

**PIERPONT COMMUNITY & TECHNICAL COLLEGE  
BOARD OF GOVERNORS**

**Board of Governors Meeting**

**Tuesday, November 19, 2024  
2:00 PM**

**Pierpont's Advanced Technology Center (ATC)  
500 Galliher Drive  
Fairmont, WV 26554  
Room 216A**

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**MINUTES**

**Notice of Meeting**

A meeting of the Pierpont Community & Technical College (Pierpont) Board of Governors was held on November 19, 2024, beginning at 2:00 PM. The meeting was conducted in person at the Advanced Technology Center in Fairmont, WV. Advanced announcement of this meeting was posted on the WV Secretary of State's Meeting Notices Webpage.

**I. Call to Order**

David Hinke, Chair, called the meeting to order in open session at 2:00 PM.

**II. Conflict of Interest**

David Hinkle requested Board members to examine the agenda and disclose any potential conflicts of interest.

**III. Roll Call**

Amanda Hawkinberry conducted a roll call:

<b>Name</b>	<b>Present/Not Present</b>
Jessica Barker	Present
Dr. Susan Woods Coffindaffer	Present
Thomas Cole	Present
David Hinkle	Present
Anthony Hinton	Present
Lisa Lang	Present
Christine Miller	Present
Juanita Nickerson	Present
Jeffrey Powell	Present
Joanne Seasholtz	Present
Nathan Weese	Present

Amanda Hawkinberry announced there was a quorum present.

*Others Present:*

Members of President's Cabinet, faculty, staff, and others

**IV. Constituent Comments**

A. Faculty Senate

Anthony Anobile was unable to attend the meeting but provided the attached report from Faculty Senate (**Attachment A**).

B. Classified Staff

Mary Jo Rutherford offered the following comments from Classified Staff:

- Classified Staff Council met on September 25 and November 13.
- ACCE had their retreat over the summer and discussed upcoming PEIA changes.
- Over the summer, staff members participated in multiple training sessions focused on stress management, safety, suicide prevention, crisis protocols and de-escalation techniques.
- FanCloth fundraiser was tabled until Spring 2025.

C. Non-Classified Staff

Dr. Suzan Clemens offered the following comments from Non-Classified Staff:

- Regular meetings are held on the 4th Thursday of each month.
- The last meeting was on November 9, where Dr. Hayward answered general questions.
- As part of their service projects, non-classified staff are collaborating with departments to create a list of departmental contacts and job descriptions while also developing a Frequently Asked Questions (FAQ) list.
- Efforts are underway to create scholarships for students, faculty, and staff.

D. Student Government Association (SGA)

Jessica Barker offered the following comments from SGA:

- SGA held a meeting yesterday to finalize discuss last Friday's event, The Magic of Pierpont.
- Planning is underway for spring events, including a possible winter formal and a tour of West Virginia University (WVU).



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- A WVU representative attended the meeting to speak with SGA about potential opportunities to connect with students, including setting up an information table to discuss transfer options.

## V. Consent Agenda

Thomas Cole moved to accept the meeting minutes from the September 17, October 22, and November 7 Board meetings. Jeffrey Powell seconded the motion. All agreed. Motion carried.

## VI. Dr. Hayward's Reflections

Dr. Hayward expressed gratitude to all who helped plan *Your Community's College* week. Delegate Joe Statler attended the luncheon on Tuesday and presented the College with a Legislative Citation acknowledging the College for 50 Years of Service to the community and region.

Dr. Hayward and various College faculty and staff provided the following updates:

### A. Updates on New Programs

NC3 credentials launched over the summer, following the successful training of faculty to become certified trainers in approximately eight NC3 credentials. These credentials are now integrated into the curriculum and offered to students. Beginning in the spring, the college will also offer 20-25 standalone, industry-recognized NC3 credentials.

### B. Update on Randolph County Project

The Clinical Medical Assistant program, currently offered by Eastern Community and Technical College in partnership with the Randolph County Housing Authority will transition to Pierpont's responsibility in August 2025. The phased transition will begin with LPN prep courses in January 2025. The program will enroll 20 students per 15-week cohort, starting in August and February, with recruitment efforts focused on transitioning CNA students into LPN students. Program completers will be eligible to earn seven industry-recognized credentials.

### C. Update on Dual Enrollment

Efforts continue to build strong relationships with high schools, with 957 dual enrollment students across 13 service counties, equating to 330 FTE. Students are utilizing six state-funded pathways, with work underway to align high school CTE courses with Pierpont's coursework. Existing MOUs are being updated to meet the HEPC template, with only two counties pending.

At Fairmont Senior High School, 18 students dropped courses such as Psychology, Anatomy and Physiology, and Art Appreciation but retained others. Efforts are ongoing,



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led by Dave Beighley and Stephanie Cunningham, to align course-level outcomes with state core competencies. High school students were not negatively impacted by delays, as the \$75 fee was waived if MOUs were not signed on time.

**D. Update on Your Community's College Week**

Your Community's College Week featured a variety of activities showcasing Pierpont's engagement with the community. Highlights included a Day of Service on Monday, where faculty, staff, and students supported Veterans and Veteran organizations through service projects. Tuesday's Your Community's College Luncheon welcomed over 100 attendees to learn about Pierpont and its strategic direction. On Wednesday, the spotlight was on the diverse community education courses offered by the college. The week concluded on Friday with the Magic of Pierpont, a special event featuring performances by Anthem and Aria, which drew an audience of over 70 attendees.

**E. Status of AVMT Location and Building**

No update was provided.

**F. Status of University Agreements**

Pierpont is actively developing multiple academic pathway agreements to enhance student transfer opportunities with West Virginia University, Marshall University, and West Virginia University at Parkersburg. Additionally, the pathway from Pierpont's Surgical Technology program into the Health Sciences degree has been finalized, aligning with updated requirements for a two-year degree in Surgical Technology

**G. Review of Hiring Needs (Heath Sciences Administrative Assistant must be replaced ASAP to meet accreditation requirements)**

Offers are ready for two candidates.

**H. Status of HLC Compliance**

The Reaffirming Accreditation: Strategic Plan for HLC Assurance Visit and Report (**Attachment B**) was provided and briefly reviewed.

**I. Update on VR Grant Activities**

A \$1.5 million grant has been approved to establish a virtual reality (VR) lab to support immersive learning in programs such as Advanced Manufacturing, Aviation, and Healthcare. Room 115 has been designated for the lab, with infrastructure upgrades currently in progress. The grant also funds two new positions: a Virtual Lab Instruction Specialist to manage lab operations and assist faculty in integrating VR into the curriculum, and a Mobile Virtual Reality Specialist to provide mobile VR technology support to schools.

**VII. Academics and Student Services Committee**



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Thomas Cole reported there were no action items for Board approval. The committee heard informational items only.

**VIII. Marketing and Public Relations Committee**

Lisa Lang reported there were no action items for Board approval. The committee heard informational items only.

**IX. Finance and Administration Committee**

- A. Resolution for Approval – Acceptance of the Independent Auditor’s Report by Suttle & Stalnaker, PLLC of Pierpont Community & Technical College’s Finance Statement as of for the year ended June 30, 2024

Kelly Shaffer and Whitney Merrill of Suttle & Stalnaker, PLLC, presented the FY 2024 Audited Financial Statements to the Board. The complete detailed report and financial statements were provided to the Board members via email and during the meeting.

Anthony Hinton moved to accept the FY 2024 Audited Financial Statements as presented. Jessica Barker seconded the motion. All agreed. Motion carried.

**Recess**

Anthony Hinton moved to recess for five minutes. Christine Miller seconded the motion. All agreed. Motion carried.

**Returned to Open Session**

- B. FY 2024 Finance Statements Overview including FY 24 Composite Finance Index (CFI)

Dale Bradley presented the FY 2024 Financial Overview (Report provided in Agenda packet) and provided the following additional information:

This year’s cash position improved by approximately \$1.3 million, including \$304,000 in one-time supplemental state appropriations and \$306,000 awarded to students due to financial aid issues. The supplemental state funds are designated to offset PEIA costs for 2024 and 2025 and can only be used for operational expenses, not capital projects. The PEIA increase for 2024 is estimated at \$70,000–\$80,000, with a total cost nearing \$100,000 for the year.



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The Composite Financial Index (CFI) has been impacted in FY 2024 primarily due to a reduction in Non-Operating Revenues in FY 2024 compared to FY 2022 and FY 2023. Non-Operating Revenues in FY 2022 and 2023 included additional funding from the State of WV for capital improvements, CARES ACT funds received and HEPC payments on behalf which bolstered the CFI score in FY 2022 and FY 2023. A meeting between the Board and the HLC liaison to discuss the CFI will be scheduled at a later date.

**C. October 31, 2024, Combined Finance Report**

Dale Bradley presented the October 31 Combined Finance Report (Report provided in Agenda packet).

**D. Prioritized Expenditures of One-Time Supplement State Appropriation**

Dale Bradley presented the Prioritized Expenditures of One-Time Supplemental State Appropriation Report (Report provided in Agenda packet) and explained the process undertaken by the President's Council. The Council held several meetings to generate ideas for utilizing the funds, which were then prioritized and ranked based on importance.

Anthony Hinton suggested that the Board vote on the \$90,000 Banner upgrade expense at the next meeting and postpone decisions on other items until the CFI estimates are more finalized.

**E. Capital Projects Expenditure Report as of October 31, 2024, and Deferred Maintenance**

Dale Bradley reviewed the Capital Project Expenditure Report (Report provided in Agenda packet). The Vet Tech facility has not yet been closed out, as approximately \$72,500 in Contract retainage funds are being held until issues, such as a low spot in the waste line, are resolved. Pressurized toilets were installed last month to address the problem, and no issues have been reported since their installation. Deferred maintenance projects are expected to go out to bid at the beginning of the year.

**X. IT and Data Reporting Committee**

Jeffrey Powell reported there were no action items for Board approval. The committee heard informational items only.

**XI. Human Resources, Bylaws, Policies Committee**

Thomas Cole reported there were no action items for Board approval. The committee heard informational items only.



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## **XII. Committee of the Whole**

### **A. Rules Governing Executive Session**

George Perich briefly reviewed a PowerPoint presentation on the rules governing executive sessions. Chairman Hinkle emphasized that if Board of Governors members discuss confidential matters outside of executive session, they may not be invited to participate in future executive sessions.

## **XIII. Executive Session – Closed Session**

### **A. Entering Executive Session – Closed Session**

Christine Miller moved that the Board go into Executive Session in accordance with WV Code §6-9A-4. Lisa Lang seconded the motion. All agreed. Motion Carried.

Items brought into Executive Session:

1. A&P Building
2. Review, Discuss, and Approve Reassignment of Employee Duties
3. Review, Discuss, and Approve Ongoing Evaluations of Employees
4. Review, Discuss and Approve Reassignment of Board of Governor Duties

### **B. Exiting Executive Session – Back to Open Session**

Thomas Cole moved to exit Executive Session and return to Open Session. Lisa Lang seconded the motion. All agreed. Motion carried.

### **C. Items brought forward from Executive Session**

The Board will hold a Special Meeting on December 5 at 1:00 PM.

## **XIV. Adjournment**

There being no further business, Anthony Hinton moved to adjourn the meeting. Juanita Nickerson seconded the motion. All agreed. Motion carried.

*Respectfully submitted by Amanda N. Hawkinberry*



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## MEMORANDUM

**To:** Pierpont Community and Technical College Board of Governors

**From:** Anthony Anobile, Faculty Senate President

**Date:** November 19, 2024

**Subject:** Faculty Senate Report

The following consists of the 2024-25 operational report for the Faculty Senate of Pierpont Community and Technical College. In addition to routine operational duties, the Faculty Senate completed action on the following from September 17, 2024- November 18, 2024:

- **Committee on Committees**

The Faculty Senate President appointed (1) faculty member from each school to work on the Committee on Committees on November 8<sup>th</sup>, 2024. This committee will begin soliciting committee preferences and filling all faculty standing and non-standing committee positions for the 2025-2026 academic school year starting in early Spring 2025.

- **Faculty Development and Welfare Committee**

Faculty Senates Faculty Development and Welfare Committee is working with Provost Michael Waide to capture and maximize the most important subjects for faculty during Professional Development Week before students return for the Spring semester.

- **General Education Committee**

The Faculty Senate approved changing technical Literacy to Digital Literacy.  
The Faculty Senate approved the Digital Literacy Rubric

- **Curriculum Proposals**

The Faculty Senate approved Proposal PHTA 1105, Kinesiology, Course Change Form – Modifies course prerequisites. Modifies course objectives.

The Faculty Senate approved Proposal PHTA 2204, Clinical Education III, Course Change Form – Reduces credit hours from 3 to 2. Modifies course prerequisites.

- **Announcements and Upcoming Dates**

December 5<sup>th</sup>, 2024 – Faculty Senate Executive Committee Meeting  
December 13<sup>th</sup>, 2024 - Pierpont Faculty Senate meeting - Caperton Center.  
December 13<sup>th</sup>, 2024 – Last Day of Fall Semester  
December 16<sup>th</sup>, 2024 – Final Grades Due

## Reaffirming Accreditation: Strategic Plan for HLC Assurance Visit and Report

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### *Background*

On **June 27, 2024**, the Higher Learning Commission (HLC) Board of Trustees placed Pierpont Community and Technical College on **Notice**, following a comprehensive evaluation. While reaffirming the institution's accreditation, HLC identified significant concerns across several Core Components of the Criteria for Accreditation, indicating that the institution is at risk of noncompliance. The Notice period requires immediate institutional improvements and proactive measures to address these concerns.

### *Summary of Concerns*

The HLC Board found that Pierpont Community and Technical College meets the following Core Components **with concerns**:

1. **Criterion 2.C – Board Governance:**

- The Board of Governors has not yet adopted a strategic plan.
- Transparency in Board actions is insufficient, as reflected in meeting minutes.
- Concerns about the delegation of day-to-day management and decision-making in the best interest of the institution.

2. **Criterion 3.C – Faculty and Staff:**

- Faculty and staff shortages remain unaddressed, hindering the delivery of effective and high-quality programs and services.

3. **Criterion 4.B – Assessment of Student Learning:**

- Cocurricular assessment processes are underdeveloped, with unclear distinctions between cocurricular and extracurricular activities.

4. **Criterion 4.C – Retention, Persistence, and Completion:**

- Goals for retention are vague, and actionable strategies are not fully developed.
- Systems for disaggregating data to inform improvement efforts are lacking.

5. **Criterion 5.A – Institutional Effectiveness:**

- The lack of a permanent institutional effectiveness professional has delayed data collection and planning.
- The institution operates without an approved strategic plan.

6. **Criterion 5.B – Resource Base:**

- Financial health improvements are ongoing but remain in transition.
- Enrollment initiatives are in progress but require time to demonstrate measurable outcomes.



## 7. **Criterion 5.C – Integrated Planning:**

- The new inclusive budgeting process is still developing.
- Debt repayment priorities limit the institution's ability to expand staffing, professional development, and operational reserves.

### ***HLC Expectations***

To resolve these concerns, the institution must:

1. Submit a **Notice Report** at least eight weeks before the September 2025 Notice Visit, providing evidence of progress.
2. Host a **Notice Visit** by September 2025 to evaluate whether the institution has addressed the concerns effectively.
3. Participate in a **Board Review** in June 2026 to determine if Notice can be removed or if further actions, up to withdrawal of accreditation, are necessary.

### ***Next Steps***

This project plan outlines the steps Pierpont Community and Technical College will take to:

- Address HLC's concerns.
- Demonstrate compliance with the Criteria for Accreditation.
- Position the institution for a successful outcome at the June 2026 Board Review.

## **Aligning Institutional Improvement Efforts with HLC's Revised Sept 1, 2025, Criteria**

Pierpont Community and Technical College is committed to addressing the Higher Learning Commission's (HLC) identified concerns through a strategic, evidence-based approach that not only ensures compliance with accreditation standards but also advances our institutional goals. This project plan is designed to strengthen governance, improve academic quality, and enhance resource sustainability while aligning with our mission to foster student success and lifelong learning opportunities.

The revised 2025 HLC Criteria serve as a framework for this plan, emphasizing mission-driven practices, continuous improvement, and institutional accountability. Through this process, Pierpont aims to not only resolve the concerns outlined during the Notice period but also position the college for long-term growth and success. Our efforts will focus on leveraging this opportunity to build a stronger, more sustainable institution that delivers exceptional value to our students, faculty, and the communities we serve.

### ***Criterion 2: Integrity: Ethical and Responsible Conduct***

This criterion emphasizes governance, transparency, and adherence to ethical policies and procedures.

#### **Relevant Core Components from Revised HLC Criteria**

- **2.A. Integrity:** Actions by governing bodies must adhere to policies and procedures.
- **2.B. Transparency:** Accurate and complete communication with students and the public.
- **2.C. Board Governance:** The Board must act autonomously and, in the institution's best interest.

#### **Institutional Challenges**

- Lack of Board transparency (e.g., inadequate meeting minutes).
- The absence of a strategic plan adopted by the Board.
- Concerns about Board involvement in day-to-day operations, particularly regarding new initiatives (e.g., the aviation center).
  - On-boarding and orientation process for new board members.
  - Information about professional development and training for board members.
  - Agendas and minutes of governing board demonstrating knowledge and oversight of finances and academic functions.
  - Disclosure (and relevant documentation) of superordinate entity or operational partners, as applicable.

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### ***Criterion 3: Teaching and Learning for Student Success***

This criterion highlights the importance of maintaining program quality, sufficient staffing, and effective student support.

- **Relevant Core Components from Revised HLC Criteria**
- **3.C. Sufficiency of Faculty and Staff:** Adequate staffing for high-quality programs and services.
- **3.E. Assessment of Student Learning:** Use assessment to enhance educational quality.



- **3.G. Student Success Outcomes:** Focus on continuous improvement in student retention and success.

#### **Institutional Challenges**

- Faculty and staff shortages impacting program delivery (3.C).
  - Underdeveloped cocurricular assessment processes (3.E).
  - Vague retention goals and lack of actionable strategies (3.G).
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#### ***Criterion 4: Sustainability: Institutional Effectiveness, Resources, and Planning***

This criterion focuses on resource allocation, planning, and long-term institutional sustainability.

#### **Relevant Core Components from Revised HLC Criteria**

- **4.A. Effective Administrative Structures:** Data-informed decision-making and shared governance.
- **4.B. Resource Base and Sustainability:** Financial stability and alignment of resources with institutional priorities.
- **4.C. Planning for Quality Improvement:** Strategic planning for continuous improvement using data.

#### **Institutional Challenges**

- The institution lacks an approved strategic plan to guide decision-making (4.C).
  - Financial challenges, including debt repayment and limited reserves, impact operations (4.B).
  - Ineffective data systems for tracking institutional operations and outcomes (4.A).
- 

#### **Summary**

This strategic plan is more than a roadmap to address the HLC's identified concerns; it is a pathway to achieving Pierpont's broader goals of enhancing institutional effectiveness, fostering student success, and ensuring long-term sustainability. By integrating the revised 2025 HLC Criteria into our improvement efforts, we are reinforcing our commitment to high-quality education, ethical governance, and data-informed decision-making.

As Pierpont addresses key areas such as board governance, faculty and staff sufficiency, and strategic planning, we are creating a foundation for continuous improvement that will support our mission and vision far beyond the Notice period. This plan reflects our dedication to building a future-ready institution that not only meets accreditation standards but also exceeds expectations in serving our students and community.

## HLC Project Plan:

### December 2024 Review of Previous Reports and Improvement Areas

*Review the previous HLC report findings, address institutional improvement areas identified in the last review, and prepare to integrate feedback and guidance from the HLC consultant into the updated response framework.*

#### *Suggested Actions:*

1. **Set Meeting with the HLC Consultant:** Schedule a formal meeting to review the consultant's insights and guidance on the revised 2025 Criteria.
2. **Review Previous Reports:** Analyze the findings from the prior HLC review to identify critical areas requiring updates or new supporting evidence.
3. **Develop a Comparison Framework:** Create a matrix that aligns past findings with actions taken and aligns with the new criteria structure.
4. **Begin Gathering Documentation:** Compile supporting evidence showing improvements in the identified areas since the last report.
5. **Facilitate Internal Discussions:** Host team discussions to review institutional improvements, solicit feedback, and brainstorm content for the upcoming report.
6. **Draft Narrative Sections:** Begin drafting the January section narrative, ensuring integration of HLC consultant feedback and supporting evidence.

**Key Team Members:** President, Exec. Assistant to President, Chief Academic Officer, Chief Financial Officer, and ALO

## January 2025 Criterion 2.C (now “Board Governance” & Assumed Practices A.11-12)

*2.C. In discharging its fiduciary duties, the institution’s governing board is free from undue external influence and empowered to act in the best interests of the institution, including the students it serves.*

*Suggested examples of evidence for the crafting of a report:*

- Board manual, policies and bylaws, such as a conflict-of-interest policy; documentation of board members’ receipt/completion of current documents.
- Board approval of planning and budgeting documents.
- Information about board selection of, evaluation of, and right to terminate the president of institution.
- Documentation of the selection process for board members and for selection of chair, vice chair and other officers.
- Evidence of consideration of board composition, membership and ad hoc committee structure.
- List and bios of board members.
- Dates, agendas and minutes of board meetings and other relevant engagement with campus members for multiple years.
- On-boarding and orientation process for new board members.
- Information about professional development and training for board members.
- Agendas and minutes of governing board demonstrating knowledge and oversight of finances and academic functions.
- Disclosure (and relevant documentation) of superordinate entity or operational partners, as applicable.

**Key Team Members:** Executive Committee of the Board, President, Exec. Assistant to President, VP for HR and Organizational Development, and ALO

### **Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month.
5. Draft a 3–4 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section’s narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President’s Cabinet for review and feedback.

**February 2025 Criteria 3.C (now 3.C “Sufficiency of Faculty and Staff” and Assumed Practices B.4)**

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

*Suggested examples of evidence for the crafting of a report:*

- Policy and procedural documents indicating how faculty qualifications are determined and monitored.
- Student-to-faculty ratio (overall, on-ground, online).
- Evidence that staff and faculty are sufficient to deliver educational experience, according to its mission.
- Summary of qualifications of Student Affairs staff.
- Student-to-staff ratio in direct service areas, as applicable.
- Documentation of professional development and training opportunities for staff and faculty, including support for instructional design.
- Sabbatical policy and how it contributes to high quality programs.
- Guidelines and processes for hiring faculty (such as full-time, part-time, adjunct, online) that are in compliance with HLC’s and specialized accreditors’ requirements, as appropriate.
- Faculty and staff professional development plans and annual evaluations.
- Orientation program for all faculty (includes full-time, part-time, adjunct, online, dual credit) and staff.

**Key Team Members:** Provost, Associate Provost, Deans, VP for HR (or designee), Faculty Senate Executive Committee, ALO

**Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month.
5. Draft 3–4 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section’s narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President’s Cabinet for review and feedback.



**March 2025 Criteria 4.B (now 3.E. “Assessment of Student Learning”)**

*3.E. The institution improves the quality of educational programs based on its assessment of student learning.*

*Suggested examples of evidence for the crafting of a report:*

- Meeting minutes and agendas demonstrating departmental use of assessment data, with evidence of action taken based on review and analysis of data. Such sources may include minutes from faculty senate, assessment committees, and department meetings.
- Evidence that assessment tools are being used, such as curriculum maps, rubrics, internal or external benchmarking, student work products, and employer/graduate school data.
- General education and course-, program- and institutional-level learning goals (as applicable) and outcomes.
- Annual reports of the assessment process.
- Stated expectations of faculty involvement in assessment of student learning.
- Documentation of co-curricular assessment, if applicable, and improvements based on data.
- Assessment plan and/or process and calendar/cycle.
- Documents and reports using direct measures for assessment of student learning.

**Key Team Members:** Provost, Associate Provost, Deans, Director of Institutional Research, AVP of Student Services, General Education Committee Chair, ALO

**Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month.
5. Draft 5-7 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section’s narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President’s Cabinet for review and feedback.

**April 2025      Criteria 4.C (now 3.G “Student Success Outcomes”)**

*3.G. The institution’s student success outcomes demonstrate continuous improvement, taking into account the student populations it serves and benchmarks that reference peer institutions.*

*Suggested examples of evidence for the crafting of a report:*

- Benchmarking with peer institutions relative to common data points such as graduation, persistence, retention, completion and transfer.
- Licensure or certification exam data.
- Data on where students go after graduation, such as continuing education, job placement rates, admission rates to advanced degree programs, and participation rates in fellowships, internships and special programs (e.g., Peace Corps and AmeriCorps).
- Collection and analyses of economic information related to graduate earnings, loan debt, and field(s) of employment over time.
- Surveys of alumni.
- State degree requirements and evidence of compliance.
- Results related to participation in Federal, state, or privately funded initiatives related to persistence, completion, and retention.

**Key Team Members:** Associate Provost for Student Learning, Registrar, Executive Director for Admissions/Recruiting, AVP for Student Services, ALO

**Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month.
5. Draft 5-7 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section’s narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President’s Cabinet for review and feedback.

Criteria 5.B (now 4.B “Resource Base and Sustainability & Assumed Practices D.2)

*4.A. The institution’s administrative structures are effective and facilitate collaborative processes such as shared governance; data-informed decision making; and engagement with internal and external constituencies as appropriate.*

*Suggested examples of evidence for the crafting of a report:*

- List of campus committees and teams participating in collaborative planning processes, such as faculty senate, assessment committee, general education committee, strategic planning committee, budget committee, policy advisory group, and/or library committee, with descriptions of their roles in such processes.
- Bylaws, policies, procedures and schedules for the institution’s faculty or university senate, student government association, staff senate or council, and governing board.
- Documentation outlining the institution’s organizational structure.
- Resolutions and meeting minutes of different constituent groups.
- Evidence of institutional action based on review of data.
- Evidence of the institution’s engagement with community, non-institutional entities and local organizations. Examples might include public transportation, partnerships with local law enforcement, and support for local nonprofit organizations.

**Key Team Members:** Director of Institutional Research/Effectiveness, VP for HR and Organizational Development, Foundation Director, Executive Assistant to the President/BOG, Faculty Senate President, Classified Staff or Nonclassified Staff Chair, ALO

**Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month (target: May 30).
5. Draft 3-4 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section’s narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President’s Cabinet for review and feedback.

*4.B. The institution’s financial and personnel resources effectively support its current operations. The institution’s financial management balances short-term needs with long-term commitments and ensures its ongoing sustainability.*

- Suggested examples of evidence for the crafting of a report:
- Independent audited financial statements and Composite Financial Index patterns for multiple years.
- Documentation of investments in facilities and technology, including deferred maintenance.
- Campus master plan including additions and deferred maintenance.
- Documentation of strategic plan investments.
- Budget requests and procedures delineating flow of decision making.
- Projected budgets/pro forma budgets.
- Compliance with bank covenants and lines of credit.



- Endowment drawdown policy (and explanations of any anomalies during a review period).
- Process for monitoring expenses.
- Mission statement and activities of institution's foundation or advancement office, as relevant to the support of facilities and educational programs.
- Fundraising documentation and results.
- Enrollment plan, current enrollment and enrollment projections.
- Evidence of allocation of budget for instruction, strategic plan, mission, professional development and similar priorities.
- Duration and amount of grants received by the institution.
- Evidence of the alignment of planning initiatives with current educational programs, such as facilities planning, budget processes, and advancement initiatives.
- Collective bargaining agreement(s), if any.
- Investment policy and documentation demonstrating compliance.
- Internal budget control policies.
- Bond rating since last comprehensive evaluation or Assurance Review, if available.
- Information about training and professional development for faculty and staff.

**Key Team Members:** BOG Finance Committee Chair, CFO, Business/Finance team member, Director of Institutional Research/Effectiveness, CIO, ALO

**Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month (target: June 15).
5. Draft 5-7 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section's narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President's Cabinet for review and feedback.

**June 2025      Criteria 5.C (now 4.C “Planning for Quality Improvement”)**

*The institution engages in systematic strategic planning for quality improvement. It relies on data, integrating its insights from enrollment forecasts, financial capacity, student learning assessment, institutional operations and the external environment.*

*Suggested examples of evidence for the crafting of a report:*

- History and process of strategic plan creation and constituencies involved in such activities.
- Annual updates to strategic plan; status of action plans.
- Budget requests and procedure for budget planning.
- Budget allocation by major area.
- Budget projections for multiple years.
- Enrollment management plan.
- Environmental scan results.
- Evidence of resources used to aid in planning activities, such as state reports on demographics, industry/vocational employment demands, and market analyses.
- Facilities and technology plans.
- Evidence of attainment of strategic planning goals.
- Documentation delineating linkage between planning, budgeting and evaluation/assessment.
- Student success data and reports.
- Documentation of institutional effectiveness plans and strategies, including goals and measurable outcomes for identified functional areas.
- Student learning and academic program assessment documentation.
- Documentation regarding assessments of student satisfaction with facilities, libraries, technology, human resources, security, and other services (e.g., counseling, student activities, parking, for example).
- Key performance indicators/dashboard.
- Meeting minutes, agendas and/or task lists indicating review and analysis of data to inform improvements of operational activities (e.g., counseling, information technology, parking, student activities).
- Current rates of and goals for institutional persistence, retention and completion data and reports (include the institution’s definitions of these terms), documentation of a consortium for student retention data exchange, analysis of graduation and retention rates by distinctive student populations (e.g., age, gender, race, ethnicity, first-generation status).
- Strategies or initiatives implemented based on review and analysis of data to make improvements in persistence, retention and completion, such as agendas, meeting minutes and action items of units working in these areas.
- Information about the effectiveness of the institution’s student success center.
- Documentation of utilization of datasets to make improvements.
- Documentation of campus services to support student needs (e.g., writing skills, math tutoring, study skills, time management)
- Analysis of and actions based on suspension and probation trends, DFW rates and tracking in sequenced courses, effects of add/drop and withdrawal policies on student success.
- Analysis of student success based on academic preparation and financial well-being and various demographics.
- Student advising procedures and policies.
- Student exit survey results and action taken to address concerns as applicable

**Key Team Members:** Provost, Associate Provost for Student Learning, Director of Institutional Research/Effectiveness, CFO or Business/Finance team member, AVP for Student Services, Registrar, Executive Director for Admissions/Recruiting, ALO

**Actions:**

1. Set a discussion time with team members to solicit input and feedback on the suggested evidence.
2. Craft an outline for the section
3. Designate a content writer(s)
4. Create a working timeline with deadlines for the month (target: June 30).
5. Draft 5-7 pages of narrative.
6. Gather and link supporting evidence or documentation for substantive claims.
7. Distribute the section's narrative to the key team members for internal peer review and suggestions.
8. Submit the section to the President's Cabinet for review and feedback.

**July 1—15, 2025**

A working group proofreads all parts of the report and contributes suggestions for filling in any gaps.

**July 15-20, 2025**

The full report goes to the President and Cabinet for final review and approval.

**July 21, 2025**

Final submission uploaded and locked; the HLC-imposed submission date is **July 21, 2025**.

**Following the submission of the report, Pierpont will begin hosting learning sessions and mock interviews with select identified stakeholders****Mock Interviews for Internal Stakeholders**

- July 25: Lunch & Learn: Overview of Report and Process
- August 1: Mock Interviews: Sufficiency of faculty and staff (3.C)
- August 8: Mock Interviews: Assessment of student learning (3.E)
- August 15: Mock Interviews: Assessment of student learning (3.E)
- August 22: Mock Interviews: Student success outcomes (3.G)
- August 29: Mock Interviews: Effective administrative structures (4.A) and Resource base & Sustainability (4.B)
- September 5: Mock Interviews: Planning for quality improvement (4.C)
- September 12: Mock Interviews: Sufficient Board Autonomy (BOG members) (2.C)

**On-site Visit: September 15-16, 2025**

- Site team present on campus; agenda of meetings with identified Pierpont team members and Board members forthcoming in Spring 2025

**June 2026: HLC Board of Trustees (Determination of Compliance)**