June 28, 2021

Dr. David Johnson
President
Merritt College
12500 Campus Drive
Oakland, CA 94619

Dear Dr. Johnson:

The Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges, at its meeting June 9-11, 2021, reviewed the Institutional Self Evaluation Report (ISER) and evidentiary materials submitted by Merritt College. The Commission also considered the Peer Review Team Report (Team Report) prepared by the peer review team that conducted its site visit to the College March 1-4, 2021. The Commission appreciated your spoken testimony, as well as the testimony of Dr. Jannett Jackson, Interim Chancellor for the Peralta Community College District, and Mr. Adil Ahmed, Interim Vice Chancellor of Finance and Administration for the Peralta Community College District. The Commission found these additional perspectives to be helpful.

The purpose of this review was to determine whether the College continues to meet ACCJC’s Eligibility Requirements, Commission Policies, and Accreditation Standards (hereinafter, the Standards). In addition, the purpose of the review was to determine whether the College has resolved the deficiencies identified by the Commission in its Action Letter of January 27, 2020, as the Commission deferred action on this decision at its meeting in January 2021.1 Upon consideration of the written and oral information noted above, the Commission acted to continue to Impose Probation and require a Follow-Up Report, due no later than October 1, 2021, followed by a visit from a peer review team. Per the ACCJC Policy on Teach-Out Plans and Agreements, the Commission also requires the College to submit a Teach-Out Plan with its Follow-Up Report.2 The accredited status of the institution continues during the probation period.

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1 See the Commission’s Action Letter to the College dated February 1, 2021.
2 Institutions preparing and submitting Midterm Reports, Follow-up Reports, Special Reports, or Teach-out Plans/Agreements to the Commission should review Guidelines for Preparing Institutional Reports to the Commission, found on the ACCJC website at https://accjc.org/guides-and-manuals/.
Compliance Requirements

The Commission also determined that the College must demonstrate compliance with the following Standards, as identified in the requirements below. This demonstration must be addressed in the required Follow-Up Report.

**Standards III.D.5, III.D.6, III.D.8 (District Requirement 1):** In order to meet the Standards, the Commission requires the District have appropriate internal control mechanisms and regularly evaluate its financial management practices, and use the results for improvement to ensure financial documents have a high degree of credibility.

**Standard III.D.7 (District Requirement 2):** In order to meet the Standard, the Commission requires the District respond to all external audit findings, and such responses are comprehensive, timely, and communicated properly.

**Standard III.D.10 (District Requirement 3):** In order to meet the Standard, the Commission requires the District must practice effective oversight of its financial aid programs.

**Standard IV.C.1 (District Requirement 4):** In order to meet the Standard, the Commission requires that the Board of Trustees assures the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution.

**Standard IV.C.2 (District Requirement 5):** In order to meet the Standard, the Commission requires that once the Board of Trustees reaches a decision, all board members act in support of board decisions.

**Standard IV.C.3 (District Requirement 6):** In order to meet the Standard, the Commission requires the Board adhere to their clearly defined policy for evaluating the CEO of the District.

**Standard IV.C.4 (District Requirement 7):** In order to meet the Standard, the Commission requires the governing board functions as an independent, policy-making body that reflects the public interest in the institution’s educational quality.

**Standard IV.C.7 (District Requirement 8):** In order to meet the Standard, the Commission requires that the Board establish a formal process for regularly assessing its policies for effectiveness in fulfilling the District’s mission and revise them as necessary.

**Standard IV.C.12 (District Requirement 9):** In order to meet the Standard, the Commission requires the Board delegate full responsibility and authority to the Chancellor to implement and administer board policies without Board interference.

**Standard IV.D.2 (District Requirement 10):** In order to meet the Standard, the Commission requires the District clearly delineate, document, and communicate the operational responsibilities and functions of the District from those of the Colleges and consistently adhere to this delineation in practice.
In accordance with federal regulations and the Policy on Commission Actions on Institutions, compliance requirements must be addressed and the institution must demonstrate that it aligns with Standards within three years, by June 2024. If the institution cannot document that it has come into compliance within this designated period, the Commission will take adverse action.

Modifications to Team Recommendations
In taking its action, the Commission modified the wording of District Requirement 7 as follows:

**Original District Requirement 7 (Compliance):** In order to meet the Standard, the team recommends the governing board is an independent, policy-making body that reflects the public interest in the institution’s educational quality.

**Revised District Requirement 7 (Compliance):** In order to meet the Standard, the Commission requires the governing board functions as an independent, policy-making body that reflects the public interest in the institution’s educational quality.

Recommendations for Improving Institutional Effectiveness
The Peer Review Team Report noted District Recommendations 11 and 12 for improving institutional effectiveness. These recommendations do not identify current areas of deficiency in institutional practice, but consistent with its mission to foster continuous improvement through the peer review process, the Commission encourages institutions to give serious consideration to these recommendations and the advice contained in the Peer Review Team Report. In the Midterm Report, the College will include actions taken in response to the improvement recommendations.

Deficiencies Identified through Fiscal Monitoring
The Commission recognized that the College has made progress on the deficiencies identified through fiscal monitoring and first documented in its Action Letter of January 27, 2020. However, the Commission determined that these deficiencies have not yet been resolved. The Commission requires the College to address these deficiencies in the required Follow-Up Report along with the Compliance Requirements identified above:

- Establishing FTES Targets and Enrollment Management Plans
- Establishing a Student Success Infrastructure Plan to comply with the Student-Centered Funding Formula as announced by the California Community College Chancellor’s Office
- Establishing guidelines to reduce operational overspending and eliminate the structural deficit
- Adopting a Board policy to adopt sustainable fund balances and reserves
- Adopting a restructuring plan to improve efficiencies and accountability at the District Office and the Colleges
- Addressing all audit findings
- Establishing strategies to improve the management of the OPEB debt
- Providing an executive-level staff turnover analysis and recommendations to retain these staff at the district
In accordance with federal regulations and the *Policy on Commission Actions on Institutions*, compliance requirements must be addressed and the institution must demonstrate that it has resolved deficiencies and aligned with Standards within three years of first receiving notification of noncompliance, by January 2023. If the institution cannot document that it has come into compliance within this designated period, the Commission will take adverse action.

**Next Steps**

The Peer Review Team Report provides details of the peer review team’s findings. The guidance and recommendations contained in the Peer Review Team Report represent the best advice of the team at the time of the visit but may not describe all that is necessary for the college to improve or to come into compliance. A final copy of the Peer Review Team Report is attached. For your records, we have also included a final copy of the Peer Review Team Report from the Special Visit conducted in December 2020, as the Commission has now taken action based on these findings.

The Commission requires that you disseminate the ISER, the Peer Review Team Reports, and this letter to those who were signatories of the ISER, and that you make these documents available to all campus constituencies and the public by placing copies on the College website within seven business days of the receipt of this letter.3 Please note that in response to public interest in accreditation, the Commission requires institutions to post current accreditation information on a Web page no more than one click from the institution’s home page. In keeping with ACCJC policy, the Commission action will also be posted on the ACCJC website within 30 days of the date of the Commission’s action.

On behalf of the Commission, we wish to express appreciation for the diligent work and thoughtful reflection that Merritt College undertook to prepare for this review. These efforts confirm that peer review can serve well the multiple constituencies of higher education by both ensuring and encouraging institutional quality and effectiveness.

If you have any questions about this letter or the Commission’s action, please feel free to contact Dr. Stephanie Droker or the vice president that has been assigned as liaison to your institution.

Sincerely,

Stephanie Droker, Ed.D.  Sonya Christian, Ed.D.

cc: Dr. Denise Richardson, Accreditation Liaison Officer  Dr. Jannett Jackson, Interim Chancellor, Peralta Community College District

Attachments

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3 See *Policy on Public Disclosure and Confidentiality*, Part B, Section II.