

REPORT OF THE WSCUC TEAM  
For Reaffirmation of Accreditation

To Southern California University of Health Science

April 4-6, 2017

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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 Reaccreditation Process

#### History of SCU

The Southern California University of Health Sciences (SCU) is comprised of three colleges enrolling 952 students (701 FTE) taught by 45 full-time and 73 part-time faculty: The Los Angeles College of Chiropractic (LACC), founded in 1911, which offers a Doctor of Chiropractic Degree (DC); the College of Eastern Medicine (CEM), founded in 2000, which offers a Master's Degree and Doctor of Acupuncture and Chinese Medicine (DACM); and the College of Science and Integrative Health (CSIH), founded in 2014, which offers a Bachelor of Science in Biological Sciences (a degree completion program) and Master of Science: Physician Assistant (MSPA). SCU (the university; the institution) also offers 3 certificate programs in Ayurveda, Massage Therapy, and Yoga Teacher Training. SCU has no off-campus or distance programs. The mission of the university is to develop caring and competent integrative primary healthcare practitioners. The university strives to provide evidence-based education and training in order to create graduates who are both sound clinical practitioners and long-term learners.

#### Accreditation History

SCU (LACC) was accredited by the WASC Senior College and University Commission (WSCUC) in 1993 and reaffirmed in 1998. With the advent of the new model, the Commission canceled a fifth-year report due in 2003 and scheduled a

Capacity and Preparatory Review (CPR) for 2008 and an Educational Effectiveness Review (EER) for spring 2010. For the EER, SCU was asked to respond to the following issues raised from the CPR report: addressing the operational deficit; planning; increasing enrollment, retention and graduation rates; making progress on educational effectiveness; and supporting faculty. WSCUC requested an interim report to focus on financial and enrollment issues due March 2009. In April 2009, WSCUC accepted the interim report from SCU based on its improved systems for admission and its progress on its strategic plan. However, concerns were raised about the financial condition of the university, admission, retention and graduation rates, and measures and results related to educational effectiveness. It was recommended that the upcoming EER report provide evidence that these issues were addressed. In June 2010, the WSCUC Commission acted to reaffirm accreditation, but issued a formal Notice of Concern and requested an interim report due March 15, 2011, focusing on finances and enrollment management. Additionally, WSCUC scheduled a special visit for 2012 to focus on financial stability, enrollment management, planning, educational effectiveness, and leadership. As a result of the special visit, the Commission acted to remove the formal Notice of Concern, scheduling an Offsite Review in October 2016 and the accreditation visit for April 2017.

In the interim, SCU submitted and received interim approval for the Doctor in Acupuncture and Chinese Medicine in February 2014, the BS in Biological Sciences, which received approval in June 2014, and the MS: Physician Assistant, which received

approval in August, 2015.

According to SCU, in addition to WSCUC accreditation, SCU is also accredited by various programmatic accreditors:

- The Doctorate of Chiropractic (DC) is accredited by The Council on Chiropractic Education (CCE).
- The Master of Acupuncture and Oriental Medicine (MAOM) is accredited by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM).
- The Doctor of Acupuncture and Chinese Medicine (DACM) has eligibility for candidacy with the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM).
- The Master of Science: Physician Assistant (MSPA) has Provisional-Accreditation status with the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

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

The team engaged the process of review as designed and with significant collaboration and thoroughness. Beginning with an introductory conference call and development of a team worksheet, and followed by a comprehensive offsite review (OSR) in October 2016, the team identified, via the Lines of Inquiry, the issues it thought prudent to pursue for the April 2017 Accreditation Visit (AV). The team thoroughly reviewed all documents submitted after the OSR and organized a set of interviews to

acquire the information needed to write this report. All members diligently considered the written evidence provided by SCU and rendered judgment based on that evidence, supplemented by conversations with university constituents.

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

As part of its preparation, the team read the Southern California University of Health Sciences Institutional Report (institutional report) and its accompanying appendices. The team also reviewed subsequent materials that it requested from SCU. SCU was able to produce all requested materials in a responsive and timely manner.

The institutional report was clearly organized and addressed the institution's response to prior commission actions and components 3-7. For component 2, there was only one page devoted to compliance with the standards; however SCU completed the Review under the Standards, and CFRs were noted in the discussion of the components. The narrative indicated that thoughtful consideration had been given to each component, with supporting evidence to substantiate claims. The institution also identified areas for improvement and next steps in each section. Overall, the report reflected an authentic self-assessment of the institution's status at the time of its writing.

According to the narrative, and confirmed by subsequent conversations with the steering committee, there were broad levels of involvement in the generation of the report. Specifically, people were assigned to take lead on each element based on role and expertise, but those leads involved other appropriate constituents to contribute to the report. These constituents included faculty and staff, and in some cases, students.

Notably, while some students provided input for the writing of the institutional report, at the time of the visit, no students attended the scheduled open meeting. Despite a second attempt to meet with students, the team was unable to solicit student feedback as part of its analysis. It may be that graduate students (most of the SCU student population) have other priorities. However, several students submitted comments to the confidential email account, which were read by the team.

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

### **A. Component 1: Response to Previous Commission Actions (CFRs 1.1, 1.8)**

In its institutional report, SCU addressed five (5) Commission communications:

- 2010 Commission Action Letter affirming a Formal Notice of Concern
- 2012 Special Visit Report
- 2013 Commission Letter removing the Formal Notice of Concern
- 2014 Doctor of Acupuncture and Chinese Medicine (DACM) Substantive Change
- 2015 Bachelor of Science in Biological Sciences (BSBS) Follow-Up On-Site Visit
- 2015 Master of Science: Physician Assistant Substantive Change (MSPA)

The 2010 Commission Action Letter affirmed a formal notice of concern regarding the university's operational deficit, enrollment management, planning, educational effectiveness, and leadership. This was followed by a Special Visit in October 2012, followed by a 2013 Commission letter. The 2013 letter referenced the 2010 EER team report, stating that "SCUHS' finances did not meet WASC standards."

SCU, in response, noted that the university was able to successfully maintain balanced budgets for FY 1011 through FY 1415, only to develop projected operating deficits again for FY 1516 (of \$836,000), FY 1617, and FY 1718. SCU projected a small

positive increase in net assets from all activities for FY 1718. In its institutional report, the university attributed these deficits to falling enrollment in key programs such as the Doctor of Chiropractic.

The 2013 letter also noted the impending sale of university acreage, cautioning the university against using proceeds to support operational expenses (SCU sold 14 acres of land in 2014 for \$16.5 million). It then went on to emphasize the importance of fundraising for the university.

The university responded in its institutional report that the land sale “proceeds have been dedicated to improving the campus facilities, addressing deferred maintenance needs, and developing new programs.” The university additionally noted that the new executive director of development “was instrumental in bringing in a \$1.7 million endowment” that would be used for scholarships for chiropractic students.

In 2013 SCU received an interim approval of its Substantive Change application to WSCUC for the Doctor of Acupuncture and Chinese Medicine (DACM). WSCUC comments included that the university:

- closely monitor student achievement,
- pay attention to faculty workload,
- consider expanding the DACM internship beyond collegiate student health services, and
- monitor the success of graduates of the DACM program.

In its institutional report the university addressed each of these areas.

Particularly, with regard to the latter bullet, SCU noted that “[w]hen the DAOM [now DACM] program was started in Fall 2014, the ACAOM (the American College of Acupuncture and Oriental Medicine) did not have an approval process for the First Professional Doctorate.” In the institutional report the university did not speak to the issue of the process of also seeking licensure approval from the California Acupuncture Board (CAB) (a process that is now impeding licensure of DACM graduates, apparently because of the absence of an ACAOM approval; see component 3). The position of the CAB was not mentioned in the institutional report.

The 2013 interim approval letter also recommended that “SCUHS should closely monitor institutional capacity to offer both the MAOM (Masters in Acupuncture and Oriental Medicine) and DAOM [now DACM].” SCU noted the decline in MAOM enrollment concurrent with the opening of the DACM program and did not start an entering cohort of MAOM students in spring 2016. The university at the time of the institutional report was considering a “teach out” of the MAOM.

In 2015 WSCUC issued recommendations from its site visit of the SCU Bachelor of Science in Biological Sciences (BSBS). These included that “SCUHS should consider BSBS learning outcomes and whether the learning outcomes are all clear, aligned with the degree nomenclature, and clearly measurable” as well as “monitor graduates’ outcomes” to determine “whether the degree provides graduates with entrance into the professional fields they are seeking.”

SCU’s response to the first recommendation was to note the creation of a

curricular map and the use of ExamSoft to evaluate student performance. These were to be combined with student feedback at the end of each course. In response to the second recommendation, SCU noted that the first cohort of BSBS graduates would have graduated in August of 2016.

In 2015 WSCUC responded to a substantive change application from SCU for its new Master of Science: Physician Assistant program (MSPA). Per the institutional report, this application was approved and the program also received Accreditation-Provisional status from the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). No recommendations from WSCUC pertaining to the Substantive Change approval were noted in the institutional report. The MSPA program matriculated its first students in September 2016.

Since the submission of the institutional report, in February 2017, the Los Angeles College of Chiropractic was put on probation by the Council on Chiropractic Education (CCE). Additionally, at the time of the visit, the California Acupuncture Board had not approved the Doctor of Acupuncture and Chinese Medicine. The team explored these two occurrences in its site visit and reports on its findings in component 3.

B. **Component 2: Compliance with the Standards and Federal Requirements; Inventory of Educational Effectiveness Indicators**

As indicated above, the institutional report addressed the standards as part of its discussion regarding the components. The team explored compliance with the standards by reviewing the report and the additional documentation provided by the

institution, as well as through interviews with key personnel. As part of the review, the university provided its policies for credit hour, marketing and recruitment, student complaints, and transfer, an analysis of which is attached as appendices to this report. No significant concerns were noted. Similarly, a review of SCU's Inventory of Educational Effectiveness Indicators (IEEI) revealed that learning outcomes had been developed for all degree programs, and that outcomes were published on the university website. Sources of evidence for attainment of outcomes were listed for all programs, as well as who assessed learning outcomes and how findings were used. The most recent review was noted for each program. Based on the review, the team did not see gaps in policies or procedures related to the Criteria for Review.

While policies related to CFRs were deemed to be in place, SCU, throughout its institutional report, as well as in verbal dialogue, identified areas needing improvement and important next steps, which will be reviewed in each relevant section below.

Standard I: Defining Institutional Purposes and Ensuring Educational Objectives  
Institutional Purposes (CFRs 1.1-1.2)

The team determined that SCU had done a good job in defining its essential values and character through a clear mission statement and statement of vision. In each of these the focus was on "integrative healthcare," and it was clear that all levels of the institution endorsed this mission and vision, and that the integrative model was something they believed to be both unique and deliberative (CFR 1.1).

On the site visit the team interacted with faculty groups, administration, and the

board of regents (Board) about its institutional purpose, which lent further evidence to the fact that their educational objectives were widely recognized throughout the university setting. Their stated approach was one of Integrated Professional Education (IPE) that bridged holistic and conventional health care in a manner their president referred to as “contemporary” (CFR 1.2). It was evident to the team that there was considerable buy-in supporting this mission. There was also the sense that SCU cared deeply about being an engaged university in their community, and that they were having an impact in the community through work they were doing at their health center, in student placements, and in their ability to serve clients and students from the southern California region.

Data concerning educational objectives, including student achievement, retention, and graduation, were available on the institution website, and there was considerable effort on campus to evaluate that data and improve university outcomes (see more details in components 2 and 5). The university recognized that data capture was an area needing attention and had committed time and resources to improve the evaluation of student success data. University and program learning outcomes were also readily available on their website and in the catalog.

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

In interviews with faculty, the vice president for academic affairs (VPAA), and the faculty senate, it was evident that SCU valued faculty input, cared about academic freedom, and supported a model of shared governance. Policies on academic freedom

were readily available, and the site team heard several examples of faculty praise related to transparency and open dialogue (CFR 1.3). An example of this transparency occurred in discussions concerning the current budget situation on campus, where faculty expressed that they felt informed and up-to-date on budgetary decisions. One faculty member stated there is “close communication” between the faculty and administration, which accurately summarized the general attitude on campus concerning academic freedom and faculty rights. Additionally, faculty indicated they understood the university’s mission and had input on that mission via the various strategic planning meetings that had taken place on campus in the last decade. The team concluded that morale was generally high, and the faculty and staff were loyal to the mission of the university; additionally, campus leaders appeared committed to open and transparent communication with its constituents.

In terms of diversity, the University reported the following numbers in the Southern California University of Health Sciences Fact Book Academic Year 2012 – 2013 (the latest copy available on its website) for its two largest programs:

**DC Enrollment by Ethnicity and Gender**

	Male	Female	Male	Female
African American	9	10	9	14
Other Spanish-	47	19	40	19
American Indian/ Alaska	3	2	2	3
Two Or More Races	9	10	9	11
Other Asian	58	30	53	28

Other/Unknown	26	16	23	16
Pacific Islander	9	10	9	10
Nonresident Alien				
White/Caucasian	141	76	164	82
TOTAL	302	173	309	183

### MAOM Enrollment by Ethnicity and Gender

	Male	Female	Male	Female
African American	1	1	1	0
Other Spanish-	4	9	4	11
American Indian/ Alaska	0	1	0	1
Two Or More Races	1	3	0	3
Other Asian	28	19	25	21
Other/Unknown	6	6	6	6
Pacific Islander	0	7	1	6
Nonresident Alien				
White/Caucasian	6	19	6	16
TOTAL	46	65	43	64

Source:

[http://www.scuhs.edu/wp-content/uploads/SCU\\_Fact\\_Book\\_2013.pdf?x49389](http://www.scuhs.edu/wp-content/uploads/SCU_Fact_Book_2013.pdf?x49389)

Hence, in addition to its commitment to open dialogue, SCU appeared committed to diversity in its hiring, student admissions, and organizational practice. Examples included the emphasis on non-Western medicine, senior administrative positions being held by women and/or people of different ethnic origins, and policies complying with federal and state regulations. Another example was illustrated by the university's progress in ensuring that clinic internships included linguistic, ethnic, and age diversity. While the university stated that it had worked to diversify its Board, the team believes this is an area where continued attention can and should be given. It

would benefit the university, and the community they are serving, to continue to promote diversity in their leadership, faculty, and Board (CFR 1.4).

As the university was not affiliated with governmental, corporate, or religious organizations, CFR 1.5 was not an issue at this time.

As part of its commitment to transparency, SCU had made excellent progress in sharing information with students and the community related to their academic goals, programs, services, and costs. The SCU Policy Manual, Financial Aid Handbook, and Student Handbook provided resources to students seeking guidance on internal policies and procedures. The online Academic Catalog and Consumer Information Guide provided external information, and students could also seek in-person assistance through the university's "OneStop" for admissions and student affairs-type questions (CFR 1.6).

To the issue of completing degrees in a timely manner, the site team learned that the Retention and Student Success Task Force (RSS), along with the University Assessment Council (UAC), was heavily involved in reviewing retention and completion rates to better evaluate student time-to-degree. At the time of the visit SCU faced challenges related to timely and accurate data capture (see components 2, 5, and 6); as such, timeliness to degree was an area that needed further exploration and evaluation.

The site team was impressed by the descriptions it heard about the president's frequent town hall meetings and, as mentioned earlier, the current leadership team's

efforts to be transparent in its operations (CFR 1.7). SCU's Policy Manual is a comprehensive document covering policies on University units and functions. Standard accounting practices are followed and finances are regularly audited by qualified independent auditors. The Board's Audit Committee and Finance and Investment Committee are responsible for reviewing and monitoring the University's financial condition and the adequacy of internal financial controls. But, as noted in components 7 and 9, the team had concerns about the institution's financial sustainability.

Across all its constituency, SCU did a commendable job of being open and honest with the team (CFR 1.8). They addressed all requests for material in a timely manner, and on-campus discussions were both candid and enlightening. There appeared to be a very genuine sense among campus leadership, faculty, and staff that the accrediting process was a pro-active, supportive one that was meant to improve policies and procedures. In general, the SCU team was extremely welcoming, positive, and forthcoming in their responses. This allowed the team to have a number of candid discussions with considerable, honest dialogue.

The team's finding, which is subject to Commission review, is that the institution has demonstrated sufficient evidence of compliance with Standard I.

#### Standard II: Achieving Educational Objectives through Core Functions

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

SCU provides five degree programs, four of which are professional in nature. To

this point, professional accreditation is the primary method used to assure appropriate content, standards, and faculty capacity for these programs (CFR 2.1). At the time of this report, the institution had recently developed a Program Evaluation Guide (PEG) to be used to evaluate content, standards, and capacity for SCU's programs, as well as for the certificate programs in Ayurveda, Massage Therapy, and Yoga Teacher Training.

Expectations for teaching and learning at SCU were clear and widely distributed (CFR 2.3). Admissions requirements were clearly defined and found in the Academic Catalog and in institutional admissions policies (CFR 2.2). The university had developed learning outcomes at the university (ULO), program (PLO), and course (CLO) levels, and they published these outcomes online, in the Academic Catalog, and on course syllabi (CFR 2.4). SCU's ULOs were mapped to PLOs for each degree program. According SCU's Assessment Handbook, annual assessment reports were completed for each course, department, and program. SCU produced a progress report that summarized assessment activities at the institutional level and identified areas for improvement.

SCU also developed a comprehensive handbook for assessment and was in the early stages of implementing ExamSoft to help generate assessment data (CFR 2.4). This effort will eventually allow the institution to generate assessment data beyond grade distributions, passing rates, and group means for exams. Examination by the team of initial assessment reports using ExamSoft suggest the process should yield sufficient insight into specific aspects of the curriculum that may or may not be working

as intended, as well as identify subsets of students that may need additional assistance (CFR 2.6). Conversations with faculty confirmed that ExamSoft was becoming valuable for identifying gaps in individual student achievement, as well as areas needing curriculum revision (CFR 2.5). The team urges SCU to see the assessment process to full maturity, being mindful of WSCUC requirements related to assessment of core competencies.

Findings related to program review at SCU were not as encouraging (CFR 2.7). While four of SCU's programs were accredited professionally, the newly developed Program Evaluation Guide (PEG) had yet to be fully implemented. The PEG itself was difficult to follow, and the process could prove burdensome and difficult to sustain. Moreover, conversations with staff from the Office of Institutional Effectiveness (OIE) indicated there was not a link between data collection efforts for PEG, those associated with specialized accreditation, and assessment of student learning outcomes (see component 6).

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

Professional development was delivered by the Center for Learning Excellence. SCU's Faculty Contact Hours chart identified an average of three hours a week to engage in scholarly activities, including professional development. Intramural grants to help fund the costs of conducting research were managed by the OIE. Furthermore, SCU's Faculty Development Committee allocated funds to eligible faculty that could be used for furthering education or attending professional conferences (CFR 2.8).

Expectations for faculty regarding teaching, scholarship, and service were documented in the SCU Policy Manual. The manual established basic parameters related to contact hours, commitment, and professional development (CFR 2.9). According to the manual and from conversations on site, faculty were evaluated annually in the areas of teaching, scholarship, and service to help identify areas for professional improvement and to guide decision-making related to contract renewal, promotion, and salary. The VPAA conferred annual awards to faculty for scholarship, teaching, and “grit.”

While the basic foundation for supporting faculty scholarship and creative activity were in place, discussions with faculty and the VPAA during the visit did reveal a level of dissatisfaction with faculty workload, evaluation, and compensation. The VPAA was making good faith efforts to explore the issues, making use of both faculty committees and external consultants to better understand, and ultimately address, these concerns. The team supports these proactive activities and recommends that SCU continue addressing these issues.

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

SCU provided fundamental academic and student support services necessary for student success. The Seabury-McCoy Learning Resources Center consists of the library, the computer lab, and Academic Support Office (ASO). At the time of the visit the ASO provided counseling, tutoring services, and disability services. The Financial Aid Office provided financial aid counseling at matriculation and graduation and as requested.

Resources for local housing and other aspects of student life were provided by Student Affairs. Information technology supported student technology-related needs, including setting up computer workstations, installing software and printer applications, providing user training, and maintaining the stability and reliability of the technology infrastructure (CFRs 2.12, 2.13).

These efforts to support student success have resulted in mixed outcomes. The Doctor of Chiropractic (DC), which set a benchmark that a minimum of 70% of students must graduate within 150% time, generally met its goal. On the other hand, the Master of Acupuncture and Oriental Medicine (MAOM) showed 150% graduation rates that were consistently below its benchmark of 50%. SCU's lack of disaggregated data makes analysis of these trends difficult to understand or remedy (see more discussion in component 5) (CFR 2.10).

SCU had only recently developed a plan for reviewing co-curricular programs (CFR 2.11), and while some data had been collected, it was not comprehensive. Furthermore, discussions with student support services suggested that these units did not engage in regular or systematic assessment of their effectiveness. SCU's program evaluation guide, which incorporated student services data, may help fill this void. However, at the time of the visit, the process had barely begun. The team believes that SCU must enhance its ability to capture and use institutional data and accelerate the development of co-curricular review, so that the institution may properly evaluate whether services that are provided are meeting the needs of the students.

Overall, SCU had established a foundation for achieving its educational goals through the core functions of teaching and learning, scholarship and creativity, and support for student learning and success. While there are some areas for improvement, the team's finding, which is subject to Commission review, is that the institution has demonstrated sufficient evidence of compliance with Standard II.

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

Faculty and Staff (CFRs 3.1-3.3)

At the time of review, SCU did not have a formal faculty staffing plan. However, faculty and staff were sufficient in number, with appropriate professional qualifications and diversity to achieve the institution's objectives. Moreover, the institution is subject to the standards of various programmatic accreditors regarding faculty quantity and quality. As of March, 31, 2017, SCU employed 45 full-time and 73 part-time faculty in various ranks and specializations. Since the time of the special visit in 2012, SCU had generally conducted national searches or employed search firms to hire executives. With tight budgets, some faculty and staff positions had been frozen which led to heavy workloads for those staff who were asked to take on duties associated with the frozen position. This was particularly true in the OIE, which the team believes contributed to the lack of progress in effective data capture (CFR 4.2). A campus climate survey, conducted in 2016, revealed morale issues among faculty and staff. At the time of the visit, university leadership had responded to the survey results by increasing training for managers and through improved communications and collaborative decision-

making. Additionally, the institution hired a part-time chief culture officer to promote a positive and rewarding work environment. While the institution is to be commended for its increased efforts in effective leadership and collaboration, efforts to address morale need to be ongoing. Instituting a periodic climate survey would allow campus leadership to monitor morale on an ongoing basis.

The SCU Policy Manual included detailed descriptions of faculty ranks, faculty appointments, faculty evaluation, promotions, rights and responsibilities, and benefits. Policies, practices, and evaluation pertaining to faculty and staff were well-developed and applied. All regular full-time faculty were assigned one-year contracts, something that a few faculty noted that they would like to see changed to multi-year (CFR 3.2).

The SCU Policy Manual also stated that faculty were responsible for personal growth to maintain currency as a teacher and scholar. Additionally, advancement in rank required demonstration of a scholarly record. At the time of the visit, minimal support was provided for selected continuing education, including tuition discounts, assistance, and reimbursement. As noted earlier, SCU's Faculty Contract Hours Chart provided for only 3 hours per week for research. Other than for the few faculty with release time for research, scholarly output is likely to be limited given this workload allocation. The team noted that budgetary challenges have impacted support for research. At the time of the visit, there was no staff support for grants and other research-related activities. Because of the current budget situation, support for travel to conferences had been largely eliminated (CFR 3.3).

### Fiscal, Physical, and Information Resources (CFRs 3.4-3.5)

Elements of the financial condition of SCU remain a concern. These are discussed in detail under component 7.

Regarding information resources, the institutional report noted that the IT department was going through a major overhaul. A consulting firm was employed to evaluate SCU's IT capacity to capture, warehouse, and disseminate data for decision making. At the time of the visit, a permanent CIO, who reported to the president, had been in place for about four months. The institution had been moving forward on updating the technology in classrooms, securing networks, ensuring regular data backups, providing training to faculty on the use of technology in the classrooms and security compliance, and implementing additional Jenzabar CX modules to automate more processes and generate reports in a timelier fashion. The team was impressed by the progress that had been made, but as a recurring theme, more work remained in creating a data warehouse and employing the information systems to improve efficiency (CFR 3.5).

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

A review of SCU leadership position descriptions and SCU policy documents, and confirmed by meetings with the leadership team and Board, demonstrated that the institution was following the accreditation standards related to organizational structures and decision-making processes. The current president had led SCU since August 2009 and reported to the Board. The president's leadership team members had

clearly defined roles and responsibilities. Conversation with the Board indicated that it was responsible for the periodic evaluation of the president, and its members participated in strategic planning for the institution (CFR 3.6).

The team noted on several occasions that SCU's annual budgeting process was described as open and inclusive. The Budget Review Committee, comprised of administrators, faculty, and staff, makes recommendations to the president, cabinet, and Board. This committee is charged with reviewing departmental requests and setting spending priorities established in the university strategic plan. In sequence, the budget drafted by the Budget Review Committee is approved by the cabinet, the Board's Finance and Investment Committee, and finally by the full Board.

In addition to strategic planning and budgeting decisions, the SCU Policy Manual contained a wide range of policies and procedures pertaining to decision-making at the institution. University administrative committee memberships and roles were described in detail.

At the time of the visit, governance was in place. SCU had a full-time CEO and full-time CFO (CFR 3.8) and an independent governing board with appropriate oversight, including the hiring and evaluation of the CEO (CFR 3.9). The faculty, through the Faculty Senate and its committees, participated in a range of governance areas, including curricular matters, academic programs, admission and graduation standards, and budgetary policies. As mentioned previously, conversations with faculty confirmed their authentic participation in decision-making (CFR 3.10).

Standard IV: Creating an Organization Committed to Quality Assurance, Institution Learning, and Improvement

Quality Assurance Processes (CFRs 4.1-4.2)

At the time of the visit SCU had put in place the processes needed to assure the quality of its educational process. The institution had successfully implemented ways to acquire student learning data (via ExamSoft), and the Program Evaluation Guide (PEG) provided a possible process for organizing and evaluating other forms of quality assurance data. Having multiple program accreditors for programs such as the DC and MSPA was deemed helpful in this regard, as each accreditor requires specific data collection and quality assurance (note that the BSBS and certificate programs do not have professional accreditation). Despite fiscal constraints, SCU had made progress in implementing mechanisms to collect and analyze quality assurance data. In addition to data acquisition software, it had also established the oversight committee structure necessary for quality assurance (CFR 4.1).

The significant limitation identified by the team was that SCU had put these mechanisms and structures in place only recently at the time of the visit. As a result, it was too early to determine if they were being properly used to assure the quality of the university's educational process, and it was too early to determine if the products of quality assurance analysis were being used effectively by the university. At the time of this review, only one year of ExamSoft data was available for analysis, and the PEG was not yet fully implemented. However, feedback from faculty and administrative leadership indicated that SCU faculty were becoming more familiar with the benefits of

ExamSoft as a feedback tool – and were increasingly enthusiastic about it. Discussions related to PEG were less encouraging and warrant concern regarding sustainability (see component 6).

An area of critical concern related to acquisition and utilization of quality assurance data that arose during the visit was the recent action by the Council on Chiropractic Education (CCE) placing SCU’s chiropractic program on probation (see component 3). This action was primarily due to poor assessment of programmatic and student performance, resulting in inadequate board examination performance and was particularly meaningful given the size of the chiropractic program (approximately 80% of SCU’s total enrollment) and its resulting fiscal importance. It was apparent, based on the team’s direct interaction with the new VPAA and the new dean of SCU’s LACC, that SCU had in place motivated leadership with the commitment and vision necessary to correct these deficiencies as quickly as possible; however, failure to do so would increase the team’s concern significantly.

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

Throughout the team visit, it was apparent that SCU valued programmatic improvement based on data and evidence. The university had established committee structures, such as the Integrated Curriculum Steering Committee and the Instructional Programs Committee, for this purpose and was in the process of implementing its Program Evaluation Guide. While these changes represented an important shift in institutional priorities, the team was able to verify that university constituencies shared

this value. Because the team was unable to talk to students, it is not clear that student experiences aligned with stated commitments toward programmatic improvement.

The team was confident that SCU had embraced the importance of institutional learning and had incorporated the structures necessary for its assessment and improvement. However, the newness of its processes, and the subsequent dearth of programmatic and institutional outcomes data, as well as minimal evidence as to how such data were used to inform and enhance educational decision-making, made it too early to fully assess SCU's educational effectiveness related to Standard IV. The team's finding, which is subject to Commission review, is that the institution has demonstrated sufficient evidence of compliance with Standard IV. Final determination of compliance with the four Standards rests with the Commission.

C. **Component 3: Degree Programs: Meaning, Quality and Integrity of the Degrees** (CFRs 1.2, 2.2-4, 2.6, 2.7, 4.3)

As is the case with most health professions universities, SCU has utilized external validation from various licensing, certification, and accreditation organizations to assure the meaning, quality, and integrity of most of its degrees. For example, the integrity of SCU's chiropractic degree is explicitly clear, as the program is periodically reviewed for re-accreditation by the Council on Chiropractic Education (CCE). The quality of SCU's degrees has typically been certified by students' and graduates' performance on graduate school admissions, licensure, and board certification examinations. In each instance, external standards are used for these assessments.

Therefore, it is concerning that at the time of the visit, SCU was challenged by

two significant, recent developments. The first was the (2/10/17) action by the CCE to place the institution's Doctor of Chiropractic on probation in conjunction with an 8-year renewal of its accreditation. The second was the uncertainty about the approval status of the institution's Doctor of Acupuncture and Oriental Medicine degree by the California Acupuncture Board that, at the time, threatened the ability of five impending graduates and a similar number of first year students to be licensed by California. In the first case, the meaning and quality of a chiropractic degree from SCU was challenged. In the second case, the integrity of the doctorate in acupuncture was challenged.

In a written response to the CCE notice, SCU expressed its appreciation for the feedback and indicated its intent to work "diligently to address the noted concerns and make the needed improvements as quickly as possible." Under new leadership in the positions of VPAA and the dean of the LACC, the institution had developed and was implementing a rigorous and aggressive strategy to respond to the cited deficiencies and reported the likelihood of removal of the program's probationary status as early as the January 2018 CCE meeting. However, the team noted that standards related to CCE Policy 56 ("....requires that DCPs must disclose up-to-date results of student performance on national board examinations on the program website.") had not been achieved at the time of the site visit in October 16. The team could not locate the scores on the website at the time of the WSCUC visit but were informed before the team report was finalized that the scores have been posted. Given the institution's significant legacy

in the Doctor of Chiropractic Program (founded in 1911) and the program's contribution to the fiscal integrity of the university (roughly 50% of overall enrollment and comparable proportion of tuition revenue), it was the team's conclusion that it is imperative that the institution achieve removal of the program's probationary status.

The team also explored the recent development concerning the California Acupuncture Board's lack of licensure approval for SCU's Doctor of Acupuncture and Oriental Medicine degree. At the time of this report, due to a combination of factors involving the American College of Acupuncture and Oriental Medicine (ACAOM) and the California Acupuncture Board, five students were going to graduate with this degree in 2017, and approximately sixteen students were still matriculated in the program, without eligibility for licensure by the State of California. Based on conversation with the VPAA, the team learned that the institution had initiated this degree program prior to the promulgation of degree accreditation standards by the ACAOM and, as a result, the California Acupuncture Board was unable to accept degree recipients for licensure. The institution reported that, while awaiting the CAB approval of this degree, it was also seeking a legislative remedy to this situation and, as an intermediate remedy, indicated that it would employ the five impending graduates of the first cohort directly at the institution. Thus, the future of the Doctor of Acupuncture and Chinese Medicine was uncertain at the time of the site visit.

Another external validation of the quality of the institution's various degrees would be information on post-graduation employment across all programs, including

its certificate programs. Unfortunately, this information was not presented by the university either in its institutional report or during the site visit. Such information would be especially meaningful given declining enrollment, retention, and graduation rates in its core programs.

It was noted that SCU's total enrollment declined from 718 students in fall 2011 to 580 students in fall 2013. While enrollment expansion occurred in other programs, such as the new Doctor of Acupuncture and Chinese Medicine, this expansion was not sufficient to offset substantial enrollment declines in SCU's two largest programs during the same period, the Masters in Acupuncture and Oriental Medicine (a decline of 112 students from 159 to 47 during this period) and its Doctor of Chiropractic program (where enrollment fell from 540 students to 471 students). It was notable that, at least for the DC program, graduation rates also fell with its enrollment decline, with a 150% graduation rate of 69% for the fall 2012 cohort (the institutional report remarked that 70% of DC students must graduate within the 150% period, although this standard was not verified by the team). This was a drop from a 150% graduation rate of 88% for the fall 2008 cohort.

In order to address and begin to rectify enrollment declines, it would appear that SCU could benefit from a robust and strategically-oriented enrollment plan. Such a plan should include an assessment of the specific markets for potential students (a "lead to application" strategy). Such markets are likely to differ dramatically across SCU's various programs, requiring programmatic specificity. Another recommended element

in such a plan would be an assessment of “acceptance to matriculation” i.e., what focused program-specific techniques are needed to achieve successful matriculation of accepted students. The team noted that SCU’s Enrollment Management/ Admissions function is not part of the jurisdiction of the VPAA – a non-traditional relationship given the need for synergy between these two functions. In summary, the overall lack of enrollment growth across all the university’s programs (see component 7) was concerning and may possibly reflect student concerns about the meaning, quality, and integrity of SCU’s degree offerings.

An excellent opportunity for institutional growth and development was present in the recent addition of the BSBS program to the institution’s portfolio, as was noted in the institutional report and discussed at the visit. The team believed at the time of the visit that the role of the BSBS in broadening the diversity of institutional program offerings was clear, as was its role in moving the institution into greater alignment with more traditional health professions programs, such as the institution’s new MSPA program. The team believed that the institution would need to more clearly incorporate the BSBS program into its more diverse traditional offerings.

D. **Component 4: Educational Quality: Student Learning, Core Competencies, and Standards of Performance at Graduation (CFRs 2.2, 2.4, 2.6, 2.7, 4.3)**

At the time of the visit, SCU had taken a number of steps to strengthen its ability to monitor and assess student learning. Learning outcomes had been developed for all courses and were summarized using annual course assessment reports, prepared by faculty for classes that they taught. Annual course assessment reports (ACARs) were

used to generate annual department assessment reports (ADARs), which in turn were used to create annual program assessment reports (APARs). Additionally, SCU had adopted University Learning Outcomes (ULO) in the areas of Professional Therapies, Critical Thinking, Evidence-based Knowledge, Outcomes-Focused Practice, Communication, Professionalism, and Integrative Healthcare. To facilitate assessment initiatives, SCU had also recently established a University Assessment Council and hired a University Assessment Coordinator and had implemented ExamSoft for the collection and assessment of student learning data. At the time of the visit, a primary strategy for assessing student learning and achievement of graduate competencies relied on aligning course and program learning outcomes with ULOs, although the implementation of the PEG had potential for a more thorough analysis.

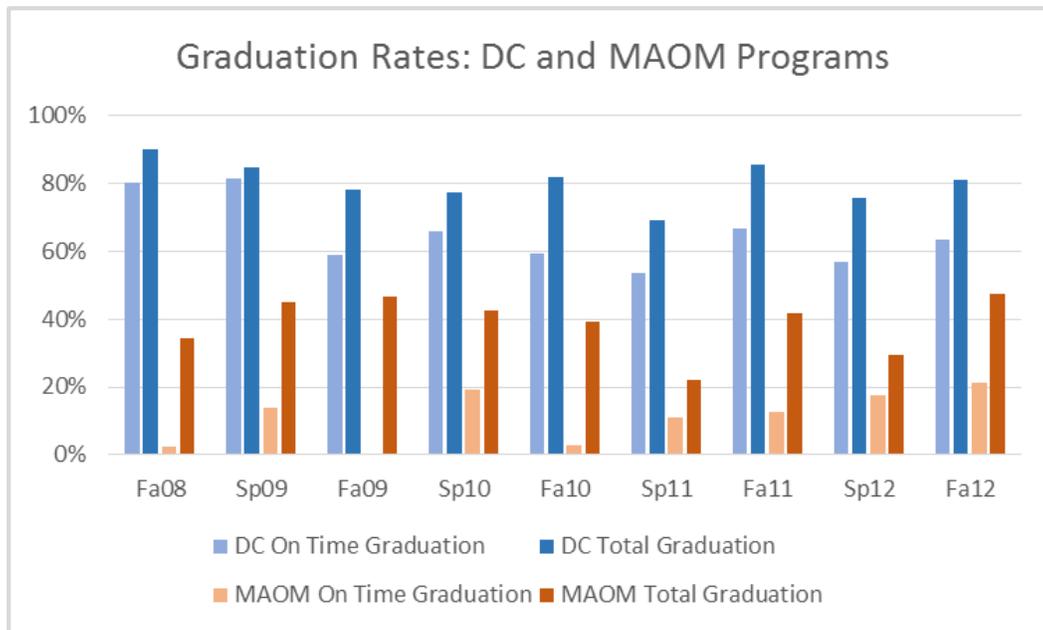
Once collected, SCU used assessment data in a variety of ways. ADARs and APARs were distributed among faculty and administrators for curricular decisions, and faculty reported sharing assessment reports with students to help them understand strengths and weaknesses. The University Assessment Council, which interacted directly with academic programs and the VPAA, produced a summary assessment report and made recommendations for curricular improvements.

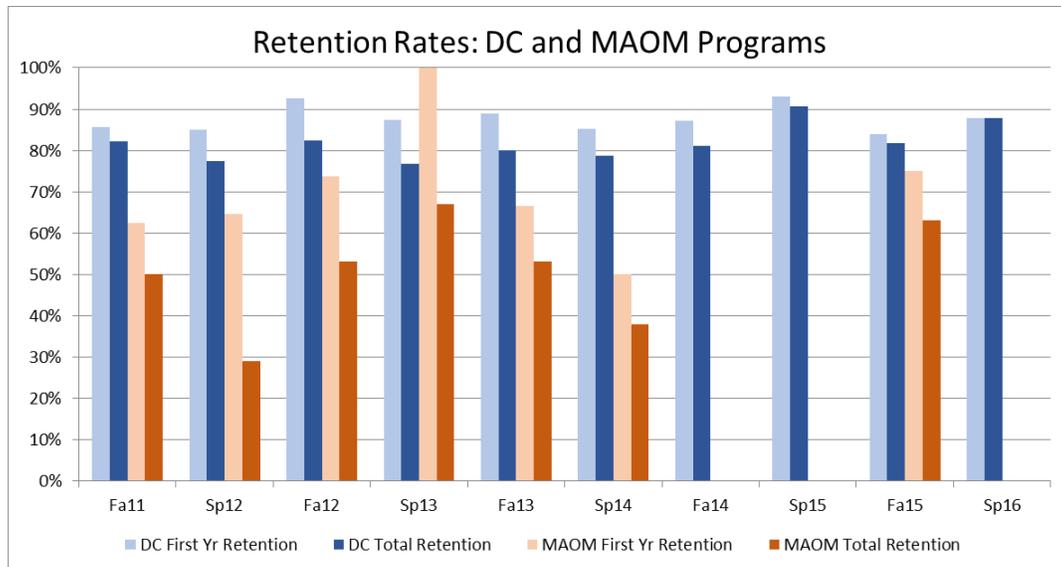
By and large, assessment artifacts submitted to the team at the time of the visit showed promise. ExamSoft reports, which revealed information on graduate competencies for outcomes such as professionalism and communication, were simple to follow and easily generated. Nevertheless, at the time of the visit, assessment of

graduate competencies at SCU was still in the early stages. Department and program summary reports examined by the team made little reference to ULOs. Furthermore, data for student performance within WSCUC’s core competencies for the BSBS had yet to be generated. The recurring theme of “heading in the right direction, but not quite there” was apparent in the team’s analysis of issues related to component 4.

**E. Component 5: Student Success: Student Learning, Retention, and Graduation (CFRs 1.2, 2.13, 2.7)**

SCU did a commendable job in the institutional report summarizing their graduation and retention rates, although disaggregation of data was less prominent. The following charts present graduation and retention rates for the Doctorate of Chiropractic and Master of Acupuncture and Oriental Medicine programs.





After reviewing materials and engaging in conversation, the team identified a few key findings to illustrate where things stood with SCU as it related to graduation standards:

- Graduation rate expectations are set by programmatic accreditors in several areas;
- 70% must graduate within 150% time for the DC program, the largest program on campus, and this program nearly always hits the necessary targets;
- 50% must graduate within 150% time for the MAOM and DACM programs, and the MAOM program has tended to fall short of those expectations;
- 100% of MSPA students are expected to graduate on time; and
- The BSBS program has yet to set performance measures in this area and the DACM, BSBS and MSPA either do not have graduates or have too few graduates to evaluate graduation rates in a meaningful way.

At the time of the visit, resources the university relied upon to assist with retention and graduation included their Learning Resource Center/Library, Academic

Support Staff, OneStop, Behavioral Intervention Team, and Office of Student Affairs.

In addition, to respond to concerns about graduation and retention rates, the university created the Retention and Student Success Task Force (RSS) to review available institutional data, research trends and best practices in the field, and make recommendations to the president and cabinet on ways to improve graduation and retention rates. Based on conversation with members of the RSS, the team was encouraged by their spirit and enthusiasm. While they had been meeting less than a year at the time of the visit, they had already produced several recommendations for cabinet consideration and realized the complicated task in front of them to ensure student success. Additionally, the team was encouraged that the RSS and the University Assessment Council (UAC) understood the need to work collaboratively with IT and OIE to prepare data and 'ask the right questions.' This seemed particularly true in terms of identifying at-risk students, those needing extra assistance, and those admitted on the alternative admission track (AATP). For example, the team was pleased to learn that a staff psychologist was available to students, and that changes were being made to change processes, procedures, and data collection relative to these groups.

The RSS and UAC also acknowledged the need to promote student success in a more meaningful way campus-wide, and they had several plans in place to do that, including recognizing high achieving students through awards and scholarships and incorporating more student success initiatives in student orientations. They also planned to have more Learning Strategy workshops for students and possibly

reintroduce a 'Dean's List' for some programs. The team commends the university for its expanded library hours to accommodate student needs and believes that it is a practice worth keeping.

Other areas related to student success worth noting include:

- The Health Center on campus has roughly 2,000 visits a month and is an important, integral part of providing practical support to students in a rich, clinical environment.
- The sports medicine program and spine care programs are also providing important academic support to students in those subfields to help them be more successful.
- While the institution does not currently have a graduation rate dashboard, there is ample opportunity to develop such a dashboard going forward if the data becomes available.
- Performance scores on statewide exams needs to be continually monitored and assessed, as they have begun doing in a more systematic way for the DC program. That program, for example, looked at sections of their Board scores and saw that more general science was needed for entering cohorts and science courses correlated strongly with success on the first part of the Board exams. This is the kind of analysis that can be done for all programs.

A watchful eye needs to be kept on campus enrollment in all programs, as mentioned in other sections of this report, as there will be a correlation between

enrollment and retention/graduation.

As mentioned elsewhere in this report, SCU had been working diligently to create, store, organize, and analyze institutional data in a more systematic fashion, especially as it related to acquiring and meaningfully analyzing retention and graduation data. An example of meaningful analysis would be a thorough review of graduation data, disaggregated by gender, race, and ethnicity; however, the team learned that SCU was only just beginning to collect and review that data in a way that could provide guidance to admissions and retention decisions. The university's small cohorts makes data analysis a challenge, and the university itself was not setting graduation and retention benchmarks in areas where they could consider doing so (above and beyond various program benchmarks set by those program accrediting agencies). As such, at the time of the visit, the disaggregation of data was a particular concern, but with the recent stabilization of the IT office on campus, the team was hopeful that things were moving in the right direction, and systems (and committees) were put in place to do the high-level analysis needed to best track their students from initial enrollment through graduation.

F. **Component 6: Quality Assurance and Improvement: Program Review, Assessment, Use of Data and Evidence (CFRs 2.4, 2.6, 2.7, 2.10, 4.1-4.7)**

In its institutional report and in subsequent conversations, SCU acknowledged it was in the beginning stages of becoming a data-driven institution. As previously mentioned in various sections of this report, the institution had made significant progress in the collection of data for evaluating student learning and was starting to

regularly utilize course-level data to revise curricula; however, it had not made the same amount of progress for analyzing programmatic effectiveness, both in the academic and co-curricular domains. While professional program accreditation approximated a longitudinal and comprehensive evaluation of the program, there were other entities (e.g, BSBS and certificate programs) which did not yet engage in any form of “program review.” The institution had begun to explore programmatic assessment by creating the Program Evaluation Guide (PEG), but conversations with the OIE staff and others indicated that SCU was only in the beginning stages of implementing the processes identified in the PEG. An evaluation of the PEG document by the team (with verbal confirmation from interactions with staff) revealed that student learning data was not collected as part of the PEG process. This would call into question the validity of the PEG as a program review document. Additionally, the OIE identified challenges with collecting the data needed to utilize the PEG process. Data collection was reported as a manual, labor-intensive process and one in which data definitions were still unformed and data acquisition from other units was challenging. SCU rightfully identified (and the team agrees) that this lack of systemized data collection was an area for improvement.

The team recommends that SCU continue to build a culture of continuous improvement, systemizing data capture institutionally and creating systems to close the loop. In particular, SCU needs to continue to utilize the newly designed assessment processes and to develop a more coherent approach to program review that leverages

professional accreditation and other existing data collection systems (e.g., ACAR, ADAR, APAR and PEG), that includes a longitudinal evaluation of student learning, and that incorporates reflection and action planning.

G. **Component 7: Sustainability: Financial Viability, Preparing for the Changing Higher Education Environment**

Financial position

Along with a narrative on its financial situation in the institutional report, SCU provided supplemental documents containing financial statements, including (1) audited financial statements for years ended August 31, 2015 and 2014, (2) an “Analysis and Report Package” detailing its Board-approved FY 1617 budget, and (3) a Five-Year Financial Planning Model. One team member held a telephone conversation with SCU’s auditor. The following table summarizes the institution’s revenues and expenses since 2014 (CFR 3.4).

Revenues, Expenses, and Assets: Years ended August 31, 2014 - 2017	Actual (\$m)			Budget (\$m)
	2014	2015	2016	2017
Operating revenues, gains and other support	21.3	21.8	21.4	23.2
Operating expenses	21.2	21.6	23.1	25.0
Change in net assets from operating activities	0.1	0.2	-1.6	-1.8
Change in net assets from non-operating activities	1.1	14.3	2.3	0.9

Change in net assets	1.2	14.5	0.7	-1.0
Net assets - end of year	15.0	29.4	30.1	

Despite its recent operating deficit, at the time of the site visit, SCU was financially secure. It had an equity ratio of 0.911 and a primary reserve ratio of 0.693. Annual audits were conducted by an outside CPA firm. As of August 31, 2016, SCU's assets included \$4.2 million in Cash and Cash Equivalents, \$13.6 million in Investments, and \$12.7 million in Net Property, Plant, and Equipment. Liabilities stood at \$2.9 million, down from \$8.1 million in 2014. This drop in liabilities was in part due to the payoff of a \$4.6 million loan from some of the proceeds from the sale of real estate. Unrestricted net assets were \$27.4 million (CFR 3.4).

In the fiscal year ended August 31, 2014, the institution had operating revenues of \$21.3 million and a net increase in assets from operations of \$69,356. Assets from all activities increased by \$1.2 million to \$15.0 million. In fiscal year 2015, the institution had operating revenues of \$21.8 million and a net increase in assets from operations of \$155,187. Land owned by SCU was sold on December 19, 2014, with net proceeds of \$15.8 million and a gain of \$14.6 million. Prior to the sale, the land appeared on SCU's Statement of Financial Position as a \$1.97 million asset. Mostly due to this land sale, net assets from all activities increased to \$29.4 million (CFR 3.4).

The approved budget for FY 1516 reflected an expectation of weakening financial results. This budget contained expected operating revenues of \$23.4 million, a \$673,196

decrease in net assets from operating activities, and a \$169,995 decrease in net assets from all activities. The materials the team reviewed prior to the OSR suggested that operating results would fall short of the budget. The audited financial statements for 2016 showed this to be true. SCU had operating revenues of \$21.4 million, operating expenses of \$23.1 million, and a change in net assets from operating activities of -\$1,645,213. However, \$1.5 million in gifts and grants, along with investment income and gains, resulted in a positive change in net assets of \$699,278 (CFR 3.4).

The Board approved the budget for FY 1617 on June 25, 2016. This budget projected operating revenue of \$23.2 million, a change in net assets from operating activities of -\$1.8 million, and a change in net assets from all activities of -\$1.0 million. The institution anticipated missing these budget targets. As of April 3, 2017, SCU projected fiscal year operating revenues of \$20.6 (variance of -\$2.6 million), a change in net assets from operating activities of -\$3.9 million (variance of -\$2.1 million), and a change in net assets from all activities of -\$3.9 million (variance of -\$2.9 million) (CFR 3.4).

Revenue shortfalls were in part due to fewer enrolled students than budgeted. The following table presents enrollment patterns for the Doctor of Chiropractic and other degree programs as provided by SCU at the time of the visit.

Enrollment in Degree Programs: Fall 2011 - Spring 2017												
	Fa11	Sp12	Fa12	Sp13	Fa13	Sp14	Fa14	SP15	Fa15	Sp16	Fa16	Sp17
DC	540	510	485	466	486	491	471	438	472	432	459	421
MAOM, DAOM, BSBS, MSPA	159	152	133	110	104	92	70	71	79	72	97	97

For FY 1617, net tuition and fees was projected to fall short of budget by \$1.0 million. Also contributing to the shortfall is net revenue from health center activities, which was projected to fall short of budget by almost \$1.0 million. Expenses were not projected to drop by a commensurate amount in FY 1617. Salary and benefits were budgeted to increase by \$2.3 million in the current fiscal year over last year, and as of April 3, were projected to come in at \$0.6 million below the budgeted level. Finally, at the time of this report, the institution had reassessed its institutional advancement efforts and projected that gifts, donations, and grants would fall \$0.5 million short of budget (CFR 3.4).

The institution's Five-year Financial Planning Model covers FY 1617 to FY 2021 and was last updated April 3, 2017. According to projections by this model, total revenue would grow from \$21.1 million to \$26.2 million over the five years. Major contributors to this growth included the College of Science and Integrative Health (revenue growing from \$5.5 million to \$10.8 million) and the Los Angeles College of Chiropractic (revenue growing from \$12.9 million to \$14.4 million). Total operating expenses were expected to grow more slowly, from \$24.5 million to \$25.9 million. The institution projected moving out of a deficit situation by FY 1718. However, the surpluses projections for FY 1718 through FY 2021 were modest. Small enrollment shortfalls will shift the institution from financial surpluses to deficits (CFR 3.4).

The institution reported that it planned to expand and diversify revenue by increasing the number of programs and becoming less dependent on the chiropractic

program. Having additional programs was also consistent with the goal of training practitioners to work on integrative teams. The DACM and the BSBS were started in 2014, and the MSPA program was started in fall 2016. The Ayurveda Practitioner certificate and Yoga Teacher Training certificate programs were also started since 2012. Yoga Teaching Training was implemented in 2015. The institution reported that the programs started in 2014 “have seen modest enrollment.” The Doctor of Naturopathy program was in the five-year financial model with a start date of fall 2019. Two new master’s programs and three new certificate programs were under development at the time of the site visit. Based on conversations with campus leaders, decisions on which programs to add were yet to be finalized (CFRs 3.4, 3.7).

As SCU adds programs, it will be increasingly important to evaluate their individual contribution. The emphasis on integrative health and medicine presents a challenge to administrators in judging the financial contributions of individual degree programs and non-tuition activities. The team was pleased to hear that SCU’s Accounting Office was developing a “segmented reporting” method that would allow the institution to better estimate the financial impact of individual programs. This tool should prove very useful in directing limited resources in an optimal manner. The executive director of accounting and the CFO had increased their scrutiny of programs, comparing enrollment patterns at the program level against budgets and discussing variances with the appropriate administrators (CFRs 3.4, 3.7, 4.1, 4.3).

SCU had taken several steps to be more successful in promoting its programs to

grow enrollments. It had recently changed its marketing vendor and, in 2016, hired an executive director of marketing. SCU's admissions department also started working with an enrollment management consultant to improve processes. At the time of the visit, evidence was clear that national demand for doctor of chiropractic programs had been decreasing. However, the institution believed that its programs were competitive, and that declining enrollments could be reversed by more effective marketing and admissions processes. Tuition was another factor in generating additional revenue. Most programs implemented tuition increases of 4% for fall 2016. But the five-year plan demonstrated modest tuition increases going forward (CFRs 3.4, 3.7, 4.7).

Success in increasing retention rates would raise enrollment levels. As mentioned previously, the Retention and Student Success Task Force (RSS) was established in 2016 to develop a comprehensive enrollment management plan to improve recruiting, retention, and academic growth. As indicated in component 5, the team was impressed with the RSS's commitment and with their effectiveness in moving multiple units on campus toward the common goal of student success. Analytics conducted to understand what distinguishes successful students from at-risk students had led to a number of actions involving admission decisions, academic support, and orientation (see component 5). Additionally, the adoption of systems such as Symplicity should allow the institution to better determine when interventions are needed. At the time of the visit SCU leadership had welcomed the analysis of the RSS and had provided the resources to implement recommendations offered by the group (CFRs 3.4, 4.1, 4.3, 4.4).

Despite these positive steps, the team was not optimistic that university advancement would be a significant source of support for SCU in the near term. The institution had not yet made the shift to a culture in which leaders across the campus worked on cultivating relationships with alumni and community supporters that lead to impactful support from these groups (CFR 3.4).

While important steps had been taken to boost enrollment and bring the budget into balance, SCU expected to run a significant deficit in the current fiscal year. Going forward, the institution projected small surpluses, and given planned efforts to manage expenses and the increase in resources devoted to marketing and admissions, these projections were reasonable. However, uncertainty will remain over the effectiveness of these steps until surpluses actually materialize. The team commends the institution for the important steps it took to expand enrollments and resolve its operating deficit experienced in FY 1516 and expected in FY 1617. However, the team also notes that the institution has been in this situation before (CFR 3.4).

As noted in the Commission's letter dated July 9, 2010 following SCU's 2010 EER visit: "Declining enrollment over the past decade has been the chief factor leading to SCUHS' deficits and financial fragility. ... As the EER team report notes, the university has made attempts to increase enrollments, but projections – and the budgets based on them – have been overly optimistic. ... This, in turn, has compounded the University's inability to establish stable and realistic financial projections. It is welcome news that, judging from your institutional response, SCUHS is now starting to work

with better systems and more accurate predictive models. The effort to address retention with academic and other support services is also useful.” The team report for the special visit in 2012 noted the significant improvements in SCU’s financial condition. Deficits in 2009 and 2010 were followed by a surplus in FY 1011. The 2012 report also noted the use of a more effective marketing and a strategic predictive model which led to an improved budgeting process. It also noted the significant progress made in student retention efforts by a recognition that the entire university community must own these efforts.

While reflecting upon the similarities of financial conditions described in earlier reviews and the present, it must be noted that the environment is not the same as it was in 2010. The economy is more robust, and the tools that exist now to conduct marketing research, recruit students, and to track students to boost retention are greatly improved over what was available in 2010. The institution has grounds to argue that it is on the path to fiscal stability. However, the team notes the need for caution until these strategies prove to actually boost enrollment and revenue. The financial resources from the most recent land sale could absorb operating deficits for several years, but it would be a shame if those funds had to be used for that purpose rather than being invested in the institution (CFRs 3.4, 3.7).

#### Allocating Resources in Alignment with Institutional Priorities

SCU reported that resource allocation has been guided by a strategic plan that was established in May 2011. Among the six components of the stated vision for the

institution were commitments to ensure programs met the highest standards of academic excellence, to provide a first-class experience for students, and to create the infrastructure to thrive. The document, Vision Plan 2020, had been guiding resource allocation for the institution. At the time of the visit SCU was preparing to update the strategic plan. As noted, in discussions with administrators and faculty, strategic planning at SCU, as well as budgeting, was reported as an open and inclusive process at the institution (CFRs 3.4, 3.7, 4.6).

For FY 1516, program expenses, including instruction expenses, academic support, and student services constituted 55%, 7%, and 10% of operating revenue, respectively. Institutional support expenses were 35% of operating revenue and operating and maintenance of plant expenses were 6%. The institution planned to use approximately one-third of the funds from the sale of land on campus improvements and deferred maintenance (A.11). Purchases of property, plant, and equipment totaled \$2.0 million in FY 1516 and \$3.8 million in FY 1415 (CFRs 3.4, 3.7, 4.1, 4.6).

In its institutional report, SCU emphasized its faculty hiring and performance appraisal processes to demonstrate its commitment to allocating resources in ways that enhanced educational effectiveness. The evidence contained in the institutional report and its appendices demonstrated an open and comprehensive evaluation of faculty teaching, scholarship and service. Opportunities existed in the process for mentoring and discussions on improving performance. The institution also provided a detailed discussion on workload expectations for various categories of faculty in teaching,

scholarship, service, and administrative duties. An internal grant program to support faculty research existed. However, workload expectations provided very limited time for research for most faculty members (CFRs 4.3, 4.4).

### Evolving Higher Education Landscape

The SCU Vision Plan 2020 outlined the institution's view on the future of healthcare and higher education. Healthcare was described as undergoing a paradigm shift in which the "predict and prevent" model of care traditionally delivered by hospitals was evolving toward a "care anywhere" environment where service is provided by integrative teams. At many meetings during the visit, SCU representatives shared the vision that healthcare was most effectively delivered by a team that include professionals with expertise in traditional and alternative medicine disciplines that work collaboratively to provide an integrative care experience to patients. They further noted that to prepare students to work in this environment, higher education institutions needed to deliver instruction using a holistic and integrative approach (CFRs 4.4, 4.7).

### H. Component 9: Reflection and Plans for Improvement

At the time of this report, SCU had credibly summarized the findings, interpretations, conclusions, and plans as a result of its self-study and institutional report. In general this summary was complete and comprehensive, reflecting SCU's commitment to both the accreditation process and its own internal self-assessment. With few exceptions, data needed for the review and site visit were readily available, or,

if not, were immediately provided.

Despite the supply of data when needed, there were still gaps. These included an absence of student/graduate performance data in areas such as licensure/board certification examinations and post-graduation employment, as well as an absence of organized interchange with SCU students during the site visit process. Another significant absence was the lack of comprehensive institutional effectiveness and assessment data. Rather than an omission, this was due to the timing of the site visit relative to SCU's implementation of new data collection and analysis mechanisms only during the past year. Thus, more time will be required for an accurate assessment of this critical area to be achieved.

In both its institutional report and the site visit, SCU accurately and appropriately identified its uniqueness as a university that provides an education in integrative health that simply cannot be matched by the vast majority of health professions institutions. This is a singularly powerful niche. Furthermore, because of the breadth of its integrative health education programs, SCU is also uniquely equipped to provide inter-professional education in ways that few health profession education institutions can – particularly across integrative health realms. The potential for institutional expansion driven by the combination of these two unique roles cannot be overstated.

However, in order to do so, the team believes that SCU must accomplish some critical initiatives: first, the team suggests that SCU ensure the highest quality of its

educational programs in order to attract the best and most competitive students. In order to do this, the university is strongly encouraged to complete the implementation of appropriately and accurately effective mechanisms for programmatic assessment; and second, the university is encouraged to grow enrollments and to identify, commit to, and invest in, new sources of revenue, specifically the expansion of revenue from extramural sources. Toward this end, the university should embrace best advancement practice, including achieving the standard of 100% personal financial contribution from its Board and cultivating productive philanthropic relationships with its thousands of chiropractic alumni.

### **SECTION III - NA**

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

The team was encouraged by the transparency, frank analysis, enthusiasm, and energy of the SCU community, both in the written materials and in the in-person discussions that occurred as part of the visit. SCU noted that it is “not where it needs to be” on a number of fundamental academic initiatives; however, in a number of cases, it had a plan for moving forward. With that being said, there remain some significant concerns for this team that could jeopardize the institution if they remain unresolved. These concerns have been addressed in the report but are again reflected in the recommendations below.

In summary, the team believes that SCU is making progress on a number of issues identified by the 2012 special visit team, but it remains in jeopardy on some of

those issues. Below are the official commendations and recommendations from the team.

### Commendations

The team commends the institution for:

1. engaging in honest and transparent reflection and displaying a strong university-wide commitment to address areas needing attention and further development. The team appreciated the access it received to documents and the frank and collegial conversations in all of its meetings.
2. continuing its commitment to the mission and values of SCU, specifically by seeking to improve the campus climate and morale, by defining behaviors that epitomize university values, by building an integrative curriculum/professional model, and by considering the holistic development of the student. The team commends the faculty and staff for their collegiality, loyalty, and commitment to SCU.
3. making progress toward full implementation of a student learning assessment process that aligns university and program learning outcomes and captures student learning data in ExamSoft.
4. improving communication and collaborative decision-making across campus. SCU has hired key senior leaders with a commitment to collaborative leadership, has instituted an inclusive budgeting process, and has implemented or

maintained numerous communication touch points to keep campus constituents well-informed and to solicit input on decisions.

5. instituting a number of cross-disciplinary working groups to facilitate collaboration and effective decision-making (for example, the Retention and Student Success Task Force and the University Assessment Council).

### Recommendations

The team recommends that SCU:

1. achieve financial stability as follows (CFR 3.4):
  - a. align revenue flows with operating needs and expenses;
  - b. optimize enrollment by leveraging the expanded marketing and admissions expertise and developing a strategic plan to improve recruiting outcomes for programs with growth potential, as demonstrated by rigorous market analysis; and
  - c. grow extramural support by cultivating relationships with alumni and community members who share SCU's vision for integrative healthcare, by increasing Board contributions, and by seeking extramural funds from foundations and/or government grants
2. develop and implement a program review process that leverages professional accreditation and other existing data collection systems (e.g., ACAR, ADAR, APAR and PEG), that includes a longitudinal evaluation of student learning outcomes, and that incorporates reflection and action planning; continue to build

a culture of data-informed, continuous improvement by systematically capturing institutional data to inform decisions. (CFRs 2,7, 4.1, 4.3)

3. continue to address issues raised by the California Acupuncture Board and Council on Chiropractic Education. (CFR 2.1)
4. implement assessment processes for co-curricular and certificate programs and demonstrate how assessment data are used to make programmatic improvements. (CFRs 2.3, 2.11)
5. continue to address the issues of faculty workload, compensation, and evaluation. (CFRs 2.9, 3.1, 3.2)

## APPENDICES

### 1. CREDIT HOUR AND PROGRAM LENGTH REVIEW FORM

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the Comments sections as appropriate.)
Policy on credit hour	Is this policy easily accessible? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	Where is the policy located? <a href="https://my.scuhs.edu/ICS/Governance/Policy_Manual.jnz">https://my.scuhs.edu/ICS/Governance/Policy_Manual.jnz</a>
	Comments: The Credit Hour policy is found in the SCU Policy Manual Volume 5, Section 5.5.1.
Process(es)/ periodic review of credit hour	Does the institution have a procedure for periodic review of credit hour assignments to ensure that they are accurate and reliable (for example, through program review, new course approval process, periodic audits)? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	Does the institution adhere to this procedure? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	Comments: This occurs as part of the process of programmatic accreditation & is reviewed by programmatic accreditors every 5-8 years depending on the length of reaffirmation.
Schedule of on-ground courses showing when they meet	Does this schedule show that on-ground courses meet for the prescribed number of hours? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	Comments: An examination of the course schedule confirms that courses are meeting for the prescribed number of hours.
Sample syllabi or equivalent for online and hybrid courses	How many syllabi were reviewed? 5
	What kind of courses (online or hybrid or both)? 3 online; 2 hybrid
	What degree level(s)? doctoral, masters, and certificate

<i>Please review at least 1 - 2 from each degree level.</i>	What discipline(s)? Chiropractic, Acupuncture and Oriental Medicine, Ayurveda
	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? x YES NO
	Comments: syllabi contain same elements as face-to-face course with apparently the same rigor
Sample syllabi or equivalent for other kinds of courses that do not meet for the prescribed hours (e.g., internships, labs, clinical, independent study, accelerated) <i>Please review at least 1 - 2 from each degree level.</i>	How many syllabi were reviewed? 9
	What kinds of courses? Accelerated, labs, internships, certificates
	What degree level(s)? bachelors, masters, doctoral
	What discipline(s)? biological sciences, chiropractic
	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? x YES NO
	Comments: The SCU Policy Manual Section 5.5.1 includes standards for clinical hours. Syllabi contain same elements as traditional course with apparently the same rigor
Sample program information (catalog, website, or other program materials)	How many programs were reviewed?
	What kinds of programs were reviewed? Bachelor's Degree in Biological Sciences, Master of Acupuncture and Oriental Medicine (MAOM), Doctor of Acupuncture and Chinese Medicine (DACM), Doctor of Chiropractic Program
	What degree level(s)? Bachelor, Masters Doctoral
	What discipline(s)? see above
	Does this material show that the programs offered at the institution are of a generally acceptable length? x YES NO
	Comments: The catalog contains sufficient information on program length and graduation requirements

Review Completed By: Stephanie Juillerat

Date: April 4, 2017

## 2. MARKETING AND RECRUITMENT REVIEW FORM

Material Reviewed	Questions and Comments: Please enter findings and recommendations in the comment section of this table as appropriate.
**Federal regulations	<p>Does the institution follow federal regulations on recruiting students?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments:</p>
Degree completion and cost	<p>Does the institution provide information about the typical length of time to degree?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Does the institution provide information about the overall cost of the degree?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments:  <a href="http://media.scuhs.edu/page_files/Academic_Catalog_2014-2016_TK_BD_VR_5.5.16-final.pdf">http://media.scuhs.edu/page_files/Academic_Catalog_2014-2016_TK_BD_VR_5.5.16-final.pdf</a>            see pages 58-66 for length to degree  <a href="http://www.scuhs.edu/financial-aid/tuition-and-fees/">http://www.scuhs.edu/financial-aid/tuition-and-fees/</a> for costs of degree</p>
Careers and employment	<p>Does the institution provide information about the kinds of jobs for which its graduates are qualified, as applicable?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Does the institution provide information about the employment of its graduates, as applicable?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>
	<p>Comments: Institution provides job opportunities but claims to lack resources or processes to consistently track alumni and their employment status.  <a href="http://www.scuhs.edu/alumni/professional-opportunities/">http://www.scuhs.edu/alumni/professional-opportunities/</a> - lists job opportunities for students  <a href="http://www.scuhs.edu/academics/cem/why-be-acupuncturist/">http://www.scuhs.edu/academics/cem/why-be-acupuncturist/</a> and  <a href="http://www.scuhs.edu/academics/lacc/why-be-chiropractor/">http://www.scuhs.edu/academics/lacc/why-be-chiropractor/</a> - list employment settings that acupuncturists and chiropractors work in  <a href="http://www.scuhs.edu/resources/consumer/">http://www.scuhs.edu/resources/consumer/</a> - provides gainful employment information for certificate programs</p>

\*§602.16(a)(1)(vii)

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

Review Completed By: Stephanie Juillerat

Date: April 4, 2017

### 3. STUDENT COMPLAINTS REVIEW FORM

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)
Policy on student complaints	Does the institution have a policy or formal procedure for student complaints? x YES NO
	If so, Is the policy or procedure easily accessible? Where?
	<p>Comments: The process is publicly available to students in the Consumer Information Guide, p. 87, found at this link: <a href="http://www.scuhs.edu/resources/consumer/">http://www.scuhs.edu/resources/consumer/</a></p> <p>Institutional policies, including some procedures can be found in the following SCU Policy Manual Sections: 1.8.6.2 Student Appeals Board (volume 1) 1.8.6.3 Student Judicial Board (volume 1) 5.8 Academic Grievances (volume 5) 6.7 Non-Academic Student Grievances (volume 6) 6.5 Student Code of Ethics and Judicial Review Procedures (volume 6)</p> <p>Information is also included in the Student Policy Manual, section 6.7 The SCU Policy Manual is available to all SCU constituents from our intranet site, MySCU: <a href="https://my.scuhs.edu/ICS/Governance/Policy_Manual.jnz">https://my.scuhs.edu/ICS/Governance/Policy_Manual.jnz</a></p>
Process(es)/ procedure	<p>Does the institution have a procedure for addressing student complaints? x YES NO</p> <p>If so, please describe briefly: Grievances related to grades utilizes a grade change procedure Academic grievances not related to grades requires student to first approach faculty, then dean, then VPAA Non-academic grievances utilize a multi-step process that begins with informal discussion and, as needed, concludes with a student appeals board decision.</p>
	If so, does the institution adhere to this procedure?      x YES NO
	<p>Comments: Academic grievances are addressed In the Student Policy Handbook, in Section 5.8 Grievances of a non-academic nature are addressed in Section 6.7</p>

Records	<p>Does the institution maintain records of student complaints? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If so, where?</p> <p>The institution's record retention policy includes records of student complaints and can be found in the SCU Policy Manual Section: Appendix 3.3.21: Record Retention Schedule Record Retention Period Schedule (volume 3)</p> <p>The SCU Policy Manual is available to all SCU constituents from our intranet site, MySCU:  <a href="https://my.scuhs.edu/ICS/Governance/Policy_Manual.jnz">https://my.scuhs.edu/ICS/Governance/Policy_Manual.jnz</a></p>
	<p>Does the institution have an effective way of tracking and monitoring student complaints over time? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If so, please describe briefly:</p> <p>Records of complaints are kept for 5 years in the Office of Student Affairs, which allows for tracking over time.</p>
	<p>Comments:</p>

\*§602-16(1)(1)(ix)

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

Review Completed By: Stephanie Juillerat

Date: April 4, 2017

#### 4. TRANSFER CREDIT POLICY REVIEW FORM

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)
Transfer Credit Policy(s)	Does the institution have a policy or formal procedure for receiving transfer credit? X YES NO
	Is the policy publically available? X YES NO If so, where? <a href="http://www.scuhs.edu/admissions/transfer-students/">http://www.scuhs.edu/admissions/transfer-students/</a> Academic catalog
	Does the policy(s) include a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education? x YES NO
	Comments: Transfer of credit procedure articulated in academic catalog but not very much information on website.

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

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

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

See also WASC Senior College and University Commission's Transfer of Credit Policy.

Review Completed By: Stephanie Juillerat

Date: April 4, 2017