REPORT OF THE WSCUC TEAM

For Reaffirmation of Accreditation

To California Health Sciences University

February 27, 2024 – March 1, 2024

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The team evaluated the institution under the 2013 Standards of Accreditation and prepared this report containing its collective evaluation for consideration and action by the institution and by the WASC Senior College and University Commission (WSCUC). The formal action concerning the institution's status is taken by the Commission and is described in a letter from the Commission to the institution. This report and the Commission letter are made available to the public by publication on the WSCUC website.

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Section I – Overview and Context

A. Description of Institution and Accreditation History

California Health Sciences University (CHSU) was founded in 2012 by the Assemi family to address the shortage of healthcare professionals in the San Joaquin Valley of Central California. The main campus is located on a 123-acre site in Clovis, California, with a secondary instructional site in the same city. As of January 2024, the institution enrolled 492 doctorate and 13 master's students across three graduate programs: Doctor of Pharmacy (PharmD), Doctor of Osteopathy (DO), and the Master of Science in Biomedical Sciences (MSBS). CHSU does not offer instruction via distance education, confirmed in attachment *g.i. Distance Education-Faculty Use.*

CHSU seeks to provide a much-needed pathway for prospective healthcare students of California's Central Valley with the goal of retaining them close to their roots to serve the local community. 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." The university seeks to accomplish its mission through seven core values (integrity, excellence, collaboration, innovation, transparency, scholarship, and continuous improvement) with the vision of becoming Central California's most prominent health sciences university.

The College of Pharmacy (COP) opened in 2014 and offered CHSU's first program, the PharmD. The program achieved Candidate status through the Accreditation Council for Pharmacy Education (ACPE), but in August 2020 ACPE withdrew Candidate accreditation due to CHSU's failure to meet three accreditation standards. Accordingly, the COP has implemented a teach-out plan, and the final cohort of ten students is scheduled to graduate in May 2024.

The College of Osteopathic Medicine (COM) was created in 2020 and sought accreditation from the American Osteopathic Association's Commission on Osteopathic College Accreditation (COCA) for a Doctor of Osteopathy (DO) program. The COM was granted Candidacy status and successfully completed its pre-accreditation operations site visit and review in April 2020. COCA performed a site visit September 11-14, 2023, and on December 21, 2023, COCA notified CHSU that it had voted to defer its decision on CHSU COM's accreditation status until documentation of CHSU COM's approval of its first class of students for graduation and its 2024 National Resident Matching Program (NRMP) Match results have been received and reviewed.¹ [According to NMRP's website, the NRMP was established in 1952 to "... provide an orderly and fair mechanism for matching the preferences of applicants for U.S. residency positions with the preferences of residency program directors." (nmrp.org, accessed April 4, 2024).] The COM will graduate its first class of DO students in May 2024 and anticipates receiving full accreditation around that time.

CHSU's newest program, the Master of Sciences in Biomedical Sciences (MSBS), was approved by WSCUC on April 17, 2023 and started its first cohort in August 2023. The program is offered through the College of Biosciences and Health Professions (CBHP) and is designed to improve students' candidature for professional healthcare schools or support students' academic or research careers.

At the time of the site visit, the US Department of Education (ED) had approved CHSU's PharmD and MSBS degrees for Title IV financial aid, and upon the advice from the ED, CHSU

¹ The Executive Committee (EC) of COCA granted accreditation to CHSU-COM on April 4, 2024; this accreditation action is valid for seven years. See page 38 of this report for additional information.

will pursue Title IV approval for the DO program after full programmatic accreditation has been awarded by COCA.

CHSU's initial Eligibility Review was conducted by WSCUC in 2013, and Seeking Accreditation Visits were held in 2015 and 2017. Candidacy status was granted 2015, and Initial Accreditation was achieved in 2018. A follow-up Special Visit took place in November 2019, and the Commission noted four recommendations in their action letter dated February 26, 2020.

B. Description of Team's Review Process

The peer review team was constituted in June 2023. The team received CHSU's *Institutional Report for Reaffirmation of Accreditation* on June 28, 2023, and a team video conference call was held on August 16, 2023. During the call team member assignments were made in preparation for the Offsite Review (OSR) which took place via video teleconference on September 6-7, 2023. At the conclusion of the OSR, the team presented specific Lines of Inquiry to institutional representatives during the video conference. Formal documentation of the Lines of Inquiry, including requests for additional evidence, was provided to CHSU on September 10, 2023. After the additional documentation was provided, the team convened for a video conference meeting on January 24, 2024, in advance of the onsite visit. After this meeting the team requested changes to the agenda and additional evidence.

The in-person WSCUC site visit took place on February 28– March 1, 2024. One team member was unable to participate in the visit due to an unexpected schedule conflict, but the team member contributed to sections of the team report where in-person review was deemed unnecessary. During the visit, the team met with students, faculty, staff, administration, senior leadership, committees, board members, and the institution's founders in 15 meetings scheduled during a two-day period. The open meetings with students, faculty, and staff included

approximately 29, 25, and 35 individuals, respectively. In addition, team members toured both CHSU instructional sites. Throughout the visit, the assistant chair monitored a confidential email account to which the campus community had been invited to submit comments; a total of three emails were received, and comments relevant to the review have been included in this report.

Upon completion of the visit, the team developed a list of commendations and recommendations which was shared with the CHSU community on March 1, 2024. Work on the *Report of the WSCUC Team for Reaffirmation of Accreditation* continued after the team's departure from the onsite visit, and editing continued during the four weeks following the visit's conclusion.

C. Institution's Reaccreditation Report and Update: Quality and Rigor of the Report and Supporting Evidence

CHSU's institutional report was comprehensive and followed the recommended format, including component essays. Interviews with the WSCUC Steering Committee validated the report's description of self-study preparation. In brief, CHSU established "learning circles" which included a cross section of institutional representatives; feedback from these focused communities was shared with the WSCUC Steering Committee, and one individual consolidated input and drafted the report. The report underscored the institution's commitment to its local community and its goal of enhancing access to healthcare, addressing a clear unmet need.

However, aspects of the institutional report proved challenging for the team. The report lacked in-depth analysis in several key areas including detailed strategic growth plans, student outcomes, methods to decrease dependence on a single family for operational funds, assessments, and critical self-analysis of data pertaining to students and programs. The identified areas for improvement noted in the *WSCUC Compliance with the Standards Worksheet* and the individual component essays were not referenced in the report's final section, "Reflection and Plans for Improvement." Some of the hyperlinks routed the reader to the university's portal, and the content was not accessible to team members. While there was reference to significant data points, the report did not evidence a comprehensive understanding of the data and its application to its students and programs, and the team only obtained program learning outcome data after the on-campus interviews. Consequently, the team requested a substantial amount of supplementary documentation, and the institution's new ALO, hired two months prior to the visit, responded to these requests with grace and efficiency.

Section II – Evaluation of Institutional Essays

Component 1: Response to previous Commission actions

Prior to the site visit described in this report, CHSU's last WSCUC visit occurred in November 2019. Major changes since that time are described in Section I and include the teach out of the PharmD program and the implementation of the DO program in 2020 and MSBS program in 2023. Additionally, in 2020 CHSU completed a state-of-the-art College of Medicine building on a 123-acre site in Clovis, California.

Following the November 2019 site visit, the Commission required CHSU to respond to the following issues as noted in the February 26, 2020 action letter:

Recommendation 1: Make public disaggregated student achievement data (CFR 1.2).

CHSU publishes student achievement data on its website as required by programmatic accreditors and state regulatory agencies. On-time completion, employment, and licensure examination pass rates are published using California's Bureau for Private Postsecondary Education (BPPE) *School Performance Fact Sheets* for all programs when such data exists. The PharmD program publishes "ACPE Quality Indicators" which include first-time North American Pharmacist Licensure Examination® (NAPLEX) exam pass rates, on-time graduation rates, and the percentage of students obtaining residence. For the DO program, the Comprehensive Osteopathic Medical Licensing Examination of the United States (COMLEX) exam pass rates are made public. The published student achievement data is disaggregated by student cohort.

CHSU does not, however, disaggregate data by demographic categories (CFR 2.10). Through interviews and review of data presented in the institutional report, it appears that CHSU can enhance its institutional research expertise and data governance systems. Additional detail is provided in response under Standard 4 and Component Essays 5 and 6.

Recommendation 2: Operationalize quality assurance efforts, including the new assessment framework and supporting technological infrastructure, and use the data generated to inform decision making and resource allocation (CFR 2.3, 2.4, 2.6, 2.10).

CHSU uses multiple products to support quality assurance efforts, such as SONIS (formerly Janzibar) for the student information system and ExamSoft for tracking student performance on exams. Institutional representatives expressed general satisfaction with the available technological systems.

However, the use of these systems to support quality assurance efforts remains underdeveloped. Much data is maintained at the program rather than institutional level, and institutional representatives expressed frustration with accessing information needed to do their jobs. For example, a faculty member was unable to obtain course survey data for their courses, and an academic advisor was not provided with information about their advisee's academic performance. In addition, executive leadership does not receive regular reports allowing them to track key institutional data and other quality metrics.

In general, CHSU can benefit from improved data governance systems, systematic data collection and publication to appropriate stakeholders, and the implementation of common

quality assurance processes across academic programs. Subsequent sections of this report, specifically Standards 4 and Component Essays 4, 5, and 6, provide additional details in this area.

Recommendation 3: Improve student success measures, such as licensure examination results and career outcomes, through increasingly robust academic and student support efforts (CFR 2.6, 2.10, 2.13).

Both the College of Pharmacy and College of Medicine have evidence of improvement in student success measures. The institution's website publishes licensure examination results: first time pass rates for pharmacy NAPLEX exams increased from 72% to 83% between 2019 and 2020 and from 69% to 79% between 2022 and 2023; in the College of Medicine, first time pass rates for the COMLEX Exam, Level 1 increased from 80% for the class of 2024 to 95% for the class of 2025. In 2022 CHSU pharmacy students passed the California Pharmacy Jurisprudence Examination at rates higher than the state average for the first time since program implementation in 2014 (*Institutional Report*, page 13). Both the institutional report and interviews revealed significant student support efforts, including academic counseling, tutoring, advising, education skills specialist workshops (e.g., time management), and academic interventions coordinated through the Student at Risk Committee. With the PharmD program completing teach out and the DO and MSBS program scheduled to graduate their first classes in 2024, evidence of improvement is expected in the subsequent institutional report.

Recommendation 4: Execute the university's faculty-hiring plan and ensure continuity in order to achieve institutional objectives and support the student experience (CFR 3.1).

CHSU has executed the faculty hiring plan for the College of Medicine as referenced in the WSCUC recommendation. At the time of the recommendation, COM was in its initial year of operation. By March 14, 2024, the College of Medicine faculty had grown to 81 faculty members (18 full-time, 63 adjunct or part-time). COM faculty turnover appears to have stabilized from 22.3% in the 2020 – 2021 academic year to 7.2% for the 2022 – 2023 partial academic year (as of February 16, 2023) (appendix *Employee Turnover Rate*). Institutional representatives indicated that at the time of the site visit CHSU had hired sufficient faculty to support academic programs. Furthermore, CHSU expects that once COCA accreditation is received, the DO program's reputation will increase and faculty will continue to stabilize.

Component 2: Compliance: Review under WSCUC Standards and compliance with federal requirements

Standard 1: Defining Institutional Purposes and Ensuring Educational Objectives

The institution publishes a clearly defined mission and institutional values that drive decision making. The institution seeks to provide a much-needed pathway for prospective healthcare students of the Central Valley and in California with the goal of retaining them close to their roots to serve the local community. 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." The institution carries out its mission focused on seven core values (integrity, excellence, collaboration, innovation, transparency, scholarship, and continuous improvement). (CFR 1.1)

The institution currently offers only three programs in various stages of delivery. The oldest program, the PharmD is in teach out, the DO program has yet to graduate a class, and the MSBS program just matriculated its first class of students. As a result, student achievement data is limited. CHSU makes public student achievement data as required by programmatic accrediting agencies and state regulatory bodies. (CFR 1.2)

The institution has published policies regarding academic freedom, intellectual honesty, and academic integrity, and it maintains an intellectual property policy. (CFR 1.3)

The institution's commitment to the WSCUC *Equity and Inclusion Policy* is delivered through its *Commitment to Diversity, Equity, and Inclusion Policy*, and demographic data for the 2022 – 2023 academic year showed that faculty, employees, and students were of an ethnically diverse background. (CFR 1.3, 1.4)

While the institution is primarily owned by one family, the governing board is independent and adheres to WSCUC's *Governing Board Policy*, thereby allowing CHSU to operate with appropriate autonomy. Board members are all volunteers who work towards helping and supporting the institution's mission and strategic objectives. (CFR 1.5) Interviews with members of the board confirmed that the board is engaged and committed to the CHSU's mission and works to ensure that CHSU has a strong president and senior leadership team that can manage the institution's operations.

As stated in CHSU's *Faculty Handbook*, the institution's Global Learning Outcomes (GLOs) are the guiding principles of the curricular design applicable to all CHSU education programs and include professionalism, reflector, decision maker, learner, collaborator, communicator, and practitioner. It is through these GLOs that students acquire the habits and abilities that prepare them to be effective professionals and citizens throughout their lives.

The institutional report and on-site visit confirmed that CHSU has polices, both in writing and practice, that demonstrate a commitment to transparency regarding student conduct, transparency in costs of attendance and time to completion, published policies on student grievances and complaints, refunds, the definition of the different types of academic credit, as well as grading. These policies can be found on the website, the catalog, and the handbooks. (CFR 1.6)

The institution demonstrated, through an attestation from its president, that it is committed to open and honest communication with WSCUC, and to undertaking the accreditation process with seriousness and candor, and to complying with the elements of CFR 1.8. In addition to WSCUC and its programmatic accreditors, CHSU remains in good standing with California's Bureau for Private Postsecondary Education (BPPE). (CFR 1.8)

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with Standard One.

Standard 2: Achieving Educational Outcomes Through Core Functions

CHSU's three graduate-level programs have a singular educational objective: to train the next generation of healthcare providers and researchers. To this single-purpose mission, faculty, staff, students, and administration are thoroughly committed. This commitment is seen through the curriculum of each program (see CHSU catalog), laboratory and research experiences, and clinical training. (CFR 2.1)

As of March 2024, CHSU employs 22 full-time (FT) and 63 adjunct/part-time (Non-FT) faculty allocated among the programs: PharmD (1 FT), DO (18 FT, 63 Non-FT), and MSBS (3 FT). Course offerings are found on the website, course schedule, and in the catalog. (CFR 2.1).

CHSU clearly states its purpose is to train healthcare workers who will ultimately practice in the Central Valley of California to improve the health of those in the region. These objectives and values are listed on various web pages and institutional publications. (CFR 2.2b)

CHSU's educational objectives are tied to its ability to provide a curriculum that equips graduates with the knowledge, critical and analytical thinking skills gained in the basic science years, and clinical skills developed throughout the four-year degree programs for COP and COM. Students develop these skills through core classes, laboratory rotations, research, and

programmatic activities. Policies, expectations, and program learning outcomes are communicated via the CHSU website, catalog, graduate student handbook, and new student orientation, and course learning outcomes are defined on course syllabi. In addition, Assessment and Curriculum Committees monitor attainment of these educational objectives. (CFRs 2.2, 2.2b, 2.3, 2.12)

CHSU seeks to recruit and enroll highly motivated individuals who are dedicated to delivering holistic medicine and are deeply service-oriented. Prerequisite courses, minimum Grade Point Average (GPA), and Medical College Admissions Test (MCAT) scores are published in the catalog and on the university's web pages. (CFR 2.2, 2.2b)

CHSU course offerings are designed to bring students to the forefront of knowledge and provide a solid foundation for the requirements of becoming a pharmacist or Doctor of Osteopathy. The introductory science courses and third—and fourth-year clinical rotations prepare students for residency programs. (CFR 2.2b)

The primary performance standard for each professional program is the national standardized exams provided by ACPE and COCA. The MSBS program has two tracks, the first designed for students intending to pursue medical and other professional healthcare programs and the second focused on preparing students for research careers. The program is maturing its assessment and learning standards. (CFR 2.2b)

Students attending CHSU participate in active learning exercises. Small practice groups study together in well-designed skills labs and learning spaces throughout classrooms, labs, and study areas. Students who have acquired advanced training prior to matriculation are encouraged to share with classmates their previously acquired skills and knowledge as peer coaches. (CFR 2.5)

Commitment to student success is at the core of WSCUC, COCA, and ACPE accrediting bodies. CHSU is dedicated to proactively identifying students at risk and providing welldeveloped remediation support. The institution reviews the following assessment indicators: COMLEX exam scores, residency match results, BPPE Annual Reports, School Performance Fact Sheets (SPFSs), end-of-year progression exams, student liaison focus groups, Plan of Execution (SCOPE) Reports, COM Student Progress Committee (StARC), COP and COM Assessment Committees, ACPE standards, Center for the Advancement of Pharmacy Education (CAPE) educational outcomes, American Association of Colleges of Osteopathic Medicine (AACOM), and American Association of Medical Colleges (AAMC). (CFRs 1.1, 2.3, 2.6, 2.10, 2.12, 2.13)

Student success is supported by the Student Services team, which coordinates academic advising, psychological counseling, career guidance, and library support for projects and research. In addition, exams are carefully monitored, and students with below-average performances are assigned advisors who assist. (CFR 2.13)

The College of Pharmacy developed and performed program review processes in November 2019, and the College of Medicine will conduct its first systematic program review after graduation of the first COM class. (CFRs 2.6, 2.7, 2.10, 4.2, 4.3, 4.4) Additional details on mid-year program reviews in the College of Medicine and MSBS program review are provided in Component Essay 6.

Throughout the team's visit, ample evidence was gathered during interviews with faculty, students, and administration, and statements in the institution's report showed that CHSU is dedicated to continuous improvement in research, scholarship, and community service. (CFRs 2.8, 2.9, 2.10, 2.4, 4.3, 4.5)

CHSU values research and scholarship, as reflected in their motto which focuses on lifelong learning and advocates scholarship, basic science knowledge, and clinical research. Faculty participate in national professional accreditation visits and research societies. Research and scholarly activities are essential for the Faculty Development Committee. CHSU maintains a Student Research and Scholarly Activity Policy. Research is highlighted during Annual Research Day where posters display research efforts, increasing from 42 posters in 2021 to 73 in 2023. In addition, in 2022 ten manuscripts have been published in peer-reviewed journals.

CHSU sees research as an area for improvement, seeking more impactful research projects and increasing the use of CHSU lab facilities. The institutional report states "We must refocus on developing bench research as a component of faculty development and student preparation beyond graduation" (page 31). (CFRs 2.8, 2.9).

CHSU offers co-curricular programs aligned with academic goals. Resources and opportunities are provided to support student development and experience. These include service and leadership opportunities such as vaccination clinics, medication review sessions for senior citizens, collaboration with other colleges (e.g. California State University, Fresno) in the Senior Awareness and Fall Education program, and local cultural events. Service-learning opportunities are growing, supported by student clubs and organizations. CHSU's noncurricular services include support from mental health specialists and extensive student success services that feature Student Wellness programs and student fatigue mitigation resources. These co-curricular services are guided by the *Student Physical Health Policy* and *Student Mental Health Policy* and are promoted by the student government organization and the student newsletter. (CFR 2.11, 2.13)

Academic health centers carefully follow the criteria set forth by their professional accrediting bodies, which provide detailed descriptions of the academic requirements of the profession. (CFR 2.12)

CHSU's catalog notes that transfer students are not accepted in either the DO or PharmD programs, but the policy does not address transfer credit for individual courses. CHSU is encouraged to refine their published transfer of credit policies to address the MSBS program and clarify the applicability of transfer credit to degree programs. For example, the policy could specify if a medical Spanish course can be transferred into the DO program and if so, is it transferred in as elective or major course. More detail is found in the Transfer Credit Review Form in the report appendices. (CFR 2.14)

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with Standard Two.

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

As of December 12, 2023, CHSU employed 80 faculty and 238 non-faculty. Faculty are appointed as regular faculty with titles of professor, associate professor, assistant professor, or instructor or adjunct faculty (*Faculty Handbook*, p. 11). Responsibility to verify faculty credentials falls to the dean or department chair (*Faculty Handbook*, p. 13), and comments provided through the confidential email account indicated that such verifications were not conducted in a systematic or reliable manner. CHSU is encouraged to explore the manner in which it verifies faculty credentials to ensure adequate financial and personnel resources have been allocated to this responsibility. (CFR 3.1). As noted under Response to Previous Commission Recommendations, faculty turnover in the College of Medicine appears to have

declined, and stabilization is expected after COCA accreditation is obtained. Based on documentation provided by CHSU and institutional interviews, faculty and staff recruitment, hiring, orientation, workload, incentives, and evaluation practices are aligned with institutional purposes and evaluation is consistent with best practices in performance appraisal. (CFR 3.2)

CHSU maintains institutional policies in support of faculty and staff development activities, and participation in professional development was verified through interviews with institutional personnel and lists of faculty professional development activities (*3.3 COM Faculty Development Activities*). During institutional interviews, faculty stated that they could benefit from additional training in instructional methodologies and the proprietary Team-Based LearningTM approach adopted by CHSU College of Medicine. (CFR 3.3)

Several future activities are expected to improve the long-term financial viability of CHSU: gaining the release of a sizable escrow in the coming 12 months, reducing its debt burden and high interest expense, earning COCA accreditation, and receiving Title IV eligibility for the DO program. However, at the time of the site visit the institution is not yet at a financial breakeven. In order to achieve financial independence, CHSU must reach financial breakeven and grow cash reserve resources. Achieving the maximum enrolled student levels of 162 students per year at appropriate quality levels and net tuition and fee levels will yield a critical financial foundation. Going beyond breakeven building unrestricted cash reserves of at least six months fixed expense coverage will give the institution time to correct low net tuition and fee revenues. The institution should consider securing a substantial cash infusion from the Assemi family held on the CHSU balance sheet and restricted to operational support purposes worth three years of downside deficit levels. The present financial commitment letter at minimum should be formalized into a binding commitment. It may be helpful to review Moody's criteria for an

investment grade rating and develop detailed plans to meet these criteria. While issuing debt to fund operational deficits likely will not be attractive to investors, the university did reference this as a mitigation strategy. Process improvement along these lines will enhance CHSU's compliance with CFR 3.4.

The linkage between institution marketing and admissions can benefit from a stronger alignment. Program-level marketing has the potential to be the most useful tool in identifying prospective candidates and determining the best approach to reach them. Conventional admissions and recruitment tools can be augmented with sophisticated digital outreach efforts. Utilizing Customer Relationship Management (CRM) tools that manage the full student journey can help align internal departments and provide a seamless student experience. Whereas university marketing and MSBS marketing are fairly tightly aligned, university marketing and COM marketing are less so. CHSU should consider organizational alignment of marketing and admissions to support improved enrollment management (CFRs 3.4, 4.6)

CHSU provides access to information and technology resources. Information Technology (IT) provides support for students' internet access and support for various academic research and projects. A tour of the main campus building revealed modern campus facilities designed to support student learning. The library contains a small number of printed materials, with the majority of information resources available online. CHSU employs three librarians to support student and faculty scholarship. It should be noted that during interviews, institutional representatives indicated that they did not have adequate access to program data (e.g., course completion rates, average course grades) as needed to improve teaching nor access to student information as needed for advising (CFRs 2.13, 3.5)

Institutional documentation and CHSU interviews demonstrated that the institution has clear organizational structures and decision-making processes. (CFR 3.7) CHSU is encouraged to enhance its strategy deployment model in support of sustaining institutional capacity (CFR 3.7); additional details are provided under Standard 4.

CHSU's qualified leadership has appropriate responsibilities for a higher education institution. (CFR 3.6) CHSU employs full-time chief executive and chief financial officers as well as a sufficient number of qualified administrators. (CFR 3.8) Institutional oversight is provided by an independent governing board comprised of 15 members, nine of whom meet WSCUC's criteria for independent board members as defined in WSCUC's *Governing Board Policy* (*CHSU BOT List 012624*). During interviews, board members spoke about formal nomination procedures, new board member orientation, annual board evaluations, and legal counsel's monitoring of conflicts of interest. (CFR 3.9)

Faculty governance is defined in the CHSU *Faculty Handbook*, which includes separate governing statutes for COM and COP; documentation for faculty governance within the MSBS program was not provided. The Curriculum Committee reviews & approves changes to the COM curriculum; however, feedback received through the confidential email account indicated that curriculum, grading, or syllabi changes may be made without appropriate approvals as defined in governance structures. Additionally, through institutional interviews faculty expressed an interest for greater input in curriculum development, methodology, grading policies, and assessment. CHSU is encouraged to clarify governance structures in all programs and consistently apply defined governance processes. (CFR 3.10)

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with Standard Three.

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

CHSU has implemented program review and monitors program quality through licensure pass rates, student learning outcome data, and student surveys. Such monitoring occurs at the program rather than institutional level. The team did not identify systematic quality assurance processes for non-academic areas. CHSU is encouraged to strengthen institutional-level assessment structures, incorporating quality assurance processes for collecting, analyzing, and interpreting data applicable to both academic and non-academic areas. (CFR 4.1)

As noted under *Response to Prior Commission Actions*, CHSU has not demonstrated expertise in institutional research, as most data is generated within individual colleges. For example, the team's Lines of Inquiry document requested "Updated student counts by degree level as of December 2023;" the team received student counts for the College of Medicine as of October 2023, which omitted students enrolled in the PharmD and MSBS programs (appendix *c.iv COM Progression Report*). This approach has served to support data reporting for programmatic accreditors, but it does not support comparative data across programs or institutional-level outcome reporting.

During multiple institutional interviews, CHSU personnel described data silos and difficulty obtaining data, such as course evaluation data or general survey data. The rationale most often cited was that providing data violated student privacy. However, this position does not align with Family Educational Rights and Privacy Act (FERPA) or California privacy law which permit the disclosure of aggregate data and individual student data to individuals with a legitimate need. CHSU is encouraged to develop institutional expertise around disclosure of individual and aggregate student data as permitted by California and federal law. Based on the

presentation of institutional data in the institutional report and institutional interviews, the team concluded that CHSU has limited institutional research (IR) capacity at the time of the site visit. The newly hired interim director of Institutional Assessment, Effectiveness and Research brings expertise and experience to the position; however, clarity around data governance will be needed to evolve the institutional research function within CHSU.

For this reason, the team recommends that CHSU develop a comprehensive strategy for a data governance system. This system should incorporate structures, policies, procedures, and tools that clearly articulate the methodology for data distribution. Furthermore, there is a need for the institution to enhance its institutional research capacity to align more effectively with its intended purposes and characteristics, particularly in facilitating the implementation of changes internally and externally in a timely manner. Finally, the institution should establish a periodic review mechanism for all programs and institution assessment processes - this review should assess the utility of the generated data, evaluating its incorporation into planning and decision-making procedures that impact program improvement. (CFRs 1.2, 2.10, 4.2).

Both the institutional report and institutional interviews demonstrated commitment from faculty, staff, and administration to improvement based on the results of inquiry, evidence, and evaluation. For example, CHSU made improvements based on Graduate Medical Education (GME) data and evidence, and systematic assessment of teaching, learning, and campus environment by utilization of results was demonstrated: "90% of students reporting simulation, advanced technology, and IPE experiences prepared them well for future collaboration practice and 100% of students securing post-graduate training opportunities" (appendix *COM_StrategicPlan_r2*). The institution is encouraged to consider using a standardized assessment of campus environment that is administered to all students, regardless of program,

and allows comparison of student satisfaction among programs. (CFRs 4.3, 2.2, 2.3, 2.4, 2.5, 2.6). In addition, CHSU should consider the use of data dashboards to guide decision making.

CHSU can better demonstrate this commitment by adopting a systematic approach to documenting recommended improvements, resources allocated for those improvements, and the impact on institutional planning. In addition, the efficacy of improvements should be tracked and measured. (CFR 4.3)

CHSU demonstrated ongoing inquiry into teaching and learning through institutional interviews and development of bench research as a component of faculty development and student preparation beyond graduation (see appendix *CHSU COM PLO-GLO Mapping*). (CFR 4.4)

The institution engages stakeholders (faculty, staff, students, alumni, board members, community partners, and practice experts) in the assessment and alignment of educational programs. (CFR 4.5).

The team reviewed the 2019 – 2023 Strategic Plan (*CHSU University Strategic Plan 2019-2024_Revisions_Accomplishments_Rev5-1-2023*) which identified accomplishments and metrics (when applicable), and institutional interviews validated broad-based engagement from the board, faculty, staff, and others in strategic plan development. As the institution matures, CHSU is encouraged to explore formal strategy deployment models to enhance strategic plan implementation. (CFRs 4.6, 1.1, 3.4).

CHSU considers changes taking place within higher education; for example, leadership decided to teach out the pharmacy program due to the significant increase in pharmacy schools nation-wide. CHSU improved the first-time pass rates for the COMLEX I of the current Class of 2025, which increased from 80% in 2022 to 95% in 2023. The team noticed that the higher

educational "Career Counseling" GME, which was established under their co-curriculum activities, and their MSBS program which was integrated throughout their curriculum were all well-organized (see *b.i. Most recent report provided to COCA*). (CFRs 4.7, 1.1, 2.1, 3.4).

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with Standard Four.

Compliance with Federal Requirements

The team found that the institution met the federal requirements for credit hour, student complaints, and marketing and recruitment. Additional comments are provided on the individual forms, which are included in the report appendices.

Component 3: Degree Programs: Meaning, quality and integrity of the degrees

Meaning of the Degree

CHSU asserts that the meaning of its degree programs is founded on its mission, vision, and values. To improve the health of the Central Valley of California, healthcare workers will need to be trained at the highest level of their degree licensure (Osteopathic Medicine and Pharmacy). At the core, the purpose of the CHSU degree is to prepare licensed healthcare practitioners. Preparation for licensure will require developing knowledge, skills, and attitudes. Compassion and service to all mankind are fundamental attributes of CHSU's mission. Each degree has developed course and program learning outcomes mapped to the institutional learning outcomes (labeled as "global learning outcomes"). The learning outcomes are inspired by professional accrediting organizations (ACPE, CAPE, AACOM, and AAMC). (CFR 1.2)

The new MSBS program, implemented August 2023, will be addressed separately in this section.

Quality of the Degree

Knowing the purpose and meaning of the degree sets the stage for knowing what constitutes a quality degree. The institutional report notes that degree quality starts with selecting and hiring experienced, high-quality faculty with the skills, knowledge, and attitudes needed to be quality CHSU mission-driven professionals, students, and graduates. (CFRs 1.1, 2.3, 2.7, 4.1, 4.7) Such faculty are crucial in structuring high-quality courses and establishing meaningful and measurable mission-critical learning outcomes. (CFR 2.3) CHSU utilizes faculty to establish grading systems and carefully develop exam questions that are appropriately challenging to identify students' areas of learning success and weaknesses to guide additional areas for further study or remediation in didactic and clinical exams.

CHSU believes that degree quality is impacted by the students who matriculate into the institution's programs. The selection of academically qualified students who exemplify standards of excellence and demonstrate the commitment and capacity to be lifelong and adaptive learners helps establish degree quality. (CFR 4.2)

Integrity of Degree

CHSU records in the institutional report that the integrity of its degrees is dictated by course design and consistent assessment processes. (CFRs 2.7, 2.10, 4.1) Transparent and honest communication regarding degree expectations, processes, and policies are fundamental attributes of the integrity of a CHSU degree. All degree requirements are communicated to students, faculty, and staff through the CHSU catalog and *Student Handbook*. (CFR 2.4)

The institutional report states, "Thorough program assessments secure integrity by evaluating the quality of student learning, which is critical for achieving program goals" (page 23). (CFRs 4.1, 4.4.)

CHSU states that the final demonstration of the integrity of its professional doctoral programs, PharmD and DO, is evidenced in students' board pass rates in licensure, employment for COP graduates, and residency match statistics for COM graduates.

Master of Science in Biomedical Sciences (MSBS)

This report reviews the meaning, quality, and integrity of the Master of Science in Biomedical Sciences (MSBS) in the College of Biosciences and Health Professions separately, primarily because this newly created degree is not programmatically accredited, and minimal information about the curriculum and assessment processes was provided in the CHSU institutional report.

During the site visit, the team was provided a printed document titled *MS in Biomedical Sciences Assessment Results Program Review Handbook (2023-2027 cycle)*. This document presented an overview of the four-year review cycle with annual learning outcome assessment schedules. Six MSBS program learning outcomes and CHSU's global learning outcomes are listed, defined, and mapped, and they show courses that address program learning outcomes and related global learning outcomes.

The MSBS program is designed to provide students with a structured opportunity to acquire knowledge and skills to prepare them for the challenges of applying to and succeeding in medical and dental schools, pharmacy schools, or other healthcare programs. The two-track master's program offers a non-thesis program designed to be completed in one year and a thesis program designed to be completed in two years. The non-thesis track involves an intensive curriculum consisting of didactic courses designed to strengthen the student's academic credentials and critical thinking skills before pursuing a healthcare career. The thesis track offers

a two-year training program for students interested in research careers at academic, government, or private institutions and pharmaceutical and biotech industries.

CHSU will benefit from addressing explicitly the meaning, quality, and integrity of its MSBS program. Should CHSU decide to frame the meaning, quality, and integrity for College of Biosciences and Health Professions programs as they do in the Colleges of Pharmacy and Medicine, then selection and development of faculty will be essential. Especially important will be developing and attracting faculty to mature the thesis track. As stated in the program description, the second-year thesis track includes training and experience in bench research. Students pursuing the thesis option must conduct original research and write and publicly defend a thesis. Clarity on the expectations for the original research requirements will contribute to the degree's transparency and integrity. Attracting and retaining faculty who have ongoing research and connection within research-based graduate programs and industry lab employment opportunities will add to the quality of the degree and additional understanding of success measures (outcomes) for the non-thesis track and those graduates' expectations for subsequent admissions to the CHSU DO program will be necessary.

Additional details on the assessment of program learning outcomes in the MSBS program are provided in the next section.

Component 4: Educational Quality: Student learning, core competencies, and standards of performance at graduation

CHSU offers programs at the graduate level only; as a result, the institution does not assess undergraduate core competencies as defined in CFR 2.2a.

CHSU has defined and aligned learning outcomes at the institutional ("global"), program, and course level (CFRs 2.3). The assessment requirements imposed by the programmatic

accrediting agencies have led to differentiation among the programs in student learning outcome assessment processes.

Doctor of Pharmacy (PharmD)

Program learning outcomes in the College of Pharmacy are aligned to CAPE educational outcomes, as mandated by ACPE. (*Institutional Report,* page 29). Learning outcomes are measured through strategies embedded in individual courses, and the PharmD assessment plan (attachment 2.01 CHSU COP Assessment Plan) shows assessment strategies & benchmarks for each PLO and a note that faculty complete the analysis and assessment.

However, because the program is in teach out and will not complete a second program review, formal documentation of assessment data and analysis completed after the 2019 program review is not available. Despite the absence of formal assessment or program review reports, the institution identified improvements in student learning resulting from assessment. For example, the PharmD program implemented progressive examinations in the first three years of the program and noted that "Assessment data taken from progression exams have been used to refine and improve curriculum outcomes" (*Institutional Report*, page 30).

Doctor of Osteopathy (DO)

Like the PharmD program, the DO program has aligned program learning outcomes with programmatic accreditation standards and mapped the alignment of course, program, and global learning outcomes. The attachment *CHSU_COM_Outcome Assessment Matrix_Curriculum Map* identifies approximately 600 "positive indicators" (assessment strategies) in first- and second-year courses that link these indicators (e.g., course exams, clinical skills tests) to program learning outcomes. Evaluation strategies are used for student grading, and course faculty use

student performance on these evaluation strategies to both inform student advising and remediation as well as improve the validity and reliability of the evaluation strategy itself.

The COM aggregates data from the 600 "positive indicators" into a single number between 0 - 100 to identify "student performance" for each PLO, as noted in the *PLO Performance by Cohort* spreadsheet provided during the visit. This spreadsheet included graphs for each cohort's performance with an "adequacy line" of 75. It is unclear if the adequacy line reflects the standard of performance of graduation, for benchmarks were not included in the COM's March 2023 assessment plan.

During institutional meetings, team members were told that assessment of program learning outcomes attainment at or near the point of graduation is measured using scores on rubrics from clinical preceptors in years three and four. Team members were also informed that the passing scores of 75% used to achieve a passing grade also reflected cohort benchmarks: 100% of the cohort was expected to achieve a score of 75% or higher on the rubric. This approach to PLO assessment was not consisted with the *COM Outcome Assessment Matrix* provided to the team which described the aggregation PLO data from course-level assessments in years one and two, and as a result the team did not get a clear picture of how the DO program measures student achievement of program learning outcomes. (CFR 2.4)

At the time of the site visit, the COM did not evidence a documented, systemic process for the collection & retention of program learning outcome data, analysis by faculty, and tracking of improvements. However, in institutional meetings faculty and academic leadership identified program improvements resulting from assessment, such as rubric improvements, increased GPA requirements for admissions, and increased rigor of OPP exams. The team was informed that formal assessment of aggregate program learning outcome data would be included in program

review, scheduled to take place during the 2024 - 2025 academic year after the first cohort has graduated. At the time of the site visit, CHSU did not have documentation of the DO program review process, so it is expected that this will be evidenced in future review cycles. (CFRs 2.3, 2.4, 2.7, 4.4)

Master of Sciences in Biomedical Sciences (MSBS)

The MSBS assessment plan reflects a framework in which course, program, and global learning outcomes are assessed in the first three academic years of program implementation (2023 - 2026), with program review scheduled in the fourth academic year (2026 - 2027). The plan also maps PLOs to course-level assessments and identifies a target of "First-time pass rate = 90% of students will pass." During the visit, the team received an additional document – the MSBS *Assessment Results and Program Review Handbook* which retained the pass rate benchmark (page 4 – 5) but also included outcome data assessed with a rubric on a scale of 1 - 4; tables captured average student scores compared to a target score of 3.50 (pages 18 - 20). The handbook evidenced increased expertise in program learning outcome assessment at CHSU from the time of the initial report submission to the site visit, and the sophistication of program learning outcome data represented in the handbook demonstrates that CHSU has the capacity to plan and aggregate student learning outcome data at the program level. With the program implemented a few months prior to the site visit, it is expected that documentation of faculty analysis of PLO data and improvements will be available at the next WSCUC review cycle.

After a review of the assessment processes in CHSU's the three programs, the team concluded that the institution has not established a systematic process to document faculty's analysis of program learning outcome data, record the recommended improvements, and measure the efficacy of those improvements once implemented, a process sometimes referred to

as "closing the loop." Though some documentation can be found within meeting minutes, this does not lend itself to tracking effectiveness of improvements or resource allocation resulting from assessment. A significant amount of institutional energy has been invested in assessing & grading students within individual courses, as evidenced by the 600 data points in the DO assessment plan, and CHSU is encouraged to consider the development of institutional standards for program learning assessment which meet the WSCUC standards and are complemented by additional requirements from programmatic agencies. The team concurs with the observation from the 2019 Special Visit Team Report that "while course level data are consistently reviewed, program level data from direct assessment are not yet systematically tracked, summarized, or fully integrated" (page 6). (CFRs 2.3, 2.4, 2.7, 4.4)

Component 5: Student Success: Student learning, retention, and graduation

CHSU's institutional report defines student success as on-time completion rates, graduation rates, time to degree completion, achievement of program and global learning outcomes, and performance on licensure examinations. Rather than apply institutional benchmarks to these outcomes, individual programs establish their own success metrics and assemble data. There does not appear to be a process to compare student success among programs using common data methodologies or benchmarks. (CFRs 4.1, 4.3, 4.4)

CHSU's on-time completion rates are published on the CHSU website using BPPE School Performance Fact Sheets. At the time of the site visit only the PharmD program had graduated cohorts, and the reported on-time (4-year) program completion rates were 92% (2020), 87% (2021), 62% (2022), and 41% (2023). [The recent decrease in on-time completion is attributed to student transfers after suspension of ACPE Candidate accreditation status.] The

team did not surface evidence that CHSU consistently disaggregates or analyzes student success metrics using applicable demographic categories (e.g., gender, ethnicity). (CFR 2.10)

The institution emphasizes its dedication to quality and student success in its curriculum, which prioritizes active learning, critical thinking, and problem-solving. This commitment was further evidenced through well-structured curriculum alignment, comprehensive course syllabi, annual faculty retreats, detailed reports on degree progression and retention, evaluations of course instruction, and the incorporation of dual pass structures within the pharmacy program. (CFR 4.3)

Additionally, CHSU has instituted various student support services and initiatives encompassing mentoring and advising programs, remediation efforts, co-curricular engagement activities, career counseling services, wellness counseling resources, and service and leadership opportunities. Notably, CHSU survey data showed that 96% of respondents strongly agreed that they developed the skills necessary for continuous professional development.

Nonetheless, CHSU has an opportunity to improve monitoring of student success. The team encourages CHSU to develop a tool to measure student achievement over time based on internal definitions of student success; for example, a dashboard that measures graduation rates using a common data methodology for all programs. (CFRs 2.4, 2.6, 2.7, 2.10, 2.13, 4.1, and 4.4)

Component 6: Quality Assurance and Improvement: Program review, assessment, use of data and evidence

The institutional report referenced multiple data points used to inform decision making, such as student feedback, retention rates, graduation rates, student surveys, alumni feedback, faculty/preceptor evaluations (pages 46, 52), though the report did not provide examples of decisions attributed to this information. The observation from Component Essay 4 that improvements made as a result of student learning assessment are not consistently documented,

tracked, and measured applies to broader data analysis for program review, quality assurance, and planning. (CFRs 4.1, 4.3, 4.4)

This deficiency may partly be due to a prior deficit of institutional research expertise at the institutional level. For example, the institution was asked to "Make public disaggregated student achievement data (CFR 1.2)" in the most recent 2020 Commission action letter. The institutional report noted that CHSU publishes disaggregated student achievement data as required by the programmatic accreditors and California's Bureau for Private Postsecondary Education (BPPE) (e.g., exam pass rates, graduation rates, BPPE School Performance Fact Sheets). However, this data is reported by cohort and was not disaggregated by "appropriate demographic categories" (CFR 2.10). After the Offsite Review, the visiting team requested "Updated retention and graduation rates disaggregated by demographic characteristics; for example, if 100 females started a program in 2018 and 90 graduated on time in 2022, the on-time graduation rate for female students is 90%" (C.iii). Despite the embedded definition of disaggregated graduation rates, the institutional response included descriptive statistics for incoming cohorts (e.g., 52% of the incoming cohort is male, 48% is female) and the numbers of students who had withdrawn. The team requested the information again, and it was assembled and provided by the newly hired Interim Director for Institutional Assessment, Effectiveness, and Research prior to the visit. Though the individual now serving in this role brings expertise in data methodology, presentation, and analysis, it was too early in her tenure for the team to determine if she has the requisite technology and data access to produce institutional data which can be used to inform program review, planning, and decision making. (CFR 4.3)

Unfortunately, the timing of the PharmD teach out and DO and MSBS implementation did not allow the team a clear understanding of institutional standards for program review across

the three programs. The PharmD program completed program review in spring 2019 and was reviewed by a WSCUC special visit team in 2020. With the institution's decision in August 2020 to teach out the PharmD program, a second PharmD program review will not take place, though the institutional report did "close the loop" by citing improvements resulting from the 2019 program review, such as an increase in the NAPLEX exam pass rates from 59% in 2021 to 69% in 2022. The DO program is not scheduled to complete program review until the 2024 – 2025 academic year, after the first cohort has graduated. Even though College of Medicine faculty participate in annual "program review" meetings, such meetings do not fully meet WSCUC's program review expectations as defined in CFR 2.7 because, without a graduating class, they do not include an analysis of graduation and placement rates. Finally, the MSBS program is not scheduled to complete its first program review until the 2026 – 2027 academic year. (CFR 2.7)

The team was unable to identify institutional expectations for program review that would be applied to all programs and allow a comparison of educational quality among programs, and institutional representatives were unable to identify common metrics to measure program quality. During the site visit, the team was provided with the MSBS program review handbook and was told that the same handbook would be used by the DO program. However, the handbook content did not contain the depth of analysis included in the DO assessment plan. Currently, measurement of program outcomes is defined by the PharmD and DO accreditors. However, as programmatic accreditors vary in data methodology, a comparison of program quality among programs is not possible. Without a common framework, how does CHSU ensure students across programs are benefitting from a CHSU degree? (CFR 4.1)

The visiting team concurs with the institution's self-assessment as documented in the institutional report that CHSU needs "systematic and integrated assessment data collection

across programs" and "institutional program review policies" (page 56). (CFRs 2.3, 2.4, 2.7, 4.3, 4.4)

Component 7: Sustainability: Financial viability, preparing for the changing higher education environment

CHSU's institutional report and supporting attachments describe the current financial viability of the institution. The institution received unqualified financial statement audit opinions in 2020, 2021, and 2022, as well as successful Title IV audits for the same time frame. (CFR 1.7) The ED financial responsibility audit score has historically held steady at 1.8. These factors evidence the institution's use of effective financial management and accounting practices. In addition, the Assemi family has pledged to support the institution as documented in the *Funding Letter 4.28.23*: "The Assemi Group intends to provide funding sufficient to ensure the operations of CHSU and the College of Pharmacy, College of Medicine and forthcoming Master's program for the foreseeable future."

As noted under Standard Three, CHSU has not yet achieved a financial breakeven point, and lines of credit are used to bridge working capital needs (*Institutional Report*, page 57). With strong, concentrated, and unwavering support from the Assemi family, the university has navigated the early startup years with deficit funding from Assemi to create a worldclass campus. The chief financial officer (CFO) regularly reviews the composite score for the institution, managing it to within the acceptable realm. Appropriate investments have been made since inception on both capital and operating fronts. As the institution matures, it is encouraged to develop formal financial safety mechanisms allowing it to weather potential enrollment volatility. (CFR 3.4)

The institution's alignment of resources supports the mission of the institution. CHSU has accomplished the creation of a College of Medicine and is on the precipice of graduating its

first class. The institution employs a strong president and CFO with ample industry experience and financial acumen. Additionally, adequate staffing investments and growth to base wage developments are included. (CFR 3.1) Ninety percent of students are enrolled from California in order to support the CHSU mission to develop a local healthcare workforce.

CHSU has evidenced an ability to plan for the future and consider changes in the higher education environment, most recently in the decision to suspend PharmD enrollments in light of increased competition. (CFR 4.7) Leadership has demonstrated a sophisticated strategic thought process as it pertains to financial forecasts and uses an Enterprise Risk Management tool to identify, monitor, and mitigate key functional risks. Institutional representatives noted that risk management had proven critical to prioritizing and proactively addressing items of significant risk to the institution.

CHSU will shortly learn of their COCA accreditation status, which triggers the release of the escrow. These funds may be used to pay off their note payable, reallocate funds as an unrestricted cash reserve for operating purposes, and reduce interest costs in the 8% realm. Operational performance for 2023-24 seems strong and likely to achieve the breakeven levels as forecasted in the institutional report. (CFR 3.4) During interviews, the team reviewed the 10-year financial forecast, which included reasonable key assumptions that point the university to an operating profit. Gross tuition pricing is appropriate at the lower end of the peer basket with minimal tuition discounting and opportunity for growth as the institution matures. Pricing increases are forecast at 5% average growth rate over time with wages growing at 2-3%.

CHSU is well positioned to perform well within the Doctor of Osteopathy (DO) education space. Only two other DO schools operate within California, and nationally trends in DO education are improving. CHSU uses innovative teaching methods, such as patient

simulation, virtual cadavers, and a medical Spanish curricular requirement. Community support especially through hospital partnerships should yield favorable results and stability as CHSU evolves into a more mature institution of higher education.

Component 8: Reflection and plans for improvement

The founding family, board members, and academic leaders shared aspirational goals for future facilities, programs, and enrollment growth. Rapid growth in buildings and programs accomplished much, and the lessons learned have emerged a new focus on employee stability, faculty development, and program maturity, promoting CHSU's vision of producing graduates who will be committed to serving and improving the healthcare outcomes of the underserved populations in the Central Valley of California.

CHSU is a twelve-year-old university that has experienced much relatively quickly. It believes it has learned significant lessons that will ensure future success despite predicted struggles—struggles that most institutions face during their formative years. This young institution quickly met WSCUC eligibility criteria and built beautiful, well-designed academic buildings. They established a College of Pharmacy and developed curriculum, faculty, and assessment processes, demonstrating an understanding of what is required for student success and program improvement.

The institution's founders and board moved forward with their dreams of starting a medical school of osteopathic medicine and rapidly building a state-of-the-art facility. Then, CHSU experienced the pain of ACPE's decision to withdraw Candidate accreditation status from its first professional degree program. The institution believes the lessons from this experience have caused much reflection and institutional maturity.
CHSU has engaged in self-reflection as it has prepared for WSCUC reaffirmation, providing at least two important lessons. One is that "accreditation is more than a mere process; it is a perpetual condition of striving for and maintaining excellence..." (*Institutional Report*, page 67) and a commitment to continuous cycles of improvement involving faculty, staff, administration, and students working collaboratively to collect and analyze data to drive innovation and teamwork. The second lesson learned through the self-study focuses on the "growing pains" associated with the closing of the PharmD program and the resolve to move forward with institutional dreams at a pace indicated by data-informed decisions.

Several additional areas for improvement were embedded within the institutional report. The *Compliance with WSCUC Standards Worksheet* (page 33) and the institutional report (page 56) recommended improvements in assessment policies, administrative unit assessment, and data collection. Additionally, the institutional report recommended an increased focus on faculty recruitment and retention, facilities planning, and research support (pages 24, 31).

The College of Medicine's *Strategic Plan* (page 2) states five priorities to frame improvement plans for CHSU and provides detailed action steps accompanied by target dates of June 2024. Many of these goals have been met or nearly obtained: 1. CHSU COM will be a college community whose diversity reflects that of California's Central Valley. 2. COM will utilize a rigorous and innovative osteopathic curriculum that leads to educational excellence. 3. CHSU COM will intentionally foster and maintain a culture of wellness and resilience. 4. Faculty will serve as role models who are recognized as prominent thought leaders in their disciplines, excelling in the scholarship of teaching, learning, and academia. 5. CHSU COM will provide opportunities and resources that enable relevant and impactful research and scholarly pursuits of students, residents, and faculty.

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The improvement includes aspirational goals ranging from influencing graduate medical education program development in the region and having at least 75% of faculty have posters or presentations accepted at national or regional conferences and 50% or more of the faculty have published in peer-reviewed journals. 100% of the first graduating COM class will match with residency programs (an amazing goal verified March 15, 2024) and COMLEX exam pass rates are at or above the national average; the plan is for all students to participate in robust, faculty-supervised, service-learning activities that improve the community's health. These improvements will require a cohesive and stable community that attracts and retains top talent. Funding for faculty and staff professional development and remuneration packages will be essential.

After a multi-year COCA accreditation process, CHSU is in the final stages of providing documentation for review at the COCA Executive Committee's April 2024 meeting when a final accreditation decision is expected.² Documentation includes formal minutes from the Faculty Assembly dated February 16, 2024 capturing a unanimous vote to accept all 66 Class of 2024 students for graduation. Next, the CHSU board will vote on conferral of all CHSU degrees (i.e., ratification of the list of students recommended by the faculty) at its May 17, 2024 meeting and provide evidence of the vote to COCA.

CHSU can now focus more on strategic improvements as it moves beyond its recent institutional and programmatic accreditation season.

As CHSU is poised to increase enrollment in the College of Medicine, the infrastructure that is working now will need to be scaled up to accommodate enlarged class sizes. The current

² As noted on page 4 of this team report, COCA accreditation was granted on April 4, 2024. CHSU-COM received written verification of accreditation on April 5, 2024. Accreditation was based on required progress reports submitted by CHSU-COM to verify faculty approval of the university's inaugural graduating class (see above for the date of faculty assembly meeting minutes) and document CHSU-COM's residence match outcomes. Both progress reports were submitted to COCA on March 15.

student-to-employee ratio allows for high-quality student support. As student numbers increase, so will the need for academic and student services personnel.

As CHSU dreams about its future and how best to educate Central Valley healthcare providers, the lessons learned in the past few years will help them realize the three key CHSU goals published around the campus: Imagine, Learn, and Heal.

Section III – Other Topics

Not applicable.

Section IV – Findings, Commendations, and Recommendations

The review team commends California Health Sciences University for:

- The deep resolve of the entire university community to the Assemi family's vision.
- Well-designed and actualized facilities conducive to student learning and success, with special recognition of the simulation equipment.
- The long-term commitment of the president to promoting the mission of the institution, building relations with business and hospital leaders throughout the region, and leading a culture of student success.
- Thoughtful admissions processes designed to eliminate the use of bias, explicit or implicit, to make admissions decisions.
- The development of early acceptance program agreements from Central Valley California State University (CSU) campuses.
- The construction of a world-class medical campus and launching CHSU's College of Medicine.

- Use of an Enterprise Risk Management tool to identify, monitor, and mitigate key functional risks critical to prioritizing and proactively addressing items of significant risk to the institution.
- A commitment to a holistic student support approach resulting in students expressing a sense of love and support from the university.

The review team recommends that California Health Sciences University:

- Develop a strategy for a data governance system that includes structures, policies, procedures, and tools. (CFRs 4.3, 4.4)
- Create and implement institutional standards for program review & assessment processes that, in part, track the impact of program improvements. (CFRs 2.3, 2.4, 2.6, 2.7, 4.4)
- Develop concrete financial solvency mechanisms that give students, accreditors, and other stakeholders confidence that any enrollment volatility can be weathered with formal financial safety mechanisms. (CFR 3.4)
- Operationalize and track progress on the five strategic initiatives. (CFRs 4.3, 4.6)
- Commit to strategic enrollment management (SEM) that includes an alignment between the institution's marketing and recruitment at the program level oriented to identify, reach, and compel prospective students to choose CHSU. (CFRs 3.4, 4.6)
- Expand faculty development in instructional methodologies, to include Team-Based LearningTM. (CFR 3.3)
- Enhance and fund CHSU's Wellness Program for faculty, staff, and students. (CFRs 2.11, 3.3)
- Develop structures for faculty to exercise academic leadership. (CFR 3.10)

• Develop and publish a transfer of credit policy that includes criteria for the acceptance of credit earned at other institutions. (CFR 1.7, 2.14)

Appendices

The report includes the following appendices:

A. Federal Compliance Forms

- 1. Credit Hour and Program Length Review
- 2. Marketing and Recruitment Review
- 3. Student Complaints Review
- 4. Transfer Credit Review

B. Off-Campus Locations Review, as appropriate Not applicable

C. Distance Education Review, as appropriate Not applicable

Material	Questions/Comments (Please enter findings and recommendations in the
Reviewed	Comments sections as appropriate.)
Policy on credit hour	Is this policy easily accessible? X YES 🗖 NO
	Where is the policy located? On website under policies: <u>https://chsu.edu/policies/</u>
	Comments: Excerpt of policy below.
	During each semester, one (1) unit of credit is assigned per hour each week of
	classroom or direct faculty didactic instruction (that is, per hour of instruction or student in-class time) along with a minimum of two (2) hours of out-of-class student
	work (pre-class work). For courses that include additional workshop and/or
	laboratory sessions, one (1) unit of credit is assigned per three (3) hours each week of
	student time spent in these activities.
	This is phrased differently than the COM policy (<u>COM Semester Credit Hour Policy),</u>
	but the calculations are the same.
Process(es)/ periodic	Does the institution have a procedure for periodic review of credit hour assignments
review of credit hour	to ensure that they are accurate and reliable (for example, through program review,
	new course approval process, periodic audits)? x YES 🗖 NO
	Does the institution adhere to this procedure? <u>X</u> YES D NO
	Comments:
	Curriculum Committee reviews credit hour assignments.
_	Does this schedule show that on-ground courses meet for the prescribed number of
courses showing when	hours?
they meet.	X YES 🗆 NO
	Comments:
	No comments
Sample syllabi or	How many syllabi were reviewed? N/A
equivalent for online and hybrid courses	What kind of courses (online or hybrid or both)? N/A
Please review at least 1 -	What degree level(s)? N/A
2 from each degree level.	What discipline(s)? N/A
	Does this material show that students are doing the equivalent amount of work to the
	prescribed hours to warrant the credit awarded?
	Comments:
	N/A – CHSU does not offer online or hybrid courses
Sample syllabi or	How many syllabi were reviewed? 4
equivalent for other kinds of courses that do not meet for the prescribed hours (e.g., internships, labs,	What kinds of courses? Combined lecture/lab courses; clinical education
	what degree level(s)? Master's and doctorate
	What discipline(s)? Osteopathy & Biological Sciences
	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? XYES D NO

Appendix A.1 Credit Hour and Program Length Review Form

study, accelerated)	Comments: Clerkship (clinical) course syllabi did not include class meeting times, so the schedule of classes was used to assess the number of hours & credit hour compliance.
information (catalog, website, or other program materials)	How many programs were reviewed? 3
	What kinds of programs were reviewed? Two professional degrees (DO, PharmD) and one master's degree (MSBS)
	What degree level(s)? Master's and doctorate
	What discipline(s)? Pharmacy, Osteopathic Medicine, Biomedical Sciences
	Does this material show that the programs offered at the institution are of a generally acceptable length? X YES \Box NO
	Comments: DO degree – 182 semester credits PharmD degree – 154 semester credits MSBS (non-thesis) – 32 semester credits; MSBS (w. thesis) – 52 semester credits

Review Completed By: Megan Lawrence Date: 03/01/2024

Appendix A.2 Marketing and Recruitment Review MARKETING AND RECRUITMENT REVIEW FORM

Under federal regulation*, WSCUC is required to demonstrate that it monitors the institution's recruiting and admissions practices.

Material	Questions and Comments: Please enter findings and recommendations in the
Reviewed	comment section of this table as appropriate.
**Federal regulations	Does the institution follow federal regulations on recruiting students? x YES
	While the DO degree is not yet Title IV approved, they have been structuring their processes and systems to be fully compliant. PharmD and MSBS degrees are compliant.
Degree completion and cost	Does the institution provide information about the typical length of time to degree? X YES I NO
	Does the institution provide information about the overall cost of the degree? X YES
	Comments:
Careers and employment *§602.16(a	Does the institution provide information about the kinds of jobs for which its graduates are qualified, as applicable? X YES D NO
	Does the institution provide information about the employment of its graduates, as applicable? XYES I NO
	Comments: The first class of DO students is yet to graduate; however, they actively engage on types of careers available.

*§602.16(a)(1)(vii)

**Section 487 (a)(20) of the Higher Education Act (HEA) prohibits Title IV eligible institutions from providing incentive compensation to employees or third party entities for their success in securing student enrollments. Incentive compensation includes commissions, bonus payments, merit salary adjustments, and promotion decisions based solely on success in enrolling students. These regulations do not apply to the recruitment of international students residing in foreign countries who are not eligible to receive Federal financial aid.

Review Completed By: Dave Lawlor Date: February 28, 2024

Appendix A.3 Student Complaints Review

STUDENT COMPLAINTS REVIEW FORM

Under federal regulation*, WSCUC is required to demonstrate that it monitors the institution's student complaints policies, procedures, and records.

Material	Questions/Comments (Please enter findings and recommendations in
Reviewed	the comment section of this column as appropriate.)
Policy on	Does the institution have a policy or formal procedure for student
student	complaints?
complaints	X YES INO
	If so, Is the policy or procedure easily accessible? Where?
	Policy is available on the website (chsu.edu) as of 3/1/2024:
	https://chsu.edu/wp-content/uploads/CHSU-Student-Grievance-Policy.pdf
	https://chsu.edu/wp-content/uploads/CHSU-Student-Ghevance-Foncy.pdf
	Accreditation-or-Approval-to-Operate-Policy.pdf
	https://chsu.edu/non-discrimination-harassment-prevention-title-ix/
	Comments:
	Students receive training on these policies during new student
	orientation.
	Policies are reviewed every three years.
Process(es)/	Does the institution have a procedure for addressing student complaints?
procedure	X YES 🗖 NO
	If so, please describe briefly:
	The process for a grievance is set forth in the policies and includes an initial attempt to resolve informally and then filing a written complaint with the Asst/Associate Dean of Student Affairs who will determine whether there is sufficient information to investigate and, if so, it will be investigated. Title IX complaints are investigated by the VP of Human Resources.
	If so, does the institution adhere to this procedure? X YES 🗖 NO
	Comments:
	Interviews with individuals handling student complaints validated that the institution follows the procedure.
Records	Does the institution maintain records of student complaints? X YES INO If so, where?
	Records are maintained on protected drives with access limited to the appropriate personnel member.

Does the institution have an effective way of tracking and monitoring student complaints over time? X YES INO If so, please describe briefly: Institutional representatives stated that they work to mitigate student complaints prior to escalation as a formal complaint or grievance. As a result, there was only one formal student complaint received in the 12 months prior to the site visit. With the low numbers of student complaints, formal monitoring is difficult. Instead, institutional representatives stated that they share themes from informal complaints and student surveys at applicable meetings.

*§602-16(1)(1)(ix)

See also WASC Senior College and University Commission's Complaints and Third Party Comment Policy.

Review Completed By: Megan Lawrence Date: 03/01/2024

Appendix A.4 Transfer Credit Review

TRANSFER CREDIT POLICY REVIEW FORM

Under federal regulations*, WSCUC is required to demonstrate that it monitors the institution's transfer credit policy and practices.

Material	Questions/Comments (Please enter findings and recommendations in the
Reviewed	comment section of this column as appropriate.)
Transfer Credit Policy(s)	Does the institution have a policy or formal procedure for receiving transfer credit?
	Is the policy publicly available?
	Does the policy(s) include a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education? TYES X NO
	Comments:
	The team reviewed the transfer credit policy published on the CHSU website as of March 1, 2024, which has been excerpted below in <i>italics</i> . (<u>https://chsu.edu/consumer-information/</u>)
	 Transfer of Credit Policies The transferability of credits you earn at California Health Sciences University is at the complete discretion of an institution to which you may seek to transfer. CHSU-COM does not currently accept transfer applicants. CHSU-COP is currently not accepting new or transfer students.
	When seeking clarification with institutional personnel, the team was told that a "transfer applicant" is an individual who is currently enrolled in a DO program who wishes to transfer to CHSU-COM.
	This is <u>not</u> a statement of policy on transfer of course <u>credit</u> for the two reasons below:
	 It does not describe the criteria established by CHSU for course credit earned in equivalent courses (e.g., medical Spanish, biochemistry) at other institutions of higher education. It does not address transfer of course credit into the Master of Science in
	Biological Sciences degree, implemented in August 2023.

*§602.24(e): Transfer of credit policies. The accrediting agency must confirm, as part of its review for renewal of accreditation, that the institution has transfer of credit policies that--

(1) Are publicly disclosed in accordance with 668.43(a)(11); and

(2) Include a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.

See also WASC Senior College and University Commission's Transfer of Credit Policy. Review Completed By: Megan Lawrence Date: 3/1/2024