REPORT OF THE WSCUC VISITING TEAM

SEEKING ACCREDITATION VISIT 2

For Institutions Seeking Initial Accreditation

To: **California Health Sciences University**

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SECTION I – OVERVIEW AND CONTEXT

A. Description of Institution

California Health Sciences University (CHSU) was founded in 2012 as a means of addressing the shortage of health care professionals in the San Joaquin Valley. The stated institutional mission aims to "improve healthcare outcomes of people living in Central California by providing highly trained, collaborative and compassionate healthcare professionals and by conducting high-impact basic and clinical research". CHSU seeks to accomplish this mission through seven core values (integrity, excellence, collaboration, diversity, innovation stewardship and growth) with the vision of one day being Central California's most prominent health sciences university.

Currently CHSU is a single doctoral-program institution with one school, the College of Pharmacy (COP). The university was deemed eligible for WSCUC candidacy in 2013, and the COP obtained candidacy status from the Accreditation Council for Pharmacy Education (ACPE) in 2016. The university is simultaneously seeking WSCUC and ACPE accreditation, as well as planning for an expansion of additional programs in osteopathic medicine and occupational therapy. The new College of Osteopathic Medicine is in the early stages of implementation, which includes a master plan for a new campus. The new site will reportedly be the "permanent" campus located on approximately 60 acres within the Clovis Research and Technology Park, which is less than a mile from Clovis Community Hospital. This effort aligns with the university's strategic priorities that include enhancing the learning environment (Goal 1), and opening a second health professional college or program (Goal 6).

B. The Institution's Seeking Accreditation Visit Report: Quality and Rigor of the Review and Report

The institutional report was extremely thorough and well presented. Above all, the report demonstrated that CHSU took the Commission recommendations seriously and used them as impetus for further self-scrutiny and organizational development. The university opted to explore every Criteria for Review (CFR), even though they were only required to respond to selected CFRs as highlighted by the Commission. The team focused primarily on those CFRs where the Commission required improvement, but some areas were also covered that had already been determined acceptable. The institution thereby invited further scrutiny beyond what was expected, and when questioned why they took this approach, administrators stated that they did this in the spirit of continuous improvement. With this understanding the team was impressed by the university's openness to the process and sincere eagerness to fully meet WSCUC Standards.

C. Response to Issues Raised in Past Commission Letters

The report addresses each recommendation of the Action Letter in detail as well as providing an update on what has changed since the last visit beyond the recommendations. In the first Seeking Accreditation Visit (SAV) the team found the university had already met many CFRs at the level of Initial Accreditation. For the second visit the Commission directed that CHSU to pay special attention to a specific subset of CFRs under each Standard.

Under Standard 1 the university was asked to provide evidence of student learning outcomes, measures of retention and completion, and time to degree (CFR 1.2), and provide evidence of databased decision making and planning (CFR 1.6). Under Standard 2 CHSU was expected to expand quality assurance processes to accommodate additional programs, and develop competencies reflective of higher order learning appropriate for graduate education

(CFR 2.2, 2.3, 2.4); to further develop student learning outcomes, program review, and student success—including the assessment of the co-curriculum (CFR 2.6, 2.7, 2.10, 2.11), and to enhance student support services by making them more systematic and comprehensive (CFR 2.11, 2.12, 2.13, 2.14). Within Standard 3 CHSU was asked to ensure that ample time is made available for faculty and staff development (CFR 3.3), that a long-term, formal commitment from the university's owners is demonstrated that will strengthen CHSU's assurance of sustainability (CFR 3.4, 3.5), and that a dedicated Chief Financial Officer (CFO) be identified (CFR 3.7, 3.8). Finally, under Standard 4 the Commission directed the institution to ensure that leadership at all levels is committed to decision making based on inquiry, evidence and evaluation (CFR 4.1, 4.3, 4.5); to engage in institutional reflection and planning to define the future direction of the university (CFR 4.6, 4.7); and to secure appropriate capacity in institutional research (CFR 4.2).

There has been significant progress made in all of the areas identified by the Commission. Nevertheless, some aspects still seem to be in a planning mode. The evaluation below details the numerous accomplishments and advancements made since the first Seeking Accreditation Visit, and pinpoints some areas in need of further development

SECTION II – EVALUATION OF INSTITUTIONAL COMPLIANCE WITH WSCUC STANDARDS

Standard 1. Defining Institutional Purposes and Ensuring Educational Objectives

Under WSCUC's first Standard institutions are expected to demonstrate that educational objectives are consistent with the university's mission and values, and are well understood by the internal community, external stakeholders and the general public (1.2). CHSU was asked to provide evidence of this, and it was clear to the team that the university made every effort to meet this request. In the opinion of the team, the university's mission runs through every major initiative and is deeply integrated into the curriculum.

CHSU has clearly-stated educational objectives and well-defined assessment processes (CFR 1.2). Program learning outcomes (PLOs) are designed to meet professional accreditation standards and to be "assessable, comprehensive and contemporary, congruent, credible". Pharmacy faculty were involved in tailoring the CHSU COP program to the Center for the Advancement of Pharmacy Education (CAPE)/ACPE Standards. Interviews with both faculty and students suggest that these criteria are well understood by all constituents (CFR 1.2). Syllabi, for instance, are constructed using a standardized template which includes purpose, prerequisites, course learning outcomes (CLOs), specification of how CLOs meet professional and WSCUC standards and the levels of Bloom's or Miller's hierarchies that are expected. Methods by which these are assessed are also published in every class syllabus. The program and course learning outcomes will generate evidence for student achievement of learning outcomes, retention and completion (CFR 1.2, 1.6, 2.2). Retention is stated on the university's website, and the university is planning to provide other evidence of student achievement publically as well.

Reporting of outcomes-based, direct assessment of PLOs by the institution has not yet begun. CHSU administrators and faculty explained that until the first class has completed the whole program, assessment of PLOs cannot yield useful information. Instead, CHSU COP uses an analysis of scores on the national Pharmacy Curriculum Outcomes Assessment exam that have been mapped to relevant or associated PLOs. Outcome and learning data also exist in Examsoft, Team-Based Learning records and the CHSUSync database, so it is possible to analyze accumulated data for at least some of PLOs and make results public for the years completed this far. Retention and persistence data show high persistence rates for the first three cohorts, but until these cohorts graduate, completion and time-to-degree data will not be fully available.

Based on findings from the SAV1 the Commission also underlined the importance for CHSU to accurately represent their academic goals and truthfully represent their programs to the public. For example, student learning outcomes as they were originally defined needed to be refined to ensure graduate-level mastery. The university was asked to continue to enhance student services and grievance protocols. These expectations were aimed primarily at improving the student experience, but the requirement was meant to take into account the context of data-driven decision making. Overall the team found confirmation of development along these lines, as well as evidence of their impact. Students from all cohorts, for example, were eager to verify that their experience at CHSU was parallel to their expectations as prospects. The students appear to be sincerely satisfied with their education and frequently provided examples of how the curriculum, team-based pedagogy, and learning goals were highly effective.

The university leadership designed an overarching framework that is appropriate to health care providers in multiple professions (CFR1.6). This consists of a set of 11 core Global Learning Outcomes (GLOs), which will be common to all colleges as new programs emerge, and

an additional 12th GLO that is specific to each particular profession. GLOs for Pharmacy are in place. A GLO committee chaired by the new director of institutional assessment effectiveness research and compliance (DIAERC) is developing rubrics drawn from sources across health professions as well as the American Association of Colleges and Universities with their Liberal Education and America's Promise outcomes and Valid Assessment of Learning in Undergraduate Education rubrics. In addition, they have supplemented these resources with literature on leadership, emotional intelligence, moral development, teamwork and critical thinking. Faculty serve on the GLO committee and the Quality Assurance Committee (QAIC). As members of these committees faculty are directly involved in the development of these rubrics, and once developed, the faculty as a whole will review them. Part of the new faculty orientation and onboarding process includes training in the essentials of COP assessment systems. Students receive training during a week-long student orientation that has been added to the program to provide grounding in the GLOs, the Team-Based Learning approach, program logistics, assessment and student services. Students report this orientation is highly valued in helping them understand "how it all works". Based on student feedback from focus groups in the first year, a new required course, "Leadership in Life Long Learning" has been introduced at the start of the program in which students "practice applying skills covered in the GLOs."

In fall 2015 the COP replaced the original PLOs with educational outcomes derived from the Center for the Advancement of Pharmacy Education (CAPE) developed by the American Association of Colleges of Pharmacy (AACP) in order to "guide curriculum planning, delivery, and assessment" of colleges of pharmacy. CHSU's intention is to align all PLOs, course learning outcomes (CLOs) and co-curricular experiences with CAPE standards. The resulting PLOs are more current, challenging and appropriate for graduate-level health professions, and the university states that they believe they will ultimately produce the kind of leaders needed.

Standard 2. Achieving Educational Objectives Through Core Functions

CHSU has made impressive progress in building infrastructure capable of steering the institution as it expands from a single program to multiple disciplines. Recent hires include a provost/senior vice president, vice president of student affairs and enrollment, director of institutional assessment (effectiveness, research and compliance), controller, director of development and communications, executive director for information technology, help desk technician, and human resources manager. A dean of pharmacy has also been hired to provide leadership and oversight for the development of COP and will start in July 2017. Most recently, a dean for the proposed College of Osteopathic Medicine has been hired. The CHSU administrative team is responsible for the development and oversight of quality assurance processes for additional programs as CHSU expands. Committees are in place within the COP; such as: College Administrative Committee, Professional Education Committee, Admissions and Progression Committee, Honor Council, and Awards Committee (CFR 2.2).

CHSU leadership is aware of the reality that growth at the scale and speed planned is placing additional burdens on personnel, and in an attempt to mitigate this are introducing management procedures and information management systems to increase capacity. For example, CHSU has adopted a process of responsibility charting known as RACI in order to clarify who it Responsible, Accountable, Consulted, or Informed. Due to its highly detailed division of processes into multiple distinct tasks and responsibilities it seemed to the team that rather than simplifying an already complex set of formal systems, it has the potential to make tracking and prioritizing more difficult. Since some of the management systems are imported from outside the institution in some cases they seem not yet fully embraced by the CHSU culture.

CHSU has integrated its assessment of student learning into student services in accordance with the Student Affairs Division strategic plan (CFR 2.11). The plan incorporates strategic enrollment management, comprehensive policies and procedures, programs for student development, academic advising, career services, student health and wellness. The COP has amended its admissions requirements to permit senior undergraduates to enroll in Academic Year (AY) 2017. No undergraduates have been enrolled so far, yet faculty and student services staff report that in preparation they are reviewing COP services to support any less well prepared students.

There has been considerable revision of the curriculum since the last visit. These changes are referred to by the provost and faculty as curriculum 1.0, 1.5, and 2.0. Learning outcomes in curriculum 1.5 are based on those from ACPE and according to the provost the change to 2.0 is designed to make the achievement of desired CLOs and PLOs more easily measured (CFR 2.6). Outcomes assessed at present occurs through an array of methods including direct assessment through examinations, clinical examinations, preceptor evaluation from practice sites and course evaluations (CFR 2.6). At this time, data are not integrated across data systems and the results of assessments are not systematically tracked and summarized. This is anticipated by university faculty to begin after the introduction of curriculum 2.0.

At present CHSU assesses the achievement of COP student learning by comparison with those of other colleges of pharmacy through the Pharmacy Curriculum Outcomes Assessment (PCOA). The inaugural class opted to take the test, which focuses on knowledge acquisition in Pharmacy. The test evaluates students on all the PLOs identified for the COP curriculum and currently serves as a proxy for direct measures of PLOs by COP faculty; COP students scored near the median for year two in basic biomedical sciences, pharmaceutical science and clinical

sciences. The team urges COP to move quickly towards measurement of its own data on PLOs as well (CFR 2.6, 2.7, 2.10, 2.11).

Since the last visit an experienced vice president for student affairs has built an Office of Student Services that is impressive for such a small, new institution. CHSU collects data on prospective, admitted, and matriculated students disaggregated by demographics including gender, ethnicity, Grade Point Average (GPA), first language, college graduated from, professional license and place of origin (CFR 2.10). Student services are also infused with assessment. Reports from faculty, student services staff, and students themselves rate these services highly. Retention and academic progress data is collected for COP indicating a retention rate of 91% at year 3 of the first cohort. The DIAERC and the Admissions and Progression Committee have begun to track students through the program. If a student is deemed "at risk" a range of student services are made available. CHSU has implemented "intrusive" advising for students at risk, which identifies students who fall below target scores on daily quizzes, midterms and finals, and defines a clear pathway for remediation and referral to student services. Students interviewed were unanimous in their enthusiastic praise for the quality of Student Affairs Services emphasizing timely intervention, scope of services and the professionalism of the staff. Feedback from students is listened to and acted upon, and students expressed appreciation for the responsiveness of the office.

In the COP, an innovative Team-Based Learning process is now firmly established. The daily individual readiness assurance test (IRATS) and team readiness assurance test (TRATS) provide continuous evaluation of student learning and offer students clear guidance as to expectations. At mid semester students take an Objective Structured Clinical Examination (OSCE) and final exams are comprehensive. Technological tools such as ExamSoft and a Comprehensive Course Management System are used to collect ongoing student performance

data. At the moment much of this information is in different places so it would be important to curate and analyze the data so they can be reviewed as a part of program review. The provost and DIAERC are currently evaluating analytics platforms for this purpose.

Academic advising and tutoring services are linked to academic performance. There is a peer-to-peer tutoring program through the Office of the Dean, where at risk students have priority. In the event of a lower than target grade (75%) in the first exam, tutoring is offered to improve study habits and test-taking skills. A program and policies are in place for students with disabilities. Career services are also accessible through a web portal CareerSync that provides information about internships, jobs, and career enrichment workshops. CHSU makes limited funding available to students to attend professional meetings and to support co-curricular activities.

An Ombuds service staffed by volunteers makes a safe space available for students, staff and faculty to discuss any university related problems; statistics are kept to track the kinds of complaints encountered. A training manual for Ombuds volunteers based on the principles of the University and College Ombuds Association Handbook is used. Two trainings have been completed and more are planned. All services are evaluated based on user feedback and utilization data is collected.

The university has made significant strides to actively foster student engagement within the profession and the local community. CHSU offers programs like Próspero, SAFE and Opioid Intervention that provide needed services for the general public. SAFE and Opioid Intervention give students the opportunity to practice community screenings and drug intervention strategies; Próspero is a 5 year, $250000 grant program with CVS Health focused on meeting the pharmacy/health needs of the Hispanic/Latin@ population. Students are selected for the Student Ambassador Program to represent the university in various external events serving to raise the

positive image of the institution in the local area. Students are encouraged to join pharmacy-related professional organizations and policies and procedures are available for setting up student organizations. A Post Graduate Development Program has been set up recently, the goal of which is to help students develop strategies for post-graduate professional success. In on campus interviews with students from all three cohorts, students were effusive about the quality of student services citing examples of ways in which they had been helped to succeed.

A university wide 5-year assessment cycle has been developed that requires that two GLOs to be assessed each year. The report states that "significant alignment among programs" will be enabled by this integration and will facilitate inter-professional education and assessment. Data on two GLOs from the APCE standards were available and have been used to modify curriculum. So far this assessment cycle does not include the reporting of university PLOs—although data collection and analysis have clearly begun. CHSU has separated its assessment plan into university-wide assessment and program assessment. Assessment is designed to be thorough and comprehensive, and once fully implemented will entail the full cycle of assessment leading to program review and action planning based on results. The systems remain somewhat cumbersome, however, and the team heard reports from a few faculty that find it was overwhelming and sometimes "top down". There is ample use of instruments for data collection, but until more data is available to be analyzed at an institutional and programmatic level it is not clear how this directly serves to aid prioritization and ensure quality and institutional development. The SII form, for instance, which is used for multiple purposes is lengthy and requests information that is hard to codify. There is also frequent use of student focus groups to evaluate aspects of the program, and although they claim to be confidential, in a small institution this may be an unrealistic expectation.

On the whole the team was very impressed with the progress made by CHSU to enhance their quality assurance methods, and was confident that the university will be able to accommodate additional programs with the current approach (CFR 2.2, 2.3, 2.4). Some refinement, or right-sizing, is still needed, but faculty and administrators are well aware of the work that needs to be done. In addition, the alignment of learning goals is admirable, as is the extent to which assessment has been brought into the comprehensive services offered through Student Affairs (CFR 2.11, 2.12, 2.13, 2.14). The team encourages CHSU not to rest on these successes, but rather to continue to cultivate awareness and responsibility among faculty and staff throughout the institution.

Standard 3: Developing and Applying Resources and Organizational Structures to Ensure Quality and Sustainability

The July 2015 Commission Action Letter stated that "CHSU has a diverse and experienced Board of Trustees that independently exercises appropriate institutional oversight and a leadership team characterized by integrity and high performance. According to the team, the institution has also assembled 'an accomplished and diverse founding faculty' and has recruitment, hiring, orientation, incentive, and evaluation practices in place that align with the institution's purposes and objectives. Through shared governance, faculty exercise academic leadership (CFR 3.1, 3.2, 3.6, 3.9, 3.10)".

It was recommended that the institution should pay special attention to faculty development, in the context of limited time and support for curricular and co-curricular activities. CHSU was encouraged to learn from faculty development efforts for the improvement of development opportunities. For the current review, the 2017 team was able to observe that, in addition to a robust new hire orientation, multiple opportunities for faculty development exist.

CHSU has dedicated funds for faculty and staff development, reflected by the budget and by the in-house development opportunities focused on curriculum, instruction, teaching technology, and assessment. A Teaching Excellence Academy and a Leadership Fellows Program have been established. The utility and effectiveness of faculty and staff trainings are assessed both formally and informally. In a spring 2016 survey, between 60 and 70 percent of faculty agreed or strongly agreed they had adequate support and guidance for career and development. CHSU also utilizes data from student surveys to assess needs for faculty development.

It has to be noted that CHSU has many faculty members that are new to leadership roles, and some new to the profession. The institution also has a combination of characteristics that may be particularly challenging for new faculty, such as being a new university and utilizing a Team-Based Learning model. The team recommends that faculty development be further aligned with strengthening the sense of community, for example, creating a mentorship program (CFR 3.3).

In the 2015 Commission Action Letter it was concluded that CHSU was financially stable, with sufficient resources for its only Doctor of Pharmacy (PharmD) program. The letter also stated that "while the primary source of operational funding is tuition and fees, financial viability depends on support from California Health Sciences University, LLC. The team concluded that a long-term, formal commitment from the university's owners would strengthen CHSU's assurance of sustainability."

An independent financial statement audit report was presented with the current institutional report. It includes an analysis of cash flow projections, revenues, available lines of credit, and other capital resources. A pro-forma budget description for the next four years was also provided, together with an explanation of the accumulated deficit. The reasons provided for

the deficit were: faculty hired early, infrastructure investment, and a one-year delay in achieving ACPE candidate status.

Currently, CHSU has $27 million in available financial resources to support anticipated accumulated deficits. Financial resources are derived from (1) $15 million in lines of credit, (2) $7 million in capital invested by founding members and (3) $5 million in formally committed capital from the founding members.

The institution has not been able to meet its enrollment targets due to increased competition and to the fact that the pharmacy program only received Candidacy status in summer 2016. It is stated that the achievement of ACPE candidate status will likely positively affect enrollment. Partnerships, developing pathways from high school through community colleges and from 4-year institutions, new marketing strategies, elimination of the baccalaureate degree as an admission requirement, establishment of an ambassador program, international student outreach, and grants and scholarships are also being pursued for enrollment purposes. The university is considering a change to a three-year, year-round pharmacy program instead of its current 4-year program. This would decrease the time needed to eliminate accumulated deficits.

The institution is assessing feasibility for a number of new academic programs, most importantly in occupational therapy and osteopathic medicine. In addition to its original facility CHSU opened an annex in August 2016 and is designing its future permanent buildings and campus.

While achieving a positive cash flow will require a longer time than anticipated, and while the impact of the possible additional programs on revenue is not yet known, CHSU is financially stable, has a solid audit system, and has sufficient resources for its current pharmacy program. The institution has a plan to eliminate its deficit. Enrollment management is featured prominently in the strategic plan. The institution is considering diversifying revenue sources

through additional degree programs. The impact of these changes will need to be further assessed in future reviews (CFR 3.4).

The information resources, services, and facilities are consistent with the institution's educational objectives and are aligned with student learning outcomes. There is also evidence of increased investment and continuous information technology improvement, as reflected in increases in personnel and platform enhancements (CFR 3.5). Additional enrollment management system investments are recommended, such as a Customer Relationship Management System, to further support recruitment efforts (CFR3.4, CFR 3.5).

The 2015 Commission Action Letter noted that the university had a full-time chief executive officer and an administrative team sufficient in number and qualifications for a university granting a single degree. At the time, the chief financial officer (CFO) worked for the university on a part-time basis and was employed full-time by the parent company, which presented a potential conflict of interest. Currently, the president serves as the university's CFO, in addition to her role as CEO. She is supported in this capacity by a full-time controller and external consultant. The current review paid particular attention to the ability of this team to cover all the needs of the institution and to whether it provides the appropriate expertise. The president has decades of experience in the banking industry and has served as senior vice president and regional manager of a bank. The controller has experience as finance director and senior auditor for public and private entities. This role supports the president through financial reporting, external financial statements, audits, business projections, risk management, implementation of institutional revenue options and expenditure guidelines, and assistance with annual operating budgets, business plans, and presentation of financial reports. Departmental budgets are reviewed on a monthly basis.

The team concluded that the institution's organizational structures and decision making processes are clear and consistent with its purposes, support effective decision making, and place priority on sustaining institutional capacity and educational effectiveness. It also concluded that, based on the evidence provided by the institution, and in accordance with WSCUC's recently-updated interpretation of CFR 3.8, CHSU has the leadership, the expertise, and the capacity to appropriately oversee its financial operations and activities (CFR 3.7, 3.8). As CHSU expands, it will likely employ a full-time CFO.

Standard 4: Creating an Organization Committed to Quality Assurance, Institutional Learning, and Improvement

In 2015 the Commission found that CHSU's faculty engaged in an ongoing inquiry into the institution's teaching and learning processes and into the conditions and practices which ensure that students meet expected standards of performance. It also found that faculty already used the results of this inquiry to make needed improvements (CFR 4.4). It was also concluded that CHSU had an ambitious assessment plan and strong commitment to inquiry, evidence, and evaluation. Quality-assurance processes had been planned and were partially implemented. There was a need to allow for their full deployment during cohort maturation and the resulting accumulation of data.

In the current 2017 review, the team was particularly focused on the evolution of these processes, the institutional commitment to improvement, and the broad involvement of appropriate stakeholders. It was found that CHSU is using a systematic approach to assessment and evaluation in all academic and non-academic areas, to assure and continually improve quality (CFR 4.1). Institutional and program-level assessment plans exist. A review of these plans reveals a systematic intention to assess policies, structures, governance, services, inputs,

procedures, outcomes, and performance across all areas of the CHSU mission: teaching and learning, scholarship and research, service, practice and community engagement.

Evidence of the use of the data can be found in the archived Assessment Reporting Forms, which require assessors to identify strengths, insights, improvement, assess the process and/or data as well, plan a strategy to implement improvements, identify those who will be charged with implementing improvements, specify a follow up date, and propose a process and time for the next cycle of assessment.

The stated continuous-quality improvement process includes several steps: 1) Collect, 2) Analyze 3) Interpret, 4) Action and 5) Close the Loop. These steps have been incorporated into the assessment process described in the Assessment Reporting Forms. The process has resulted in improvements in many areas such as instruction, experiential education, student services, as well as a variety of structures, policies, and procedures. It has also led to the development of CHSU's Global Learning Outcomes.

The team found that CHSU's leadership at all levels is committed to improvement of teaching, learning, and the campus environment, based on the results of inquiry, evidence, and evaluation. The team also found broad and deep commitment to CHSU's values statements pertaining to growth and excellence (CFR 4.3). While the institution does not yet have alumni, various stakeholders (including Board of Trustees, faculty, staff, community practitioners, area health care professionals, students and their parents) are involved in the assessment and alignment of CHSU's offerings (CFR 4.5). Whereas the team found a committed, widespread, and consistent assessment approach, there was still concern around the volume and the integration of assessment activities. It was recommended for CHSU to prioritize and/or consolidate the vast number of quality assurance systems and processes in order to focus on the institution's key performance indicators (CFR 4.1).

A highly participative Enterprise Risk Management (ERM) process was implemented in 2015. ERM involves identifying particular circumstances relevant to the institutional objectives, assessing them in terms of likelihood and magnitude of impact, determining a response strategy, and monitoring progress. An ERM Executive Committee was formed to ensure the timely completion of risk assessments for all areas of the university. The ERM process is an important component of weighing internal and environmental changes for planning, new program development, and resource allocation (CFR 4.7).

The team noted that there is overlap among the strategic plan, the assessment plans, and the activities covered in the ERM plan. While this leads to broad opportunity for stakeholder participation, there is a different level of detail and a different focus for each of these plans. As the institution develops further, it will be beneficial to engage faculty and staff in assessing both opportunities and risks, and in developing high-level institutional strategic goals (CFR 4.6, 4.7).

The previous team report found that in 2015 CHSU lacked the appropriate capacity for performing institutional research. A director was hired in February 2016, bringing vast experience in assessment and institutional research to the position. The position provides leadership for institutional and program strategic, tactical and operational planning; assessment; accreditation; and institutional and organizational effectiveness. Compliance was added to the job description in summer 2016. By providing relevant, timely and accurate information and analysis, the director of assessment, effectiveness, research, and compliance assists in the formulation of issues, analysis of trends and outcomes, and provides an invaluable contribution to strategic planning, evaluation, and the development of institutional policy. The institution currently has an institutional research capacity consistent with its purposes and characteristics (CFR 4.2).

Recent decisions taken with the support of institutional research include: a) starting the reporting process through the Integrated Postsecondary Education data System (IPEDS), b) following the trend of other professional programs to teach year-round, shortening the chronological length from four to three years; c) considering new programs; and d) the development of the CHSUsync system, to ensure the best sources of data are being captured for use across the institution for admissions, enrollment, co-curricular assessment and other vital student and academic affairs purposes. The institution is commended for embracing a sense of urgency in building its comprehensive institutional research capacity. The impact of changes, such as the planned change of admission criteria should be followed up, addressed as needed and reported in future reports.

SECTION III. FINDINGS, COMMENDATIONS AND RECOMMENDATIONS

Key Findings

Although only the Commission is authorized to make the final determination as to whether or not an institution is in compliance with WSCUC Standards, the team found that CHSU meets all four Standards at a level sufficient for Initial Accreditation.

Standard 1: The team found that CHSU defines its purposes and establishes educational objectives aligned with those purposes. CHSU has a clear and explicit sense of its values and character and its distinctive elements. The university has a vibrant place in higher education and society, particularly the Central Valley, and contributes to the public good. CHSU functions with integrity, transparency, and autonomy. The team found that CHSU meets this Standard at a level sufficient for Initial Accreditation.

Standard 2: CHSU achieves its purposes and attains its objectives through teaching and learning, scholarship and creative activity, and support for student learning and success. CHSU demonstrates that these functions are performed effectively by evaluating evidence of learning and striving to support each student. The team found that CHSU meets this Standard at a level sufficient for Initial Accreditation.

Standard 3: CHSU sustains operations and supports the achievement of its educational objectives through investments in human, physical, fiscal, technological and information resources and through an appropriate and effective set of organizational and decision-making structures. The team found that CHSU meets this Standard at a level sufficient for Initial Accreditation.

Standard 4: CHSU engages in sustained, evidence-based, and participatory self-reflection about how effectively it is accomplishing its purposes and achieving its educational objectives. CHSU considers the changing environment as it envisions its future. The results of institutional

inquiry, research, and data collection are used to establish priorities, to plan, and to improve quality and effectiveness. The team found that CHSU meets this Standard at a level sufficient for Initial Accreditation.

Commendations & Recommendations

The team commends CHSU for developing increasingly systematic and comprehensive student advising and other student support services. Clear progress was demonstrated in the assessment of co-curricular activities through transcripts aligned with Global Learning Outcomes. While the team applauds the efforts of faculty, staff, and administrators in these achievements, sustained focus on student support and assessment must continue. The team encourages CHSU to further cultivate the collective awareness and responsibility of student learning assessment by faculty through the design of rubrics, analysis of assessment data, and action planning (2.4). *The team also recommends that by the time of the next visit CHSU make any available evidence of student achievement accessible to the public, including results from assessments of student learning outcomes (1.2).*

Since the first Seeking Accreditation Visit CHSU hired a director of institutional assessment effectiveness research and compliance, and the team found that the positive, wide-ranging impact of this new position cannot be overstated. CHSU should therefore be commended for embracing the sense of urgency to build a comprehensive institutional research capacity. The institution's data collection, analysis, and reporting systems are highly complex and labor intensive in many areas, however, and in some areas key elements are lacking. *In particular, the team recommends that the university prioritizes and/or consolidates their vast number of quality assurance systems in order to streamline faculty efforts and provide deans and administrators access to focused information , for example through the design of dashboards to be used by*

multiple constituents (4.1). And in order to provide the necessary data for student recruiting, the team recommends that CHSU secure and implement enrollment management tools, such as a Customer Relationship Management system (3.4, 3.5).

Finally, the team was deeply impressed with the dedication of CHSU faculty and staff. It was clear throughout the review that the progress made since the first visit was due to the commitment of everyone at the university to its mission and vision. And in addition, the team wishes to particularly commend the university for expanding and strengthening its institutional leadership characterized by integrity, high performance, responsibility and accountability. The demands of teaching at a fast-paced, start-up institution with a specialized pedagogy are significant, however, and as the university continues to develop and expand it will need to pay attention to faculty life to ensure engagement and productivity. *The team therefore recommends that CHSU enhance faculty development efforts to strengthen the sense of community among faculty, for example, by creating a mentorship program for faculty new to the profession.*