



INSTITUTIONAL REPORT

Southern California University of Health Sciences

SUBMITTED SEPTEMBER 2022
to
WASC: SENIOR COLLEGE AND UNIVERSITY COMMISSION
for
FALL 2022/SPRING 2023 REAFFIRMATION REVIEW

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CHAPTER ONE

(CFR 1.1, 1.6, 1.7, 1.8)

INTRODUCTION: CONTEXT AND RESPONSE TO PRIOR COMMISSION ACTIONS

MISSION, VISION, AND VALUES

MISSION

Our mission is to educate students as competent, caring, and successful integrative healthcare practitioners and professionals. The University is committed to providing an academic community imbued with kindness, integrity, humor, and determination.

VISION

To transform and redefine health and healthcare education.

VALUES

Integrative Health, Evidence-Based Practice, Health Equity, Inclusivity

I. INSTITUTIONAL HISTORY AND OVERVIEW

THE FIRST CENTURY (1911–2000)

Southern California University of Health Sciences (SCU) was founded in 1911 as the Los Angeles College of Chiropractic (LACC). Initially operating out of the home of its founder, the college was formed to prepare future providers of the then little-known practice of chiropractic. For the next several decades, the college took a winding path that included expansion of the length and scope of its chiropractic program, recognition by the state, licensure eligibility for its graduates, steady enrollment increases, merging with and acquiring other chiropractic colleges, and multiple relocations. In its earliest years, the college fought alongside the chiropractic profession for legitimacy against a hostile medical community that advocated its elimination.

By the time LACC was accredited by the Council of Chiropractic Education in 1971, chiropractic was an established form of healthcare. In 1981, the college purchased its current campus in Whittier, California. In 1993, LACC became the first chiropractic college to obtain accreditation from the WASC Senior College and University Commission (WSCUC). Throughout the 20th century, LACC remained a single-purpose institution committed to advancing chiropractic as an essential complement to conventional medicine. Over the years, the college established a reputation built on quality, evidence-based, patient-centered chiropractic education.

THE TRANSITION TO A HEALTH SCIENCES UNIVERSITY (2001–2017)

SCU transitioned from a chiropractic college to a health sciences university in 2001 with the addition of its second program, the Master of Acupuncture and Chinese

Medicine. This marked the beginning of SCU's second phase of development. During this phase, SCU added complementary medicine programs, concentrating first on two ancient modes of practice recognized and used by billions of people around the world—but often disregarded by the U.S. medical community—as forms of primary care: Traditional Chinese Medicine and Ayurveda.

With the combination of chiropractic, Ayurveda, and Chinese medicine, SCU established its commitment to integrative healthcare by combining modern Western approaches with ancient Eastern practices. Interprofessional education was introduced at this time, with students from multiple programs taking classes together and working together at clinical sites. The mission statement was revised to explicitly reference the education of students as “competent, caring, and successful integrative healthcare practitioners.”

In 2016, SCU launched its first conventional, Western medical program: the Master of Science: Physician Assistant. SCU was now integrating Eastern and Western approaches and combining complementary and conventional approaches to healthcare. Interprofessional education efforts expanded and SCU's emphasis on integrative, whole person healthcare deepened.

Also in this period, SCU acquired the Accelerated Sciences division from the now-defunct Institute of Science. The division offers undergraduate science courses at an accelerated pace to non-degree seeking students. Students typically take these courses to satisfy prerequisites to enter nursing, medical, chiropractic, and other healthcare professional programs.

In 2014, SCU sold 14 acres of its 39-acre campus to strengthen the balance sheet. Despite enrollment growth and the strategic sale of non-core real estate, SCU experienced budget deficits during this critical phase of development as it struggled to stabilize amidst considerable institutional change, enrollment challenges, and shifts in the higher education and healthcare landscapes.

STRENGTHENING THE FOUNDATION (2017 - 2022)

Informed by the 2017 reaffirmation process, SCU updated its strategic plan in 2018. Throughout the *Refreshed Institutional Plan to 2023* ([exhibit 1.1](#)), SCU recognizes its challenges, affirms its commitment to student success and integrative health, and emphasizes the need to establish a strong foundation for the future. The five-year strategic plan overlaps three phases of institutional development: *restoration*, *transformation*, and *industry leader* ([exhibit 1.2](#)).

At the time of the 2017 reaffirmation, SCU was in the early stages of *restoration*, a period focused on repairing the critical faults that had led to budget deficits and other institutional challenges including but not limited to those noted by the Commission in its report. At the time of publication, SCU is in the final stages of *transformation*, a period focused on the revitalization of the academic enterprise, organizational structure, and business practices necessary to position SCU as a recognized industry leader in integrative healthcare education.

BECOMING AN INDUSTRY LEADER
(2023 FORWARD)

The five-year strategic plan will be revisited at the conclusion of this reaffirmation process. It will be guided by SCU’s mission, vision, and values, by its desire to be an *industry leader* in educating integrative, whole person healthcare professionals and practitioners, and by the outcomes of this self-study. Investments in innovative teaching and learning practices, maintaining and improving academic quality, bolstering our reputation, and securing a financially sustainable future will be central to the plan.

II. ORGANIZATIONAL CHANGES SINCE PRIOR VISIT: CAPACITY, INFRASTRUCTURE, AND OPERATIONS (CFR 1.6, 1.7)

SCU has changed significantly since the prior visit. Notable changes appear below and are referenced throughout this report.

FACULTY AND STAFF POPULATION

The total number of employees at SCU grew by 52% from Fall 2016 to Fall 2021. In this same period, the number of employees with faculty status grew by 59%, while the number of female and underrepresented minority and minoritized employees grew by 46%, 40% and 59% respectively.

	Fall 2016	Fall 2021	% Growth
Total Employees*	238	361	52%
With Faculty Status	125	199	59%
Female	134	195	46%
Underrepresented Minorities**	58	81	40%
Minoritized Race/Ethnicity***	109	173	59%

* Total headcount of full-time, part-time, and temporary employees
** Underrepresented minorities: American Indian/Alaskan Natives, African American, Hispanic and Native Hawaiian/Pacific Islander
*** Minoritized Race/Ethnicity: All race/ethnicity excluding Non-Hispanic White

STUDENT POPULATION

At the time of the previous visit, SCU enrolled 589 students. SCU's student population grew 99% between Fall 2016 and Fall 2021 to 1170. Non-degree seeking students complete more than 5000 lecture and lab courses annually through SCU's Accelerated Sciences division.

	FALL 2016 HEADCOUNT	FALL 2021 HEADCOUNT	% OF FALL 2021 HEADCOUNT	% GROWTH FALL 2016 TO FALL 2021
PROFESSIONAL PROGRAMS	526	944	80.7%	79%
Doctor of Chiropractic	454	706	60.3%	56%
Doctor of Acupuncture and Chinese Medicine	24	89	7.6%	271%
Masters of Acupuncture and Chinese Medicine	22	1	0.1%	-95%
MS Physician Assistant	26	148	12.6%	469%
GRADUATE PROGRAMS	0	96	8.2%	n/a
MS Human Genetics and Genomics	0	21	1.8%	
MS Medical Science	0	75	6.4%	
BACHELOR OF SCIENCE DEGREE COMPLETION PROGRAMS	32	18	1.5%	-44%
Bachelor of Science in Biological Science	32	0	0.0%	
Bachelor of Science in Health Science	0	18	1.5%	
UNDERGRADUATE CERTIFICATE PROGRAMS	31	112	9.6%	261%
Ayurveda Practitioner	12	44	3.8%	267%
Ayurveda Wellness Educator	19	68	5.8%	258%
GRADUATE/POST-BACCALAUREATE CERTIFICATE PROGRAMS*	0	0	n/a	n/a
Human Genetics and Genomics	0	0		
Health Education	0	0		
TOTAL STUDENT POPULATION (DEGREE AND CERTIFICATE SEEKING)	589	1170	100.0%	99%
ACCELERATED SCIENCES COURSETAKERS**	358	679	n/a	90%

* Programs began enrolling students in January 2022 and May 2022.

** Unduplicated headcount in any of the three fall term blocks.

As of Fall 2021, 32% of students were white, 29% Hispanic of any race, 20% Asian, and 6% Black or African American. Native American, Alaska Native, Hawaiian, and Other Pacific Islander account for less than 1%, 2% are nonresident aliens, and 3% are two or more races.

FINANCIAL PERFORMANCE

SCU's most recent audit from FY20-21 demonstrates significant improvement since FY16-17:

- Annual operating revenue grew from \$21.6M in FY16-17 to \$39.6M in FY20-21 (83% increase)
- Annual net tuition and fees grew from \$19.4M in FY16-17 to \$36.5M in FY20-21 (88% increase)
- Annual total operating expenses increased from \$24.1M in FY16-17 to \$34.5M in FY20-21 (43% increase)
- Net investment gain of \$5.6M since FY16-17.

	RESTORATION PHASE			TRANSFORMATION PHASE		
	2017 Audited	2018 Audited	2019 Audited	2020 Audited	2021 Audited	2022 Projected***
Operating Revenue	\$ 21,636,522	\$ 23,948,652	\$ 27,066,662	\$ 30,704,352	\$ 39,607,104	\$ 45,132,922
Operating Expenses	\$ 24,108,353	\$ 27,715,190	\$ 29,462,062	\$ 28,629,168	\$ 34,541,984	** \$ 40,725,532
Change in Net Assets from Operating Activities	\$ (2,471,831)	\$ (3,766,538)	\$ (2,395,400)	\$ 2,075,184	\$ 5,065,120	\$ 4,407,390
Other Income and Expense	\$ 420,394	\$ 201,632	\$ (813,819)	\$ 884,045	* \$ 5,679,463	\$ 663,163
Change in Net Assets from All Activities	\$ (2,051,437)	\$ (3,564,906)	\$ (3,209,219)	\$ 2,959,229	\$ 10,744,583	\$ 5,070,553

* Includes \$3.2 million in PPP loan forgiveness and \$2.7 million in realized and unrealized investment gains

** Includes \$1 million reserve for unbudgeted expenses, as well as start up expenses for two new programs (OTD and DPT).

*** Projection as of July 2022



PROGRAMS

Since the prior visit, SCU has added three distance education degree programs, two distance education certificate programs, and is on target to launch two professional doctorates and a prelicensure nursing program. SCU is in the early stages of developing a Doctor of Ayurvedic Medicine, a Doctor of Medical Science, and a Master of Science in Genetics Counseling. These programs will be launched over the next several years and are subject to change based upon resource availability, Board approval, and accreditor approval.

	PROGRAM	YEAR LAUNCHED	ACCREDITOR / APPROVAL
IN PLACE DURING PRIOR VISIT	Doctor of Chiropractic	1911	Council on Chiropractic Education California Board of Chiropractic Examiners
	Master of Acupuncture and Chinese Medicine	2001	Accreditation Commission for Acupuncture and Herbal Medicine California Acupuncture Board
	Ayurvedic Wellness Certificate*	2008	Recognized by National Ayurvedic Medical Association
	Ayurvedic Practitioner Certificate*	2014	Recognized by National Ayurvedic Medical Association
	Doctor of Acupuncture and Chinese Medicine	2014	Accreditation Commission for Acupuncture and Herbal Medicine California Acupuncture Board
	Accelerated Sciences Division	2014	n/a
	Master of Science: Physician Assistant	2016	Accreditation Review Commission on Education for the Physician Assistant
NEW	Master of Science in Medical Science*	Fall 2020	n/a
	Bachelor of Science in Health Sciences*	Spring 2021	n/a
	Master of Science in Human Genetics and Genomics*	Fall 2021	n/a
	Postbaccalaureate Certificate in Health Education*	Spring 2022	Qualifies Graduates for National Commission for Health Education Credentialing
	Graduate Certificate in Human Genetics and Genomics*	Summer 2022	n/a
FUTURE	Doctor of Occupational Therapy	Spring 2023	American Council for Occupational Therapy Education (in process)
	Prelicensure Bachelor of Science in Nursing	Spring 2024	Board of Registered Nursing (in process) Commission on Collegiate Nursing Education (future)
	Doctor of Physical Therapy	Spring 2024	Commission on Accreditation in Physical Therapy Education (in process)
	Doctor of Medical Science	TBD	n/a
	Doctor of Ayurvedic Medicine	TBD	Recognized by National Ayurvedic Medical Accreditation Council (pending)
	Master of Science in Genetics Counseling	TBD	Accreditation Council for Genetic Counseling (future)

* These programs are offered either fully online or partially online and are classified as distance education programs by WSCUC.

OTHER NOTABLE CHANGES

As part of establishing a strong foundation for the future, SCU made significant investments in creating an effective board structure, updating organizational and academic structures, automating process and services, and revising university policies and procedures. The bulleted lists below highlight the results of these investments.

Board of Regents

- Revised Board committee structure from nine to five committees.
- Diversified Board composition and recruited regents with expertise in higher education (legal, marketing, academics).
- Received the AGB John W. Nason 2022 Award for Board Leadership.

Organizational and Academic Structure (exhibit 1.3)

- Restructured University Administration.
- Restructured Academic Affairs.
- Created Center for Faculty Development and Excellence.
- Created Department of Online Education.
- Created Business Analytics Department.

Investments in Automation

- Implemented new student information system (Jenzabar J1).
- Implemented financial performance management software (Prophix).
- Implemented faculty management system (Interfolio).
- Implemented curriculum management system (Curriculog).
- Implemented publication management system (Acalog).
- Implemented clinical management system (Exxat).
- Implemented course and faculty evaluation system (Explorance Blue).
- Expanded use of course assessment system (ExamSoft).

- Acquired assessment management system (Weave).
- Implemented learning management system (Canvas).
- Implemented student identity verification system (ExamMonitor and Exam ID).
- Automated expense report management (Concur).
- Updated human resource system (TriNet).

Policies and Processes

- Revised the budgeting process to ensure resources aligned with strategic priorities and supported student success.
- Updated key policy publications including the University Catalog, Faculty Handbook, Board Manual, Employee Handbook, and Campus Safety Manual.

III. RESPONSE TO ISSUES IDENTIFIED BY THE COMMISSION (CFR 1.7, 1.8)

Since SCU's last comprehensive visit in 2017, SCU received three action letters. Action letters addressed the 2017 reaffirmation visit, the 2019 special visit, and the 2021 interim report.

- The 2017 Commission action letter reaffirmed SCU's accreditation for a period of six years and included five recommendations related to: financial sustainability; program review; professional accreditation; assessment; and faculty workload, compensation, and evaluation. The Commission scheduled a special visit for March 2019 to address three of the five recommendations: financial sustainability, program review, and professional accreditation.
- The 2019 Commission action letter received the Spring 2019 special visit report. The Commission commended SCU for its interprofessional education model, for launching the Physician Assistant program, for addressing issues related to programmatic accreditation, for establishing

program review processes and infrastructure, and for acting urgently to pursue strategies to achieve financial sustainability. The Commission scheduled a March 2021 interim report to address financial sustainability and program review.

- The 2021 Interim Report Committee action letter received the interim report. The Commission commended SCU for the quality of the report, for its financial performance, and for its program review protocols and procedures. The Commission recommended that SCU address the following as part of this institutional report: status of the Physician Assistant program placed on probation by the programmatic accreditor, progress in meeting the program review schedule, and continued impact of COVID-19.

SCU is carefully managing ARC-PA continued accreditation; the Physician Assistant program anticipates the results of its ARC-PA review will be available prior to the Offsite Review.

The institution adhered to its program review schedule with reports available for the Doctor of Chiropractic, the Doctor and Master of Acupuncture and Chinese Medicine, and the Ayurvedic Wellness and Practitioner Certificates.

The ongoing challenges associated with COVID-19 are regularly discussed and managed under the guidance of SCU's COVID-19 response team. SCU established three guiding principles for the response team: keep the community safe, preserve employee jobs, and minimize disruption to graduation timelines. The response team manages compliance with local, state, and federal guidelines; oversees campus safety; addresses scheduling, facilities, and other logistical challenges created by the pandemic; addresses pandemic-associated student support needs; and implements campus-wide

communication plans. The swift response in March 2020 to COVID-19 provided evidence of SCU's change management capabilities ([exhibit 1.4](#)).

SCU submitted materials to WSCUC resulting in approval of three new distance education programs (Master of Science in Medical Science, Bachelor of Science in Health Sciences, Master of Science in Human Genetics and Genomics), reclassification of two existing programs from onsite to distance education (Ayurvedic Wellness Certificate, Ayurvedic Practitioner Certificate), and authorization to offer two additional certificate programs (Health Education, Human Genetics and Genomics).

The institution acted promptly to respond to recommendations from the Commission included in action letters and substantive change reports:

- Financial stability is addressed in Chapter Seven.
- Programmatic accreditation is referenced in Chapters Three and Four.
- Faculty-related matters are referenced in the Review Under the WSCUC Standards and throughout this report.
- A summary of the institution's response to the pandemic, with implications for the future of SCU, has been included as [exhibit 1.4](#).
- Program review and assessment, including for distance education programs, is addressed in Chapters Four and Six.
- Distance education related recommendations are addressed in [exhibit 1.5](#).
- Monitoring student outcomes including for new programs is discussed in Chapter Five.

IV. SELF-STUDY PROCESS AND PARTICIPANTS (CFR 1.8)

The reaffirmation process began in Fall 2020 with the appointment of the Steering Committee and development of a project plan. In Spring 2021, the Steering Committee began meeting regularly to analyze data and discuss the institution in the context of the standards. The Steering Committee initiated the Review Under the Standards in April 2021 ([exhibit 2.1](#)). Committee members and other campus constituents evaluated evidence throughout Summer 2021, both through the Weave assessment management system and through community conversations.

Beginning in Summer 2021 and continuing through early Spring 2022, community members contributed to discussions online and by participating in workshops and meetings. Members gathered feedback from multiple campus groups in late Fall 2021 through a series of Community Feedback sessions (e.g. Academic Council, Faculty Senate, Culture Crew, Enrollment Management Council).

The first draft of the report, prepared in Spring 2022, was submitted for feedback to a panel of representatives from the Board of Regents, President's Cabinet, Staff Senate, Faculty Senate, Alumni Council, and Associated Student Government. The final report was completed in Summer 2022. Results will be published on SCU's website and shared as part of the President's Town Hall and the Provost's Forum.

CHAPTER TWO

COMPLIANCE WITH THE STANDARDS AND FEDERAL REQUIREMENTS

I. INTRODUCTION

The chapter summarizes strengths, changes made, and key opportunities identified as part of the Review Under the Standards ([exhibit 2.1](#)). The most salient issues to emerge are summarized at the end of the chapter.

II. STANDARD ONE: DEFINING INSTITUTIONAL PURPOSES AND ENSURING EDUCATIONAL OBJECTIVES

The review under Standard One affirmed SCU's commitment to its mission, vision, and values as a key strength (CFR 1.1).

Changes already made based upon the Standard One review include:

- Publication of the Academic Freedom policy in the University Catalog and in the Employee Handbook; it previously was published in the Faculty Handbook only (CFR 1.3).
- Increased emphasis on tracking, reviewing, and using disaggregated retention and graduation data (CFR 1.2).
- Increased visibility of CITI ethics training course and IRB policies (CFR 1.6).

As part of the Standard One review, SCU identified the need to adopt a diversity statement and to set intentional goals for diversity, equity, and inclusion (CFR 1.4) aligned with SCU's commitment to student success.

The President's Task Force for Diversity, Equity, and Inclusion was formed to address this opportunity ([CFR exhibit 1.4b](#)).

III. STANDARD TWO: ACHIEVING EDUCATIONAL OBJECTIVES THROUGH CORE FUNCTIONS

The review under Standard Two revealed the following strengths: adherence to professional accreditation, licensing/certification agency, or prominent industry standards in multiple programs (CFR 2.1); annual assessment of learning overseen by Assessment and Learning Council (CFR 2.6); institutional commitment to preparing and promoting health care professionals as capable consumers of scientific research (CFR 2.8).

Changes already made based upon the Standard Two review include:

- Faculty trained in use of technology for extraction of student achievement data (CFR 2.6).
- Identification of peer and aspirational institutions appropriate for benchmarking (CFR 2.10).

As part of the Standard Two review, SCU improved the assessment of co-curricular learning and the student experience in the context of SCU's mission and values (CFR 2.11). A formal co-curricular assessment plan, focused on three themes developed to advance SCU's Model of Interprofessional Education and underscoring

its mission and values (professionalism, integrative and whole-person health, inclusivity), is in the early states of implementation.

IV. STANDARD THREE: DEVELOPING AND APPLYING RESOURCES AND ORGANIZATIONAL STRUCTURES TO ENSURE QUALITY AND SUSTAINABILITY

The review under Standard Three revealed the following strengths: exemplary practices in planning and budgeting in accordance with its mission and values (CFR 3.4), improved financial performance (CFR 3.4), investments in technology and other resources to support faculty and students (CFR 3.3, 3.5), and effective board governance (CFR 3.9).

As part of the Standard Three review, SCU initiated *Project Edit* to align faculty and staff data across the human resource, academic, and finance departments with the goal of improving onboarding, planning, and support of both faculty and staff (CFR 3.1, 3.2).

V. STANDARD FOUR: CREATING AN ORGANIZATION COMMITTED TO QUALITY ASSURANCE, INSTITUTIONAL LEARNING, AND IMPROVEMENT

The review under Standard Four confirmed SCU's culture of continuous improvement as a key strength. Course, faculty, and staff evaluations as well as 360 program evaluations, program review, ongoing assessment of student learning, advisory board input, new program planning processes, and programmatic accreditation standards are used to inform strategic planning and budgeting (CFR 4.1, 4.4, 4.5). Progress on university goals

is communicated to stakeholders via the President's Town Hall and the Provost's Forum (CFR 4.6).

As part of the Standard Four review, SCU affirmed that its efforts toward improved data management and reporting were vital (CFR 4.2). The institution is in the process of creating a data warehouse and additional resources have been added, including dashboards, to provide business intelligence and data analytics support. A user-friendly institutional effectiveness website is being developed to readily provide key information from the warehouse to all stakeholders.

VI. REFLECTION

INSTITUTIONAL STRENGTHS

The Review Under the Standards affirmed these institutional strengths: strong sense of purpose and clear mission, effective change management with a focus on continuous improvement, and positive student outcomes supported by a university-wide commitment to student success. Other areas of strength include a highly engaged and productive Board and effective planning processes.

Mission and Purpose. As described in Chapter One and discussed fully in Chapter Three, SCU's greatest strength is its clear sense of purpose, solidified through a distinct mission and strong fidelity to its four values.

Change Management. The review confirmed that SCU had successfully moved from the *restoration phase* to the *transformation phase*, as described in Chapter One, and is now positioned to pursue its goal of becoming an

industry leader in healthcare education. Strategic Plan goals have largely been achieved (**exhibit 2.2**), KPIs have been established and resources are routinely provided to support continuous improvement (**exhibit 2.3**), financial performance has improved, and support for both students and faculty has increased.

Student Outcomes. SCU has strong retention, graduation, and licensure pass rates, as discussed in Chapter Five. Program review processes have been solidified, assessment of student learning has improved, and faculty training and development has increased. Department leaders have embraced expanded responsibility for student success, recognizing that a whole-person approach to student success consistent with SCU's values requires support both inside and outside the classroom.

Board Governance. The SCU Board has been recognized by the Association of Governing Boards of Colleges and Universities, winning the 2022 John W. Nason Award for Board Leadership (**exhibit 2.4**). The Board continues to provide leadership in critical strategic areas, including partnership exploration, campus relocation, and program expansion.

Effective Planning Processes. Planning processes, discussed in Chapter Seven, have emerged as an institutional strength. Resource priorities are linked to the strategic plan, annual transformative goals, and student success.

INSTITUTIONAL CHALLENGES

The Review Under the Standards underscored three key challenges: data management and reporting (e.g. increased use of disaggregated data to improve student support, improved dashboards); effectively leveraging the operational, technological, and organizational changes made (e.g. ongoing change management); and the need to continually address issues of diversity, equity, and inclusion within the context of SCU's mission, vision, and values (e.g. faculty recruitment practices, clinical site strategies).

Additional findings related to institutional strengths and challenges are discussed throughout this report.

CHAPTER THREE

(CFR'S 1.2, 2.2, 2.3, 2.4, 2.6, 2.7, 4.3)

MEANING, QUALITY, AND INTEGRITY OF DEGREE

I. INTRODUCTION

This chapter describes the meaning, quality, and integrity of an SCU degree, with particular attention paid to integrative, whole-person healthcare and the preparation of graduates as healthcare professionals. The *SCU Model of Interprofessional Education* and programmatic accreditation are emphasized due to their particular relevance to the meaning, quality, and integrity of an SCU degree.

II. MEANING (CFR 1.1, 1.4, 2.2, 2.6, 2.9, 2.11)

The essence of an SCU education is to transform students into healthcare professionals who understand and support the practice of integrative, whole-person healthcare. Graduates learn to embrace the integrative model of healthcare and the values that underlie it through their experiences inside and outside of the classroom.

An SCU degree is informed by institutional mission, vision, and values; embodied by and advanced through the *SCU Model of Interprofessional Education*; and evident in faculty, scholarship and research priorities, and student experience. The importance of integrative healthcare permeates SCU and is at the heart of institutional strategic priorities.

MISSION, VISION, AND VALUES

SCU's mission is the driving force behind SCU's program expansion efforts and the reason SCU offers programs that include modern Western approaches and ancient Eastern practices (e.g. Physician Assistant and Chinese Medicine), conventional and alternative approaches to health (e.g. Physical Therapy and Ayurveda), and clinical and nonclinical career paths (e.g. Occupational Therapy and Health Education). Through this distinct program mix, SCU models the power of an integrative, whole person approach to health.

Coursework that reinforces integrative health and other university values are included as part of every program including SCU's newest programs (**exhibit 3.1**). Competencies based upon the *Interprofessional Education Collaborative's Interprofessional Collaboration Competency Domains* (IPEC competencies) have been assessed in the Doctor of Chiropractic (DC) program since 2018 and in the Physician Assistant program since 2021. Results from IPEC competency surveys strongly correlate to student achievement of outcomes associated with integrative healthcare. In addition, graduate exit surveys administered in the DC, Doctor and Master of Acupuncture and Chinese Medicine (DACM, MACM), and Master of Science: Physician Assistant (MSPA) programs indicate students agree that the quality of integrative healthcare instruction

is good ([exhibit 3.2](#)). While these results are positive, the self-study revealed the need to expand IPEC competencies evaluation to newer programs. The self-study also revealed that SCU needs to expand and improve the assessment of IPEC competencies across the board. These efforts are now underway.

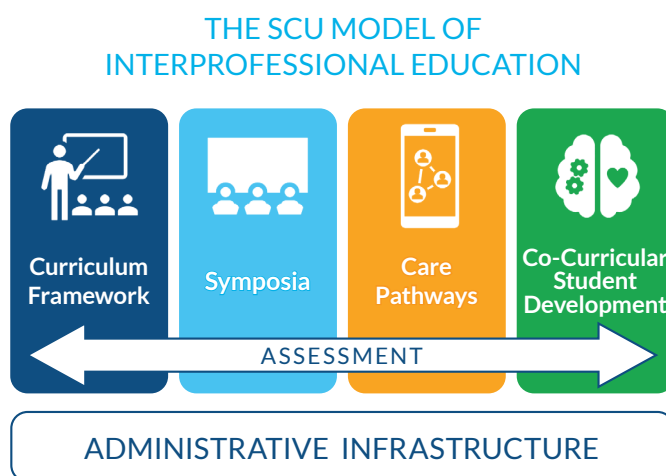
SCU intentionally offers services and resources that align with its values of health equity and inclusivity. While the majority of students indicated in the FY21-22 student engagement survey that SCU “enthusiastically embraces” or “embraces” its values of health equity (54%) and inclusivity (56%), SCU would like higher agreement with these statements. At this time, it is unclear why SCU has been only moderately successful in communicating or demonstrating its commitment to these values to students; therefore SCU is in the process of evaluating its student engagement survey instrument, process, and reporting to provide more insightful data for faculty, staff, and administration.

SCU MODEL OF INTERPROFESSIONAL EDUCATION

In 2019, the Board appointed a task force to evaluate SCU’s efforts to advance integrative, whole-person healthcare. The task force concluded that SCU’s interprofessional education (IPE) efforts needed a refresh to keep pace with the industry and to expand IPE to all programs and beyond the classroom. In response, the task force developed the *SCU Model of Interprofessional Education* framework in 2020. At the heart of the *SCU Model of Interprofessional Education* is SCU’s commitment to integrative, whole-person healthcare. The model expands interprofessional education to all programs;

formalizes curricular, co-curricular, and clinical elements; and links didactic and clinical education. An Assistant Dean of Interprofessional Education was appointed and an interdisciplinary Interprofessional Education Council was formed to provide ongoing support to the model.

The *SCU Model of Interprofessional Education* remains a living document. For a complete description, including the history of IPE at SCU and an analysis of strengths and weaknesses, see [exhibit 3.3](#).



IPE COURSES AND SYMPOSIA

The Interprofessional Education (IPE) Department offers courses that allow students to develop skills to effectively collaborate in team-based settings. Courses are offered for all programs and include didactic and/or clinical components. Of the courses offered through the IPE Department, 21 are shared among programs. Another 60+ courses have an associated IPE component.

The Integrative Health Promotion Symposia series is designed to introduce the diversity of health professions and benefits of IPE. Health topics most amenable to collaborative care are taught based upon IPEC

competencies. Topics include introduction to scope of practice of various health care professions, how to create an effective team, health disparity and racism in healthcare, motivational interviewing, alternatives to prescription medications, substance cessation, and how to become a culturally and linguistically proficient provider. In an approach integral to effective interprofessional education, faculty from various programs collaborate to teach integrative treatment modalities for commonly occurring conditions (e.g. asthma).

FACULTY

In Spring 2022, a faculty survey was sent to determine the percentage holding dual degrees, licensure, or certification and the percentage that had attended external conferences or workshops relevant to integrative health. These data demonstrate that SCU has a significant number of dual degreed, licensed, or credentialed providers, including one third of full-time faculty. There is opportunity to further assess faculty knowledge of and attitudes toward interprofessional education and integrative healthcare to inform future faculty recruitment and training.

Faculty Employment Status	% Dual Degree, License, or Certificate*	% Attended Integrated Healthcare Conference or Workshop
All	26.29%	16.81%
Full Time	33.33%	41.67%
Part Time	24.16%	6.04%

* Indicates recipient holds one or more of the following: healthcare degree, license, or certificate; certification that can be earned by more than one category of healthcare professional; credential specifically related to integrative health.

RESEARCH, SCHOLARSHIP, AND SERVICE PRIORITIES

As a professional health sciences university, SCU focuses on preparing students for clinical and professional settings rather than preparing students as academic or clinical researchers. SCU’s approach to research, scholarship, and service reflects this focus and is aligned with SCU’s commitment to integrative healthcare.

SCU’s research agenda is focused on integrative healthcare, health equity, and health policy. For example, the SCU Health research department recently completed a \$437k grant from the National Institutes of Health investigating the value of an integrative health care approach to treatment of back pain for older Medicare beneficiaries. Their next project will focus on the evaluation of the health equity and inclusivity of integrative healthcare for Medicaid beneficiaries. The SCU Health research department also recently completed one R15 grant which, as dictated by the funding mechanism, involved training students from SCU’s graduate healthcare programs. A second R15 grant is pending review.

Scholarship activity is necessary for faculty rank advancement and faculty are expected to remain current in their field, but publication itself is not a required component of the faculty performance appraisal. Only full-time faculty are expected to advance in rank. This approach is intended to encourage scholarship while also allowing faculty to focus their efforts on service, teaching and, when applicable, clinical practice.

Student scholarship is integrated into the curriculum in a manner appropriate to the level of the degree and

in alignment with SCU's focus on preparing healthcare professionals. For example, in the Master of Science in Human Genetics and Genomics (MSHGG) and the MSPA programs, students defend evidence-based capstone presentations. Students are also given opportunities to demonstrate learning outside of the classroom. For example, students present at SCU's Integrative Health Week, co-present at integrative grand rounds, submit poster presentations to the Academy of Integrative Health & Medicine's annual conference, and submit abstracts to the American Chiropractic Board of Sports Physician's annual conference.

See **exhibit 3.4** for a sampling of faculty and student scholarship as well as a list of integrative health-related affiliations and memberships.

STUDENT EXPERIENCE

Students can enhance their classroom experience by engaging in integrative health-related seminars, workshops, and service such as Integrative Health Week and the DEI Webinar Series. SCU's first LGBTQ+ Workshop "Transgender and Non-Binary Inclusion" held in February 2022 drew 129 students and received positive evaluations.

Student organizations such as Healing Hands for Humanities, Melanated Medics Club, and the Rainbow Alliance also reinforce SCU's mission and values. Service opportunities include community health fairs, outreach to the homeless in Downtown LA, and food and toy drives. Clubs host a wide array of speakers to address career development, skill building workshops, networking, and industry-trending topics in their profession. SCU students volunteer alongside faculty and students from other programs at community service events such as the AIDS Life Cycle.

SCU also encourages students to tend to their social, physical, and mental well-being. SCU has dedicated spaces that provide opportunities for meditation and self-reflection. Yoga and mindfulness classes led by students and faculty are held on campus and were made available via live-stream due to the pandemic.

STRATEGIC PRIORITIES

Four of the six goals outlined in SCU's institutional plan link to integrative healthcare, demonstrating that integrative healthcare permeates SCU:

- Advance patient-centered, whole-person, integrative healthcare.
- Validate the integrative healthcare model.
- Meet the needs of current and future practitioners.
- Leverage our distinctive approach to education and healthcare.

III. QUALITY (CFR 2.1, 2.3, 2.4, 3.10, 4.1)

SCU degrees prepare students for a specific health profession or are designed to provide a pathway to a particular health profession. Degrees are benchmarked against external standards set by accreditors, associations, and licensing bodies:

- The DC, MACM, DACM, and MSPA align their programs to professional accreditation and licensure standards.
- The Ayurveda Medicine Department aligns its programs to the National Ayurvedic Medical Accreditation Council professional education requirements.
- The Master of Science in Medical Science curriculum correlates to the United States Medical Licensing Exam Step One.
- The Bachelor of Health Sciences prepares students to sit for the Certified Health Education Specialist

exam offered through the National Commission for Health Education Credentialing or serves as a pathway to SCU graduate degrees, depending on the student's concentration.

- The genomics degree and certificate are informed by the educational topic guidelines of the Association for Molecular Pathology and the American Society for Clinical Pathology.
- The *SCU Model of Interprofessional Education* aligns to the *Interprofessional Education Collaborative's Interprofessional Collaboration Competency Domains*.

The Faculty Senate and Office of the Provost provide oversight, support, and resources to assist faculty in assuring the quality and rigor of degrees. For example:

- The Office of Institutional and Academic Insights aids program faculty in the development and maintenance of program learning outcomes (PLO), curriculum maps, assessment plans, and program reviews.
- Academic councils were formed in Fall 2020 to create communities of practice in three areas. The Accreditation Coordinating Council provides a forum for the development, review, and improvement of program review and other requirements related to accreditation. The Assessment and Learning Council provides a forum for the development, review, and improvement of assessment of student learning. The Interprofessional Education Council provides a forum for the development, review, and improvement of the *SCU Model of Interprofessional Education*. Members, which include a representative from every program, are provided opportunities for specialized training and development. See [exhibit 3.5](#).
- The Instructional Programs Committee (IPC), a standing committee of the Faculty Senate, reviews all new and revised courses and programs for academic quality assurance and integrity; to adhere to content, standards, and degree level norms in higher education; and to align with the standards and expectations of the faculty and administration of SCU.

- A Curriculum Integrity Review was launched in Spring 2021 and includes course catalog review and update; syllabus review and update; curriculum mapping with gap analysis; and the implementation of systems and processes to improve future curriculum management. See [exhibit 3.6](#).
- The Online Education Department provides training and assistance to faculty in course design and delivery. Support ranges from technical assistance to student engagement strategies and course design enhancements.
- The Center for Faculty Development and Excellence provides training on a variety of topics for all faculty (e.g. active learning, curriculum mapping, inclusive assessment). See [exhibit 3.7](#).
- A targeted course redesign referred to as the Big Leap was launched to uplift quality of course content and enhance the student learning experience. Examples of components addressed during the course uplift include integrity of student learning outcomes, alignment of student learning outcomes to program learning outcomes, and enhancement of instructor-student interactions. See [exhibit 3.8](#).
- SCU faculty are enrolled in the Online Learning Consortium which measures and quantifies elements of quality within education programs and offers workshops for benchmarking and engagement.
- SCU adopted the Quality Matters (QM) rubric and standards for course design. Faculty have access to university-funded QM training.
- Program advisory boards were established in 2021 and include industry leaders, academicians, and researchers who meet two to three times annually with program leaders. Advisory boards provide guidance and recommendations, challenge assumptions, enhance understanding of the industry landscape, provide connections and networking opportunities, and build the reputation of the program and the integrity of an SCU degree.

- Faculty, administration, and students are actively encouraged to participate in professional associations as members, conference attendees, and office holders. See [exhibit 3.4](#).

IV. INTEGRITY (CFR 2.1, 2.2, 2.3, 2.4, 4.6)

In addition to the quality assurance processes discussed throughout this report, SCU has planning processes that ensure the ongoing integrity of an SCU degree. Student outcomes are monitored through graduation rates, licensure pass rates, and acceptance into professional schools.

ANNUAL PLANNING AND BUDGETING

The annual planning and budgeting process is designed to ensure ongoing support for academic quality. Pre-Enrollment Planning precedes the formal budgeting process. Each program and department reviews key performance metrics with a primary focus on student success by drawing on accreditation reports, assessment outcomes, program review data, and other institutional research. This process was overhauled in 2020 and has been continuously improved since. See [exhibit 3.9](#).

NEW PROGRAM PROPOSALS

New program proposals and major program revisions are reviewed by the Program Launch Planning Committee (PLP), the Instructional Programs Committee (IPC) of the Faculty Senate, and the Mission, Academic, and Student Affairs (MASA) Committee of the Board.

SCU established the PLP to provide support for program development and to review new program proposals and major program revisions against a Board-approved

Master Program Strategy that includes criteria and design principles ([exhibit 3.10](#)). The PLP ensures that programs are developed according to the Master Program Strategy, adhere to program design principles, and are appropriately resourced. The IPC assures the quality and rigor of new and revised programs. Finally, MASA reviews new programs and major program revisions and makes a recommendation to the full Board for consideration in the context of SCU's strategic priorities.

STUDENT OUTCOMES

The integrity of an SCU degree is evident in students' graduation rates, licensure and/or certification exam pass rates, and acceptance into professional schools. Outcomes are discussed in detail in Chapter Five.

The self-study process revealed an opportunity to improve data collection and analysis of student employment, which is particularly relevant to programs in which licensure/certification does not apply. SCU's student employment data is limited to what is collected at the time of graduation. Efforts toward more robust and reliable collection and analysis are underway.

V. REFLECTION

SCU has the necessary infrastructure to support the meaning, quality, and integrity of its degrees within the context of its mission, vision, values, and strategic priorities. The following opportunities were identified:

- SCU should expand assessment of student learning of IPEC competencies to all programs.
- SCU should implement a more comprehensive and useful assessment of student, faculty, and staff perception of SCU's commitment to integrative health and other SCU values.
- SCU should build upon its faculty data to include other relevant integrative health related measures (e.g. attitudes, knowledge) to inform faculty hiring and development priorities.
- SCU should increase access to specialized training and development opportunities to support faculty in the application of IPEC competencies and to advance the infusion of SCU values in the classroom.
- SCU should improve its collection of post-graduation student data, including employment outcomes and acceptance into professional school programs.

CHAPTER FOUR

(2.1, 2.2A, 2.2B, 2.3, 2.4, 2.6, 2.7, 4.1, 4.3, 4.4)

EDUCATIONAL QUALITY: STUDENT PERFORMANCE, CORE COMPETENCIES, AND STANDARDS OF PERFORMANCE AT GRADUATION

I. INTRODUCTION

This chapter provides an overview of educational quality and outcomes at SCU, with particular focus on variations by program and degree level, standards of performance at graduation, and processes to support and maintain quality. Student success, including assessment of learning and the role of student support services, is discussed further in Chapter Five. Program review and other forms of assessment are discussed in Chapter Six.

II. STANDARDS OF PERFORMANCE (CFR 2.4, 2.6, 4.3, 4.4)

Every course is mapped to student learning outcomes (SLOs) and courses in degree and certificate programs are also mapped to program learning outcomes (PLOs) and university learning outcomes (ULOs), with variations in standards and measurements of knowledge, skills, and values by program ([exhibit 4.1](#)).

In clinical programs, standards of performance are informed by SCU's mission and values, by the programmatic accreditor, by industry best practices, and by the licensing or certification standards of the profession. In non-clinical programs, standards of performance are informed by SCU's mission and values, by industry norms, and by standards established by professional associations. Curricula and objectives are taught and assessed at a higher level in the graduate programs than in the undergraduate programs. For

example, the Bachelor of Science in Health Sciences (BSHS) requires application of basic science knowledge, while graduate outcomes reflect a higher level of nuance and complexity and often require application in patient care or demonstration of mastery of a specified subject area. Example curriculum maps as well as a summary assessment plan are in [exhibit 4.2](#).

ESTABLISHMENT, COMMUNICATION, AND VALIDATION OF STANDARDS

External standards and bodies, practitioner faculty, program advisory boards, and faculty bodies (such as the Instructional Program Committee) are among essential groups involved in establishing, communicating, and validating program standards. Standards of performance are set by faculty with input from other internal constituents and with careful attention to external stakeholder requirements, advancements in the discipline or profession, and the evolving healthcare landscape. Faculty are essential for the establishment and validation of these standards because faculty are often trained as practitioners and many still work in the field. This latter element is essential in clinical programs: practitioner faculty bring direct application to the classroom and to the generation and assessment of outcomes. Further, SCU's program advisory boards bolster the application of best practices and real-world knowledge. Syllabi include the linkage between course learning outcomes and program learning outcomes. This

SLO/PLO linkage is mirrored in assessment software (ExamSoft, Canvas), where outcome performance is captured from evaluations through tests and rubrics. Assessment plans capture performance outcomes, establish benchmarks, and allow for ongoing review. Faculty are supported in SLO/PLO development, administration, and assessment by the Center for Faculty Development and Excellence (CFDE), the Department of Online Learning, the Faculty Senate's Instructional Programs Committee (IPC), and the Assessment and Learning Council (ALC). This broad collaboration ensures that outcomes meet university and accreditation standards and are appropriate to the level of study.

Faculty also work with program leadership on curriculum mapping and gap analysis. Before a course or program is revised, faculty subject matter experts as well as the IPC review its design, content, delivery method, assessments, and outcomes.

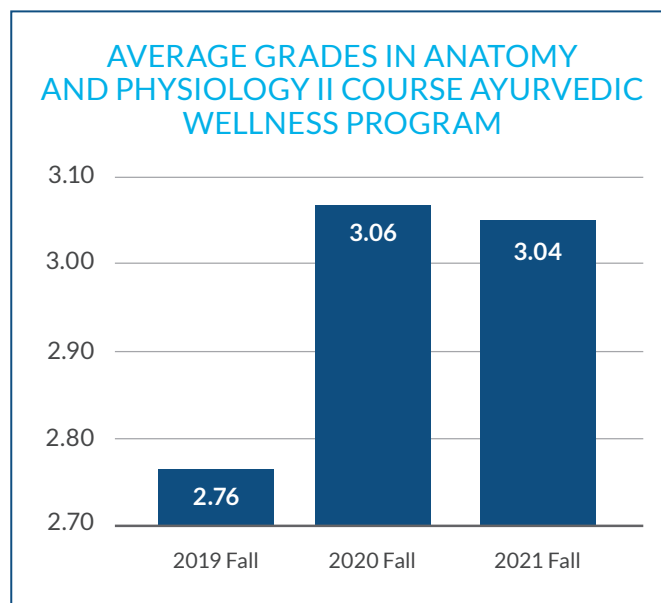
All PLOs are published in the catalog and included in syllabi and in the LMS; SLOs are published in syllabi. The relationship between outcomes, content, and assessments are included in each syllabus to allow students to understand their linkage. Faculty work with program leadership to calibrate assessments through inter-reliability training.

ADDRESSING ACHIEVEMENT GAPS

At the student level, in-term academic monitoring of exam results, attendance, and grades result in either informal remediation or formal Academic Development Plans. For example, in the Ayurvedic Wellness program, students entering the Anatomy and Physiology II course with a program average of less than 60% are

automatically placed in group tutoring.

As a result of this intervention, the average grade in the Anatomy and Physiology II course improved from 2.76 in Fall 2019 to 3.0 in Fall 2020 and Fall 2021. The chart below displays the average grade in the course.



In all programs, faculty members access Canvas gradebooks and learning outcomes to track student performance on summative assessments (such as mid-term grades and exams) as well as track improvement on formative assessments by setting expected benchmarks.

Faculty members utilize the Canvas Learning Outcomes mastery gradebook to identify which students did or did not achieve the specified thresholds for mastering SLOs and PLOs, thus allowing for curricular improvements. For example, the BSHS program director identified lower levels of student performance in one written assignment. Based on student feedback, more specific instructions were provided for the assignment, and student performance improved the next time the course was offered.

In the Doctor of Acupuncture and Chinese Medicine (DACM) program each student is required to submit a clinical self-assessment form prior to the beginning of each term. Both clinical supervisors and students actively communicate and discuss expectations and student progress. In order to maintain a consistent point of contact, each student is assigned a main clinical supervisor (mentor) to monitor his/her clinical progress throughout the terms. If achievement gaps are noted, the clinical mentor collaborates with the student to devise an improvement plan. See [exhibit 4.3](#) for a clinical assessment procedure used for the DACM and Master of Science in Acupuncture and Chinese Medicine (MACM) programs.

At the course level, best practices regarding classroom assessment techniques are utilized. For example, the Master of Science in Medical Science (MSMS) program uses iClicker to assess real-time understanding of medical concepts, allowing faculty to address knowledge gaps immediately. Programs have access to Padlet, an online writing pad that allows students to collaborate online and allows faculty to post questions to assess student comprehension. Other tools, such as Echo360, allow faculty to monitor where students engage with lecture recordings and where they post questions by timestamp. Each of these tools support improved teaching and learning stemming from quality assessment and use of feedback in micro- and macro-assessment cycles.

At the cohort level, programs have developed response plans based upon specific scenarios. In the MSPA program, faculty meet each term to discuss student achievement by class, subject area, and skillset. Based upon the data, which includes both qualitative

and quantitative data, remediation or curriculum adjustments are made. For example, if students collectively demonstrated insufficient knowledge of cardiology content, the course will be adjusted or group remediation will occur. In the DACM program, cohort thresholds are indicated on clinical care rubrics to check for cohort comprehension and measure improvements in each subsequent year of clinical. See [exhibit 4.4](#) for an example from the Doctor of Chiropractic (DC) program of cohort performance expectations, detection methodology, and response.

At the program level, SCU's assessment plan guidelines require programs to assess two program learning outcomes annually. In addition, all programs participate in the program review process. Assessment and program review are discussed in Chapter Six.

III. VARIATIONS IN STANDARDS OF PERFORMANCE BY LEVEL (CFR 2.1, 2.2A, 2.2B, 2.3, 2.4)

A summary of outcome measurement at the institutional and program level has been included as **exhibit 4.1**. Student outcomes measures and standards of performance differ by program in complexity and level of skill and knowledge, the level of mastery, practical assessments with demonstration of technical skills, and the use of capstones and comprehensive examinations. The table below shows simplified standards of performance, illustrating higher levels of performance required in graduate programs and clinical programs.

Degree or Certificate Type	Program	Simplified Standards of Performance - PLOs	Simplified Results Based on 2020-2021 Assessment Reports
Certificate	Ayurvedic Wellness Educator	80% of students achieve outcomes at 80%	Nearly met (78%); response discussed in assessment report (see CFR exhibit 2.6)
	Ayurvedic Wellness Practitioner	80% of students achieve outcomes at 80%	Met
Bachelor	Bachelor of Science in Health Sciences	80% of students achieve outcomes at 80%	Met
Graduate	Master of Science in Human Genetics and Genomics	80% of students achieve outcomes at 80%	Met; new program using preliminary data
	Master of Science in Medical Science	80% of students achieve outcomes at 75%	Met; new program with revised targets, Spring 2021
First Professional Masters	Master of Science: Physician Assistant	100% of students achieve outcomes at 75%	Nearly met (97.7%); response discussed in assessment report (see CFR exhibit 2.6)
First Professional Doctoral	Doctor of Acupuncture and Chinese Medicine	80% of students achieve outcomes at 80%	Met
	Doctor of Chiropractic	100% of students achieve outcomes at 87.5%	Met

PERFORMANCE IN PROFESSIONAL PROGRAMS

For professional programs, outcome development is influenced by programmatic accreditors. The prescriptive nature and frequency of review by accreditors supports regular analysis and review in these programs. First professional programs continuously monitor and analyze internal and external benchmark exams for outcomes. Trends in performance are discussed at program meetings, faculty retreats, and in assessment planning.

Findings promote curricular improvement and enhanced support offerings.

The DC program program is designed to cover externally mandated content and capture accreditor-required outcomes with a deep focus on the clinical year.

The program utilized Examsoft to build a detailed map of the 31 outcomes assessed in the clinical year. Reports provide a map of outcomes at the cohort level, indicating

in red where a cohort did not meet the expected level of performance by individual outcome or assessment (**exhibit 4.5**). Similar information is available by student each clinical term. Cross-referencing assessments with the PLOs has allowed analysis by student and cohort for each competency. Faculty identify areas of weakness, monitor curricular changes, and further revise course content and clinical assessments. They are aided by detailed, longitudinal assessment data available by outcome per student in ExamSoft (**exhibit 4.6**).

The DC program has three comprehensive competency examinations. The Foundational Health Sciences exam is a strong predictor of performance on part one of the licensure examination. Other comprehensive examinations, which include written and practical formats, are given at the beginning of the clinical experience and before graduation. This exam series resembles the licensure examinations in format and content and helps students prepare for licensure by providing students with an indication of their strengths and weaknesses. These examinations, as well as clinical assessment performance, are major sources of assessment data and help assure each student demonstrates achievement of all outcomes prior to graduation.

The MSPA program recently completed a program revision that included an evaluation of learning outcomes and assessments, update of all syllabi, and alignment of content across the program. A PLO map depicts how the program assesses students and evaluates program effectiveness (**exhibit 4.7**). The program has submitted all syllabi for input into EXXAT for production of curriculum maps that link to SCU outcomes and professional standards for retrospective gap analysis to compare output to plan and facilitate future curriculum management.

The MSPA program requires two comprehensive assessments to monitor PLOs as students complete the didactic year and as students approach graduation. These examinations ensure students have achieved required competencies and predict performance on and provide preparation for the licensure exam (**exhibit 4.8**). The program established a Pance Preparedness program in 2022, using predictive analytics to identify students at risk of not passing the exam, and is intended to ensure the PA program exam pass rates are at or above national averages.

The MSPA Capstone project, a three-course series, allows Physician Assistant students to design a multidimensional project as a culminating experience in their final year. The DACM and MACM programs have three comprehensive examinations per program. The exams, which take place near the end of each program year, are comprehensive and include written and practical components. These examinations help students prepare for the licensure examination and are an internal measurement of key competencies. These comprehensive examinations, as well as performance in clinical assessments, are major sources of assessment data prior to graduation, and are mechanisms to assure each student demonstrates achievement of outcomes prior to graduation. The DACM program also requires completion of a Capstone project.

PERFORMANCE IN GRADUATE PROGRAMS

Graduate programs monitor student performance during and at the completion of each term, intervene to provide support, and have expectations that are assessed at or near graduation. The MSMS includes a comprehensive examination prior to graduation. Students may also

complete the National Board of Medical Examiners self-assessment to gain additional formative feedback in preparation for the MCAT or application to other healthcare programs. The passage rate on this NBME examination - normally taken after year two of medical school - has increased with each cohort of the MSMS program, a strong indicator that the new program continues to improve and respond to data to better prepare students for entry into medical school or other healthcare programs. The program is pleased with its trajectory.

The Master of Science in Human Genetics and Genomics (MSHGG) capstone course is a thorough introduction to applying for research funding with an original genomics research proposal appropriate to the US National Institutes of Health (NIH) and is intended to tie prior learning into an integrated whole. An example of visual outcomes data for an MSMS student is provided as [exhibit 4.9](#).

PERFORMANCE IN BACHELOR COMPLETION PROGRAM

Four of the eight BSHS learning outcomes align with WSCUC's undergraduate core competencies: critical thinking, information literacy, quantitative reasoning, communication effectiveness (aligns with written and oral communication skills). Four additional program learning outcomes are specific to the program and to SCU: biological science knowledge, integrative health knowledge, professionalism, and cultural and social understanding.

The BSHS program uses signature assignments to assess PLOs. Types of artifacts include rubric-graded written assignments and discussion questions, and embedded

assessment in course quizzes and exams where questions pertinent to the PLOS are tagged and assessed.

The BSHS program is new and outcomes data collection is in early stages. However, assessment planning has ensured valuable data is available to the program. An example of visual outcomes data from Canvas for this program has been included in [exhibit 4.9](#).

Based on student feedback in course evaluations indicating that the format of the course was confusing, additional instructional videos were added to BSHS 0307. Improvements will be assessed at the end of Summer 2022.

PERFORMANCE IN CERTIFICATE PROGRAMS

The Ayurveda certificate programs were reviewed by WSCUC in 2021 as part of a substantive change, and both programs are approved by the National Ayurvedic Medical Association (NAMA). Standards of Performance at or near graduation are appropriate to a certificate level. SCU Ayurveda graduates may sit for the National Ayurvedic Medical Association Certification Board's (NAMACB) Ayurvedic Health Counselor (or Practitioner) Certification Examination as appropriate. Ayurveda students must demonstrate outcomes mastery by passing comprehensive examinations prior to graduation.

SCU's other certificate programs, which do not yet have graduates, were designed with formative and summative assessments.

PERFORMANCE IN ACCELERATED SCIENCES

Accelerated Science (AS) students are considered students-at-large and are not formally admitted by SCU. Although no program learning outcomes are associated with AS, the division monitors course completion rates (how many registered students complete the course)

against a target of 90% and pass rates (what percentage of students earn a C or above) against a target of 92%. Course completion rates have declined overall from 93.5% in AY2019-2020 to 85% in AY2021-2022, which is largely a result of instituting a more lenient withdrawal policy. Pass rates have increased from 90.61% to 92.38% in that same time period due to improved course design, increased faculty tutoring, and the introduction of free, online review courses referred to as success modules.

IV. UNIVERSITY LEARNING OUTCOMES (ULOs) (CFR 2.3, 4.6)

SCU established its current seven University Learning Outcomes in 2014: professional therapies, critical thinking, evidence-based knowledge, outcomes-focused practice, communication, professionalism, and integrative healthcare. Though all programs link assessments to ULOs, the ULOs are neither adequately distinguished from PLOs (particularly in the DC), nor aligned with SCU's updated mission and values, nor reflective of all programs now offered at SCU. The Assessment and Learning Council are in the process of reviewing the ULOs; they anticipate making final recommendations sometime in 2022-2023. The Faculty Senate, Academic Council, Accreditation Coordinating Council, and Provost will approve the ULOs prior to implementation.

V. REFLECTION

SCU standards of performance are tailored to the level of the degree or certificate program and the clinical nature of the program. SCU assesses these outcomes regularly at the student, cohort, and program level; supports students through midterm monitoring and tailored advising; and supports programs and program faculty through the Center for Faculty Development and Excellence, the Assessment and Learning Council, assessment plans and program review, feedback loops associated with resource alignment, and more. Assessment data is meaningful and used regularly. The institution uses ExamSoft and Canvas to supports these processes.

The following opportunities were identified:

- While there is a culture of assessment in place, SCU must continue to prioritize the assessment of student learning and monitoring of student performance against educational standards. This is particularly important as the institution continues to diversify its program mix.
- University Learning Outcomes should better reflect the university's current program mix. SCU should support the Assessment and Learning Council in recommending revisions to the ULOs.



CHAPTER FIVE

(CFR 1.2, 2.4, 2.5, 2.6, 2.7, 2.10, 2.12, 2.13)

STUDENT SUCCESS: STUDENT LEARNING, RETENTION, AND GRADUATION

I. INTRODUCTION

This chapter describes how SCU defines and measures student success with particular attention on retention, progression, graduation rates, post-graduation outcomes, and student learning data. End-of-course surveys, assessment tools, and academic and student support services are also discussed. Program review and assessment are discussed in Chapter Six.

II. STUDENT SUCCESS: DEFINITIONS, DATA, AND INSIGHTS (CFR 1.2, 2.10)

RETENTION

Fall-to-fall institutional retention from 2015-2021 was above 91%. The all-time high retention rate of 96% was achieved between Fall 2019 to 2020 at the height of the pandemic. While retention is outstanding across SCU, retention is almost 100% in the Master of Science: Physician Assistant (MSPA) program. To leverage lessons learned from this program, SCU is adopting or adapting MSPA advising and tutoring models to other programs. At the time of publication, SCU is in the process of building a data warehouse and an institutional research web page. As part of these initiatives, SCU will further disaggregate and publish retention data. While disaggregation of retention data is essential to identify and eliminate achievement gaps, SCU's institution-wide retention rates demonstrate that it is successful at retaining nearly all degree- and certificate-seeking students.

Retention does not apply to Accelerated Science (AS) students because they enroll in single courses as students-at-large. As a proxy for retention, SCU established a 90% course completion target per block. In other words, our goal is that 90% of students who begin an AS course in a five-week block successfully complete it. SCU has consistently met or exceeded the 90% course completion rate. SCU has not yet disaggregated AS course completion data. The Data Governance Committee recently identified and corrected an error that led to many of these students having "unknown" race/ethnicity classifications, making disaggregation difficult. The data error has been corrected; SCU will be disaggregating completion data to identify if there are achievement gaps. However, the high course completion rate shows that SCU is generally meeting students' needs.

PROGRESSION

SCU evaluates student GPA by program and found that race/ethnicity was a predictor of differential performance in one program in the 2016-2020 time period: Ayurvedic Wellness (AYW) ([exhibit 5.1](#)). Although graduation rates did not differ significantly, black or African American AYW students and Hispanic AYW students of any race performed statistically significantly poorer than other students in GPA, suggesting a need to better support these students to eliminate achievement differences. Notably, this is the only SCU program that admits first-time college students. SCU conducted focus groups to better

understand student needs, and as a result SCU authorized an additional \$20,000 in AYW tutoring support for the remainder of the 2021/2022 academic year.

SCU also evaluates the success ratio, or the percentage of attempted units that are successfully completed, for each program. From 2016-2020, there was no difference by race/ethnicity within any SCU program. December 2021 satisfaction data shows no gender difference in any program at SCU. SCU will further disaggregate this data in the future.

GRADUATION RATES

Graduation rates are reported by program and overall and are further disaggregated by race/ethnicity. Graduation rates at 100% and 150% of program length are reported publicly for each program by majority and underrepresented minority (URM) demographics. SCU has a 150% graduation rate goal of 85%. The most recent cohort graduation rate data is included in the table below.

SCU has disaggregated graduation rate data by race/ethnicity. In all programs, no race/ethnicity graduates statistically differently than any other race/ethnicity.

PROGRAM/ CERTIFICATE	COHORT	100% GRADUATION RATE	150% GRADUATION RATE
Ayurvedic Wellness	Summer 2019	90.3%	90.3%
Ayurvedic Practitioner	Summer 2019	75%	80.6%
Master of Science in Medical Science	Fall 2020	93%	93%
Master of Science Physician Assistant	Fall 2017	86.1%	97.2%
Doctor of Acupuncture and Chinese Medicine	Fall 2018	100%	100%
Doctor of Chiropractic	Fall 2016	74.7%	88.6%

Note: Programs not listed are too new to have qualifying cohort data.

LICENSURE PASS RATES

Licensure pass rates are key measures of student success, and vital components of student success. Licensure pass rates, published on the website, have consistently been at or above standards set by the licensing or accrediting agencies.

Program	Exam	Reporting Cycle	Attempt	Pass Rate	At or Above Standard
Doctor of Chiropractic	NBCE	Four Year Average 2017-2020	Within Six Months of Graduation	86%	Yes
Master/Doctor of Acupuncture and Chinese Medicine	NCCOM	Four Year Average 2017-2020	First Time Test Takers	100%	Not Applicable
	CAB	Four Year Average 2017-2020	First Time Test Takers	93%	Not Applicable
Master of Science: Physician Assistant	PANCE	Class of 2020	First Time Test Takers	91%	Yes
		Class of 2019	First Time Test Takers	91%	Yes
		Class of 2018	First Time Test Takers	85%	Yes

2021 graduate exam pass rate not available in all programs until January 2023 or later.

More than 98% of MSPA graduates will eventually pass the PANCE.

AYW and Ayurvedic Practitioner (AYP) students are eligible to sit for the National Ayurveda Medical Association Certification Board Level I/II certificates, though these are not required for practice. AYW graduates typically do not take the available counselor exam because it is not required. However, 100% of takers from the 2021 AWP cohort passed the optional Level II exam for practitioners.

EMPLOYMENT/CONTINUING EDUCATION

SCU conducts an exit survey shortly prior to graduation to collect post-graduation data. This exit survey, along with cohort default rates and alumni surveys, has been used in addition to licensure/certification exam pass rate data to provide an indirect measure of post-graduation success.

SCU's exit surveys indicate that most students know their employment or educational plans at the time of graduation, with between 74% and 95% of survey respondents self-reporting that they had jobs or continuing education lined up at the time of graduation.

Acceptance into graduate or professional school is an important measure of student preparedness and success for our Bachelor of Science in Health Sciences (BSHS) and Master of Science in Medical Science (MSMS) programs. The BSHS has its first graduating class in August of 2022 with a cohort of five graduates. Four graduates completed the health education concentration and will sit for the Certified Health Education Specialist examination. These students have indicated that they will either seek employment in the field of health sciences or apply to physician assistant school. The fifth graduate intends to complete the Chiropractic Sciences concentration and matriculate into SCU's Doctor of Chiropractic (DC) program.

The MSMS program graduated its first class in August of 2021 with a cohort of 15 graduates. At the time of publication, two graduates have been accepted to medical school, two to dental school, one to pharmacy school, and one to physician assistant school. One graduate obtained employment at Johns Hopkins as a research specialist. The remaining eight students will apply to medical or physician assistant school in the upcoming admissions cycle or are currently working in the medical field.

SCU seeks to know more about its graduates. The alumni survey instrument, methodology, and reporting are being evaluated. As with other areas, SCU plans to disaggregate this data and ensure that there are no gaps in support of students as they graduate and shift towards employment or further education.

COHORT DEFAULT RATES

While an indirect measure of student success, SCU's cohort student loan default rate is excellent, with just six to eight students in default in the most recent three reporting cycles resulting in a default rate between 3.1% and 4.3%.

III. STUDENT LEARNING (CFR 2.4, 2.5, 2.6)

This section discusses measures of student learning including end-of-course surveys (indirect measure), tagged and mapped assessments using Examsoft (direct measure), and program milestones (direct measure).

END-OF-COURSE SURVEYS

SCU uses Explorance to administer end-of-course (EOC) evaluations (see [exhibit 5.2](#) for a sample report). Based on a summary of AY2020-2021 data ([exhibit 5.3](#)), for

any given survey item, results show a tendency for about 80% of responses to indicate a score of 4 or 5. Overall scores on EOC questions have means of 4.25/5 at the lowest. Comparing scores across programs is not fruitful, as most students provide ratings of 4 or 5 regardless of program. A distribution of 4s and 5s that total less than 80%, therefore, serves as a warning to faculty and administration that a course or instructor may be underperforming and require attention.

In addition to the percentage of ratings below 4/5, student comments are used to reveal course, program, or university-wide opportunities for improvement. Beginning with the result from the Fall 2022 EOC cycle, the Office of Institutional and Academic Insights will work with the Offices of Student Services and the Office of the Provost to identify themes from students' comments. Themes that reveal opportunities for improvement will require a formal response or action, which will be shared with SCU students through a process informally referred to as the "Commitment to Communicate."

COURSE ASSESSMENT

SCU uses ExamSoft to monitor achievement of learning outcomes. Through this instrument, faculty move beyond relying upon course grades to assessing individual achievement on specific outcomes. Program faculty monitor students and PLO achievement and use longitudinal student and cohort data to support students and improve programs.

To assess student learning, clinical and graduate programs incorporate milestone assessments as described below. Milestone assessments are predictive of licensure exam performance in most programs.

Results are also used to tailor remediation or to indicate mastery. Detailed descriptions of each milestone assessment are included in Chapter 4.

Program	Milestone Assessment(s)
Ayurvedic Wellness and Practitioner	Ayurveda Comprehensive Exam I, Ayurveda Comprehensive Exam II
Master and Doctor of Acupuncture and Chinese Medicine	Acupuncture Competency Exam I, Acupuncture Competency Exam II, Acupuncture Competency Exam III
Doctor of Acupuncture and Chinese Medicine	Capstone
Doctor of Chiropractic	Chiropractic Foundational Health Sciences Exam, Chiropractic Clinic Entrance Exam, Chiropractic Clinic Exit Exam
MS Physician Assistant	Physician Assistant Comprehensive Exam I, Physician Assistant Comprehensive Exam II; Capstone
MS Human Genetics and Genomics	Capstone Project – NIH-style Grant Proposal
MS Medical Science	Comprehensive Exam

IV. ACADEMIC AND OTHER SUPPORT SERVICES (CFR 2.4, 2.5, 2.12, 2.13)

SCU provides comprehensive academic and other support services as detailed in the catalog. Consistent with its commitment to integrative, whole-person health, SCU recognizes that student success is impacted by factors outside of the classroom. SCU is constantly seeking to improve the academic and support services available to students. Considerable progress has been made in recent years spurred in part by the circumstances of the pandemic.

READINESS FOR PROGRAM OF STUDY

An interdepartmental Enrollment Management Council (EMC) works together to provide a seamless, supportive student enrollment process. The Assistant Dean of Academic Affairs sits on both the EMC and the Academic Council to serve as a bridge between student and academic services.

A multi-module orientation that includes both synchronous and asynchronous components has been revamped and is continuously evaluated for improvement. Orientation covers key policies, technology, resources, mental health, and more. Students report the orientations to be helpful, with nearly 100% “strongly agree[ing]” that their orientations with their programs were helpful.

Additionally, success modules have been developed in response to faculty concerns about student academic readiness. Success modules are short, online “refresher courses” available at no cost to students who need or desire additional academic preparation, covering Anatomy, Physiology, Introductory Chemistry, General Chemistry and Organic Chemistry. Introductory Chemistry and Anatomy & Physiology success modules were originally introduced for the DC program: 36 students enrolled in AY2020-2021, 40 in AY 2021-2022. Their impact on student success is currently being analyzed. Still, due to the perceived value of these modules, access to the success modules is expected to increase.

General Chemistry and Organic Chemistry success modules are also available for Accelerated Sciences students who wish to register in General Chemistry I/II and Organic Chemistry I/II but who do not have recent

exposure to high school level Chemistry. These success modules function as a “virtual learning resource center” with curated open-source supplemental videos and faculty-made study guides. Between AY2020-2021 to AY2021-2022, 140 students have enrolled in the General Chemistry success module and 309 in the Organic Chemistry Success Module. Similar success modules for Microbiology and Physics, courses with lower-than-average pass rates, are currently underway.

MONITORING STUDENT PROGRESSION AND INTERVENTION

SCU employs a shared model of advising, in which students receive advising services from both their program and the Student Support Office. Student progression is articulated in the catalog and closely monitored through in-term monitoring in all programs.

Exhibit 5.4 provides a sample of in-term monitoring for the Doctor of Chiropractic (DC) program.

Academic Development Plans (ADPs) are deployed to assist at-risk students in staying on track toward successful program completion. ADPs provide prescriptive support such as tutoring, scheduling, or other resources (**exhibit 5.5**). In full-time programs, SCU accommodates students who need to adjust the pace of their programs through the use of special schedules. Tutoring is available to all students. Tutoring differs by program but generally includes individual faculty tutoring, group faculty tutoring, and/or peer tutoring. SCU’s Student Support Office typically coordinates over 20 different group tutoring subjects per term, allocates about 7,000 hours of tutoring per term, and—when not closed due to the pandemic—holds about 80 hours of practical open lab tutoring session per week.

HEALTHCARE

Consistent with its commitment to integrative, whole-person health, SCU provides student access to both physical and mental healthcare services. SCU Health provides student access to acupuncture/traditional Chinese medicine, Ayurveda, chiropractic, diagnostic imaging, and fitness training. Ninety-three percent of students are aware of these services and 42% report using them (a number likely reduced by the pandemic and remote learning). As of February 14, 2022, there have been 5,327 student visits to SCU Health this academic year (including 2,759 chiropractic, 1,342 Chinese medicine, 591 Ayurveda, and 437 medical). The most recent evaluation of overall patient satisfaction at SCU Health (students and non-students) was 98%.

SCU has partnered with All One Health to provide students with free and confidential mental health services and medical advocacy via 24/7 telephone support, chat, or app. Eighty-four percent of students report awareness of this service. Between April 2021 and December 2021, 21.5% of students utilized the service.

LICENSURE EXAMINATION SUPPORT

Programs leading to licensure or certification offer various forms of test preparation support including practice examinations and/or comprehensive exams designed to prepare students for the licensure exam. The DC, MSPA, and MSMS offer professional test preparation services. MSMS offers MCAT preparation services because MSMS students typically intend to apply to medical school or other competitive programs.

Programs that offer internal comprehensive examinations have conducted analysis to determine how well these

exams predict passage on licensure exams. The MSPA program recently correlated practice examination scores to licensure examination passage rates. The DC program previously found that 100% of students who passed all parts of the first comprehensive exam on the first attempt also passed the first licensure exam on the first attempt. Ninety percent of students who failed two or more parts of the comprehensive exam on the first attempt also failed the licensure exam on the first attempt. This kind of predictive analysis allows programs to intervene before the student takes the exam. For example, MSPA offers mandated tutoring, practice questions, and two practice exams for those predicted to struggle on the examination.

ACCOMMODATION SUPPORT AND ADA COMPLIANCE

Students may request accommodations under Section 504 of the Americans with Disabilities Act as amended at any time. A recent survey found that 88% of SCU students were aware of accommodation services, 10% had used the service, and 64% of users found the service helpful. SCU is pleased that most students are aware of the service but will seek to better understand the reason that 1 in 3 users reported that the service was not helpful. The wording of the survey is believed problematic (SCU is in the process of evaluating its student engagement/satisfaction survey methodology). As of the Spring 2022 census, 89 students were provided accommodations.

SCU has adopted technology to aid with ADA compliance, including the ECHO 360 platform in 2020 to provide lecture capture and captioning. Faculty ADA compliance training has been provided. Importantly, The Big Leap course review and uplift process will further support compliance and accessibility. Additionally, SCU made

Quality Matters training available for all faculty beginning in 2022. This will help faculty – most of whom are trained clinically – understand how and why to deliver accessible courses. The Online Education Department supports these efforts with instructional design expertise.

CLUBS AND ACTIVITIES

SCU offers 19 student-driven clubs with interests ranging from health discipline, to culture, to community engagement. Ninety-two percent of students are aware of clubs and 25% report participation.

The student government (ASB) creates a forum to engage students in opportunities that promote service, honor diversity, increase engagement, contribute to health equity, and develop camaraderie and belonging. The ASB President meets with SCU's President and participates with the Board. The ASB hosts many campus events, leadership trainings, speakers, service opportunities, and more.

In 2022, ASB funded inclusivity training series for students, faculty, staff, and administration regarding LGBTQ communities. Ninety-six percent of attendees felt more knowledgeable about non-binary and transgender inclusion, and 100% felt more knowledgeable about inclusive vocabulary and best practices. Content from the series was woven into the integrative health promotion symposia series.

V. REFLECTION

SCU has excellent student outcomes as indicated by its retention, graduation rates, licensure pass rates, and student learning outcomes. End-of-course surveys and assessment data are used to identify opportunities for

improvement throughout students' program of study.

Academic and other support services are robust and positively contribute to student success.

Despite strong student outcomes, SCU recognizes opportunities for improvement related to student success:

- SCU should improve surveying and reporting of alumni data, including employment and graduate/professional program acceptance.
- SCU should expand lessons learned in high-performing programs to other areas of the university (e.g. adapting MSPA advising model to other programs).
- SCU should continue to disaggregate student performance data to improve data analysis and identify opportunities for tailored student support.
- While encouraging data is available, SCU should improve its understanding of usage and perception of academic and support services, including if services are achieving their aims, if groups are impacted by differential access, and how to improve support and reduce achievement and/or support gaps.

CHAPTER SIX

(CFR 2.4, 2.6, 2.7, 2.10, 2.11, 2.13, 4.1, 4.2, 4.3, 4.4, 4.5, 4.6, 4.7)

QUALITY ASSURANCE

I. INTRODUCTION

This chapter describes program review and assessment at SCU, as well as how institutional effectiveness analysis works with these to inform decision making and support ongoing quality assurance.

II. ACADEMIC PROGRAM REVIEW (CFR 2.4, 2.7, 4.1, 4.3, 4.4, 4.5, 4.6, 4.7)

HISTORY

In 2017, the Office of Institutional and Academic Insights (IAI, formerly known as OIE) re-evaluated SCU's program review process based upon feedback from WSCUC. The updated process was implemented in 2018 and 2019. Feedback from programs participating in the process indicated that redundancy remained with professional accreditation, and that timing of internal cycles could better align with accreditors. Additionally, participants as well as IAI felt that output could be of higher value. In 2020, IAI and the Accreditation Coordinating Council (ACC) ([exhibit 3.5](#)) further refined program review to "crosswalk" and align with professional accreditor timelines and requirements. The process enhanced outputs and yielded a formal "closing of the loop" regarding recommendations.

The program review handbook has been included in [exhibit 6.1](#). A high-level summary of the process appears in [CFR exhibit 2.7a](#). In 2021, WSCUC commended SCU for "putting in place appropriate

protocols ... for program review, in particular coordinating programmatic accreditation ... with the university's own internal program review process." Ayurveda, Chiropractic, and Eastern Medicine program review documents are included as [CFR exhibit 2.7b](#), [CFR exhibit 2.7c](#), and [CFR 2.7d](#).

CURRENT PROCESS

The six-year program review cycle aligns with professional accreditation review when possible. As of December 2021, two degree programs and two certificate programs have used the new process. In 2021/2022 an additional program is underway and two certificate programs are in midcycle review. Each program is reviewed at least once in each six-year period in addition to the mid-cycle review.

The cycle begins with appointment of a self-study group. The group uses institutional prompts and data to carry out the review and utilizes an external reviewer. Conclusions are drawn by the group. When the process supplements an external self-study, the accreditor serves as external reviewer, and the program completes a "cross walk" to ensure SCU-program review items are covered.

The results are shared with the ACC, which along with the Provost's Office hold the program accountable to "close the loop." SCU has a formal "close the loop" process for programs to indicate required changes, follow-up, and obtain fiscal support based on findings

and recommendations, articulated in the template and demonstrated in the closing pages of each program review report. In Fall 2022, the institution expects to introduce the CIRCLE (Continuous Improvement Review/Closing the Loop Evaluation) Report to institutionally summarize programmatic “close the loop” processes. Programs utilize the reports and findings in faculty retreats and other formal reviews and meetings for program improvement.

SCU has an excellent record of completing recommendations and funding initiatives related to these processes, as the recommendations feed directly into the financial planning for programs. An abbreviated list of changes resulting from this process from the last two years includes: hiring the Ayurveda Assistant Program Director, pursuing the substantive change for Ayurveda certificates, aligning the Ayurveda schedule to the academic calendar, adding 24-hour IT support, hiring administrative and advising support in the Los Angeles College of Chiropractic, funding a Doctor of Chiropractic (DC) accreditation coordinator, offering board exam review courses to Chiropractic students, and revising the Doctor of Acupuncture and Chinese Medicine curriculum.

Overall, this review indicated that programs are participating in program review and that the process is effective at helping programs improve. Evaluation of completed reviews showed varying sophistication at the levels of evaluation required for the review and for the nature of the program (certificate vs. professional degree or professionally accredited vs. institutionally accredited). However, each program successfully completed the review and the “close the loop” process. Each took advantage of external reviewers. Each pointed to changes made in response. These cases also

revealed that programs that nominally met requirements struggled because of maturity of program assessment infrastructure and understanding, which SCU is working with programs to improve. A table of completed Program Reviews with lessons learned and high-level outcomes is included as [exhibit 6.1](#).

III. ASSESSMENT (CFR 2.4, 2.6, 2.11, 2.13, 4.1, 4.3, 4.4, 4.5, 4.6, 4.7)

PROGRAM LEVEL ASSESSMENT

SCU has two bodies assisting with assessment: the Office of Institutional and Academic Insights (IAI) and the Assessment and Learning Council (ALC). The IAI has expertise in assessment, program review, and data analysis, reporting, and management. Launched in 2020, the ALC is a cross-university group whose charter directs it to facilitate assessment, build an institution-wide community of practice, and ask and answer what students are learning and how we know ([exhibit 3.5](#)). The ALC launched in 2020.

In accord with SCU’s assessment handbook ([exhibit 6.2](#)), every program area is required to submit an assessment plan in August. The plan details the two PLOs that will be assessed that year, including methods, analysis, and communication plan. In September, programs submit an assessment report that addresses the previous year’s results, conclusions, and follow-up. The ALC reviews reports, meets with program leadership, and provides feedback for the next cycle. These reports and plans, along with ALC feedback, are discussed within programs.

During 2021 and 2022, a Curricular Integrity Review was undertaken ([exhibit 3.6](#)). Every course had its description, credits, outcomes, assessment and PLO mapping, and

other elements individually reviewed. Course name, number, description, and delivery method were confirmed in Summer and Fall 2021. Every course had its syllabus revised, submitted through the software supported approval and management process, and approved by appropriate stakeholders including the Faculty Senate's Instructional Programs Committee.

During 2021 and 2022, programs realigned assessment mapping consistent with the Curricular Integrity Review. Programs that had used ExamSoft for assessment archived data and realigned as needed. Programs that were new to ExamSoft worked with IAI to develop an assessment strategy to achieve program assessment goals. Results support further assessment, course and program improvements, and improve this assessment plan cycle in future years. Program review, mid-cycle review (which looks at syllabi, credit hour review, and curriculum mapping) and other processes described here are part of ongoing quality review at SCU.

INSTITUTIONAL ASSESSMENT

With the addition of new programs and an ongoing focus on institutional transformation, SCU introduced several important assessment initiatives. These include 360s, the introduction and reporting of key institutional performance indicators (KPIs), and the introduction of annual transformative initiatives. 360s were launched in 2019 to provide an interdepartmental, collaborative forum to accelerate program or service improvements. 360s were held in 2019 for every program offered at that time. Action items were recorded, monitored, and achieved ([exhibit 6.3](#)). SCU plans to expand the use of 360s to at least two areas of SCU per year after COVID allows the campus to safely fully open.

KPIs were established in 2019 and are reported three times per year. KPIs established standards for enrollment performance, student satisfaction, employee engagement, financial performance, technology infrastructure, student retention, licensure exam passage rate, and accreditation management ([exhibit 6.4](#)). They are shared widely across the university and used by the Board of Regents to monitor performance.

SCU selects key transformational initiatives annually, which are assessed for outcomes and tie to the strategic plan. Summary documents describing the initiatives are shared widely across the university and used by the Board of Regents to monitor performance ([exhibit 6.5](#)). Ongoing progress on these initiatives is also shared by the President each term during the President's Town Hall.

OTHER ASSESSMENT

In addition to program review, assessment plans, 360s, KPIs, and annual goals, SCU has initiated a number of assessment efforts intended to support the transformation of the university.

Assessment Initiative	Goals/Outcomes
Curricular Integrity Review	(2021-2023) Syllabi reviewed and updated after best practice assessment by Academic Operations, Online Learning, the Center for Faculty Development and Excellence, and the Instructional Programs Committee of the Faculty Senate.
Project RIPPLE	(2020-2022) Major university publications, policies, and practices reviewed and updated: Catalog, Faculty Handbook, Employee Handbook, Board Manual, Campus Safety Manual (SCU Health Handbook pending at time of publication). Publication cycle established. New software for catalog and syllabi management implemented. Faculty classifications defined, reviewed, and confirmed or corrected.
Admissions Review	(2019) Admissions process effectiveness and efficiency reviewed in collaborative effort between marketing, admissions, and academic programs. Modifications improved application and matriculation yields.
Student Government Review	(2021) Focus groups held and best practices identified under guidance of Student Services. New student government structure launched in 2021.
Culture and Climate, Satisfaction and Engagement	(2015-present) From 2015-2018, annual surveys and/or focus groups assessed “pulse” of SCU among all constituents. Culture Crew launched to support engagement efforts. Values defined in 2017; updated in 2020. KPIs capture essential satisfaction and engagement items beginning 2020. Great Colleges participation resumed in 2022.
Faculty Information System/Project EDIT	(2020-present) Faculty Information System Interfolio acquired in late 2020. Installation revealed opportunities to improve information flow at hire and status change. Project EDIT (Employee Data Information Transfer/Flow), launched in response in 2022. EDIT will enhance review of workload, qualifications, rank eligibility, success of rank application, publications, service, and more.
Co-Curricular Learning	(2022 enhancements) SCU has a long history of rich co-curricular activities, intrinsic to program success, inextricably linked to the nature of professional programs, and tied to all program evaluation. Starting in 2022, enhanced formalization underway with three objectives: professionalism, integrative health, and inclusivity, development of three-level assessment (activity classification, simple outcomes assessment, and deep assessment of signature activities), and continued formal feedback to assess effectiveness and provide conclusions for institutional improvement.
Interprofessional Education	(2018-present) SCU’s Model of IPE launched. Assessment of attitudes towards collaborative practice began with instrument piloted in the DC program in 2018, rolling out to other programs in 2021, 2022, and beyond. Initial data confirms over 90% of students come to SCU with willingness to engage in collaborative practice. Additional data from SCU weekly interprofessional grand rounds demonstrates support.
Software Enhancements	(2016/2017-present) Evaluation and deployment of numerous best-in-class tools to improve administrative infrastructure, provide better data, and support student outcomes (e.g. faculty management system, financial management system).
IT Infrastructure	(2019-present) Multiple years of survey data revealed dissatisfaction with IT services and support, with both rated “needs much improvement” in 2019/2020 KPIs. IT worked to address concerns, obtain feedback, and respond and report specific improvements. IT ratings have improved rapidly, with infrastructure nearly rated “good” and support rated “good” in recent KPIs, a remarkable turnaround.
Facilities	(2019-2021) Two major initiatives assessed facilities: CxC (Classroom by Classroom) and T4 (Time To Tackle Tech). CxC involved formal evaluation of every learning space with significant upgrades in response and routine classroom walk throughs continuing. T4 involved review of every software product and service used by SCU to determine business owners and evaluate utility of each product. Business owners make ongoing budgetary recommendations each budget cycle.

IV. DATA COLLECTION, ANALYSIS, AND USE IN PLANNING (CFR 4.1, 4.2, 4.3, 4.4, 4.5)

In 2016, most SCU programs relied on course and assignment grades to indicate PLO achievement. Most administrative units relied heavily on manual processes. Several administrative support units did not yet exist or lacked necessary technical knowledge, making it difficult for the university to adequately oversee quality assurance. Support for academic assessment specifically, and quality assurance generally, has grown significantly since 2017 with improvements in data collection, analysis, and use.

In 2017 and 2018, the DC improved processes to measure 31 accreditor-required outcomes for each individual student in each term of the clinical year to ensure 100% of graduates achieved 100% of required competencies. This required use of ExamSoft and other tools, assignment of programmatic data management personnel, and support of faculty. The program held inter-rater reliability training, defined cohort and individual standards, mapped responses to outcomes, and maintained a feedback loop ([exhibit 4.5](#)).

In 2020, the Master of Science in Medical Science (MSMS) launched in collaboration with a partner institution that utilized predictive analytics, opening the way for SCU to improve the use of predictive analytics for student success. Similarly, with the help of consultants in 2020 and 2021, the Master of Science: Physician Assistant (MSPA) improved assessment methods and predictive analytics regarding student performance and learning. MSPA now has early intervention, predictive tools related to licensure exam passage, and other mechanisms to

assess and assure student learning. See [exhibit 6.6](#) for examples of predictive analytics in MSMS and MSPA.

The Curricular Integrity Review ([exhibit 3.6](#)) encompassed the review of all 400+ courses, a remap/verification of assessments and outcomes, a realignment with the catalog, and ongoing support with curriculum management software. The Curricular Integrity Review was in addition to ongoing, routine quality assurance processes; both include gap analysis. Course management processes in Canvas have been revised, instructional design support has been improved, and Quality Matters training has been made available to all faculty to support quality assurance.

SCU's administrative assessment infrastructure has strengthened since 2017. When WSCUC visited in 2017, tools related to student, faculty, and financial information; relationship management; admissions funnel management and student lifecycle management; and more were antiquated. SCU has successfully deployed Salesforce, Jenzabar J1, Interfolio, Prophix, EXXAT, Canvas, Curriculog, Acalog, and other tools to improve performance. The use of these tools improved enrollment and fiscal assessment, management, and performance. SCU performed well during the pandemic, and students were retained and supported in their progress, in part because new tools supported analysis and action.

SCU initiated processes to oversee quality assurance and drive continuous improvement. This is evident in the formation of the Data Governance Committee; the establishment of the Accreditation Coordinating Council and Assessment and Learning Council; the formalization of curriculum maps, programs reviews, and assessment

plans; the creation of advisory boards; the launch of Data Vitals and other institutional research reports ([exhibit 5.1](#)), and the use of 360s. Each of these have improved SCU decisions and actions.

Further, the Office of Institutional and Academic Insights has collaborated with IT in the ongoing development of the Data Warehouse to accurately host and store data and dashboards for business intelligence, as well as a website for SCU access to data to improve decision making. The earliest dashboard was launched in 2019 with the report of KPIs. Now, initial iterations of a functional dashboard show a growing ability to have real time information about enrollment, performance, retention, graduation, and other metrics, to support disaggregation, analysis, and response in support of student success. The intent of these tools is to enable leaders and faculty to understand and support students effectively. IT has added staff to boost capacity in this regard.

V. REFLECTION

SCU has moved from a culture of compliance—doing what is required by its accreditors—to a culture of continuous improvement, focused on institutional effectiveness in service of student success. Program review processes are in place and effective. Assessment occurs at the student, program, and institutional level. Structures and resources have been added to support quality assurance.

Despite SCU's considerable progress over the past five years, SCU recognizes that:

- Many of SCU's program review, assessment, and data efforts are in their early stages, and many of SCU's programs are new to the university.

Continuous improvement and attention to data quality, analytics, and use in decision making should remain a high priority.

- Some of SCU's programs have had more experience with program review and assessment than others. SCU should continue to support the Accreditation Coordinating Council, Assessment and Learning Council, and Center for Faculty Development and Excellence to deepen and broaden expertise in program review and assessment including the sharing of best practices.
- SCU should pay particular attention to the use of predictive analytics to allow for targeted, student-specific performance intervention and to address systemic/group performance gaps.

CHAPTER SEVEN

(CFR 3.4, 3.7, 4.1, 4.3, 4.6, 4.7)

SUSTAINABILITY, FINANCIAL VIABILITY, AND PREPARING FOR A CHANGING FUTURE
IN HIGHER EDUCATION

I. INTRODUCTION

This chapter provides trend financial data demonstrating SCU's improved financial condition. Planning and financial management processes, the alignment of resources to strategic priorities, and evidence of SCU's attention to the changing higher education environment are also discussed.

II. IMPROVEMENTS IN FINANCIAL CONDITION SINCE PRIOR VISIT (CFR 3.4)

SCU significantly improved its financial condition since 2017 and has continued the positive trajectory outlined in its 2021 Interim Report. This chapter provides financial data accurate as of July 2022 and includes an overview of planning, investments made to support institutional priorities, and efforts to prepare for the changing higher education landscape.

ADEQUACY OF FINANCIAL RESOURCES

SCU has worked diligently to strengthen its financial position through a combination of revenue growth, expense alignment, and improvements in financial planning and management. This included:

- Restructuring in Spring 2019 to meet strategic goals and align expenses with revenue by program and for the University overall (**exhibit 1.3**).
- Optimizing enrollment performance in existing programs beginning in Fall 2019 by investing in new marketing and admissions leadership, revamping the marketing strategy, investing in automation and improved enrollment management analytics, and implementing Program 360 priorities (**exhibit 6.3**).
- Launching the multi-year new program strategy approved by the Board in August 2020 establishing goals of increasing enrollment to 2000 FTE; diversifying revenue to reduce dependency on the Doctor of Chiropractic (DC) program; and advancing SCU's commitment to integrative health (**exhibit 3.10**).

REVENUE

Total revenue is forecasted to grow to \$45.1M in FY21-22, representing total growth of 108.6% since FY16-17 and a compounded annual growth rate of 15.8%.

	FY16-17	FY17-18	FY18-19	FY19-20	FY20-21	FY21-22 (Forecast)
Revenue	\$ 21,626,522	\$ 23,948,652	\$ 27,066,662	\$ 30,704,352	\$ 39,607,104	\$ 45,132,922
Percentage Growth	-	10.7%	13.0%	13.4%	29.0%	14.0%

SCU anticipates receiving approximately 92.3% of its revenue from tuition and fees in FY21-22. The remaining revenue sources include SCU Health (2.4%), grants and giving (3.7%), federal work study (0.6%), ancillary revenue including bookstore (0.8%), and other revenue (0.2%). SCU had at one time planned to reduce the percentage of revenue from tuition to as low as 60%, an expectation that in hindsight was unrealistic. SCU's revised goal is to reduce tuition from 92% to 90% of revenue by:

- stabilizing SCU Health revenue at approximately 4% of revenue (revenue declined in FY21-22 due to COVID-19 restrictions);
- increasing grants and giving to approximately 4% of revenue;
- stabilizing all other forms of revenue at approximately 2%.

CHANGE IN NET ASSETS/NET INCOME

SCU's change in net assets ("net income") and net income ratio have improved, demonstrating that efforts to align expenses with revenue have been effective.

FY20-21 included \$3.2M in Paycheck Protection Program loan forgiveness and \$2.7M in investment gains, which increased the net income ratio above that achieved by normal operations. SCU chose to invest heavily in its final designated three-year *transformation* period (FY21-22), reducing net income ratio to 11.2%. Total compensation increased 21.7% over prior year, operating expenses increased 8.8% over prior year, and an additional \$700k was invested in new programs. While this reduced net income ratio, it allowed SCU to manage enrollment growth, support new programs, and enter its *industry leader* phase from a position of operational strength

	FY16-17	FY17-18	FY18-19	FY19-20	FY20-21	FY21-22 (Forecast)
Net Income	\$ (2,051,437)	\$ (3,564,906)	\$ (3,209,220)	\$ 2,959,229	\$ 10,744,583*	\$ 5,070,553
Net Income Ratio	(9.5%)	(14.9%)	(11.9%)	9.6%	27.1%	11.2%

COMPOSITE SCORE

SCU's strengthened financial position is reflected in its Department of Education Composite Score.

	FY16-17	FY17-18	FY18-19	FY19-20	FY20-21	FY21-22 (Forecast)	Good Standing
Composite Score	2.2	2.2	2.0	3.0	3.0	3.0	1.5 – 3.0

STATEMENT OF FINANCIAL POSITION

SCU's statement of financial position demonstrates the overall improvement in SCU's financial strength. Net assets as a percentage of total assets have improved to 88.1% from a low in FY18-19 of 54.9%. SCU is debt free, having paid off its line of credit and having received forgiveness from its Paycheck Protection Program loan.

	FY16-17	FY17-18	FY18-19	FY19-20	FY20-21	FY21-22 (Forecast)
Total Assets	\$ 36,100,263	\$ 35,048,109	\$ 38,838,992	\$ 36,640,185	\$ 39,889,744	\$ 44,962,259
Net Assets	\$ 28,070,380	\$ 24,505,474	\$ 21,296,255	\$ 24,255,484	\$ 35,000,067	\$ 38,922,539
Equity Ratio	77.8%	69.9%	54.8%	66.2%	87.7%	86.6%
Debt/Equity Ratio	28.6%	43.0%	82.4%	51.1%	14.0%	15.5%
Return on Net Assets	(6.8%)	(12.7%)	(13.1%)	13.9%	44.3%	14.5%
Primary Reserve Ratio	0.53	0.38	0.26	0.38	0.64	0.677

III. PLANNING AND FINANCIAL MANAGEMENT (CFR 3.4, 3.7, 4.1, 4.3, 4.6)

SCU has worked diligently to improve its planning and financial management and believes this has emerged as an area of strength. Enhancements to planning processes, described below, coupled with investments in personnel (e.g. addition of a Director of Financial Planning and Analysis) and software (e.g. Prophix financial management software) have allowed improvements in financial reporting. Of particular note is the creation of segment reports, which allows SCU to better understand the financial contributions of each of its programs and departments. See [exhibit 7.1](#) for a sample segment report.

ANNUAL PLANNING AND BUDGET PROCESS

The adoption of a new planning and budgeting process in Spring 2020 has improved accuracy and efficiency while maintaining the collaborative nature of the prior process. Planning begins with the academic programs and then moves to other departments (e.g. SCU Health, admissions). Budget managers present their plans to their fellow managers. Academics precedes other areas of SCU to underscore that each of the other departments' primary purpose is to support the academic programs in delivering high-quality programs. The process requires budget managers to evaluate their resource requests against key priorities (e.g. faculty support and quality, student success, clinical experience, external visibility and relations), thereby ensuring that resources are appropriately aligned to both current and future needs.

The process is adjusted each year based upon feedback from participants. For example, in its second year, a robust competitor tuition analysis was incorporated

into the process. In its third year, each program and department was asked to complete competitive external benchmarking in addition to the competitor information provided by the marketing department. This is intended to expand institutional knowledge of trends at the program, service, and industry level. In this upcoming year, the annual planning and budgeting process will be split into three segments: external benchmarking and internal data review (fall term); department/program planning (spring term), and budgeting and long-range planning (summer term).

In addition, the budget has become more accurate by bringing marketing, admissions, academics, finance, and student services together to set enrollment goals by program. Finally, the budget had historically been approved in late spring/early summer for the following fiscal year beginning September 1. Today, a draft budget is approved by the Board in August each year and then finalized in October, allowing expense adjustments to be made based upon the fall start.

See [exhibit 7.2](#) for an overview of the annual planning and budgeting process.

LONG-RANGE PLANNING

SCU developed its first-ever 10-year financial model. The long-range plan establishes enrollment, revenue, expense, and net income targets by year. The long-range plan is adjusted annually based upon the annual department/program plans, institutional performance, shifting priorities, and changes in the market. It augments the annual budgeting process and has improved the Board and administration's understanding of the financial sustainability of the institution. It is intended, in part,

to identify capital and other investments necessary to maintain a strong foundation while investing in the future and executing the institutional plan. See [exhibit 7.3](#) for an excerpt of the long-range plan.

PROGRAM PLANNING

In addition to the formal annual budgeting process and long-range plan, the Program Launch Planning (PLP) team regularly reviews the financial ramifications of any significant program-related changes, including program revisions and new programs. PLP representatives work closely with a consultant (for new programs) or with the program director (for existing programs) to develop the multi-year pro forma. These pro formas are used to determine the financial viability of the proposal, to inform the annual budget process, and to obtain Board approval when necessary. See [exhibit 7.4](#) for a sample new program pro forma.

CONTINGENCY AND RESERVE PLANNING

Beginning in FY20-21, SCU includes contingency and reserve funds to allow for unexpected expenses.

Contingency funds (related to new operations) were set aside for new program related expenses. Reserve funds (related to existing operations) are allocated to each Cabinet member based on their percentage of operational expenses. In addition, Finance determines a COVID-19 reserve budget and a general institutional reserve budget. In FY21-22, SCU's \$1M reserve funds proved invaluable, allowing SCU to allocate an additional \$315k toward marketing to address unanticipated shortfalls in inquiry generation and to absorb an additional \$200k in

COVID-19 testing costs. See [exhibit 7.5](#) for details on the contingency and reserve budget.

ADAPTING TO COVID-19

In response to COVID-19, SCU's monthly reporting package was augmented with optimistic and pessimistic projections to account for the uncertainty created by the pandemic. Projections were routinely discussed with the COVID-19 Board Task Force, which met monthly from March 2020 through August 2020. Beginning September 2020, COVID-19 monitoring was transitioned to the Business and Infrastructure Committee of the Board and a COVID-19 contingency budget was created to allow for unexpected expenses. See [exhibit 7.6](#) for details on COVID-19 scenario planning.

CAMPUS RELOCATION

SCU is actively planning relocation to a modern, build-to-suit facility with improved transportation access. The projected timeline, contingent upon numerous factors (e.g. entitlements, land sale, construction schedules), targets an August 2025 move to the Advanced Technology and Education Park in Tustin, California. The existing campus is sufficient to accommodate SCU's current programs as well as future planned programs.

IV. ALIGNMENT OF RESOURCES TO INSTITUTIONAL PRIORITIES (CFR 4.3, 4.6)

SCU's planning processes ensure that resources are aligned with institutional priorities. SCU invests in student success in numerous ways, both inside and outside of the classroom, routinely adjusting resource allocations according to student needs. SCU has also made significant investments in formalizing committees (e.g. Interprofessional Education Council) and creating new departments (e.g. Center for Faculty Development and Excellence) to support educational effectiveness. Major initiatives such as the data warehouse and the annual calendar of survey and reports are intended to strengthen SCU's ability to use data for improvement.

Examples of Recent Investments in Student Success

Investment	Description
Increased Tutoring and Advising Resources	Two academic advisors added to Doctor of Chiropractic Additional tutoring hours made available to Ayurveda students
Improvements in Online Student Experience	Creation of Department of Online Education Investment in "The Big Leap" course redesign and uplift
Increased Support for Faculty Training and Development	Creation of Center of Faculty Development and Excellence Professional Development Allocation to all University and SCU Health Faculty Investment in Quality Matters training including purchase of two course seats per faculty member Instructional Designer assigned to each program to assist faculty with course design and provide on-demand training
Enhanced Educational Technology Resources	Implementation of Echo 360 lecture capture software Virtual, simulation software: 3D4 Medical; Draw It to Know It; WiseMD; i-Human; SonoSim; Aquifer Implementation of 24/7 technology support
Increased Mental Health Resources and Services	All One Health Mental Health Services Test Anxiety Student Workshops Prior to Exam Week
Increased Support for Exam Preparation	PA Program Hired Four Additional Tutors PA and DC programs purchased two prep exams per student
Increased Training on Supporting Diverse Student Populations	LGBTQ+ Workshop Series for Faculty LGBTQ+ Workshop Series for Students

V. ADAPTING TO THE CHANGING HIGHER EDUCATION LANDSCAPE (CFR 4.1, 4.7)

The University is acutely aware of the challenges facing small institutions. Over the past few years, SCU has attempted to create an environment in which knowledge of the changing higher education landscape is acquired, shared, and acted upon. This is accomplished through participation in workshops and professional associations; through Board, Cabinet, and Provost Council retreats; through targeted faculty development (e.g. responding to the student mental health crisis); through the PLP team which regularly conducts market reviews and competitor analyses; and through the annual budgeting process which incorporates market analysis.

Some of the most significant challenges specific to SCU appear below, along with responses. SCU continues to monitor changes and adjust our priorities and strategies accordingly.

Key Challenge	Response
Keeping Pace with Emerging Technology	<p>Outsourcing IT to Synoptek, a company whose core competency is IT rather than academics</p> <p>Investments in automation as noted in Chapter 1</p> <p>Creation of T4 Tracker, an inventory of all technology delineating business owner, support model, and contract details</p>
Continued Expansion of Online Education	<p>Creation of Online Education department</p> <p>Introduction of online programs</p> <p>Expansion of online and blended courses</p>
Competing for Talent in Evolving Labor Market	<p>Adoption of Remote Work Strategy including standardized at-home technology and ergonomic workspaces (exhibit 7.7)</p> <p>Maintenance of benefits, annual raises, and merit bonuses as a budget priority</p>
Competing with Larger Institutions	<p>Partnerships with other universities (e.g. Ponce Health Science University)</p> <p>Partnerships with employers (e.g. Education Fund, an employer-sponsored tuition program for healthcare workers and The Joint, a large employer of chiropractors)</p> <p>Participation in consortia (e.g. Acadeum, a course-sharing platform that facilitates a consortia arrangement between schools)</p> <p>Ongoing exploration of mergers, acquisitions, and other corporate structures by the President and Board</p> <p>Implementation of “Go Beyond” brand campaign</p> <p>Adherence to Program Design Principles which emphasize marketability, relevance, and innovation, in addition to quality</p>
Increased Complexity in Higher Education	<p>Board expanded to include more higher education expertise (marketing, legal, online)</p> <p>Board task forces formed to tackle key challenges</p> <p>Investment in data warehouse to increase business analytics and improve decision making (total investment of \$150k over two years)</p>

Key Challenge	Response
Aging Campus/Deferred Maintenance	Relocation to a new campus (anticipated) that will incorporate “next generation” design for maximum flexibility
Nationwide Enrollment Declines/Demographic Changes	Strategic program diversification supported by comprehensive program strategy Introduction of evening, weekend, and part-time options for nontraditional, adult students Introduction of certificate programs and short-courses Continued investment in Accelerated Sciences including microsite
Shifting Healthcare Landscape	Creation of program-specific advisory boards to provide insights from industry, employers, and other external sources Investments in <i>SCU Model of Interprofessional Education</i> to respond to growth in integrative healthcare Piloting and championing value-based and other innovative payment models through collaboration with like-minded payers, including self-insured employers Focus on chronic disease prevention/personalized lifestyle health using tools like health coaching and Motivational Interviewing to enhance integrative professions

VI. REFLECTION

SCU has strengthened its financial position, improved its planning and financial management, and created a culture that regularly identifies and responds to shifts in the higher education landscape. SCU has also expanded its commitment to student success by considering students’ needs both inside and outside the classroom, as evident in increases in tutoring, advising, educational software, and mental health support.

Alongside the considerable progress made over the last five years, SCU recognizes that:

- Planning processes are relatively new and must be continually evaluated and improved.
- SCU remains a small, tuition-dependent institution and must continue to focus on individual program contribution margin, program diversification, and careful expense management.
- While SCU will continue to pursue avenues to increase giving, it will not rely on it for the financial health of the University.
- SCU’s use of data and business analytics must become more sophisticated to improve the speed and effectiveness of decision-making processes.
- SCU must continue to prioritize the exploration of mergers, acquisitions, and new forms of partnering.

CHAPTER EIGHT

CONCLUSION

I. REFLECTION

This self-study provided the university an opportunity to reflect on its history; to affirm its commitment to integrative, whole-person health; to uninhibitedly confront weaknesses; to identify continuous improvement opportunities; and to provide meaningful insights to SCU as it develops its next strategic plan. The process also underscored the importance of SCU continuing to effectively manage change while focusing on continuous improvement and student success.

II. NEXT STEPS

SCU's institutional strategic plan expires in 2023, shortly after the conclusion of the reaffirmation process. Findings will inform the next institutional plan. The following themes emerged as relevant to the institutional plan:

MAINTAIN AND ENHANCE STUDENT SUCCESS

SCU has excellent student outcomes as measured by retention, graduation rates, and licensure pass rates. SCU will continue to strengthen the systems and processes that support academic quality (e.g. instructional design), faculty development (e.g. Center for Faculty Development and Excellence), meaningful assessment (e.g. Assessment and Learning Council), program review (e.g. Accreditation Coordinating Council), and other opportunities for improvement (e.g. Program 360s, recommendations from the President's Task Force on Diversity, Equity, and Inclusion).

PROMOTE FACULTY EXCELLENCE

SCU established the Center for Faculty Development and Excellence, created its first-ever Online Education department, implemented a curriculum management system and faculty information system, and revamped the Faculty Handbook including policies related to rank and performance appraisal. These efforts to support faculty will continue and expand as SCU grows and as students' needs evolve. Of particular focus will be ongoing support to provide faculty and programs with actionable, disaggregated data relevant to promote student success at the individual and program level.

IMPROVE FINANCIAL SUSTAINABILITY

The self-study confirmed SCU's progress in improving its financial condition as evident in the 105.7% increase in revenue and an improved balance sheet. Still, SCU recognizes that risks to small universities lacking large endowments will remain. SCU will continue to explore opportunities for revenue growth through new program development, possible geographic expansion, aggressive pursuit of partnerships, and openness to a merger or system affiliation.

SUPPORT THE SCU MODEL OF INTERPROFESSIONAL EDUCATION

The *SCU Model of Interprofessional Education* demands that SCU strengthen its commitments to health equity, inclusivity, evidence-based practice, and integrative

health. The model will continue to serve as a guidepost for academics and student support services.

ENGAGE WITH ALUMNI

Throughout the self-study, it was clear how little SCU understands about alumni employment. As a professional school, SCU has relied on licensure pass rates and low cohort student loan default rates as primary measures of graduate success. As SCU adds programs, some of which do not lead to licensure, it must expand data collection and analysis to include graduate/professional school attendance and employment data.

USE DATA EFFECTIVELY

The self-study confirmed that SCU has made tremendous strides in collecting, analyzing, reporting, and using data across the university including the assessment of student learning. Key Performance Indicators are regularly measured. An annual calendar of surveys and reports is adhered to. Management and operational dashboards are live. Committees and councils routinely review data accuracy and processes for improvement. The annual

planning process requires internal and external data reviews. Predictive analytics are used to intervene for individual students. Assessment plans are in place. Yet, SCU recognizes that many of these efforts are relatively new and will require continuous support to ensure the meaningful data analysis vital for its success.

III. A TRANSFORMED UNIVERSITY

The process of preparing this report confirmed that SCU is a transformed university, strengthened since the Commission's prior visit in almost all areas. SCU has revitalized its academic enterprise, organizational structure, and business practices, positioning itself to become an industry leader in integrative healthcare education.



REPORT EXHIBITS

<u>1.1</u>	<u>Refreshed Institutional Plan to 2023</u>	<u>4.3</u>	<u>MACM and DACM Clinical Assessment Procedures</u>
<u>1.2</u>	<u>Three Phases of Institutional Development</u>	<u>4.4</u>	<u>Cohort Performance Expectations, Detection Methodology, and Response Example</u>
<u>1.3</u>	<u>Organizational Charts</u>	<u>4.5</u>	<u>DC Assessment Map Cohort Performance and Individual Performance</u>
<u>1.4</u>	<u>Response to Covid-19</u>	<u>4.6</u>	<u>Example ExamSoft Assessment Data</u>
<u>1.5</u>	<u>Online Education at SCU</u>	<u>4.7</u>	<u>MSPA Program PLO Map, Assessments, and Results Target</u>
<u>2.1</u>	<u>Review Under the Standards</u>	<u>4.8</u>	<u>Example Program Comprehensive Examination Linkage to Licensure Examinations</u>
<u>2.2</u>	<u>Institutional Plan Self-Assessment</u>	<u>4.9</u>	<u>Sample Outcomes Data BSHS and MSMS</u>
<u>2.3</u>	<u>KPI Report 2020-2021</u>	<u>5.1</u>	<u>Data Vitals Spring 2021</u>
<u>2.4</u>	<u>AGB Nason Board Award (Trusteeship Excerpt)</u>	<u>5.2</u>	<u>Explorance Student Rating of Instruction Report Example</u>
<u>3.1</u>	<u>Course and Program Examples</u>	<u>5.3</u>	<u>Course Evaluations Report Example</u>
<u>3.2</u>	<u>Interprofessional Education Related Survey Results</u>	<u>5.4</u>	<u>In-term Academic Monitoring Example</u>
<u>3.3</u>	<u>The SCU Model of Interprofessional Education</u>	<u>5.5</u>	<u>Academic Development Plan Example</u>
<u>3.4</u>	<u>Sample of Research, Scholarship and Service</u>	<u>6.1</u>	<u>Program Reviews Lessons Learned</u>
<u>3.5</u>	<u>Council Charters (Accreditation Coordinating, Assessment and Learning, Interprofessional Education)</u>	<u>6.2</u>	<u>Academic Program Assessment Handbook</u>
<u>3.6</u>	<u>Curriculum Integrity Review Summary</u>	<u>6.3</u>	<u>360 Action Plan February Update to the Board</u>
<u>3.7</u>	<u>Faculty Training and Development Overview</u>	<u>6.4</u>	<u>KPI Year to Year Comparison</u>
<u>3.8</u>	<u>The Big Leap at SCU Summary</u>	<u>6.5</u>	<u>Transformation 2021 Goals (Example Annual Goal document)</u>
<u>3.9</u>	<u>PreEnrollment Planning Process Excerpt</u>	<u>6.6</u>	<u>Examples of MSMS and MSPA Predictive Analytics</u>
<u>3.10</u>	<u>Master Program Strategy Excerpt</u>		
<u>4.1</u>	<u>Summary of Use of Outcomes</u>		
<u>4.2</u>	<u>Curriculum Map and Summary Assessment Plan Example</u>		

REPORT EXHIBITS

(CONTINUED)

- [7.1 Sample Financial Segment Report](#)
- [7.2 Overview of Annual Planning and Budgeting Process](#)
- [7.3 Long-range Financial Plan](#)
- [7.4 Sample New Program Financial Pro Forma](#)
- [7.5 Contingency and Reserve Budget](#)
- [7.6 Covid Scenario Planning Summary](#)
- [7.7 Future of Work Presentation](#)

CFR EXHIBITS

CFR 1.3	Academic Freedom Statement	CFR 2.7d	EMD Program Review Report 2020-2021
CFR 1.4a	DEI Overview	CFR 2.8	Faculty and Student Research Policies
CFR 1.4b	DEI Taskforce Charter	CFR 2.9	Faculty Rank, Promotion, and Evaluation Policies
CFR 1.4c	DEI Related Policies	CFR 2.10a	Disaggregated Retention and Graduation Data For At Least 4 Years
CFR 1.5	Board Resolution - Adoption of WSCUC Governance Policy	CFR 2.10b	Data Sources
CFR 1.6a	Integrity and Transparency - Published Policies For Students	CFR 2.10c	Systematic Use of Data
CFR 1.6b	Human Subjects Protocol	CFR 2.11	Co-curricular Program - Purpose, Alignment, and Assessment
CFR 1.7	SCU'S Commitment to Integrity And Transparency	CFR 2.12	Enrollment Agreement
CFR 1.8	Cover Page	CFR 3.1	Staff and Faculty Demographics
CFR 2.1	Accreditors and Faculty in Non-Accredited Programs	CFR 3.2	Faculty and Staff Policies
CFR 2.2	Programs Express Philosophy Coherent with Mission	CFR 3.3a	Faculty and Staff Training Overview
CFR 2.2a	Assessment of General Education Competencies BSHS	CFR 3.3b	Faculty and Staff Development Policies (Excerpts)
CFR 2.2b	Graduate Program Descriptions	CFR 3.3c	Recent Faculty Training and Development - Detail
CFR 2.3, 2.5	Sample Syllabi	CFR 3.3d	Faculty Training and Development Since 2020
CFR 2.4	Faculty Involvement and Responsibility for SLOs and Standards of Performance	CFR 3.4 a.	Resource Planning
CFR 2.3, 2.5	Sample Syllabi	CFR 3.4 b.	Current Year Budget Package FY21-22
CFR 2.6	Sample Academic Assessment Reports	CFR 3.5	Information and Technology Resources Overview
CFR 2.7a	SCU Program Review Process	CFR 3.6	Leadership Evaluation and Self-Assessment
CFR 2.7b	Ayurveda Program Review Report 2018-2019	CFR 3.7	Organizational Charts
CFR 2.7c	Doctor of Chiropractic Program Review 2019-2020 -Abridged	CFR 3.8a	CEO Position Description

CFR EXHIBITS

(CONTINUED)

<u>CFR 3.8b</u>	<u>CFO Position Description</u>
<u>CFR 3.9a</u>	<u>Board of Regents Committee Assignments 2022</u>
<u>CFR 3.9b</u>	<u>Board of Regents Manual and University Bylaws Effective September 1 2021</u>
<u>CFR 3.9c</u>	<u>Board Meeting Minutes 2019 – 2021</u>
<u>CFR 3.9d</u>	<u>CEO Evaluation Process</u>
<u>CFR 3.10</u>	<u>Faculty Senate Constitution and Bylaws</u>
<u>CFR 4.1</u>	<u>Assessment Infrastructure</u>
<u>CFR 4.2</u>	<u>Institutional Research Capacity</u>
<u>CFR 4.3a</u>	<u>Master Institutional Effectiveness Calendar</u>
<u>CFR 4.3b</u>	<u>SCU's Culture of Evidence</u>
<u>CFR 4.4</u>	<u>Faculty Involvement in Assessment</u>
<u>CFR 4.5</u>	<u>Stakeholder Involvement in Assessment</u>
<u>CFR 4.6a</u>	<u>Refreshed Institutional Plan to 2023</u>
<u>CFR 4.6b</u>	<u>Transformative Initiatives 2020, 2021, 2022</u>
<u>CFR 4.7</u>	<u>Adapting to the Changing Landscape</u>

SCU ACRONYMS

PROGRAM AND DEPARTMENTS

ACM	Acupuncture and Chinese Medicine
ACM12	Acupuncture and Chinese Medicine 12 term
AS	Accelerated Sciences
AYW/AYWE	Ayurvedic Wellness Educator
AYP/AYWP	Ayurvedic Practitioner
AY	Ayurveda
BSBS	Bachelor of Science in Biological Science
BSHS	Bachelor of Science in Health Sciences
CFDE	Center for Faculty Development and Excellence
CHIRO	Doctor of Chiropractic 10 term
CHR12	Doctor of Chiropractic 12 term
DACM	Doctor of Acupuncture and Chinese Medicine
DC	Doctor of Chiropractic
DPT	Doctor of Physical Therapy
EMD	Eastern Medicine Department
FHS	Foundational Health Sciences
GCHGG	Graduate Certificate in Human Genetics and Genomics
HEC	Health Education Certificate
HGGPT	Master of Science in Human Genetics and Genomics Part Time
IAI	Office of Institutional and Academic Insights (formerly OIE)
IPE	Interprofessional Education
LACC	Los Angeles College of Chiropractic
LRC	Learning Resource Center
MACM	Master of Acupuncture and Chinese Medicine
MSMS	Master of Science in Medical Science
MSOL	Master of Science in Medical Science Online
MSPA/PA	Master of Science: Physician Assistant Program
MSHGG	Master of Science in Human Genetics and Genomics

SCU ACRONYMS

(CONTINUED)

OIE	Office of Institutional Effectiveness (now IAI)
OTD	Doctor of Occupational Therapy
SSO/ASO	Student Support Office (former name and organization: Academic Support Office)
STAC	Selectives Department

COUNCILS, COMMITTEES, AND WORKING GROUPS

AC	Academic Council
ACC	Accreditation Coordination Council
ALC	Assessment and Learning Council
EMC	Enrollment Management Council
IEC	Interprofessional Education Council
IPC	Instructional Programs Committee (Faculty Senate)
MASA	Mission, Academic, and Student Affairs Committee (Board of Regents)
PPC	Professional Personnel Committee (Faculty Senate)
PLP	Program Launch Planning Committee

EXTERNAL

ACAHM	Accreditation Commission for Acupuncture and Herbal Medicine
ACGC	Accreditation Council for Genetics Counseling
ACOTE	Accreditation Council for Occupational Therapy Education
ARC PA	Accreditation Review Commission on Education for Physician Assistant, Inc.
BCE	California Board of Chiropractic Examiners
BRN	Board of Registered Nursing
CAB	California Acupuncture Board
CALE	California Acupuncture Licensing Examination
CAPTE	Commission on Accreditation in Physical Therapy Education
CCE	Council on Chiropractic Education
CHES	Certified Health Education Specialist

SCU ACRONYMS

(CONTINUED)

IPEC	Interprofessional Education Collaborative
MCAT	Medical College Admission Test
NAMA	National Ayurvedic Medical Association
NAMACB	National Ayurvedic Medical Association Certificate Board
NAMAC	National Ayurvedic Medical Accreditation Council
NBCE	National Board of Chiropractic Examiners
NCCAOM	National Certification Commission for Acupuncture and Oriental Medicine
NCHEC	National Center for Health Education Credentialing

OTHER

ADP	Academic Development Plan(s)
ASB	Associated Student Body
CIRCLE	Continuous Improvement Review/Closing the Loop Evaluation
CxC	Classroom by Classroom Tracker
EOC/SRI	End of Course Evaluations/Student Rating of Instruction
J1	JOne/Jenzabar1/Jenzabar Student Information System
PEP	Pre-Enrollment Planning Process
PLO	Program Learning Outcomes
SLO	Student Learning Outcomes
ULO	University Learning Outcome
T4	Technology Tracking Spreadsheet