

REPORT OF THE WSCUC TEAM  
For Reaffirmation of Accreditation

To Pacific College of Oriental Medicine

September 17-20, 2019

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

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## **SECTION I – OVERVIEW AND CONTEXT**

### **A. Description of Institution and Accreditation History**

#### ***Background Information***

Pacific College of Oriental Medicine (PCOM) is a private college founded in 1986 in San Diego to offer licensure qualifying programs in Chinese medicine and massage therapy. The college established branches in New York City in 1993, and Chicago in 2000. The current mission of PCOM is to improve lives by educating and inspiring compassionate, skilled leaders of patient-centered, traditional medicine and integrative health sciences. PCOM reports that accreditation has been a source of inspiration as well as a guide for improvement since the institution's inception.

For its first twenty years, Pacific College's institutional and programmatic accreditor was the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). While a supportive partner in the PCOM mission at the time, which was to increase the influence of Chinese medicine, ACAOM's scope of accreditation did not offer the breadth necessary to offer degrees outside of Chinese medicine. To accomplish that, PCOM moved its institutional accreditation to the Accrediting Commission of Career Schools and Colleges (ACCSC) in 2009. However, ACCSC's scope of accreditation did not include the doctoral level, which PCOM felt was an important factor for a healthcare institution. Regional accreditation was then sought through WASC Senior College and University Commission (WSCUC) with the encouragement of Dr. Richard Winn and Dr. Stacy Gomes.

#### ***Institution's Recent Reaccreditation History***

The WSCUC accreditation history of PCOM begins in June of 2009 when the college applied for an eligibility review. That same summer, the Eligibility Review Committee granted PCOM eligibility for four years until fall of 2013. This review was repeated in 2010 when PCOM amended the application to add Bachelor of Science in Nursing (BSN) and Associate of Science (AS) Degree in

Massage Therapy. The Capacity and Preparatory Review (CPR) visit for candidacy was held in spring 2011. In 2012, the Educational Effectiveness Review (EER) visit for candidacy occurred with both the Chicago and New York campuses visited. In 2013, the Commission granted candidacy to PCOM for four years through the spring of 2017. This action was followed in 2014 by a substantive change approval for the Doctorate of Acupuncture and Oriental Medicine program (DAOM). Following adoption by the Commission of a new process for institutions seeking initial accreditation, the CPR and EER planned visits for initial accreditation changed to Seeking Accreditation Visit 3 and 4. Visit 3 occurred in November of 2014, including visits to the Chicago and New York campuses.

Initial accreditation for 5 years was granted by the Commission in February of 2015, with an interim report requested for fall of 2016 and a mid-cycle visit planned for spring of 2018. This action was followed by multiple substantive change interim approvals for doctoral programs throughout 2016. The Commission accepted the PCOM Interim Report in the spring of 2017, noting that a request was made by the Commission at the time for PCOM to address faculty issues, described below. The mid-cycle review was conducted in the spring of 2018. The Commission granted final approval for substantive change (Doctor of Health Science) in 2018. At the present, PCOM has submitted its reaffirmation self-study for the Offsite Review, conducted in the spring of 2019, as well as additional documentation to support the accreditation visit in the fall of 2019. This visit has included both the main campus in San Diego, as well as both off-site campuses in Chicago and New York.

In 2015, the Committee made several recommendations regarding program faculty in its Substantive Change Report for the new Doctorate of Acupuncture degree program. The recommendations generally included concerns regarding the rigor of the new doctorate program, faculty accessibility, as well as sufficient training, orientation and support of faculty. It was also noted that there was a significant number of adjunct faculty to be included in these trainings. Similar concerns were reported the following year in subsequent reports, specifically “Program faculty should

continue efforts to enhance academic rigor of coursework and the doctoral culture of the institution.”

In 2016, the Committee made several additional recommendations in its Substantive Change Report regarding the PCOM distance education BS Completion Program in Holistic Nursing request. These recommendations specifically included the following: 1) Future substantive change proposals must include a clearly articulated assessment plan specifically describing the sequence of program goals, assessment and improvement using direct and indirect measures; (CFRs 2.7, 4.1) 2) Program faculty should monitor the timeliness and sufficiency of the plan for assessing program learning outcomes. Three PLO assessments per program review could result in an extended time period for full program improvement ; (CFRs 2.7, 4.1) 3) The institution should move forward with development of a stronger infrastructure and management of professional student support services beyond the generic role of student advisers; (CFR 2.13) and 4) The institution must continue to build the technology infrastructure that supports the online modality, making adjustments as additional e-learning programs are added to the institution, e.g. 24/7 access for student support services and focused technology assessment methodologies for incoming students . (CFRs 2.1, 3.4, 3.5, 4.7) Later that same year, in its Substantive Change Report regarding the distance education Transitional Doctor of Acupuncture degree program, the Committee offered additional recommendations to PCOM: 1) Program faculty should continue efforts to enhance academic rigor of coursework and the doctoral culture of the institution; (CFRs 2.2, 2.2b) and 2) As the related Master’s program is discontinued, program faculty should ensure that students currently in the Master’s program receive clear and accurate information regarding the transition into the new Doctoral programs. (CFR 2.12)

Summaries of the most recent WSCUC reports are encouraging. The findings of the Interim Report Committee in February of 2017 noted that “the review team commends the institution for successfully including adjunct faculty in its faculty development programs and the demonstrated participation by adjunct as well as full-time faculty in the faculty development programs.” Further, in

January of 2018, the Committee commended PCOM “for providing sufficient technological support for online delivery and program faculty are commended for designing the capstone project as four courses which lead the student progressively toward successful completion of the degree program.” It should be noted that there were no recommendations offered in this particular Accreditation Visit (AV) Team report.

### ***Degree Programs Offered at the Institution***

Operating under its current structure, the PCOM offers the following 14 degree-programs and two certificates recognized by WSCUC (listed by campus location). These programs include 4 Associate, 3 Bachelors, 2 Masters and 5 Professional Doctorate approved programs, including the following topics of study: Advanced Certificate in Chinese Herbology; Associate of Applied Science (Massage Therapies - Chicago); Associate of Applied Science Holistic Health Science (San Diego); Associate of Occupational Studies (Massage Therapy/Asian Bodywork - New York); Bachelor of Health Science (Asian Holistic Health and Massage - San Diego, Chicago); Bachelor of Science in Nursing Completion Program (Holistic Nursing - New York); Doctor of Acupuncture (Chicago); Doctor of Acupuncture and Chinese Medicine (San Diego, Chicago); Doctor of Acupuncture and Oriental Medicine (San Diego); Holistic Nursing Certificate; Master of Science (Acupuncture) (Chicago, New York); Master of Science of Traditional Oriental Medicine (San Diego, Chicago, New York); Transitional Doctor of Acupuncture; and Transitional Doctor of Acupuncture and Chinese Medicine. A Doctor of Health Science (Integrative Medicine) has been approved but has not yet been offered at the time of the team report. Of note, 12 of these programs are on-site and 2 are listed as distance education. The two distance education degrees offered at PCOM are both Professional Doctorate degrees (Transitional doctor of Acupuncture and Chinese Medicine, and Transitional Doctor of Acupuncture). In the fall of 2017, the total unduplicated headcount in these programs is reported as 1,711 with 1,339 FTE.

## **B. Description of Team's Review Process**

The PCOM AV team thoroughly reviewed the materials provided by the institution, including the institutional reaffirmation report, all supporting documents appended for the institutional report, and information posted by PCOM on its website. Additionally, documents submitted in response to the Offsite Review (OSR) Lines of Inquiry were reviewed. Materials offered onsite by PCOM at all locations, as well as messages received through the confidential email account directly to the team chair and assistant chair, were reviewed.

As authors of the team report the AV team members were assigned various areas of responsibilities as both primary and secondary readers. These roles were confirmed by all members prior to the OSR and were continued until completion of the team report. Team members contributed to worksheets reviewing each of the components, standards, federal required policies, the Inventory of Institutional Effectiveness Indicators (IEEI) document, and any special materials related to distance education.

As preparation for the OSR, the AV team conducted a conference call to review the completed worksheets and clarify roles. At the OSR, the team developed Lines of Inquiry that identified key issues for further exploration and helped to develop questions to be asked during the accreditation interviews. Additional documentation was requested from PCOM after the OSR. One week prior to the AV, selected members of the AV team visited the two off-site campuses in Chicago and New York. Additional materials were reviewed on location and interviews conducted. During the accreditation visit to the main campus in San Diego, the team conducted interviews with the Board of Trustees (BOT), a broad array of administrators (President, Provost, ALO, Vice Presidents, Deans, and other administrative directors), faculty members, students, alumni representatives and staff members.

For the duration of the AV, the team collected information, examined the interview outcomes and refined these for questions in subsequent interviews. Throughout the process, the team encouraged open communication and rigorously reviewed the information provided by the AV interviews. As the AV drew to a close, the team members collectively constructed the final set of commendations and recommendations based upon careful and comprehensive analysis of the evidence gleaned from institutional materials and AV interviews.

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

Generally, the PCOM institutional report and its accompanying appendices offered a thoughtful and comprehensive view of the college as it is undergoing significant evolution. PCOM notes that the progress inspired by WSCUC benefited the college and opened opportunities needed to realize the college's mission and vision. As a result of the reflection inspired by this reaffirmation self-study, PCOM recognized that the following themes have dominated its work since initial accreditation five years ago: 1. Fostering Chinese medicine's role in the evolving field of integrative medicine; 2. Increasing Chinese medicine professionals' understanding and application of evidence-informed practice; 3. Distance education; 4. Developing its faculty and the effective use of data in decision-making; and 5. Program review. Thus, the reaffirmation report followed this thematic approach as it attempted to capture the current state of the institution. Because PCOM has focused its energy on these five themes the introduction was dedicated to show progress in these areas.

While much of the supporting evidence was originally provided, additional evidence was required for clarification following OSR Lines of Inquiry probes and on-site review. The production of the institutional report appears to have been centralized within a representative WSCUC Steering Committee, led by the Vice President of Academic Affairs (VPAA). However, several stakeholders appear to have been involved as well, including the BOT, a spectrum of administrative leaders and

members of the faculty governance team. The report preparation consisted of multiple writing groups and content contributors; the report writing team is listed within the body of the institutional report, though limited to primary stakeholders. By its conclusion, the Steering Committee had engaged with multiple groups and constituencies, including the BOT, the President and senior administrative leadership, faculty governance, faculty committees, undergraduate, graduate, and professional studies administrators and faculty, student support service groups, and students and the student government association in preparing and reviewing various drafts of the final report.

The institutional report, along with the appended information and supporting evidence provided upon request, provided a fairly accurate picture of the institution. In particular, a clear effort was made to describe the processes by which institutional themes were addressed within the strategic plan. As the accreditation visits began on the campuses of off-site locations, and continued on the main campus in San Diego, it became clear that certain areas of evidence were lacking. As such, the team compiled a list of items highlighting areas of concerns, which were subsequently reviewed with the selected administrative leaders. These areas of concern formed the basis of the listed recommendations put forth to the Commission.

## **SECTION II – EVALUATION OF INSTITUTIONAL ESSAYS**

### **Component 1: Response to previous Commission actions**

Through its institutional report, PCOM focused on the five key themes that had been informed by many recommendations made by WSCUC Committee reports dating from 2015 to 2017. These issues included concerns about the training of full-time and adjunct PCOM faculty, faculty governance, program review, the rigor and culture of doctoral degree training, and procedures for creating and approving new policies. Below is a summary of the institution's work in these areas.

***Faculty Governance:*** A major shift in culture was reported in 2015 at PCOM as a result of WSCUC recommendations that the institution become less “top down” in decision-making and that shared faculty governance be instituted in line with WSCUC requirements. Since that time, each of the three campuses has appointed two faculty committees: a Curriculum and Program Review committee and a Faculty Professional Development committee. In addition, each campus has a faculty governance chair. The Commission commended PCOM for these important changes and urged that prior recommendations be implemented in regard to faculty training on governance, election of faculty governance chairs by faculty as provided for in the Faculty Governance Charter, and revision of the Charter to define the scope of authority as relates to college decision-making processes (CFR 3.10)

***Faculty Development:*** One of the recurring challenges faced by WSCUC teams during their visits to PCOM over time has been the institution’s faculty model, which relied almost exclusively on adjunct faculty with full-time clinical practices. Teams struggled with how PCOM could develop and assess curriculum, carry out faculty governance, provide counseling to students, conduct research as an institution offering graduate degrees, and create a graduate culture. Through each stage of WSCUC review, PCOM has been encouraged to continue efforts to develop models for hiring full-time faculty and to grow the proportion of faculty teaching at the graduate level who have earned doctorates. In 2012, ten percent of the college’s faculty had doctoral degrees. In 2018, that percentage has risen to 66 percent. The college currently has 21 full-time faculty across the three campuses comprising 6 non-core and 15 core faculty (faculty who teach an average of 18-24 hours per week). At the time of this visit, the Commission expected that evidence of the achievement in the following areas would be available: 1) evaluations, incentives, rewards; 2) progress in creating faculty ranks as one of the institution’s commitments beyond team recommendations; 3) a faculty development plan including promotion of research, scholarship and creative activity for all categories of faculty, including

adjuncts; 4) maturation of the faculty governance system; 5) clarification of salary and benefit levels for full-time faculty and pay levels for adjunct faculty; and 6) coverage of all full-time faculty by contracts compliant with the faculty manual.

***Program Review:*** Over the course of time, the Commission noted concerns regarding program review procedures at PCOM. Specific concerns state that the program review procedure “remains primarily descriptive with no apparent analysis of student learning data and no conclusions regarding student achievement or levels of achievement.” It was noted in reports that the institution recognizes this weakness and that the faculty are enthusiastic about taking the next step, which needs to be implemented within the next review cycle. In the institutional report, PCOM states that it has conducted 13 program reviews. Each program review is in a different stage of completion. Program reviews have provided recommendations that have or will improve student outcomes. Faculty have provided recommendations to make the program review processes more efficient. The topic of program review was a source of meaningful conversation during multiple interviews while on each of the three campuses. While much work has been done in program review, there remain opportunities for further maturation of the processes.

***The effective use of data in decision making:*** Prior accreditation teams commented that PCOM clearly understands the need for and benefit of institutional research, has the leadership and proper organizational mindset to develop this function, and has the mechanisms in place which ensure data are being used for planning, assessment, evaluation, and decision-making. The college has moved forward with the use of data for many processes, for example, review of exam results, course evaluations and surveys. In its decision-making, PCOM considers state and national regulations, budgetary resources, marketing research, input of stakeholders, opinions of internal and external experts, extant literature, and program review recommendations.

***Procedures for making new policies:*** Prior teams were concerned that PCOM did not have a well-documented process and procedure for the creation, review, and ultimate approval for new policies. In its response, faculty and staff at PCOM appear to be increasingly involved in decision-making through participation in committees and use of data in those committees. Committee roles are defined in the committee charters (Appendix 1.1.1) and illustrated in a decision-making flowchart (Appendix 1.1.2). There now appear to be clear avenues for the creation and review of PCOM policies.

In addition to actions addressing previous recommendations, PCOM discusses progress in other important areas as it seeks to align resources with strategic goals. In the institutional report, PCOM notes that the impact of strong leadership and sound business practices is evident in the state of the institution's financial status. The strategic plan ensures the second dimension of sustainability and aligns resources with the vision, mission, values and operational priorities of the institution. PCOM's stakeholders recognize challenges that lie ahead in higher education and healthcare and help guide the institution through these challenges. Both internal and external stakeholders work to stay aware of the risk factors. Academic, business officers and the Board of Trustees (BOT) routinely discuss the changing dynamics of health professions and higher education

In summary, PCOM has worked diligently to address prior recommendations by the Commission since 2015. In particular, the following improvements should be noted: full-time faculty expansion and training; training of adjunct faculty; expansion of faculty governance procedures, committees and avenues to influence policy and practice; and the deepening of the culture of evidence and scientific inquiry. However, much work remains regarding ensuring the rigor of the doctorate degree programs, particularly the transitional doctorate degrees, making progress in comprehensive program review, and further stabilizing the institutional financial portfolio as it seeks to expand its programs.

**Component 2: Compliance: Review under WSCUC Standards and compliance with federal requirements; Inventory of Educational Effectiveness Indicators**

The team reviewed documents relevant to the institution's compliance with WSCUC Standards, federal requirements and the IEEI. Specifically, the credit hour and program length review form, the marketing and recruitment review form, student complaints review form, and the transfer policy review form. The team's finding, which is subject to Commission review, is that the institution is in compliance with the WSCUC Standards and the federal requirements.

**Review under WSCUC Standards**

**Standard 1: Defining Institutional Purposes and Ensuring Educational Objectives**

***Institutional Purposes (CFRs 1.1-1.2)***

PCOM has a published mission statement that clearly describes its purpose. When interviewing faculty, staff and students on all three campuses, there is a strong sense of support for the school's mission as constituents embrace it with passion and dedication. The mission is widely recognized as pertinent to PCOM's academic areas across disciplines, including Chinese medicine and related programming, as well as holistic nursing. The programs which will be added during the next cycle are also in line with this mission. (CFR 1.1)

While programmatic and course-based educational objectives are widely-recognized throughout the institution, there is still much work to be done regarding institutional learning outcomes (ILOs). The institution has developed a practice of generating and evaluating data on student achievement. This information is disseminated to a limited audience of constituents. As such, there are opportunities to expand this reporting to a wider public audience. In particular, the retention rates across degree programs, including all three campuses, do not appear to be well-publicized. Administrative leaders at PCOM recognize the need to share the results of data analysis with students and other stakeholders. (CFR 1.2).

***Integrity and Transparency (CFRs 1.3-1.8)***

The institution publicly states its commitment to academic freedom for faculty, staff and students, and acts accordingly. When faculty on all campuses were interviewed, it is evident that there is a great deal of content expertise. Moreover, upon document review, there are clear policies on academic freedom and the conditions outlined in the faculty manual are consistent with generally recognized principles of academic freedom. Specifically, traditional principles of academic freedom are maintained as adapted from those of the Association of American Colleges and Universities. Leaders at the institution recognize that statements in the faculty manual could be expanded to be included academic departmental meetings and possibly in the orientation booklet. (CFR 1.3)

There appears to be a commitment to increasing diversity at PCOM. Upon reviewing its policies, educational and co-curricular programming, as well as its hiring and admissions criteria, there is a well-articulated diversity policy. Specifically, the following was excerpted from PCOMs faculty manual: “Pacific College of Oriental Medicine embraces the tenet that quality and diversity are profoundly connected. Representation of as many groups, backgrounds, and points of view as possible renders the best decisions and actions of an organization,” and “the college seeks to expand diversity in the areas of representation, the campus community, and group membership.” Further, upon interviewing faculty, staff and students, it is clear that PCOM embraces principles of equity and inclusivity in practice as well as in policy. PCOM understands the need to maintain updated information on disaggregated demographics, by campus and program, in order to evaluate the effectiveness of programming for all student groups. (CFR 1.4).

Although the corporate entity QUAD holds a majority financial partnership and sits on the governing board, there does not appear to be undue influence on the primary educational purpose of the institution. This relationship was explored in depth when both the President and the BOT were interviewed on separate occasions. Specifically, both entities were asked whether QUAD or any of its

representatives interfered with decisions or educational functioning in a substantial way. The President and board members alike were consistent when describing the influence QUAD has had over the years with PCOM. (CFR 1.5)

PCOM truthfully represents its academic goals, program services and costs to prospective and matriculated students through various manners. However, when students on the New York campus were asked about specifics regarding their tuition, there seemed to be a lack of clear understanding. The institution could increase student communication regarding the cost of attendance.

There appears to be clear policies and procedures addressing student conduct, grievances, human subjects and research, disabilities and financial matters, including refunds and financial aid. On the Chicago campus, the accreditation team had an in-depth discussion regarding numerous sexual-harassment claims made against a limited number of PCOM personnel. The procedures in place were clearly followed and the outcome appears to have been suitable. Records have been maintained regarding these claims. Other policies regarding credits and grades are clearly stated, as are opportunities for appeal. (CFR 1.6)

PCOM generally exhibits integrity and transparency in its operations. Business practices are sound and are regularly audited by qualified independent auditors. However, the overall financial health, as well as budgetary decision-making parameters, is not regularly transmitted to pertinent stakeholders at the institution. This level of financial transparency was discussed at length with the President and the Chief Financial Officer (CFO). There were several reasons offered regarding the practices of sharing financial information to date. Both entities recognized the benefit of sharing such information with constituents. (CFR 1.7)

The financial health of PCOM was discussed as it relates to expanded programs. The decision-making on the part of the President and the CFO is based on conservative principles. Particularly, both parties are protective of core programs at PCOM, and thus are resistant to the adoption of degree-

granting programs requiring a high-risk capital investment. Finally, the team verified that the college is in solid financial shape and has more than sufficient excess cash reserves to fully collateralize the letter of credit issue mentioned in the institutional report. In addition, the new reporting requirements will not impact the college's financial resources or its administrative effectiveness. (CFR 1.7)

PCOM appears to be committed to honesty and open communication with the Commission and maintained a high-level of engagement and professionalism throughout the accreditation review process. The administrative leaders at PCOM were prompt in providing information regarding the prior Commission recommendations. PCOM appears to have abided by Commission policies and procedures throughout the multiple substantive changes that have occurred since its original accreditation. (CFR 1.8)

## **Standard 2: Achieving Educational Objectives Through Core Functions**

### ***Teaching and Learning (CFRs 2.1-2.7)***

The programs at the institution, Acupuncture and Massage Therapy, are the appropriate length and breadth and are aligned with best practices. A review of a sample of syllabi in online course suggests that pre-requisites be added to all syllabi. There appear to be no ILOs that communicate the institutional mission for assessment and improvement. New program ideas are often piloted at branch campuses before instituting them institution-wide. The content, length, and standards of the institution's academic programs conform to recognized disciplinary or professional standards and are subject to peer review. The institution has invited external well-qualified academics to review its programs. (CFR 2.1)

All degrees awarded by the institution are clearly defined in terms of entry-level requirements and levels of student achievement necessary for graduation that represent more than simply an accumulation of courses or credits. The institution has a coherent philosophy which is an expression

of its mission and which guides the meaning of its degrees and processes that ensure the quality and integrity of its degrees. (CFR 2.2a)

PCOM's graduate programs have appropriate faculty staffing with at least one full time faculty member in the master's and doctoral programs. Faculty have the appropriate terminal degree mostly from PCOM. Faculty, through the increasingly robust faculty governance system have taken leadership in providing for and designing professional development for faculty, assessing curriculum, developing academic policies and teaching. The team agrees that PCOM faculty would benefit from focused professional development on assessment, data analysis and application. There is a sense of sincere collegiality at all three campuses and faculty report positively about their role in the academic leadership of the institution. (CFR 2.2b)

The institution has clinics at all three locations led by qualified clinic directors with a large community clientele providing students with a variety of learning experiences integrated with and building on their coursework. Students interviewed by the team reported receiving rich clinical experiences. PCOM reaches out to communities by providing faculty, staff, students volunteers and supplies in various sites which also serves to promote its own facilities. The institution would be well served if faculty create a series of case studies for internal use and publication. (CFR 2.3)

Faculty did not appear to have been involved in developing student learning outcomes or familiar with how to use the assessment system to improve their courses and programs. While student learning outcomes are reflected in course syllabi, the integration of those learning outcomes in a robust assessment system are still in progress with faculty learning how to access and use the data for program improvement. (CFR 2.4)

Faculty attend to student learning and learning needs. One device used in some of the online course offerings, for example, includes feedback at the end of each unit to ascertain either what students learned or what needed clarification. In one classroom observation, a class preparing

students for clinical practice, individual feedback was provided in writing and in class with guidance for further information required for student learning. Additionally, PCOM provides “enrichment”, non-transcript, non-credit based classes for students that are “outside of the various curricula”. However, based on a review of provided syllabi, there appears to be overuse of the lecture, note-taking instructional mode and faculty should explore other modalities to engage students more actively in their learning. (CFR 2.5)

The assessment system is designed and widely shared but is not yet utilized to its fullest potential. This seems to be attributable to the fact that the system has not been available for long enough to be fully operational and faculty development on assessment is limited; however there is movement in that direction as reported by faculty and key administrators. (CFR 2.6)

While there is a program review system in place, it is cumbersome and requires revisions to make it more efficient and effectiveness. Based on discussions at all three sites, those responsible understand what is needed and have already begun to address this particular need. (CFR 2.7)

### ***Scholarship and Creative Activity (CFRs 2.8-2.9)***

PCOM supports faculty scholarship and creative activities. As faculty governance continues to mature effective means of supporting faculty, interests are expected to emerge. The Faculty Professional Development committee has a sub-committee devoted to research, scholarship and training and is empowered to distribute professional development funds, some of which are dedicated to faculty research and scholarly activities. Furthermore, in the provided List of Faculty Scholarship Activity document (IV.21), there is ample evidence of faculty engaging in such activity. (CFR 2.7)

Criteria for faculty evaluation and promotion are defined in their current Faculty Professional Development Plan document (Appendix 3.2.1). (CFR 2.8)

### ***Student Learning and Success (CFRs 2.10-2.14)***

The Graduation Rate Dashboard and the Pacific College of Oriental Medicine WSCUC Graduation Rate Dashboard Case Study Report provided evidence of graduation rate data and analysis. While enrollment has grown, completion rates have decreased. As faculty and staff have more access to the available trend data, it is anticipated that PCOM will apply analyses that will assist in fostering student success through completion. The institution maintains enrollment records and has extensive data on student demographics. It is not clear that PCOM analyzes or monitors student progress to a high degree. (CFR 2.10)

Consistent with its purposes, the institution offers co-curricular programs that are aligned with its academic goals, integrated with academic programs, and designed to support all students' personal and professional development. (CFR: 2.11)

The institution ensures that all students understand the requirements of their academic programs and receive timely, useful, and complete information and advising about relevant academic requirements. The institution appears to provide consistent and accurate information about its programs, academic and related requirements and so forth in the catalog, on the website and other promotional materials. The institution reports extensive use of data for marketing purposes and the website complies with the requirements. (CFR 2.12)

The institution has robust student support services. Students reported feeling well-served and promotional materials explaining the options available are posted at all three campuses. Chicago Campus provides a system for the students to scan a barcode posted on bulletin boards to make appointments for advising on their phones. The online MyPCOM provides students with many options for assistance. This includes services in advising, disability services, well-provided and professionally staffed libraries (online and hard copy materials), bookstore, financial aid, career services and the clinics at each location. The library is not often referenced in syllabi. There was no evidence of orientations to the library provided to students or faculty. Faculty and students suggest a

positive and supportive educational environment built on the values of helping professionals. (CFR 2.13) The Samples of Review of Transfer Credits document (IV.16) reflects a researched and applied transfer policy. The policy for awarding credit for prior learning is in the catalog on page 33. (CFR 2.14)

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

***Faculty and Staff (CFRs 3.1- 3.3)***

Faculty and staff are deeply invested in the institution and its mission and values. It was evident through onsite meetings at all three campuses, that students rate the faculty high on quality and commitment. Faculty and staff demonstrated commitment to students and the mission. PCOM is administered by a President supported by several key personnel, including the CFO, VPAA, Campus Directors, VP of E-Learning, VP of Financial Aid, VP of Marketing, and VP of Admissions. Academic deans head the various academic programs and are supported by department chairs and faculty. Overall, the administrative structure appears to support college operations effectively. (CFR 3.1)

PCOM has a well-developed faculty development plan. PCOM planned investment in faculty professional development approximately is \$182,000. While this is evidence of a strong commitment, the team found the institution's programs for faculty development to be nascent. Many of the faculty development activities are within the PCOM's Symposium and support for attendance at externally sponsored activities outside of the area is very limited. Faculty are responsible for the cost of the travel if travel is outside of the city. PCOM might consider providing time and resources for regional and national travel, to enable faculty to evolve with the changing educational landscape. Policies in the faculty and staff handbooks are clear, and well-developed. Faculty and professional staff are evaluated regularly for teaching effectiveness and service, with ratings recorded on the appropriate

evaluation forms. Further attention could be given to the diversity of the faculty at all locations.

(CFRs 3.2, 3.3, 3.4)

Progress has been made in faculty development; however, the team is not aware of resources allotted for higher educational advancement of staff employees. During interviews, it became evident that few staff were actively engaged in the professional higher education associations relative to their areas of responsibility. External development activities for staff should be identified and provided, equipping them with adequate resources for training. Such resources are those which professional associations supporting higher education could provide, and all levels of the organization, from board members to mid-level staff, could benefit from participation in such training. A few examples of these organizations include the Association of Governing Boards (AGB), the National Association of College and University Business Officers (NACUBO), and the American Association of Collegiate Registrars and Admissions Officers (AACRO). (CFR 3.3)

PCOM has a full time Director of Human Resources at the San Diego campus with support staff at both Chicago and New York campuses. The team suggests that more training be given to the coordinators at Chicago and New York to adequately support staff and address staff concerns at the two locations. PCOM has systematized standard HR processes, including hiring procedures, new employee orientation, and annual performance reviews. (CFR 3.2) The team inquired about faculty and staff performance reviews and merit increases and was informed that performance reviews are conducted annually, and that merit/cost of living increases evaluated at that time. However, it was reported to the team during onsite reviews that no raises appeared to have been given and staff have worked without cost of living or merit increases for years. This information could not be verified prior to preparing the team report.

Staff and faculty reported concerns about their current salary and pay rates and the lack of regular raises. (CFR 3.2) This lack of raises especially for staff is apparently communicated at the

time of hire. There is no evidence of a shared understanding of how salary increases are given or a salary rubric for faculty and staff. Staff need to take their own initiative to ask for increases rather than a clear process on how increases are given. It would be beneficial for PCOM leadership to develop a budget for annual increases reflecting cost-of-living increases at the minimum, and to empower the HR Director to create and communicate procedures for merit increases. This would significantly increase faculty and staff morale.

The structures now in place appear to promote good communication channels and appropriately clarify accountability and responsibility for decision-making. Staff report that there is an open-door policy with leadership and a collegial atmosphere. However, staff feel that decisions are often made “top down” with no staff input or representation. PCOM may consider the creation of a staff council, to foster a sense of community amongst the three campuses, where staff can participate, assist, and advise in decision-making processes that affect the staff relationship with the larger PCOM community (e.g. nominate staff representatives to serve on institutional task forces and committees, when appropriate). A staff council will be able to collect and disseminate information pertinent to staff issues and to increase awareness of college policies, present ideas that originate from the staff to the President and develop recommendations for new policies or changes in policies pertaining to staff. The team believes the formation of a staff council will foster an environment of respect and fairness; and help build a sense of community by facilitating effective communication among staff, administration, faculty and students and is a step towards a culture of transparency.

***Fiscal, Physical, & Informational Resources (CFRs 3.4 - 3.5)***

PCOM has exhibited a history of financial stability, profitability, and growth and has operated without a deficit for the past three years. The March 2011 CPR Team Report and the June 2011 WSCUC Commission letter both commended the continued financial stability of PCOM, as well as the long-term commitment of resources that QUAD has provided. The team concurs with the previous

team reports. PCOM has continued its careful financial management and its productive relationship with QUAD. (CFR 3.5) The institution has had unqualified financial audits, sufficient resources, and commitment from QUAD to ensure long-term sustainability. The Board and the leadership team are focused on continuing to grow and enhance sustainability by adding new programs, improving retention, and diversifying revenue sources as competition in online education has significantly increased and enrollment is leveling. (CFR 3.4)

PCOM appears to be effective in developing realistic budgets and forecasts and managing its operational expenditures. The institution distributes monthly Profit & Loss (P&L) reviews to the campus directors. However, beyond the campus directors, other leadership members, faculty and staff do not have budgets or awareness of financial situation of the college. In conversations with the CFO and the President, there appears to be some concerns about sharing this information to faculty and staff. Though the needs and requests of staff and faculty are often met, the lack of transparency appears to be affecting trust in the executive leadership. The team believes that the sharing of financial information would help stakeholders to better understand the priorities of each functional unit and the allocation of resources, as well as to create and build trust. The team suggests that PCOM communicates and reviews its financial health monthly through the forecast process, annually through the budgeting process, and over multiple years as part of the long-range planning to stakeholders. The understanding of financial performance by all stakeholders is key to the perpetuation of the PCOM mission and contributes to transparency on why decisions are made. (CFR 3.4)

The Department of Education (DOE) requires institutions to meet standards of financial responsibility and deems institutions financially responsible when the composite score is at least 1.5. In a letter dated November 20, 2018, the DOE notified PCOM it was evaluating the composite score based on the PCOM Holding, LLC 2017 financial statements and will do so in future years. Prior to this, the DOE had evaluated and accepted the composite score based on Pacific College of Oriental Medicine, LLC financial statements.

Based on this new calculation, PCOM Holdings LLC's composite score for the year ended December 31st, 2018 was determined to be 0.2 and PCOM was required to post a letter of credit in the amount of \$2,031,112. The letter of credit was posted on February 2019. If the composite score had been calculated based on PCOM's school level financials, as it had in the past, the score would have been 2.0. The President, CFO and the Board are prepared and have sufficient funds available to continue to post the letter of credit required by the DOE until such time as the PCOM Holdings, LLC composite score meets the 1.5 requirement. The school's official 3-Year default rate as of 2016 is 9%, which is close to the national average of 10.1%.

During the site visits to all three campuses, the team noted the care and intention PCOM took in designing their space at all three campuses, providing for additional faculty offices, space for adjunct faculty, meeting rooms, treatment rooms, student meeting rooms, and additional classroom space. The institution is aware of additional space needs as more programs are expanding. PCOM has also invested in an eLearning platform and has strategically allocated resources to its e-learning department to improve and support the online learning modality for its students, faculty, and staff. The team agrees that PCOM has sufficient physical and information resources for its operations, and those resources (e.g., classroom, scheduling, instructional technology, data needs) are scalable for anticipated enrollment increases over the next few years. (CFRs 3.4, 3.5).

Information and technology resources appear to be sufficient to meet the current needs. The team found uniformly positive feedback regarding IT support. PCOM is using a unified student information system called CampusVue. Staff indicated that the level of CampusVue training was not sufficient in its initial rollout. PCOM should provide additional training in the use of this new technology to fully utilize the software's capabilities and create efficiencies in PCOM's processes. Students and faculty have access to a physical library and an electronic library. PCOM has a library director located at San Diego, as well as well-qualified librarians at each of the other two campuses to

assist students and faculty. Recently, the San Diego librarian created an aggregator which greatly enhanced student research at all three locations. (CFR 3.5)

***Organizational Structures and Decision-Making Processes (CFRs 3.6- 3.10)***

The team observed a collaborative spirit among the institutional leaders both on the administrative and academic sides. There was a sense of integrity, purpose, accountability, and a spirit of compliance at all levels with external laws and regulations. (CFRs 3.6, 3.7, 3.10) The team observed that PCOM's administrative and faculty leadership were genuinely and deeply connected to PCOM's mission and vision and strive to exercise their leadership in alignment with its core values. (CFR 3.6) During the onsite interviews, students at all three campuses were very vocal about the decisions made by leadership regarding curriculum. Students in New York were especially vocal about transparency on the decisions to go online and on their fees. These students in particular were vocal in opposition to the push for more online classes, expressing a feeling of a "bait and switch". However, these same students made a special point of emphasizing the quality of care and regard they felt from faculty during their on-the-ground learning experiences. When the team shared this feedback to leadership, leadership was quick to acknowledge that they made an error in their roll-out of the online classes and could have communicated better with their stakeholders, especially the students.

Although the team was provided with a concise organizational chart and decision-making flow chart, the team remained confused as to who has the authority to make decisions. (CFR 3.7) From the team's conversations with various stakeholders where decision-making responsibility exists, or how policies are proposed and ultimately approved, it appears that decisions and policies are made "top down" with faculty leadership weighing in on those decisions. During the visit, the team suggested to the President that the chair of the faculty be part of the President's Council, and this suggestion was met with genuine enthusiasm. PCOM will benefit from more refined and developed policies and

procedures which guide decision-making, as it was not evident to the team how those processes work within the organization.

The team found the current PCOM organizational arrangements reflect certain responsibilities and accountabilities atypical to those usually seen in higher education. Onsite reviews indicate that the current CFO reports to the President, but the team is still unclear if the CFO is part of QUAD's finance team or is independent of QUAD. The CFO with whom the team met was not specifically listed on the PCOM organizational chart, leading to some confusion. The team was informed that the CFO is new to the role and is located remotely. PCOM should explore the option of a full-time onsite CFO. (CFR 3.8) A CFO committed to PCOM would be very involved in the day to day operations of the school, provide key insights that would inform decision-making, be available to answer questions of leadership in real time, and help to focus the key functions of the Office of the CFO (e.g., Strategic Planning, FP&A, Accounting, Financial Aid, Human Resource, Facilities, and IT). The CFO would work with leadership within PCOM to provide the financial transparency to all its stakeholders. By advising the President and the Board of any issues or conflicts of interest, a strong CFO puts in place a "checks and balances" process for the college. This team concurs with the previous team's concerns and note that there is no evidence that this "checks and balances" currently exist. It appears that advisement for all financial matters are provided by the QUAD team. (CFRs 3.6, 3.7, 3.8)

PCOM has a fully independent Board of Trustees (BOT) that provides oversight, guidance, and approval authority over the school's operations. (CFR 3.9) The Board is comprised of six regular members. Board members are highly qualified in diverse fields. An audit committee was formed as a result of previous WSCUC recommendations. The team observed that the chair of the audit committee is committed to fulfilling the role of the committee and has taken steps to hold management accountable on findings of the single audit. Members of the finance committee receive monthly reports and the Board approves the annual budget. Discussions with the Board underscored a

collaborative and collegial engagement and decision-making process. A review of meeting minutes, as well as a discussion by all members of the visiting team with an in-person and phone meeting with the BOT, presented clear evidence of the independence of the Board and commitment to the educational mission. Of further note, the member of the Board representing QUAD expressed a belief in and commitment to the future of PCOM and a commitment to providing resources to keep it viable and to realize its vision and mission. (CFRs 3.6, 3.7, 3.9) The Board provides the President with an annual performance review and holds complete purview over his continued employment as the President.

There is no faculty, staff and student representation on the Board. The team encourages the BOT to include representation from these stakeholders: the Chair of faculty governance, a staff representative and the elected student representative. Effective communication is a critical component of shared governance. Its absence can result in serious misunderstanding between campus stakeholders and in significant governance failures leading to flawed decision-making. By including these representations, PCOM builds trust, clarity, transparency and understanding of the goals and objectives of the BOT and leadership amongst faculty, staff and students. (CFRs 3.6, 3.7, 3.9)

Full-time faculty are expected to be actively involved in PCOM's governance and academic administration. Faculty members are engaged in the ongoing governance of PCOM through multiple structures, including serving on committees. Though adjuncts are not required to participate in faculty governance, they are actively recruited to serve on committees to provide representation. Membership implies representing the constituency of all faculty regardless of adjunct or full-time status. (CFR 3.11) The team also noted that PCOM faculty are new to this governance role and therefore, it is essential for them to continue receiving training, guidance and feedback. This training will help faculty to better understand their roles and learn how to execute their authority and contribute to the success and development of PCOM and its programs. (CFRs 3.3, 3.6, 3.10)

#### **Standard 4. Creating an Organization Committed to Quality Assurance, Institutional Learning, and Improvement**

##### ***Quality Assurance Processes (CFRs 4.1- 4.2)***

As a part of the institutional report, PCOM describes program review processes and a timeline for all program review through 2020. The process described is comprehensive, including assessment of student learning outcomes, evaluation, faculty, curricula, and pedagogy. Based on the documents provided at the request of the team (IV.02 Completed Program Review Reports), the review process has been followed recently for one program (t-DACM). The process for reporting results and follow up to affect programs is less evident in the report. A review of this aggressive schedule compared with the Completed Program Review Reports suggests that the institution may not have the resources to achieve its current program review goals.

Quality assurance in the clinical area is also important for a health science institution. PCOM reports in the institutional report a clinical chart review process that assures charts are compliant with standards and with clinical policies and procedures. During the site visit, the clinical manual was reviewed and the chart review process is adequate. The data are recorded and reported by campus with the involvement of faculty. How the data are used to improve processes is not evident in the institutional report, but the clinical staff interviewed provided some examples of improvements. (CFR 4.1)

The Office of Institutional Research (OIR) collects and distributes data including: Required data for IPEDS, Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM), BPPE, Gainful Employment Disclosures, WSCUC, and an annual report of student success. During the site visit, the OIR provided examples of these reports that had been produced for each of the above. While these are available for review by college leadership, it is unclear how the data have

been used in planning and resourcing. It is also unclear who is responsible to analyze these data. (CFR 4.2)

During the site visit, the team was able to interview the OIR staff which includes one FTE. The data analyst was referenced by faculty and staff on all three campuses and appeared to be a well-known resource available to all. Data as described above are produced and available. Data analysis and interpretation for use in review, planning and decision-making is unclear. The availability of the data is apparent, but the team could not identify a process for analysis or interpretation and, how these data are used in decision-making and planning. PCOM needs to clarify processes for analysis and interpretation of data so that data utilization in decision-making and planning is apparent.

***Institutional Learning and Improvement (CFRs 4.3- 4.7)***

At the WSCUC initial accreditation, the team commented that the institution had some understanding of the need and benefit of institutional research and had the appropriate leadership and organizational mindset to further develop. PCOM uses CampusVue, Course Evaluation, Survey Monkey, and Power BI to help collect and disseminate information including exam results, course evaluations, surveys and other results. Stakeholders including faculty and its various committees have access to this information. Faculty and staff are increasingly involved in decision-making through committees and have defined these roles in their committee charters. The document of Committee Charters Summary (Appendix 1.1.1) describes the purpose, membership and data reviewed by these committees. While improvement has been made and committees appear to be functional and provide a source for the faculty voice in the process, it is unclear that data analysis and its interpretation are utilized in the process of planning and improvement. (CFR 4.3)

The recently employed program review process (utilized for t-DACM) engages faculty and others in the reviewing of courses, curricula, assessments and faculty. In the latest review of the t-DACM, the college employed a “closing the loop” process that reviewed all recommendations and

created appropriate actions and follow-up reporting. Because this process is new, it is difficult to assess whether it has been consistently employed. Further, it has not been fully demonstrated that this is the institutional process rather than simply the programmatic responses. The college recognizes in the institutional report the need to have more transparency and better involve faculty in the review process. The institution has yet to develop institutional learning outcomes and has not employed an institutional review process. (CFRs 4.4, 4.5)

The institutional report did not describe an institutional planning process. During the site visit, the college administration acknowledges that it has yet to develop institutional learning outcomes and a process for institutional assessment. There is a strategic plan, but there is no evidence that data and assessment of outcomes was included as criteria for the development of the plan. During the site visit, the college administration reported that the new strategic plan was developed in response to completing the goals of the former plan while looking to the future sustainability of the institution. (CFR 4.6)

In its institutional report, PCOM describes the higher education landscape and healthcare trends it feels important to the organization. Specifically, PCOM considers traditional vs. complementary healthcare, how the US population consider alternatives, and the opioid epidemic in the United States as important trends. Also, PCOM is processing the effects of distance education, student debt, professional needs, and need for gainful employment. The institution is tuition dependent and relies heavily on enrollment. As PCOM considers expanding online enrollment, support for online students has to be considered. PCOM has invested in an e-learning department in support of its online programs and courses. Based on online student concerns about asynchronous coursework, the institution decided to focus on synchronous distance education courses. The planning process that coincides with the budget was not described in the institutional report. Based on interviews with college administration, PCOM's mission to integrate traditional medicine and oriental

medicine is considered in the planning of new programs. The aspirations regarding expanding its online presence tied to the mission are apparent in planning and resource allocation. However, there does not appear to have been a systematic use of data evaluating the need for new programs. (CFR 4.7)

### **Compliance with federal requirements**

#### ***Credit Hour and Program Length Review***

PCOM's credit hour policies and practices comply with federal requirements as noted in the catalog and course schedules. Credit hours are calculated at 14 clock hours per credit. There is a clear set of definitions of credit/unit/hours in the college catalog on page 83.

#### ***Marketing and Recruitment Review***

In general, the institution's marketing and recruitment efforts are appropriate, accurate and reflect actual practices. PCOM stated, "Pacific College stays up-to-date and follows the federal requirements on recruiting students. We do not pay or incentivize applicants to enroll." At the request of the team, PCOM produced a copy of the Admissions Training Manual. This manual is used to train admissions and recruiting personnel and contains admissions policy and procedures. On review, this is a comprehensive document that clearly delineates not only policy and procedure, but outlines for recruiters, by program, entrance requirements, program expectations and graduation requirements. There are no pages included in this document, but in five different places, there is a reference to \$400 provided to students who complete one of the massage programs that is intended to assist with licensure costs. In the section that overviews and highlights massage programs, the following is included twice in this manual, "Upon completion of the program, PCOM will give the student \$400 which can be used towards the licensure exam." This statement does not indicate that the funds must be used for the licensure exam, just that the student will receive \$400 on completion of the program. There are no other such policies in other programs offered by PCOM per the training manual. PCOM

might consider directly paying the \$400 fee for the licensure examination rather than giving the funds to the student without restrictions.

The college catalog has several references regarding what the college will do for Massage Students at licensure. For Graduate Degree Students,

*Master's degree students can receive extensive transfer credit from the master's degree toward earning the massage therapist certificate. They are awarded a tuition rebate of \$200 toward the cost of massage licensure. If master's degree students complete the massage classes instead of using their transfer credit, they receive a \$400 rebate toward the cost of massage licensure. (PCOM Catalog, 2018-19, p. 67).*

This statement refers to a tuition rebate and is offered at two different levels depending on whether classes were taken entirely at PCOM or if some transfer credit was used with preference given to non-transfer students.

*The college pays approximately \$400 of fees/expenses for certification, for those who complete the massage therapist program requirements. The college will pay \$200, for master's degree students who complete the massage therapist program requirements (PCOM Catalog, 2018-19, p. 99)*

This statement is taken from tuition and fees for the Associate program for Massage Therapist and Asian Bodywork. It states that the college pays the expenses for certification which is followed by a statement for Master's students stating the college will pay \$200 on completion of massage therapy requirements.

*For students who successfully complete the AOS program, the college provides a professional resources and supplies certificate (\$400 value) subsequent to receiving their state massage license or national equivalent that allows them to practice. (PCOM Catalog, 2018-19, p. 114)*

This statement is for Associate of Occupational Studies students who receive a massage license providing a certificate valued at \$400 for professional resource and supplies.

The message PCOM is training recruiters with indicates that the \$400 incentive is cash that may be used for licensing. The catalog provides three different versions of how these funds may be applied, none of which are cash and in one case is not \$400 but \$200 for transfer students. In the final

case for AOS students, the funds are not provided as a resource to offset licensing fees, but rather a certificate to help the newly licensed individual with supplies.

During interviews with PCOM recruiting staff, the offer to assist massage therapy students with licensing costs is not seen as an incentive, but rather a benefit the college offers to its recent graduates. PCOM recruiting materials and policies outlined in the catalog for disbursement of this benefit are not consistent. Aligning these policies with recruiting training may reduce the appearance of inducement and will clarify for students and regulators the actual practice to assist massage therapy students seeking licensure.

Descriptions of each program, length, content, courses, and costs are outlined and easy to find in the catalog on the website. However, a search of the college website for this information per the program lead to a button that indicated a program brochure could be downloaded. This link leads to an inquiry popup rather than a catalog. Certainly the interested party can complete the inquiry and likely receive the information, but a brochure is not available online. This strategy builds a greater pool of interest for those who complete the inquiry pop up, but is somewhat deceptive in nature. There is no downloadable brochure available and so the information that appears on the surface to be readily available is not.

In responding to careers and employment, PCOM stated, “We actively post and publicize jobs which our graduates are eligible for or hold. Sharing the stories of our graduates is important to us as it displays the progression and acceptance of oriental medicine as well as what positions to expect as students graduate. We have an online job board that is available to our graduates and students. On a weekly basis the Alumni and Career Services Directors add the latest jobs to the job board. Our Federal Disclosure pages of the website also provide this information”. The information regarding jobs appears to be publicized on the alumni section of the website which requires a login. The team requested access for this section of the website. PCOM provided a document titled, “Publications

Regarding Jobs Available and Stories of Graduates” in response to a request from the team as evidence of these listings and success stories. This document has several Alumni success stories. Nothing is included regarding the jobs available in this document. An interview with the college Alumni Affairs Director during the visit yielded the requested access to the alumni page to see current job listings. The site is populated with many listings that appear to have been updated as recently as the date of the visit. The site is easy to navigate. Alumni searching for opportunities to find employment or space to rent can sort their searches geographically, by full or part-time employment and by rental opportunities. This appears to be a useful resource for alumni.

### ***Student Complaints Review***

PCOM has an explicit policy (on the website and in the catalog) concerning student complaints applicable to all three campuses. Although the records kept of student complaints do not follow a similar format at each of the campuses, documentations show that each campus responds effectively to student complaints consistently following its own procedures. On the Chicago campus there seemed to be a spate of sexual harassment issues which suggest a need for heightened awareness of faculty, staff and students at that campus as to what constitutes sexual harassment and how PCOM addresses it.

### ***Transfer Policy Review***

PCOM’s transfer policy is explicitly presented in the catalog. PCOM indicates that “Transfer credit is officially recorded on the student’s Pacific transcript only upon completion of the program, even if previously recorded unofficially for administrative purposes.” Transfer credits should be posted to the transcript upon approval of the transfer credits to ensure that student is accurately credited with the transfer credits.

### **Inventory of Educational Effectiveness Indicators**

PCOM completed the Inventory of Educational Effectiveness Indicators related to the institution, general education (GE), and fourteen (14) programs. At the institutional level: PCOM indicated that learning outcomes are developed and can be found in the catalog and website. The catalog includes programmatic outcomes, but there are no institutional outcomes. PCOM did not report evidence aside from GPA to indicate that on an institutional level, graduates are achieving the stated outcomes, nor was it reported that findings are reported to any group or individual and then used for improvement at the institutional level. The last institutional review was reported as performed in 2010.

PCOM reported that there are formal learning outcomes for the general education department and that these are recorded in department minutes dated 6/2012. These minutes were made available to the team during the site visit. A search of the catalog and website did not find any general education outcomes in either location. Other than GPA, the use of VALUE rubrics is reported as a measure for achievement of the outcomes. The results are reported to GE teachers, deans, and the VPAA. It is intended that this group use results from VALUE rubrics to revise curriculum and course learning outcomes and assignments. Initially, PCOM reported that a program evaluation of general education was N/A. The team requested additional documentation of program review which included a review of the general education program at the San Diego location during 2015-16 and 2017. The reports identify the reviewers as faculty. The reviews are comprehensive in nature covering curriculum, learning outcomes including curriculum maps and analysis, review of faculty including qualifications and are summarized and include recommendations. What is not included is any indication that the institution reviewed these findings and followed up on the recommendations.

PCOM reported that all 14 programs have outcomes that are developed and included in the college catalog. A review of the catalog confirms that programmatic outcomes are listed for each program. Across the fourteen (14) programs, other than external licensing exams where available,

there is little evidence provided other than GPA that graduates have achieved the stated outcomes. Six programs use external licensing or certification exams. The Bachelor of Science of Holistic Nursing also lists end of program survey, alumni survey, capstone clinical courses and program review. The Doctorate of Acupuncture and Oriental medicine program lists capstone project, portfolio review, and clinical assessments. The Master of Science in Traditional Oriental Medicine lists comprehensive exams in addition to licensure exams. Both the Transitional Doctor of Acupuncture and the Transitional Doctor of Acupuncture and Chinese Medicine list increased job opportunities, exit survey data and program review. The BS of Holistic Nursing and the Doctor of Acupuncture and Chinese Medicine also list increased job opportunities as measures.

In all fourteen (14) programs, the data are reported to department chairs, deans, and faculty and intended to be used in the revision of the curriculum, course learning outcomes and assignments. As program review is not happening in all programs, it is unclear that data are being distributed and utilized as reported. Of the fourteen (14) programs, only three are reported in the IEEI to have been through a formal review process since initial accreditation. Four other programs were reviewed in 2012 (about the time of initial accreditation), but not since. PCOM provided a report of all programmatic reviews including the following:

- 1) The Bachelor of Science in Holistic Nursing program – Internal Program Review in 2016, comprehensive review in curriculum, learning outcomes including curriculum maps and analysis, review of faculty including qualifications. This program was also reviewed in 2017 as part of the programmatic reaffirmation process. There is no indication that the findings and recommendations from this review have been used to improve the program.
- 2) The Master of Science of Traditional Oriental Medicine- internal program review conducted in San Diego in 2014 and Chicago and New York in 2015. The 2015 review was reviewed by the New York Curriculum Program Review Committee in their May 14,

2019 meeting. In this meeting recommendations were reviewed and all but one (Faculty should hand in exam with CLOs marked for each questions) were accepted for action.

There is no evidence that the 2014 review and recommendations have been considered for use by the program.

- 3) The Transitional Doctor of Acupuncture and Chinese Medicine program – Internal Program Review in 2016, comprehensive review in curriculum, learning outcomes including curriculum maps and analysis, review of faculty including qualifications. Included with this report was a document titled “Closing the Loop t-DACM Program Review”. This document includes the recommendations and actions. It also includes a listing of quality improvements made since the initial program review.
- 4) All three programs that include massage therapy were reviewed in 2012.
- 5) The Doctorate of Acupuncture and Oriental Medicine program was also reviewed in 2012 as part of the programmatic reaffirmation process.

All other programs have yet to undergo programmatic review.

While it appears that all programs have established appropriate outcomes, as yet, there has not been an institutional review or any programmatic review for half of the programs. It does appear that PCOM processes are evolving. Except for one program, it is unclear that any of the review findings and recommendations has been utilized. The recommendations for the MS of Traditional Oriental Medicine were reviewed four years following the review. By this time, it is likely that the information and data are irrelevant and should have at least had a follow up prior to any action. The document titled “Closing the Loop t-DACM Program Review” provides a good method of follow-up and accountability regarding the data. During the site visit, interviewees would respond to questions about program review speaking of what they have recently done. When questioned, the review in question

seemed to follow the process described above for the t-DACM program. No other programs were referenced in interviews during the site visit.

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

PCOM utilizes the Curriculum Advisory Committee (CAC) and the Curriculum and Program Review Committee (CPR) to consider recommendations made from program review regarding quality and integrity of degrees. The Faculty Professional Development committee also reviews findings and recommends training. In the fall of 2018 (Appendix 3.2.1, Faculty Professional Development Plan), the committee identified rigor as a topic that required training and differentiation. Training was held on all three campuses working with faculty to differentiate rigor with “just difficult”. Students’ survey findings show that only 67% of students across all three campuses were satisfied with rigor (online 80%, Chicago 79%, San Diego 69% and New York 56% satisfaction). The institutional report indicates that the college is following up on these data.

PCOM indicates that degrees offered (Associate, Bachelor’s, Master’s and Doctorate) are differentiated based on admissions requirements, curricula, program standards and learning outcomes. PCOM reports in the institutional report the use of the Degree Qualifications Profile (DQP) to delineate program expectations from associate through to doctoral level programs. This includes five learning areas: 1. Specialized knowledge, 2. Integrative knowledge, 3. Applied and collaborative learning, 4. Civic and global learning and 5. Intellectual skills. Evidence provided is a DQP position statement signed by the academic leaders of all three campuses dated 06/01/19. This appears to be a plan to use DQP in the future rather than a policy that was in place at the time of the report. During the site visit, an interview with the VPAA indicated familiarity with DQP. Interviews with faculty and other administrators indicated that the use of the DQP was something they are working on and not something that is currently in place at PCOM.

As previously described, PCOM seems to be developing best practices for program review. PCOM has delineated programs based on admissions requirements, length of program, and curriculum, but is still working out how program outcomes need to be measured and delineated (i.e. all graduate programs should include a capstone project or experience) and defined. DQP appears to be a solid way to define the difference in programs, but as of yet is an idea not a plan or policy for PCOM.

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

Student learning is captured in course and program outcomes, but there does not appear to be a clear path between data analysis and program improvement that might improve student learning and retention. PCOM has program review procedures, but the process is cumbersome and reporting on follow-up from findings is scant. The completion rate of students is not optimal and the evidence in the documents does not inform the institution of paths for improvement. Additionally, the four year graduation rate is not available in College Navigator as reported in document of “2018\_MCR\_PCOM\_10062018”. However, it should be noted that the PCOM students who follow the degree programs to completion in general do well on their licensure examinations.

Actual classroom experience, while including some interactive experiences, appears to be focused on faculty lecturing and students presumably absorbing what is told to them. PCOM does have extensive curriculum maps and would benefit from learning outcomes that can be measured, thus providing students with learning experiences that align with the desired outcomes.

Support services for student, e.g. library, online counseling, financial aid, learning management, orientation, IT support, tutoring, advising appear to be available and well-used. However, there is no actual evidence of student usage of library resources, such as utilization data. Moreover, many of the syllabi reviewed fail to reference specific library resources.

It is the team's impression that the level of teaching is similar on the New York campus to that of the San Diego campus. As for the teaching in Chicago, there remain opportunities for improvements to enhance the learner experiences. While the team commends PCOM faculty for their level of content expertise, instructional approaches at the Chicago campus do not seem to be as diverse as on the New York and San Diego campuses suggesting the need for focused professional development for the Chicago faculty. While there is a design for assessment, the implementation is neither widespread or well-understood by the faculty, nor has the 'system' yielded informative data useful or used for program/course improvement efforts. Further, the competencies appear to be complexly stated, raising questions as to the adequacy of assessment methods. As a result, it is difficult to document student performance at graduation through a unified assessment process. PCOM's program review process is cumbersome such that it does not readily inform practice. Again, the team suggests that PCOM engage faculty in the design and implementation of a robust assessment system.

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

PCOM has defined student success in terms of pass rates for external licensing/certification exams. Students perform at or above the national averages in these exams. The institution reports that employment rates, graduation rates, student feedback/exit interviews, and alumni surveys are used as measures of student success. The "Graduation Rate Dashboard" and the "Pacific College of Oriental Medicine WSCUC Graduation Rate Dashboard Case Study Report" are used as evidence of graduation rate data and analysis. In the case study, PCOM reports an increase in undergraduate enrollment from 2010-2017 (149 to 283), but there is a drastic decrease from 2015-2017 (534 to 283). This decrease in enrollment can account for an increase for both Absolute Graduation Rate and Unit Redemption Rate. The IPEDS 150% time to completion graduation rate is at 47%. As for retention, the head count for non-continuing students was generally on the rise from 2009 through 2014 as

enrollment was also on the rise. With the exception of a significant decrease in 2014-15, the number of non-continuing students has remained about the same even though total enrollment has decreased in the last two years. PCOM needs to address these trends when planning for the future.

PCOM provides services typically available to students enrolled in higher education programs: financial aid, career services, academic advising, personal counseling and library and information services. PCOM recently recognized the need to better serve students with disabilities and hired an Americans with Disabilities 514 coordinator. PCOM utilizes WellConnect to connect students with online confidential counseling and personal support services. The college also offers tutoring electronically via Skype and individual and group tutoring services.

The WSCUC “Reaffirmation Survey 2018” shows 81% of respondents agree that they are achieving the educational objectives. This document also demonstrates that 51% are not familiar with career services, 22% unfamiliar with financial aid services, 23% disagree that grievance processes are well-defined and understood, and 22% are dissatisfied with the quality of student advising. PCOM needs to determine what the benchmarks should be in assessing such surveys so that they can follow up on the feedback provided by the students.

In summary, PCOM recognizes the need for improving graduation rates. Retention and enrollment should also be addressed per the data on the graduation rate dashboard. PCOM has recognized the need for additional support for students with disabilities. PCOM needs to follow up on items identified by its own surveys to ensure improvement in support to students.

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

POCM has developed a draft document of “Program Review Policies and Procedures” and provided a finalized version during the San Diego site visit. The document states that the purpose of the program review is to “encourage accountability and dialogue among faculty within the program

under review as a self-reflective process and within the broader institutional review process. This process assists programs in developing outcomes-based assessment and building evidence of educational effectiveness. It provides the basis for evidence-based decision-making to inform planning and budgeting at all levels of the institution.” The program review includes six phases and is overseen by the Curriculum and Program Review Committee (CPR), a standing faculty governance committee, chaired by a faculty member and includes the institutional research personnel, VPAA, academic deans, department chairs and designated staff and faculty members. The CPR assists faculty, deans, directors, department chairs and external reviewers in developing knowledge and skills for program review and providing any evidence needed for the review. PCOM reports that 13 program reviews has been conducted since 2012. Completed program review reports were submitted as requested by the team in the OSR Lines of Inquiry. However, as stated previously, these reports do not follow a consistent format. The program review self-study does not include data and analysis in program viability, sustainability, student support, facilities, staff, and future goals, etc. as suggested by the WSCUC “Program Review Resource Guide” (2015). It is not clear how the External Reviewers were selected, and the team was not able to find any external reviewer written reports. During the campus interviews, different stakeholders provided different perspectives regarding the review process and how the recommendations aligned with future planning and budgeting. The institution provided an example of using program review data to make improvements: the review of San Diego’s MSTOM/DACM produced a recommendation that the physical exam faculty review their students’ clinical charts to assess whether there is theory-practice gap. However, the team is not clear what data lead to the recommendation, how the recommendation was implemented and what is the result of the implementation of this recommendation. (CFRs 2.7, 4.1, 4.3, 4.4)

PCOM has clearly stated mission, vision and values; however, there is no clearly identified Institutional Learning Outcomes (ILOs). Curriculum maps (alignment between Course Learning

Outcomes and Program Learning Outcomes) are submitted for all programs after the OSR. In the institutional report, PCOM states that the institution assesses general education in the five core competencies of written and oral communication, information literacy, critical thinking, and quantitative reasoning and “Faculty are considering the use of nationally developed Valid Assessment of Learning in Undergraduate Education (VALUE) rubrics”. However, no specific learning outcomes data are submitted to define the standards of these competences and to demonstrate whether students meet these competences at PCOM. Program review plays a role in assessment and improving the quality of student learning by recommending refinement of CLOs, rubrics, better measurements, training more faculty, etc. The team was not able to find evidence on how the programs and the institution at large implements these recommendations and the outcomes of the implementation. For professional graduate programs, when it’s applicable, PCOM uses state and national licensure exam pass rates to assess student’s achievement of professional standards. PCOM rates appear to be comparable to the rates from other schools. Other data used by the institution to assess student’s achievement of program learning objectives include comprehensive exams, employment placement rates, graduation rates, student feedback, student exit interviews and alumni surveys. The team had difficulty in finding analysis of these data and how PCOM take actions to improve the student outcomes. (CFRs 2.3, 2.4, 4.1-4.4)

The institution has an office of institutional research (IR) with a full-time data analyst. The mission of the department is to provide accurate, timely and relevant information to support student success and strategic planning. Using the data visualization tool “Power BI”, the IR department is capable of producing clear dashboards in student enrollment, retention, graduation, survey results, etc. These regular reports are utilized by different departments. For example, the registrar’s office uses the report of “absences by day by course” to help determine if students need to be dropped from a course due to attendance. The admissions office uses the “W19 roster” report to track all current

students who have re-enrolled for the upcoming term. This report is used weekly for meetings with student advisors, admissions representatives, and finance to ensure that PCOM students are set up for success and they have the necessary support as they prepare to start. However, no evidence is found that suggests these reports help various departments within the institution to make evidence-based decisions and system improvement.

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

As the higher education environment continues to change, colleges and universities will have to be flexible, responsive, creative, and data-driven. PCOM must embrace a culture of using data throughout the institution. Based upon the data provided and the site visits, it is evident that PCOM is in the early stages of developing a culture of using data to make informed decisions, to evaluate initiatives for efficacy and to work data-driven results more fully into resource allocation and decision-making. PCOM should include not just the governing board and leadership, but faculty, staff, and students, in data-driven institutional reflection, decision-making, and planning processes. PCOM is financially stable and has not functioned with an operational deficit, generating realistic budgets based on realistic enrollment targets. (CFR 3.4)

**Component 8: Optional essay on institutional specific themes**

PCOM did not choose institutional themes to frame its reaffirmation of accreditation review.

**Component 9: Reflection and plans for improvement**

PCOM has a strong sense of commitment and support for its mission across all three of its campuses. The mission's origin and purpose is widely recognized and deeply ingrained across its current programs, as well as in future planned activities. While the institution has undergone several substantive changes since its last WSCUC accreditation review, its mission has remained consistent.

During this recent period of growth, PCOM has adopted the standards and expectations of the WSCUC process as it seeks to embrace a commitment to student learning and success, quality and improvement, and institutional integrity.

Programmatic expansion has been the theme of the last several years of activities at PCOM, particularly in distance education. Simultaneously, the executive leadership has made conservative decisions to stabilize its financial portfolio in the face of unanticipated uncertainties. These financial decisions have resulted in a reasonably secure landscape upon which the institution is expected to grow. As PCOM has expanded over the years, it has encountered issues which arise within the usual maturation process of an academic institution. As such, the rigor of its educational activities, introduction of institutional learning outcomes, faculty development and governance, outcomes assessment and programmatic review, and the incorporation of data into decision-making across the spectrum of institutional processes are all areas which will be closely followed over the ensuing accreditation cycle at PCOM.

### **SECTION III – OTHER TOPICS (such as Substantive Change)**

All issues pertinent to the PCOM accreditation review are addressed elsewhere in the report.

### **SECTION IV – FINDINGS, COMMENDATIONS, AND RECOMMENDATIONS**

**Commendations:** The team commends PCOM for the following accomplishments and practices:

1. Mission: the staff and faculty embrace the mission with passion and dedication and are committed to supporting the students.
2. Mission: PCOM is a leader in the field of integrative medicine with its doctoral degree in Acupuncture and Oriental Medicine.

3. Planning: PCOM has been thoughtful in identifying programmatic needs that further its mission and serve the public.
4. Faculty: The faculty are to be commended for the ownership of professional development and faculty governance with limited resources.
5. Board of Trustees: The Board of Trustees demonstrates a deep commitment to the students' experiences, is responsive to shifting higher education landscape and has a depth and breadth of expertise that serves the mission of the institution.
6. Data: PCOM supports the Institutional Research department and provides resources for data gathering and displaying.

**Recommendations:** The team has identified the following recommendations for on-going and future efforts:

1. Ensure the learning experiences across campuses are consistent, providing sufficient faculty support and training in using diverse instructional methods, including the instructional design of online courses. (CFRs 2.1, 3.3)
2. Engage faculty and staff (as appropriate) to develop and assess institutional learning outcomes (ILOs), which are aligned with PCOM's mission, programmatic learning outcomes and course learning outcomes. (CFRs 2.4, 4.3, 4.4)
3. Implement the assessment plan; collecting, analyzing and utilizing student outcomes data to improve student learning and program quality. (CFRs 2.3, 2.4, 4.3, 4.4)
4. PCOM must conduct comprehensive program review for all the degree programs for program quality assurance and improvement, informing planning and budgeting. The WSCUC "Program Review Resource Guide" can be a good reference document. (CFRs 2.7, 4.2, 4.6)

5. PCOM needs to create a culture of transparency by increasing communication throughout the institution and ensuring that its policies and procedures foster open communication and trust among stakeholders. (CFRs 1.7, 3.4, 3.6, 3.7)
6. PCOM must engage faculty and staff in governance and decision-making process, for example, developing a staff council and including a faculty governance representative in the President Council. (CFRs 3.7, 3.10, 4.6)
7. PCOM needs to define and actively support faculty scholarship and creativity by providing resources, opportunities and recognition for faculty scholarship. (CFRs 2.8, 3.2)
8. PCOM must establish practices to use data for decision-making across the institution to inform program review, planning and budgeting. (CFRs 4.1, 4.2)
9. PCOM must engage its multiple constituencies, including the governing board, faculty, staff, and others in institutional reflection and Strategic Planning processes that are based on the examination of data and evidence. (CFR 4.6)

## APPENDICES

The report includes the following appendices:

**A. Federal Compliance Forms**

Credit Hour and Program Length Review  
Marketing and Recruitment Review  
Student Complaints Review  
Transfer Credit Review

**B. Off-Campus Locations Review**

**C. Distance Education Review**