

QUALITY CHECKUP REPORT

Pulaski Technical College

Little Rock, Arkansas
October 10-12, 2012

Quality Checkup team members:

Team Member

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Background on Quality Checkups conducted by the Academic Quality Improvement

Program

The Higher Learning Commission's Academic Quality Improvement Program (AQIP) conducts Quality Checkup site visits to each institution during the fifth or sixth year in every seven-year cycle of AQIP participation. These visits are conducted by trained, experienced AQIP Reviewers to determine whether the institution continues to meet The Higher Learning Commission's *Criteria for Accreditation*, and whether it is using quality management principles and building a culture of continuous improvement as participation in the Academic Quality Improvement Program (AQIP) requires. The goals of an AQIP Quality Checkup are to:

1. Affirm the accuracy of the organization's online Systems Portfolio and verify information included in the portfolio that the last Systems Appraisal has identified as needing clarification or verification (System Portfolio Clarification and Verification), including review of distance delivery and distributed education if the institution is so engaged.
2. Review with organizational leaders actions taken to capitalize on the strategic issues and opportunities for improvement identified by the last Systems Appraisal (Systems Appraisal Follow Up);
3. Alert the organization to areas that need its attention prior to Reaffirmation of Accreditation, and reassure it concerning areas that have been covered adequately (Accreditation Issues Follow Up);
4. Verify federal compliance issues such as default rates, complaints, USDE interactions and program reviews, etc. (Federal Compliance Review); and
5. Assure continuing organizational quality improvement commitment through presentations, meetings, or sessions that clarify AQIP and Commission accreditation work (Organizational Quality Commitment).

The AQIP peer reviewer(s) trained for this role prepare for the visit by reviewing relevant organizational and AQIP file materials, particularly the organization's last *Systems Appraisal Feedback Report* and the Commission's internal *Organizational Profile*, which summarizes information reported by the institution in its *Annual Institutional Data Update*. The report provided to AQIP by the institution is also shared with the evaluator(s). Copies of the Quality Checkup report are provided to the institution's CEO and AQIP liaison. The Commission retains a copy in the institution's permanent file, and will be part of the materials reviewed by the AQIP Review Panel during Reaffirmation of Accreditation.

Clarification and verification of contents of the institution's *Systems Portfolio*

The Team reviewed the Systems Portfolio, the Systems Appraisal Feedback Report, and the Quality Summary Report before arriving for the Quality Checkup visit to gain an understanding of the institution and its quality improvement endeavors. During the visit, the Team verified and clarified the contents of the Systems Portfolio by meeting with the new President, Provost, Vice President for Learning, Board members, the President's Executive Council (PEC), various cross-functional committees, and groups of faculty, staff, and students.

Employees who met with the Team demonstrated familiarity with the Portfolio and its contents and confirmed the information it contained. The employees also agreed that the feedback provided in the Appraisal is accurate and based on information provided in the Portfolio. The PEC, in particular, said the feedback in the Appraisal with respect to assessment of student learning outcomes and the dearth of results data is accurate. Employees expressed concern about having only a couple of weeks before the Quality Checkup Visit to address the opportunities in the Appraisal. The accelerated nature of the Appraisal and the Quality Checkup Visit has given the institution little time to process the information received; however, the leadership at PTC has expressed a willingness to move forward with a thorough review that allows them to begin addressing opportunities identified by the Systems Appraisal.

In addition to discussions about the Strategic Issues noted below, as well as review of effective practices, the Team focused discussions with campus groups in two broad areas: Valuing People (Category Four) and Communication (Category Five). Within these broad areas, the Team and PTC employees agreed that such human resource processes as employee evaluation and technical infrastructure processes related to the student database are of primary concern and need systematic improvement. These issues were placed in the context of PTC's history. PTC is a fairly "young" institution, having been accredited in 1997. Because of the rapid growth in enrollment in the last decade, the institution responded quickly to human resource and technical needs, often without adequate processes and procedures in place to support the decision making. All groups of employees noted, however, that the new leadership—President and Provost—have already begun to improve the campus climate by holding open meetings for all employees, and by meeting on a weekly basis with Faculty Senate leaders. The Quality Checkup Team was impressed by the President's and Provost's genuine commitment to opening communication channels and to improving the college culture. The Team also noted a high level of enthusiasm and commitment among employees to student success and a desire to make PTC a better community college.

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with the Commission's standards and AQIP's expectations.

Review of the organization's quality assurance oversight of its distance education activities.

The Team met with the Director of Distance Learning and Instructional Technology Support, the Vice President of Learning, and the Director of Institutional Research, Planning and Effectiveness to discuss distance learning issues. PTC offers a wide range of online courses and some online programs, and has been approved under Commission policy to offer up to 100% of its total degree programs through distance education. The Quality Checkup Team reviewed some online course syllabi and determined that the online courses carry the same credit hours, learning outcomes, and workload expectations of students as courses on ground.

The institution employs the latest version of Blackboard as its LMS and contracts with Blackboard to host the server. PTC also uses Blackboard Collaborate/Wimba and Panopto lecture capture. Through Blackboard, the institution provides 24-hour technical support for faculty and students. Students, staff, and faculty commented that Blackboard often "goes down," but according to PEC, greater band-width capacity will be available in the Little Rock area within the next year which will minimize such "crashes."

To prepare new faculty for teaching online, PTC requires a six-hour boot camp training session. A default shell is used for development of courses, but PTC acknowledges the need to create a process for course approval, and a process for quality assurance. Students are provided the opportunity to evaluate online courses every semester, but PTC recognizes that a more systematic and rigorous quality assurance process would promote greater consistency across the online curriculum. The Team urges PTC to pursue one of the nationally-recognized programs to promote quality in a uniform way.

Two full-time employees report to the Director of Distance Learning and Instructional Technology Support, one a Blackboard administrator, the other a certified Blackboard trainer. The State of Arkansas controls staffing levels and staffing requests at public institutions, so PTC follows appropriate State procedures to request new staff positions. PTC has requested from the State two additional positions to support online learning, an instructional designer and an instructional technologist. During the Quality Checkup, PTC employee groups expressed concern, however, that many times positions are not filled for years because of State budgetary constraints. PTC should be commended for its persistence in requesting new staff positions that are necessary to ensure a quality online program.

In the team's judgment, the institution has presented satisfactory evidence that its distance education activities are acceptable and comply with the Commission's standards and expectations.

**Review of the organization's quality assurance and oversight of distributed education
(multiple campuses, additional locations, off-campus course sites)**

PTC has five additional locations (no campuses): Little Rock (Baptist Health Schools Little Rock (partnership); Little Rock (Little Rock-West site); Little Rock (Pulaski Technical College Little Rock—South Site); Little Rock (St. Vincent Infirmiry Medical Center); North Little Rock (Aviation Maintenance Technology Center).

Representatives of PTC locations attended sessions during the Quality Checkup visit. Team members learned that each PTC location is unique in the kinds of programs and services offered. As an example, the Aerospace Technology Center in North Little Rock is the location for students in the aviation programs which train students for FAA certification, so learning outcomes are standardized and rigorous. The location is an FAA/FCC-approved federal testing center. While day and evening courses are offered, the site does not offer full support services and general education courses.

Likewise, the Pulaski Technical College Arkansas Culinary School at Little Rock-South is dedicated solely to culinary arts courses in programs, and the Transportation Technology Center offers transportation programs. Faculty have offices at the Little Rock-South site, and food services, a library, and tutoring services are available to students. Students can also take some general education and developmental education courses at this location.

Little Rock-West offers day and evening courses in a wide range of courses in Fine Arts, English, business, education, health sciences, humanities, social sciences, developmental education, and math and sciences. Eight full-time faculty members are located at this site, as well as some adjuncts, and a student services representative.

Indications are that faculty at the South and West locations are well-integrated into the culture of PTC and participate in such processes as assessment of student learning outcomes and serve on college-wide committees to ensure that consistent expectations of quality are met. As noted by the new President, communication between these locations and the main campus is effective, and employees at these locations do not appear to experience the same perceived communication challenges as do groups of employees at the main location.

Other PTC locations include the Business and Industry Center which offers customized training in response to the needs of Arkansas business and industry. The Saline County Career Center offers secondary career programs for high school students, and the Saline County Adult Education Center offers GED preparation, basic skills, ESL, and computer literacy programs.

PTC has a substantial presence in Little Rock and is much respected. The State of Arkansas's oversight of public institutions provides guidelines for consistency of course and program delivery and

credentialing and staffing of faculty. As such, a “one college” culture is evident even though the distributed education at PTC is significant.

The team determined that the institution has presented satisfactory evidence that its distributed education is acceptable and complies with Commission’s standards and expectations.

Review of specific accreditation issues identified by the institution’s last Systems Appraisal

The Systems Appraisal Process did not identify accreditation issues. The site team concurred and finds no accreditation issues for PTC.

Review of the institution’s approach to capitalizing on recommendations identified by its last Systems Appraisal in the Strategic Issues Analysis.

The Team discussed the following Strategic Issues with the President Executive Council, faculty, and staff:

1. All AQIP Categories: Lack of Results Data and Improvement Based on Analysis of Results.

While it became evident in review of documents and information shared during the Quality Checkup visit that PTC faculty and staff have been collecting a range of data for many years, the institution lacks a systematic, centralized process for collecting and collating the data, and a systematic process for analyzing the data and making improvements based on analysis. This was most obvious in PTC’s Portfolio, which contained almost no results data (R sections of the Categories) but only narrative explanations. PTC also lacks a central communication process for sharing results.

In the Team’s discussions with employees, there was general agreement about the need for key summary reports presented with visuals, made available in a centralized place, easily accessible to all employees at the institution. Various groups of employees commented on the “silos” at PTC, and of the difficulty of accessing information through the current student database. There were also comments about the need for support in analyzing data when it is obtained. With the creation of the new Quality Council, which will act as the central coordinating point for quality initiatives, and with the newly-appointed Director of Institutional Research, Planning and Effectiveness, PTC will be able to move forward more deliberately with a plan for identifying key metrics (determining which data are most important to collect, analyze, and share), and then a plan for communicating results, analysis, and improvements.

The President (who had been at PTC for only seven weeks at the time of the Quality Checkup) noted that the institution will be establishing key performance indicators (KPIs) and a dashboard to track the institution's progress in meeting its goals. The activity of developing the KPIs and the dashboard will certainly provide a means for all employees to contribute to broad discussions about what data is relevant to collect given the institution's priorities and goals. The KPIs and dashboard will also provide a tangible, visible representation of the institution's successes.

In addition to discussions about the need for reliable data, the Team noted that in a number of the group sessions, PTC employees expressed concerns about PTC's current student database and the need for a more flexible and user-friendly system that is appropriate for the size of the institution since PTC has grown beyond the capacity of the current system. The Team encourages PTC to investigate other models of student databases with an eye to best practices and future growth.

Employees also expressed a concern about the need for additional IT staff. While the current IT staff are highly efficient and have found creative ways of supporting PTC's seven sites, the Team urges the new leadership to scrutinize staffing levels in key support functions across the group of administrators and faculty and review of samples of student learning outcomes in courses and programs demonstrated that assessment of learning outcomes is taking place at PTC. Nine of the occupational programs are accredited (Automotive, Aviation, Culinary, Dental Assisting, Early Childhood, Respiratory Therapy, etc.) and participate in national certification or licensure opportunities, and those programs engage in *program* assessment. Some programs are not accredited, however, and those programs need to demonstrate that assessment is taking place at the program level, and that improvements are made based on analysis of results data.

Evidence of embedded course assessments is also taking place at PTC, as demonstrated in documents provided to the Team during the Assessment meeting. While PTC does have a "General Education Philosophy," the Team encourages the faculty to articulate the philosophy in terms of core competencies that all graduates of PTC—across all programs and disciplines—are expected to know and demonstrate. PTC is a unique institution, with its own context, culture, and regional needs. Faculty and leaders at the institution should determine what core competencies they want PTC graduates to possess that make the graduates competitive with other graduates at like institutions, but also what makes them unique.

Faculty are encouraged to take a lead role in assessment of student learning outcomes. Whether an Assessment Committee is co-chaired by administration and faculty, or led solely by faculty, the faculty as a whole should take ownership of direct assessment of core competencies (General Education), program assessment, and individual course assessment. Ideally, the learning

outcomes at all three levels should be aligned (course, program, across curriculum). Outcomes data could be shared on a regular basis at an annual meeting, retreat, or “celebration,” and ideally at a Board meeting. Results could be posted prominently as part of KPIs/dashboard, or through some mechanism that makes public the improvements that are made based on analysis of results data.

2. Category Five, Leading and Communicating: Change in Leadership in a Dynamic Arkansas Environment. The new President has quickly made a positive impact on employees at PTC through open communication and a sincere effort to be transparent. As indicated above, faculty and staff expressed positive feedback about the open forums and weekly meetings with Senate. The Team observed that a recurring theme at the meetings during the Quality Checkup was a lack of consistent communication at PTC, and that “end runs” and favoritism had prevailed in the past (prior to the arrival of new leaders). This lack of communication among the levels of management has impacted such processes as assignment of faculty teaching loads, creation of job descriptions, award of release time, administration of employee evaluations, and allocation of professional development funds. The new leadership is strongly urged to continue with its early efforts to find a systematic means of communication that takes into consideration the organizational structure within a quality improvement culture.

In addition, implementing effective human resource processes will strengthen communication at PTC. Clarity in job duties, reporting structures, and expectations for performance, evaluation, reward, and promotion is absolutely essential for any organization. The new leadership is moving quickly to facilitate revision of the employee handbook which will address policy and procedures relative to valuing people, and it will serve as a vehicle to communicate employees’ rights and responsibilities. The leadership is encouraged to make the handbook revision process inclusive of all groups of employees. Creation of a faculty grievance process, as an example, should involve faculty input. Once the handbook is completed, perhaps training sessions should take place among all levels of employees. The handbook should be easily accessible to all employees in public places, such as on the intranet, and expectations for compliance with the handbook should be clarified.

As part of the third strategic issue noted in the Systems Appraisal Feedback Report, it was noted that the new leadership faces a number of strategic challenges, among them the State of Arkansas’s transitioning to a performance-based funding model, and that PTC is planning to pursue a local millage within the next couple of years. Given these opportunities, the new President’s plans to identify KPIs and create a dashboard for monitoring progress toward

institutional goals is timely and important. Re-examining *Vision 2016* and reshaping the vision of this document will also be a timely activity.

In the team's judgment, the institution presented satisfactory evidence that it met this goal of the Quality Checkup. The institution's approach to the issue, documentation, and performance were acceptable and comply with Commission and AQIP's expectations.

Review of organizational commitment to continuing systematic quality improvement

PTC has a good foundation in systematic quality improvement. Organizational structures have been in place to identify and implement action projects and other quality endeavors since PTC joined AQIP in 2008. A number of timely Action Projects are also currently in place, including "Improving Institutional Support Processes: Development of an HR training and Professional Development Program," which will address some of the Category Four, Valuing People, concerns. PTC is also involved in other national quality improvement initiatives, such as the Continuous Quality Improvement Network (CQIN) and Achieving the Dream.

In discussions with employees about integration of AQIP at PTC, one member of the President's Executive Council noted that PTC is "beginning to move toward a culture of evidence," and that PTC is "beginning to be less reactive and more proactive." Employees also indicated that AQIP provided opportunities for employees to have "honest" conversations about improvements that need to take place. The Quality Checkup Team observed employees' willingness to be candid and direct in their comments about what needs to change at PTC.

The new leadership, as stated above, has refocused the former AQIP steering committee and renamed it the Quality Council. Senior management is committed to addressing the strategic issues and to putting KPIs and a dashboard in place. Employee groups are also dedicated to improvement as evidenced by planning documents that some of the academic areas shared with the Quality Checkup Team. One department used the AQIP categories to articulate its strategic plans, and another had clearly laid out assessment plans that draw on best practices in continuous quality improvement.

There is every indication that PTC will continue to pursue continuous quality improvement opportunities and will implement process improvements that will yield positive results.

Other AQIP issues

Given the AQIP structure in place at PTC, leadership has an opportunity to systematically review core

processes at the institution as these processes align with AQIP categories. Some of these processes are mentioned above. Other areas of concern, expressed by employees, but also observed by the Team are the following:

- (1) Category Three, Understanding and Meeting Students' and Other Stakeholders' Needs. While there are excellent student success initiatives at PTC, among them "The Network," Student Ambassadors, and clubs and organizations, the faculty and staff at PTC have an opportunity to focus on best practices in initiatives that will lead to better retention and completion. As an example, there is minimal involvement of faculty in student advising at PTC. Since faculty are most familiar with the curriculum and closest to students, involving faculty in advising would seem to be critical for student success. Likewise, given PTC's concerns about performance-based funding, which means improved completion, PTC could benefit from such retention mechanisms as an early alert system and perhaps an integrated contact management system, so that information about students can be communicated effectively across the campus to those with need to know. A contact management/early alert system may be a factor in searching for a new student database system.

In addition, while the student complaint process is now in place at the management level, given the large size of PTC, the institution could benefit from a systematic student complaint process at the departmental level. This would involve gathering complaints, aggregating the information, and identifying patterns in those complaints to determine how to make improvements, some of which may rise to the institutional level through the Quality Council.

- (2) Category Six, Supporting Institutional Operations. PTC is in a transitional period as the institution adjusts to new leadership and a changing culture. This period of time provides an opportunity for increased transparency about how processes work and why. Employee groups indicated that such processes as budgeting and allocation of funds are not clear. As an example, the faculty were unclear about how much money is allocated for faculty development, who determines this, and where the monies reside, in which accounts. Likewise, PTC has had a couple of years of financial audits in which material findings were documented, but it was unclear to the Quality Checkup Team how PTC addressed the internal control process as a result of the audits. Certainly, good financial audits are essential when seeking increased public commitment to the institution. One employee pointed out that staffing is so thin in some critical support functions that the institution could be at risk. The activity of mapping processes in key institutional support areas, such as in finance and accounting, then scrutinizing staffing levels, making adjustments and improvements, and communicating the results to the stakeholders will go

a long way to building employees' and the public's confidence and trust.

PTC as a whole should be commended for its continued commitment to quality improvement and for the employees' collective desire to become a stronger institution. Growing enrollments, hard-working and candid employees are good opportunities for any leadership to have. The Team feels that PTC is in good hands at all levels, and that process improvement will continue for everyone's benefit.

Appendix A

Worksheet for The Evaluation Team on Federal Compliance Requirements

Instructions: The team reviews each item identified in the Federal Compliance Guide and documents its findings in the appropriate spaces below. 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 appropriate sections of this AQIP Quality Checkup Report. This Worksheet must be completed for all Quality Checkup visits after January 1, 2012.

Institutional Materials Related to Federal Compliance Reviewed by the Team:

www.pulaskitech.edu

2012-13 Academic Catalog

Eight samples of Pulaski advertisements

Student Complaint Log

Transfer Policies

Campus Police/Public Safety Crime Stats

Default rates and measures to address default rate

Satisfactory Academic Progress Policy

Program Affiliations and accreditations

2009, 2010, 2011 Arkansas Legislature Audit reports

Eighteen syllabi from a variety of courses and programs

CTE Program "credit hour" notebook

Vision 2016: A Strategic Plan for Serving Central Arkansas

Operating Plan 2011-12 Academic Year

Credit Hour Policy (draft)

Evaluation of Federal Compliance Program Components

1. Credits, Program Length, and Tuition: *The institution has documented that it has credit hour assignments and degree program lengths within the range of good practice in higher education and that tuition is consistent across degree programs (or that there is a rational basis for any program-specific tuition). New for 2012: The Commission has a new policy on the Credit Hour. Complete the Worksheet in Appendix A and then complete the following responses. Attach the Worksheet to this form.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

 X The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

 The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

_____ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

_____ The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The institution has been adhering to a credit hour policy that is consistent with the Federal definition of a credit hour. Leadership has submitted the policy to the PTC Board of Trustees for Board approval; the policy is on the November meeting agenda for approval.

Additional Monitoring, if any: None.

2. Student Complaints: *The institution has documented a process in place for addressing student complaints and appears to be systematically processing such complaints as evidenced by the data on student complaints for the three years prior to the visit.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

_____ The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

_____ The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

_____ The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The team reviewed student complaints; the record of complaints is housed in the Provost's Office.

Additional Monitoring, if any: None.

3. Transfer Policies: *The institution has demonstrated it is appropriately disclosing its transfer policies to students and to the public. Policies contain information about the criteria the institution uses to make transfer decisions.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S
CONCLUSIONS:

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: None.

Additional Monitoring, if any: None.

4. Verification of Student Identity: *The institution has demonstrated that it verifies the identity of students who participate in courses or programs provided to the student through distance or correspondence education and has appropriate protocols to disclose additional fees related to verification to students and to protect their privacy.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S
CONCLUSIONS:

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The institution follows appropriate practices to verify student identity. PTC has an authentication of password process versus an active directory and mandates changing passwords periodically.

Additional Monitoring, if any: None.

5. Title IV Program and Related Responsibilities: *The institution has presented evidence on the required components of the Title IV Program.*

- **General Program Requirements:** *The institution has provided the Commission 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 raised regarding the institution's fulfillment of its responsibilities in this area.*
- **Financial Responsibility Requirements:** *The institution has provided the Commission with information about the Department's review of composite ratios and financial audits. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area. (Note that the team should also be commenting under Criterion Two 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.)*
- **Default Rates.** *The institution has provided the Commission with information about three years of default rates. It has a responsible program to work with students to minimize default rates. It has, as necessary, addressed any issues the Department raised regarding the institution's fulfillment of its responsibilities in this area.*
- **Campus Crime Information, Athletic Participation and Financial Aid, and Related Disclosures:** *The institution has provided the Commission with information about its disclosures. It has demonstrated, and the team has reviewed, the institution's policies and practices for ensuring compliance with these regulations.*
- **Student Right to Know.** *The institution has provided the Commission 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 One if the team determines that disclosures are not accurate or appropriate.)*
- **Satisfactory Academic Progress and Attendance.** *The institution has provided the Commission with information about policies and practices for ensuring compliance with these regulations. The institution has demonstrated that the policies and practices meet state or federal requirements and that the institution is appropriately applying these policies and practices to students.*
- **Contractual Relationships:** *The institution has presented a list of its contractual relationships related to its academic program and evidence of its compliance with*

Commission policies requiring notification or approval for contractual relationships (The institution should review the Contractual Change Application on the Commission's Web site for more information. If the team learns that the institution has a contractual relationship that may require Commission approval and has not completed the appropriate Commission Contractual Change Application the team must require that the institution complete and file the form as soon as possible.)

- ***Consortial Relationships:*** *The institution has presented a list of its consortial relationships related to its academic program and evidence of its compliance with Commission policies requiring notification or approval for consortial relationships (The institution should review the Consortial Change Application on the Commission's Web site for more information. If the team learns that the institution has such a consortial relationship that may require Commission approval and has not completed the appropriate Commission Consortial Change Application the team must require that the institution complete and file the form as soon as possible.)*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

 X The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

 The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

 The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

 The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The Team reviewed relevant policies and practices and found them consistent with the Commission's requirements.

Additional Monitoring, if any: None.

6. Institutional Disclosures and Advertising and Recruitment Materials: *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 the Commission and other agencies as well as about its programs, locations and policies.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments:

Additional Monitoring, if any: None.

7. Relationship with Other Accrediting Agencies and with State Regulatory Boards: *The institution has documented that it discloses accurately to the public and the Commission its relationship with any other specialized, professional or institutional accreditor and with all governing or coordinating bodies in states in which the institution may have a presence. Note that if the team is recommending initial or continued status, and the institution is currently under sanction or show-cause with, or has received an adverse action from, any other federally recognized specialized or institutional accreditor in the past five years, the team must explain the action in the body of the Assurance Section of the Team Report and provide its rationale for recommending Commission status in light of this action. In addition, the team must contact the staff liaison immediately if it learns that the institution is at risk of losing its degree authorization or lacks such authorization in any state in which the institution meets state presence requirements.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: The institution provided a list of program accreditations indicating all are up-to-date and in good standing.

Additional Monitoring, if any: None.

8. Public Notification of an Evaluation Visit and Third Party Comment: *The institution has made an appropriate and timely effort to solicit third party comments. The team has evaluated any comments received and completed any necessary follow-up on issues raised in these comments. Note that if the team has determined that any issues raised by third-party comment 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.*

CHECK THE APPROPRIATE RESPONSE THAT REFLECTS THE TEAM'S CONCLUSIONS:

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements.

The team has reviewed this component of federal compliance and has found the institution to meet the Commission's requirements but recommends follow-up.

The team has reviewed this component of federal compliance and has found the institution not to meet the Commission's requirements and recommends follow-up.

The team also has comments that relate to the institution's compliance with the Criteria for Accreditation. See Criterion (insert appropriate reference).

Comments: Public notification of the visit was appropriately advertised in the *Arkansas Democrat Gazette* on Sunday, September 9, 2012. No third-party comments were received.

Additional Monitoring, if any: None.

Appendix B Credits and Program Length

Instructions: The team reviews the "Protocol for Peer Reviewers Reviewing Credit Hours Under the Commission's New Policies" before completing this Worksheet. This Worksheet must be completed for all Quality Checkup visits after January 1, 2012.

A: Answer the Following Questions

Institutional Policies on Credit Hours

- 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 Credit Hour Policy is on the November Board of Trustees' Agenda.

- 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?

Yes No

Comments:

- 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 timeframe and utilizing the activities allotted for the course?

Yes No

Comments:

- Is the policy reasonable within the federal definition as well as within the range of good practice in higher education? (Note that the Commission 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:

Application of Policies

- 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 the Commission 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:

- 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:

- If the institution offers any alternative delivery or compressed format courses or programs, were 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: PTC does not offer compressed format courses, but it does offer hybrid and online courses that conform to the credit-hour policy and learning outcomes in those courses are the same as they are for those on ground.

- 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 reasonably capable of being fulfilled by students in the time allocated to justify the allocation of credit?

Yes No

Comments:

- 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:

B: Identify the Sample Courses and Programs Reviewed by the Team. For the programs the team sampled, the team should review syllabi and intended learning outcomes for several of the courses

in the program, identify the contact hours for each course, and expectations for homework or work outside of instructional time.

The courses below were reviewed; all required the appropriate amount of work for students to complete outside of class that was consistent with the credit hours assigned.

Syllabi:

- AVA-1110, Aviation General, 10 credit hours
- BIOL-1401, General Biology (Hybrid), 4 credit hours
- BUS-1243, Business Communications (Online), 4 credit hours
- CIS-2624.60, Programming II, 4 credit hours
- CUL-2311, Culinary Apprenticeship, 3 credit hours
- DEN-1603, Dental Radiography I, 3 credit hours
- DEVE-0334, Pre-Algebra Emporium, 3 credit hours
- DFT-2605, Drafting & Design (CAD), 5 credit hours
- ECD-1003, Foundations of Early Childhood Education, 3 credit hours
- ENGL-1311, English Composition I, 3 credit hours
- HLSC-2300, Nutrition (online), 3 credit hours
- WLD-2110, Welding II, 10 credit hours

Programs:

- Associate of Science in Business
- Associate of Science in Aviation Management
- Associate in Applied Science in Allied Health
- Associate in Arts
- Associate in Applied Science of Crime Scene Investigation

C: Recommend Commission Follow-up, If Appropriate

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

Yes No

Rationale:

Identify the type of Commission monitoring required and the due date: NA.

D: Identify and Explain Any Findings of Systematic Non-Compliance in One or More Educational Programs with Commission Policies Regarding the Credit Hour

None.