



December 13, 2013

VIA EMAIL & FEDERAL EXPRESS
(info@westorangecollege.com)

Mr. John Kim
Executive Director
West Orange College
905 S. Euclid Street
Fullerton CA 92832

***Re: Initial Accreditation Denied
(Appealable, Not a Final Action)
ACCET ID #1418***

Dear Mr. Kim:

This letter is to inform you that, at its meeting on December 7, 2013, the Accrediting Commission of the Accrediting Council for Continuing Education & Training (ACCET) voted to deny initial accreditation to West Orange College, located in Fullerton, California.

The decision was based upon a careful review and evaluation of the record, including the institution's Analytic Self-Evaluation Report (ASER), the on-site visit team report (visit conducted September 4-5, 2013), and the institution's response to that report, dated October 29, 2013. It is noted that a number of weaknesses cited in the team report were adequately addressed in the institution's response and accepted by the Commission. However, the Commission determined that the institution has not adequately demonstrated compliance with respect to ACCET standards, policies, and procedures, relative to the following findings:

1. Standard I-B: Goals

The institution failed to demonstrate that broad institutional goals are clearly stated, support the mission, and are understood at all levels of the organization. The team report indicated that the institution had one goal of providing students with the necessary skills to succeed in their careers in their own country. This one goal was not measured, and the institution has no additional goals to address the broad range of school management functions.

The institution stated in its response that it revised its mission statement and goals. The response included a single new goal, which is to provide "limited English proficiency students [...a] Certificate of Completion in Basic English as a Second Language Program, Intermediate English as a Second Language Program, Advanced English as a Second Language Program, ESP Career Skills/ESL Program and ESP General Office/Business English Program." It further noted that it has policies to measure how it meets its goal, and provided copies of a student progress report, student surveys, a faculty evaluation form, and a "suggestions/complaints box". However, the institution's response failed to address the weakness cited in the team report, as the institution has not developed additional goals

addressing the broad range of institutional operations. Therefore the institution has failed to demonstrate that it has policies and procedures in place to systematically and effectively develop and monitor institutional goals. Accordingly, the institution has not demonstrated full compliance with this standard.

2. Standard III-B: Financial Procedures

The institution failed to demonstrate that its cancellation and refund policies are written, fair and equitable; are consistently administered; and comply with statutory, regulatory, and accreditation requirements. The team report indicated that there were no refund calculation worksheets in any of the dropped/withdrawn student files reviewed by the team during the on-site visit, precluding any verification of accurate and timely refunds. Further, the institution could not demonstrate at the time of the on-site team visit that it carries workman's compensation insurance.

The institution provided in its response a copy of its "Drop/Refund Calculation" worksheet along with examples of completed worksheets, some with copies of the cancelled refund checks. However, while the drop/refund worksheet indicates the student payment and the unearned tuition, it does not include the actual tuition charge. Therefore, it remains unclear as to how the institution arrived at the stated refund amounts noted on the worksheet, meaning that it is impossible to know if the student was provided an accurate refund. Therefore, the institution failed to demonstrate the systematic and effective implementation of the institution's cancellation and refund policy in practice.

3. Standard IV-A: Educational Goals and Objectives

The institution failed to demonstrate that its program curricular content and learning experiences are preplanned and present a sound, systematic, and sequential educational methodology, or that sufficient and appropriate knowledge and skill elements are included to ensure adequate preparation for the expected performance outcomes. The team report indicated that the institution's course syllabi did not consistently indicate the grading system, the weighting of final grades, the proper learning objectives, and/or appropriate content. The institution implemented a program revision in which all programs were lengthened to 720 clock hours. However, the course content of the ESL programs remained unchanged, and it was determined that there was insufficient curricular content to warrant 720 class contact hours.

The report also noted that the vocational program content was insufficient to warrant such an extended clock-hour length. The report also indicated that the full curriculum for the Computerized Accounting Clerk through ESL program lacked essential aspects of accounting programs according to industry norms, such as preparing financial statements and cost basis analysis. Further, in its vocational programs the institution was using Microsoft 2007, which is outdated. In addition, the team report stated that the institution's published student-to-teacher ratio of 20:1 was not educationally sound.

The institution stated in its response that when it adopted the *Northstar* series in favor of the *Interchange* series, this necessitated an increase in clock hours. It noted that each text of the former series has over 200 pages, while the latter has just 105 pages per book. Excerpts of both were provided as exhibits to demonstrate the density of the *Northstar* texts. In addition, faculty meeting minutes were included as exhibits, dating from April, June, and July 2013, to show the input from faculty and students regarding the changes of the texts and to the clock hours. The response further indicated that the institution has “eliminated the vocational part” of its programs, renaming the Computerized Accounting Clerk program to ESP Career Skills/ESL and the General Office Clerk program to ESP General Office/Business English. These programs are designed, per the institution's response, to allow students to use English in business and professional settings in their home countries.

While the institution’s response clarified the decision to change textbooks and increase clock hours, it did not address the weakness cited by the team that the current length of 720 hours per program is even too long for the content of the 200-page *Northstar* texts. The response did not address the citation regarding the limited program content for the vocational programs, but did indicate that the institution revised the two vocational programs, removing vocational content and assumedly making them avocational. The change in overall program objectives and the change in the type of program (vocational to avocational) are both deemed by ACCET to be substantive changes, and neither is permitted while the institution is in the initial accreditation process. This change of overall program objective and curriculum content (the removal of the “vocational part”) means that two substantively new programs are being offered that neither the team nor the Commission have reviewed or evaluated. Therefore, the institution has failed to demonstrate systematic and effective implementation in compliance with ACCET policy of revised educational goals and objectives.

4. Standard IV-B: Program/Instructional Materials

The institution did not demonstrate that its instructional materials are appropriate in scope, sequence, and depth for each program or course in relation to the stated goals and objectives, or that materials are up-to-date, readily available, and facilitate positive learning outcomes. The team report indicated that the *Northstar* series consists of Books 1 through 5; however, the school only uses Book 1 in the Basic Level, skips Book 2 and uses Book 3 in the Intermediate Level. It uses Book 5 in the Advanced Level, skipping over Book 4. In addition, the instructional materials for the Computerized Accounting Clerk program were not at the institution at the time of the on-site team visit with the exception of the syllabus and outline, which were general in nature and lacked sufficient detail. The same was true of the lesson plans for the General Office Clerk program.

The institution stated in its response that it has created syllabi for all levels of *Northstar*. It indicated that the institution was using only the syllabi for the Basic 1, Intermediate 1 and Advanced levels of the series, but that it will be, “open[ing] new classes soon” for levels Basic 2, Intermediate 2 and Advanced 2 in order to fill the gaps noted by the team in its report. Copies of syllabi for these three levels were provided as exhibits to the response. However, the Commission noted that, rather than add materials from the text series to the existing system of three 720-hour levels, as suggested by the team, the syllabi for each of

these new levels comprises a further 40 weeks or 720 clock hours in addition to the three 720-hour levels already being taught by the institution. This creates an ESL program that is over 4000 clock hours in length, a total that is far beyond any acceptable model known to the Commission, which already finds the present length of 2160 hours to be excessive.

The institution's response further indicated that the materials for the Computerized Accounting Clerk program were developed by the instructor, who has left the school since the on-site visit. His materials were obtained from the Internet and from his own personal resources. The instructor kept the materials when he left the school. However, as noted previously under Standard IV-A, the institution has revised its vocational programs, and the Computerized Accounting Clerk (CAC) program is now the ESP Career Skills/ESL program, for which it provided a syllabus and a sample lesson plan. It also provided these for the newly-revised General Office Clerk/Business English program. Meeting minutes dated September 7, 2013, were provided to evidence the decision to revise the CAC program. The Commission found that the lesson plans provided remain general and sparse, comprising only a few lines to cover several hours of classes, and the new syllabi provided lack measurable objectives. Of greater concern to the Commission is that, as these syllabi are new and support programs that were revised after the on-site visit, their systematic and effective implementation has not been evidenced in practice over time. Therefore, the institution has failed to demonstrate that program materials evidence appropriate scope, sequence, and depth, and their systematic and effective implementation have not been evidenced in practice over time.

5. Standard VI-C: Performance Measurements

The institution did not demonstrate that it has a sound, written assessment system. The team report indicated that the weighting of grades as indicated in the school catalog allows 50% of the final course grade to be assigned to attendance and participation (20% and 30% respectively), meaning that the final grade is not an indicator of whether the student has mastered the learning objectives in order to advance to the next level. In addition, there was no rubric or other instrument used to evaluate class participation. The report also noted that the Michigan Test had only been given to two students as a means to validate curriculum through external testing, yet the scores had not been documented or analyzed.

The institution indicated in its response that the weighting scale of grades in the school catalog states that the "weekly overall grade" is 30% and that 20% is assigned to participation. The other 50% is for homework, tests, and projects. The Commission noted, however, that neither the catalog provided in the institution's ASER nor that in the response to the team report contain the weighted grading scale; rather, it is in the institution's Policy and Procedures Manual. Further, the scale noted by the team reflects that in the manual submitted in the ASER. The updated weighting scale provided in the response did not include any explanation of the weekly grade, nor did it provide any description as to how participation is evaluated. In addition, the response lacked any evidence of the updated weighting scale's systematic and effective implementation. Finally, the response did not address the weakness cited relative to the failure of the institution to systematically and effectively implement a standardized exit test. Therefore, the institution has not demonstrated use of a sound assessment system as required by this standard.

6. Standard IV-D: Curriculum Review/Revision

The institution failed to demonstrate that it uses systematic and effective procedures to continuously monitor and improve the curriculum. The team report indicated that the institution's ASER states that curriculum is reviewed quarterly by the Executive Director and Director of Education and the advisory board. There were no written minutes to verify that this process was taking place as described in the ASER. The institution had no policy to solicit feedback from employers relative to its vocational programs, and student surveys had only one general question relative to the curriculum.

The institution provided a copy of its new "Curriculum and Syllabi Review Policy" as an exhibit. It also provided copies of meeting minutes from May and June 2013 to evidence that curriculum is discussed at these meetings. The response asserted that informal communication occurs every day with faculty and students. In addition, the response provided three copies of completed student surveys, along with copies of the Curriculum Evaluation Form completed by staff and faculty. No narrative explanation of these forms was provided, and the Commission noted that the survey form still has only one general question regarding curriculum. Further, the limited number of faculty meeting minutes is insufficient evidence of the systematic and effective implementation in practice over time of the institution's curriculum review and revision policy, which itself provides no guidance to those involved except to stipulate a schedule. Consequently, the institution has failed to demonstrate systematic and effective implementation of a curriculum review/revision policy which can only be demonstrated in practice over time.

7. Standard VI-C: Instructor Orientation and Training

The institution failed to demonstrate that it has an effective written policy for the orientation and ongoing professional development of instructional personnel that is systematically implemented, monitored, and documented. The team report indicated that there was no checklist in use for new instructor orientation. It further stated that the institution's policy on professional development merely encouraged instructors to take part in professional development, but did not require it of them.

The institution provided a blank copy of its New Instructor Orientation checklist in its response. It also provided copy of its policy on the ongoing development for faculty, which stipulates that the institution expects instructors to participate in one professional growth activity per quarter. A blank Professional Development Record form was included, as was documentation of two past professional growth activities, one from March 2013 and the other undated. Finally, the response included a copy of the institution's schedule for professional development events for 2014. However, the response did not evidence the systematic and effective implementation of the orientation checklist as only a blank copy was provided. In addition, as noted in the team report and corroborated by the institution's response, professional growth has not been systematically and effectively implemented, as it was previously left to instructors to manage, and proactive oversight by the institution has yet to be evidenced in practice. Therefore, the

Commission determined that the institution has not demonstrated implementation, monitoring, and documentation of orientation and professional development of instructional personnel.

8. Standard VII-B: Enrollment

The institution failed to demonstrate that its enrollment process is preplanned, effective, and regularly monitored by the institution to ensure its integrity and that its written enrollment agreement or contract contains full disclosure of the rights, obligations, and responsibilities of all parties, including all costs stated in clear and explicit language. The team report indicated that the team found discrepancies on enrollment agreements, which had incorrect monthly payment amounts entered. The report included three copies of enrollment agreements on which it is noted that the students owed \$3,600, but the agreement stated zero amount due or six monthly payments of \$3,000 or in one case, \$2,000, making the total due significantly above the original tuition.

The institution provided a revised enrollment agreement in its response that it stated is in compliance with California Bureau for Private Postsecondary Education (BPPE) requirements. It also provided copies of corrected enrollment agreements for those cited in the team report, although these students have since gone back to their home countries and thus, the corrected agreements were not signed. A new enrollment agreement executed on September 30, 2013, was included to show that the monthly payment section was correctly filled out. Finally, the institution provided a copy of a new enrollment agreement and an ACCET Document 29.1 – Enrollment Agreement Checklist. The response noted that this new agreement is the only one being used for new students. However, the Commission's concerns that the institution is not systematically and effectively implementing its enrollment policies have not been assuaged, as no examples of completed copies of the new agreement were provided, and only one correctly filled out agreement actually signed by the student was included. Therefore, the institution failed to evidence the effective implementation in practice over time required to evidence compliance with the standard.

9. Standard VII-C: Transfer of Credit

The institution failed to demonstrate that it implements written policies and procedures that ensure the fair and equitable treatment of students relative to the transfer of credit to and from the institution. The team report indicated that the institution did not have a transfer of credit policy, nor did it provide a compelling rationale for not having one for its vocational programs.

The institution stated in its response that it did not have a transfer of credit policy because it is a clock-hour institution offering ESL programs and vocational programs not leading to employment. It further noted that it has removed all vocational elements from its two non-ESL programs. However, as noted above under Standard IV-A, Educational Goals and Objectives such substantive changes to program objectives and institutional scope created new programs which could not be evaluated by an ACCET team or the Commission as they have yet to be systematically and effectively implemented in practice over time.

10. Standard VIII-A: Student Progress

The institution failed to demonstrate that it effectively monitors, assesses, and records the progress of participants utilizing a sound assessment system with a set of defined elements that are appropriately related to the performance objectives of the programs or courses. The team report indicated that three of ten student files reviewed by the team showed discrepancies in the implementation of the satisfactory progress guidelines. One student went from the Advanced level back to the Basic level; one was placed incorrectly; and one failed and repeated a course but had no learning plan. There were no tests in the vocational programs, and satisfactory progress was based on the teacher observations, yet there were no rubrics or checklists to quantify this process. It also stated that the standardized exit exam is not always given to completed students, and if it is given, it is not recorded and the data is not analyzed to determine if the student progressed.

The institution stated in its response that it uses measurable outcomes in all its programs using midterm and final exams. It further elaborated that it is developing a new student file check list to allow a better tracking of student progress, but failed to provide examples of its use. It is also developing a “Student Progress Interview” form to guide a meeting between the student and a faculty member to review progress, to be placed in the student file, but failed to promote evidence of implementation. Additionally, the response indicated that the institution will conduct monthly faculty meetings at which the Director of Education, “will discuss the mission, policies, current teaching methodologies and objectives of the curriculum and syllabi content.” The response noted that the incorrect level placement found by the team was an “administrative mistake” and that the student has since been placed into the correct level. The student who was moved from Advanced to Basic was described as “a special case” who had health issues and was counselled to return to the Basic level after successfully passing into and completing the Advanced level. A learning plan was developed for her but provides little compelling evidence for the student to move down in level. The response did not address the third example of a student who failed a level but had no learning plan as required by ACCET Document 18.IEP – Satisfactory Academic Progress. However, the institution’s response did not include any evidence of the systematic and effective implementation of the Student Progress Interview form or the new student file checklist. No documentation was provided of the newly scheduled monthly faculty meetings. Finally, no response was given to address the lack of tests or other measurement instruments for the vocational programs. Consequently, the Commission determined that the institution failed to provide compelling evidence of the systematic and effective implementation of its satisfactory progress policies.

11. Standard VIII-B: Attendance

The institution failed to demonstrate that it has established and implemented written policies and procedures for monitoring and documenting attendance. The team report indicated that the language used in the institution’s policies is vague, such as using “may” instead of “will” for the consequence of attendance probation. Students are allowed to make up absences, but there was no indication of any impact on the student’s grades. The report stated that excused absences were not counted as part of the 20% allowed absences. One student terminated for attendance reasons had no documentation of the termination in his file. In addition, leave of

absence forms were unsigned and/or undated. Finally, the report noted that the institution required that vocational students who were absent 21 consecutive days would have to report to the Business Office, but there was no requirement for termination due to consecutive absences as per BPPE regulations.

The institution stated that in its response that it understands the need for monitoring student attendance, and all of its policies “are being reviewed by the administration and faculty.” It noted that excused absences will be counted as part of the 20% allowable absences. The response further stated that the institution's administration is “working with the faculty to design a better articulated policy with well-defined consequences. The revised attendance policy will be made part of the syllabi.” The institution indicated that the word “may” was used in its probation policy to “soften” the language, but agreed that this could cause a misunderstanding and will revise the policy accordingly. Finally, the response stated that the institution is developing methods to document make-up time appropriately. The response included copies of the institution's catalog, Faculty Handbook, and Policies and Procedures Manual, which contained updated policies changing the “may” to “will” and clearly stating that student will be terminated after 21 days of consecutive absences. However, no documentation was provided to evidence the systematic and effective implementation of these revised policies in practice. As a result, the Commission determined that the institution is not in compliance with this standard as it failed to demonstrate the implementation, monitoring, and documentation of attendance as required by the standard.

12. Standard VIII-D: Sponsor/Employer Satisfaction

The institution did not demonstrate that it has written policies and procedures to provide an effective means to regularly assess, document, and validate employer/sponsor satisfaction relative to the quality of the education and training services provided. The team report indicated that the school does not have a policy and procedure for obtaining feedback from employers or sponsors.

The institution stated in its response that all its students are F-1 visa students and cannot work in the United States. It further indicated that its “current student evaluation methods are more than adequate in assessing and/or analyzing the quality of program instruction and integrity.” It again reiterated that it has removed the vocational component from its programs, so “no employer feedback is requested.” However, the response provided some feedback that the institution described as coming from students' home countries; however, the surveys provided are from employers in California. The issues of the unapproved change in scope notwithstanding, the institution, when its applications approved and when it was reviewed by the on-site team, was vocational and lacked written policies and procedures and any systematic and effective implementation of collecting and assessing employer/sponsor feedback. Therefore, the institution was not in compliance with this standard when the on-site team reviewed it, and the unapproved change to avocational scope has not mitigated this finding of noncompliance as it has failed to demonstrate the systematic and effective implementation of policy and procedures relative to the assessment, documentation, and validation of employer satisfaction.

13. Standard VIII-F: Completion and Placement

The institution did not demonstrate that the quality of the educational programs is validated by the outcomes represented in positive completion results or that effective and systematic policies and procedures are in place for validating the number of participants who complete the programs and courses in which they enroll. The team report indicated that the institution did not have a definition of a completer or a policy and procedures for accurately tracking the completion rates of its programs.

The institution provided in its response its definitions of completers, transfers, terminations, and drops. However, the response did not provide a policy or procedure for accurately calculating completion rates for all its programs, nor did it provide any updated completion rate. The team report indicated that the school's ASER reported 100% completion in all its programs, but as it reported 30 drops/withdrawals, the completion rates were not calculated correctly. Lacking a comprehensive written policy and procedure for tracking and validating completion rates, the Commission could not verify the accuracy of the institution's completion tracking. Therefore, the institution failed to demonstrate the systematic and effective implementation of completion policy.

Since denial of initial accreditation is an adverse action by the Accrediting Commission, the institution may appeal the decision. The full procedures and guidelines for appealing the decision are outlined in Document 11 – Policies and Practices of the Accrediting Commission, which is available on our website at www.accet.org. If the institution wishes to appeal the decision, the Commission must receive written notification no later than fifteen (15) calendar days from receipt of this letter, in addition to a certified or cashier's check in the amount of \$7,500.00, payable to ACCET, for an appeals hearing.

Since denial of initial accreditation is an adverse action by the Accrediting Commission, the institution may appeal the decision. The full procedures and guidelines for appealing the decision are outlined in Document 11 – Policies and Practices of the Accrediting Commission, which is available on our website at www.accet.org. If the institution wishes to appeal the decision, the Commission must receive written notification no later than fifteen (15) calendar days from receipt of this letter, in addition to a certified or cashier's check in the amount of \$8,500.00, payable to ACCET, for an appeals hearing.

In the case of an appeal, a written statement regarding the grounds for the appeal, saved as **PDF documents (with exhibits bookmarked) and copied to six individual flash drives**, must be submitted to the ACCET office within sixty (60) calendar days from receipt of this letter. The appeal process allows for the institution to provide clarification of and/or new information regarding the conditions at the institution at the time the Accrediting Commission made its decision to deny or withdraw accreditation. The appeal process does not allow for consideration of changes that have been made by or at the institution or new information created or obtained after the Commission's action to deny or withdraw accreditation.

Initial applicants are advised that, in the instance of an appeal following a denial of accreditation being initialized in accordance with ACCET policy, the institution may not make substantive

changes to its operations, such as additional programs or sites, until a notice of final action is forwarded by the Commission.

It remains our hope that the accreditation evaluation process has served to strengthen your institution's commitment to and development of administrative and academic policies, procedures, and practices that inspire a high quality of education and training for your students.

Sincerely,



William V. Larkin, Ed.D.
Executive Director

WVL/sef

- cc. Ms. Kay Gilcher, Director, Accreditation Division, USDE (aslrecordsmanager@ed.gov)
Mr. Louis Farrell, Director, SEVP, DHS/SEVP (louis.farrell@ice.dhs.gov)
Ms. Katherine Westerlund, Certification Chief, SEVP, DHS/SEVP
(Katherine.H.Westerlund@ice.dhs.gov)
Ms. Joanne Wenzel, Deputy Bureau Chief, California BPPE (joanne_wenzel@dca.ca.gov)