Luna Community College

HLC ID 1952

SHOW CAUSE   Visit Date: 3/19/2018

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Context and Nature of Review

Visit Date

3/19/2018
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)

- Federal Compliance
- Assumed Practices

Institutional Context

Luna Community College is a comprehensive community college serving rural northeastern New Mexico. Academic programs are offered through the main campus in Las Vegas, a city of approximately 14,000. and in additional locations including Springer, Santa Rosa, and Mora.

The population of Las Vegas is over 80% Hispanic with more than 30% of the population living below the poverty line. Luna Community College has 287 employees including 25 full time faculty, 101 part-time (adjunct) faculty, and 103 staff. The majority of courses are taught by adjunct faculty. Luna received most of its funding through an enrollment-based funding formula from the state of New Mexico. Institutional support from the state has declined in recent years.

In November 2017 the Board of Trustees for the Higher Learning Commission (HLC) issued a Show-Cause Order to the College, requiring Luna to present its case for accreditation through a Show-Cause Report by February 2018. The purpose of this Show-Cause Evaluation Visit was to validate the contents of the Show-Cause Report and determine whether the concerns of the HLC Board have been fully ameliorated and the Criteria for Accreditation, including the Core Components, and all Assumed Practices and Federal Compliance Requirements, are met by the College.

Interactions with Constituencies

President

Vice President for Instruction

Vice President for Finance

Human Resources Director

Registrar

Financial Aid Director

Student Services Recruitment Specialist

Lead Database Administrator

Student Services Advisor

Nursing Academic Director

Springer Site Coordinator

Dental Assisting Program Administrator

Fiscal Analyst/Grants Manager

LCC Student- General Science Program

STEM Academic Director

Learning Resource Manager

Early Childhood/Education Academic Director

Satellites Director

Allied Health Academic Director

Vocations Academic Director

School of Business Academic Director

Humanities Academic Director

Human Resources Technician

Payroll Manager

Human Resources Office Manager

Board of Trustees (6)

Admissions and Recruitment Manager

Financial Aid Associate Director

Computer Center (IT) staff (4)

Online Instructional Designer/Technician

Library Technician

Nursing Faculty

Mora Site Director

STEM Faculty (3)

Humanities Faculty (2)

Allied Health Faculty

Vocations Faculty

School of Business Faculty Advisor

Vocations Office Manager

ACE Lab Manager

Student Open Forum (approximately 150)

Community Open Forum (approximately 200)

Additional Documents

Approximately 10 personnel files for Luna staff

Approximately 15 personnel files for Luna faculty

All presidential contracts from 2003 to the present

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 most recent iteration of Luna's mission is the result of a concerted institutional effort to revise the previous version, consistent with an emergent understanding of the value of the mission as a compass and guide for all college activity including governance, academic programs, support for students, and resource management.

It was evident that Luna's mission statement, "Creating Opportunities for You" is broadly understood. Results from the most recent graduating student survey indicate that students understand and embrace the mission. Additionally, testimony from multiple students in an open forum acknowledged the extent to which educational opportunities have been available and accessible. Students from multiple disciplinary areas including nursing, culinary arts, STEM, criminal justice, welding, expressed appreciation about the extent to which they have been supported by Luna faculty and staff in their pursuit of these opportunities.

Luna's array of academic programs, both degree and certificate, provide evidence that the institution acknowledges the learning and training needs of students in the community it serves. The extent to which Luna has extended its academic programs to other sites within the region offers further evidence of its commitment to respond to the educational needs of northeast New Mexico.

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

As noted in Core Component 1A, Luna clearly articulates its mission statement, "Creating Opportunities for You."   The statement, along with guiding principles, is prominently displayed across the campus, including in conference rooms, classrooms, and faculty/staff offices. It is also appropriately displayed on the college website. Official Institutional correspondence includes the mission in the letterhead.

Luna's faculty/staff manual and course catalog are updated regularly. Instructors keep their syllabi current. Language in these documents signal Luna's collective embrace of the mission and provide guidance to various internal constituencies including faculty, staff, and students regarding policies and procedures, developed consistent with the mission.

Luna identifies several programs and services that support the mission of the college and its commitment to student learning. Examples of such effort include the robust Small Business Development Center, the Academic tutoring and Career center, work with the United World College and more. These opportunities provide real, outside world experiences for students that augment the classroom learning structure.

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 With Concerns

Evidence

Luna has argued that its mission statement was intentionally designed to embrace the collective cultural diversity of its students, faculty, and staff. While the team would concur with that argument, with the exception of a world religions seminar and a recent social justice forum, little evidence of specific educational initiatives was found to address the reasonable expectations around Luna's role to support a multicultural society or to appropriately infuse the curriculum with regard to human diversity. The review team noted that instructors for a few courses have attempted to infuse cultural sensitivity into the curriculum (see 3B). Human Resources staff indicated that Luna faculty and staff are expected to participate in sexual harassment training.

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 With Concerns

Evidence

Testimony from several individuals at the open forum provided evidence that Luna's presence as an educational resource was vital to sustaining a vibrant community. Local business owners/leaders, attorneys judges, elected county and state officials, alumni, and others, many of whom attended Luna, spoke about the value Luna added to their personal success, that of their respective employees, and to the city of Las Vegas. Testimony in the open forum revealed that many community members were interested in more active engagement with the college.

Luna's small business development center serves as a catalyst for emerging educational initiatives within the local community. Through its outreach efforts to regional correctional facilities, Luna offers barbering and other vocational training for an otherwise underserved population. Various memoranda of understanding (MOU's) with local agencies provide evidence that Luna has engaged in productive partnerships that respond to various community needs. However, until the recent appointment of the interim president, as evidenced by comments in the community forum, there has been little to no community engagement or active advisory board activity. In addition, until the January 9, 2018 regular meeting of the Board of Trustees, the Board's agenda provided no specific opportunity/time for public comment. Although, one of the trustees serves as an ex officio member of the Foundation board, no information was available to the review team about Foundation finances or recent activity.

While Luna references support from the Luna Foundation for student scholarships in their Show-Cause report, the team found no evidence of a current Foundation presence, but, rather an absence of any active board of any recent activity. It was necessary for Luna to assume responsibility for awarding most recent Foundation scholarships.

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

Recent institutional efforts have led to the adoption and campus wide embrace of a new mission statement. Results from a current graduating student survey and student comments in the open forum provide evidence that students recognize and understand the mission.

The mission appears prominently in many public domains including the website, posters in classrooms/offices, and on college letterhead. Luna has demonstrated its commitment to the mission through its efforts to offer academic programs in other regional sites. However, it was equally clear to the visit team that community members, while supportive of Luna, have not been actively engaged with their community college and express the desire to be more involved in the life of the college.

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

Following the Show Cause action, the college's Board of Trustees (BOT) recognized the need to revise and update many of its policies. For example, the BOT adopted a new nepotism policy, a new conflict of interest policy, and various shared governance policies. These new polices are evidence of the institutions movement to creating an ethical environment.

The June 30, 2017 adverse audit opinion and the Higher Learning Commission's (HLC) Show Cause action prompted the BOT to take serious action regarding Luna's operations, policies and procedures. As noted by multiple constituencies, (staff, faculty, student, administration), open dialogue was initiated, information was shared and a new structure of shared governance was initiated.

The BOT adopted a new conflict of interest policy stating "... each year, Trustees shall sign a document indicating they have received, understand and accept the conditions of, the policy titled, Ethics and Conflct of Interest revised ..." Currently, one trustee has failed to sign this document.

During the open BOT meeting with the HLC team, each trustee expressed awareness of the serious issues facing Luna under the Show Cause action. While BOT members appeared to grasp these issues, their interactions indicated an absence of cohesive interaction. Individual trustees were in disagreement about the timeline for the presidential search. Trustees acknowledged they were not involved with the strategic plan. Individual trustees voiced personal aspirations for enrollment and academic programs. In a subsequent meeting with Luna's shared governance council, comments from council members reaffirmed this impression.

Several years ago, Luna was a member of the Association of Community College Trustees (ACCT). However, the review team learned during the visit that Luna no longer holds membership with ACCT. In the past year, the BOT received training from Dr. Hugh Prather and John F. Kennedy of Cuddy and McCarthy, LLP. As noted in meetings with various constituencies, this training was beneficial. The internal constituencies of the College noted the need for this training to continue. The resources available from ACCT could assist the BOT in meeting the training issues raised by the college groups. As stated specifically to the review team from the groups "...one training does not a

functioning board make..."

From the Shared Governance Council, to the Faculty Senate, to the Staff Advisory Senate, to Student Government each group embraced the new shared governance policies adopted by the BOT. Members of these groups stated a "feeling of being included" and "we are the train". These groups voiced their commitment to being intimately involved in the future of Luna and their willingness to hold the BOT accountable. Further, they affirmed their commitment to sustain this "new momentum to be included" regardless of the outcome of a new presidential selection and/or change in the BOT.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

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

Luna Community College presents itself to the public in a variety of print and electronic media to ensure that the community, the students and the general public may view the programs, course offerings, costs of attendance and other key information to make the reader aware of what is available at the College.

Luna Light, the College's monthly print publication, highlights key initiatives, activities of the college, new programs and services, human interest stories and other noteworthy news information that informs the college communities of news and events reflecting the activities of the College.

The Web clearly displays, in an electronic format, news and academic information germane to the offerings of the college. Its navigation allows prospective and current students to explore courses and degree offerings that may be of interest to them. The costs of the College, Financial Aid, Student Scholarships and other pertinent financial data are also clearly displayed on the web. All accreditation from outside agencies, including the Higher Learning Commission, are clearly visible on the website. The college is undertaking a complete web re-design that will make the electronic presence of Luna even easier to access and more user friendly to the reading public. The re-design is slated to be completed in the near future.

While the list of approved programs (certificates and degrees) are clearly listed on the web, the list does not match the official list approved by the State of New Mexico. For example, there is an erroneous listing of an agriculture degree but said degree has not been offered in some time. By not keeping the web up-to-date, students do not have complete and accurate information.

Luna places Board of Trustees (BOT) agendas and minutes on the web providing public exposure to scheduled meeting topics and discussion/resolution. Reports from the newly formed Shared Governance Council and the respective Senates (faculty, staff and students) are now standing agenda items (a new phenomenon in the past few months) that allows for the exchange of information with the Board.

During the visit, an open meeting with the Community was held with over 150 members of the public in attendance. At that meeting, many community members observed that no members of the Board of Trustees were in attendance at the meeting. Comments were made about the lost opportunity the Board missed by not hearing the suggestions, opportunities and constructive criticism themes addressed by the speakers at the meeting. While there were many positive comments by the community, including the reaffirmation of the value the College adds to Las Vegas, there were also a number of comments directed at Board of Trustees action or inaction vis a vis the role the Board takes

in supporting the mission of the College and its policy governance stance.

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

Not Met

Evidence

Prior to the HLC Show Cause action, employees of Luna Community College reported frequent, day-to-day unannounced visits, phone calls and other examples of Board members inserting themselves into the operations of the college. Employees cited interference in personnel decisions and hiring, attempts to elicit personal financial favors for relatives and friends, out-of-state recruitment visits and veiled threats to their employment status if such requests were not accommodated. Since the Show Cause action, employees report no undue BOT involvement in daily operations.

One BOT member is ex-officio on the Luna Foundation Board. Currently, financial information from the foundation regarding end-of-year status (as well as response to the independent audit finding) is missing despite numerous requests from the administration. It appears that the BOT member provided no fiscal or policy oversight of the Foundation relationship.

Currently, there are several individuals employed by the college who are related to Board members. This appears to be in conflict with the Board's nepotism policy. While this serves as evidence that the Board continues to act in a manner that is inconsistent with its own ethics policies, the College observes the inability to take a personnel action that violates the rights of these employees as provided by law, the handbook or their employment contracts.

Despite an adverse opinion by the independent Auditor, the Finance and Audit committee of the BOT meets infrequently. As an example, no Finance and Audit committee minutes were available addressing these matters. Board members freely acknowledge, they often must act as a committee of the whole for the Finance and Audit committee in regard to these matters.

During the public open community meeting, community members admonished the BOT for unethical and personally motivated behavior. With several community members commenting on behavior unbecoming to elected officials and the long history of such actions, there were open questions by the community on the ability of the Board to ethically govern given current Trustee membership.

Staff of the college are cautiously optimistic that the new governance structure will survive beyond the current interim president. Their spirit of accountability as well as collective support of the college's new and positive direction have empowered them to sustain the current momentum.

In review of the last two years of BOT agenda and minutes, several closed meetings of the Board were held without evidence of action(s) under consideration. Since November 2017, the BOT has held open meetings in accordance with the New Mexico Open Meetings Act.

According to statements from several Luna employees, prior to the show cause notice, the Board sought little, if any, advice from constituencies of the college or external (public) comment. With the advent of the new council and senate structures and placement on BOT agendas as of January 9, 2018, that has begun to change.

The Board acknowledges the need to change its behavior as evidenced in several statements during the meeting with the BOT during the visit. That said, there is dissent among the members of the Board with regard to timelines for the hiring of the new president, devoted and informed attention to the strategic plan and individual recommendations for program expansion and development. These behaviors provide compelling evidence that the BOT, while verbally embracing the notion that change must occur, have yet to incorporate such modifications to their modis operandi.

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 With Concerns

Evidence

Prior to the Show Cause action, Luna employees indicated that a culture of fear and intimidation existed at the college. This was due to actions of the BOT and the prior President. The actions of the prior President and BOT creating this culture included inappropriate involvement in personnel matters, awarding of scholarships, reimbursement of expenditures and unannounced day long interactions within the operations of the college. Since the Show Cause action, it was confirmed multiple times this type of activity has ceased. Accordingly, the employees of Luna who once felt as though they could not freely express themselves due to fear of retribution are now liberated. The creation of the new shared governance model adopted by the board has led to an open channel for free dialogue and expression.

The modification of board policies and creation of a new format for board agendas, now allows respective groups from the college to freely express themselves in an open forum. As of the January 9, 2018 Board agenda, the Faculty Senate, Staff Senate and Student Senate have standing presence to offer their respective reports. This evidence suggests Luna has moved to a platform allowing the freedom of expression.

Evidence supporting freedom of expression is specifically stated in the recently adopted board policy "... Shared Governance Council members shall enjoy freedom of speech and academic freedom without the fear of retaliation..."

The Show Cause report presented the College's proposed policy on freedom of expression and dissent. This policy supports the intent of this core component. This policy is still moving through the college's processes awaiting final action and implementation and therefore does not yet exist.

Even though Luna has an academic dishonesty and plagiarism policy, conversations with academic personnel noted the policy was not being uniformly applied throughout the campus.

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

Luna has an academic dishonesty and plagiarism policy. However, academic personnel noted this policy is not uniformly applied in all situations.

Student research exists and is embedded in course and course content which is appropriately overseen by faculty.

Academic personnel, confirmed they are interweaving the ethical use of information resources into their courses. This was observed on various course syllabi.

The college has an appropriate computer use policy which defines ethical and appropriate use by students and employees. Employees sign a formal document as part of their personnel file acknowledging appropriate computer use.

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

Since the Show Cause action by the Higher Learning Commission, Luna Community College has begun a journey of ethical, behavioral and policy transformation that, while aspirational, sets a path for a more transparent, focused institution of higher learning. The new policy on nepotism, the freedom of expression policy (yet to be approved), and the restrained interference by the Board of Trustees in the day-to-day operations of the college are all examples of the new journey on which the college has embarked.

Clearly, the college has work ahead to accomplish a "new normal" of operation style. Since one Board of Trustee member has not signed the Ethics statement pledging to conduct himself in an ethical manner, there is a lack of clear evidence that the Board will not acquiesce to a previous "business as usual" style. While training has occurred to bring the Board into a true policy governance approach with standard operational expectations of the role of the Board, there is unanimous agreement that more training and authentic change in Board behavior must occur in order for the college to function in accordance with the assumed practices of an HLC approved institution.

The interim president brings fresh eyes to the position and a commitment to transforming Luna to a more highly functioning, student oriented institution. That said, a search for a new president is eminent and the current interim may not be an applicant. Evidence of continuing lack of board cohesion, noted during the open meeting with the BOT, suggests future uncertainty whether or not the Board will see the value in continuing this new era and select an new president who can sustain an early but authentic vision to make changes at the college.

The independent audit findings, the state of New Mexico's current oversight on cash flow and inventory and the lack of any Foundation financial data offer further evidence of considerable concern for Luna's future viability. The seriousness of these findings and the role of the Board in any of these activities heightens the need for serious and sustainable changes in the way the college is governed.

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

Evidence

Luna utilizes accrediting bodies and learned societies to develop outcomes for many of their programs, such as Nursing, Business, and STEM. The campus is just now developing program level outcomes for some of its other programs. The New Mexico transfer initiative guides course descriptions and learning outcomes for their transfer courses.   The college curriculum committee, established in 2015, has been incorporated as a subcommittee of the faculty senate, within the last year.

The College established a curriculum committee in 2015. It was later incorporated into faculty senate in 2017

A finalized version of the curriculum committee form and agenda has been approved as of December of 2017. A review of the minutes of the curriculum committee, along with discussions of the committee onsite, provides evidence that they were active in their review of curriculum changes. While assessment information is not required on the form for program changes, it is sometimes discussed when the changes are proposed. The college has engaged in program mapping to look for gaps in their curriculum and worked to fill those gaps.

The college has partnerships with outside agencies, such as Los Alamos National Laboratory, which provides feedback on the preparation of their students. The laboratory has recently worked with the institution on grants, including outreach to the surrounding area and tutoring activities. Copies of the grant reports are included in the addendum.

Faculty have attended state training in how to become more proficient at assessment. This should be helpful as they move forward to develop program level assessment for all academic areas. The assessment committee has proposed purchasing assessment software to allow for better longitudinal analysis of their data. The assessment committee noted that historically assessment had been driven by the administration, but that it is now being led by the faculty.

Consistent with the traditional mission of community colleges, Luna offers Associate and Certificate programs. A review of program objectives and discussions with faculty during the visit provides evidence that course levels are appropriate. Through the curriculum committee, faculty are actively involved in the development and modification of academic programs. The institution does permit adjunct faculty to make recommendations for curricular changes, which is important as many of the classes are only taught by adjunct faculty.

The college uses standard syllabi for courses across all delivery methods. A review of online courses showed the standard syllabi in use. The rigor of the online course was appropriate for the level of the class. In most cases, the same final exam is used across all modes of delivery.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.B - Core Component 3.B

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

Luna participates in the New Mexico Higher Education Department's general education core course transfer curriculum. The transfer information is available at the New Mexico Higher Education website and shows how the various courses fit and transfer among New Mexico institutions. The rationale for general education and the breakdown of the areas is provided by the state.   Luna does not offer courses above the associate degree level. The curriculum committee is responsible for identifying academic standards at the institution.

The Philosophy of General Education is provided in the college handbook. The philosophy statement notes that the core ensures graduates have appropriate skills to operate in society. The college should make the connections of the general education core more explicit for better student understanding. The institution uses capstone courses, practicums, and clinical programs to assess some of their general education outcomes, such as communication. However, most of the general education assessment currently occurs at the course level rather than the program level.

Cultural diversity is discussed in the humanities requirements within the general education requirements. It is emphasized in sociology and psychology courses. The nursing program specifically addresses cultural sensitivity during the intake class. Religion and Philosophy courses also emphasize cultural awareness. The general education ENG 115 course requires students to synthesize information. A review of course syllabi included in the addendum show that a variety of assignments and learning activities are used to enhance learning.

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 With Concerns

Evidence

Most program areas have a full-time faculty member assigned to the program area. Academic oversight for areas without full time faculty is provided by each program's academic director. Program advisement has been helped by the recent addition of faculty advisors. Declining numbers of FTE students has made maintaining full-time faculty difficult. Currently, the institution only has 25 full time faculty. Engaging faculty in assessment and curriculum development, along with academic advisement, is difficult with the few number of faculty deployed.

Faculty serve on search committees for full time faculty. The program directors are involved in the search for adjuncts, which has become a significant portion of the teaching staff. All faculty are expected to meet the required qualifications, regardless of status.

One of the qualifications listed by Luna Community College for academic areas and transfer courses calls for faculty members to hold "…A master's degree in any area with 24 upper division (300-400 course level) and/or graduate semester hours in the academic area/discipline, or…". This academic requirement is not supported by HLC guidelines for faculty. A sampling of 35 faculty files showed that Luna has 3 faculty not meeting the HLC criteria. The institution has also made exceptions for the master's requirement based solely on the number of years faculty members have taught at Luna. A plan should be in place for these faculty to attain appropriate credentials.

The college uses a performance review system that includes a classroom observation of the faculty. The evaluation form used should provide appropriate feedback for both the faculty member and the supervisor. The

student evaluation form is well-developed and should provide adequate feedback as well. The sampling of faculty files indicated that performance appraisals are not always conducted on all faculty.

Staff qualification and training are appropriate for staff interviewed. Travel funds for training are limited, but staff members state they are receiving the training needed to do their jobs effectively.

The institution supports faculty to attend conferences which occur off-campus. It is unclear to faculty how this money is allocated, or if a dedicated fund is available. Faculty travel is approved by the president as needed. The faculty senate is developing a proposal to have funds set aside specifically for faculty development.

The college has a clearly-defined policy for office hours for full-time faculty. Adjunct faculty teaching on campus are offered space to meet with students and also provided telephone numbers where they can be reached. Students indicate that faculty are very accessible.

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

Luna Community College provides a number of support services for its students. The Academic Center for Excellence tutoring center (ACE) is very active with student visits. Students who have utilized the tutoring program have been more successful in their courses. Tutoring is available for math, reading, and writing. Computers are available for student use in the Student Success Center. Faculty participate in an early alert process where students who are having difficulty in courses, or not attending, are referred to the Student Success Center for appropriate help. Students noted that the tutoring center was very helpful in assisting them in their courses.

The disability services coordinator works with students and faculty to secure appropriate accommodations. The coordinator meets with Las Vegas high school students who express interest in Luna during their exit IEP meetings to help them understand the services available at Luna.

The college maintains an on-campus early-childhood lab school which provides day care for its students, as well as Luna staff and the surrounding community. This support service helps students attend classes and tutoring sessions. The daycare can accommodate up to 30 openings for children on a first-come-first-served basis. Currently 30 slots are sufficient, but if necessary, the college might consider limiting the number of community members that can utilize the services, to assure students have consistent availability of services. As a component of the lab school, the daycare program serves as a laboratory environment for early childhood education students.

The college offers free ESL classes through their adult education department and provides services under Section 504 of the ADA.

First-time students are assessed by the ACCUPLACER placement test and advised into appropriate course sections. Student scores on the ACT/SAT also are used in course placement. A number of remedial courses are

available for students to improve their skills and meet course prerequisites. Students are advised that they may take developmental and transfer credit courses simultaneously. Advisors work with students to assure they are being placed into the course that should allow for successful completion without unnecessary remediation. For example, students who almost meet the target score for a particular class may be allowed to enroll if they are willing to seek tutoring. Ultimately, students are able to select their own courses even against the advice of the advisor.

Some problems have occurred when students, who need remediation in English, have concurrently enrolled in reading and writing intensive courses such as Psychology. Enhanced use of course prerequisites may be useful in preventing this from occurring.

Students are assigned a student success center advisor for their first academic year. These advisors work directly with the students to assure they are in appropriate classes. Students must meet in person with the student success center advisor in order to register during the first year. After completing their first year students are assigned an academic advisor. The advisor works with the student on class schedules, as well as transfer and career issues. Advisors are available at off-site locations as well.

Students stated that sometimes the transition from the Student Success Center advisor to the academic advisor is not consistent. Some academic advisors noted that students were sometimes not enrolling in courses in the preferred sequence. Better coordination between the Student Success Advisors and the academic advisors may help with student satisfaction and completion.

Students are provided access to email, a learning management system, and a student information system from both on-campus and off-campus locations. Wireless internet access is available throughout the campus. Some of the off-campus facilities also provide wireless access. Computer labs are available on-campus from 8 a.m. to 8 p.m. Students at offsite locations typically access computers from their home.

Luna has 200 computers available on campus for student use and another 100 in use by faculty and staff. Connectivity is good between the buildings and the college has recently expanded their bandwidth capacity. Departments make their own decisions on when to replace computers. The campus does not have maximum age to sunset computers. They also do not have a campus policy regarding when to replace computers.

A number of specialized labs are available for various career areas. When touring campus the laboratory space seemed appropriate. Nursing labs, for example, have simulations available that provide experiences they may not see during their practicums.

Students are instructed in the appropriate methods of citing sources within the Humanities general education courses. Students in some programs, such as Nursing, are also provided appropriate instruction on citing information in reports. Finally, librarians will provide information on how to cite sources.

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

Luna Community College has a small number of clubs available for students. Student senate participates in shared governance. The college supports intercollegiate men's baseball and women's softball teams.

Luna utilizes clinical sites for some of its programs, nursing and dental, in particular. These sites provide quality interaction with some of their stakeholder groups. In the fall of 2017, Luna students participated with United World College at a Social Justice Forum. United World College also serves as a clinical site for Luna.

Luna students are able to improve their understanding of and appreciation for diverse populations through interacting with them at their clinical and practicum sites. The majority of Luna's programs require some type of practicum experience.

Student government has experienced a resurgence at Luna Community College. In the spring of 2017, the student government had ceased to function. The student government reactivated in the spring of 2018 and has been very active. As of January 2018 they now hold a regular reporting slot on the agenda for Board of Trustees meetings.

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

Overall, Luna Community College is providing high quality education in all of its delivery modes as evidenced by its use of standard syllabi, and in many cases, standard final exams. Faculty are actively engaged with students in the pursuit of teaching and learning. Faculty lead the development of course and program outcomes. Practicum and clinical experiences provide the opportunity for students to interact with professionals and gain a better understanding of workplace expectations. The college has an active course placement policy which helps assure student success in courses. Students are able to participate in co-curricular programs which allow for interaction with other college constituencies, benefiting both groups.

A primary concern relates to the statement from the Higher Learning Commission (HLC) regarding faculty qualifications. One of the qualifications listed by Luna Community College for academic areas and transfer courses is, "…A master's degree in any area with 24 upper division (300-400 course level) and/or graduate semester hours in the academic area/discipline, or…". This academic requirement is not supported by HLC guidelines for faculty. A sampling of 35 faculty files showed that Luna had 3 faculty not meeting the HLC criteria. The institution has also made exceptions for the master's requirement based solely on the number of years of teaching at LCC. A plan should be in place for these faculty to attain an appropriate credentials.

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

A program review process is described that includes review and analysis of data, goal setting, environmental scan, and post review. While Luna provided an example of an Annual Report for the Allied Health Programs and the School of Business Self-Study (2013-2014) for its programmatic accreditation, there are no program reviews provided to demonstrate that a program review process has been implemented and that all programs follow the established three-year cycle.

LCC describes a process to transcript all transfer credits earned at regionally accredited or nationally faith-based or nationally accredited institutions as well as military credit, which is disclosed in the College Catalog (page 22). Students are required to submit official transcripts and complete a request

for evaluation form. The Registrar reviews credit evaluations for general education courses using the General Education Core Transfer matrix which provides course numbers for all General Education Core courses from New Mexico institutions. Faculty advisers review coursework specific to the major. During the site visit, the most recent five student transfer of credit evaluations were reviewed. Students are provided from the Registrar a letter and unofficial transcript showing the courses accepted to Luna Community College. All files reviewed confirm the described process is followed.

Luna Community College publishes its transfer credit policy in the Catalog.

Course prerequisites are set by the academic departments and a master syllabus is created to provide required elements for course expectations and learning outcomes for each course. The following courses were randomly selected for syllabi review to assure the dual credit courses are equivalent in learning outcomes and levels of achievement at three district high schools:

- SPAN 102 - Beginning Spanish II
- Biology 218 - Human Anatomy and Physiology II
- ENG 115 - Freshman Composition II
- Math 180 - College Algebra

In general master syllabi information was included. However, in reviewing the Biology 218 and Math 180 sample syllabi, information regarding student expectations and course evaluation as well as text book information differed from the master syllabus. The College has hired a Dual Credit manager which is a new position. A complete review of all dual credit syllabi for compliance with the master syllabus is recommended.

In the 2015-2018 Catalog the College lists specialized accreditation for Dental Assisting, Nursing (RN), Accounting, Business Administration, and General Business, and Vocational Education. Each program accrediting body listed below currently identifies Luna as accredited for these programs:

- Commission on Dental Accreditation
- Accreditation Council for Business Schools (ACBSP)
- Accreditation Commission for Education in Nursing (ACEN)
- National Center for Construction Education - sponsored by AGC New Mexico as an Accredited Training and Education Facility

Luna uses its Graduate Student Survey to check student satisfaction after graduation. Conversations with transfer institutions such as New Mexico Tech University have resulted in summer bridge coursework for math and English to ensure graduates are prepared for the higher sequence of math courses upon graduation. The College did administer a Student Success Center Survey in 2016-2017, however, there is no evidence that an analysis has been done or improvements implemented based on the information collected. Currently there are no other ways the College is collecting information about the student experience other than through anecdotal information gleaned from interactions within various departments.

Luna personnel described efforts to examine student withdrawals to determine why students are dropping courses and determine how they will be sharing the information with Retention and Completion Committee.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.B - Core Component 4.B

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

Evidence

A review of sample syllabi provides evidence that learning outcomes/course objectives as well as student expectations are provided to students in all delivery formats.

While Luna is engaged in some assessment activities such as course grading and curriculum mapping from a common math final as well as licensing examination scores, documentation of assessment results has not resulted in the development of a campus culture of assessment. Co-curricular program summary forms are used to gather additional information about the activities of program-related clubs beyond just attendance counts. A review of the Culinary End of Semester Form, indicates the presence of established outcomes, survey input, reflection, and recommendations. The information appears to be anecdotal, but the form does provide a structure and initial attempt at assessing co-curricular programming. It is unclear how broadly this assessment is used.

LCC inconsistently uses information to improve learning. A modification to the Cosmetology curriculum regarding how the instructors taught the 90-degree haircut (skill) provides an example of how assessment information is used to improve student learning, resulting in improved pass rates on that particular item from the state licensing exam. In addition, a STEM math bridge course is being developed to meet an identified need with New Mexico Tech University transfers to better align calculus course expectations with College Algebra requirements. The College received a grant from the Alamo National Labs to establish the course and track progress. Finally, after observing a high failure rate on their dosage calculation exam the Nursing department implemented a pre-requisite to address the math competency required for success in the course.

Luna uses anecdotal data regarding students transferring to other institutions after graduating to assess effective instruction. The College also regularly reviews State licensure examination rates.

Using program level outcomes established by the NMHED or programmatic accrediting body, faculty on the Assessment Committee described a process for curriculum changes and provided the following the examples:

- Culinary - The faculty is interested in identifying a new Safe Serve assessment. Currently, their assessment measures student test taking skills rather than depth of student understanding.
- CIS - The previous curriculum did not prepare students for certifications, focusing more on programming. Noting students struggles with upper level courses, the faculty incorporated technical skills and required a certification test. In the first round of certification 6 students successfully completed the test and 12 students successfully completed the test in the subsequent year.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

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

Not Met

Evidence

While acknowledging that Luna has set an aspirational goal to improve student retention by 10% the most recent Fall to fall (-7%) and Fall to spring (-15%) retention shows declines in excess of 10% which calls into question whether the current goal is attainable. The Registrar described current activity in the Enrollment Management Committee as focusing on "low hanging fruit" such as examining reasons for withdrawal, developing summer bridge courses in math and English, and requiring advising for all first time in college students. Although a number of retention activities have been implemented in fall 2017, the results of of these initiatives are not yet available. Although a review of the New Mexico Independent Community Colleges (NMICC) Accountability in Government Act Performance Indicators (2013) suggests that Luna had been improving in enrollment and student success areas, it is unclear if this has continued with the most recent cohorts. The College also acknowledged an interest in becoming a member of the National Student Clearinghouse in an effort to obtain additional enrollment information about their student body.

Luna has begun to collect and analyze student data in the Retention & Completion and Enrollment Management committees and within individual academic departments, such as STEM, Business, Nursing and the Liberal Arts program. While Luna is collecting information through its student information system and has established committees charged with analysis of the information, it is unclear who is ultimately responsible for leading the larger institutional discussions about the data they collect and improvements that can be made at an institutional level. For example, during the open community and student forums, as well as in internal committee meetings, it was evident that there is a serious concern with classes being cancelled after the start of the term, thus, impeding student persistence and completion. This issue has been identified and clearly articulated, however, there is no

evidence that information about this issue is shared internally and that someone is responsible for addressing the problem.

The Assessment Committee shared an example of how the college is using data to improve the student experience. Faculty noticed that there were a disproportionate number of students graduating from the General Studies program versus the Liberal Arts transfer degree program. A process review with academic advisers revealed undecided students were being funneled to General Studies rather than Liberal Arts and were obtaining a degree that was not transferable. As a result, the faculty recommended the College put the General Studies program on hiatus. Now undecided students are placed into the Liberal Arts degree track until they declare a major. Meetings with academic advisers confirmed the hiatus of the General Studies program and the revised process to direct undecided students to the Liberal Arts program.

Another example of how the College is using data was a review of their distance education policies and their impact on accounting and general business majors.

The college is only approved for one distance learning program in business (business administration). Many business students enrolled in programs not approved for distance delivery, such as accounting. These students self-advise and reach the maximum of 49% of credits permitted via online courses. Although many of these courses are available on ground, students chose to enroll in their on line versions. Often these courses are general education courses. This phenomenon causes enrollment issues later on in their sequence because the majority of accounting and business courses are only offered online. This concern was also echoed in meetings with students. Control mechanisms have been put into place to restrict online class registration. Permission must now be given by the Advisor to get into an online class. The Program Director produced a chart of every student majoring in business administration, accounting, and general business to identify which courses they still need and to map out what will be offered and in which formats to ensure student completion within the compliance parameters. Better advisement and enrollment controls are needed to prevent this situation from reoccurring.

It was evident during discussions that Luna's experience collecting and analyzing data has been inconsistent as new personnel are brought on board. While Luna has engaged in sporadic assessment activities, documentation remains incomplete and the feedback loop remains open. Extended campus-wide discussions are necessary to fully implement a comprehensive program to collect data and utilize it for quality improvement.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

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

Luna Community College has experienced high turnover in key academic and student services positions within the last two years. While new professionals are trying to gather information to make improvements, they are still learning about the institution and have not yet seen results from their initial retention efforts. It was evident during discussions that data collection and analysis has been inconsistent, largely due to significant staff turnover. Although Luna engages in sporadic assessment activities, documentation and applicable data analysis remain incomplete.

The visiting team verified that the College has policies and processes in place to review all transfer credits. Students are provided the results of each review through a letter from the Registrar that includes an unofficial transcript. In addition, the College has maintained programmatic accreditation for its Dental Assisting, Nursing (RN), Accounting, Business, and General Business programs. In addition, Luna is listed as an accredited training and education facility. A review of syllabi for online and dual credit confirmed that in general, Luna complies with the College's master syllabi.

There is no evidence of a formal process to gather assessment data, analyze, and implement changes to improve instruction or student learning. While Luna is collecting information through its student information system and has established committees charged with analysis of the information, it is unclear who is ultimately responsible for leading the larger institutional discussions about the data collected and improvements that can be made at an institutional level.

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

Not Met

Evidence

The June 30, 2017 audit report confirms Luna has $4,648,012 in fund balance. This equates to approximately 3.5 months of operations based on the Fiscal 16 unrestricted and restricted expenditures. This amount is greater than the mandated State of Mexico requirement and supports the college's statement it has the fiscal resources to support its operations.

The Composite Financial Index (CFI) is an indicator of fiscal health. The baseline standard that defines a healthy institution is 3.0. The prior three-year history for Luna shows rates ranging to a low of 3.4 and a most recent high of 7.4 as of June 30, 2016. The fiscal health of Luna is better than the baseline CFI requirement.

The team found no evidence of the institution's educational purposes being adversely effected by elective resource allocations. To the contrary, staff and faculty confirmed they are adequately receiving the resources they need, whether physical, human or technological.

Whenever the college requires a budget adjustment, Luna utilizes the formal Budget Adjustment Request (BAR) process. The BAR is processed by administration, presented to the board for approval and then ultimately delivered to the State of New Mexico Higher Education Department (NMHED). A review of the Board Minutes and the formal Budget Approval submissions to NMHED confirmed

the appropriate process for allocating funds within the institution.

Meetings with personnel in Human Resources, Financial Aid, and Academic Affairs confirmed employees are receiving appropriate training and the college is funding this training. This includes training in such areas as FERPA, HIPPA, Title IV, ACA, and ADA. Faculty confirmed they are actively awarded funds for professional development and are using the funds to support academic development and program development.

Luna provides "Budget Process Instructions" to budget managers. Conversations with a few budget managers confirmed they were aware of the budget process. Each department makes appropriate expenditure requests. These requests flow to the various administrative parties to assist in preparing the final budget for Board approval. Per the department heads, this process is appropriate for them.

As stated by Luna in its Show-Cause report "...To improve inclusive budgeting decisions, the previous budget process was modified..." This statement acknowledges Luna's self -recognition that they needed a more inclusive process. Conversations with the CFO confirmed the need to enhance Luna's budgeting process. This modified process is an initial step towards this goal.

As evidenced by the June 30, 2017 audit report and confirmed during meetings with the CFO, Luna's budget process should be enhanced. According to Statement 1-A, detailing the budget and actual revenue/expenses for Luna, there are wide discrepancies. Federal revenue sources and privates gifts, grants and contracts were budgeted at $6.3 million and $7.8 million, respectively. However, the actual federal revenue sources and private gifts, grants and contracts received were $2.7 million and $1.6 million, respectively, a total variance of $9.8 million. This is more than 38% of the original budget for Luna. It should be noted that in FY 11 the College's budgeted estimate for Pell awards was lower than Actual. Uncertainty over the number of enrolled Pell eligible students going forward prompted the College to double the estimated budget and leave it at that level for several years.

On the expense side, the amount budgeted was $10.9 million more than actual (almost 41% of original budget). This $10.9 million included $2.0 million for instruction and general, $4.6 million for student aid, $3.8 million for capital outlays and $.5 million in other.

While the college reduced the Original FY 18 Budget to $3,500,000 and the subsequent Final Budget Adjustment to $2,000,000, this excessive overstating of budgets is evidence the budgeting process needs attention.

Luna uses Jenzabar CX as its standard student information system (SIS). Information technology personnel, institutional research personnel, faculty and staff noted while this is the current system, the college as a whole is not fully utilizing Jenzabar's capabilities. The current plan is to evaluate the continuation of Jenzabar versus the potential for a new SIS being considered as part of a statewide RFP.

Information Technology (IT) personnel confirmed the college has a strong technology backbone. While the satellites need some enhancement, the connectivity, bandwidth, and wireless network are adequately meeting the needs of the college.

Approximately 300 computers are deployed throughout the college. IT, while not involved in the initial requests for computers, does provide a standard image for all machines and works with faculty/staff to load the appropriate programs.

Relative to budgeting, each department conducts its own technology needs (computer, printer)

assessment and makes requests based on that assessment. These needs flow into the annual budget request. However, neither the college nor the information technology department has a structured process for refreshing computers on campus. The review team learned the college still has machines running on the Windows XP platform. While IT would support a standard refresh policy, one has yet to be developed.

Educational technology is strongly utilized by faculty and the faculty rely heavily on IT to support them. Educational technology is imbedded in such areas as Quality Matters, the Learning Management Systems (e.g. Blackboard Connect) and Google Docs. At present, only one IT person supports the educational technology requests from all faculty and students. With only one person supporting these requests it is clear that Luna's ability to sufficiently support its operations is limited.

The College lacks the infrastructure and oversight of fixed assets, as documented in the NMHED audit. An inventory, as anticipated by the NMHED audit, was halted by the College before it was completed, and the visiting team could not determine who was responsible for ending the inventory process. As of February 13, 2018, the college has identified more than $1.9 million of fixed assets (inventory) that have been disposed of and not previously accounted. It is evident that the college failed to adequately control its inventory.

The "Disposition of Fixed Assets High Level Summary 2-13-18" states the dispositions of these assets ($1.9 million) was approved by the Board of Trustees on February 13, 2018. Per the Board Minutes "... the Fixed Asset Reconciliation..." was unanimously approved by the five board members present. This action sustains the board's understanding that over $1.9 million of fixed assets have been disposed at various times from 1972 through 2016 and are now finally being recorded by the college in 2018. These actions provide evidence of the need for external auditors to further address this issue in future audited financial statements.

The adverse audit finding by the independent audit firm and the failure of the Foundation to provide any written or electronic documents related to its current financial status are evidence of public awareness of insufficient financial accounting. Further, there is little evidence that Luna employees and the BOT recognize the serious nature of these events. In addition, no scholarships were awarded in 2017-18 bu the Foundation. Luna Community College administration, in order to keep financial commitments to students, funded the previously promised Foundation funds from the college's coffers. This is evidence the college needed to redirect resources to meet this need.

It is evident that the enrollment projections fail to reflect Luna's actual experience, raising understandable questions about the budgeting practices of the college. The Credit hour enrollment numbers for Fall 16, Spring 17, Fall 17 and Spring 18 are 9,360, 9,220, 9,149, and 8,022, respectively. The enrollment report to the board dated November 7, 2017 listed Fall 16, Spring 17, Fall 17 and projected Spring 18 of 9,363, 9,224, 9,149 and 9,434, respectively. The credit hour discrepancy for Spring 18 is 1,412. At the February 13, 2018 board meeting, the college addressed the Board with a report on enrollment. However, the team found no evidence of Luna modifying its budget to meet the drastic change in enrollment versus projections.

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

Not Met

Evidence

Since the Show Cause action, the Board of Trustees (BOT) has begun to understand their need to be knowledgeable and pay attention to academic, financial, legal and fiduciary responsibilities. This newly found awareness indicates both the need for additional training and education about local, state, and federal polices and the shift in attention of the Board to more rigorous and intentional policy development and oversight.

It is evident the Luna's financial accounting systems are both insufficient and inadequate. Despite the adverse audit finding by the independent audit firm and the failure of the Foundation to provide any written or electronic documents related to its current financial status, there is little evidence from the BOT that they acknowledge the serious nature of such events. The public (State of New Mexico, Federal Government, other external agencies) is aware of the adverse audit finding and the lack of any Foundation accounting documents. Further, these publics have been provided notice of the below standard ratings.

The Luna Foundation has undergone a tumultuous year with the abrupt departure of the previous CEO. In addition, trustees independently confirmed there are no records (written or electronic) relative to the Foundation's financial audit trail or accounting. Of the many concerns with the Foundation, nearly $1 million is reported to reside in its coffers. The most recent 990 tax documents (2016) reveal nearly $880K available to meet the Foundations' mission. In the 2017-2018 academic year, no scholarships from this fund have been awarded and there are questions from the College (financial aid director) and the Board of Trustees concerning the criteria for previous scholarships and who completed the actual selection process. Luna Community College administration, in order to keep financial commitments to students, funded the previously promised Foundation funds from the college's coffers.

In separate meetings with faculty, staff and student senates, and the Shared Governance Council, each

group and several individual employees pledged to hold the Board accountable for their adherence to and promise of genuine input to items germane to the functioning of the college. A sustained effort to embrace this newfound esprit de corps gives optimism to the college staff, a boost in morale, and a fervent hope for a culture of inclusion rather than intimidation.

The Curriculum Committee and the Faculty Senate have appropriate involvement in the development of academic policies and requirements. Managers of each departmental/content areas are free to propose and forward appropriate revisions and additions to current policy to align with content currency and 21st Century educational standards.

Of concern is the absence of one Trustee's signature on the newly constituted ethics statement. Without complete accord on the part of the BOT to pledge ethical behavior, continued, dysfunctional actions/meetings are quite possible. Although the HLC review team asked for records of Foundation activity and BOT signatures the Foundation audit, neither was provided to the team. Further, Luna's current failure to attend to the external audit findings and the absence of succinct instructions from the Board for addressing noted inadequacies, provides evidence of either a lack of attention to the serious nature of the audit or wholesale non-compliance with audit findings.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

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

Not Met

Evidence

The current budgeting structure, allocation of resources and deployment/purchasing of resources is departmentally proposed and overseen with final approval by the Chief Financial Officer and the President. While the overarching mission of the college is the umbrella under which existing and new funding initiatives are addressed, there is no evidence of any intentional alignment of budget in place.

The linkage of budgeting to student learning, evaluation of operations and planning is in its infancy. With the 2013-2018 Strategic Plan sun setting and a new plan not yet begun, budgets are executed strictly department by department.

Although the Board of Trustees is aware of the strategic plan and the need to develop a new road map for the future, in the open meeting with the BOT it was evident that planning had received only cursory attention. The BOT did acknowledge that the President and staff were responsible for development of the new plan.

The President and his staff, in a meeting with the team, expressed the desire to modify the existing Strategic Plan for 2019 and beyond. They indicated that the Strategic Planning and Institutional Analysis Committee is in the process of conducting a review and analysis of the current plan to determine needed modulations. That may serve the college well in the short term, The Board observed that "the President and staff were responsible for development of the new plan." However, Board ideas for expanding existing or beginning new programs and the likely selection of a new president may significantly impact the planning process and its emerging blueprint.

During the Open meeting with the community, several ideas were advanced for ways to better serve workforce, senior citizen, satellite sites and unmet Northeast New Mexico educational needs. The Show Cause action has raised awareness of the community to the vitality and challenges of Luna.

The College administration and the BOT have the opportunity to capitalize on the new heightened energy and, where feasible, incorporate strategic directions that have emerged.

Plans for the individual departments incorporate potential nuances and external financial challenges to those plans. With a significant enrollment decline (15% Fall 2017 to Spring 2018) and potential costs of the Human Resource Parity study and compensation adjustment ($400K), the Board and Administration have stated that the $4 million-dollar fund balance will be tapped to weather these fluctuations, anticipated or not. The review team recognizes that this may be an interim solution to immediate financial needs. However, the expected connection between strategic vision and initiatives to resource allocation is not evident. Luna must not only bridge short term financial issues but develop a plan for longer term financial health and strategy.

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

Not Met

Evidence

In years prior to the Show Cause action, Luna provided no evidence of institutional plans being developed that would document its operational performance, institutional effectiveness, and capabilities. Subsequent to the action, multiple plans have been created or updated in several areas including Registrar, Student Services, Financial Aid, Vocations, Allied Health and Academic Affairs. These plans follow no established format. Neither do they identify established procedures for documenting evidence of performance. The academic plan is simply a list of objectives. The student services plan lists start of activity, resources, individuals, and desired results. However, this plan already has completion dates and results for May 2018 and May 2019, which are chronologically premature . The review team observes that these are aspirational targets. The plans for allied health and vocations also follow different formats. There is no evidence that these plans are linked in a way to assist the College in meeting its standards of performance.

The college collects various data from its Student Information System (Jenzabar). Institutional research and information technology confirmed they are warehousing this data. The evidence demonstrates Luna is using this data to meet its various regulatory standards for IPEDS, Financial Aid, and the Higher Learning Commission. Some of the data is used by various departments (e.g. Nursing, STEM) to improve their performance. However, there is no evidence that this information is being used by Luna at the institutional level to learn from its operational experience and improve its institutional effectiveness.

Evidence from the June 30, 2017 audit report states "...Management has omitted the Management Discussion and Analysis that accounting principles generally accepted in the United States of America require to be presented to supplement the basic financial statements. Such missing information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of the financial reporting for placing the basic financial statements into an appropriate operational, economic, or historical context...". Failure to include this information prompts the review team to conclude that Luna cannot adequately describe its operations. It is unclear how Luna could learn from its operational experience if it cannot adequately describe its operations.

Luna recognizes the compensation provided to many of its employee is not on par with comparable institutions and/or positions. Accordingly, a parity study has been initiated by HR. Luna anticipates

receiving the results of the study in April 2018. As confirmed in board minutes, meetings with shared governance and Human Resources, this study is almost complete. From a budgetary status, it was noted in the November 7, 2017 Board work session that $400,000 would be appropriated to fund the salary parity study.

As previously noted, the College lacks the infrastructure and oversight of fixed assets, as documented in the NMHED audit. An inventory review was halted by the College before it was completed. The previous HLC visiting team could not determine who was responsible for ending the inventory process. As of February 13, 2018, the college has identified more than $1.9 million of fixed assets (inventory) that has been disposed and not previously accounted. This is evidence the college failed to adequately control its inventory.

The "Disposition of Fixed Assets High Level Summary 2-13-18" states that dispositions of these assets ($1.9 million) was approved by the Board of Trustees on February 13, 2018. Per the Board Minutes "... the Fixed Asset Reconciliation..." was unanimously approved by the five board members present. This action sustains the board's understanding that over $1.9 million of fixed assets have been disposed at various times from 1972 through 2016 and are now finally being recorded by the college in 2018. The external auditors will need to address this issue in future audited financial statements.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

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

Luna Community College is equipped with financial and human resources to support the mission of the College and student learning. With a $4 million-dollar fund balance, the college has a safety net with which it may sustain unanticipated or purposeful financial challenges.

There is no evidence provided linking the Strategic Plan, departmental plans and the college's resources. Budgets are departmentally developed and while the Board approves an overall budget of the college there is no strategy for sustained or innovative activities/outcomes that propel the college for the future. The nearly 40% overstatement of the budget each year coupled with a troubling lack of physical inventory provides evidence that the college does not adhere to fundamental principles of college budgeting and management.

The findings by the independent auditor were of some surprise to the college including the notation of the lack of records from the Foundation. The absence of a clear delegation of authority, inability to exercise true financial and physical oversight and the apparent lack of attention to rectifying the audit findings are of a grave concern. Without standard and commonly practiced budgeting, resource allocation and financial links to the institutional outcomes, Luna remains an outlier with regard to nationally recognized financial accounting principles and practices.

The absence of minutes from the BOT Audit committee and the admission that they meet infrequently raises concerns about the degree of seriousness with which the board meets its fiduciary oversight. In light of the adverse audit finding, the need for Luna to establish appropriate policy and processes around audit reports and accountability is of paramount importance.

The inventory discovery and subsequent action by the Board to approve the disposal of some $1.9 million in physical inventory is a genuine concern. These findings provide compelling evidence of Luna's need for stricter and more diligent controls. While Luna has adopted new processes, only time will tell if this will result in greater accountability.

The findings of an imminent human resources parity study could result in an estimated $400K salary alignment to even the expected salaries of applicable staff for work performed. While the college is prepared with the reserves to fund this endeavor, future and reoccurring human resource costs must be analyzed and prepared to sustain ongoing equity funding.

There is evidence the enrollment projections fail to reflect Luna's actual experience. This situation further complicates the budgeting practices of the college. The college has addressed the Board with a report on enrollment however, the team has been unable to find any evidence of Luna modifying its budget to meet the drastic change in enrollment versus projections.

It is evident that not all members of the BOT have pledged to support ethical behavior. The review team noted an unsigned ethics statement. In addition, in the open meeting with the BOT the Board

exhibited limited understanding of the effects of the Foundation on the College's audit. These combined instances offer compelling evidence of the Board's lack of attention to these serious matters.

Review Dashboard

Number	Title	Rating
1	Mission	
1.A	Core Component 1.A	Met
1.B	Core Component 1.B	Met
1.C	Core Component 1.C	Met With Concerns
1.D	Core Component 1.D	Met With Concerns
1.S	Criterion 1 - Summary	
2	Integrity: Ethical and Responsible Conduct	
2.A	Core Component 2.A	Met With Concerns
2.B	Core Component 2.B	Met
2.C	Core Component 2.C	Not Met
2.D	Core Component 2.D	Met With Concerns
2.E	Core Component 2.E	Met
2.S	Criterion 2 - Summary	
3	Teaching and Learning: Quality, Resources, and Support	
3.A	Core Component 3.A	Met
3.B	Core Component 3.B	Met
3.C	Core Component 3.C	Met With Concerns
3.D	Core Component 3.D	Met
3.E	Core Component 3.E	Met
3.S	Criterion 3 - Summary	
4	Teaching and Learning: Evaluation and Improvement	
4.A	Core Component 4.A	Met With Concerns
4.B	Core Component 4.B	Met
4.C	Core Component 4.C	Not Met
4.S	Criterion 4 - Summary	
5	Resources, Planning, and Institutional Effectiveness	
5.A	Core Component 5.A	Not Met
5.B	Core Component 5.B	Not Met
5.C	Core Component 5.C	Not Met
5.D	Core Component 5.D	Not Met
5.S	Criterion 5 - Summary	

Review Summary

Conclusion

The review team affirms that the statements of evidence contained in the report provide sufficient support for the team recommendation, noted above.

Overall Recommendations

Criteria For Accreditation
Not Met

Sanctions Recommendation
Not Applicable to This Review

Pathways Recommendation
Not Applicable to This Review

No Interim Monitoring Recommended.

Assumed Practices within the Criteria for Accreditation
Worksheet A

Foundational to the Criteria and Core Components is a set of practices shared by institutions of higher education in the United States. Unlike Criteria and Core Components, these Assumed Practices are (1) generally matters to be determined as facts, rather than matters requiring professional judgment and (2) unlikely to vary by institutional mission or context.

The Assumed Practices are organized by four areas: (A) Integrity: Ethical and Responsible Conduct; (B) Teaching and Learning: Quality, Resources, and Support; (C) Teaching and Learning: Evaluation and Improvement; and (D) Resources, Planning, and Institutional Effectiveness. These areas link the Assumed Practices to their respective Criteria.

Institutions seeking candidacy will be required to meet all of the Practices prior to admission to candidacy. Institutions in candidacy that do not maintain these Assumed Practices during the candidacy period may have that status withdrawn. Institutions seeking initial accreditation will be granted that status only when all Assumed Practices and all Criteria for Accreditation are in place at the level expected of accredited institutions. In addition, accredited institutions on Show-Cause will be required to demonstrate that they meet all of the Practices prior to being removed from Show-Cause.

A. Integrity: Ethical and Responsible Conduct	Met	Not Met[1]
1. The institution has a conflict of interest policy that ensures that the governing board and the senior administrative personnel act in the best interest of the institution.		x
2. The institution has ethics policies for faculty and staff regarding conflict of interest, nepotism, recruitment and admissions, financial aid, privacy of personal information, and contracting.	x	
3. The institution provides its students, administrators, faculty, and staff with policies and procedures informing them of their rights and responsibilities within the institution.	x	
4. The institution provides clear information regarding its procedures for receiving complaints and grievances from students and other constituencies, responds to them in a timely manner, and analyzes them to improve its processes.		x
5. The institution makes readily available to students and to the general public clear and complete information including:	x	

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[1] **Documenting the Unmet Assumed Practices**
In addition to documenting the specific reason the Assumed Practice is not met on this form, the team should also reference any unmet Assumed Practice in the appropriate area of the main team report; i.e., the related eligibility requirement, Federal Compliance requirement, or Core Component(s).

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A. Integrity: Ethical and Responsible Conduct	Met	Not Met[1]
a. statements of mission, vision, and values		
b. full descriptions of the requirements for its programs, including all pre-requisite courses		
c. requirements for admission both to the institution and to particular programs or majors		
d. policies on acceptance of transfer credit, including how credit is applied to degree requirements. (Except for courses articulated through transfer policies or institutional agreements, the institution makes no promises to prospective students regarding the acceptance of credit awarded by examination, credit for prior learning, or credit for transfer until an evaluation has been conducted.)		
e. all student costs, including tuition, fees, training, and incidentals; its financial aid policies, practices, and requirements; and its policy on refund		
f. policies regarding academic good standing, probation, and dismissal; residency or enrollment requirements (if any)		
g. a full list of its instructors and their academic credentials		
h. its relationship with any parent organization (corporation, hospital, church, or other entity that owns the institution) and any external providers of its instruction.		
6. The institution assures that all data it makes public are accurate and complete, including those reporting on student achievement of learning and student persistence, retention, and completion.	x	
7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.	x	
a. An institution offering programs that require specialized accreditation or recognition in order for its students to be certified or to sit for licensing examinations either has the appropriate accreditation or discloses publicly and clearly the consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.	x	
b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status of the program at each location.	x	
c. An institution that advertises a program as preparation for a licensure examination publicly discloses its licensure pass rate on that examination, unless such information is not available to the institution.	x	

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A. Integrity: Ethical and Responsible Conduct	Met	Not Met[1]
8. The governing board and its executive committee, if it has one, include some "public" members. Public members have no significant administrative position or any ownership interest in any of the following: the institution itself; a company that does substantial business with the institution; a company or organization with which the institution has a substantial partnership; a parent, ultimate parent, affiliate, or subsidiary corporation; an investment group or firm substantially involved with one of the above organizations. All publicly-elected members or members appointed by publicly-elected individuals or bodies (governors, elected legislative bodies) are public members. * *Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.*	x	
9. The governing board has the authority to approve the annual budget and to engage and dismiss the chief executive officer.* *Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.*	x	
10. The institution remains in compliance at all times with state laws including laws related to authorization of educational activities and consumer protection wherever it does business and state law applies.	x	
11. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.	x	
12. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.	x	

Rationale for Assumed Practices indicated as unmet:

While the Board has recently adopted a conflict of interest policy, obligating signatures from each Board member, one member of the Board has yet to sign the document.

Testimony from students in multiple settings indicated a general lack of awareness of a complaint policy or process for resolution.

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B. Teaching and Learning: Quality, Resources, and Support	Met	Not Met[1]
1. Programs, Courses, and Credits		
a. The institution conforms to commonly accepted minimum program length: 60 semester credits for associate's degrees, 120 semester credits for bachelor's degrees, and 30 semester credits beyond the bachelor's for master's degrees. Any variation from these minima must be explained and justified.		
b. The institution requires that 30 of the last 60 credits earned for a bachelor's degree that the institution awards and 15 of the final 30 for an associate's degree it awards be credits earned at the institution.* Institutions that do not maintain such a requirement, or have programs that do not, are able to demonstrate structures or practices that ensure coherence and quality to the degree. (Consortial arrangements are considered to be such structures. In addition, an institution that complies with the criteria for academic residency requirements of the Service members Opportunity Colleges (SOC) will not be deemed out of conformity with this Assumed Practice provided that its policy is an exception for active-duty service members and not for students in general.) *For example, for a bachelor's degree requiring 120 credits, the institution accepts no more than 90 credits in total through transfer or other assessment of prior learning, and the remaining 30 must fall within the last 60 credits awarded the student.*	x	
c. The institution's policy and practice assure that at least 50% of courses applied to a graduate program are courses designed for graduate work, rather than undergraduate courses credited toward a graduate degree. (An institution may allow well-prepared advanced students to substitute its graduate courses for required or elective courses in an undergraduate degree program and then subsequently count those same courses as fulfilling graduate requirements in a related graduate program that the institution		

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[1] **Documenting the Unmet Assumed Practices**
In addition to documenting the specific reason the Assumed Practice is not met on this form, the team should also reference any unmet Assumed Practice in the appropriate area of the main team report; i.e., the related eligibility requirement, Federal Compliance requirement, or Core Component(s).

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B. Teaching and Learning: Quality, Resources, and Support	Met	Not Met[1]
offers. In "4+1" or "2+3" programs, at least 50% of the credits allocated for the master's degree – usually 15 of 30 – must be for courses designed for graduate work.)		
d. The institution adheres to policies on student academic load per term that reflect reasonable expectations for successful learning and course completion.		
e. Courses that carry academic credit toward college-level credentials have content and rigor appropriate to higher education.		
f. The institution has a process for ensuring that all courses transferred and applied toward degree requirements demonstrate equivalence with its own courses required for that degree or are of equivalent rigor.		
g. The institution has a clear policy on the maximum allowable credit for prior learning as a reasonable proportion of the credits required to complete the student's program. Credit awarded for prior learning is documented, evaluated, and appropriate for the level of degree awarded. (Note that this requirement does not apply to courses transferred from other institutions.)		
h. The institution maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor's degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any variation is explained and justified.		
2. Faculty Roles and Qualifications		
a. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process.		x
b. Instructors teaching at the doctoral level have a record of recognized scholarship, creative endeavor, or achievement in practice commensurate with doctoral expectations.		X (not applicable)

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B. Teaching and Learning: Quality, Resources, and Support	Met	Not Met[1]
c. Faculty participate substantially in: 1) oversight of the curriculum—its development and implementation, academic substance, currency, and relevance for internal and external constituencies; 2) assurance of consistency in the level and quality of instruction and in the expectations of student performance; 3) establishment of the academic qualifications for instructional personnel; 4) analysis of data and appropriate action of assessment of student learning and program completion.	x	
3. Support Services		
a. Financial aid advising clearly and comprehensively reviews students' eligibility for financial assistance and assists students in a full understanding of their debt and its consequences.	x	
b. The institution maintains timely and accurate transcript and records services.	x	
Rationale for Assumed Practices indicated as unmet: **In reviewing a sample (35) of faculty files, the visiting team noted that at least 3 faculty did not meet the HLC criteria. Further the institution has also made exceptions for the master's requirement based solely on the number of years faculty members have taught at Luna.**		

C. Teaching and Learning: Evaluation and Improvement	Met	Not Met[1]
1. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) have the authority for the assignment of grades. (This requirement allows for collective responsibility, as when a faculty committee has the authority to override a grade on appeal.)	x	
2. The institution refrains from the transcription of credit from other institutions or providers that it will not apply to its own programs.	x	
3. The institution has formal and current written agreements for managing any internships and clinical placements included in its programs.	x	
4. A predominantly or solely single-purpose institution in fields that require licensure for practice is also accredited by or is actively in the process of applying to a	x	

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[1] **Documenting the Unmet Assumed Practices**

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C. Teaching and Learning: Evaluation and Improvement	Met	Not Met[1]
recognized specialized accrediting agency for each field, if such agency exists.		
5. Instructors communicate course requirements to students through syllabi.	x	
6. Institutional data on assessment of student learning are accurate and address the full range of students who enroll.		x
7. Institutional data on student retention, persistence, and completion are accurate and address the full range of students who enroll.		x

Rationale for Assumed Practices indicated as unmet:

LCC inconsistently uses information to improve learning. While Luna is engaged in some assessment activities such as course grading and curriculum mapping from a common math final as well as licensing examination scores, documentation of assessment results has not resulted in the development of a campus culture of assessment.

Luna has set an aspirational goal to improve student retention by 10%. However, the most recent Fall to fall (-7%) and Fall to spring (-15%) retention shows declines in excess of 10%. This reality indicates that the current goal retention goal is unattainable or at least unrealistic. Although a number of retention activities have been implemented in fall 2017, the results of these initiatives are not yet available.

D. Resources, Planning, and Institutional Effectiveness	Met	Not Met[1]
1. The institution is able to meet its current financial obligations.	x	
2. The institution has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years.		
3. The institution has future financial projections addressing its long-term financial sustainability.		x
4. The institution maintains effective systems for collecting, analyzing, and using institutional information.		x
5. The institution undergoes an external audit by a certified public accountant or a public audit agency of its own financial and educational activities and maintains audited financial statements. For private institutions the audit is annual; for public institutions it is at least every two years.* *Institutions under federal control are exempted provided that they have other*	x	

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[1] **Documenting the Unmet Assumed Practices**

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D. Resources, Planning, and Institutional Effectiveness	Met	Not Met[1]
reliable information to document the institution's fiscal resources and management.		
6. The institution's administrative structure includes a chief executive officer, chief financial officer, and chief academic officer (titles may vary) with appropriate credentials and experience and sufficient focus on the institution to ensure appropriate leadership and oversight.	x	

Rationale for Assumed Practices indicated as unmet:

The adverse audit finding by the independent audit firm and the failure of the Foundation to provide any written or electronic documents related to its current financial status are evidence of insufficient financial accounting.

Enrollment projections fail to reflect Luna's actual experience, raising understandable questions about the budgeting practices of the college.

At the February 13, 2018 board meeting, the college addressed the Board with a report on enrollment. However, the visiting team found no evidence of Luna modifying its budget to meet the drastic change in enrollment versus projections.

Team Determination: *(Insert one of the following statements.)*

The team has reviewed all Assumed Practices within the Criteria for Accreditation and the institution meets all expectations.

The team has reviewed all Assumed Practices with the Criteria for Accreditation and has determined that the institution **does not meet the Assumed Practice(s) (listed below):**

A1, A4, B2a, B2b (not applicable), C6, C7, D3, D4.

Team Recommendation Related to the Assumed Practices:
(If the institution does not meet every Assumed Practice, the institution cannot be granted Candidacy or Initial Accreditation. If the institution is currently in Candidacy and fails to meet one or more Assumed Practices, then the team may determine if the Candidacy should be terminated or another course of action taken.)

Rationale for Team Recommendation Related to the Assumed Practices:

The visiting team documented evidence in their report to substantiate the above recommendations with regard to assumed practices not met. Applicable narrative from the report was provided as rationale for each affected assumed practice.

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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: Luna College

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: Randy Hyman

☒ I confirm that the Evaluation Team reviewed the findings provided in this worksheet.

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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:

        o Associate's degrees = 60 hours

        o Bachelor's degrees = 120 hours

        o 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 (insert appropriate reference).

Rationale:

The institution requires 30 semester credit hours for certificate programs and 60 semester credit hours for associate degree programs (Associate of Arts, Associate of Science, Associate of General Studies, and Associate of Applied Science). There are no differences in tuition for specific programs.

Additional monitoring, if any:

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

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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 institution has a systematic process for reviewing and addressing student complaints that includes multiple levels of review. The process is documented in the Student Handbook. The institution reviews complaints on a case-by-case basis and takes action as needed, however, it does not have a process for a more comprehensive review of complaints leading to potential improvements in teaching and learning. It is recommended that the institution develop a process to review complaints in an aggregate manner to determine any implications that extend beyond action taken related to an individual complaint.

Luna indicates that it has received 13 grievances since December, 2014. The institution provided information as to whether each complaint was resolved or unresolved. It is recommended that the institution expand its complaint tracking process to also record information on how the complaint was resolved.

While there is a student complaint process the institution does not track student complaints in a manner that records information on how a complaint is resolved. Further, Luna does not review aggregate student complaint data to determine if there are broader institutional issues

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beyond the individual complaint. Students were inconsistent in their knowledge of a student complaint procedure.

Additional monitoring, if any:

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

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reference).

Articulation agreements are appropriately disclosed. The institution has appropriate policies for transfer and they are published on the website. There is an appropriate process for making transfer decisions. The institution provided copies of forms that are used to approve credit transfer.

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:

The institution utilizes unique Student Identification Numbers and students must use this to log into the online course or email.

Luna charges a $25 per student distance learning fee that is disclosed in its policies and procedures manual.

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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.

      o **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.

      o **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.)

      o **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

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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.

- o **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.)

- o **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.

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☒ The Federal Compliance reviewer/evaluation team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion Five.

Rationale:

The audit results identify a significant number of financial concerns, including an adverse audit opinion: ""in our opinion, because of the significance of the matter discussed in the "Basis for Adverse Opinion" paragraph, the financial statements referred to above do not represent fairly the financial position of the College…" This adverse opinion is based on the fact that the financial statements do not include data regarding the financial state for the colleges legally separate component unit. Further, the audit shows an $11 million operating loss. As well, material weaknesses, significant deficiencies, and noncompliance materials were identified regarding the financial statements. Concerns were identified regarding non-compliance with the institution's procurement policy, non-compliance with policies regarding physical inventories, failure to conduct bank account reconciliation on a timely basis, and failure to collateralize the bank balance, and failure to provide financial data for the Foundation, non-compliance with institutional policies on scholarships, failure to file the Foundation annual corporate report to the commission of New Mexico for 2016. Although, the visiting team requested specific information about the Foundation while on site, the College has still not provided information on the financial data for the Foundation and policies on scholarships. There is inconsistent understanding of the web presence regarding current status of scholarships.

As a result of "multiple concerns noted during the preliminary review portion of the special audit NMHED is currently conducting at LCC" the institution is on enhanced fiscal oversight by the New Mexico Higher Education Department. Enhanced fiscal oversight requires a monthly financial review with NMHED and LCC. The review team noted that the institution currently lacks the appropriate processes to address these financial concerns.

Additionally, the default rate has increased to 27%. No comparisons are provided to peer institutions. The institution indicates that it coordinates with the New Mexico Student Loan Guarantee Corporation to assist in the reduction of future cohort rates. Luna has taken steps to reduce default rates. Their graduation clearance form now includes a check off for financial aid. Students are provided a print out from NSLDS with their loan information and contact information regarding repayment. Students may visit the financial aid office for exit counseling. Beginning this year, during graduation rehearsal, a third party representative will be available to meet with students for exit counseling.

The institution does not address the Department reviews of its composite ratio, as it indicates: "LCC is not required to have a composite ratio since these ratios apply to proprietary or private nonprofit schools." The review team confirmed that Luna's composite ratio is not a concern as it is above the benchmark. The Composite Financial Index (CFI) is an indicator of fiscal health. The baseline standard that defines a healthy institution is 3.0. The prior three year history for Luna shows rates ranging to a low of 3.4 and a most recent high of 7.4 as of June 30, 2016. The fiscal health of Luna is better than the baseline CFI requirement.

Financial aid information and the Satisfactory Academic Progress Policy is appropriately disclosed.

The institution does not have contractual or consortial agreements, as none were provided.

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The $11 million referred to is before the state appropriation, so is not a major issue. The budgeting issue though, is similar to what was raised in criterion 5A. As evidenced by the June 30, 2017 audit report and confirmed during meetings with the CFO, Luna's budget process should be enhanced. According to Statement 1-A, detailing the budget and actual revenue/expenses for Luna, there are wide discrepancies. Federal revenue sources and privates gifts, grants and contracts were budgeted at $6.3 million and $7.8 million, respectively. However, the actual federal revenue sources and private gifts, grants and contracts received were $2.7 million and $1.6 million, respectively, resulting in a total variance of $9.8 million. This is more than 38% of the original budget for Luna. On the expense side, the amount budgeted was $10.9 million more than actual (almost 41% of original budget). This $10.9 million included $2.0 million for instruction and general, $4.6 million for student aid, $3.8 million for capital outlays and $.5 million in other. This excessive overstating of budgets by 40% on average, is evidence the budgeting process needs enhancement.

From the information provided, it is not clear if the institution has appropriate procedures in place to address its financial deficiencies. The adverse audit finding by the independent audit firm and the failure of the Foundation to provide any written or electronic documents related to its current financial status, noted in criterion five, substantiates the concern raised in compliance review. In conversations with applicable Luna staff the review team observed little indication that employees or the Board of Trustees recognized the serious nature of these events. The adverse finding and the lack of any Foundation accounting documents indicates public awareness of insufficient financial accounting.

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:

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The institution publishes timely, accurate and appropriate information on its institutional programs, fees, policies and related required information. Luna has numerous policies and procedures associated with admissions, graduation, scheduling, and tuition and fees. It does not appear to have explicit procedures for ensuring that information provided on the website is accurate and timely. It is recommended that the institution develop such procedures.

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:

Accreditation information is posted and includes information where there are conditions on accreditation and is posted in the Luna Connection, on the website, and in the advertising materials provided. The advertising materials are appropriate.

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A communication plan has also been developed that outlines planned marketing strategies.

Additional monitoring, if any:

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 Four.

Rationale:

Luna requires all courses to submit an assessment report every semester describing the learning outcomes, assessment tools, results, and how the data will be used. The reports are presented at the end of the semester. A series of reports were provided. This process was initiated in 2009.

It is unclear clear how assessment occurs beyond the course level. For example, it is not clear how the institution draws conclusions at the program level or for the general education program. Faculty provide information in their reports about how data will be used to improve student learning, however, it is not clear how this information is used to make decisions about planning, academic program review, or other topics.

Recent specialized accreditation reports have also identified concerns associated with assessment:

   - ACBSP identified concerns associated with needing to collect more data regarding success at the business unit level and the need to clarify a formalized program review process.

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- CODA indicated that the program should demonstrate its effectiveness through a formal and ongoing planning and outcomes assessment process that is systematically documented and annually evaluated.

- ACEN assigned a rating of partially met on "a plan for curriculum and program evaluation shall be in place."

Luna does not use the College Scorecard. Scorecard results for Luna indicate that they fall below the national median in cost, graduation rate and salary after attending.

Additional monitoring, if any:

Beyond including intended uses of the assessment data in the reports, the institution does not appear to have processes in place to ensure student learning data are used to make decisions about academic planning, academic program review or other topics, nor does it have a process for reviewing the information from the College Scorecard.

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:

Luna publishes its course level assessment reports, specialized accreditation reports, and graduate satisfaction survey results online. The information is easily found on the website.

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It does not report on standard metrics including retention and persistence rates, graduation rates, enrollments, employment or continuing education rates, etc.

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:

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The institution is accredited by the Accreditation Council for Business Schools and Programs (ACBSP) and the National Automotive Technicians Education Foundation (NATEF). It is accredited with conditions with the Accreditation Commission for Education in Nursing (ACEN) and the approved with reporting requirements with the Commission on Dental Accreditation (CODA). It is part of the enhanced fiscal oversight program with the New Mexico Higher Education Department (NMHED). Its accreditation status with each of these organizations is appropriately disclosed on the website and in the materials provided.

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 institution provided appropriate notice of the opportunity for public comment.

Additional monitoring, if any:

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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 Four.

Rationale:

N/A

Additional monitoring, if any:

Institutional Materials Related to Federal Compliance Reviewed by the Team

Provide a list of materials reviewed here:

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Website:

- General Ed Core Corse Transfer Curriculum: http://www.hed.state.nm.us/institutions/general-ed-core-course-transfer-curriculum.aspx

- Homepage: https://www.luna.edu/

- Consumer information: https://www.luna.edu/

- Safety plan: https://luna.edu/safety_plan/

- Crime data: https://luna.edu/crime_data/

- Net Price Calculator: https://luna.edu/media/NetPriceCalculator/npcalc.htm

- Luna Connection

- Handbook: https://luna.edu/media/page_files/Student_Handbook_2018_Revised_1-29-18.pdf

- Course catalog: https://luna.edu/media/page_files/CATALOG2015-2018.pdf

- Admissions: https://luna.edu/admissions/

- Financial aid: https://luna.edu/financial-aid/

- Registrar's office: https://luna.edu/registrars/

- Tuition matrix: https://luna.edu/tuition_matrix/

- Gainful employment data: https://luna.edu/gainful_employment_data/

- Radio advertisement

- Student Outcomes Assessment: https://luna.edu/reports/

- Accreditation: https://luna.edu/program_accreditations/

Student handbook:

- Accreditation, page 7

- EEO policy, page 8

- Credit hour, page 28

- Payment of fees, page 34

- Tuition and fees, page 36

- Student code of conduct, page 46

- Satisfactory academic progress, page 49

- Sexual Harassment policy, page 64

- Grievance procedures, page 67

2015-18 Course Catalog

- Institutional accreditation, page 2

- Student codes and policies, page 4

- Academic and student support services, page 9

- Applying for admission, page 14

- Definition of a credit hour, page 20

- Transfer of credit, page 22

- Dropping/withdrawing from courses, page 27

- Transferring courses to fulfill New Mexico's general education common core curriculum, page 57

- New General education common core crosswalk, page 57

- Transfer discipline modules, page 64

- Programs of study, page 66

Spring 2018 Policies and Procedures

- Applying for admission, page 9

- Registration/activity and laboratory fees, page 11

- Refund policy, page 12

- Student education records, access and privacy, page 15

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Team Worksheet for Evaluating an Institution's Assignment of Credit Hours and Clock Hours

Institution Under Review: Luna Community College

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:

The institution has 16-week and 8-week terms during the fall and spring semesters, plus an 8-week summer term.

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:

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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

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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.)

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- 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

Associate of Arts:

- English 111E/111
- CJ111/01
- ECON209/01
- EDUC214E

Associate of Science:

- PSYC242
- STEM117
- Medical Terminology for Health Care Professionals

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- ENG115

Certificate Program

- CDL130L

- DENT167

- BAKE102

- DENT160

- A105/AH105L

Associate of General Studies

- Anthropology 103

- POLS151

- POLS151E

- Anthropology 221

Associate of Applied Science

- AUTO101

- NRSG1530

- PSY101

- PSY101DL

- MMC105

- VOC109

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:

The policy addresses lectures and lab courses. It also addresses compressed and summer courses, however, it is not specific about these requirements. The policy indicates: "summer courses and courses meeting for a shorter or longer period of time than a traditional 16-week course may require an adjustment of instruction time to meet the minimum required minutes." The policy does not contain enough detail to determine whether the requirements are met for summer or compressed courses. Further, the policy does not

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identify expectations for homework or out-of-class time nor address learning outcomes. Additionally, the credit hour policy does not address distance courses.

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:

The policy identifies the number of minutes of instructional time per credit hour but does not identify expectations for homework or out-of-class time.

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 indicates: "Summer courses and courses meeting for a shorter or longer period of time than a traditional 16-week course may require an adjustment of instruction time to meet the minimum required minutes," however, it does not specify intended learning outcomes.   The policy also does not address distance courses.

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:

The minutes allocated per credit hour are reasonable.

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

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Comments:

All course descriptions are appropriate. All syllabi meet the credit hour definition with one exception: Medical Terminology for Health Care Students is a 3-credit hour course that meets for 120 minutes per week for 16 weeks, and therefore has 640 minutes of instructional time per credit hour, which is less than the policy stipulates.

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:

The learning outcomes are appropriate to the courses and programs, however, the credit hour policy does not address learning outcomes.

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?

☐ Yes   ☒ No

Comments:

The course descriptions are appropriate. The credit hour policy is not specific enough regarding expectations for alternative delivery or compressed courses to determine if they are in compliance.

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?

☐ Yes   ☒ No

Comments:

The learning outcomes are appropriate to the courses and programs and are justifiable for students to fulfill in the time allocated. The credit hour policy does not directly establish expectations for learning outcomes for alternative-delivery courses.

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?

☒ Yes   ☐ No

Comments:

The institution's assignment of credit to courses aligns with commonly accepted practice.

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?

☒ Yes   ☐ No

Rationale:

The credit hour policy needs to be expanded to address expectations regarding out-of-class work, as well as to establish expectations for distance courses. It also needs to more specifically establish expectations for compressed courses, as the current policy only states the following: "summer courses and courses meeting for a shorter or longer period of time than a traditional 16-week course may require an adjustment of instruction time to meet the minimum required minutes."

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

A monitoring report should be submitted within 6 months that includes an updated version of the credit hour policy.

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:

Rationale:

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:

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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 <u>not</u> 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.

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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: