VIA ELECTRONIC MAIL

Ryan Ruda, President/CEO
Garden City Community College
801 Campus Dr.
Garden City, KS 67846

Dear President Ruda:

This letter is formal notification of action taken by the Higher Learning Commission (HLC) Board of Trustees (“the Board”) concerning Garden City Community College (“the Institution”). This action is effective as of the date the Board acted, June 27, 2019. In taking this action, the Board considered materials from the most recent comprehensive evaluation, including, but not limited to: the Assurance Filing the Institution submitted, the report from the comprehensive evaluation team, the report of the Institutional Actions Council (IAC) Hearing Committee, and the institutional responses to these reports.

**Summary of the Action:** The Board determined that the Institution is no longer out of compliance with the Criteria for Accreditation and removed the Institution from Probation and assigned interim monitoring. The Institution meets Core Component 5.B with concerns. The Institution is required to submit an embedded report, as outlined below, with its next Assurance Filing.

**Board Rationale**

The Board based its action on the following findings made with regard to the Institution:

The Institution now meets Criterion Three, Core Component 3.A, “the institution’s degree programs are appropriate to higher education,” for the following reasons:

- The Institution is effectively articulating and differentiating learning goals for its degree and certificate programs.
- The Institution’s curriculum development policy statement guides its Curriculum and Instruction Committee through procedures for developing new curricula and modifying existing curricula.
- Curriculum development is further guided by the Kansas Board of Regents (KBOR), which prescribes student learning outcomes for transfer curricula and some technical curricula.
- Advisory boards are in place for technical programs, and KBOR policy guides the practice of advisory boards, ensuring that key external stakeholders provide input
Outcomes are articulated through curriculum maps, which are also provided to students and other stakeholders from a link in the catalog.

The Institution offers courses in face-to-face, online, hybrid, and dual credit formats. Policy guidelines for curriculum development require that a master course syllabus is in place so that course outcomes are the same across all modalities.

The Institution now meets Criterion Four, Core Component 4.A, “the institution demonstrates responsibility for the quality of its educational programs,” for the following reasons:

- The Institution has implemented a five-year program review cycle that requires programmatic action plans. Two-fifths of the Institution’s programs have been reviewed, with another group of programs scheduled for review starting in fall 2019. By 2021-2022 all of the Institution’s programs will have been reviewed using the new processes.
- Non-academic and co-curricular programs are being reviewed with further plans to have the Board of Trustees undergo its own self-reflective review process.
- The program review process has resulted in programmatic improvements and its evidence spanned a range of disciplines from the Art program to the Welding program.
- Academic advising has undergone a similar review and improvement process that resulted in the addition of an advisor position, thereby illustrating the connection between program review and budget.
- Following certain upgrades to its website in summer 2019, the Institution will post program review reports and findings for additional transparency.

The Institution now meets Criterion Four, Core Component 4.B, “the institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning,” for the following reasons:

- The Institution’s assessment results are being posted on its website in summer 2019.
- Assessment of student learning is led by the Student Learning Assessment Team (SLAT), which has facilitated assessment processes across the Institution’s programs. SLAT evaluates the assessment processes annually with input from faculty and staff to determine if any changes are necessary for improving the processes and related guidelines.
- There is articulation between assessment findings and budgetary decisions. For example, a review of critical thinking (as part of the general education program) identified a need to provide faculty development opportunities on how to embed critical thinking assessment more effectively into the curriculum. Previously, professional development funding for improving assessment was lacking, but it is now an expectation.

The Institution now meets Criterion Four, 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,” for the following reasons:

- The Institution’s advising activity begins in the Academic Advising Office, and then the student is transitioned to a faculty advisor within the student’s discipline. One advisor with the title of Retention Coordinator focuses on the Institution’s student retention efforts.
• The Institution utilizes software that is available to advisors and faculty members that tracks student attendance and other notes. Early alerts are then accessible to the Retention Coordinator, who reaches out to individual students to identify what services are needed, including tutoring, counseling, and other services.

• Because of these early alerts, the Institution has been able to enhance student learning services, such as the Writing Center, to increase the quality and availability of services based on usage and demand. Data are collected on the number of students served, hours utilized, and demonstrable student success within the general education and disciplinary courses. A similar process is available for STEM tutoring through a federal STEM grant.

The Institution meets, but with concerns, Criterion Five, 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,” for the following reasons:

• The Institution has made significant progress in attending to the leadership challenges of the past, including filling all critical roles with qualified and capable individuals.

• Leadership transitions include a new Chief Financial Officer, Vice President of Instruction/Chief Academic Officer, Vice President of Student Services, Vice President for Institutional Effectiveness and Accountability, and Athletic Director. The Board appointed the Acting President as the permanent President in February 2019.

• An independent investigator report provided to the Institution’s Board in December 2018 determined that the critical leadership issues had been effectively resolved with the termination of the prior President, which occurred in August 2018. There have been no subsequent accusations.

• The Board will conduct a policy governance review starting in July 2019.

• Because the Board is relatively inexperienced, additional training and development needs to be pursued that includes an orientation for new members and ongoing development for all Board members in the areas of roles and responsibilities, strategic planning, fiduciary requirements, effective oversight, and self-evaluation and ongoing improvement processes.

The Institution now meets without concerns Criterion Five, Core Component 5.C, “the institution engages in systematic and integrated planning,” for the following reasons:

• Assessment and program review results are linked to planning and budgeting, as described in Core Components 4.A and 4.B above.

• The Institution’s Board recently developed and implemented a strategic plan to guide the distribution of resources and to deploy strategies that will move the Institution toward fulfillment of its mission.

• A Facilities Master Plan was developed in 2016-2017 through a process utilizing public meetings across the service area and meetings with community leaders and campus stakeholders.

• The Institution demonstrated a pattern of budget allocations that focus on students, especially for instruction and support services, and on maintaining the physical plant and fiscal services.

• Changing course delivery formats, expanded and improved partnerships, and upgrading
of the IT infrastructure are contributing to the Institution’s enrollment growth and student success.

The Institution now meets without concerns Criterion Five, Core Component 5.D, “the institution works systematically to improve its performance,” for the following reasons:

- The Institution is drawing from several sources the data that are needed to monitor and measure planning processes and effectiveness. The Office of Institutional Effectiveness has been instrumental in securing data sources and enhancing reporting processes.
- The Institution’s strategic plan and key performance indicators (KPIs) are driving many areas of improvement, while required reporting for IPEDS and KBOR further evidence comprehensive information collection.
- The Institution participates in the National Community College Benchmarking Project (NCCBP), and it deploys on a bi-annual basis the Community College Survey of Student Engagement (CCSSE) and the Survey of Entering Student Engagement (SENSE).
- Financial reporting is provided to the Board and KBOR on a regular basis; likewise, annual financial audits are prepared by independent accounting firms.
- The Institution’s Annual Report for 2017-2018 provides a listing of intended goals, including priority rankings, alignment with department goals, planned activities and strategies, and information on timelines and overall progress.

The Institution has demonstrated that it is otherwise in compliance with the Criteria for Accreditation, Assumed Practices and Federal Compliance requirements, and can therefore be removed from Probation.

Next Steps in the HLC Review Process

Embedded Report: The Board required that the Institution submit an embedded report with its next Assurance Filing regarding Core Component 5.B.

Comprehensive Evaluation: The Institution has been placed on the Standard Pathway with its next comprehensive evaluation for reaffirmation of accreditation in 2022-23.

HLC Disclosure Obligations

The Board action resulted in changes that will be reflected in the Institution’s Statement of Accreditation Status as well as the Institutional Status and Requirements Report. The Statement of Accreditation Status, including the dates of the last and next comprehensive evaluation visits, will be posted to the HLC website.

Information about this action is provided to members of the public and to other constituents in several ways. In accordance with HLC policy,¹ this Action Letter and the enclosed Public Disclosure

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¹ INST.G.10.010, Management of Commission Information
Notice will be posted to HLC’s website not more than 24 hours after this letter is sent to the Institution.

HLC policy\(^2\) requires that a summary of Board actions be sent to appropriate state and federal agencies and accrediting associations. It also will be published on HLC’s website. The summary will include this HLC action regarding the Institution.

On behalf of the Board of Trustees, thank you in advance for your cooperation. If you have questions about any of the information in this letter, please contact your HLC Staff Liaison, Dr. Eric Martin.

Sincerely,

Barbara Gellman-Danley
President

Enc: Public Disclosure Notice

Cc: Chair of the Board of Trustees, Garden City Community College
    Jacquelyn Messinger, Vice President of Institutional Effectiveness & Accountability, Garden City Community College
    Karla Wiscombe, Director of Academic Affairs, Kansas Board of Regents
    Evaluation Team Chair
    IAC Hearing Committee Chair
    Eric Martin, Vice President and Chief of Staff, Higher Learning Commission
    Anthea Sweeney, Vice President for Legal and Governmental Affairs, Higher Learning Commission

\(^2\) COMM.A.10.010, Commission Public Notices and Statements