty and staff needed for effective, high-quality programs and student services.

1. The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for student performance; establishment of academic credentials for instructional staff; involvement in assessment of student learning.
2. All instructors are appropriately qualified, including those in dual credit, contractual, and consortial programs.
3. Instructors are evaluated regularly in accordance with established institutional policies and procedures.
4. The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.
5. Instructors are accessible for student inquiry.
6. Staff members providing student support services, such as tutoring, financial aid advising, academic advising, and co-curricular activities, are appropriately qualified, trained, and supported in their professional development.

Rating

Met

Evidence

The faculty to student ratio at COD is 23/1, falling into the mid-range when compared to peer institutions. Online education courses are capped at 28 students per faculty member. Conversations with staff during the campus visit confirmed that employees are evaluated on an ongoing basis. COD faculty are observed in the classroom and evaluated through their Performance Plan. A review of documents and interviews with faculty and academic program directors confirmed that faculty are evaluated through a defined evaluation process that allows them to develop Individual Performance Plans, meet with their direct supervisor to refine these goals and then to address their goals at the end of the year as part of their evaluation. Administrator and student observations are conducted each term as deemed necessary by policy.

A discussion with online faculty as well as the Online Academic Program Director revealed that online faculty are evaluated following the same basic process as in-seat faculty. However, rather than conducting classroom observations as defined for in-seat faculty, the Online Academic Program Director evaluates each online faculty member based on a set of faculty expectations. The online faculty members meet with the Online Academic Program Director to develop individual professional development plans which are also reviewed and evaluated at the end of each year. Several faculty members expressed to the HLC team that the evaluation process was working well for them.

Following the on-site review of faculty files, the team noted that faculty files are quite "informal" and it was unclear as to who is approving faculty to teach their specific course load. However, a random
audit of faculty credentials indicated that the faculty meet or exceed the minimum requirements for teaching in their respective areas and that the overall faculty corps is qualified to provide the quality of instruction necessary to support COD’s mission. In addition, numerous faculty are working on completion of advanced degrees through various incentive programs offered by the college.

COD supports the life-long learning of all faculty, staff, and administration by offering professional development opportunities. Online faculty attend in-service education requirements as well to keep current with Blackboard platform and cover teaching methodology and online delivery methods.

The Teaching and Learning Center is a rich resource of training and support for faculty and staff. Through this office comes all compliance training for the institution, as well as a robust offering of professional development, often utilizing content experts from throughout the college. Occasional videotaping of training provides employees off-campus or who otherwise cannot attend live training the opportunity to participate.

Students acknowledged faculty availability for discipline specific questions. This was underscored in both the HLC Student Survey and in conversation with students during the student forum.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
3.D - Core Component 3.D

The institution provides support for student learning and effective teaching.

1. The institution provides student support services suited to the needs of its student populations.
2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its programs and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites, museum collections, as appropriate to the institution’s offerings).
5. The institution provides to students guidance in the effective use of research and information resources.

Rating

Met

Evidence

Conversations with students and staff on campus confirmed that COD provides an array of student support services to meet the needs of their students. Students and staff both cited examples of outstanding customer service, easy access to faculty and staff, and the Student Shuttle which brings students from the farther away parking area to the front of the campus for classes.

Observations as well as meetings with students and staff revealed that COD provides for all support and services needed for students from enrollment through graduation. Admissions, financial aid support, placement exams, cashier services, and academic advisement are provided to students in a one-stop-shop location. Online discussion board conversations held with online faculty and online students as well as a review of three online courses confirmed that online students also have access to these support services. Students noted a few concerns during the student discussion forum about counseling having waiting times to get in and inconsistent communication from financial aid personnel.

The college demonstrates its commitment to providing the infrastructure and resources necessary to support effective teaching and learning to support students and instructors as demonstrated by its continual increase in WiFi technology in the classroom and projectors that faculty and students reported met the needs of the programs of instruction.

Students entering COD who are intending to complete a degree or certificate, who wish to be dual-enrolled students, or who are enrolling in reading, writing, or mathematics general education classes take the Basic Skills Assessment tests in reading, writing, and mathematics. The results of these assessments place students into the classes that match the level of their skills and knowledge, according to the assessment tests.
Online teaching is supported by instructional technologists and instructional designers who assist faculty in developing online courses and equipping courses with technology tools to assist in delivering content. Blackboard, the online learning management system, is utilized by 100% of faculty to disseminate course syllabi; 68% of face-to-face courses also utilize Blackboard in additional ways. The college is also considering adopting Quality Matters or a similar process to enhance the quality of online learning in the near future. Students can receive technological assistance through the student affairs office. Students also receive an orientation to online learning and have an opportunity to provide feedback about the online courses and platform in student surveys. The instructional technologists reported in conversations with the team that they are also planning to expand online training of faculty to off-campus locations.

The COD Library provides a vast and impressive collection of resources for students and faculty, and the facility is a bustling center for student engagement and learning. The library is staffed by nine full-time MLS-qualified librarians, with specializations in various disciplines, who provide a wide diversity of expertise for students and faculty alike. An additional 11 part-time librarians complement the staff. Library staff regularly provide specific classroom seminars and training in effective use of research and information resources as requested by faculty. Library services are provided equally for online students and those at off-campus locations.

The Learning Commons is a multi-purpose center of academic support for students, providing one-on-one tutoring in writing, reading, mathematics, and most other disciplines. Professional tutors are appropriately qualified and are supplemented with student tutors, all of whom tutor in specialty areas. The center also has practice space and audio/video equipment for public speaking assignments, and provides resources for aid in study skills and preparing for placement tests. Off-campus locations have full-time professional tutors onsite, and online students also have sufficient access to these resources.

The Counseling and Advising Services office provides educational counseling, career counseling, and personal counseling by appointment, walk-in, e-mail, and phone. The office also provides academic advising to all incoming students and many current students. Faculty also have advising responsibilities, and the two sources of academic advising sometimes create confusion and errors in advising, leading to frustration for students, as reported in meetings with students and in the comments in the student survey administered through the HLC. The advising staff reported to the team that an initiative is underway to revise the advising process to more effectively include faculty advising and reduce miscommunication in the process. This will be necessary to provide a more streamlined advising process and to reduce errors in helping students to complete their programs of study. It is expected by the next comprehensive evaluation the institution will be able to demonstrate how it has addressed concerns of students including but not limited to advising, financial aid, and counseling.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
3.E - Core Component 3.E

The institution fulfills the claims it makes for an enriched educational environment.

1. Co-curricular programs are suited to the institution’s mission and contribute to the educational experience of its students.
2. The institution demonstrates any claims it makes about contributions to its students’ educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Rating

Met

Evidence

The College of DuPage has a robust set of clubs and organizations that contribute to the educational experience of its students. These include special interest clubs around disciplines, Honors, Service Learning, Student Leadership Development, multicultural clubs, and various Honor Society organizations. Students in some of the science clubs have participated in national competitions and traveled to present at conferences.

The college has a healthy endowment fund and is supported by the community, as such the overall educational environment contributes to the educational experience of the students. The institution has well maintained facilities and strong student support mechanisms. For example, the Horticulture Club holds three plant sales each year as a fund raiser which has become very popular for the campus and community.

The college has recently developed a new Student Orientation that initial data indicates correlates to higher levels of success and retention. Each club has a faculty sponsor. Students take an assessment to find out what co-curricular activities they are interested in and then attend the orientation. The orientation program is scheduled to become mandatory.

Meetings with the community included Advisory Board members for the Career and Technical programs (CTE). Members present indicated a strong tie between area businesses and the college, and the work of the Advisory Committees inform the curricular needs of the CTE programs. These meetings can also lead to practice sites for students and possible employment opportunities.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.
3.S - Criterion 3 - Summary

The institution provides high quality education, wherever and however its offerings are delivered.

Evidence

The College of DuPage has systems in place to ensure quality delivery of education on campus and online. However, the consistency of following the Active Course File was missing upon audit. Student Learning Outcomes were inconsistent in 25% of the courses that were reviewed. Faculty and supervisors need to take increased responsibility for what learning outcomes are in each course whenever and wherever the course is taught.

The institution promotes intellectual rigor through its emphasis on a general education core curriculum and provides its faculty and staff with training and professional development to ensure they provide students with the best educational experience. COD is committed to ensuring the faculty and staff members are adequately credentialed and continue to grow in their knowledge and skill development. Finally, the college leadership is committed to providing a culturally, academically, and socially rich learning environment that supports and welcomes students, faculty, staff, administrators, and the community.
4 - Teaching and Learning: Evaluation and Improvement

The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

4.A - Core Component 4.A

The institution demonstrates responsibility for the quality of its educational programs.

1. The institution maintains a practice of regular program reviews.
2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.
3. The institution has policies that assure the quality of the credit it accepts in transfer.
4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.
5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
6. The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).

Rating

Met With Concerns

Evidence

In general, the College of DuPage (COD) demonstrates responsibility for the quality of its educational programs. A uniform reporting template has been developed to guide the internal college review process. Reviews include statements with regard to program need supported with labor market data, enrollment and FTE trends, graduation rates, student success, student satisfaction, and a summary of improvements since the last five-year review. The college program review documents are summarized for the Illinois Community College Board (ICCB) on a standardized form. COD’s programs and support services undergo review on a five-year cycle by the ICCB. A review of the 2015 ICCB Program Review Report found summaries for 18 career and technical education programs, six academic disciplines, two student and academic support service areas, and one cross-disciplinary
curricula. The ICCB form requests "Improvements & Rationale for Action" and "Plans for Future Improvement." Interviews with faculty verified that program review is occurring. In addition, advisory groups provide input on career technical program status and provide direction on program updates and enhancements.

The college policy on awarding credit reads that the College of DuPage will "equate its learning experiences with semester credit hours using practices common to higher education." The team found this policy to be vague and inadequate in addressing all delivery formats employed at the institution. The college should revise its policy on awarding credit to encompass how alternate delivery formats are considered in awarding credit and what formula is used to award credit.

The college evaluates credit that it transcripts and accepts credit from other regionally accredited institutions. Transfer policies were confirmed through interviews with student service personnel. Students must submit an official transcript to the Office of Student Records for a credit review. COD also accepts credit through demonstrated competency which includes faculty developed exams, CLEP and AP examinations. Policies for awarding credit are clearly explained in the Student Handbook.

The college has taken action on its probation issue related to the awarding of credit for the non-credit SLEA program. In March 2016, the college instituted the Academic Committee of the Board of Trustees and the Continuing Education Committee. The Continuing Education Committee includes full-time faculty from credit-bearing programs and formally vets non-credit programs/courses. By the next review, the college should demonstrate how the processes and procedures put into place are working to support the educational objectives of the college.

Faculty are responsible for curriculum development including determination of prerequisites for courses, course rigor, and student learning outcomes. Courses are vetted through the Divisional Curriculum Committee prior to review by the College Curriculum Committee. The "Guide to Curriculum: Curriculum Process and Development Update" serves as a guide for faculty to obtain approval through college committees as well as state-level committees. This process was verified through meetings with faculty and the curriculum committee.

The college maintains external accreditation for 23 programs including Automotive Technology, Culinary Arts, Horticulture, Dental Hygiene, Medical Assisting, Nursing, and Visual Arts. Accreditation information is visible and accessible to internal and external stakeholders via the college's website. The quality of technical programs is not only ensured by the external accreditation standards and review, but also via the five-year program review.

The college evaluates the success of its graduates in several important ways, including post-graduation surveys, certificate, credential or degree attainment, passing rate on licensure exams, and employer survey results. Results of student success were included in the college program review documents that were reviewed. Advisory committee members also verified their participation in evaluating academic programs. Success stories are communicated to the college community as well as the surrounding community through news articles and social media.

**Interim Monitoring (if applicable)**

By May 15, 2018, the college will submit an interim report identifying how the issue of inconsistent course learning outcomes has been resolved. The report must include:
- Consistent process and practice demonstrating adherence to the course outcomes as listed in the Active Course File by full-time and part-time faculty,
- Consistent process and practice demonstrating adherence to the course outcomes as listed in the Active Course File regardless of course delivery (in-seat, on-line, hybrid, dual-credit, etc.)
- A clear policy on awarding credit that addresses all delivery formats employed by the college, including the explanation on how credit hours are calculated for distance learning formats.

See Criterion 3.A.

The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.

1. The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.
2. The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.
3. The institution uses the information gained from assessment to improve student learning.
4. The institution’s processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.

Rating

Met With Concerns

Evidence

The team found evidence regarding the college's commitment to student success and the improvement of courses and programs through the use of assessment. The college's Strategic Long Range Plan includes strategic goals and objectives which focus on student success and strong academic programs. Multiple groups noted the Active Course File houses the master course information including student learning outcomes, course descriptions and topical outlines and is accessible by all faculty. However, interviews with full-time and part-time faculty found inconsistency in use of the master file when developing course syllabi across departments.

Faculty reported completing Student Learning Outcomes Assessment Projects (SOAPs) annually; these reports are tied to the program review process. Even though the SOAPs are being completed, the assessment of courses across all faculty groups and delivery methods is inconsistent. Part-time faculty are not consistently involved in assessment activities and evidence was not found that dual enrollment courses are assessed. However, evidence was provided that supports course level assessment is occurring at COD. For example, physics and theater changed an instructional methodology, composition changed the textbook, and accounting adjusted an assignment based on the assessment data. In addition, program reviews for disciplines focused on course level assessment.

The general education outcomes serve as the program outcomes for the non-career and technical education programs. Even though program review has been occurring, assessment of program learning outcomes is limited in the career and technical education programs. The program reviews identify program goals but these goals are not student learning outcomes, in most cases. In interviews with academic administration, program learning outcomes are under development and are being incorporated into 5-year program review cycle for the career and technical education programs. This was verified by finding program learning outcomes assessment in the nursing and electro-mechanical technology program reviews. Currently, program learning outcomes are not readily available for students; consideration should be given to increase student accessibility to this information.
Assessment of co-curricular activities is lacking. The college does not currently designate the difference between co-curricular and extra-curricular activities on campus. Additionally, the campus does not appear to have policies that tie the co-curricular activities to the educational objectives of the campus.

The College of DuPage has established eight broad general education learning outcomes for its students. The outcomes are measurable and provide a foundation for institution-level assessment of student learning. The eight general education learning outcomes are assessed within specific courses throughout the college curriculum and have been mapped in a General Education Outcome Mapping document. The mapping document identifies defining outcomes that are used to develop each of the eight general education outcomes, the courses that will assess the outcomes, the performance that students will demonstrate for each outcome, and the assessment technique used. This creates a robust plan for assessment at the institution-level; however, little evidence is provided to show the results of this assessment process or how it informs decisions to improve teaching and learning.

**Interim Monitoring (if applicable)**

By December 1, 2019, the college will submit an interim report that documents curricular change through assessment to include:

- Documented evidence that all career and technical programs have developed assessment plans, are assessing program learning outcomes, and are using the assessment data to inform decisions;
- Documented evidence that the student learning outcomes are communicated and readily available to all constituents;
- Documented evidence of aggregated results of general education assessment that informs curricular change; and
- Documented evidence of processes and assessments that demonstrate how the co-curricular activities support and enhance the educational objectives of the college.
4.C - Core Component 4.C

The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.

1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.
2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.
3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.
4. The institution’s processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Rating

Met With Concerns

Evidence

The College of DuPage collects a robust amount of data regarding retention, persistence, and completion of its students and the college identifies numerous ways in which that data is used throughout the college for program review. The college has a general student success goal noted in its 2014-2016 Strategic Long Range Plan to be in the top quartile of the National Community College Benchmarking Project on retention, persistence and graduation. The goals were verified in interviews with the Office of Planning and Institutional Effectiveness; this goal is appropriate to the college's mission, student populations, and programs.

While the college appears to gather and dissect large amounts of data for use in the reporting and creation of the college's long-range strategic plan, there is a lack of evidence on how data is used in decision-making to set program-level and operational targets. Even though data reports may mark a metric as meeting the benchmark, the actual target number is not readily identified. By the next review, the target benchmarks should be clearly identified on all reports. What is less evident are identified goals for programs regarding retention, persistence, and completion. Even though persistence and completion data is available for each program, it is not clear what targets programs are attempting to reach.

The college has used the general student data collected on retention, persistence, and completion to implement new policies and programs such as the mandatory Smart Start program for first-time, full-time new students, midterm grading, and attendance policies. The college has seen an improvement in fall-to-fall persistence between 2010 and 2014 based on success initiatives. Overall, the college has a robust set of data to utilize for decision making related to retention, persistence and completion;
however, how individual programs are using the data to achieve goals and make program improvements should be enhanced.

**Interim Monitoring (if applicable)**

By December 2019, the College of DuPage will provide an interim report demonstrating its comprehensive use of student success data to include the following:

- Documented evidence of how data and metrics informs decisions and initiatives adopted by the college;
- Documented evidence that COD is setting internal targets of performance for operational areas of the college and using data to measure success in those areas, including program targets for persistence and completion; and
- Documented evidence of infrastructure to support the accreditation needs of the college in gathering and using data.

See Criterion 5.D.
4.S - Criterion 4 - Summary

The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

Evidence

The institution is responsible for the quality of its programs. On site, and in a review of the college’s documents and records, the team found evidence to confirm that College of DuPage has developed a commitment to the assessment of student learning and the monitoring of student achievement to promote continuous improvement. The institution has an established program review cycle and annual assessment of student course learning outcomes. However, assessment of student program learning outcomes is limited in career and technical programs and program outcomes are not readily available to students. Assessment of general education outcomes is occurring but how it is informing decisions for improvement is not clear.

The college needs to revise its policy on awarding credit to clearly identify how alternate delivery formats are awarded credit. The college has taken action on its probation issue related to awarding of credit for a non-credit program; an evaluation of the processes and procedures implemented should be reviewed at the next review.

The college has a robust set of data to utilize for decision-making; however, utilization of the data for decision-making by individual programs should be enhanced.
5 - Resources, Planning, and Institutional Effectiveness

The institution’s resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

5.A - Core Component 5.A

The institution’s resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.

1. The institution has the fiscal and human resources and physical and technological infrastructure sufficient to support its operations wherever and however programs are delivered.
2. The institution’s resource allocation process ensures that its educational purposes are not adversely affected by elective resource allocations to other areas or disbursement of revenue to a superordinate entity.
3. The goals incorporated into mission statements or elaborations of mission statements are realistic in light of the institution’s organization, resources, and opportunities.
4. The institution’s staff in all areas are appropriately qualified and trained.
5. The institution has a well-developed process in place for budgeting and for monitoring expense.

Rating

Met

Evidence

The College of DuPage (COD) operates within the state of Illinois and is governed by the Illinois Community College Act which provides policy oversight of resources, revenues and expenditures. As required by statute, the Board of Trustees is locally elected. With recent elections two board members will not be returning and new members are due to be seated soon.

Board policy requires annual approval of the college's Strategic Long Range Plan, including annual action plans containing campus projects and associated costs. The annual planning documents provide a level of linkage to the budgeting processes of COD especially in the administrative functions of the college. Program Review processes drive the budgeting priorities of the Academic programs. As a public college in the state of Illinois the COD does not have a super-ordinate body that is paid any resources.

The COD is in a strong financial position with over $211 million in unrestricted funds and $248 million in capital assets. In the 2017 budget the primary educational mission is supported by 97% of the budget and auxiliary services were self-sufficient. The college provides regular ongoing reports to budget managers to monitor costs, and now provides regular reports to the Board of Trustees on budgeting performance and an outside firm monitors and reports on investments of the institution.
The COD has adequate physical, fiscal and human resources to support its primary mission.

Strategic Planning goals and processes also support the mission of the organization and are ongoing and widely embraced by the organization. The institution has appropriate levels of staffing by qualified employees that have opportunities for ongoing professional development both within the structure of college development offerings and externally through funding of professional memberships and travel to meetings and trainings.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
5.B - Core Component 5.B

The institution’s governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission.

1. The governing board is knowledgeable about the institution; it provides oversight of the institution’s financial and academic policies and practices and meets its legal and fiduciary responsibilities.

2. The institution has and employs policies and procedures to engage its internal constituencies—including its governing board, administration, faculty, staff, and students—in the institution’s governance.

3. Administration, faculty, staff, and students are involved in setting academic requirements, policy, and processes through effective structures for contribution and collaborative effort.

Rating

Met With Concerns

Evidence

In this section of the Assurance Argument the College of DuPage provided details on the policies and procedures adopted by the Board of Trustees and those determined by state statute that governs the work of the Board. However, it should be noted that these are the same requirements that were in place when the college was found to be out of compliance with Core Component 5.B.2. previously. Because not enough time has passed, at issue is adherence by leadership to adhere to approved and required policies and procedures.

In response to the HLC compliance issue the COD re-instituted monthly financial statements prepared by financial staff of the college and revised portions of the reports to add detail and increase overall usability for the Board. Additionally, in relation to investment policies not being followed the Board approved the hiring of an investment adviser, BMO Global Asset. The investment firm provides monthly investment reports to the Board as well as a Quarterly/Annual reports that are bound by board investment policies.

Additionally, following the findings of non-compliance, both the Board and the Cabinet participated in a four-hour training on Ethics and Governance facilitated by an outside agency. This was followed up by a Board retreat focused on the responsibility of the Board, Board and President expectations, unproductive behaviors and strategies to work as a team. This was also facilitated by an external expert. While not all members of the Board participated in the training, recent elections and the seating of new members of the Board may provide closure on the division among board members.

Finally, in response to concerns about academic governance, the Board of Trustees formed an Academic Committee of the Board to review and recommend strategic policies, procedures and programs. Beyond Board members the new committee also has full-time and adjunct faculty, students and the Vice Presidents of Academic and Student Affairs.

There are three new Board members who have been elected and seated, one serving a two-year term.
and two serving a six-year term. Given the newness of many of these policies and changes, it is too soon to determine if the COD is able to adhere to both existing and new policies and processes because not enough time has passed.

**Interim Monitoring (if applicable)**

By December 1, 2019, the College of DuPage will provide an interim report on leadership compliance with established policies to include the following:

- Documented evidence of application of new and revised BOT policies and procedures;
- Documented evidence of compliance with Open Meeting Law per Illinois Statute;
- Documented evidence of continued Board of Trustees training in matters of ethics, open meeting law, and fiduciary responsibility;
- Documented evidence of continued professional relationships within the BOT and between the BOT and college employees; and
- Documented evidence that COD is using the results of an anonymous Climate Survey of college employees to provide evidence that the previous climate of fear and mistrust has been remedied.

See Criterion 2.A.
5.C - Core Component 5.C

The institution engages in systematic and integrated planning.

1. The institution allocates its resources in alignment with its mission and priorities.
2. The institution links its processes for assessment of student learning, evaluation of operations, planning, and budgeting.
3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.
4. The institution plans on the basis of a sound understanding of its current capacity. Institutional plans anticipate the possible impact of fluctuations in the institution’s sources of revenue, such as enrollment, the economy, and state support.
5. Institutional planning anticipates emerging factors, such as technology, demographic shifts, and globalization.

Rating

Met

Evidence

The Academic Affairs Division of the college use Program Review processes to link planning and budgeting. The Program Review process uses data on student persistence, retention and completion, review of curriculum and limited assessment data to connect with budgeting and planning. The college uses the Strategic and Annual planning processes to align resources with the mission and priorities of institution for the Administrative Affairs portion of the college.

The college Strategic and Annual Planning processes includes both internal and external constituents as well as a network of Advisory boards that support the Career and Technical programs of the college. The Administrative structures of the college rely on the annual planning processes of the college to drive improvement and performance strategies with the departments, while the Academic divisions use Program Review for these purposes. The annual planning functions are designed to accomplish the same goals as Program Review for budgeting, planning, and mission alignment purposes.

The college has several primary data sources for the purposes of benchmarking performance. These include the National Community College Benchmarking Project (NCCBP), the Illinois Community College Board, National Student Clearing House Research Center, IPEDS, and the College Board. The college monitors multiple levels of performance, trends of the data, and comparisons to peers or aspirational colleges. These benchmarks include, among others, enrollment, capacity, economic impact, student persistence, transfer, student success, degree completion, student engagement, developmental curriculum, satisfaction, revenue, expenses, grants, aid and scholarships.

The Office of Research and Analytics reports on expansive amounts of data, however, it is not always clear how well this data drives decision making and budgeting at the college and all of the connections to strategic and annual planning processes. It may be beneficial to establish clear lines
and processes that show how this data is used institutionally for decision-making and in support of its accreditation requirements. By the next review the college should have developed stronger evidence of decision-making based on data gathered by the campus. (See 5.D.)

The college has adopted a Technology Strategic Plan to guide technology decisions and support the academic environment of the college. The college maintains an advisory committee on technology that includes participation across the campus and helps to inform technology needs from various constituencies, as well as look to emerging trends.

As a public institution in the state of Illinois funding from the state has been inconsistent or non-existent. The institution's overall budget support from the state only comprises 6% of the institution's budget. The college has been able to maintain the level of academic and administrative budget needs without this support.

**Interim Monitoring (if applicable)**

*No Interim Monitoring Recommended.*
5.D - Core Component 5.D

The institution works systematically to improve its performance.

1. The institution develops and documents evidence of performance in its operations.
2. The institution learns from its operational experience and applies that learning to improve its institutional effectiveness, capabilities, and sustainability, overall and in its component parts.

Rating

Met With Concerns

Evidence

The college has instituted a variety of institutional effectiveness measures that document campus performance overall. The college reports on student persistence, retention, completion and transfer rates, as well as monitoring FTE, average credit per student, recruitment, and developmental course success rates.

Additionally, the college uses the Ruffalo Noel-Levitz Student Satisfaction Inventory and the Community College Survey of Student Engagement as measurements of student satisfaction and engagement. The college participates in the National Community College Benchmarking Project which includes benchmarking data on over 180 metrics which allows the college to benchmark performance against other peer and aspirational community colleges on areas such as persistence, retention, transfer performance, developmental course retention and completion rates.

The college has strategic and annual planning processes and has adopted components of the Baldridge framework. The college used the Baldridge-option in a previous Systems Portfolio review.

While there is a great deal of activity related to collection of data, it is not always apparent how the data informs decisions on the campus or how an understanding of the data drives improvement. Additionally, the college has moved from the AQIP Pathway to the Standard Pathway for accreditation. These Pathways for accreditation have distinctive differences. By the next review the institution would benefit from engaging more faculty and staff in understanding the Criteria for Accreditation and building appropriate frameworks within the institution to support this model.

Interim Monitoring (if applicable)

By December 1, 2019, the College of DuPage will provide an interim report on data evaluation to include the following:

- Documented evidence of how data and metrics informs decisions and initiatives adopted by the college;
- Documented evidence that COD is setting internal targets of performance for operational areas of the college and using data to measure success in those areas, including program targets for
persistence and completion; and

- Documented evidence of infrastructure to support the accreditation needs of the college in gathering and using data.

See Criterion 4.C.
5.S - Criterion 5 - Summary

The institution’s resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

Evidence

The College of DuPage has a strong resource base that allows it to meet the needs of the surrounding community and to establish itself as a leader nationally for community colleges. Moving forward the college has the opportunity to strengthen internal processes and more tightly align the use of data and metrics to decisions within the institution.

The election of new board members and adoption of new policies and processes, as well as adherence to existing policies will help the college move past prior issues and work more cohesively as a Board and administration. Ongoing Board training and development for the Cabinet will help facilitate this relationship.

Overall, the college would benefit from a greater understanding of the Criteria for Accreditation as a framework for designing and implementing processes that are based on best practices. Alignment of the college's processes with evidentiary requirements of accreditation will also strengthen the data-based decision practices of the institution.
# Review Dashboard

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Review Summary

Interim Report(s) Required

Due Date
5/15/2018

Report Focus
Criterion 3.A. and 4.A.

- Consistent process and practice demonstrating adherence to the course outcomes as listed in the Active Course File by full-time and part-time faculty;
- Consistent process and practice demonstrating adherence to the course outcomes as listed in the Active Course File regardless of course delivery (in-seat, on-line, hybrid, dual-credit, etc.)
- A clear policy on awarding credit that addresses all delivery formats employed by the college, including the explanation on how credit hours are calculated for distance learning formats.

Due Date
12/1/2019

Report Focus
Criterion 2.A. and 5.B.

By December 1, 2019, the College of DuPage will provide a progress report to include the following:

- Documented evidence of application of new and revised BOT policies and procedures;
- Documented evidence of compliance with Open Meeting Law per Illinois Statute;
- Documented evidence of continued Board of Trustees training in matters of ethics, open meeting law, and fiduciary responsibility;
- Documented evidence of continued professional relationships within the BOT and between the BOT and college employees; and
- Documented evidence that COD is using the results of an anonymous Climate Survey of college employees to provide evidence that the previous climate of fear and mistrust has been remedied.

Due Date
12/1/2019

Report Focus
Criterion 4.B.

By December 1, 2019, the college will submit a monitoring report that documents curricular change through assessment to include:

- Documented evidence that all career and technical programs have developed an assessment plan, are assessing program learning outcomes, and are using the assessment data to inform decisions;
Documented evidence that the student learning outcomes are communicated and readily available to all constituents;

- Documented evidence of aggregated results of general education assessment that informs curricular change; and
- Documented evidence of processes and assessments that demonstrate how the co-curricular activities support and enhance the educational objectives of the college.

Due Date
12/1/2019

Report Focus
Criterion 4.C. and 5.D.

By December 1, 2019, the College of DuPage will provide a progress report to include the following:

- Documented evidence of how data and metrics informs decisions and initiatives adopted by the college;
- Documented evidence that COD is setting internal targets of performance for operational areas of the college and using data to measure success in those areas, including program targets for persistence and completion; and
- Documented evidence of infrastructure to support the accreditation needs of the college in gathering and using data.

Conclusion

The College of DuPage has worked diligently to meet the requirements set by the Higher Learning Commission and to remove the probation sanction from the accreditation status. There has been a turn-over in leadership, starting with the President, three new senior administrators (CFO, interim CAO, General Counsel) and continued change in the members of the Board of Trustees. The college has initiated multiple new processes and committees to address concerns that led to the probation status, and is fiscally strong with healthy financial reserves.

Concerns for the institution's ability to fully meet the Criteria for Accreditation remain as there were several core components that were met with concerns. The assurance argument and supporting documents did not provide the evidence needed for the team to make judgment statements. Much documentation had to be requested, and multiple meetings added to find evidence, especially in the area of assessment. The team understands that the institution may not have been familiar with the Standard Pathway process, as COD had been an AQIP institution prior to probation status. The team encourages the college to actively study the HLC accreditation requirements and processes.

Additionally, throughout the visit, team members were approached with overall concern regarding the culture of the COD. It was noted that while there is a new president and new board members, many of the same upper-level administrators remain. Many meetings cited concern with the human resources department and the lack of ability to provide input on supervisor evaluations. While many new processes have been implemented, there has not been enough time to document whether the changes will have the intended effect for the institution to remain in compliance. It should be noted that many of the policies cited for evidence in the assurance argument have been in place, even during the time frame when the institution was found to be out of compliance.

The team has recommended four interim monitoring reports to address the issues that remain at the COD. The first requires immediate corrective action to meet not only the Criteria but also the Federal Compliance regulations. The remaining three reports are to be submitted two years following the final HLC report. The college can also expect an
on-site visit in year four of the Standard Pathway.

Overall Recommendations

Criteria For Accreditation
Met With Concerns

Sanctions Recommendation
No Sanction

Pathways Recommendation
Limited to Standard
Federal Compliance Worksheet for Evaluation Teams

Evaluation of Federal Compliance Components

The team reviews each item identified in the Federal Compliance Filing by Institutions (FCFI) and documents its findings in the appropriate spaces below. Teams should expect institutions to address these requirements with brief narrative responses and provide supporting documentation where necessary. Generally, if the team finds in the course of this review that there are substantive issues related to the institution’s ability to fulfill the Criteria for Accreditation, such issues should be raised in the appropriate parts of the Assurance Review or Comprehensive Quality Review.

This worksheet is to be completed by the peer review team or a Federal Compliance reviewer in relation to the federal requirements. The team should refer to the Federal Compliance Overview for information about applicable HLC policies and explanations of each requirement.

Peer reviewers are expected to supply a rationale for each section of the Federal Compliance Evaluation.

The worksheet becomes an appendix in the team report. If the team recommends monitoring on a Federal Compliance Requirement in the form of a report or focused visit, the recommendation should be included in the Federal Compliance monitoring sections below and added to the appropriate section of the Assurance Review or Comprehensive Quality Review.

Institution under review: College of DuPage

Please indicate who completed this worksheet:

☐ Evaluation team
☒ Federal Compliance reviewer

To be completed by the Evaluation Team Chair if a Federal Compliance reviewer conducted this part of the evaluation:

Name: Kristin Mallory

☒ I confirm that the Evaluation Team reviewed the findings provided in this worksheet.
Assignment of Credits, Program Length and Tuition
(See FCFI Questions 1–3 and Appendix A)

1. Complete the Team Worksheet for Evaluating an Institution’s Assignment of Credit Hours and Clock Hours. Submit the completed worksheet with this form.
   - Identify the institution’s principal degree levels and the number of credit hours for degrees at each level (see the institution’s Appendix A if necessary). The following minimum number of credit hours should apply at a semester institution:
     - Associate’s degrees = 60 hours
     - Bachelor’s degrees = 120 hours
     - Master’s or other degrees beyond the bachelor’s = At least 30 hours beyond the bachelor’s degree
   - Note that 1 quarter hour = 0.67 semester hour.
   - Any exceptions to this requirement must be explained and justified.
   - Review any differences in tuition reported for different programs and the rationale provided for such differences.

2. Check the response that reflects the evaluation team or Federal Compliance reviewer’s conclusions after reviewing this component of Federal Compliance:
   - The institution meets HLC’s requirements.
   - The institution meets HLC’s requirements, but additional monitoring is recommended.
   - The institution does not meet HLC’s requirements and additional monitoring is recommended.
   - The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion 3, core component 3A and criterion 4, core component 4A.

Rationale:

As a comprehensive community college, COD offers nine associate degrees and over 170 certificate programs. Degrees need a minimum of 64 credit hours, and include an appropriate mix of program instructional hours and general education requirements. However, as noted in the Team Worksheet for Evaluating Credit Hours and Clock Hours, significant inconsistencies were noted in student learning outcomes recorded on sample syllabi reviewed. Additionally, the policy on awarding credit is vague and does not address all delivery formats employed by the institution.

Additional monitoring, if any:

The college should revise its policy on awarding credit to encompass how alternate delivery formats are considered in awarding credit and what method is used to award credit.
The college also needs to bolster its process for ensuring that all courses are teaching to and assessing the established course student learning outcomes, including all delivery formats and locations (on campus, off-campus, dual-credit, online, hybrid, etc.). Faculty should take greater ownership of what learning outcomes should be learned from each course, and then ensure that the course meets those outcomes whenever and wherever the course is taught. The college will submit a report to HLC addressing these issues no later than May 15, 2018.

**Institutional Records of Student Complaints**  
(See FCFI Questions 4–7 and Appendixes B and C)

1. Verify that the institution has documented a process for addressing student complaints and appears to by systematically processing such complaints, as evidenced by the data on student complaints since the last comprehensive evaluation.
   - Review the process that the institution uses to manage complaints, its complaints policy and procedure, and the history of complaints received and resolved since the last comprehensive evaluation by HLC.
   - Determine whether the institution has a process to review and resolve complaints in a timely manner.
   - Verify that the evidence shows that the institution can, and does, follow this process and that it is able to integrate any relevant findings from this process into improvements in services or in teaching and learning.
   - Advise the institution of any improvements that might be appropriate.
   - Consider whether the record of student complaints indicates any pattern of complaints or otherwise raises concerns about the institution’s compliance with the Criteria for Accreditation or Assumed Practices.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:
   - The institution meets HLC’s requirements.
   - The institution meets HLC’s requirements, but additional monitoring is recommended.
   - The institution does not meet HLC’s requirements and additional monitoring is recommended.
   - The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

**Rationale:**

The Student Complaint Process is easily accessible on the College’s website from the Current Students link. The Process is detailed, and there is a link to the online form. The College is very clear that there are specific forms for issues such as grades and tuition appeals.
COD provides several examples of improvements that have been implemented, as a result of analysis of student complaints.

COD provided an aggregate log with complaints from 2014, 2015, and 2016. While most indicate resolution in a timely fashion, not all of those in 2014 do; since 2014, processes have been put into place to allow for more proper tracking and recording of how complaints were addressed and resolved.

Additional monitoring, if any:

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**Publication of Transfer Policies**
(See FCFI Questions 8–10 and Appendixes D–F)

1. Verify that the institution has demonstrated it is appropriately disclosing its transfer policies to students and to the public. Policies should contain information about the criteria the institution uses to make transfer decisions.
   - Review the institution’s transfer policies.
   - Review any articulation agreements the institution has in place, including articulation agreements at the institution level and for specific programs and how the institution publicly discloses information about those articulation agreements.
   - Consider where the institution discloses these policies (e.g., in its catalog, on its website) and how easily current and prospective students can access that information.
   - Determine whether the disclosed information clearly explains any articulation arrangements the institution has with other institutions. The information the institution provides to students should explain any program-specific articulation agreements in place and should clearly identify program-specific articulation agreements as such. Also, the information the institution provides should include whether the articulation agreement anticipates that the institution (1) accepts credits from the other institution(s) in the articulation agreement; (2) sends credits to the other institution(s) in the articulation agreements; (3) both offers and accepts credits with the institution(s) in the articulation agreement; and (4) what specific credits articulate through the agreement (e.g., general education only; pre-professional nursing courses only; etc.). Note that the institution need not make public the entire articulation agreement, but it needs to make public to students relevant information about these agreements so that they can better plan their education.
   - Verify that the institution has an appropriate process to align the disclosed transfer policies with the criteria and procedures used by the institution in making transfer decisions.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:
   - The institution meets HLC’s requirements.
   - The institution meets HLC’s requirements, but additional monitoring is recommended.
☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.

☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

The COD Transfer page provides comprehensive information about the transfer process. This page has links to the following: 3+1 programs, 2+2 programs, Steps to Transfer, Reverse Transfer, Honors Transfer, and the Illinois Articulation Initiative. Additionally, there is an extensive list of the institutions where formal transfer agreements exist. The links to those institutions provide specific information concerning the courses which transfer, as well as the steps in the process.

Additional monitoring, if any:

Practices for Verification of Student Identity
(See FCFI Questions 11–16 and Appendix G)

1. Confirm that the institution verifies the identity of students who participate in courses or programs provided through distance or correspondence education. Confirm that it appropriately discloses additional fees related to verification to students, and that the method of verification makes reasonable efforts to protect students’ privacy.

   • Determine how the institution verifies that the student who enrolls in a course is the same student who submits assignments, takes exams and earns a final grade. The team should ensure that the institution’s approach respects student privacy.

   • Check that any costs related to verification (e.g., fees associated with test proctoring) and charged directly to students are explained to the students prior to enrollment in distance or correspondence courses.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

   ☑ The institution meets HLC’s requirements.

   ☐ The institution meets HLC’s requirements, but additional monitoring is recommended.

   ☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.

   ☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).
Rationale:

COD uses a secure login and passcode for security purposes. During the admissions process, students receive their unique ID numbers and their COD email account. At that point, they log into the college portal, MyACCESS and create a unique password. The campus online courses utilize the Blackboard Learning Management System which is password protected. The Academic Honesty policy also states that students are expected to do their own work.

Students pay an internet course fee of $57.50. This fee is detailed online and in the course schedule.

The COD IT department has responsibility for IT security. The department is in compliance with federal and Illinois regulations and laws, industry standards, as well as industry best practices. When several agencies or laws must be followed, the department defers to that with the highest level of security. The department undergoes an annual security audit, and is in full compliance.

The college also strongly suggests that students and employees use their college-provided email addresses in corresponding electronically throughout the institution. Allowing the use of other email accounts can create a question in how the institution verifies student identity.

Additional monitoring, if any:

Title IV Program Responsibilities
(See FCFI Questions 17–24 and Appendixes H–Q)

1. This requirement has several components the institution must address.
   • The team should verify that the following requirements are met:
     o General Program Requirements. The institution has provided HLC with information about the fulfillment of its Title IV program responsibilities, particularly findings from any review activities by the Department of Education. It has, as necessary, addressed any issues the Department has raised regarding the institution’s fulfillment of its responsibilities.
     o Financial Responsibility Requirements. The institution has provided HLC with information about the Department’s review of composite ratios and financial audits. It has, as necessary, addressed any issues the Department has raised regarding the institution’s fulfillment of its responsibilities in this area. (Note that the team should also be commenting under Criterion 5 if an institution has significant issues with financial responsibility as demonstrated through ratios that are below acceptable levels or other financial responsibility findings by its auditor.)
     o Default Rates. The institution has provided HLC with information about its three-year default rate. It has a responsible program to work with students to minimize default rates. It has, as necessary, addressed any issues the Department has raised regarding the institution’s fulfillment of its responsibilities in this area. Note that for 2012 and thereafter, institutions and teams should be using the three-year
default rate based on revised default rate data published by the Department in September 2012; if the institution does not provide the default rate for three years leading up to the comprehensive evaluation visit, the team should contact the HLC staff.

- **Campus Crime Information, Athletic Participation and Financial Aid, and Related Disclosures.** The institution has provided HLC with information about its disclosures. It has demonstrated, and the team has reviewed, the institution’s policies and practices for ensuring compliance with these regulations.

- **Student Right to Know/Equity in Athletics.** The institution has provided HLC with information about its disclosures. It has demonstrated, and the team has reviewed, the institution’s policies and practices for ensuring compliance with these regulations. The disclosures are accurate and provide appropriate information to students. (Note that the team should also be commenting under Criterion 2, Core Component 2.A if the team determines that the disclosures are not accurate or appropriate.)

- **Satisfactory Academic Progress and Attendance Policies.** The institution has provided HLC with information about its policies and practices for ensuring compliance with these regulations. The institution has demonstrated that the policies and practices meet state or federal requirements and that the institution is appropriately applying these policies and practices to students. In most cases, teams should verify that these policies exist and are available to students, typically in the course catalog or student handbook and online. Note that HLC does not necessarily require that the institution take attendance unless required to do so by state or federal regulations but does anticipate that institutional attendance policies will provide information to students about attendance at the institution.

- **Contractual Relationships.** The institution has presented a list of its contractual relationships related to its academic programs and evidence of its compliance with HLC policies requiring notification or approval for contractual relationships. (If the team learns that the institution has a contractual relationship that may require HLC approval and has not received HLC approval, the team must require that the institution complete and file the change request form as soon as possible. The team should direct the institution to review the Substantive Change Application for Programs Offered Through Contractual Arrangements on HLC’s website for more information.)

- **Consortial Relationships.** The institution has presented a list of its consortial relationships related to its academic programs and evidence of its compliance with HLC policies requiring notification or approval for consortial relationships. (If the team learns that the institution has a consortial relationship that may require HLC approval and has not received HLC approval, the team must require that the institution complete and file the form as soon as possible. The team should direct the institution to review the Substantive Change Application for Programs Offered Through Consortial Arrangements on HLC’s website for more information.)

- Review all of the information that the institution discloses having to do with its Title IV program responsibilities.
• Determine whether the Department has raised any issues related to the institution’s compliance or whether the institution’s auditor has raised any issues in the A-133 about the institution’s compliance, and also look to see how carefully and effectively the institution handles its Title IV responsibilities.

• If the institution has been cited or is not handling these responsibilities effectively, indicate that finding within the Federal Compliance portion of the team report and whether the institution appears to be moving forward with the corrective action that the Department has determined to be appropriate.

• If issues have been raised concerning the institution’s compliance, decide whether these issues relate to the institution’s ability to satisfy the Criteria for Accreditation, particularly with regard to whether its disclosures to students are candid and complete and demonstrate appropriate integrity (Core Components 2.A and 2.B).

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

☐ The institution meets HLC’s requirements.

☐ The institution meets HLC’s requirements, but additional monitoring is recommended.

☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.

☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

The College was certified on 10/18/2012, and the most recent review was March 2014. There have been no actions or fines.

The College has a $200 million fund balance, which represents a year’s operating expenses. No material weaknesses were found in the FY 14, 15, and 16 audits, and an unqualified opinion was offered by the external auditors.

The College’s default rates are as follows: FY 2013 – 15.7%, FY2012 – 13.2%, and FY 2011 – 13.4%. These do not exceed the threshold, and COD compares favorably to other cohort colleges, both in default rates and repayment of loans.

Based on 3/24/2016 correspondence, the College did have violations in terms of requirements of the Clery Act. The security report was not distributed properly, and campus safety policies were omitted. Upon notification, the College assembled a Clery Act Committee to correct violations of the College’s 2015 Annual Security Report, and address distribution issues. The correspondence also noted that Drug and Alcohol Prevention Program requirements were also not met, as there were distribution issues with this too.

In the past year, the Clery Act committee has addressed the concerns cited in the Title IV review; the 2016-17 Annual Security Report includes all information previously cited as omitted. Similarly, the Drug and Alcohol Prevention Program information is disseminated by email to students three times a year (fall, spring, and summer terms), and annually to employees.
Additional monitoring, if any:

Required Information for Students and the Public
(See FCFI Questions 25–27 and Appendixes R and S)

1. Verify that the institution publishes accurate, timely and appropriate information on institutional programs, fees, policies and related required information. Verify that the institution provides this required information in the course catalog and student handbook and on its website.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

   □ The institution meets HLC’s requirements.
   □ The institution meets HLC’s requirements, but additional monitoring is recommended.
   □ The institution does not meet HLC’s requirements and additional monitoring is recommended.
   □ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

COD meets the requirements related to providing accurate and timely information. These are detailed in the Student Handbook and Catalog, and links are provided from several places on the website.

Additional monitoring, if any:

Advertising and Recruitment Materials and Other Public Information
(See FCFI Questions 28–31 and Appendixes T and U)

1. Verify that the institution has documented that it provides accurate, timely and appropriately detailed information to current and prospective students and the public about its accreditation status with HLC and other agencies as well as about its programs, locations and policies.

   - Review the institution’s disclosure about its accreditation status with HLC to determine whether the information it provides is accurate, complete and appropriately formatted and contains HLC’s web address.

   - Review the institution’s disclosures about its relationship with other accrediting agencies for accuracy and for appropriate consumer information, particularly regarding the link
between specialized/professional accreditation and the licensure necessary for employment in many professional or specialized areas.

- Review the institution’s catalog, brochures, recruiting materials, website and information provided by the institution’s advisors or counselors to determine whether the institution provides accurate, timely and appropriate information to current and prospective students about its programs, locations and policies.

- Verify that the institution correctly displays the Mark of Affiliation on its website.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

   - The institution meets HLC’s requirements.
   - The institution meets HLC’s requirements, but additional monitoring is recommended.
   - The institution does not meet HLC’s requirements and additional monitoring is recommended.
   - The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

The information provided by COD is consistent in both print and electronic communications. The website is easy to navigate, and critical items can be reached from various links. An Accreditation webpage, has the HLC Mark of Affiliation, as well as complete information about the current accreditation status. This same site allows access to information concerning program accreditations. A list of specialized accreditations is included. Information pertaining to AQIP is also included, although since the college is no longer on the AQIP path to accreditation, it should remove references to AQIP in exchange for information pertaining to the appropriate accreditation pathway.

Additional monitoring, if any:

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**Review of Student Outcome Data**
(See FCFI Questions 32–35 and Appendix V)

1. Review the student outcome data the institution collects to determine whether they are appropriate and sufficient based on the kinds of academic programs the institution offers and the students it serves.

   - Determine whether the institution uses this information effectively to make decisions about planning, academic program review, assessment of student learning, consideration of institutional effectiveness and other topics.

   - Review the institution’s explanation of its use of information from the College Scorecard, including student retention and completion and the loan repayment rate.
2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

☐ The institution meets HLC’s requirements.
☒ The institution meets HLC’s requirements, but additional monitoring is recommended.
☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.
☒ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion 4.C. and 5.D.

Rationale:

COD has been a member of the National Community College Benchmarking Project since 2004. As such, the institution collects a number of data points related to persistence, retention, and completion. The college also collects data on academic program completion, and these data are used to some extent in decision-making. However, persistence and completion targets could be more clearly defined and the use of other student outcome data could be used in more fruitful ways.

Additional monitoring, if any:

By December 2019, COD should identify persistence and completion targets and track its progress in meeting those targets. COD should also illustrate in more defined and robust ways how it uses programmatic student outcome data in decision making. See Interim Report required for Criterion 4.C. and 5.D.

Publication of Student Outcome Data
(See FCFI Questions 36–38)

1. Verify that the institution makes student outcome data available and easily accessible to the public. Data may be provided at the institutional or departmental level or both, but the institution must disclose student outcome data that address the broad variety of its programs.

   • Verify that student outcome data are made available to the public on the institution’s website—for instance, linked to from the institution’s home page, included within the top three levels of the website or easily found through a search of related terms on the website—and are clearly labeled as such.

   • Determine whether the publication of these data accurately reflects the range of programs at the institution.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

☒ The institution meets HLC’s requirements.
☐ The institution meets HLC’s requirements, but additional monitoring is recommended.
☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.

☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

The College collects a volume of data information pertaining to persistence, retention, and completion, which is made available in the “Student Right to Know” section of the college website.

Additional monitoring, if any:

Standing With State and Other Accrediting Agencies
(See FCFI Questions 39–40 and Appendixes W and X)

1. Verify that the institution discloses accurately to the public and HLC its relationship with any other specialized, professional or institutional accreditors and with all governing or coordinating bodies in states in which the institution may have a presence.

The team should consider any potential implications for accreditation by HLC of a sanction or loss of status by the institution with any other accrediting agency or of loss of authorization in any state.

Note: If the team is recommending initial or continued status, and the institution is now or has been in the past five years under sanction or show-cause with, or has received an adverse action (i.e., withdrawal, suspension, denial or termination) from, any other federally recognized specialized or institutional accreditor or a state entity, then the team must explain the sanction or adverse action of the other agency in the body of the assurance section of the team report and provide its rationale for recommending HLC status in light of this action.

- Review the list of relationships the institution has with all other accreditors and state governing or coordinating bodies, along with the evaluation reports, action letters and interim monitoring plans issued by each accrediting agency.
- Verify that the institution’s standing with state agencies and accrediting bodies is appropriately disclosed to students.
- Determine whether this information provides any indication about the institution’s capacity to meet HLC’s Criteria for Accreditation. Should the team learn that the institution is at risk of losing, or has lost, its degree or program authorization in any state in which it meets state presence requirements, it should contact the HLC staff liaison immediately.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

☒ The institution meets HLC’s requirements.
☐ The institution meets HLC’s requirements, but additional monitoring is recommended.

☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.

☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

COD has a number of program accreditations, and appears to be in good standing with the agencies. Appropriate reports are supplied and the effective dates of the accreditations are given.

Additional monitoring, if any:

Public Notification of Opportunity to Comment
(FCFI Questions 41–43 and Appendix Y)

1. Verify that the institution has made an appropriate and timely effort to solicit third-party comments. The team should evaluate any comments received and complete any necessary follow-up on issues raised in these comments.

   Note: If the team has determined that any issues raised by third-party comments relate to the team’s review of the institution’s compliance with the Criteria for Accreditation, it must discuss this information and its analysis in the body of the assurance section of the team report.

   • Review information about the public disclosure of the upcoming visit, including copies of the institution’s notices, to determine whether the institution made an appropriate and timely effort to notify the public and seek comments.
   
   • Evaluate the comments to determine whether the team needs to follow up on any issues through its interviews and review of documentation during the visit process.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

   ☒ The institution meets HLC’s requirements.

   ☐ The institution meets HLC’s requirements, but additional monitoring is recommended.

   ☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.

   ☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).
Rationale:

The College met the requirement for public comment. Notifications were placed in the Chicago Tribune, the Daily Herald, and the College’s student newspaper, as well as notification on the website.

Additional monitoring, if any:

Competency-Based Programs Including Direct Assessment Programs/Faculty-Student Engagement
(See FCFI Questions 44–47)

1. Verify that students and faculty in any direct assessment or competency-based programs offered by the institution have regular and substantive interactions: the faculty and students communicate on some regular basis that is at least equivalent to contact in a traditional classroom, and that in the tasks mastered to assure competency, faculty and students interact about critical thinking, analytical skills, and written and oral communication abilities, as well as about core ideas, important theories, current knowledge, etc. (Also, confirm that the institution has explained the credit hour equivalencies for these programs in the credit hour sections of the Federal Compliance Filing.)

- Review the list of direct assessment or competency-based programs offered by the institution.
- Determine whether the institution has effective methods for ensuring that faculty in these programs regularly communicate and interact with students about the subject matter of the course.
- Determine whether the institution has effective methods for ensuring that faculty and students in these programs interact about key skills and ideas in the students’ mastery of tasks to assure competency.

2. Check the response that reflects the team’s conclusions after reviewing this component of Federal Compliance:

☐ The institution meets HLC’s requirements.
☐ The institution meets HLC’s requirements, but additional monitoring is recommended.
☐ The institution does not meet HLC’s requirements and additional monitoring is recommended.
☐ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution’s compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Rationale:

The College has no competency based programs.
### Additional monitoring, if any:

| Institutional Materials Related to Federal Compliance Reviewed by the Team |
| Provide a list of materials reviewed here: |
| HLC documents provided in the Evidence file. |
| Federal Compliance Filing and attachments |
| www_COD.edu |
| Accreditation webpage |
| Comprehensive Financial Report |
| Annual Budget |
| Consumer Information |
| Your Right to Know: Academic Honesty Policy, Campus Security Report, Gainful Employment Information |
| Student Complaint Policy |
| College Catalog |
| Tuition and Fees |
| Programs of Study |
| Degree Requirements |
| Transfer Policies |
| Course Schedule |
| Transfer Agreements |
| Articulation Agreements |
| Student Handbook |
| Annual Security Report 2016-17 |
| Sample Syllabi |
Team Worksheet for Evaluating an Institution’s Assignment of Credit Hours and Clock Hours

Institution Under Review: College of DuPage

Review the Worksheet for Institutions on the Assignment of Credit Hours and Clock Hours, including all supplemental materials. Applicable sections and supplements are referenced in the corresponding sections and questions below.

Part 1. Institutional Calendar, Term Length and Type of Credit

Instructions
Review Section 1 of Appendix A. Verify that the institution has calendar and term lengths within the range of good practice in higher education.

Responses
A. Answer the Following Question

1. Are the institution’s calendar and term lengths, including non-standard terms, within the range of good practice in higher education? Do they contribute to an academic environment in which students receive a rigorous and thorough education?

☐ Yes    ☐ No

Comments:
COD operates on a semester calendar. During the fall and spring terms, the College offers 16, 12, and 8 week sessions. During the summer term, the College has 10, 8, and 5 week sessions. These are within the range of practice in higher education, and provide options for students.

B. Recommend HLC Follow-Up, If Appropriate

Is any HLC follow-up required related to the institution’s calendar and term length practices?

☐ Yes    ☐ No
Rationale:
The calendar and term lengths are consistent with those generally found in higher education.

Identify the type of HLC monitoring required and the due date:

Part 2. Policy and Practices on Assignment of Credit Hours

Instructions
Review Sections 2–4 of the Worksheet for Institutions on the Assignment of Credit Hours and Clock Hours, including supplemental materials as noted below. In assessing the appropriateness of the credit allocations provided by the institution the team should complete the following steps. The outcomes of the team’s review should be reflected in its responses below.

1. Format of Courses and Number of Credits Awarded. Review the Form for Reporting an Overview of Credit Hour Allocations and Instructional Time for Courses (Supplement A1 to the Worksheet for Institutions) completed by the institution, which provides an overview of credit hour assignments across institutional offerings and delivery formats.

2. Scan the course descriptions in the catalog and the number of credit hours assigned for courses in different departments at the institution (see Supplements B1 and B2 to Worksheet for Institutions, as applicable).

   • At semester-based institutions courses will be typically be from two to four credit hours (or approximately five quarter hours) and extend approximately 14–16 weeks (or approximately 10 weeks for a quarter). The descriptions in the catalog should reflect courses that are appropriately rigorous and have collegiate expectations for objectives and workload. Identify courses/disciplines that seem to depart markedly from these expectations.

   • Institutions may have courses that are in compressed format, self-paced, or otherwise alternatively structured. Credit assignments should be reasonable. (For example, as a full-time load for a traditional semester is typically 15 credits, it might be expected that the norm for a full-time load in a five-week term is 5 credits; therefore, a single five-week course awarding 10 credits would be subject to inquiry and justification.)

   • Teams should be sure to scan across disciplines, delivery mode and types of academic activities.

   • Federal regulations allow for an institution to have two credit-hour awards: one award for Title IV purposes and following the federal definition and one for the purpose of defining progression in and completion of an academic program at that institution. HLC procedure also permits this approach.
3. Scan course schedules to determine how frequently courses meet each week and what other scheduled activities are required for each course (see Supplement B3 to Worksheet for Institutions). Pay particular attention to alternatively structured or other courses completed in a short period of time or with less frequently scheduled interaction between student and instructor that have particularly high credit hour assignments.

4. Sampling. Teams will need to sample some number of degree programs based on the headcount at the institution and the range of programs it offers.

- For the programs sampled, the team should review syllabi and intended learning outcomes for several courses, identify the contact hours for each course, and review expectations for homework or work outside of instructional time.

- At a minimum, teams should anticipate sampling at least a few programs at each degree level.

- For institutions with several different academic calendars or terms or with a wide range of academic programs, the team should expand the sample size appropriately to ensure that it is paying careful attention to alternative format and compressed and accelerated courses.

- Where the institution offers the same course in more than one format, the team is advised to sample across the various formats to test for consistency.

5. **Direct Assessment or Competency-Based Programs.** Review the information provided by the institution regarding any direct assessment or competency-based programs that it offers, with regard to the learning objectives, policies and procedures for credit allocation, and processes for review and improvement in these programs.

6. **Policy on Credit Hours and Total Credit Hour Generation.** With reference to the institutional policies on the assignment of credit provided in Supplement A2 to Worksheet for Institutions, consider the following questions:

- Does the institution’s policy for awarding credit address all the delivery formats employed by the institution?

- Does that policy address the amount of instructional or contact time assigned and homework typically expected of a student with regard to credit hours earned?

- For institutions with courses in alternative formats or with less instructional and homework time than would be typically expected, does that policy also equate credit hours with intended learning outcomes and student achievement that could be reasonably achieved by a student in the time frame allotted for the course?

- Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that HLC will expect that credit hour policies at public
institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

- If so, is the institution’s assignment of credit to courses reflective of its policy on the award of credit?

- Do the number of credits taken by typical undergraduate and graduate students, as well as the number of students earning more than the typical number of credits, fall within the range of good practice in higher education?

7. If the answers to the above questions lead the team to conclude that there may be a problem with the credit hours awarded the team should recommend the following:

- If the problem involves a poor or insufficiently detailed institutional policy, the team should call for a revised policy as soon as possible by requiring a monitoring report within no more than one year that demonstrates the institution has a revised policy and provides evidence of implementation.

- If the team identifies an application problem and that problem is isolated to a few courses or a single department, division or learning format, the team should call for follow-up activities (a monitoring report or focused evaluation) to ensure that the problems are corrected within no more than one year.

- If the team identifies systematic noncompliance across the institution with regard to the award of credit, the team should notify the HLC staff immediately and work with staff members to design appropriate follow-up activities. HLC shall understand systematic noncompliance to mean that the institution lacks any policies to determine the award of academic credit or that there is an inappropriate award of institutional credit not in conformity with the policies established by the institution or with commonly accepted practices in higher education across multiple programs or divisions or affecting significant numbers of students.

Worksheet on Assignment of Credit Hours
A. Identify the Sample Courses and Programs Reviewed by the Team

The following courses were reviewed: Business 1100, Criminal Justice 1100, Criminal Justice 2231, Cosmetology 1101, Cosmetology 2205, Sociology 2210, Psychology 1100, and Nursing 1220, Marketing 2210, English 1105, Early Childhood Education and Care 1130. Syllabi from various delivery methods were reviewed.

The following programs were reviewed: Associate in Arts in Teaching Early Childhood Education, AAS in Marketing, AAS in Cosmetology, Cosmetology Certificate, and the AAS in Dental Hygiene.

B. Answer the Following Questions

1. Institutional Policies on Credit Hours
a. Does the institution’s policy for awarding credit address all the delivery formats employed by the institution? (Note that for this question and the questions that follow an institution may have a single comprehensive policy or multiple policies.)

☑ Yes  ☐ No

Comments:
COD has a single policy for awarding credit that applies to all course offerings.

b. Does that policy relate the amount of instructional or contact time provided and homework typically expected of a student to the credit hours awarded for the classes offered in the delivery formats offered by the institution? (Note that an institution’s policy must go beyond simply stating that it awards credit solely based on assessment of student learning and should also reference instructional time.)

☐ Yes  ☑ No

Comments:
COD’s credit hour policy is vague when compared to those at other institutions. As this seemed to be not very specific, an internet search of some other institutions in the state, revealed policies that were far more detailed. It states that the college will equate its learning experiences with semester credit hours using practices common to institutions of higher education, and that the length of academic programs is comparable to similar programs found in accredited institutions of higher education. No mention is made of instructional time or assessment of student learning.

c. For institutions with non-traditional courses in alternative formats or with less instructional and homework time than would be typically expected, does that policy equate credit hours with intended learning outcomes and student achievement that could be reasonably achieved by a student in the time frame and utilizing the activities allotted for the course?

☐ Yes  ☑ No

Comments:
The policy does not equate credit hours with intended learning outcomes.

d. Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that HLC will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

☐ Yes  ☑ No

Comments:
As stated above, the policy is very vague, and there is no mention of time or learning outcomes.

2. Application of Policies

a. Are the course descriptions and syllabi in the sample academic programs reviewed by the team appropriate and reflective of the institution’s policy on the award of credit? (Note that HLC will expect that credit hour policies at public institutions that meet state regulatory requirements or are dictated by the state will likely meet federal definitions as well.)

☐ Yes ☒ No

Comments:

While the meeting times indicated on the syllabi yield instructional time that is appropriate for the credit hours assigned, the policy as written does not provide insight as to the award of credit.

b. Are the learning outcomes in the sample reviewed by the team appropriate to the courses and programs reviewed and in keeping with the institution’s policy on the award of credit?

☐ Yes ☒ No

Comments:

While the Active Course Files provide the general course objectives, topical outlines, and methods of evaluation for courses and programs reviewed, there were discrepancies in several of the syllabi.

For Business 1100, syllabi were reviewed for seven sections including traditional classroom instruction, compressed, hybrid, and online instruction. While four sections included the standard learning objectives and topical outline indicated in the Active Course File, three did not. Section AFT 21 only contained 9 course objectives, and they were different from those in the Active Course File. The two online sections, NET 02 and NET 06 contained 26 learning objectives, and they were not consistent with those listed in the Active Course File.

Four syllabi were reviewed for Criminal Justice 1100 (Sections 001, 200, HYB69, and NET01). None of these had course descriptions, course objectives, or topical outlines that were consistent with those in the Active Course File. As with Criminal Justice 1100, the Syllabus for Criminal Justice 2231-001 was not consistent with information in the Active Course File.

Syllabi for the following were consistent with information in the Active Course File: Cosmetology 1101, Cosmetology 2205, Early Childhood Education and Care, English 1105, Marketing 2210, Nursing 1220, Psychology 1100, and Sociology 2210.

c. If the institution offers any alternative-delivery or compressed-format courses or programs, are the course descriptions and syllabi for those courses appropriate and reflective of the institution’s policy on the award of academic credit?
Comments:
While the institution provides the course descriptions, and general course objectives in the Active Learning Files, these are not always reflected in individual course sections. And, as stated earlier, the policy on the award of academic credit is not specific.

d. If the institution offers alternative-delivery or compressed-format courses or programs, are the learning outcomes reviewed by the team appropriate to the courses and programs reviewed and in keeping with the institution’s policy on the award of credit? Are the learning outcomes reasonable for students to fulfill in the time allocated, such that the allocation of credit is justified?

Comments:
As stated in section b, the course objectives for some sample sections were quite different from those in the Active Course Files. In the case of two online sections of Business 1100, there were more course objectives than for other sections, so while the credit hours allocated certainly seem to be justified, it’s not clear that students can actually accomplish this much more than the standard expectations.

e. Is the institution’s actual assignment of credit to courses and programs across the institution reflective of its policy on the award of credit and reasonable and appropriate within commonly accepted practice in higher education?

Comments:
While the credit awarded to courses and programs is in line with accepted practice in higher education, it still seems that a more detailed policy would be beneficial.

C. Recommend HLC Follow-up, If Appropriate

Review the responses provided in this worksheet. If the team has responded “no” to any of the questions above, the team will need to assign HLC follow-up to assure that the institution comes into compliance with expectations regarding the assignment of credit hours.

Is any HLC follow-up required related to the institution’s credit hour policies and practices?

Comments:
As stated, the policy as written is very vaguely. This lack of specificity may have contributed to the issues associated with assignment of credit in the Suburban Law Enforcement Academy, as

☐ Yes  ☒ No
referred in October 2015 letter to the institution regarding the Advisory visit that took place in July 2015.

Identify the type of HLC monitoring required and the due date:
A more detailed Credit Hour Policy should be developed by May, 2018.

If the course objectives and topical outlines presented in the Active Course Files are expected to be followed in all course sections, a method of monitoring compliance needs to be developed. Or the institution may find it more practical to have standard course outlines available to faculty. This should be accomplished within a year.

D. **Systematic Noncompliance in One or More Educational Programs With HLC Policies Regarding the Credit Hour**

Did the team find systematic noncompliance in one or more education programs with HLC policies regarding the credit hour?

☐ Yes  ☐ No

Identify the findings:

1. The Credit Hour Policy is vague, and needs to provide more specificity.

2. Review of syllabi found discrepancies in the course objectives stated for various sections from those in the Active Course Files.

Rationale:

Sections reviewed for Criminal Justice 1100, 2231, and Business 1100 were not consistent with expectations in the Active Course Files.

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Part 3. Clock Hours

**Instructions**

Review Section 5 of *Worksheet for Institutions*, including Supplements A3–A6. Before completing the worksheet below, answer the following question:

Does the institution offer any degree or certificate programs in clock hours or programs that must be reported to the Department of Education in clock hours for Title IV purposes even though students may earn credit hours for graduation from these programs?

☐ Yes  ☒ No

**If the answer is “Yes,” complete the “Worksheet on Clock Hours.”**

**Note:** This worksheet is not intended for teams to evaluate whether an institution has assigned credit hours relative to contact hours in accordance with the Carnegie definition of the credit hour. This worksheet solely addresses those programs reported to the Department of Education in clock hours for Title IV purposes.
Non-degree programs subject to clock hour requirements (for which an institution is required to measure student progress in clock hours for federal or state purposes or for graduates to apply for licensure) are not subject to the credit hour definitions per se but will need to provide conversions to semester or quarter hours for Title IV purposes. Clock hour programs might include teacher education, nursing or other programs in licensed fields.

Federal regulations require that these programs follow the federal formula listed below. If there are no deficiencies identified by the accrediting agency in the institution's overall policy for awarding semester or quarter credit, the accrediting agency may provide permission for the institution to provide less instruction so long as the student’s work outside class in addition to direct instruction meets the applicable quantitative clock hour requirements noted below.

Federal Formula for Minimum Number of Clock Hours of Instruction (34 CFR §668.8):

1 semester or trimester hour must include at least 37.5 clock hours of instruction
1 quarter hour must include at least 25 clock hours of instruction

Note that the institution may have a lower rate if the institution’s requirement for student work outside of class combined with the actual clock hours of instruction equals the above formula provided that a semester/trimester hour includes at least 30 clock hours of actual instruction and a quarter hour includes at least 20 semester hours.

Worksheet on Clock Hours

A. Answer the Following Questions

1. Does the institution’s credit-to-clock-hour formula match the federal formula?
   - Yes  
   - No
   Comments:

2. If the credit-to-clock-hour conversion numbers are less than the federal formula, indicate what specific requirements there are, if any, for student work outside of class.

3. Did the team determine that the institution’s credit hour policies are reasonable within the federal definition as well as within the range of good practice in higher education? (Note that if the team answers “No” to this question, it should recommend follow-up monitoring in section C below.)
   - Yes  
   - No
   Comments:
4. Did the team determine in reviewing the assignment of credit to courses and programs across the institution that it was reflective of the institution’s policy on the award of credit and reasonable and appropriate within commonly accepted practice in higher education?

☐ Yes ☐ No

Comments:

B. Does the team approve variations, if any, from the federal formula in the institution’s credit-to-clock-hour conversion?

☐ Yes ☐ No

C. Recommend HLC Follow-up, If Appropriate

Is any HLC follow-up required related to the institution’s clock hour policies and practices?

☐ Yes ☐ No

Rationale:

Identify the type of HLC monitoring required and the due date:
**INSTITUTION and STATE:** College of DuPage, IL  
**TYPE OF REVIEW:** Sanctions Probation  
**DESCRIPTION OF REVIEW:** The College is required to file an Assurance Filing in February 2017 providing evidence that the College has resolved the concerns of the Board identified in the Probation action and evidence that it meets the Criteria for Accreditation and Core Components.

The College will host a comprehensive evaluation by April 2017 to determine whether the concerns of the Board identified in its action have been resolved and the Criteria for Accreditation have been met. At its meeting in November 2017, the Board will review materials related to this evaluation and determine whether the College can be removed from Probation. If the University has not resolved the Board’s concerns that led to the imposition of Probation and has not demonstrated that it is in compliance with all Criteria for Accreditation, other action may be appropriate. Comprehensive evaluation includes a federal compliance reviewer.

**DATES OF REVIEW:** 4/17/2017 - 4/19/2017

- No Change in Institutional Status and Requirements

### Accreditation Status

**Nature of Institution**

- **Control:** Public
- **Recommended Change:** NO CHANGE

**Degrees Awarded:** Associates
- **Recommended Change:** NO CHANGE

**Reaffirmation of Accreditation:**
- **Year of Last Reaffirmation of Accreditation:** 2014 - 2015
- **Year of Next Reaffirmation of Accreditation:** 2016 - 2017
- **Recommended Change:** 2027-2028

### Accreditation Stipulations
General:
Prior Commission approval is required for substantive change as stated in Commission policy.

Recommended Change: NO CHANGE

Additional Location:
The institution has been approved for the Notification Program, allowing the institution to open new additional locations within the United States.

Recommended Change: NO CHANGE

Distance and Correspondence Courses and Programs:
Approved for distance education courses and programs. The institution has not been approved for correspondence education.

Recommended Change: NO CHANGE

Accreditation Events
Accreditation Pathway
Under Review

Recommended Change:

Upcoming Events

Monitoring
Upcoming Events
None

Recommended Change:
2A – 12/1/19 – Adherence to policies and procedures
3A – 5/15/18 – Course outcomes and credit hour policy
4A – 5/15/18 – Course outcomes and credit hour policy
4B – 12/1/19 – Assessment of student learning outcomes and utilization to make improvements
4C – 12/1/19 – Student success data usage
5B – 12/1/19 – Compliance with established policies
5D – 12/1/19 – Operational performance data and utilization to make improvements

Institutional Data

Educational Programs

<table>
<thead>
<tr>
<th>Undergraduate</th>
<th>Recommended Change: NO CHANGE</th>
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<tbody>
<tr>
<td>Certificate</td>
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<tr>
<td>Associate Degrees</td>
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<tr>
<td>Baccalaureate Degrees</td>
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Internal Procedure

Institutional Status and Requirements Worksheet

Graduate

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<tr>
<th>Degree Type</th>
<th>Count</th>
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<tr>
<td>Master's Degrees</td>
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<tr>
<td>Specialist Degrees</td>
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</tr>
<tr>
<td>Doctoral Degrees</td>
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</tbody>
</table>

Extended Operations

Branch Campuses

None

Recommended Change: NO CHANGE

Additional Locations

Addison Center, 301 S. Swift Rd., Addison, IL, 60101 - Active
Carol Stream Community Education Center, 100 N. Kuhn Rd., Carol Stream, IL, 60188 - Active
Naperville Center, 1223 Rickert Dr., Naperville, IL, 60566 - Active
Westmont Center, 650 Pasquinelli Dr., Westmont, IL, 60559 - Active

Recommended Change: NO CHANGE

Distance Delivery

11.0202 - Computer Programming, Specific Applications, Certificate, C++ Language Certificate
11.0601 - Data Entry/Microcomputer Applications, General, Certificate, Database Proficiency Certificate
11.0601 - Data Entry/Microcomputer Applications, General, Certificate, Spreadsheet Proficiency Certificate
13.0101 - Education, General, Certificate, Teaching Online Utilizing Technology (TOUT) Certificate
13.1210 - Early Childhood Education and Teaching, Certificate, Early Childhood Assistant Teacher Certificate
19.0709 - Child Care Provider/Assistant, Certificate, Infant, Toddler, 2-Year-Old Child Care Certificate
24.0101 - Liberal Arts and Sciences/Liberal Studies, Associate, Associate in Arts Degree
24.0102 - General Studies, Associate, Associate in General Studies Degree
25.0301 - Library and Archives Assisting, Associate, Library & Information Technology Degree
25.0301 - Library and Archives Assisting, Certificate, Library & Information Technology Certificate
43.0107 - Criminal Justice/Police Science, Associate, Criminal Justice Degree
43.0107 - Criminal Justice/Police Science, Certificate, Criminal Justice Certificate
43.0201 - Fire Prevention and Safety Technology/Technician, Associate, Fire Science Degree
43.0202 - Fire Services Administration, Certificate, Fire Officer Certificate
44.0701 - Social Work, Certificate, Veterans Counseling Certificate
51.1502 - Psychiatric/Mental Health Services Technician, Certificate, Psychiatric Rehabilitation Certificate
52.0201 - Business Administration and Management, General, Associate, Management Degree
52.0201 - Business Administration and Management, General, Certificate, Management Certificate
Institutional Status and Requirements Worksheet

52.0201 - Business Administration and Management, General, Certificate, Organizational Leadership Certificate
52.0201 - Business Administration and Management, General, Certificate, Supervision Certificate
52.0208 - E-Commerce/Electronic Commerce, Certificate, E-Commerce Certificate
52.0401 - Administrative Assistant and Secretarial Science, General, Associate, Administrative Support Specialist Degree
52.0401 - Administrative Assistant and Secretarial Science, General, Certificate, Certificate, Administrative Support Essentials Certificate
52.0401 - Administrative Assistant and Secretarial Science, General, Certificate, Certificate, Administrative Support Specialist Certificate
52.0401 - Administrative Assistant and Secretarial Science, General, Certificate, Certificate, Office Technology Specialist Certificate
52.0401 - Administrative Assistant and Secretarial Science, General, Certificate, Word Specialist Certificate
52.0402 - Executive Assistant/Executive Secretary, Associate, Executive Assistant Degree
52.1801 - Sales, Distribution, and Marketing Operations, General, Certificate, Entrepreneurship Certificate
52.1801 - Sales, Distribution, and Marketing Operations, General, Certificate, Marketing Certificate
52.1804 - Selling Skills and Sales Operations, Certificate, Consumer Marketing Certificate

Recommended Change: NO CHANGE

Correspondence Education
None
Recommended Change: NO CHANGE

Contractual Arrangements
None
Recommended Change: NO CHANGE

Consortial Arrangements
None
Recommended Change: NO CHANGE