

# CORE COMMITMENT TO EDUCATIONAL EFFECTIVENESS

## REPORT OF TOURO UNIVERSITY



**CALIFORNIA**



**SUBMITTED TO**

**WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES**

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# TOURO UNIVERSITY EDUCATIONAL EFFECTIVENESS REVIEW REPORT

## **Introduction**

*vayo'mer 'Elohiym yehiy 'or vayehiy 'or*  
“Let there be light”

Touro University (TU) is a division of the Touro College system, headquartered in New York, with two campuses, Touro University California (TUC), located in Vallejo, California, and its branch campus, Touro University Nevada (TUN), located in Henderson, Nevada. On February 25, 2005, regional accreditation of TU was transferred from the Commission on Higher Education of the Middle States Association of Colleges and Schools (MSACS) to the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC).

The Institutional Proposal of TU was submitted to WASC in October 2006 and accepted without revision in December 2006. The Capacity and Preparatory Review (CPR) report was submitted in August 2008, and this was followed by a CPR site visit to both TUC and TUN in November 2008. The joint report of the CPR site team was shared with the university in January 2009. In February 2009 the WASC Commission received and considered the report. The final letter from the WASC Commission was received by the university in a letter dated March 12, 2009.

The Educational Effectiveness Review (EER) report is submitted in preparation for the EER site visit, which is scheduled for March 24-26, 2010. As this is also a review of both TUC and TUN, the report represents the input of all programs and a great many individuals on both campuses. We have viewed the entire accreditation review process, from the outset, as an opportunity for deep and meaningful self-reflection and to gain clearer focus on our mission, vision, goals, and outcomes. In the process we have identified many strengths and accomplishments on both campuses. We also recognize this process as an opportunity to chart a path for improvement by our campuses individually and together as a part of the greater Touro College system. We have moved rapidly to implement the recommendations of the CPR site team and the WASC Commission. We present this report with a commitment to, and in the spirit of, continuous quality improvement and look forward to the feedback we will receive from our site visit team.

The process of self-study and preparation for the visits by WASC has been guided by a Steering Committee of more than 20 individuals representing the academic and administrative leadership of TUC and TUN, including provosts, chief executive and financial officers, deans, two associate deans, program directors, faculty, the directors of institutional research and information technology, and students. Four individuals from this group, two from each campus, have served as the core WASC Executive Team (WET) for the purpose of coordination and continuity, adherence to timelines, scheduling and chairing of Steering Committee and focus group meetings, ensuring that required

data sets and policies are in place, and providing first drafts of the reports. To this WET group were added the directors of institutional research from both campuses, both of whom were hired following the CPR visit. Drafts of this report have been the result of review principally by the Steering Committee; however, the opportunity for all faculty, staff, and students at both campuses to comment and contribute also was provided.

This report is comprised of four chapters; the first three each address one of the themes selected by TU in our Institutional Proposal. Integrated within our discussion of each theme will be a discussion of our approach to the topic with reference to some of the questions we raised in the Institutional Proposal, our progress in addressing related areas we previously identified as focus areas in our CPR report, and our response to those WASC recommendations arising from the CPR visit which we feel also relate to that theme. The final chapter describes the university's efforts to create a strategic and sustainable process for institutional change that is informed by evidence reflecting student success. Throughout the report there are hyperlinks to data and other references. A complete list of documents to which there are hyperlinks can be found in Appendix A.

First among these hyperlinks is the March 12, 2009 letter from the WASC Commission (Exhibit 1, Letter from WASC Commission, WASC\_Commission\_Letter.pdf). However, as the recommendations of this letter form a critical reference throughout our report, we will begin by quoting from the letter and listing those recommendations here.

“The Commission wishes to emphasize the following areas for particular focus:

- (1) Continued development of the clinical rotation sites, with an emphasis on the training of preceptors in the use of assessment strategies aligned with learning outcomes;
- (2) Development of an office of institutional research, together with an up-to-date data management system that is responsive to capturing and disseminating measures of educational achievement, while supporting financial, library, institutional research, and strategic and academic planning functions;
- (3) Strengthening of support for faculty engagement in research and professional activities in order for them to remain current in their fields;
- (4) Stabilization of key leadership positions and existing academic programs in the context of a coherent academic plan; and
- (5) Balancing the pressures for rapid growth and the need to stabilize and ensure the quality of existing programs prior to beginning new academic programs.”

The essence of the remainder of the letter, which is addressed in depth in this report, includes the following statements:

“...a need for the development of a clear and effective organizational plan that creates appropriate operational autonomy between the New York administration and the separately accreditable entity of Touro California.”

“...a need to develop within Touro California necessary accountability structures. The senior leadership at the two campuses needs to be given appropriate levels of support in view of the fact that the Provost is the operative CEO at both locations and risks over-extension. In addition there is a need for a clearer and more substantive administrative organization that connects (and oversees) both the California and Nevada campuses. While there is unity in the Provost for the two campuses, there is a need for the development of a clearer set of processes and structures that link the two campuses under a single administrative structure.”

We next address our selected themes: Institutional Identity, Institutional Commitment to Outcomes, and Learning Assessment for Self Improvement. We reflect upon each theme in the context of its importance to our university and both the challenges we have faced and the positive changes that have occurred in addressing each.

### **Chapter 1: Institutional Identity - From Periscopes to Professional Education**

Institutional identity, as a theme, is an important focus for the re-accreditation process. Institutional identity manifests as the way our students, faculty, administrators, staff, alumni and the community at large view us. Institutional identity is the coming together of name recognition, faculty reputation, alumni contributions in their fields, institutional resources, and highlights of our strengths. As an institution we needed to establish ourselves and our mission in a positive way, but more than titles, labels, or logos, the challenge we faced was to make ourselves known through our practices and participation within the community. Our ways of doing things, talking, beliefs and values within the institution needed to be clarified, and our participation and engagement within the community needed to increase. The campus community can espouse our vision—to serve, to lead, to teach—but our mission, which is an integral component of our identity, is not as familiar to our internal community—the faculty, staff and students. So why would we expect our external community to identify Touro University with a commitment to social justice, intellectual pursuit and service to humanity? This chapter presents our challenges and our opportunities in moving from being identified with a naval shipyard to two centers for health sciences and education.

#### **Institutional Context**

As a young, religious-affiliated institution in a new environment, the California campus (TUC) is located on the grounds of a 150-year-old decommissioned naval shipyard (Mare Island) where “periscope parking” signs can still be found. The campus is surrounded regionally by large and well known institutions (the UC and CSU campuses) and is located in an economically disadvantaged and medically-underserved area. Although Mare Island is an integral part of the Vallejo, California landscape, and Vallejo is a transportation and commuter hub of the North Bay, the City of Vallejo has serious financial issues.

The TUC campus includes 23 buildings, located on 44 acres, and is designated as a national historic landmark. It is thought that President Lincoln signed the order to build

the first west coast naval base hospital building. Mare Island shipyard constructed over 500 naval vessels and overhauled several hundred more during the 150 year history. The current challenges to expanding the Mare Island campus have been the added expense of renovating buildings that are full of asbestos and the requirement to preserve the historic essence. To date Touro has spent over \$31 million in renovation of the California campus. For 2009-2010 another \$5 million was budgeted to purchase the campus property and continue renovation.

The Nevada campus (TUN), the branch campus, was the newcomer in a region tremendously underserved from a healthcare perspective. TUN is housed in a 20 year old warehouse in the desert, adjacent to the Henderson Valley Auto Mall. The 203,000 square foot warehouse footprint is part of a commercial industrial park in Henderson. The campus “grounds” are asphalt, and food service for the campus is vending machines and a coffee cart. However, the warehouse in Nevada was an empty shell, which allowed for relative ease of renovation. Touro purchased the buildings in 2006 for \$28.6 million and has completed four extensive building projects totaling \$13.45 million, including an impressive façade complete with Georgian columns. In 2010 a fifth phase of construction, projected to cost \$40 million, will begin and hopefully will include a College of Veterinary Medicine, a small animal hospital, an expanded faculty practice clinic, a center for older adults, and a five story parking structure.

For the two campuses, these geographic and structural differences have influenced the results of the satisfaction surveys administered annually to faculty, staff and students. In some cases the responses were notably different with more negativity expressed by the TUC campus. The inability to respond rapidly to initiatives for improvement at TUC may explain a culture of frustration experienced by the TUC faculty (Exhibit 2, Summary of Faculty and Staff surveys 2007-2009, Faculty\_Staff\_Survey\_Summary.pdf).

Our institutional identity cannot be established by a tradition of strong general education; Touro University California and Touro University Nevada do not offer general education. The main campus does not even offer the same programs as the branch campus; so, identity cannot be linked to disciplines. Neither campus is ivy-covered or old by academic standards, so the focus of our institutional identity needs to be found elsewhere.

Our institutional identity is important if we are going to be successful in continuing to attract superior applicants and highly qualified faculty. We need our alumni and other donors to make us a priority for giving. Our osteopathic graduates need to be competitive for residencies (Exhibit 3 and Exhibit 4, DO residency match lists for 2009, TUCOM\_Residency\_Match\_2009.pdf, TUN\_COM\_Residency\_Match\_2009.xlsx), while our other graduates need to be sought out for employment and leadership positions. The Merriam-Webster dictionary provided many definitions for “identity,” but the statement “sameness of essential character in different instances” was useful in establishing the basis for our *institutional identity*. It was obvious our identity was not going to be based on location, buildings, or a long tradition; rather, it needed to center on essential characteristics of an institution that exists in two different states. The essential characteristic for Touro University is the opportunity the institution provides for faculty,

staff, and students to capitalize on their strengths and maximize their skills. When someone says “Touro University” we want the response to be... “Oh, Touro University is a Jewish-sponsored institution that emphasizes *social justice, intellectual pursuit, and service to humanity* in all their programs. They have an excellent academic reputation.” The following sections describe how we intend to foster that recognition.

### Our Identity as a Jewish-Sponsored Institution

Touro University exists not only for the purpose of offering quality programs in the health sciences and education but also to provide observant Jewish students an opportunity to study without challenges to their religious practices. While students at TU are not required to complete a course in Jewish studies, all newly admitted students are introduced in a non-religious manner to the fundamental beliefs and practices of the Orthodox Jewish faith during new student orientation. It is important to our institution that internal and external communities are aware of our Jewish identity. Both campuses uphold the Jewish traditions and values. The campus operating hours recognize Sabbath observance; no classes are held on Saturday, food provided by the institution is kosher, all Jewish holidays are observed, celebrations are held on campus in concert with specific holidays, educational sessions are held on the meaning of the High Holy days and Shabbat services, campus, daily prayer and Jewish enrichment classes are held on the TUC campus. TU also reaches out to the Jewish community as a partner in service activities, such as offering a community-wide health fair.

### WASC Concerns Relating to our Institutional Identity

The geographic distance between our two campuses and the relationship with our parent institution has had an impact on our ability to carry out our mission and develop our institutional identity internally and within the community. When the institution embarked upon the comprehensive accreditation experience, we conducted a self-assessment of the criteria for review. As a result of this assessment, the following evaluative statement was formed:

*Analyze the organizational leadership and structure to determine the impact on communication, decision-making and optimal performance.*

CFR 1.3 under Standard 1, Institutional Purpose, expects the leadership of the organization to create and sustain leadership systems marked by high performance, appropriate responsibility, and accountability, and Organizational Structure and Decision-Making Processes, 3.8 under Standard 3C, required the organizational structures and decision-making processes to be clear, consistent, and sufficient. We needed to ask questions regarding lines of authority, decision-making processes, communication, and collaboration. We determined that this evaluative statement was of high importance and needed our attention.

We visually depicted in the Capacity and Preparatory Review document our assessment of CFRs 1.3 and 3.8 each with a sobbing face (the highest level of pain on the Oucher

Pain Scale). Following the CPR visit, the institution received the Commission Action letter, which included two recommendations that appeared to directly relate to the evaluative statement and our institutional identity theme:

- Stabilization of key leadership positions and existing academic programs in the context of a coherent academic plan.
- Balancing of the pressures for rapid growth and the need to stabilize and ensure the quality of existing programs prior to beginning new academic programs.

The Commission was concerned that the institution needed a clear and effective organizational structure with appropriate operational autonomy between Touro College and Touro California and Nevada. The Commission acknowledged the stability provided by the current Senior Provost; however, they charged the institution to develop an administrative process and structure that eliminated the risk of over-extension of the Provost and linked the campuses administratively. The decision to explore our institutional identity as one of the three themes for the EER reflects our shared concern with the organizational structure and strategic planning and a commitment to be a mission-focused institution.

Even with significant differences between TUC and TUN, which have presented challenges to the institution, Touro University has advanced and clarified the institutional mission and identity in the three years since the *Institutional Identity* theme was chosen by the Steering Committee. Evidence of how the institution has transformed the way we are viewed, managed, and supported follows.

#### Strategies to Enhance Institutional Identity

The early image or identity of our institution is formed by the surface perception of the two campuses—old historic buildings or a warehouse with Georgian columns. Our institutional proposal for the re-accreditation of Touro University included the following goal:

Create a learning community that engages faculty, students, and staff in reflective analysis and mission-directed personal and professional growth and development.

To achieve this goal, we have concentrated our efforts on communicating and promoting the institutional assets to our internal and external communities through name recognition, a clear organizational structure, strategic goals, and a commitment to social justice, intellectual pursuits, and service to humanity.

Institutional identity encompasses more than just logos, letterhead, signage, and marketing. It includes organizational structure and clarity, program and service planning and naming, architecture and interior design, and communications. In all aspects of institutional identity, the vision, mission, programs, and services are communicated to both the internal community and the external community. Our identity communicates our ability to achieve the mission, operate in a cost-effective manner, and offer a secure

future. When the TUN campus began, because we were not part of the public higher education system, we were often described as “one of them,” a reference used for proprietary institutions. There was an expressed suspicion that we might close our doors in the middle of the night and leave our students stranded. Quite the contrary. We purchased our buildings in 2006, including an additional 100,000 sq. ft. building next door to the TUN structure. We are not renters but principal owners in the Black Mountain Business Park. The TUC campus, an anchor tenant on Mare Island, concluded an agreement to purchase the Mare Island property in December of 2009.

It is important to acknowledge the economic impact that the presence of Touro University has on the two counties where the campuses are located. During the recession, the state schools in California and Nevada have experienced drastic budget cuts. TUC and TUN have remained financially viable with the ability to maintain the funding necessary for program growth and quality and to respond to community needs. Solano County and Clark County benefit in four distinct ways: local spending by the university for operations and construction; salaries and wages paid to TUC and TUN faculty and staff in an amount exceeding \$36 million annually; local spending by university students, faculty, staff, and their immediate families; and dollars spent by students’ family members who visit the community because of an enrolled student.

#### Building Identity Through Branding

Branding exercises tend to unify a campus through a dialogue that seeks to define an institution’s commonality. With a vision, mission, and clear institutional goals, the TUN campus embarked on a process focusing on the “uni”versity to thoroughly understand the university’s character and develop a visual representation reflecting the voice of Touro University Nevada. Giving a strong visual image to the identity of TUN has the potential to increase the quantity and quality of students applying to TUN as well as the number of inquiries from prospective faculty. We hoped a strong institutional identity reflected by a “brand” would open doors for graduates, generate financial returns in terms of research support, increase preceptors and clinical sites, generate donor support, and firmly establish TUN as “the place for education and health care to meet community needs of the future.”

Individuals participated in focus groups and an online survey to build engagement and ownership in the final product. The survey of 204 students and 69 faculty and staff revealed that the respondents were overwhelmingly “bullish” on TUN, with 90% of the students and 95% of the faculty/staff indicating they would recommend the university to others. Sixty-four percent of the students reported they found TUN online; 35% chose TUN because of location; and 32% chose TUN because it matched their needs—a percentage that hopefully will increase dramatically as the institutional identity spreads.

Adjectives most frequently used to describe TUN by the students, faculty, and staff included:

<b>Students</b>	<b>Faculty and Staff</b>
Student-focused	Student-focused
Pioneering	Community-centered
Friendly	Pioneering
Growing	Innovative
Innovative	Holistic
New/young	Collaborative
Holistic	Growing
Community-centered	Health care
Expensive	
Caring/giving	

There was considerable discussion in the focus groups about the relationship with Touro College and positioning TUN as part of a larger system with a longer history and 29 campuses nationally and world-wide. However, we concluded that TUN would be best served by differentiating itself from the New York and California programs; therefore a new logo, with distinctive colors and a simple and clean look, was selected and unveiled in November 2008 (See EER cover for new TUN logo design and Exhibit 5, TUN Vision and Branding Study Report, TUN\_Vision\_and\_Branding\_Study\_Report.pdf). In October 2009 the new TUN website was launched as part of the branding process (<http://www.tun.touro.edu>).

In the fall of 2009, TUC completed a search for a Director of External Relations, and in November TUC launched a branding exercise with the same organization that worked with TUN. TUC seeks to generate an identity system that is bold, memorable, and immediately recognizable and that communicates the university’s persona and strengths clearly and consistently. This project is geared to produce an identity that positions TUC for growth, change and success, carving out a unique role for this outstanding educational institution within the extremely competitive Northern California higher education market. A powerful visual identity and messaging system is critical to TUC’s long-term success because it competes for students in a region that is heavily populated with internationally renowned institutions like the University of California San Francisco, Berkeley, and Stanford, as well as numerous other smaller, high quality graduate institutions.

The goal of this branding exercise is to find ways to attract high quality students and to attract talented faculty by presenting a unified “brand” that showcases TUC as a center of excellence in teaching and healthcare. TUC emphasizes programs that integrate public health and public service with educational opportunities. TUC places a special emphasis on serving the needs of medically-underserved communities and at-risk youth. The majority of the TUC College of Medicine graduates (55%) go on to become primary care providers, thus helping to reduce the shortage of practitioners the country faces. TUC’s emphasis on the medically-underserved communities is particularly important to the municipalities surrounding the campus because these small cities have large concentrations of lower-income residents. TUC’s efforts to provide tools for educators teaching urban youth is both an essential educational contribution and a community service to K-12 schools in the region, which have high at-risk youth populations.

The branding process will take five to six months and will be finalized between mid-February to mid-March. Once finished, TUC will launch a large print and media marketing campaign aimed at increasing visibility throughout the region, using the new integrated identity and messaging system. TUC also will use the new system to launch a complete overhaul of the TUC website. The web overhaul cannot begin until the initial phase of the branding process is finalized because the new identity system will be the platform upon which the new website will be built. The web revisions will take a minimum of six months. Ultimately, this exercise will help TUC advance the mission and more fully define its niche in the highly competitive regional market.

### Clarifying the Organizational Structure and Relationships

In the CPR Report prepared in August 2008, the survey of faculty and staff revealed some negative perceptions among the TUC employees who had experienced a great deal of uncertainty as a result of having four provosts and CEOs and four deans for the College of Medicine in 12 years. Following a meeting in May 2009 with WASC President and Executive Director, Ralph Wolff, and our WASC liaison Richard Winn, to review the Commission Action Letter, the university launched a search for a Provost for the TUC campus in June 2009. Dr. Michael Harter remains as Senior Provost over both campuses and as Provost of TUN. Even though Dr. Harter would fill two organizational positions, each position was established with the appropriate level of autonomy. A search for Provost and Chief Operating Officer of the TUC campus was concluded in September 2009, and Dr. Marilyn Hopkins was appointed (Exhibit 6, Dr. Hopkins CV, Hopkins\_CV\_Dec\_2009.pdf). Dr. Hopkins began full-time on December 1, 2009.

In concert with our goals and WASC recommendations, the WASC Steering Committee has focused on the organizational relationships, clarifying lines of authority and reporting, and standardizing titles where possible. Since the appointment of Dr. Michael Harter as Senior Provost and CEO of Touro University Western Division, trust has been building at TUC, but skepticism remains. In a June 2009 survey administered again to the internal community, a significant percentage (42%) of TUC respondents continued to feel the organizational structure of the institution was not clear to internal and external stakeholders, and that the structure did not clearly depict positions, associated responsibilities and lines of authority (34%). The survey will be repeated to see whether there is change following clarification of the organizational relationships. Copies of the organizational chart were distributed to each employee in the Fall 2009. The organizational chart was separated by campuses to enhance readability. A separate senior administrative organizational chart was developed and distributed (Exhibit 7, Organizational charts for TU, TUC, and TUN, Organizational\_Charts\_Dec\_2009.pdf).

Two additional areas of concern reflected in the CPR team report which relate to the relationships within the organization, were the need for proactive attention to clear and open communication between all constituencies as the organization grows in complexity and size and the need to develop campus-wide review for academic programs to ensure faculty involvement and ownership. The WASC process has increased communication

between the campuses. We are sharing administrative policies as they are developed. Faculty with research expertise have spoken on both campuses, and faculty are discussing possible collaborative research projects. Also in response to the recommendations by the CPR team, the Chair of the TUN Faculty Senate was added as a member of the Executive Council to enhance communication with the faculty. Both TUC and TUN also formed Program Review Committees comprised of faculty from each school (Exhibit 8, Bylaws of Program Review Committees of TUN and TUC, TU\_Program\_Review\_Committee\_ByLaws.pdf).

An additional concern expressed by WASC and shared by the faculty and staff of Touro University is the relationship with Touro College. The CPR team made the recommendation that TU senior administration advocate for changes to the central administrative systems or advocate for more locally controlled systems. When asked in the June 2009 survey if the mission of TU was supported by senior leadership of Touro College, 41% of the TUC campus responses were unfavorable. Fifty-two percent (52%) of the TUC faculty and 35% of the TUN respondents found the communication with Touro College unsatisfactory.

In September 2009, Dr. Alan Kadish was appointed Senior Provost and Chief Operating Officer for Touro College (Exhibit 9, Press release of Dr. Kadish's appointment, Press\_release\_Dr\_Kadish\_appointment.pdf). In the future, Dr. Kadish will become President, and Dr. Lander will be the Chancellor of the system. Dr. Kadish visited TUN in December 2009, and a visit to TUC is scheduled in the spring. As a result of operational leadership changes at TC, and strong leadership for the TUC and TUN campuses, we hope communication with Touro College will improve. Additional authority and accountability gradually is being transitioned to TU. Beginning in March 2010, TC will transition the graduation audit function to TUC and TUN; thus campus registrars will have the authority to confer degrees. We also will receive stand-alone status with respect to participating in and disbursing Title IV funding.

### Strategic Goals and the Planning Process

The development of an institutional identity is linked to effective strategic planning. The strategic plan articulates clearly the mission, values, and uniqueness of the institution. As the institution has progressed through the re-accreditation process, we have adopted common and clearly articulated institutional goals found in the strategic plan that reflect our institutional priorities:

- To be an exemplary center for teaching, service, and research in the health sciences and education.
- To be supportive of the educational, personal, and professional development of a diverse student population.
- To be a leading provider and a model for best practices in collaborative service, both for the community at large and at-risk populations.
- To be responsive to community, state, and regional needs in health care and education.

- To be known as a university community that fosters diversity among its people, programs, and ideas.
- To be recognized as an organization with visionary leadership advancing innovative programs and quality education.
- To be recognized as an effective and integrated academic community that recruits, retains, and supports excellent faculty and staff.

The TUN campus developed a Strategic Plan that reflected the campus' goals for the period of 2006-2009 and revised it through 2010 (Exhibit 10, TUN Strategic Plan, TUN\_Strategic\_Plan\_2006-2010.pdf). The TUC campus initiated its formal strategic planning process in July 2008 and updated the plan in October of 2009. A major responsibility of the new Provost will be to lead the continuing development of the strategic plan. (Exhibit 11, TUC Strategic Plan, TUC\_Strategic\_Plan\_2009.pdf). The June 2009 survey revealed that over one-third of TUC faculty and staff (36%) felt the planning process could be more inclusive, as did 15% of the TUN campus. Just a little over half of the faculty and staff on both campuses (TUC-52% and TUN-54%) agreed that the strategic plan is revisited and revised on a regularly scheduled basis. The Steering Committee feels increased communication as the plan is revised will improve these perceptions. Of concern to the Steering Committee was the perception by 30% of the TUC faculty and staff (compared to 4% on the TUN campus), that the planning process was not based on evidence of the organization's capacity to support the institutional mission. The TUC campus carefully considered the WASC recommendation to balance growth and quality and decided not to pursue the undergraduate business program. The TUC campus will work to improve these perceptions as the new Provost reconstitutes the Strategic Planning Steering Committee in December 2009 and engages the campus in focused dialogue regarding the following topics:

- Strategic program development and growth.
- Space utilization and development of physical facilities to support instruction and student learning.
- Utilization of appropriate technology in the teaching-learning process.
- Expanding research, grant-writing, and publication opportunities as scholarship expectations are clarified.
- Developing success with fundraising efforts and alumni relations.
- Professional development for faculty and staff.
- Creating a learning community enriched by campus life activities and student services.
- Strengthening internal and external communication.
- Creating a learning community that respects, nurtures, and appreciates diverse perspective and backgrounds.

To increase the transparency of program planning and development, the newly formed Program Review Committee on each campus will be responsible for the review of new program proposals or curriculum changes to ensure consistency with institutional goals and budget priorities. A recommendation will then be sent to the Faculty Senate, the College Dean, and the Provost (Exhibit 12, Assessment Plan (page 13, Program

Reviews), TU\_Assessment\_Plan.pdf). As the institution has grown, the process for planning has needed to change to an institution-wide process.

### Commitment to Social Justice

Our institutional identity is directly related to our mission which includes our commitment to social justice. Social justice has a central place in Judaism and is embodied in the Hebrew phrase *Tikkun Olam* (pronounced tee-KOON oh-LUHM) found in the ancient writing in the *Talmud*. People are asked to repair or change the world through social action, charitable giving, acts of kindness, and volunteer work, by helping those who are in need, no matter in what capacity, and in all communities (<http://learningtogive.org/papers/paper169.html>; The Jewish Week, November 15, 2009). Social justice for Touro University is not a political platform; rather, it is viewed as an ethical obligation. Examples of TUC and TUN programs that have the potential to “repair the world” follow.

- Ninety percent (90%) of the clients seen in the TUC faculty practice clinic (Glen Cove) are Medi-Cal patients and would not have access to care without the TUC clinic.
- On the TUC campus, the joint graduate program in Physician Assistant Studies and Public Health has been very successful in recruiting underrepresented students. This has increased the number of healthcare providers returning to underserved communities.
- The TUC College of Education has created a new program aimed at training teachers and service providers to diagnose and help autistic children and adults lead fulfilling lives. Such training is vital as the huge number of autistic children enter schools and tax special education classes and services. The College also hosted a speakers series for area educators and the general public that focused on empowering at-risk students and parents and closing the achievement gap facing culturally diverse students.
- TUC offers an elective opportunity (summer internship) for students in the healthcare professions programs to participate in clinical education, research and community service at a global level. Currently there are programs in Tanzania, Ethiopia, Bolivia, Taiwan, and Israel. Examples of service projects that demonstrate students’ commitment to social justice include Project Share (annual collection and donation of books and medical supplies to hospitals and clinics at the program sites), diabetes screening and prevention program in Ethiopia; provision of bicycles to facilitate access to clinics for expectant mothers in rural Tanzania; and various infectious disease control projects, such as building of latrines, provision of mosquito bed netting, and education programs on various aspects of health promotion and disease prevention.
- The TUN campus opened the Center for Autism and Developmental Disabilities in 2008 to expand the seriously inadequate services for this population. Developed to address a growing community need, TUN’s Center for Autism and Developmental Disabilities is unique as a multi-disciplinary, one-stop source for diagnostic services, therapy and supportive resources for families dealing with

autism and other developmental disorders. This team approach affords individualized treatment programs based on each child's individual needs. The center also serves as a learning laboratory for university students across the disciplines.

- In June 2009, the Stallman Touro Clinic opened at The Shade Tree facility in North Las Vegas. There TUN Physician Assistant Studies faculty and students and volunteer physicians from the community provide free preventive care, including prenatal and pediatric care, to the hundreds of homeless, uninsured women and children who stay at the shelter. Many of the residents have not visited a doctor in years. Students from the School of Nursing also have begun a health and wellness center for the residents providing health assessments, classes on health promotion and illness prevention, and referrals to the clinic.
- TUN faculty have been participants in focus groups held by elected officials (e.g., Representative Dina Titus) involved in the development of healthcare reform, as well as quoted in local newspapers on the impact of healthcare reform on the quality of healthcare in Southern Nevada.
- TUN School of PA Studies has facilitated grant funding for the Las Vegas charity "Homeless Helpers" which provides meals to the homeless.
- Clinical rotations for students in the TUN MPAS program include homeless clinics and shelters, senior centers, urban underserved clinics in Las Vegas and Reno, rural clinics in Nevada, Utah, and Arizona, clinics on the Paiute and Blackfoot reservations, and in clinics serving area veterans.
- TUN opened a Patient Clinic in 2008 that serves clients with limited financial resources, including uninsured diabetics through the "I DO" program.

### Opportunities for Intellectual Pursuits

The second commitment in our mission is intellectual pursuit. Intellectual pursuit refers to the creation of new knowledge or new interpretations or integration of pre-existing knowledge or understanding. A valued pursuit in its own right, it also serves the educational community by modeling how information is turned into evidence for decision making and expanded into innovative approaches for the continuous improvement of professional practice. The reputation of a school and the relevant discipline will be enhanced by a faculty program of research and scholarly activities. One recommendation from the Commission Action letter dated March 12 following the CPR, specifically addressed the need for the institution to address this commitment:

- Strengthening of support for faculty engagement in research and professional activities in order for them to remain current in their fields.

Creating new knowledge and/or effectively imparting existing knowledge is important to Touro University. The Faculty Handbook clearly outlines the requirement for research and scholarly activities, including publications, research, scholarly projects, presentations, and curriculum development. Retention and promotion require evidence of contributions by each full-time faculty member. Faculty members are expected to complete a Faculty Activity Report annually that details their research, creative, and

professional activities of value to their respective disciplines. Each program has different expectations appropriate for advancing the discipline, but they all expect faculty to be engaged in some form of scholarly activity. The strength of the individual's engagement in scholarship is measured by the extent to which the activities have been disseminated. As an example, the College of Pharmacy at TUC in 2008-2009 reported 23 grant submissions, more than 60 publications, and 78 presentations (Exhibit 13, COP Scholarly Activities Report, TUC\_Pharmacy\_Scholarly\_Activities\_Report.pdf). The 2009 Annual Report for the TUC College of Medicine details 33 publications in peer-reviewed journals, 30 abstracts or presentations, 1 book, and 3 book chapters published by the COM faculty and reflects an impressive increase of scholarly productivity from 2007 to 2008 (Exhibit 14, TUCOM Annual Research Report, TUCOM\_Annual\_Research\_Report.pdf).

There is an expectation for intellectual pursuit; however, as a relatively young institution, and one which has focused on program development, the scholarly productivity as measured in funded research projects and publication of books is not yet comparable to other long-standing institutions. The TUC brings in about \$600,000 annually in research dollars (a total of \$2.6 million in extramural funding to date). The TUC COP faculty serve as principal investigators and co-investigators on \$3.7 million in NIH funded grants. TUN has submitted five extramural grants which unfortunately were not funded. TUN did receive a private grant to support the Stallman Touro Clinic. Extramural funding has come to TUN with several recently hired faculty in COM and OT.

The exit team report from the CPR visit discussed the research facilities at TUC, "the commitment of the institution has been to excellent scholarly education with an evidence-based rather than a research-based culture of inquiry" (p. 16). Since the CPR, we have made efforts to promote and support a research agenda for the institution. At TUC there is 8000 square feet of laboratory space for research. More than 20 COM students presented abstracts at national and international conferences during the 2008-2009 academic year. COM faculty collaborated on research projects with University of Iowa, Case Western Reserve University, University of North Texas Health Science Center, Mercer University, Showa University in Japan, University of Sao Paulo in Brazil, and Jimma University in Ethiopia. For 2009-2010 there is \$50,000 in intramural funding available to support pilot projects in the COM. TUC has submitted a Recovery Act Grant to rehabilitate the Truitt Hall facility to become a multi-disciplinary research center with a focus on obesity and metabolic disease.

The College of Pharmacy at TUC has a \$70,000 budget to support faculty not currently supported by grants or contracts. The College supports research relationships between faculty and external partners, such as UC Berkeley, Children's Hospital of Oakland Research Institute, and the Buck Institute that have led to NIH and non-federal funding. The Department of Pharmacy Practice maintains a log of the research activities of each faculty member. The log is reviewed at department meetings, so there is close monitoring of progress and any problems experienced. In August 2009, the COP held day-long seminars on scientific writing and grant-writing, and in November 2009 began Research Tuesdays where research is shared with faculty and students. Teleconferencing and

WebEx are available to all TUC and TUN faculty members at any time to facilitate research collaboration. TUC COP faculty use teleconferencing at least once a week.

At TUN, funding was provided in 2008-2009 to support five faculty projects for the purpose of gathering pilot data to support a grant application for extramural funding. The Department of Research promoted four faculty-mentored student research projects and engaged eight work-study students in research activities. The university is developing collaboration with local biomedical research institutions including UNLV, DSX Therapeutics, Nevada Cancer Institute, and Nevada Imaging Center. The TUN Department of OMM will participate in a multi-site research project funded by the American Association of Colleges of Osteopathic Medicine to study “The Frequency of Counterstrain Tender Points in Osteopathic Medical Students.” Also TUN has entered into three collaborative research projects with the University of Kansas, New York University, and Wayne State University. There also have been increased efforts to hire new faculty members with strong research backgrounds. Dr. Catana Brown, OT faculty, continues her research on weight loss in the psychiatric population, and Drs. Nissanov and Rioux, who recently joined the TUN COM, continue their funded research on gene mapping of the spinal cord. The TUN School of OT has entered into a formal agreement with Southern Nevada Mental Health Services to examine the efficacy of a weight loss program for people with serious mental illness.

In the interest of gradually involving students in research, the CPR team report suggested offering an honors research option for students that would extend the length of their academic program. The TUN campus began a Master of Science degree program in Medical Health Sciences in August 2009 that focuses on the development of research competence. Many of these students are interested in applying to medical school. The program hopefully will strengthen a subsequent application of these graduates to medical school because of the research focus. The admission of these graduates in the COM may increase the number of collaborative faculty-student research projects. The TUC campus plans to offer the same degree. There have been discussions about a DO/PhD program, but no definitive plans have been finalized.

Systematic research reviews are required assignments in the nursing, OT, MPH and PT programs as part of the course requirements. Annually both campuses showcase faculty and student research at Research Day. The TUN campus offers the Doctor of Nursing Practice (DNP) degree, a practice doctorate, which focuses on translational research, which is the bridge from the discovery of new knowledge to the delivery of that knowledge in the clinical setting (Woolf, *JAMA*, 2008). Translational research transforms scientific discoveries arising from laboratory, clinical or population studies into clinical or population-based applications to improve health either directly or indirectly (NCI, 2006). DNP research produces a change in the healthcare system by changing practice. Three of the DNP students from Touro presented podium presentations at the national DNP conference in October 2009. Examples of the culminating practice-based dissertations presented by the DNP students include: use of a sepsis screening tool in the Emergency Department to reduce cost, length of stay and mortality; predicting risk for sudden cardiac arrest in adolescent athletes; implementing a shared governance model

and the impact on quality of patient care; changing scope of nurse practitioner practice through legislation using the diffusion of innovation theory; and using *informational* technology to address barriers to evidence-based practice. These evidence-based (translational) research projects by TUN DNP students are changing the way healthcare is delivered.

As noted earlier, a culture of evidence-based research is consistent with the applied nature of the programs. The university places importance on the scholarship of teaching, including the responses of our students to learning and innovative curriculum development. Curricular changes should be based on the discovery, application, and integration of findings from the scholarship of teaching. The TUC COP Triple Jump Examination won a national Excellence in Assessment award from the American Association of Colleges of Pharmacy, and a paper describing the exam was published in the research section of the *American Journal of Pharmacy Education*. There is a great deal more that could and should occur, and the experiences need to be disseminated.

Faculty development activities on both campuses are scheduled that support intellectual creativity. Topics with a research focus presented by TUC have included: Role of Cystatins in Aging and Cancer; Transdermal Iontophoretic Delivery of Penbutolol; Design and synthesis of Anticancer Agents; Guest faculty: Reverse Engineering the Physical Mechanics of Morphogenesis; Anti-atherogenicity of HDL-associated Paraoxonase; and the presentation of 43 posters (the most ever) on basic science, clinical science, public health, and medical education by faculty and students at the 8<sup>th</sup> annual research day March 2009.

Topics for the monthly seminar series on the TUN campus in 2009 included: New IVD Tests and Therapeutics for Sepsis; A Theragnostic Pair Based upon MAbs for iNOS; Chronic Mild Carbon Monoxide Exposure Impairs Developing Auditory System; Monoclonal Antibodies as Therapeutics: The Path from Target ID to Clinical Trials; Current Trends in HIV; Stroke: A Primer; Updates on Trauma Management; Immune System in the Outcome of Hepatitis; Adding Anatomy to the Medical Clerkships: Experience with Surgery and Clinical Skills; Functional Spectrum of Nevada Integrated Network for Biomedical Research Excellence; Anatomy of an NIH Grant; What's Cool About the Fire of Life Metabolism of Fruit Flies, Mice and People and the Impact on Science and Public Policy; and Team-Based Learning: Teaching Physiological Concepts.

### Service to Humanity Through Community Engagement

The third commitment in our mission is service to humanity. It is important to Touro University that our students engage in community service to make meaningful connections with the community. To show our commitment to community engagement, the institution adopted as one of the eight Student Learning Outcomes a community service outcome that requires all students to extend the mission of Touro University to the community. We engage our students in activities that enable them to see how they can make a difference through their program of study. Examples of their engagement follow.

- TUC Colleges of Medicine and Pharmacy provide healthcare to the local community through one off-site center and an on-campus student health clinic. Physicians work with medical students, who rotate through the Glen Cove Medical Center (GCMC) in Vallejo, to provide primary care, pediatric services, and osteopathic manipulative treatment. COP faculty members oversee the rotation of pharmacy students while practicing at GCMC.
- A significant number of medicine faculty members from both campuses currently see patients at various locations providing osteopathic medical care. COP faculty practice at San Francisco General Hospital in clinics for the underserved and at safety net clinics in Oakland and Napa.
- TUC PA/MPH students developed TUNE-UP, a nutrition and exercise program for the Mare Island Elementary School. Students also teach health and wellness classes, provide job development and employment assistance, locate transitional and permanent housing services, and promote wholeness and self-sufficiency to the homeless, underserved and the poor who visit the Global Center for Success on Mare Island. The PA students spend 46% of their clinical hours with underserved populations.
- TUC students are found at the local farmers market taking blood pressures and doing blood glucose testing. The campus holds a Teen Life Conference for local area high school students and their families; health and wellness topics are provided. Health services are provided at the school-based health center at Penny Cook Elementary School. The campus supports Vallejo House, which provides Touro student housing in disadvantaged neighborhoods, to increase visibility within the community. TUC students participate with Canvas of Hope for the American Cancer Society and at the Suitcase Clinic in Berkeley; they have built a public park for the community, and the faculty/staff and students are part of the annual Mare Island Run, which benefits the Greater Vallejo Recreation District and Fighting Back Partnership.
- In response to the H1N1 pandemic, TUC established a campus Flu Task Force that has been collaborating with the Solano County Department of Health in an effort to immunize as many residents of the county as are receptive. TUC faculty and students organized and coordinated mass immunization clinics throughout November and December that served over 1700 individuals.
- TUC COP students were awarded a \$10,000 Target Campus Grant to establish a student-run health education clinic in Vallejo with participation from all TUC programs.
- TUC College of Education hosted a major regional educational conference entitled “Empowering At-risk Students” in October 2009 for 400 participants including regional educators. The topics presented included building resiliency, improving literacy, understanding gang cultures, and strategies for increasing parental involvement.
- TUN is the academic sponsor of Valley Hospital’s graduate medical residency program, providing not only training opportunities for Touro students, but also an excellent venue for medical residents to come into the state and work in a range of specialties. The program currently includes 16 traditional internships – positions for first-year trainees who will ultimately progress into other specialties; the largest

single internal medicine residency program in the osteopathic medical profession (45 slots); 12 family practice residencies; the only ophthalmology residency program in Nevada (currently three with plans to expand to nine placements); the only dermatology residency program in Nevada (four placements); and the first neurology residency program in the state. The university is actively working to develop similar partnerships with other hospitals in the future, to further expand in-state residency opportunities and ultimately to increase both the number and specialized expertise of Nevada physicians.

- TUN also has recently opened to the community its first full-service patient clinic, staffed by practicing faculty members. The state-of-the-art medical clinic provides on-site learning opportunities for students as well as a venue for future clinical research trials. An expanded patient clinic is planned for the next phase of the university's build-out, which is proposed to come open in 2011.
- TUN faculty and students have partnered with the Southern Nevada Health District to conduct H1N1 clinics.
- TUN's student organization of the American College of Osteopathic Family Physicians (ACOFPP) provides free sports physicals to community youth.
- TUN School of Occupational Therapy partners quarterly with the St. Rose-Greenspun Women's Health Center to provide a fall prevention program for older adults. Annually the students participate in the "Duck Derby" to raise funds for the Positively Kids Foundation. The OT students work in the school district teaching the children about backpack safety.
- The TUC and TUN programs have affiliation agreements with hundreds of regional agencies, institutions, and organizations for the purpose of student rotations. Examples include 210 agreements for the TUC College of Pharmacy, more than 45 for the TUC Public Health program, 159 for the TUC PA program, and 137 for the TUC COM. TUN OT students have the potential to rotate with at least 71 different agencies, and nursing students rotate with 40 local health services agencies. TUN has an Office of Contracts that facilitates the development of affiliation agreements for the institution and currently has contracts for 343 separate agencies (Exhibit 15 and Exhibit 16, Affiliation Agreement Master Lists for TUC and TUN, [Affiliation\\_Agreements\\_TUC.pdf](#), [Affiliation\\_Agreements\\_TUN.xls](#)).

Faculty continue to advance the mission of Touro University through service at the local, state, national, and international levels in positions of leadership on professional and policy boards and as directors of service organizations. Touro University California (TUC) faculty serve: **on boards** of the American College of Osteopathic Pediatricians; East Bay Innovations; National Board of Osteopathic Medical Examiners; Editorial Advisory for the Journal of American Osteopathic Medicine; Open Longevity Science; International Maillard Reaction Society; Associate Editor Life Sciences; Contributing Editor IMARS Highlights; Electronic Journal of the American College of Osteopathic Pediatricians; California Osteopathic Physicians and Surgeons; and Deans of the American Association of Colleges of Osteopathic Medicine; **on committees and councils** of the National Scientific Advisory Council for American Federation for Aging Research; Medical Advisor to Vallejo City Unified School District; Sutter Solano Medical Center Performance Improvement Committee; Council on Medical Student

Education in Pediatrics (COMSEP); Faculty Development Taskforce COMSEP; COMLEX Preliminary Item Review; COMLEX Health Promotion-Disease Prevention/Health Care Delivery; Ilene F. Rockman CARL/ACRL Conference Scholarship; and OPTI Liaison American Academy of Osteopathy **as officers**, Chair, International Symposium Mate and Health; Acting President, Mate International Research Group; Vice President of the American College of Osteopathic Pediatricians; and President, American College of Osteopathic Internists; **as chairs** of the Health Promotion Disease Prevention and Health Care Delivery Committee of the NBOME; and Transition and Employment Committee of the North Bay Autism Regional Taskforce for the California Senate Autism Committee; **as fellows** of the National Academy of Osteopathic Medical Educators; and **as director** of the Vallejo City Unified School District School-Based Clinic.

Touro University Nevada (TUN) faculty serve: **on boards** of the American Board of Legal Medicine, Refugee Relief International, Southern Nevada Area Health Education Center, Nevada Organization of Nurse Executives, Boulder City Hospital, Board of Governors of the American Academy of Osteopathy, American Osteopathic Board of Neuromusculoskeletal Medicine, Affinity Hospice Medical Advisory, Nevada Nurses Association Editorial Board, JM Woodworth Malpractice Insurance Company, Las Vegas Autism Network, NurseWeek Mountain West, Clark County Medical Society, Clinical Anatomy Editorial Board, American College of Osteopathic Internists and Nevada Osteopathic Medical Association; Open Circulation of Vascular Journal Editorial Board; State of Nevada Anatomical Dissection Committee; Psychiatric Rehabilitation Journal Editorial Board; Occupational Therapy Journal of Research Editorial Board; **on committees and councils** of the Educational Council on Osteopathic Principles, COMLEX OPP Preliminary and Final Review, National Commission of the Certification of Physician Assistants, The American Academy of Physician Assistants Conference Education Planning Committee, and the Veterans Health committee of the Veterans Caucus of the American Academy of Physician Assistants; **as officers**, President-elect of the Nevada Osteopathic Medical Association, President-elect Clark County Medical Society, Secretary of the Nevada Occupational Therapy Association, Secretary of the local chapter-at-large of the international honor society for nursing, Vice President for the Nevada Occupational Therapy Association, and of the Pennsylvania and Delaware Regional Section of the American Camp Association; Vice-President, Nevada State Chapter of the American Medical Technologist; **as chairs** of the Southern Nevada Medical Industry Coalition Education Taskforce, Ethics Committee for the American College of Osteopathic Internists, Membership Committee of the American Academy of Osteopathy, Quality Improvement Committee for Boulder City Hospital, American Heart Association Southern Nevada Regional Taskforce, and Ethics and Standards Committee for the Nevada Physical Therapy Association Chapter; **as fellows** in the American Occupational Therapy Association and the American Academy of Osteopathy; and **as directors** of the Valley Hospital Family Medicine Residency Program, Valley Hospital Wound and Hyperbaric Center, and Boulder City Hospital Emergency Department.

## Conclusion

*“There comes that mysterious meeting in life when someone acknowledges who we are and what we can be, igniting circuits of our highest potential.”*

Rusty Berkus

The re-accreditation process, while not mysterious, has ignited this institution by underscoring how important it is to recognize the difference our graduates can make in the health sciences and education. Institutional identity needs to be the concern of every member of the organization, and it is as important as fiscal prudence, strong governance, transparency, and accountability. This section explored how we promote our identity, public image, and linkages with our constituencies through our mission. Striving to achieve our highest potential and to be known for our commitment to social justice, intellectual pursuits, and service to humanity is key to achieving the desired institutional identity, and these commitments will position Touro University among the best centers to prepare for a pivotal role in the health sciences and education.

## **Chapter 2: Institutional Commitment to Outcomes**

At the heart of the institutional accreditation process is a commitment to educational effectiveness. Typically this commitment is demonstrated through a rigorous, sustainable plan for on-going assessment and continued enhancement of student performance. For many years, higher education faculty has been encouraged to define carefully the characteristics of student success and to assess thoroughly the attainment of learning outcomes. The mantra has been a call to “improve teaching and learning” through a systemic approach to assessment of learning.

In keeping with the institution’s vision statement—*Educating caring professionals to serve, to lead, to teach*—Touro University set forth “an institutional commitment to outcomes” as a major theme of its Capacity and Preparatory Review. Sufficiency and alignment of resources, attainment of learning, and support for teaching and learning were the primary Criteria for Review identified as related to the theme of institutional commitment to outcomes. Specifically, CFRs 2.1, 2.4, 3.1, 3.2, 3.3, 3.4, 3.5, and 3.7 were identified as critical to this theme in the Institutional Proposal and the CPR Report. This focus has positioned the university effectively for the Educational Effectiveness Review phase of the accreditation process.

This chapter will explain the ways we have aligned institutional resources to support student success. We have done this through student and faculty engagement in the assessment process, self-assessment, university leadership focus on institutional research, enhanced investment in student support, and increased investment in information technology as means to fulfill the university’s educational purposes. The chapter also will present data that indicate results in the areas of student success and campus climate.

The CPR team commended both campuses for enthusiastic, dedicated faculty and staff. They acknowledged the investment in resources around numbers of and salaries for

faculty in particular. We continue to work to enhance the sense of faculty's collective responsibility for the institution's expectations for learning and student attainment and to address their needs for support in the assessment of learning.

Understandably, as a young university, initially Touro prepared for **programmatic**-level accreditation processes. These efforts were rewarded with accreditation of all of the health care programs at both institutions. Individual programs assessed and examined data on student learning and used the analysis to revise curriculum and/or enhance pedagogy. As the university completed the CPR Report in the summer of 2008 and considered the report of the visiting team that fall, we realized that we needed to attend further to the identification and assessment of **institutional** learning outcomes.

### Focus on Institutional Learning Outcomes

The CPR team's report recognized the institution-wide conversations that had occurred but made clear that we did not have learning outcomes in evidence at the institutional level. Following the CPR team's visit, the WASC Executive Team pulled fourteen learning outcomes from the strategic plans from TUC and TUN and shared those outcomes for discussion among members of the WASC Steering Committee, a group comprised of individuals from both institutions. A lively email discussion ensued, and the information was consolidated into seven learning outcomes that were shared with faculty on both campuses for input. They were further refined prior to our WASC Executive Team's (WET) participation in the January 2009 WASC Retreat on Student Learning and Assessment. In February, the WET wrote all program directors and deans to outline the process for curriculum mapping of the student learning outcomes; that process is described in more detail in the following chapter. At a June 2009 meeting of the steering committee, in response to discussion among faculty on both campuses, the group added an eighth student learning outcome and shared the final statements of learning outcomes with faculty and staff on both campuses. We believe that, in keeping with WASC's expectation that our plans for assessment of student learning be sustainable, the recursive nature of this process better refined the outcomes and significantly enhanced the awareness and investment of faculty in the process.

Specifically, the institutional learning outcomes for students state that students will:

- apply knowledge from their discipline in a context reflecting real, complex situations in their profession.
- think critically to make evidence-informed decisions and evaluate conclusions.
- communicate effectively with a variety of audiences.
- act in a professional and ethical manner.
- serve the needs of their communities.
- collaborate with colleagues across disciplines.
- access and evaluate information.
- commit to lifelong learning.

On both campuses, we sponsored a number of faculty development opportunities to help individuals, departments, and/or schools better understand the ways in which institutional accreditation built upon but differed from programmatic accreditation. In response to recommendations from the CPR team, enhancements in institutional research ensured that programs had resources supportive of their efforts to assess student learning and identify performance improvements. New directors of institutional research on each campus worked directly with faculty and program directors to ensure that academic planning was grounded in institutional data about students and meaningful assessment of learning. This is more thoroughly explained in the next chapter, *Learning Assessment for Self Improvement*.

### Enhancement of Institutional Support Services

The CPR report focused in many ways on the impact of rapid growth on the two campuses. Specifically, the campuses were encouraged to ensure that the EER visiting team find a more “fully developed” infrastructure. Specifically, Touro University has invested significantly and strategically in institutional research, student services, and information technology in ways that will support student learning and student success as well as faculty efforts to assess learning and improve programs. Further, we have worked to ensure that the California and Nevada campuses work together to enhance the effectiveness and efficiency of those investments.

*Institutional Research.* One recommendation from the Commission Action letter dated March 12, 2009, specifically addressed the need for the institution to enhance the infrastructure that supports institutional research on both campuses. Specifically the letter recommended that the university prioritize:

- development of an office of institutional research, together with an up-to-date data management system that is responsive to capturing and disseminating measures of educational achievement, while supporting financial, library, institutional, and strategic and academic planning functions.

TUN already had an established an office of institutional research; however, we had a personnel change when the director left. Both campuses hired new directors of institutional research (a replacement position in Nevada and a new position in California) in the spring of 2009. We used the CPR team’s recommendation for California about establishing an office to set priorities for the new directors on both campuses. The directors have worked together to provide leadership for the institutions’ efforts to address strategic planning, develop assessment plans, implement program review, manage institutional data, and ensure continuous improvement.

The directors are members of the Executive Council at their respective campuses; as such they are well-positioned to understand, shape, and respond to institutional efforts to ensure educational effectiveness. Details about the individuals and their responsibilities are included in the next chapter on Learning Assessment for Self-improvement. Their early efforts resulted in a rapid acceleration of conversation among faculty and

administrators about institutional data related to students and meaningful assessment of institutional effectiveness. Their hiring and the concurrent development of student learning outcomes came together to heighten campus awareness of and involvement in improving assessment activities.

*Student Services.* Writers such as Alexander Astin, Vincent Tinto, and Susan Komives have documented the importance of co-curricular learning and supportive services in student achievement and student satisfaction. In keeping with the need for a more fully developed infrastructure, both campuses (in challenging fiscal times) have assessed and enhanced the resources available in student services.

Due to rapid growth on the Nevada campus, new student services positions were created in admissions, bursar, financial aid, and registrar. These positions have enhanced the university's ability to serve students effectively and efficiently. In addition, two new positions will address students' requests for more academic and personal support. We recently received approval to hire an administrative assistant to work with the Director of the Office of Academic Support and Institutional Support (OASIS) to expand services to students. We also will contract in the spring with a psychologist to supplement the services already available to support students whose academic efforts are negatively impacted by personal or psychological struggles.

In California, Student Services assessment revealed that the division was under-staffed in some areas and that some critical services were not being addressed at all. The most critical areas were student health and academic support. As a result, the Student Services budget was increased substantially to cover the build out of an on-campus Student Health Services Clinic. A nurse practitioner with 20 years of experience was hired to manage this service under the direction of a physician. Additionally, a full-time mental health counselor was hired. A national search for a full-time learning specialist is underway.

Students learn a great deal from their campus involvement outside the classroom; California and Nevada both offer opportunities for students to learn through their involvement in student leadership positions, service learning experiences, campus recreational offerings, and student organization membership. Both campuses have staff members with responsibility for student activities and facilities designed to support student engagement. Student government, student organizations, and student activities are supported fiscally as well.

Both campuses have robust programs of student activities and numerous student organizations in direct response to student interest. The planning, promotion, and execution of most events and activities are the responsibility of student clubs and organizations. Student Services provides guidance and logistical support, and faculty advisors play a vital role in organizational development. This institutional guidance has enhanced student participation in and commitment to co-curricular activities.

Inter-college and intra-college athletics has played a prominent role in co-curricular activities on the TUC campus where a senior faculty member has taken on the role of

Athletic Director. In addition, each of the colleges/programs has elected a student representative to work closely with the Athletic Director to plan, promote and execute athletic and recreational activities on the TUC campus and in the local community. Nevada also has a robust, student-led intramural program that engages students from all programs. Inter-campus activities will commence on the TUC campus in February 2010 with a basketball game between the scholar-athletes of TUC and TUN. This is planned to be an annual event with the location alternating between campuses.

California and Nevada have experienced an evolution in student governance that corresponds to the growth in programs and student enrollment. The process of change has been closely guided by Student Services through a strong relationship with student leaders. At TUC, there is a single student government association. TUN is in the midst of transition from discipline-specific governance organizations to an institutional Student Senate led by a Council of Presidents from the program organizations.

Students have responded with interest to a more institutionally-focused approach through shared events, intramurals, and service. We believe this approach will enhance engagement in campus life among students at both universities (particularly those in the smaller, newer programs). These efforts also are responsive to the CPR team's recommendation that we support and inform student governance.

Both campuses continue to administer and analyze student surveys designed to enhance services to students outside the classroom. In response to recent surveys, the campuses have improved study rooms and have established after-hours for enrollment services departments. We have enhanced academic support services such as tutoring, counseling, and disability services.

In short, on both campuses, students have considerable involvement in and influence on institutional planning and decisions. This is especially true for those decisions that have the greatest impact on their academic and co-curricular life. Student representatives serve on institutional committees and taskforces, search committees, and advisory groups. For example, students are directly involved in prospective student recruitment activities on both campuses. Each campus has a Student Health Insurance Committee that is responsible for annually reviewing the performance and utilization of the student health insurance plan. They negotiate with our insurance agent and recommend changes to the plan for the subsequent academic year. Their recommendations have a direct impact on the plan coverage and premiums students must pay. Students served on the search committee for the new Provost in California and for the Director of Admissions in Nevada. These are but a few examples of the ways that students have helped shape the future of the institutions.

*Information Technology.* Finally, the university has made significant investment in resources in information technology designed to support faculty and students in the teaching/learning process, to enhance efficiency and effectiveness in student services, and to support strategic communication. In response to data from surveys that the network access was inadequate, the university improved wireless networking and improved

connectivity to the internet. Specifically, the campuses are using Blackboard more broadly not only to support the academic mission of the institution but to enhance the availability of information about student services and student organizations. At TUN, the use of MediaSite—a system that can capture lectures, speakers, orientations, and meetings—enhances both academic preparation and student involvement.

Enhancements at TUN to computer laboratories, classroom technology, campus websites, and survey implementation support the university's commitment to student learning and on-going assessment. We invested resources in training to ensure improved use of the Audience Response System in Nevada, the bridge software for admissions, and the lecture video capture system. In addition, both campuses established advisory committees to enhance responsiveness to student and faculty needs in information technology. The structure for involving faculty and staff is illustrated in Exhibit 17 (IT governance structure at TUN, [IT\\_Governance\\_at\\_TUN.pdf](#)).

Information Technology at TUC has focused resources to build a stronger network infrastructure, support a new phone system, enhance internet access, and build a wireless infrastructure. As a result, most of the campus buildings now have wireless access for students and staff. TUC completely rebuilt the Clinical Skills (OSCE) laboratory in the spring of 2009; this facility, shared by all the healthcare professions programs, will strongly enhance student skills learning. The College of Medicine has a sophisticated recording system that allows them to videotape osteopathic manipulation laboratories as well as a system to record class lectures for students' review. The College of Pharmacy's learning center has strong AV capabilities.

In May of 2008, in response to survey data, both campuses introduced a new student email system and soon thereafter a new employee email and calendar management system. TUN purchased new computers for the students' use in the public areas. Priorities for purchases, training, and upgrades in information technology are influenced by the university's commitment to outcomes; this is evident through the process for planning and priority-setting within information technology.

The Chief Information Officers on the two campuses have heightened collaboration to benefit the universities. They have found ways to share resources and ideas. The CIO from TUN spent a great deal of time this year on the TUC campus providing assistance and advice about several information technology issues. This collaboration is illustrative of our efforts to enhance institutional support services for students, faculty, and staff.

*Student Success.* As described above, the campuses have invested strategically in institutional research, student services, and information technology to enhance learning and student success. The following section of the report provides data that are important measures of student success. For our context, graduation rates and first-time pass rates on licensure exams are important indicators of success and responsive to student expectations.

From 2004-05 until present, 85% of students entering graduate programs at TUN have earned degrees. Table 1 displays the graduation rates for each student cohort, which range from 50% to 100%.

Table 1. TUN Graduation by Cohort

Cohort	2004-05	Graduated	2005-06	Graduated	2006-07	Graduated	2007-08	Graduated	2008-09	Graduated
<b>College of Osteopathic Medicine</b> <i>Doctoral</i>	78	76 (97%)	107	86 (80%)	135	NA	133	NA	137	NA
<b>Physician Assistant</b> <i>Masters</i>	37	34 (92%)	41	35 (85%)	47	42 (89%)	55	NA	56	NA
<b>Nursing</b> <i>Bachelors</i>			9	8 (89%)	31	28 (90%)	47	40 (85%)	84	76 (90%)
<i>Masters</i>			6	3 (50%)	29	28 (97%)	6	5 (83%)	3	0
<i>Doctoral</i>							4	4 (100%)	0	0
<b>Education</b> <i>Masters</i>			16	10* (63%)	26	13* (50%)	18	7*(39%)	129	NA
<b>Occupational Therapy</b> <i>Masters</i>			13	12 (92%)	27	23 (85%)	25	19 (76%)	27	NA

\*Education degrees do not have set cohorts and may take students longer than typical to complete. These numbers may include students still pursuing the degree and do not reflect all withdrawals.

At TUC, graduation rates have ranged from 81.8% to 98.5% over the past 4 years (Table 2). First-to-second and first-to-third retention rates, displayed in Table 3, have also remained consistently high over the past 4 years. As the table shows, no consistent discrepancies in retention rates exist among gender and racial subgroups. Similarly, no consistent discrepancies were found among subgroup graduation rates.

Table 2. TUC Graduation Rates

	2006 Cohort	2007 Cohort	2008 Cohort	2009 Cohort
College of Osteopathic Medicine	<b>94.4%</b>	<b>93.2%</b>	<b>88.1%</b>	<b>98.5%</b>
College of Pharmacy				<b>95.3%</b>
Physician Assistant / Public Health	<b>88.6%</b>	<b>92.0%</b>	<b>90.0%</b>	<b>81.8%</b>

Table 3. TUC Retention Rates

Entering Class		2004	2005	2006	2007	2008
1 <sup>st</sup> – 2 <sup>nd</sup> year retention rate*	# of students	187	254	258	331	312
	All students	98.4%	97.2%	96.1%	91.8%	94.6%
	Male	97.3%	97.6%	98.0%	87.6%	97.2%
	Female	99.1%	97.1%	94.9%	94.0%	92.3%
	White/Asian	99.3%	97.9%	95.5%	91.2%	92.1%
	Other ethnicities	94.6%	95.2%	98.3%	92.9%	96.5%
1 <sup>st</sup> – 3 <sup>rd</sup> year retention rate**	# of students	135	199	220	239	237
	All students	97.0%	98.0%	96.8%	99.2%	
	Male	95.0%	97.1%	97.8%	97.8%	
	Female	98.7%	98.5%	96.1%	99.3%	
	White/Asian	98.1%	98.7%	94.9%	99.0%	
	Other ethnicities	92.6%	95.3%	97.7%	99.3%	

\* Percentage of COM, COP, PA, MPH students enrolled in any term during their 1<sup>st</sup> and 2<sup>nd</sup> years  
 \*\* Percentage of COM and COP students enrolled in any term during their 1<sup>st</sup> and 3<sup>rd</sup> years; does not include students who started in another program.

Graduation, retention, and attrition data reflect a high success rate as compared with institutions of higher learning across the board (TUC and TUN graduation rates would fall in the top 10% of the 5,930 institutions reporting on IPEDS); although, this would be expected for programs with all graduate students. We have had difficulty finding data comparisons for comparable institutions, which makes robust interpretation difficult.

Likewise, we experienced difficulty in calculating our own graduation and retention rates. The varying lengths of our graduate programs, along with inconsistencies in data entry of student entrance years, graduation dates, program enrollment, and inconsistencies in documenting dual-degree students within the student information system made it difficult to obtain clean results at the institutional and programmatic levels. These issues will be resolved as the directors of institutional research work to improve data entry and extraction procedures. Additional graduation and retention data can be examined in the EER Data Tables. (Exhibit 18, EER Data Tables for TUC and TUN, EER\_Data\_Tables.pdf). See also Appendix B for a complete list of EER Data Tables.

In addition to graduation and attrition rates, an inarguably important measure of student success is the passage rates on licensure and certification exams. Tables 4 and 5 show passing rates on licensure and/or certification examinations compared to national rates.

Table 4. Licensure Passage Rates, TUC Programs

Osteopathic Medicine

Exam	2007-08	2008-09	2009-10
COMPLEX 1	TUC: 86.57% USA: 89.99%	TUC: 88.15% USA: 89.64%	TUC: 85.70% USA: 90.15%
COMPLEX 2	TUC: 83.59% USA: 90.61%	TUC: 92.42% USA: 91.99%	TUC: 77.88% USA: 84.60%
COMPLEX 3	TUC: 89.82% (reported for 2007-09) USA: 91.10%		TUC: 87.72% USA: 91.26%

TUC: First-time pass rate for TUC students  
 USA: National first-time pass rate

Pharmacy

Exam	Class of 2009
NAPLEX	TUC: 97.9% USA: 94.6%

TUC: Pass rate for TUC graduates applying for licensure in CA (n=47)  
 USA: National pass rate from 2004-2008  
 (source: nabp.net/ftpfiles/bulletins/NaplexSPR.pdf)

### Physician Assistant Studies/Public Health

Exam	2006	2007	2008
PANCE	TUC: 77% USA: 92%	TUC: 95% USA: 93%	TUC: 100% USA: 94%

TUC: Pass rate for TUC students  
USA: National pass rate

### Education

Exam	Summer 07	Fall 07	Spring 08	Fall 08
TPA: Subject-Specific Pedagogy	87%	79%	87%	100%
TPA: Designing Instruction			89%	82%
TPA: Assessing Learning			77%	67%
TPA: Culminating Teaching Experience			68%	82%

Table 5. Licensure Passage Rates, TUN Programs

### Osteopathic Medicine

Exam	2007-08	2008-09	2009-10
COMLEX 1	TUN: 88.17% USA: 89.99%	TUN: 81.2% USA: 89.64%	TUN: 93.04% USA: 90.15%
COMLEX 2	TUN: 83.59% USA: 90.61%	TUN: 78.26% USA: 91.99%	TUN: 71.25%* USA: 84.60%
COMLEX 3	TUN: 82.61% (reported for 2007-09) USA: 91.10%		TUN: 85.71% USA: 91.26%

TUN: First-time pass rate for TUN students  
USA: National first-time pass rate

\*Not all students have taken all parts of the COMLEX

### Physician Assistant Studies

Exam	2007	2008a	2008b
PANCE	TUN: 91% USA: 92%	TUN: 85% USA: 93%	TUN: 84% USA: 93%

TUN: Pass rate for TUN students  
USA: National pass rate

### Nursing

Exam	Class of 2009
	Met 80% first-time NV standard

### Occupational Therapy

Exam	2007 Cohort	2008 Cohort	2009 Cohort
NBCOT	57% passed on 1 <sup>st</sup> attempt	85% passed on 1 <sup>st</sup> attempt	*94% passed on 1 <sup>st</sup> attempt

\* Not all 2009 Cohort graduates have taken/passed the exam as of this date

As a measure of achievement of the goal of being licensed in a profession, success rates on licensure and certification exams speak for themselves without much analysis necessary to convert them into evidence of program effectiveness. When licensure and certification exams are used to document the effectiveness of the programs' reaching their mission and learning outcome goals they have the advantage of being an assessment benchmarked against a national cohort, but the disadvantages are that, generally, these exams are not designed to reflect degree of mastery, but rather to screen for below threshold performance. In addition, although they have expanded the range of domains tested, they still do not tend to strongly assess reasoning and non cognitive competency outcomes important to the colleges.

Below national average performances on licensure exams are a major concern and have been the focus of efforts in the programs to address possible pedagogical and curricular problems that may have contributed to these results. Nonetheless, these levels of success on the licensure exams reflect reasonable levels of achievement for the programs and the university in general and allow most students to successfully enter their chosen professions. Faculty members continue to explore ways to enhance the pass rates for these examinations through curricular and academic support efforts.

*Campus Climate.* Campus climate is indicated, in part, by the commitment of the employees to the organization. Of the 208 full time faculty and staff currently employed by Touro University California, 24 (11.5%) have been with the organization since the institution moved to Mare Island in 1999. On the Touro University Nevada campus 31 (22%) of the 142 full time faculty and staff have been a part of the organization since the doors opened in 2004.

In evaluating student, faculty, and staff perceptions of the campus climate, both campuses have administered student, graduating student, alumni, and faculty/staff surveys in each of the past two years. Results from the surveys, highlighted throughout our CPR and EER documents, show that student, faculty, and staff satisfaction is generally higher at TUN than at TUC. After several years of conducting student satisfaction surveys and graduating student surveys, we have implemented numerous changes based on feedback from students. Some of these changes include: revising hours for student services staff (TUC and TUN), increasing the amount of parking around campus (TUN), enhancing academic support services, and improving technology on campus (TUC and TUN).

Student pride is an important part of our institutional identity. The recommendations from graduates to potential students are as powerful as any website or printed brochure. From 2008-2009, the percentage of TUC students who would choose TUC if they were starting over again declined slightly from 78.1% in 2008 to 72.7% in 2009. The percentage of students who would recommend TUC to a friend or sibling declined from 73.2% to 65.9%. At TUN, the percentage of students who would choose TUN if they were starting over was only 62% in 2008. In 2009, that percentage increased by 8% to 70% of the respondents. Based on comments from the item, we will strive to increase the percentage of respondents that would choose Touro if starting their academic experience over. In 2009, many of the comments focused on clinical education concerns

(TUC and TUN) and dislike of the mandatory attendance policy for DO students (TUN). Both issues have been or continue to be addressed to improve the overall learning experience for students.

Supporting this general, albeit less than ideal, level of satisfaction with the campus climate, the TUC College of Education found that 73% of students and alumni responding to their surveys agreed that Touro University is an inviting and supportive learning environment for all students, regardless of race, ethnicity, gender, or sexual orientation.

Further support comes from responses to a 2009 Graduating Pharmacy Student Survey conducted by the American Association of Colleges of Pharmacy (AACP), showing that 81.3% of TU Pharmacy students would choose the same college/school again if they were starting over. This compares favorably to 79.2% of pharmacy students from 33 other institutions who report they would choose to attend the same college/school again.

One reassuring finding is that students tend to be more satisfied with their specific programs than with the university as a whole. For example, when compared to institutional survey results, results from the College of Education surveys indicate students are more satisfied with the climate and services of their college than they are with the overall institution. Likewise, responses to the AACP survey show the vast majority of pharmacy students have favorable perceptions of the pharmacy program.

One obstacle in generalizing these results and using them to make improvements is the extremely low response rate we obtained from the 2009 survey administrations. To ensure we receive accurate and useful information with which to improve the campus climate, both campuses have taken steps to improve existing institutional surveys and find additional sources of data. Working with the Executive Council, the Director of Institutional Research at TUN revised the institutional surveys (Exhibit 19, New Student Surveys, TUN\_New\_Surveys.pdf) to improve clarity, focus, and alignment with institutional goals. The new Graduating Student Survey was deployed for the first time at TUN in December 2009. At TUC, the Director of Institutional Research and Associate Dean of Student Services are working to develop short, on-demand surveys that can be administered to students immediately after interacting with co-curricular offices. Furthermore, we are investigating the use of focus groups, different modes of survey administration, and more direct measures of student satisfaction. These revised methods hopefully will yield results useful for monitoring campus climate.

### Conclusion

The CPR report reminds us that in the Educational Effectiveness Report the campuses are expected to “provide systemic and systematic evidence that demonstrates that its learning objectives are being met; that planning and resources are dedicated to continuous improvement of students’ educational experience; and that the institution as a whole is truly engaged, as a learning community, in collective reflection on how best to continually refine and improve its effectiveness as the institution of higher education it has set out to become.” To that end, student support services on both campuses have

considered how the area contributes to student learning outside the classroom and how, specifically, those services relate to the student learning outcomes. Examples of planning in student services that supports the student learning outcomes can be found in Exhibit 20 (Student Services Reports, TUC and TUN, Student\_Services\_Supporting\_SLOs.pdf).

Our efforts, particularly over the past year, have been supported by an institutional commitment to outcomes best demonstrated through an investment in people, facilities, and infrastructure. We have worked to ensure that the preparation for the Educational Effectiveness Review is highly participatory and transparent. In the process, we have begun to shift the focus of conversation and planning about assessment of learning from program-centered to institutionally-focused. We believe that our commitment to outcomes is evident in the activities of the past year and will be informed by the visit from the EER team.

### **Chapter 3: Learning Assessment for Self Improvement**

In selecting this theme, we acknowledged and wished to embrace the concept that an institution is always a work in progress and that progress is maximized by the application of a process. This process goes by many names and has been described for various settings including academia and the business world. For sake of simplicity we will refer to it by one of its common names, the continuous quality improvement (CQI) cycle, that consists of identification of the problem or goal, selection of the plan for solving the problem, implementation of the plan, data collection and analysis relative to the original goal, adjustment of the plan, etc., in a continuous cycle targeted toward improved outcomes.

#### **Institutional Research: Data Collection, Management and Analysis**

For any institution, fundamental to implementation of a quality improvement approach is a robust strategic planning process and an infrastructure that includes adequate data collection and analysis systems and resources. For Touro University these requirements have been focal points of our accreditation discussions, identified through our own self-study, and emphasized by our reviewers. For our CPR report we identified these as areas of weakness and great concern, citing several WASC Criteria for Review (CFR's) where we felt our university fell short of adequacy. While admittedly our report relied heavily on information derived from surveys, annual surveys conducted over a three-year period demonstrated clearly that faculty and staff were not and still are not confident of the adequacy of our data systems, data collection and review capacity or processes, or utilization of data to inform and support overall university planning activities. The centralized data management system maintained by Touro College for the Touro system, Jenzabar, was cited as powerful but not user-friendly. The limited number of decision-makers given access to the system, the inadequate training provided to those who are granted access, and the difficulty of extracting data from the system all serve as obstacles in the development of an effective institutional data collection and reporting system. In working around these obstacles to fulfill their own needs, programs and offices have

developed shadow databases and data silos that, by definition, are not shared and not as useful as they might be to the community of stakeholders.

On the other hand, individual programs, driven by their need to meet the accreditation standards of their individual professional program accrediting organizations, are in most cases much more proficient in data collection. Utilizing their own methods (often, as stated above, in silos) programs have done reasonably well in collecting and analyzing required outcomes data and utilizing them to improve their programs. Undoubtedly, the shortcomings of the university-wide data collection systems and processes have necessitated duplication of effort by these programs; however, they all have been successful in obtaining and maintaining professional level accreditation, and there are numerous examples of CQI implementation. Some of these are described later in this section as we address questions that were posed in the Institutional Proposal. Nevertheless, the CPR site team noted the need for a culture of evidence to be developed as an attribute of the university and not just an attribute of individual programs.

One recommendation of the WASC Commission was that TU develop an office of institutional research (IR) as well as an up-to-date management system to support data collection and dissemination to meet the educational needs and other functions of the university. Immediately after the site visit in November 2008, TUC began a national search to address this recommendation, and a change was made in the TUN directorship. A new position was approved for the TUC campus and, as a result of the search, Dr. Bradley Thiessen was hired as Director of IR and Strategic Planning for TUC; he began in this position part-time in March and full time in May 2009. Dr. Thiessen's Ph.D. is in Educational Measurement and Statistics. In his previous position he was University Assessment Coordinator at St. Ambrose University in Davenport, IA (Exhibit 21, Dr. Thiessen CV, Thiessen\_CV.pdf). Dr. Crissie Grove was hired as Director of IR for TUN and began in this position in June 2009. Dr. Grove's Ph.D. is in Educational Psychology with a major in Learning and Cognition and a minor in Educational Leadership and Measurement and Statistics. Prior to coming to TUN, Dr. Grove was a postdoctoral fellow at the Association for Institutional Research/National Center for Education Statistics, Tallahassee, FL/Washington, D.C (Exhibit 22, Dr. Grove CV, Grove\_CV.pdf).

Additional IR staffing includes a full-time administrative assistant on each campus. The assistant at TUN staffed the previous IR Director's office and the assistant at TUC was hired in September 2009 to fill a new position. Thus, the combined staffing in IR for TUN and TUC has increased from 2 FTE to 4 FTE since March 2009. Additionally, a database administrator position was approved this year for TUC. This position, which is assigned to the IT Department, will assist to more fully develop our institutional research capacity.

Our new IR directors have promptly and fully engaged in establishing the kind of IR effort we wish to have, yet we recognize that some of these efforts will take many months, if not years, to fully develop. Thus, many of our newer initiatives have not been tested through a complete cycle of planning, implementation, evaluation, and follow-up.

## Evolution of a University: Development and Assessment of Institutional Student Learning Outcomes

Shortly after the CPR visit and in response to the site team's comments regarding TU's need to evolve from a collection of programs to a true cohesive university, we began to formulate university-wide graduate student learning outcomes (SLOs), as described and listed in Chapter 2. Our WASC Executive Team (WET) attended the WASC-sponsored Retreat on Student Learning and Assessment, Level 1, in January 2009 and used the opportunity to strategize further about how to implement assessment of the SLOs. Of particular importance for us was a session on curriculum alignment matrices. Following the conference we requested that each program at TUC and TUN develop a curriculum matrix aligning each course in the program with the newly developed SLOs. It should be noted that the SLOs continued to be modified beyond this point in time, but this did not significantly affect or diminish the quality of the information that was obtained through this project. Each course was designated as presenting the SLO at either an introductory, developmental, or mastery level (or none of these). At least some programs used the criterion that, if the SLO was not assessed, it was not considered to have been addressed in that course. Additionally, some programs used the opportunity to meet with course directors to document the assessments that each felt responded best to each SLO. Some programs also had brainstorming sessions with their faculty to list all the assessments that were used or might be developed to address each SLO, exclusive of the course within which this might occur. Although there was certainly variability in programmatic approaches, the exercise was extremely useful in identifying assessments that were in place, providing some early window of insight into how robust those assessments were and, very importantly, in identifying gaps in assessments measures (Exhibit 23 and Exhibit 24, Curriculum Alignment Matrices, [TUC\\_Alignment\\_Matrices.pdf](#), [TUN\\_Alignment\\_Matrices.pdf](#)).

Based upon recommendation from the facilitators of the WASC Retreat in January 2009, we decided that we should develop a three-to-five year timetable for assessing all the SLOs. Programs were, therefore, asked to prioritize the SLOs based on what they had learned in creating the alignment matrices. They were asked which SLOs they felt should be assessed first, either because they were viewed as most important or because more robust data could be obtained for these SLOs in the first year of data collection, thus allowing time to develop better measures for more difficult to assess SLOs. Based on input from all programs on both campuses, we selected two SLOs (SLO 1 and SLO 2) to be assessed deeply in 2009-2010. They were attainment of basic knowledge of the discipline and demonstration of critical thinking skills.

As our IR Directors were hired, both the SLO selection process and the alignment matrix project were nearing completion. The alignment reports in particular were a very useful tool to help us orient both directors to the progress achieved in SLO development and to the status of our programmatic assessments. Drs. Thiessen and Grove also were asked to join the WET.

As one of his first projects Dr. Thiessen began to develop a draft assessment plan for addressing the SLOs across the university, even as the SLOs themselves were still being discussed and modified. This plan was expanded to include recommendations for a common scoring scale, the number and frequency of measurements to be included, a guide to evaluating the quality of assessments, an assessment calendar, and other information. All of this was shared and discussed, first among the WET members and then with the Steering Committee, and modified several times. Dr. Thiessen also began a process of meeting with programs, both academic and co-curricular, on the TUC campus to assist them in selecting appropriate assessments for the SLOs.

In June 2009 there was a meeting of the entire bi-campus Steering Committee at TUC. Dr. Grove had just begun her TUN employment that week and was able to attend. There was further discussion of the SLOs, with the result that the original list of seven was expanded to eight. Dr. Thiessen also presented his draft assessment plan. By the end of June, a final list of SLOs and a final assessment plan with instructions and deadlines were agreed upon and distributed to all the programs (Exhibit 12, Assessment Plan, TU\_Assessment\_Plan.pdf). Since that time, directors of IR on both campuses have been consulting with programs to review collected data, promote reporting consistency, review interpretations and help with planning, as needed.

For 2009-2010 each program is collecting data to measure achievement by graduates of TU with regard to SLO 1 and SLO 2, in addition to programmatic data already collected. For the SLOs, the plan calls for, ideally, at least two measurements at each of three stages of a student's progression through the program: baseline, developmental, and mastery, plus one alumni measure. Programs are asked to address the quality of the measures chosen, logistics of data collection, and how the data have been or will be used.

Data are presented according to a four (4) point scoring scale, which will facilitate comparison of student achievement across programs, as follows: a score of one (1) is given to performance that is below expectations; two (2) is approaching expectations; three (3) meets expectations, and four (4) exceeds expectations. Each program must define the criteria used to place students in these categories.

While the focus in the first year is on data collection for just two of the SLOs, programs were asked to begin to select or plan for measurements of the remaining six SLOs even in this first year. Undoubtedly, we will learn much in this first year that should improve our efficiency and effectiveness as we move to the second year of the process and beyond. We plan to adopt two new outcomes per year until all have been assessed and then revisit them at planned intervals.

The reporting of data will become a part of TU's "annual report" process (which has sometimes been only biannual). However, with the new focus on data collection and data quality, the process is back on track with an annual report due each fall. Programs will report progress in achieving programmatic goals set the previous year, and will provide data, with analysis, on achievement of university-wide graduate student learning outcomes that were assigned for the year. The annual report will also include barriers to

achievement of goals and setting of goals for the next year. The report format will be flexible enough to allow programs to report on any other aspects of their progress, productivity, or planning that assists them in meeting any programmatic accreditation or other needs.

By the end of this academic year, our institutional assessment plan requires each program to select seven assessments of each of the first two SLOs, provide evidence as to the quality of each assessment, and provide student achievement data from each assessment. The following table (Table 6) displays the progress made by each program as of December 2009:

Table 6. Summary Table: Student Learning Outcomes

TUC Programs	Assessments chosen for SLOs 1-2	Evidence of quality provided for assessments	Student achievement data provided
Osteopathic Medicine	14/14	14/14	14/14
Pharmacy	14/14	14/14	9/14
MSPAS/MPH	14/14	14/14	14/14
Public Health	14/14	14/14	9/14
Education	14/14	14/14	11/14

TUN Programs	Assessments chosen for SLOs 1-2	Evidence of quality provided for assessments	Student achievement data provided
Osteopathic Medicine	14/14	14/14	14/14
Nursing	14/14	14/14	8/14
Occupational Therapy	14/14	14/14	8/14
Physician Assistant	14/14	14/14	14/14
Education	14/14	14/14	14/14
Physical Therapy	14/14	14/14	4/14

14/14 represents a program that has provided complete information from all assessments of both SLOs (2 baseline + 2 developmental + 2 mastery + 1 alumni assessment) x 2 SLOs = 14

Evidence of university progress in assessing and analyzing graduates' achievement of SLOs 1 and 2 is shown in Exhibit 25 and Exhibit 26, which are examples of programmatic reports (SLO1 and SLO2 reports from Physician Assistant programs, TUC\_SLO\_PA.pdf, TUN\_SLO\_PA.pdf). Ultimately we hope to be able to analyze the "growth" in each TU program's assessment results (in terms of student achievement among programs and from the baseline to developmental to mastery levels) and then combine those analyses into a single institutional meta-analysis. This will allow us to make inferences about the institution, but we feel that this will require at least two years of assessment data from each program. As noted above, the assessment of achievement of SLOs 1 and 2 is a project for the entire 2009-2010 year. However, programs have accelerated data gathering as much as possible in order to demonstrate the importance that this project has for the university, and up-to-date reports from all programs will be provided to the WASC site team at the March 2010 EER visit.

Additionally, some programs also have begun to identify assessments for the remaining SLOs, and a progress report will be available for the site team. As assessments are administered and data are collected throughout the academic year, we expect every program will successfully complete this first round of institutional assessment, reflection upon the outcomes, and implementation of change as needed.

As noted above, in our CPR report we described the data management system, Jenzabar, as cumbersome and, therefore, an obstacle to our progress in collecting, analyzing, and reporting critical student data. Consequently, the WASC Commission also expressed concern about the data management system. This past summer, great progress was made in facilitating access to and, therefore, improving the usefulness of, data from the Jenzabar student information system. First, the directors of institutional research developed documentation for the system, listing every library, file, field, value, and code currently used by TUC and TUN. This facilitated the development of standard queries within the system, which are stored in a library shared across both campuses. This documentation also allowed for the development of more user-friendly, interactive graphical interfaces for writing queries and downloading data via ODBC (Open Data Base Connectivity) connections to Jenzabar. These interfaces, Excel and Tableau workbooks developed by the directors of institutional research, allow end-users to automatically generate reports and update data from Jenzabar via buttons and drop-down menus. Currently, these workbooks allow end-users to download, view, and report data concerning student demographics, enrollment, retention, and completion; course offerings, enrollment, instructors, and grade distributions; and graduate demographics, GPAs, and degree information disaggregated by campus, program, year, and student demographic information. In addition to allowing for immediate access to data for analysis, the development of these workbooks will allow academic programs and co-curricular offices to share data electronically, greatly reducing our practice of manually entering data from static printed reports.

This progress has increased awareness of, and interest in, using Jenzabar to enter, store, and access programmatic data. To capitalize on this interest, we have requested that Touro College grant read-only access to Jenzabar for all Deans, Program Directors, and other users needing immediate access to student information. Once access is granted, users will be trained to use the graphical interfaces, use the documentation, and write/modify simple queries within the system. This increased capability in developing ad-hoc reports should feed into an increased use of the system for storing programmatic data.

#### Development of Institutional Program Review

Another area of focus for TU, which underscored the observation by the CPR site team and the Commission that we are still immature as a university, was the lack of an institutional program review process. As TU has many professional or program-specific accreditation agencies to which it must respond, there is certainly ongoing program review. However this exists essentially within each college as a process of self-study, reporting, and conversation between a given program and the applicable accrediting

body: for example, osteopathic medicine with the Commission on Osteopathic College Accreditation of the American Osteopathic Association; pharmacy with the Accreditation Council for Pharmacy Education; physician assistant studies with the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA); nursing with the Commission on Collegiate Nursing Education, etc. On the one hand, this means that our programs are under rigorous review on a very regular basis; on the other hand, it does not address the need at a university level for a representative group of faculty to periodically review all programs for congruence with the mission of the university and integration within the strategic plan.

In response to this institutional focus, Program Review committees were established and review processes were initiated. The process adopted by each campus (Exhibit 12, Assessment Plan (page 13, Program Reviews), TU\_Assessment\_Plan.pdf) consists of four major components that allow faculty the opportunity to evaluate and enhance the quality of academic programs through a focus on student learning outcomes, evidence-based decisions, and integration with institutional planning. As the first component of the review process, programs submit an external review, including a list of recommendations from the external reviewer. For most programs, these external reviews will be from their accrediting agencies. Programs will also submit any progress they have made in addressing these recommendations. As the second component, programs will submit a self-study. This self-study includes evidence of program effectiveness (student profiles, curriculum/instructional effectiveness, student learning outcomes, and faculty accomplishments); evidence of program viability and sustainability (demand for the program, and resource allocation); a comprehensive reflection on educational effectiveness; and a list of future goals and proposals. The third component of the process is a faculty-driven review of these materials. Working with faculty representatives from each college, each campus has established a Program Review Committee and developed by-laws (Exhibit 8, Bylaws of Program Review Committees of TUN and TUC, TU\_Program\_Review\_Committee\_ByLaws.pdf). The Program Review Committee reviews program materials and develops the fourth component of the process – a *Formal Findings & Recommendations* report. This report is forwarded to the college Dean and Provost to assist in institutional planning and budgeting.

The schedule of program reviews, currently being developed by the program review committees, uses each program's accreditation cycle. This program review process aligns with the fundamental institutional concerns about program accreditation, SLO assessment, program improvements, and strategic planning.

In summary, what has been described thus far includes: implementation of meaningful institutional research with qualified leadership; revitalization of our annual reporting process; a standardized approach to the provision of data on achievement of institutional student learning outcomes; a comprehensive programmatic review process, and a more accessible, user-friendly, and therefore more powerful data management system. These steps and achievements will support strategic planning with more reliable data than we have had in the past and move us toward our goal of being a more effective learning organization.

## Evidence of Improvement through Reflection upon Outcomes

This section reviews some of the questions that were posed in our Institutional Proposal and explains how the above developments help us to address them.

*We asked:* How does the institution foster and demonstrate self-improvement and how is our philosophy of intentional reflection made real to our many constituents? Is our process overt, transparent, consistent, logical, responsive, and proactive? How is collaboration, as defined both within and among various levels within the academy and without, used to broaden the perspective on learning and self-improvement? How are outcomes used for learning and self-improvement?

The process of implementing the changes that have been made and that are still in process, as described above, involves the entire university. Each program and co-curricular unit is aware of its role in supporting the ability of students to achieve university and programmatic learning outcomes. Inter-program collaboration is evident through the work of several standing committees: Executive Councils of TUC and TUN (made up of senior leadership on each campus); Institutional Academic Council (made up of academic leaders of all programs, TUC); subcommittees of the Institutional Academic Council or other groups that work on special interest areas across programs; Faculty Senates of each campus; Research Committees, with representation from each college; Student Government Associations, working across programs and, of course the WASC Steering Committee, to name a few. The WASC accreditation process—where we are headed, what progress we are making, and how we can work together more effectively—is also on the agenda at nearly every major inter-program and intra-program meeting. Self-reflection, self-improvement, and collaboration always have characterized our programs, but there is no question that the emphasis on educational effectiveness that is the hallmark of the current accreditation cycle has more keenly focused our academic community. Our improving ability to centrally collect, analyze, and disseminate reliable data is an essential supporting element as we move forward.

*We asked:* What faculty development activities take place? Are they designed with outcomes, are they mission-directed, and do they provide for self-reflection and improvement?

Faculty development occurs at many levels: individually, through retrospective reviews and annual goal setting as part of the evaluation process; at the departmental or program level through faculty retreats focused on curriculum or other aspects of program quality; through a variety of seminars and workshops offered on campus or available through Webcasts, and through attendance at national conferences or courses. Budget for travel, registration, and other expenses associated with attendance at faculty development conferences is generous. In the past year, faculty have attended conferences that deal with a wide variety of topics that directly and positively impact their teaching, research, administrative and leadership functions. We have assembled a partial list including approximately 40 activities for TUN and another 40 for TUC, attended by individuals,

groups, whole departments, or whole colleges, along with the faculty's comments about the impact of these activities on the various aspects of their work (Exhibit 27, Faculty Development Activities and Outcomes, Faculty\_Development\_Activities.pdf).

*We asked:* Are the processes for advancement and recognition aligned with the institutional mission?

The mission of Touro University is to provide quality educational programs in the fields of health care and education in concert with the Judaic commitment to social justice, intellectual pursuit, and service to humanity. The Faculty Handbooks for TUC and TUN clearly set forth the requirements and processes for advancement (Exhibit 28 and Exhibit 29, Faculty Handbooks, TUC\_Faculty\_Handbook.pdf, TUN\_Faculty\_Handbook.pdf). As a university that is primarily focused on the education of teachers and healthcare professionals, the standards for advancement of faculty give priority to educational contributions and effectiveness, while still giving significant weight to scholarly endeavors, professional development, and service activities. Surveys conducted over the past three years have consistently demonstrated that faculty members feel that appropriate weight is given to each of these elements in promotion considerations.

*We asked:* Is the student selection process consistent with the mission and goals for each program, and are outcomes used to inform the student selection process?

This question is posed at a programmatic level, and each program has evidence of ways in which it is developing or has modified its student selection process based on qualitative or quantitative outcomes data and by comparison with other similar programs nationally. Some programs, including newer ones, are still assessing their original admissions criteria and processes. Other programs have already implemented changes based upon outcomes. Some examples of changes include: requirement of additional prerequisite courses for admission; changes in acceptance dates to maximize ability to accept the most qualified candidates; implementation of candidate scoring rubrics for interviewers and other changes in interviewing forms; higher requirements for grade point average or Medical College Admission Test (MCAT) score to qualify for an interview; inclusion of an on-demand writing sample as part of the campus interview; training of interviewers to improve their ability to assess applicants' communication skills; inclusion of more questions designed to evaluate applicants' critical thinking skills; increased education of applicants about the rigor of the program in order to reduce the number of students taking a leave of absence; addition of questions to better focus on applicants who understand the mission of the program. Whether the impact of these changes has been assessed depends primarily on when the change was implemented, but for some programs data are already available that indicate improved outcomes (Exhibit 30, How Outcomes Are Used to Inform Student Selection, Student\_Selection.pdf).

*We asked:* How does the curriculum encourage development of self-reflection in students? How are the programs using data measuring student achievement to continuously improve the effectiveness of the program? How is the faculty prepared to

develop, measure, and interpret outcomes? How do pedagogy and assessment encourage professionalism and self-motivation for ongoing learning and personal development?

Healthcare education and, to an increasing extent, teacher education are increasingly competency based. As we are accountable to the public through our professional accrediting agencies, programs have largely framed their curricula and assessments around these competencies. While they are stated somewhat differently for each discipline, competencies of self-reflection (also called practice-based learning and improvement), professionalism, communication skills, and collaboration (also called systems-based practice) are some of the competencies that go beyond the traditional requirements that graduates of such programs have basic knowledge of their professions and patient care or student teaching skills. For Touro University each of these competencies also has a counterpart within the recently-selected graduate SLOs. Each program has its own methods of embedding within its curriculum experiences that will develop these competencies and with assessments to demonstrate achievement.

Some examples of curricular approaches to these competencies and use of outcomes data to modify programs include: modification of courses or addition of material to courses in response to preceptor feedback indicating students having difficulty transitioning to clinical thinking; inclusion of more formative assessment throughout the curriculum to better assess students' progression in acquiring the competencies; provision of "report cards" to students each semester to provide them with information about their progress in knowledge, critical thinking, and clinical performance; strengthening the teaching in particular targeted areas where achievement was below expectations, with better integration of basic science and clinical correlates; strategies to emphasize the expectation and need for students on clinical rotations to read and to focus on content rather than just post-rotation exam points; the inclusion of more coursework between clinical experiences to assist students with integration of material; strategies to assist students in selecting and completing appropriate educational research projects; strategies to assist students in refining their decision-making skills; addition of targeted workshops to assist students in completing specific aspects of their program (Exhibit 31, How Outcomes Are Used to Inform Curricular Change, Curricular\_Change.pdf).

The current shifting of focus from purely programmatic to institutional outcomes already has revealed for certain programs that more or better assessments are needed for measuring students' progress in achieving some of the SLOs. This realization provides an encouraging opportunity for development, implementation, and evaluation of new assessments over the next several years.

One recommendation of the WASC Commission that is very much in keeping with the theme of Learning Assessment for Self Improvement is that the university address:

- continued development of the clinical rotation sites, with an emphasis on training of preceptors in the use of assessment strategies aligned with learning outcomes

This recommendation arose particularly out of the observation that our osteopathic medicine programs have a unique challenge, in that clinical training in the third and fourth years is often delivered at sites that are geographically distant from the main campus, whereas most allopathic institutions have affiliated hospitals that are adjacent to or at least near to the college. The situation is exacerbated in the West, where there is relatively less knowledge of the osteopathic profession than in other parts of the country to contrast with a strong allopathic tradition. However, it is a valid recommendation for all our healthcare education programs, as the need to continuously monitor and improve training sites, especially close to our campuses, is an ongoing obligation. Additionally, the training of preceptors in assessment and evaluation of students is a widely recognized challenge for all training programs and especially those that rely largely on volunteer faculty dispersed over many, often remote, training sites.

Comprehensive lists of affiliated sites for programs at TUC and TUN are attached (Exhibit 15 and Exhibit 16, Affiliation Agreement Master Lists for TUC and TUN, [Affiliation\\_Agreements\\_TUC.pdf](#), [Affiliation\\_Agreements\\_TUN.xls](#)). Each program has been asked to identify sites that are new since the WASC CPR visit, to document whether there has been a net increase, and to document preceptor development activities and programs that are ongoing, recent, or planned for the near future (Exhibit 32, [Development of Clinical Rotation Sites and Faculty Development, Development\\_of\\_Clinical\\_Rotation\\_Sites.pdf](#)).

One indisputable characteristic of clinical training is that sites are constantly in flux; as new sites are opened, others disappear because a preceptor retires, a hospital or clinic negotiates a better financial arrangement with another educational institution, or a site or individual preceptor ceases to train students altogether. Thus, site development is a time-intensive, on-going challenge that consumes considerable resources. Nevertheless, all of our programs, whether or not they have lost sites, have produced a net gain in sites and slots over the past year.

Preceptor development is handled in a variety of ways: through provision of preceptor manuals that describe the program and the responsibilities and requirements of preceptors; regular telephone or electronic communication by clinical education coordinators/associate deans with preceptors; WebEx seminars linking the campus to rotation sites and, primarily, through presentations on campus or, more often, at the clinical rotation sites. It has historically been difficult for the TUC campus to successfully attract preceptors to campus for training, in part because of distances to be traveled and restrictions around holding programs during the Sabbath. TUN has been much more successful in this regard, as there is a greater concentration of training sites in the immediate area of the campus. Both the School of Nursing and the College of Osteopathic Medicine hold formal preceptor training sessions on campus at least annually. The School of Physician Assistant studies at TUN also conducts annual preceptor development.

Presentations at the rotation sites occur when a site is first being solicited as well as on a periodic basis, once a site is established. For example, programs conduct evaluative site

visits which afford an excellent opportunity for informal one-on-one faculty development. There also are more formal programs offered on a regular basis at certain sites; Kaiser Permanente is an outstanding example of such a program, as it conducts a yearly program for all preceptors in Northern California and regularly invites the TUC College of Pharmacy, for which Kaiser is a major training site, to participate.

Some programs have more structured preceptor programs than others. At TUC, the College of Pharmacy has made great progress, in part because of very strict requirements by the Accreditation Council of Pharmacy Education (ACPE) for formal professional accreditation. The College of Health Sciences Joint MSPAS/MPH program has a fairly well established schedule of site visitation that includes opportunities for faculty development. The stand-alone Master of Public Health program, which is quite new, has provided faculty development in concert with the establishment of its field study sites. The College of Osteopathic Medicine at TUC has focused its attention recently on identification of new sites, which includes limited faculty development as part of introductory presentations. However, the need for site development for third and fourth year osteopathic medical students and, very importantly, for postgraduate students, coupled with considerable turnover in the clinical education department of this college limited the amount of faculty development that was provided. As the department is now being restructured, greater attention will be placed on this critical area.

### Conclusion

Although there is still a great deal to be done, in the short time since the CPR visit Touro University has made significant strides in establishing a credible institutional research effort. There have been new IR directors hired on both campuses; breakthrough progress has been made in accessing existing data from the Touro student data management system; graduate student learning outcomes have been formalized; a university plan for assessment and reporting has been developed; and data are being collected and analyzed. The assessment of student learning outcomes will continue over the next several years, and the regular application of data to further improvement of programmatic and university outcomes, including in the areas of admissions, curriculum development, and faculty development, will become a part of the university culture.

### **Chapter 4: Pathway to Educational Effectiveness**

When we set about to write our Institutional Proposal, there was a general aspiration that we would be further along in the process of educational effectiveness review at this point. We expected to have several years of outcomes available as evidence for engaged faculty and administration discussions, with changes and follow up available for at least one cycle of improvement. Moving from a consortium of programs to a university has been more work and has taken longer than we had anticipated. Faculty and administrators needed to work through a paradigm shift to acknowledge the differences between assessment at the program level and a new level of assessment at the university level.

The process from the beginning of the proposal writing to the preparation of the educational effectiveness self study has been dynamic and stimulated dialogue and change. Some controversies along the way involved choices of aspirational versus more easily attainable goals, choosing assessments that were more difficult but more accurate for the outcome, and the degree of university involvement in the program review process. We came to realize a particular challenge. That challenge was that the sequential transformation generated by the process itself had made everything else a moving target. From the beginning of the proposal generation, we have been steadily creating the infrastructure, attitudes and expectations of a university rather than a consortium of programs. The programs themselves have evolved but so has an appreciation of the importance of a central educational quality program based in the university. While one of the stimuli for this has been the requirement from WASC that we demonstrate this capacity (which has helped with generating support from our parent institution), other factors also have led to this. The experience of having effective institutional researchers on our campuses has opened our eyes to how helpful the university can be to the programs in fulfilling their programmatic accreditation tasks and following the educational effectiveness of their colleges. The WASC process, the hiring of IR staff, and the initiation of IR activities on both campuses have helped greatly in this transition.

We have accomplished the generation of, and assessment planning for, student learning outcomes across the university. Data for the first two outcomes have been gathered and analyzed for evidence of educational effectiveness, and this analysis has contributed to evidence-based change of educational process, at an early developmental level. In the following sections of this chapter, we will discuss what we have learned, sustainability of the educational effectiveness program, and compare our current status with regard to the Standards and Criteria for Review with that at the beginning of the WASC re-accreditation process.

### What We Have Learned From the Process of the Proposal and Capacity Reviews

The accreditation process could be described partially as a collective communication about what we already knew, or at least expected, regarding our own programs. We learned more about each other and came to see how that fit into the larger picture of the two campus university. Many of the themes were universal, although to different degrees in various programs and across the two campuses. Most of our strengths were related to our newness and the relatively cohesive, interactive, and innovative qualities of our faculties. Many of the challenges arose also from our newness and relative inexperience and from the differences in perspective between the two campuses and with our parent institution, Touro College. As most of our programs are graduate level, professional programs, much of the work of program review has been done in the form of self-studies for programmatic accreditations. What had been lacking, however, was university-level responsibility to set outcomes and perform program reviews to meet the university mission and strategic goals. We can perhaps most accurately ascribe this to the university previously having functioned as a set of quasi-autonomous programs. Following the WASC Capacity and Preparatory review, the hiring of institutional research personnel on both campuses and the placement of a COO/Provost on the

California campus reinforced the infrastructure at a university level with an academic as well as the pre-existing student service and financial components.

As alluded to in chapter one, one other thing we learned from the proposal and CPR self study processes was that there has been a considerable discrepancy in attitudes between the Nevada and California campuses. Although several interpretations can be made, it seems likely that a major difference has been the difference between the pace and support for facilities and program development on the two campuses. In California there has been a perception of difficulty in finding agreement with Touro College on quality improvement-directed project development, associated with what could be described as a culture of frustration on that campus. This frustration has not been experienced to the same degree in Nevada. The perception in California may be rooted in the problems experienced with migrating the school in its early stages to the Mare Island campus and to the obstacles for facilities development on the site. Current senior leadership has noted that the situation has improved since we were able to identify accurately and communicate to New York the needs of the programs on the California campus.

#### Sustainability of the Educational Effectiveness Process at Touro University

With the hiring of institutional researchers and support staff, including a soon-to-be hired database administrator on the TUC campus, the university now has an ongoing resource to help with program review and outcome data for analysis by the university and the programs. Annual reports and program reviews will evaluate the efforts of programs to assess institutional outcomes. Our program review process is based on a program review committee structure based in the faculty with participation of the institutional researcher at each campus. A detailed exposition on the functioning of this process is available in Exhibit 12 (Assessment Plan (page 13, Program Reviews), TU\_Assessment\_Plan.pdf). External reviews will be done as part of the cycle of program accreditation, so the self study process for one would serve the other. Additional information will be solicited reflecting the programmatic goals important to the university. Student learning outcomes and other aspects of the ongoing educational effectiveness review of the programs will be part of an annual report. Other elements of sustainability involve a planned process of assessment preparation and review prior to the implementation of each set of student learning outcomes. A robust cycle of educational effectiveness requires an institutional level of data analysis for evidence on areas of need and success and to evaluate whether the assessments appear to be reliable and valid enough to meet the university's mission. We feel that, with the hiring of a database administrator at TUC, we will probably have sufficient resources to sustain the educational effectiveness review process. The provosts are committed to providing the necessary resources to sustain the process of educational effectiveness review and improvement. Involvement of faculty and administration across the university also is an essential element to the sustainability of the process.

#### A Comparison of Self Review Under the Standards Done in 2006 with a Repeat Review in 2009

The WASC Executive Team performed a review of our own institution, Touro University, in 2006 and repeated the review in 2009. Although the composition of the

team has changed, we have done a direct comparison of our ratings for the CFRs between these two reviews, and attempted to interpret observed changes by tying them to changes that have taken place in the institution that might account for the difference in our responses. Our method on both occasions was for all individual members to perform their own ratings, and then to “average” them as a composite score. When the rating was performed for the second time, we did not consult the original ratings. This allowed for candid, “snapshot” responses minimizing an interpretive agenda at the time of the review itself. The comparison then became a reflective process for the team as the changes were considered and the input analyzed collectively.

In the following paragraphs, we will comment only on those CFRs for which there was a change between the two reviews. The complete self-assessment under the standards is included as Appendix C.

In several instances, we discovered change that we believe to be positive between the two reviews. We compared those CFRs that showed an increase in institutional development. CFRs that showed this trend were **1.3, 2.1, 2.5, 3.5, 3.8, 4.5 and 4.6**. **CFR 1.3** (On leadership) improved from 3A to 2B, probably reflective of hiring of more leadership positions and adoption of a policy requiring an open process of recruitment for senior leadership. **CFR 2.1** (staffing and appropriateness of programs), from 2A to 1C, reflects the achievement of accreditation for all the programs. **CFR 2.5** (actively involving and challenging students), from 2A to 1C, reflects maturation of the programs in the area of challenging students and assessing them. **CFR 3.5** (institutional financial stability), from 3A to 2B, reflects a perception of more financial stability in the system. **CFR 3.8** (clarity of organizational processes), from 3A to 2C, probably represents the formulation of a number of policies and clarification of the organization chart that has taken place in the last three years. **CFR 4.5** (institutional research capacity), from 3A to 2A, reflects the hiring of institutional research directors and additional support staff. **CFR 4.6** (leadership committed to improvement), from 2A to 1B, again is probably reflective of the hiring of more leadership positions, including a Provost on the TUC campus, and the on-going commitment to the processes of inquiry, assessment, and quality improvement.

The team’s review reflected an increased sense of priority in some areas. A change in priority status alone is more difficult to interpret as positive or negative change *per se*, in that a higher priority rating may reflect an increased importance in the mission or an increased emphasis because of a perceived deficiency. These included **CFRs 1.2, 2.4, 2.10, 4.1 and 4.8**. **CFR 1.2** (educational objectives and institutional indicators of achievement) changed from 2B to 2A. This change probably reflects the increased focus on measuring student achievement at the institutional level and not only at the program and course levels. Although the system is in place, we are only beginning to gather data. **CFR 2.4** (institution expectations of learning achievement) changed from 2B to 2A. This change also points to the emphasis now given to student learning outcomes on an institutional level and the university-wide dialogue that has ensued on assessment and expectations. **CFR 2.10** (collecting student data on achievement, satisfaction and campus climate) increased in priority from 2C to 2A, reflecting the greatly increased emphasis on institutional research regarding co-curriculum and student services. **CFR 4.1** (on

engaging multiple constituencies including faculty in planning processes) increased from 2B to 2A. This follows the renewed focus on pro-active inclusion of all stakeholders in strategic planning currently underway. **CFR 4.8** (involvement of appropriate stakeholders in assessment) increased from 3B to 3A, which indicates, perhaps, that while we still have a long way to go in this area, we now have placed a greater priority on it.

A decrease in level of priority without a change in perceived level of development is more problematic to interpret, requiring a fair amount of discussion to get at the perception behind the individual scores. In every case, we arrived at the conclusion that the decrease in priority reflected an improvement. **CFRs 2.12, 3.1, 3.2, 3.3, 3.7 and 4.7** all showed this category of change. **CFR 2.12** (students receiving information and advising on programs) went from 2A to 2B. On discussion, we felt this change reflected improved editing of handbooks and other documents and increased organization in the advising processes in the programs. **CFR 3.1** (on sufficient and qualified personnel) went from 2A to 2B. This may be explained because a number of important hires of well qualified people took place in the last few years. **CFRs 3.2 and 3.3** (regarding aspects of adequacy in staffing and personnel hiring and evaluation processes) both went from 2A to 2B, likewise reflecting positive developments in these areas, while not bumping it up a category in institutional level of development. **CFR 3.7** (on institutional technology services) also went from 2A to 2B. Following an independent consultant's report, both campuses have placed major focus placed on making the institutional technology departments more responsive and efficient in meeting the needs of the programs. **CFR 4.7** (faculty engaged in inquiry into teaching and learning) went from 2A to 2B. While, on an ongoing basis, the faculty in the programs has been engaged on these issues, a recent change was taking this engagement to an institutional level, and this improvement was reflected in the decreased priority from 2A to 2B.

The last category of change reflected a decrease in the perceived level of the institution's development in the CFRs, with or without change in prioritization. **CFRs 2.8, 2.9, 2.11, 3.11 and 4.3** fall into this category. **CFR 2.8** (active valuing of scholarship innovation and improvement) and **CFR 2.9** (recognition of appropriate linkages between scholarship, service and teaching) both went from 1C to 2B. The group felt this was due to the increased emphasis, as the university matures, of the importance of research and innovation. **CFR 2.11** (development and assessment of co-curricular programs) went from 1C to 2B. In this case, the team felt there was a significant effect from the need to improve response rates on our surveys and also an increased emphasis on importance. **CFR 3.11** (institutional exercise of effective academic leadership to maintain and improve academic quality) went from 1C to 2A. The team felt this was a reflection of the spotlight of the program review concept on our processes of ensuring academic quality on an institutional level, with an increased priority and more rigorous evaluation of where we seem to be with our assessments and leadership. Of note, this rating precedes the actual process of program review and ensued based on the dialogue of the concept and purposes of it. **CFR 4.3** (planning processes informed by quantitative and qualitative data) changed from 2B to 3A. We felt this followed the increase in focus on institutional student learning outcomes—data collection, analysis, and implementation of change

based on outcomes—but also appears to reflect a concern that the use of evidence in the planning process needs more development.

The process of CFR review has been helpful in stimulating reflection and discussion, although it is not on a level of evidence-based rigor sufficient to draw conclusions for action. The most remarkable thing for us was the consistency of themes and concerns reflected in our reviews, although they were conducted on two separate occasions and reflected some changes in team composition.

Conclusion:

The themes of Institutional Identity, Institutional Commitment to Outcomes and Learning Assessment for Self Improvement come together in terms of how we embrace and utilize an educational effectiveness strategy across the two-campus institution of Touro University. Efforts to understand our own identity inform our mission, prioritization of resources, goals and chosen outcomes for the process of effectiveness review. At present, in terms of university-level development and assessment for educational effectiveness, we have adopted student learning outcomes and have gathered data from a set of assessments in the programs for the first two outcomes. We will phase in the assessments and subsequent data from the six additional student learning outcomes progressively over the next three years, integrating the results and analysis into the program review process. Structures for program review have been adopted on both campuses. Although some of the programs have begun to identify assessments for the remaining SLOs, we have not yet generated all the assessments for the remaining six student learning outcomes nor integrated their analysis into the program review process. We also have yet to perform and analyze the first of the program reviews. Program evaluation, in terms of professional accreditations, has been accomplished for all the programs in the university (with the exception of the School of Education at TUN), but we lack a full cycle of educational effectiveness on an institutional level. Although by many criteria we are emerging at an early stage of educational effectiveness, this emergence represents a tremendous amount of institutional development and maturation. We accordingly expect significant progress and meaningful results as we complete the assessment cycle.

## Appendix A

### List of Exhibits

Exhibit 1 .....	Letter from WASC Commission
Exhibit 2 .....	Summary of Faculty and Staff Surveys 2007-2009
Exhibit 3 .....	TUCOM Residency Match 2009
Exhibit 4 .....	TUN COM Residency Match 2009
Exhibit 5 .....	TUN Vision and Branding Study Report
Exhibit 6 .....	Dr. Hopkins' CV
Exhibit 7 .....	Organizational charts for TU, TUC, and TUN
Exhibit 8 .....	Bylaws of Program Review Committees of TUN and TUC
Exhibit 9 .....	Press release of Dr. Kadish's Appointment
Exhibit 10.....	TUN Strategic Plan
Exhibit 11.....	TUC Strategic Plan
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Exhibit 15.....	Affiliation Agreement Master List for TUC
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Exhibit 17.....	IT Governance Structure at TUN
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Exhibit 23.....	TUC Curriculum Alignment Matrices
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**Appendix B**  
**List of TUC & TUN EER Data Tables**  
**WASC/ACSCU Summary Data**

**Touro University California**

- 1.1: Admissions activities by level
- 1.2: Preparations/selectivity levels of entering students
- 1.3: Admission by gender
- 1.4: Admission by race/ethnicity
- 2.1: Headcount enrollments by degree objective
- 2.2: Headcount enrollments by gender
- 2.3: Headcount enrollments by race/ethnicity
- 2.4: Students receiving financial aid
- 3.1: Degrees granted by degree-level program
- 3.2: Cohort graduation, retention, and transfer rates
- 4.1: Faculty composition
- 4.2: Faculty headcount by department/program
- 4.3: Staff by gender and race/ethnicity
- 4.4: Full-time faculty/staff turnover
- 5.1: Information and computing resources
- 5.2: Physical resources – current year
- 5.3: Sources of revenue
- 5.4: Operating expenditures
- 5.5: Assets & liabilities
- 5.6: Capital investments
- 5.7: Endowment values and performance
- 6.1: Key undergraduate operations ratios (not applicable)
- 6.2: Key asset and maintenance ratios
- 6.3: Key financial ratios
- 7.1: Inventory of educational effectiveness indicators
- 8.1: Inventory of concurrent accreditation and key performance indicators

**Touro University Nevada**

- 1.1: Admissions activities by level
- 1.2: Preparations/selectivity levels of entering students
- 1.3: Admission by gender
- 1.4: Admission by race/ethnicity
- 2.1: Headcount enrollments by degree objective
- 2.2: Headcount enrollments by gender
- 2.3: Headcount enrollments by race/ethnicity
- 2.4: Students receiving financial aid
- 3.1: Degrees granted by degree-level program
- 3.2: Cohort graduation, retention, and transfer rates

- 4.1: Faculty composition
- 4.2: Faculty headcount by department/program
- 4.3: Staff by gender and race/ethnicity
- 4.4: Full-time faculty/staff turnover
- 5.1: Information and computing resources
- 5.2: Physical resources – current year
- 5.3: Sources of revenue
- 5.4: Operating expenditures
- 5.5: Assets & liabilities
- 5.6: Capital investments
- 5.7: Endowment values and performance
- 6.2: Key asset and maintenance ratios
- 6.3: Key financial ratios
- 7.1: Inventory of educational effectiveness indicators
- 8.1: Inventory of concurrent accreditation and key performance indicators

**Appendix C**  
**Touro University**  
**Self-Review Under the Standards**  
**Comparison of 2009 with 2006 Assessment**

<b>Suggested Rating for Columns in the Worksheet:</b>	
<p><b><u>Self Review Rating</u></b>            1= We do this well; area of strength for us            2= Aspects of this need our attention            3= This item needs significant development            0= Does not apply or not enough evidence to address</p>	<p><b><u>Importance to address at this time</u></b>            A= High priority            B= Lower priority            C= Does not need to be addressed at this time</p>

<b>Standard 1. Defining Institutional Purposes and Ensuring Educational Objectives.</b>				
<i>The institution defines its purposes and establishes educational objectives aligned with its purposes and character. It has a clear and conscious sense of its essential values and character, its distinctive elements, its place in the higher educational community and its relationship to society at large. Through its purposes and educational objectives, the institution dedicates itself to higher learning, the search for truth, and the dissemination of knowledge. The institution functions with integrity and autonomy.</i>				
Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Institutional Purposes</b>				
1.1 The institution's formally approved statements of purpose and operational practices are appropriate for an institution of higher education and clearly define its essential values and character.	The institution has a published mission statement that clearly describes its purposes. The institution's purposes fall within recognized academic areas and/or disciplines, or are subject to peer review within the framework of generally recognized academic disciplines or areas of practice.	1C	1C	

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Institutional Purposes</b>				
1.2 Educational objectives are clearly recognized throughout the institution and are consistent with stated purposes. The institution develops indicators for the achievement of its purposes and educational objectives <b>at the institutional, program, and course levels. The institution has a system of measuring student achievement, in terms of retention, completion, and student learning. The institution makes public data on student achievement at the institutional and degree level, in a manner determined by the institution.</b>		2A	2B	Increased awareness this year of need to also focus on institutional student learning objectives.
1.3 The institution's leadership creates and sustains a leadership system at all levels that is marked by high performance, appropriate responsibility, and accountability.		2B	3A	Hiring of Provost on TUC campus and general stabilization of TU leadership.

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Integrity</b>				
1.4 The institution publicly states its commitment to academic freedom for faculty, staff, and students, and acts accordingly. This commitment affirms that those in the academy are free to share their convictions and responsible conclusions with their colleagues and students in their teaching and in their writing.	The institution has published or has readily available policies on academic freedom. For those institutions that strive to instill specific beliefs and world-views, policies clearly state how these views are implemented and ensure these conditions are consistent with academic freedom. Due process procedures are disseminated, demonstrating that faculty and students are protected in their quest for truth.	2B	2B	
1.5 Consistent with its purposes and character, the institution demonstrates an appropriate response to the increasing diversity in society through its policies, its educational and co-curricular programs, and its administrative and organizational practices.	The institution has demonstrated institutional commitment to the principles enunciated in the WASC Statement on Diversity.	2B	2B	
1.6 Even when supported by or affiliated with political, corporate, or religious organizations, the institution has education as its primary purpose and operates as an academic institution with appropriate autonomy.	The institution has no history of interference in substantive decisions or educational functions by political, religious, corporate or other external bodies outside the institution's own governance arrangements.	1C	1C	

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Integrity</b>				
1.7 The institution truthfully represents its academic goals, programs, and services to students and to the larger public; demonstrates that its academic programs can be completed in a timely fashion and treats students fairly and equitably through established policies and procedures addressing student conduct, grievances, and human subjects in research and refunds.	The institution has published or readily- available policies on student grievances and complaints, refunds, etc. and has no history of adverse findings against it with respect to violation of these policies. Records of student complaints are maintained for a six-year period. The institution clearly defines and distinguishes between the different types of credits it offers and between degree and non-degree credit, and accurately identifies the type and meaning of the credit awarded in its transcripts. The institution has published or readily-available grievance procedures for faculty and staff. The institution's policy on grading and student evaluation is clearly stated, and provides opportunity for appeal as needed.	1C	1C	
1.8 The institution exhibits integrity in its operations as demonstrated by the implementation of appropriate policies, sound business practices, timely and fair responses to complaints and grievances, and regular evaluation of its performance in these areas.	The institution's finances are regularly audited by external agencies.	1C	1C	
1.9 The institution is committed to honest and open communication with the Accrediting Commission, to undertaking the accreditation review process with seriousness and candor, to informing the Commission promptly of any matter that could materially affect the accreditation status of the institution, and to abiding by Commission policies and procedures, including all substantive change policies.		1C	1C	

## Standard 2. Achieving Educational Objectives Through Core Functions

*The institution achieves its institutional purposes and attains its educational objectives through the core functions of teaching and learning, scholarship and creative activity, and support for student learning. It demonstrates that these core functions are performed effectively and that they support one another in the institution's efforts to attain educational effectiveness.*

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Teaching and Learning</b>				
2.1 The institution's educational programs are appropriate in content, standards, and nomenclature for the degree level awarded, regardless of mode of delivery, and are staffed by sufficient numbers of faculty qualified for the type and level of curriculum offered.	The content, length, and standards of the institution's academic programs conform to recognized disciplinary or professional standards and are subject to peer review.	1C	2A	All healthcare programs now have received professional accreditation.
2.2 All degrees—undergraduate and graduate—awarded by the institution are clearly defined in terms of entry-level requirements and in terms of levels of student achievement necessary for graduation that represent more than simply an accumulation of courses or credits.	Competencies required for graduation are reflected in course syllabi for both General Education and the major.	1C	1C	
2.2a Baccalaureate programs engage students in an integrated course of study of sufficient breadth and depth to prepare them for work, citizenship, and a fulfilling life. These programs also ensure the development of core learning abilities and competencies including, but not limited to, college-level written and oral communication; college-level quantitative skills; information literacy; and the habit of critical analysis of data and argument. In addition, baccalaureate programs actively foster an understanding of diversity; civic responsibility; the ability to work with others; and the capability to engage in lifelong learning. Baccalaureate programs also ensure breadth for all students in the areas of cultural and aesthetic, social and political, as well as scientific and technical knowledge expected of educated persons in this society. Finally, students are required to engage in an in-depth, focused, and sustained program of study as part of their baccalaureate programs.	The institution has a program of General Education that is integrated throughout the curriculum, including at the upper division level, consisting of a minimum of 45 semester units (or the equivalent), together with significant study in depth in a given area of knowledge (typically described in terms of a major).	N/A	N/A	

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Teaching and Learning</b>				
2.2b Graduate programs are consistent with the purpose and character of their institutions; are in keeping with the expectations of their respective disciplines and professions; and are described through nomenclature that is appropriate to the several levels of graduate and professional degrees offered. Graduate curricula are visibly structured to include active involvement with the literature of the field and ongoing student engagement in research and/or appropriate high-level professional practice and training experiences. Additionally, admission criteria to graduate programs normally include a baccalaureate degree in an appropriate undergraduate program.	Institutions offering graduate-level programs employ at least one full-time faculty member for each graduate degree program offered, and demonstrate sufficient resources and structures to sustain these programs and create a graduate-level academic culture.	1C	1C	
2.3 The institution's student learning outcomes and expectations for student attainment are clearly stated at the course, program and, as appropriate, institutional level. These outcomes and expectations are reflected in academic programs and policies; curriculum; advisement; library and information resources; and learning environment.		2B	2B	
2.4 The institution's expectations for learning and student attainment are developed and widely shared among its members (including faculty, students, staff, and where appropriate, external stakeholders). The institution's faculty takes collective responsibility for establishing, reviewing, fostering, and demonstrating the attainment of these expectations.		2A	2B	Process has begun, however continued communication needed in order to reach all stakeholders about institutional student learning outcomes. Development of assessments a continuing process.

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Teaching and Learning</b>				
2.5 The institution's academic programs actively involve students in learning, challenge them to meet high expectations, and provide them with appropriate and ongoing feedback about their performance and how it can be improved.		1C	2B	Maturation of programs since last self-assessment.
2.6 The institution demonstrates that its graduates consistently achieve its stated levels of attainment and ensures that its expectations for student learning are embedded in the standards faculty use to evaluate student work.		2A	2A	
2.7 All programs offered by the institution are subject to <b>systematic program review</b> . <b>The program review process includes</b> analyses of the achievement of the program's learning objectives and outcomes, <b>program retention and completion, and</b> , where appropriate, <b>results of licensing examination and placement and</b> evidence from external constituencies such as employers and professional <b>organizations</b> .		2A	2A	
<b>Scholarship and Creative Activity</b>				
2.8 The institution actively values and promotes scholarship, creative activity, and curricular and instructional innovations as well as their dissemination at levels and of the kinds appropriate to the institution's purposes and character.	<b>Where appropriate, the institution includes in its policies for faculty promotion and tenure recognition of scholarship related to teaching, learning, assessment, and co-curricular learning.</b>	2B	1C	Need for scholarship becomes more stringent as programs mature.
2.9 The institution recognizes and promotes appropriate linkages among scholarship, teaching, student learning and service.		2B	1C	Same as above.

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Support for Student Learning</b>				
2.10 The institution collects and analyzes student data disaggregated by demographic categories and areas of study. It tracks achievement, satisfaction, and campus climate to support student success. The institution regularly identifies the characteristics of its students and assesses their preparation, needs, and experiences.		2A	2C	Requirements are more stringent and more focus needed here.
2.11 Consistent with its purposes, the institution develops and assesses its co-curricular programs.		2B	1C	Same as above. Need to improve return rates on surveys.
2.12 The institution ensures that all students understand the requirements of their academic programs and receive timely, useful, and regular information and advising about relevant academic requirements.	Recruiting and admission practices, academic calendars, publications, and advertising are accurate, current, complete, and are readily available to support student needs.	2B	2A	Improvement as programs have matured. Still need to strengthen some advising programs.
2.13 Student support services—including financial aid, registration, advising, career counseling, computer labs, and library and information services—are designed to meet the needs of the specific types of students the institution serves and the curricula it offers.		2B	2B	
2.14 Institutions that serve transfer students assume an obligation to provide clear and accurate information about transfer requirements, ensure equitable treatment for such students with respect to academic policies, and ensure that such students are not unduly disadvantaged by transfer requirements.		1C	1C	

### Standard 3. Developing and Applying Resources and Organizational Structures to Ensure Sustainability

*The institution sustains its operations and supports the achievement of its educational objectives through its investment in human, physical, fiscal and information resources and through an appropriate and effective set of organizational and decision-making structures. These key resources and organizational structures promote the achievement of institutional purposes and educational objectives and create a high quality environment for learning.*

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Faculty and Staff</b>				
3.1 The institution employs personnel sufficient in number and professional qualifications to maintain its operations and to support its academic programs, consistent with its institutional and educational objectives.		2B	2A	Several important hires in last year, in IR, Student Services, IT, other areas.
3.2. The institution demonstrates that it employs a faculty with substantial and continuing commitment to the institution sufficient in number, professional qualifications, and diversity to achieve its educational objectives, to establish and oversee academic policies, and to ensure the integrity and continuity of its academic programs wherever and however delivered.	The institution has an instructional staffing plan that includes a sufficient number of full-time faculty with appropriate backgrounds, by discipline and degree levels. <b>The institution systematically engages full-time non-tenure track, adjunct, and part-time faculty in such processes as assessment, program review, and faculty development.</b>	2B	2A	Additional faculty hired in some programs.
3.3. Faculty and staff recruitment, <b>orientation</b> , workload, incentive, and evaluation practices are aligned with institutional purposes and educational objectives. Evaluation processes are systematic, include appropriate peer review, and, for instructional faculty and other teaching staff, involve consideration of evidence of teaching effectiveness, including student evaluations of instruction.		2B	2A	Improvements in this area as evaluation processes are maturing; more needed in orientation area.
3.4. The institution maintains appropriate and sufficiently supported faculty and staff development activities designed to improve teaching and learning consistent with its institutional objectives.	<b>The institution provides training and support for faculty members' teaching by means of technology-mediated instruction.</b>	2A	2A	

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Fiscal, Physical, and Information Resources</b>				
3.5 The institution has a history of financial stability, unqualified independent financial audits and has resources sufficient to ensure long-term viability. Resources are aligned with educational purposes and objectives. If an institution has an accumulated deficit, it has realistic plans to eliminate the deficit. Resource planning and development include realistic budgeting, enrollment management, and diversification of revenue sources.		2C	3A	Improvements in resource alignment. At TUC greater focus on main campus since North End project dropped.
3.6. The institution holds, or provides access to, information resources sufficient in scope, quality, currency, and kind to support its academic offerings and the scholarship of its members. These information sources, services, and facilities are consistent with the institution's educational objectives and are aligned with student learning outcomes. For on-campus students and students enrolled at a distance, physical and information resources, services, and information technology facilities are sufficient in scope and kinds to support and maintain the level and kind of education offered.		1C	1C	
3.7. The institution's information technology resources are sufficiently coordinated and supported to fulfill its educational purposes and to provide key academic and administrative functions.		2B	2A	Consultant evaluation of services conducted; changes in operating procedures; additional hires in IT.

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Organizational Structures and Decision- Making Processes.</b>				
3.8. The institution's organizational structures and decision-making processes are clear, consistent with its purposes, support effective decision making, and place priority on sustaining effective academic programs.	The institution <b>establishes clear roles, responsibilities, and lines of authority which are reflected in an organization chart.</b>	2C	3A	Hiring of Provost at TUC; alleviation of load on Senior Provost; updating of org charts.
3.9. The institution has an independent governing board or similar authority that, consistent with its legal and fiduciary authority, exercises appropriate oversight over institutional integrity, policies, and ongoing operations, including hiring and evaluating the chief executive officer.	<b>The governing body regularly engages in self-review and training to enhance its effectiveness.</b>	0C	1C	Touro College Board meets this CFR overall. Their self-review processes are not known to the TU campuses.
3.10. The institution has a <b>full time</b> chief executive officer <b>and a chief financial officer</b> whose <b>primary</b> or full-time responsibility is to the institution. <b>In addition, the institution has a sufficient number of other qualified</b> administrators to provide effective educational leadership and management.		1C	1C	
3.11. The institution's faculty exercises effective academic leadership and acts consistently to ensure both academic quality and the appropriate maintenance of the institution's educational purposes and character.	<b>The institution clearly defines the governance roles, rights, and responsibilities of the faculty.</b>	2A	1C	With the addition of institutional program review, there is an increased focus on this CFR.

## Standard 4. Creating an Organization Committed to Learning and Improvement

*The institution conducts sustained, evidence-based, and participatory discussions about how effectively it is accomplishing its purposes and achieving its educational objectives. These activities inform both institutional planning and systematic evaluations of educational effectiveness. The results of institutional inquiry, research, and data collection are used to establish priorities at different levels of the institution, and to revise institutional purposes, structures, and approaches to teaching, learning, and scholarly work.*

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Strategic Thinking and Planning</b>				
4.1. The institution periodically engages its multiple constituencies, including faculty, in institutional reflection and planning processes which assess its strategic position; articulate priorities; examine the alignment of its purposes, core functions and resources; and define the future direction of the institution. The institution monitors the effectiveness of its plans and planning processes and revises them as appropriate.		2A	2B	The Provost of TUC is beginning a new round of Strategic Planning.
4.2. Planning processes at the institution define and, to the extent possible, align academic, personnel, fiscal, physical, and technological needs with the strategic objectives and priorities of the institution.		2B	2B	
4.3. Planning processes are informed by appropriately defined and analyzed quantitative and qualitative data, and include consideration of evidence of educational effectiveness, including student learning.		3A	2B	Increased focus on institutional student learning outcomes – data collection, analysis, and implementation of change based on outcomes.
4.4. The institution employs a deliberate set of quality assurance processes at each level of institutional functioning, including new curriculum and program approval processes, periodic program review, ongoing evaluation, and data collection. These processes include assessing effectiveness, tracking results over time, and using comparative data from external sources and improving structures, processes, curricula, and pedagogy.		2A	2A	

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Commitment to Learning and Improvement</b>				
<p>4.5. <b>The institution has institutional research capacity consistent with its purpose and objectives. Institutional research</b> addresses strategic data needs, is disseminated in a timely manner, and is incorporated in institutional review and decision-making processes. Included in the institutional research function is the collection of appropriate data to support the assessment of student learning. Periodic reviews are conducted <b>to ensure the effectiveness of the research function</b> and the suitability and usefulness of data.</p>		2A	3A	Significant increase in staffing for Institutional Research has occurred over the past year, especially at TUC, and IR directors of both campuses work closely together.
<p>4.6 Leadership at all levels is committed to improvement based on the results of the processes of inquiry, evaluation and assessment used throughout the institution. The faculty take responsibility for evaluating the effectiveness of the teaching and learning process and use the results for improvement. Assessments of the campus environment in support of academic and co-curricular objectives are also undertaken and used, and are incorporated into institutional planning.</p>		1B	2A	Major focus on assessment this past year; administration and faculty increasingly engaged and committed.
<p>4.7. The institution, with significant faculty involvement, engages in ongoing inquiry into the processes of teaching and learning, as well as into the conditions and practices that promote the kinds and levels of learning intended by the institution. The outcomes of such inquiries are applied to the design of curricula, the design and practice of pedagogy, and to the improvement of evaluation means and methodology.</p>	<p>Periodic analyses of grades and evaluation procedures are conducted to assess the rigor and effectiveness of grading policies and practice.</p>	2B	2A	Greater faculty engagement. This has always been the case at a program level, but now the focus has expanded to the institutional level.

Criteria for Review	Guidelines	Self-Review Rating 2009	Self-Review Rating 2006	Comments
<b>Commitment to Learning and Improvement</b>				
4.8. Appropriate stakeholders, including alumni, employers, practitioners, and others defined by the institution, are regularly involved in the assessment of the effectiveness of the educational programs.		3A	3B	We must increase our communication with and engagement of alumni and employers in the educational effectiveness process.