Western University of Health Sciences

Self-Study Report

Prepared for
Western Association of Schools and Colleges
for Reaffirmation of Accreditation

March 27-30, 2001
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Appendices (under separate cover)

Tables (under separate cover)

Exhibits (located in WASC Team Room for site visit)
Part A - Certification of the Self-Study Report

TO:                Accrediting Commission for Senior Colleges and Universities 
                    Western Association of Schools and Colleges

FROM:              Western University of Health Sciences

Name of Institution

309 E. Second Street, Pomona, CA 91766-1854

Address of Institution

This Self-Study Report is submitted for the purpose of assisting in the determination as
to whether or not this institution should become a candidate, become accredited, or have
its accreditation reaffirmed by the Accrediting Commission.

I certify that there was broad participation by the campus community. We believe the
Self-Study Report accurately reflects the nature and substance of the institution.

Signed

______________________________
Philip Pumerantz

President

______________________________
Title

January 18, 2001

______________________________
Date
Part B - The Self-Study Process

Western University’s self-study began in October 1998 with the appointment of five WASC Working Groups and a WASC Self-Study Subcommittee (see Appendix B.1 for a list of members). The groups were composed of faculty, staff, and administrators representing most of Western University’s programs and departments. The working group on Academic Programs and Faculty determined that another area of study was warranted and a sixth working group, the Working Group on Research and Graduate Studies, was formed. Each of the six groups spent the spring semester 1999 working together, reviewing the nine WASC standards and ensuring that Western University was in compliance with each of the standards. In addition, the members of the working groups looked at strategic issues within each area, which informed the development of the University’s revised strategic plan.

At the same time, the Office of Institutional Effectiveness was born in the Office of the Executive Vice President for Strategic Planning. This office took over the coordination of the WASC Self-Study report and also became responsible for the final review of all professional accreditation documents prepared by Western University programs and colleges. The purpose of this type of review is to ensure consistency in data and reporting, and to maintain a consistently high level of quality for all self-study and follow-up accreditation documents. In addition, the Office of Institutional Effectiveness has become the home for institutional studies, assessments, and evaluations, and as such, works hand in hand with all programs and units in designing and implementing studies, analyzing data and reporting results, and assisting units in implementing recommendations.

The Office of Institutional Effectiveness has worked with the WASC liaison (first Judie Gaffin-Wexler, then Dean Elias, and finally Fred Dorer) to frame Western University’s self-study. The self-study is an experimental one, focusing on strategic planning and management. The Assessment Subcommittee of the Institutional Strategic Planning and Resource Advisory Committee has served as the Steering Committee for this self-study. This subcommittee is comprised of faculty, staff, and administrators, and a member of the Board of Trustees (see Appendix B.2 for a list of subcommittee members).

From January 1999 to the present, members of the Office of Institutional Effectiveness and the Assessment Subcommittee have collaborated with deans, directors, managers, faculty, and students across the campus to develop the planning and evaluation materials necessary to complete the self-study. More important, however, has been the understanding that these are not one-time activities to be accomplished every ten years for a WASC review, but rather are tools that continue on a regular basis to assist the institution in its strategic endeavors.

Enough data, analyses, plans, and reports were completed by Summer 2000 to draft the actual self-study document. The Vice President of Institutional Effectiveness, with cooperation and contributions from across the campus, compiled the self-study document. This first draft then was shared with the Executive Vice President for Strategic Planning and the entire President’s Cabinet for review and revision. Members of the Academic Affairs Council were asked for their input. From there, the document went to the Institutional Strategic Planning and Resource Advisory Committee for
comment. Finally, a revised draft was distributed for comment university-wide via the Intranet. The Board of Trustees reviewed and approved the final document during its December 16, 2000 meeting.
Western University of Health Sciences

Philip Pumerantz

1977 Private not-for-profit

1. YEAR FOUNDED: ______ 2. SPONSORSHIP AND CONTROL _______________

3. DEGREE LEVELS OFFERED:

☐ Associate  ☑ Master  ☑ Professional  ☐ Bachelor  ☐ Doctor

4. CALENDAR PLAN: ________________________________________________

5. CURRENT ENROLLMENT

<table>
<thead>
<tr>
<th>Headcount</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate</td>
<td>98</td>
</tr>
<tr>
<td>Graduate</td>
<td>2500</td>
</tr>
<tr>
<td>Non-degree</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>2598</td>
</tr>
</tbody>
</table>

6. CURRENT FACULTY:

<table>
<thead>
<tr>
<th>Headcount:</th>
<th>76</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>77.5</td>
</tr>
<tr>
<td>Part-time</td>
<td>22:1</td>
</tr>
<tr>
<td>Ratio: FTE Student/FTE Faculty:</td>
<td></td>
</tr>
</tbody>
</table>

7. FINANCES

| A. Annual Tuition Rate: Undergraduate | $42,192,770 |
| B. % from Tuition and Fees: | 82.5% |
| C. Operating Deficit(s) for past 3 years: | 0 |
| D. Current Accumulated Deficit: | |

8. GOVERNING BOARD:

| A. Size | 10 |
| B. Meetings per year | 4 |

9. OFF-CAMPUS LOCATIONS:

| A. Number | 0 |
| B. Total Enrollment | |

10. LIBRARY

| A. Number of Volumes | 9016 |
| B. Number of Periodical Subscriptions | 550 |
### STUDENT ADMISSIONS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FRESHMAN – N/A</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants with complete credentials for admission to the freshman class</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of freshman applicants accepted</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of freshman applicants actually enrolled</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TRANSFER – N/A</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants with complete credentials for admission with advanced standing (transfer)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of advanced standing undergraduate applicants accepted</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of advanced standing undergraduate applicants actually enrolled</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>MASTER’S</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants with complete credentials for admission to master’s programs</td>
<td>504</td>
<td>149</td>
<td>218</td>
</tr>
<tr>
<td>Number of applicants accepted for master’s programs</td>
<td>260</td>
<td>88</td>
<td>92</td>
</tr>
<tr>
<td>Number of applicants actually enrolled in master’s programs</td>
<td>198</td>
<td>76</td>
<td>82</td>
</tr>
<tr>
<td><strong>DOCTORAL – N/A</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants with complete credentials for admission to doctoral programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants accepted for doctoral programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants actually enrolled in doctoral programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PROFESSIONAL</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of applicants with complete credentials for admission to graduate professional programs</td>
<td>1356</td>
<td>1505</td>
<td>1695</td>
</tr>
<tr>
<td>Number of applicants accepted for graduate professional programs</td>
<td>544</td>
<td>450</td>
<td>454</td>
</tr>
<tr>
<td>Number of applicants actually enrolled in graduate professional programs</td>
<td>274</td>
<td>281</td>
<td>272</td>
</tr>
</tbody>
</table>

### 4.2 Ability Measures of Freshman and Entering Graduate Students

**A. Class ranking of entering freshmen: N/A**

Percent in top 10% of high school class _____

Percent in top 25% of high school class _____

Percent in top 50% of high school class _____

Percent in top 75% of high school class _____
B. SAT scores for entering freshmen (if used): N/A

Class average SAT score on Verbal __________ Mathematical __________

Percent scoring above 500 on Verbal __________ Mathematical __________

Percent scoring above 600 on Verbal __________ Mathematical __________

Percent scoring above 700 on Verbal __________ Mathematical __________

C. Mean ACT scores for entering freshmen (if used): N/A

Composite _____
Mathematics _____
English _____
Natural Sciences _____
Social Studies _____

D. Other tests used for admission or placement:

Test name MCAT

Mean or composite AVE 8.69 MCAT

Range 2000 entering class 12.00-6.00

E. Entering Graduate Students

1. Graduate Record Examination
(for total Graduate School excluding professional schools) High _____ Low_____  

   NOTE: Western University does not have a minimum requirement.

2. Miller Analogies Test
(for total Graduate School excluding professional schools) High _____ Low _____

   NOTE: N/A

3. On separate sheet, indicate other test data used for admission.
   NOTE: N/A
### Awards/Degrees Conferred between JULY 1, 1999 and JUNE 30, 2000

<table>
<thead>
<tr>
<th>Award Level</th>
<th>Nonresident Alien</th>
<th>Black, non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White, non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least 2 but less than 4 years</td>
<td>Men</td>
<td>3</td>
<td>6</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>9</td>
<td>29</td>
</tr>
<tr>
<td>Post-baccalaureate Certificates</td>
<td>4</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Master's Degrees</td>
<td>1</td>
<td>8</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>14</td>
<td>34</td>
<td>1</td>
</tr>
<tr>
<td>First-professional Degrees</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>5</td>
<td>1</td>
<td>28</td>
<td>30</td>
<td>13</td>
</tr>
<tr>
<td>Grand Total</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>11</td>
<td>1</td>
<td>40</td>
<td>38</td>
<td>20</td>
</tr>
</tbody>
</table>

### Awards/Degrees Conferred between JULY 1, 1998 and JUNE 30, 1999

<table>
<thead>
<tr>
<th>Award Level</th>
<th>Non-resident Alien</th>
<th>Black, non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White, non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least 2 but less than 4 years</td>
<td>Men</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>8</td>
<td>3</td>
<td>10</td>
<td>33</td>
</tr>
<tr>
<td>Post-baccalaureate Certificates</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>
### Awards/Degrees Conferred between JULY 1, 1998 and JUNE 30, 1999

<table>
<thead>
<tr>
<th>Award Level</th>
<th>Non-resident Alien</th>
<th>Black, non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White, non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
</tr>
<tr>
<td>Master's Degrees</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-professional Degrees</td>
<td>1</td>
<td>1</td>
<td>13</td>
<td>10</td>
<td>3</td>
<td>23</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>Grand Total</td>
<td>2</td>
<td>4</td>
<td>13</td>
<td>15</td>
<td>3</td>
<td>30</td>
<td>26</td>
<td>14</td>
</tr>
</tbody>
</table>

### Student Application Fee by Program

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MSPA</td>
<td>$45.00</td>
<td>$45.00</td>
</tr>
<tr>
<td>MSHPE</td>
<td>$35.00</td>
<td>$35.00</td>
</tr>
<tr>
<td>MPT</td>
<td>$60.00</td>
<td>$60.00</td>
</tr>
<tr>
<td>PharmD</td>
<td>$60.00</td>
<td>$60.00</td>
</tr>
<tr>
<td>DO</td>
<td>$60.00</td>
<td>$60.00</td>
</tr>
<tr>
<td>MSN/FNP</td>
<td>$60.00</td>
<td>$60.00</td>
</tr>
</tbody>
</table>
**Tuition and Required Fees by Program**

<table>
<thead>
<tr>
<th>Program</th>
<th>1999-2000 Tuition Required Fees*</th>
<th>2000-2001 Tuition Required Fees*</th>
</tr>
</thead>
<tbody>
<tr>
<td>PA</td>
<td>13,110 415.00</td>
<td>13,730 395.00</td>
</tr>
<tr>
<td>MSPA</td>
<td>N/A N/A</td>
<td>17,500 515.00</td>
</tr>
<tr>
<td>MSHPE (Charges per unit)</td>
<td>175.00 15.00</td>
<td>225.00 15.00</td>
</tr>
<tr>
<td>MPT</td>
<td>23,320 515.00</td>
<td>24,430 515.00</td>
</tr>
<tr>
<td></td>
<td>MPT Final Phase (effective January 2001)</td>
<td>8,140 171.00</td>
</tr>
<tr>
<td>PharmD</td>
<td>22,620 515.00</td>
<td>23,700 515.00</td>
</tr>
<tr>
<td>DO</td>
<td>24,720 665.00</td>
<td>25,900 665.00</td>
</tr>
<tr>
<td>MSN/Harbor-UCLA</td>
<td>N/A N/A</td>
<td>5,950 340.00</td>
</tr>
<tr>
<td>MSN (1-Year Program)</td>
<td>N/A N/A</td>
<td>9,450 340.00</td>
</tr>
<tr>
<td>FNP (2-Year Program Option to complete in 1 Year)</td>
<td>16,400 40.00</td>
<td>16,400 340.00</td>
</tr>
<tr>
<td>MSN/FNP (2-Year Program)</td>
<td>10,800 340.00</td>
<td>Year 1-10,400 Year 2-9,600 340.00</td>
</tr>
</tbody>
</table>

*Students across all programs pay an additional $100.00 graduation fee during the final year of instruction (not included in table).

Beginning 2000/2001, DO and PharmD first-year students pay additional $1,250 in computer/laptop fees (not included in table).

**Level of Enrollment**

<table>
<thead>
<tr>
<th>Level of Enrollment</th>
<th>July 1, 1998-June 30, 1999</th>
<th>July 1, 1999-June 30, 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate-level students enrolled in 12-month period</td>
<td>226</td>
<td>98</td>
</tr>
<tr>
<td>Graduate-level students* enrolled in 12-month period</td>
<td>210</td>
<td>304</td>
</tr>
<tr>
<td>First-professional level students enrolled in 12-month period</td>
<td>958</td>
<td>1098</td>
</tr>
</tbody>
</table>

*MPT and MSPA students are included in the graduate-level classification
### Enrollment Summary by Racial/Ethnic Category

#### Enrollment as October 15, 1999

<table>
<thead>
<tr>
<th>Race/Ethnicity Category</th>
<th>Nonresident Alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>GRAND TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/12 Month Salary Contracts</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
</tr>
<tr>
<td><strong>FULL-TIME Undergraduate Students</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PA Certificate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PA second year (Pomona)</td>
<td>2</td>
<td>6</td>
<td>3</td>
<td>2</td>
<td>4</td>
<td>9</td>
<td>17</td>
<td>17</td>
</tr>
<tr>
<td>PA (Chico)</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>13</td>
<td>17</td>
<td>18</td>
<td>20</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1</td>
<td>1</td>
<td>6</td>
<td>7</td>
<td>10</td>
<td>21</td>
<td>17</td>
<td>20</td>
</tr>
<tr>
<td><strong>FULL-TIME First-professional Students</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DO/PharmD (first time)</td>
<td>2</td>
<td>4</td>
<td>10</td>
<td>53</td>
<td>70</td>
<td>9</td>
<td>10</td>
<td>63</td>
</tr>
<tr>
<td>DO/PharmD (all other)</td>
<td>4</td>
<td>4</td>
<td>21</td>
<td>22</td>
<td>4</td>
<td>3</td>
<td>87</td>
<td>158</td>
</tr>
<tr>
<td>TOTAL</td>
<td>6</td>
<td>4</td>
<td>25</td>
<td>32</td>
<td>4</td>
<td>3</td>
<td>140</td>
<td>228</td>
</tr>
<tr>
<td><strong>FULL-TIME Graduate Students</strong></td>
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<tr>
<td>MPT Degree Seeking – first time</td>
<td>4</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>15</td>
<td>25</td>
<td>21</td>
<td>33</td>
</tr>
<tr>
<td>MPT all other degree seeking</td>
<td>8</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>11</td>
<td>25</td>
<td>20</td>
<td>30</td>
</tr>
<tr>
<td>MSN/FNP Degree Seeking – first time</td>
<td>1</td>
<td>4</td>
<td>12</td>
<td>4</td>
<td>13</td>
<td></td>
<td></td>
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<tr>
<td>MSN/FNP all other degree seeking</td>
<td>2</td>
<td>9</td>
<td>2</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PharmD Post-</td>
<td>4</td>
<td></td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Enrollment Summary by Racial/Ethnic Category
## Enrollment as October 15, 1999

<table>
<thead>
<tr>
<th>Race/ethnicity unknown</th>
<th>11/12 Month Salary Contracts</th>
<th>PART-TIME STUDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
<td>Women</td>
</tr>
<tr>
<td>11/12 Month Salary Contracts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and Baccalaureate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>4</td>
<td></td>
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<tr>
<td>PART-TIME STUDENTS</td>
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<tr>
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<tr>
<td>Degree Seeking – first time</td>
<td>2</td>
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</tr>
<tr>
<td>TOTAL</td>
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</tr>
<tr>
<td>GRAND TOTAL</td>
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</tr>
<tr>
<td>All Students</td>
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</table>
## Enrollment Summary by Racial/Ethnic Category

**Enrollment as October 15, 2000**

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Nonresident Alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>GRAND TOTAL</th>
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<tbody>
<tr>
<td><strong>11/12 Month Salary Contracts</strong></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Men</td>
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<td>3</td>
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<td>16</td>
<td>10</td>
<td>11</td>
<td>16</td>
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<tr>
<td>Women</td>
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<td>1</td>
<td></td>
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<td>3</td>
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<td>11</td>
<td>16</td>
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<td>DO/PharmD (all other)</td>
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<td>23</td>
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<td><strong>TOTAL</strong></td>
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<td>21</td>
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<td><strong>FULL-TIME Graduate Students</strong></td>
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<td>1</td>
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<td>3</td>
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<td>2</td>
<td>8</td>
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<tr>
<td>MPT all other degree seeking</td>
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<tr>
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<td>MSN/FNP all</td>
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<td>6</td>
<td>2</td>
<td>4</td>
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</table>
## Enrollment Summary by Racial/Ethnic Category

### Enrollment as October 15, 2000

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Nonresident Alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>GRAND TOTAL</th>
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<tbody>
<tr>
<td><strong>11/12 Month Salary Contracts</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>18</td>
<td>10</td>
<td>11</td>
<td>2</td>
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<td>Women</td>
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<td>1</td>
<td>39</td>
<td>11</td>
<td>11</td>
<td>4</td>
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<tr>
<td><strong>TOTAL</strong></td>
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<td>2</td>
<td>48</td>
<td>21</td>
<td>22</td>
<td>6</td>
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<td>MSHPE Graduate Students</td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>degree seeking – first time</td>
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<td>2</td>
<td>1</td>
<td>6</td>
<td>1</td>
<td>1</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td><strong>TOTAL Part-time Post-baccalaureate Students</strong></td>
<td>1</td>
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<td>1</td>
<td>6</td>
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<td>All Students</td>
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<td>27</td>
<td>40</td>
<td>4</td>
<td>4</td>
<td>193</td>
<td>322</td>
</tr>
</tbody>
</table>

*MPT degree seeking-first time is not a complete total. The enrollment totals for this class will be final after January, 2001.

**The PA Certificate program no longer exists. The PA program is now a graduate program.*
### Enrollment Summary of Students by Age
#### Enrollment as of October 15, 1999

<table>
<thead>
<tr>
<th>Age</th>
<th>Undergraduate Students PA</th>
<th>First-professional students DO &amp; PharmD</th>
<th>Graduate Students MPT, MSN/FNP &amp; Post-baccalaureate</th>
<th>GRAND TOTAL ALL STUDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
</tr>
<tr>
<td>FULL-TIME STUDENTS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-21</td>
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</tr>
<tr>
<td>22-24</td>
<td>10</td>
<td>26</td>
<td>101</td>
<td>177</td>
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<td>25-29</td>
<td>33</td>
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<td>271</td>
<td>283</td>
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<td>30-34</td>
<td>19</td>
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<td>60</td>
</tr>
<tr>
<td>35-39</td>
<td>7</td>
<td>12</td>
<td>20</td>
<td>23</td>
</tr>
<tr>
<td>40-49</td>
<td>11</td>
<td>10</td>
<td>13</td>
<td>18</td>
</tr>
<tr>
<td>50-64</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>65 and over</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Age unknown</td>
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</tr>
<tr>
<td>TOTAL full-time students</td>
<td>81</td>
<td>115</td>
<td>490</td>
<td>573</td>
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</tbody>
</table>

#### PART-TIME STUDENTS

<table>
<thead>
<tr>
<th>Age</th>
<th>Under 18</th>
<th>18-21</th>
<th>20-24</th>
<th>22-24</th>
<th>25-29</th>
<th>30-34</th>
<th>35-39</th>
<th>40-49</th>
<th>50-64</th>
<th>65 and over</th>
<th>Age unknown</th>
<th>TOTAL part-time students</th>
<th>7</th>
<th>4</th>
<th>7</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRAND TOTAL</td>
<td>All Students</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>81</td>
<td>115</td>
<td>490</td>
<td>573</td>
</tr>
</tbody>
</table>
## Enrollment Summary of Students by Age
### Enrollment as of October 15, 2000

<table>
<thead>
<tr>
<th>Age</th>
<th>Undergraduate Students PA</th>
<th>First-professional students DO &amp; PharmD</th>
<th>Graduate Students MPT, MSN/FNP &amp; Post-baccalaureate</th>
<th>GRAND TOTAL ALL STUDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
</tr>
<tr>
<td><strong>FULL-TIME STUDENTS</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Under 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-19</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>20-21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22-24</td>
<td>4</td>
<td>8</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>25-29</td>
<td>19</td>
<td>33</td>
<td>283</td>
<td>283</td>
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<td>30-34</td>
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<td>35-39</td>
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<td>16</td>
<td>16</td>
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<td>40-49</td>
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<td>3</td>
<td>10</td>
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<tr>
<td>50-64</td>
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<td>3</td>
</tr>
<tr>
<td>65 and over</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Age unknown</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL full-time students</td>
<td>37</td>
<td>61</td>
<td>488</td>
<td>488</td>
</tr>
</tbody>
</table>

| **PART-TIME STUDENTS** |     |       |     |       |     |       |     |       |     |       |
| Under 18    |     |       |     |       |     |       |     |       |     |       |
| 18-19       |     |       |     |       |     |       |     |       |     |       |
| 20-21       |     |       |     |       |     |       |     |       |     |       |
| 22-24       |     |       |     |       |     |       |     |       |     |       |
| 25-29       |     |       |     |       |     |       |     |       |     |       |
| 30-34       |     |       |     |       |     |       |     |       |     |       |
| 35-39       |     |       |     |       |     |       |     |       |     |       |
| 40-49       |     |       |     |       |     |       |     |       |     |       |
| 50-64       |     |       |     |       |     |       |     |       |     |       |
| 65 and over |     |       |     |       |     |       |     |       |     |       |
| Age unknown |     |       |     |       |     |       |     |       |     |       |
| TOTAL part-time students | 10 | 8     | 10  | 10    | 8   | 8     |     |       |     |       |

| **GRAND TOTAL** |     |       |     |       |     |       |     |       |     |       |
| All Students   | 37  | 61    | 488 | 488   | 610 | 610   | 107 | 197   | 632 | 868   |
### Salaries and Tenure of Full-time Instructional Faculty, Academic Year 1999-2000

<table>
<thead>
<tr>
<th>Academic Rank</th>
<th>Number of faculty with tenure (1)</th>
<th>Those on tenure track (2)</th>
<th>Those not on tenure track (3)</th>
<th>Total number of faculty (sum of columns 1-3)</th>
<th>TOTAL SALARY OUTLAY (In whole dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty on 11/12-Month Salary Contracts</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
</tr>
<tr>
<td>Professors</td>
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<td>1</td>
<td>1</td>
<td>12</td>
</tr>
<tr>
<td>Associate Professors</td>
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<td>2</td>
<td>3</td>
<td>7</td>
<td>3</td>
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<td>3</td>
</tr>
<tr>
<td>Instructors</td>
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<td>3</td>
<td>1</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>TOTALS</td>
<td>18</td>
<td>1</td>
<td>16</td>
<td>23</td>
<td>35</td>
</tr>
</tbody>
</table>

### Salaries and Tenure of Full-time Instructional Faculty, Academic Year 2000-2001

<table>
<thead>
<tr>
<th>Academic Rank</th>
<th>Number of faculty with tenure (1)</th>
<th>Those on tenure track (2)</th>
<th>Those not on tenure track (3)</th>
<th>Total number of faculty (sum of columns 1-3)</th>
<th>TOTAL SALARY OUTLAY (In whole dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty on 11/12-Month Salary Contracts</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
</tr>
<tr>
<td>Professors</td>
<td>15</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>16</td>
</tr>
<tr>
<td>Associate Professors</td>
<td>3</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Assistant Professors</td>
<td>13</td>
<td>14</td>
<td>6</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td>Instructors</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
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<tr>
<td>TOTALS</td>
<td>18</td>
<td>4</td>
<td>17</td>
<td>16</td>
<td>8</td>
</tr>
<tr>
<td>Fringe Benefits of Full-time Instructional Faculty on 11/12-month contracts</td>
<td>Expenditures (In whole dollars)</td>
<td>Number covered</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>--------------------------------</td>
<td>----------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retirement plans (other than Social Security)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vested within 5 years</td>
<td>325,804</td>
<td>345,048</td>
<td>62</td>
<td>76</td>
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</tr>
<tr>
<td>Vested after 5 years</td>
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</tr>
<tr>
<td>Medical/dental plans</td>
<td>114,316</td>
<td>168,130</td>
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<td>Group life insurance</td>
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<td>32,861</td>
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<td>Guaranteed disability income protection</td>
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<tr>
<td>Social Security taxes</td>
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<td>334,234</td>
<td>62</td>
<td>76</td>
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<td>Unemployment compensation</td>
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<td>10,717</td>
<td>62</td>
<td>76</td>
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</tr>
<tr>
<td>Workers’ compensation</td>
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<td>30,224</td>
<td>62</td>
<td>76</td>
<td></td>
</tr>
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<td>Other benefits in kind with cash options</td>
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<td>TOTAL</td>
<td>892,530</td>
<td>951,137</td>
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</table>
# Full-time Faculty (Instruction/Research/Public Service) by Racial/Ethnic Category, Sex, Contract Length and Salary Class Intervals

## Employees on the Payroll of the Institution as of November 1, 1999

<table>
<thead>
<tr>
<th>11/12 Month Salary Contracts</th>
<th>Non-resident Alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
<th>GRAND TOTAL</th>
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<tbody>
<tr>
<td>$45,000-54,999</td>
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### Additional Information on Full-time Employees by Racial/Ethnic Category, Sex, and Primary Occupational Activity as of November 1, 2000

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### Tenure of Full-time Faculty (Instruction/Research/Public Service) by Racial/Ethnic Category, Sex and Academic Rank

Employees on the Payroll of the Institution as of November 1, 2000

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Note: The table above shows the distribution of new hires by racial/ethnic category, sex, and primary occupational activity for full-time positions between July 1 and October 31, 1999.
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<tr>
<th>Race/ethnicity</th>
<th>Men</th>
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<td>Non-resident Alien</td>
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<td>Black non-Hispanic</td>
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<td>American Indian or Alaskan Native</td>
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<td>Asian or Pacific Islander</td>
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<td>White non-Hispanic</td>
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**New Hires by Racial/Ethnic Category, Sex, and Primary Occupational Activity**

*Full-time between July 1 and October 31, 2000*
Part E - Response to WASC Prior Recommendations

Western University has taken its WASC accreditation process, the visits, and recommendations from WASC site visitors to heart. As is evident throughout this self-study document, significant progress has been made in moving Western University successfully from a single-purpose college of osteopathic medicine to becoming a quality graduate university of medical sciences. This section of the self-study report details how the University has responded to the recommendations of the initial accreditation visit (1995) and the subsequent interim report (1998). The recommendations and comments of the WASC teams have assisted the University in achieving the quality realized to date. Presented below is a table summarizing the recommendations and the University’s progress. In column III, we present a reference to where the details of the University’s activities can be found in the Self-Study.

WASC Initial Accreditation Visitation
College of Osteopathic Medicine of the Pacific
October 24-27, 1995

<table>
<thead>
<tr>
<th>I. Recommendations</th>
<th>II. Progress to date</th>
<th>III. Where Addressed in Self-Study</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard I: Institutional Integrity</strong></td>
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<tr>
<td>1. COMP continues its efforts to have a diversified administration, faculty, and staff. As top administrative appointment opportunities arise, every effort should be made to seek highly qualified women and ethnic minorities to enrich its application pool.</td>
<td>Women and minority faculty, staff, and administrators have joined the Western University ranks. The Vice President of Strategic Planning and Institutional Effectiveness and Vice President for Facilities; deans of the colleges of Allied Health, Graduate Nursing, Veterinary Medicine; Dean of Student Affairs and Dean of Alumni; and the Chair of the Physical Therapy program are women. Two of the deans are African Americans. Two women administrators, one of whom is African American, have become members of the President’s Cabinet. The chair of the PA Program is a Hispanic male. Women are increasingly present in the faculty ranks in all</td>
<td>See tables for Standards IV and Part D-Demographic Information.</td>
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programs. The PT faculty members are all women and the program is attempting to attract male faculty. Attracting faculty of color is still a priority, but the applicant pool is limited and salaries are not as competitive. The staff is quite diverse, with women and members of ethnic minorities represented throughout the University.

2. The Admissions Office should be encouraged and provided the necessary resources to expand its out-of-state ethnic minority program to include all academic programs rather than just the DO program.

   The Strategic Enrollment Management process initiated in the 1999-2000 academic year is addressing this issue effectively and the student population is quite diverse. We continue to offer pre-admission awareness programs to promote our educational offerings in the community. In addition, we have incorporated academic and cultural programs to assist in retaining minority students once enrolled.

   See Standards II and VII.

3. The Board of Directors is encouraged to further enrich its ethnic and gender diversity as opportunities arise. Given the increasing diversity within the marketplace of its graduates, the team believes that such representation can be a significant asset for the Board.

   The Board of Trustees now includes an African American and an Asian American member. Two of the Board members are women.

   See Standard III.

### Standard II: Institutional Purposes, Planning, and Effectiveness

<table>
<thead>
<tr>
<th>1. Assign priority to studying and incorporating into the five-year plan and related pro-forma budgets the resources and other implications of becoming a university.</th>
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<tr>
<td>This has been accomplished, as is evidenced by the successful growth and development of the University in all areas relevant to becoming a university, e.g., research facilities and activity, information technology, the library, enhanced student services, enrollment management, physical facilities, financial planning, etc. The role of the Institutional Strategic Planning and Resource Advisory Committee has been expanded and its influence in the planning and</td>
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<td>See Standard II.</td>
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budgeting processes has grown accordingly. There have been subsequent planning retreats at the university level, the Academic Affairs Council, and at the college level to ensure that planning and budgeting are occurring effectively. The annual reporting process has focused on planning and goal setting and has helped to inform the budget process as well. Decision making and participative governance protocols have been developed by the Academic Affairs Council and in accordance with the President’s Cabinet. Communication protocols have also been developed.

<table>
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<tr>
<th>2. Review policies, processes, and procedures to determine why elements of the campus continue to be concerned about their lack of involvement and having a voice in the planning/budgetary process. (Is it policy and/or process that is flawed? Is it failure in communication? Is it the failure of ISPC members to adequately involve their constituencies? Is it some combination of the above? Or, is it something else?)</th>
<th>This review has occurred and plans as stated in II.1 above have begun to address this issue. The composition of the ISPRAC has been changed to allow for greater representation, and members are serving more effectively as liaisons with their constituents. Communication is still a concern and is being addressed by the development of a Strategic Communications Plan. A change in personnel at the CFO level has had a positive impact already. A process improvement activity has occurred in the financial reporting and budgeting areas and the new processes that have been developed address prior campus concerns. However, we understand that it will take some time to change campus perceptions once members of the community become fully engaged.</th>
<th>See Standards II and IX.</th>
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<tr>
<td>3. Develop processes and procedures to ensure that various assessment findings are reflected in the planning process.</td>
<td>The creation of the Office of Strategic Planning and Institutional Effectiveness, under the President’s leadership, has achieved this. An</td>
<td>See Standard II.</td>
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assessment focus has been developed at the university level and in all academic programs. The results of these assessments have been used to inform planning and budgeting processes, curriculum development and revision, and new program development. The Assessment Subcommittee members represent all campus constituents and information is shared widely. The Subcommittee has developed a set of institutional key performance measures to monitor progress toward achieving the goals of the strategic plan. This is shared with the academic constituents comprising the Academic Affairs Council.

4. Focus on effective and timely campus communication regarding planning and institutional assessment results. See II.3 above.

5. Periodically, the College should have outside peer review of academic programs to reinforce or provide separate insights regarding academic program quality and direction. Each of the University’s professional programs is separately accredited and, as such, undergoes self-study and external review by experts on a regular basis. The accreditation status of each program is presented in various locations throughout this report. In addition, the MSHPE program, the only program not evaluated by a separate accrediting body, undergoes a regular program review process. This is occurring in the 2000-2001 academic year. See Section VII and Standard IV.

Standard III: Governance and Administration

1. The Board and administration should distribute/make available their policies to all constituencies of the campus community. Board and administrative policies are available to all on campus. Faculty, staff, and student handbooks, detailing administrative policies and procedures, are reviewed and updated regularly. See Standard III.

2. Given the contemplated change to university status, the faculty workload policy has been developed. See Standard
Board should generate and promulgate a balanced policy regarding teaching, research/scholarship, and service expectations. This should receive careful, thoughtful involvement and coordination in its development.

and included in the Faculty Handbook under the leadership of the Executive Vice President of Academic Affairs. In addition, in each college, faculty collaborate with deans and department chairs to determine the distribution of their effort annually, set goals for performance, and evaluate progress toward those goals. The outcomes of these processes are used for faculty development and merit determination purposes.

V.

3. Given the action of the Board Chair during the team’s visit regarding faculty and student representation at Board meetings, the Board is encouraged to formally change the bylaws to reflect this. Further, there should be policy that makes such representation meaningful to the Board and the constituencies that are represented.

The Board invites the Chair of the Faculty Senate and the President of the Student Government Association to attend its meetings on a regular basis. They report to the Board on current issues.

See Standard III.

4. The administration should fully communicate the process and timeframe for major decisions, including Board actions, to all constituencies in the campus community. An effective feedback mechanism needs to be incorporated that informs the campus community, in a timely manner, of major decisions that have been made.

The administration is still working on communication processes that adequately and effectively communicate to the campus community the process and timeframe for major decisions. The Academic Affairs Council (AAC) has determined that it would oversee the development of all policies and procedures, and it is in the process of developing a strategic communications policy to accommodate this issue. The AAC, under the leadership of the Executive Vice President of Academic Affairs, is deliberating a new architecture for governance of the University that will include a shared and participative model. Many avenues of communication are open through the monthly publication of *Campus Commotion*; the weekly e-mail distribution of *Western University This*
Week; the University’s Annual Report and State of the University Address; and regular faculty, staff, and student meetings with the President; the Executive Vice President of Academic Affairs, deans, and program chairs. The regular meetings of the Faculty Senate, Student Government Association, the Academic Affairs Council, the Cabinet, and college faculty meetings assist in this regard. The Strategic Communications Plan, under development, will formalize these activities.

<table>
<thead>
<tr>
<th>Standard IV: Educational Programs</th>
</tr>
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<tbody>
<tr>
<td><strong>1.</strong> Continue to seek causes and remedies concerning the frustration of faculty and others regarding their perception that there is no mechanism or process that permits them to be involved or heard in a meaningful way. (Reference Recommendation Two under Standard II).</td>
</tr>
<tr>
<td>The Faculty Council has been modified to be the Faculty Senate, which meets monthly. General University faculty meetings occur quarterly and provide a forum for all faculty input. The Executive Vice President of Academic Affairs meets regularly with the Faculty Senate to share the deliberations of the Academic Affairs Council and Cabinet, participate with the faculty in determination of University policy, and encourage an atmosphere of participation and a culture of inclusion. Faculty are well represented on the Institutional Strategic Planning and Resource Advisory Committee, and their concerns are addressed in regular college faculty meetings, the output of which is addressed at the Academic Affairs Council. Many standing committees of the Faculty Senate operate and provide such forums as well. The Faculty Senate and general University faculty meetings are chaired by the faculty.</td>
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<tr>
<td>See Standards II, IV, and V.</td>
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<p>| 2. COMP should reduce the number of DO clinical teaching |
| COMP has reduced the number of DO clinical |
| See Standard |</p>
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<th>Sites to a level that permits sound management and staffing regarding a quality learning experience or provide additional site management resources to ensure a constituency in the quality of the clinical learning experience.</th>
<th>Teaching sites and developed a series of block rotations for MSIIIs to enhance monitoring of the educational quality of the rotations and student learning. Evaluation processes have been facilitated by doing so.</th>
<th>IV.</th>
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<td>3. Review policy to ensure primacy of faculty regarding student retention, promotion, and dismissal for academic cause.</td>
<td>This has been reviewed and, in all colleges but COMP, has been implemented successfully. The faculty and student handbooks stipulate faculty primacy in these areas. Focus groups for all colleges other than COMP indicated that this was not a problem. COMP is in the process of reviewing this issue and a report of that process is presented in Standard IV.</td>
<td>See Standard IV.</td>
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<td>4. Carefully review curriculum regarding adequacy of instruction regarding mental health, biostatistics, and human genetics. An outside peer review should be conducted.</td>
<td>COMP is in the process of curriculum review and revision. Outside consultants have assisted with the process, which has also been informed by a study of best practices in the field. A peer review will occur in April 2001, when COMP undergoes its next AOA site visit. Mental health and human genetics have been added to the curriculum, and an epidemiologist and a biostatistician have been added to the Center for Academic and Professional Enhancement (CAPE) staff to work with faculty in all colleges, including COMP. The Public Health course provides an introduction to biostatistics, and it is anticipated that the revised curriculum will include more as part of an emphasis on evidence-based medicine.</td>
<td>See Standard IV.</td>
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<td>5. Review the first two years of the DO program in relation to desirability of incorporating the library as a necessary “other source” for reference and study material. Also, ensure that there are ways to enhance DO student computer literacy as</td>
<td>See IV.4 above. In addition, laptop computers are now required for all entering students and the implementation of Blackboard software has assisted students in this area. Students are</td>
<td>See Standard VI.</td>
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the computer becomes more important to the campus academic program. accessing interactive medical and other websites to obtain the latest information and research in medicine and related fields. Introductions to the University Library and Information and Instructional Technology (I2T) systems have been incorporated into all orientation programs. I2T and Library staff, as well as LEAD and CAPE staff, have been accessible to students in this regard. An ongoing training program has been developed by I2T for students and faculty as a continuation of the orientation program. Access to the new Library and Learning Resource Center will enhance library and computer resource capability.

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<th>Standard V: Faculty and Staff</th>
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<tr>
<td>1. That COMP expedite the development and implementation of a faculty workload policy. Faculty and the administration must work together so that the final product promotes the best interests of the academic programs of COMP.</td>
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<tr>
<td>2. Given a workload policy for all faculties, COMP is encouraged to analyze current and projected faculty workload in relation to expansion plans. The results of this analysis should be phased into the campus five-year plan and related pro-forma budgets.</td>
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<tr>
<td>3. Develop and/or modify as necessary campus grievance procedures (faculty, staff, and students) so that a meaningful and equitable process is in place. Again, the President indicated concurrence.</td>
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</table>
4. Elevate the visibility of the Center for Faculty Development and its goals and objectives in relation to campus expectations. Its director should work with the faculty to develop a needs assessment. After this has been discussed and coordinated with the campus and approved, it should be introduced into the planning, budgetary process. The Center for Academic and Professional Enhancement has become quite active and better resourced. The Center has engaged in an assessment of faculty and staff needs, completed a faculty and course profile, and has developed individual and group workshops and courses in response to identified needs. CAPE membership includes not only staff members of CAPE, but individuals from all areas of campus (LEAD, HR, OI2T, the Library, faculty, and other staff) to enhance the types of services and offerings it provides. See Standard V.

5. Consider the establishment of a Staff Council to formalize inputs into the administrative process and to provide guidance regarding Human Resource policy. A formal staff council does not exist. However, staff members have been included in all aspects of the review and revision process of human resource policies and procedures. There is a campus benefits committee that includes staff members, which reviews and recommends actions regarding benefits. Staff members are also represented on the ISPRAC. See Standards II and V.

**Standard VI: Library, Computing, and Other Information and Learning Resources**

1. Address what is perceived as a very inadequate, deteriorating library budget. A realistic, objective needs assessment should be accomplished as soon as possible that addresses staffing, equipment, and desired level of service. The assessment should include current as well as expansion needs and address any policy changes that may impact the library. These findings should be time-phased into the overall strategic plan and pro-forma budgets. This continues to be addressed with enhanced spending on print and interactive media, staff, and library training. The Library Committee completed an assessment of program, faculty, and student needs and will continue this type of assessment on an ongoing basis. The new Library facility will provide a location conducive to such expansion as well, with improved staffing, equipment, and service. See Standard VI.

2. Take the necessary administrative actions to move forward in a timely and meaningful way to computerize the campus, particularly academic instructional needs. Relevant users, The campus has become completely computerized; classrooms are wired and complete with modern instructional technology See Standard VI.
through their committees and/or workshops, need to be involved and heard. and multimedia capabilities. SCT’s Banner 2000 software information system is being installed and implemented. Students in the DO and Pharmacy programs are required to have laptop computers to enhance their learning. Students in other programs are encouraged to do so as well. Computer training is a component of student orientation. Faculty and staff development activities include technology training, and self-paced computer training and assistance is available through the Intranet. Western University’s website is functional and continues to be enhanced. As of Summer 2000, the Library can be accessed through the website.

**Standard VII: Student Services and the Co-Curricular Learning Environment**

1. The Student Affairs Office, in coordination with the Student Senate and individual program faculty, should review each Student Handbook with three objectives: 1) Standardize the format and content as much as possible, 2) resolve inconsistencies wherever possible, and 3) after 1) and 2) above, determine feasibility of having a COMP [sic WU] versus individual program Student Handbook. The Student Handbook Committee reviewed and revised the student handbooks accordingly. There is a standard format and content for students in all programs, with specialty handbook sections for distinct aspects of each academic program. University policies and procedures have been separated from program-specific policies and procedures. These have been placed on the University’s website as well. These are reviewed annually as part of the Academic Affairs Council agenda. A review is being done to ensure consistency between the Student Handbook and the revised Faculty Handbook. See Standards III and VII.

2. Review the annual fall report regarding student profiles to ensure standard, consistent, comparable data portrayal for each school and clarity of labels (e.g., class data versus... With the implementation of SCT Banner 2000, all student data and reporting have become and will continue to be effective, consistent, See Standards VI and VII.
admit data by fiscal year).

standardized, and comparable for each program within the University.

| 3. Study staffing needs to at least maintain current quality service standards as expansion pressures continue to develop. | Staff members have been added to the Office of the Registrar (a new Registrar and Registrar Assistant) and to the Admissions Office. The Strategic Enrollment Management team has been added to enhance recruitment efforts across programs. Individual colleges have added student affairs personnel to enhance their ability to address student needs and concerns (COMP and College of Pharmacy). The Division of Student Affairs continues to address student needs and concerns for all colleges and programs. | See Standards VII and IV. |
| 4. Determine cost/benefits of expanding the out-of-state Black/Hispanic DO recruitment program to all programs. | This has been accomplished and is being achieved through the SEM process. | See Standard II. |

**Standard VIII: Physical Resources**

| 1. Consider the development of a formal facilities master plan to assist management. | The facilities plan is in the early stages of development. An inventory of space utilization has been conducted, and a space planning subcommittee of the ISPRAC will address long-term space planning. The ISPRAC, in conjunction with the Executive Vice President of Finance and Business, is reviewing the plans for the University Village in order to make recommendations for its implementation. The AAC considers space planning a priority issue. | See Standard VIII. |
2. Review security, the utilization of security guards, and the early closure policy for the campus.

The safety and security of the campus has been a strategic concern. Security guards facilitate the safety of the campus and ensure that only authorized individuals enter buildings, monitor parking lots, and provide a security presence in the campus neighborhood. Campus building hours have been extended so that students, faculty, and staff have access to the buildings in the evenings and on weekends for work and study. In addition, faculty members desiring access after hours have received keys to their buildings and training on the use of the campus security system.

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<th>Standard IX: Financial Resources</th>
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<td><strong>1.</strong> Continue efforts to diversify revenue streams through development and grant activities to ease the pressure on tuition.</td>
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The University has been successful in enhancing non-tuition revenue through development activities and grants and contracts. The Office of Grants, Research, and Contract Administration (GRCA) facilitates the process for faculty and staff in securing and administering grants and contracts. The University’s new Vice President for Advancement will begin work on January 1, 2001 and will enhance fundraising capabilities through the consolidation of the development operations, the Planned Giving Office, GRCA, and the Alumni Office. During the 2000-2001 academic year, the University engaged the services of a fundraising consulting firm to help develop a fundraising plan and to guide the University toward the development of a capital campaign. Finally, the Development Office participated in a process improvement activity facilitated by The Impact Group, LLC, to

See Standard VIII.

See Standard IX.
2. Continue to strive for meaningful communication and involvement of the campus regarding planning and budgeting. See II.2, II.3, II.4, and II.5 See Standards II and IX.

3. Review financial statement structures to ensure that management and the Board can readily interpret the financial posture and implications of its various programs and operations. Financial reporting and budgeting processes have undergone process improvement activities during 1999-2000 and continue during this academic year. Board of Trustees finance committees have been restructured for more effective oversight and management. See Standard IX.

4. Infuse more modern computer equipment, increased capacity, and software into the office of the Assistant Dean, Alumni Affairs. This will permit more extensive alumni profiles to be stored (shift in software will need study to minimize problems when downloading records into a new system). See VI.2 See Standards VI and VII.

5. As noted elsewhere, ensure adherence to the Board policy of not having expansion adversely impact existing programs. The President and University administration have ensured that all current programs are stabilized and well maintained to secure continued accreditation, and that expansion will not occur using current funding sources. As such, the development of the College of Veterinary Medicine, if granted reasonable assurance by the AVMA, will require the continuation of a comprehensive fundraising program to amass the necessary capital and initial operating funds. To date, the Dean of the College of Veterinary Medicine has been successful in garnering resources, and fundraising continues to be one of the College’s strategic goals. In addition, the University has determined that expansion into Las Vegas and acquisition of the California College of Podiatric See Standards IV and IX.
**Response to Recommendations from the WASC Interim Report**  
**March 1998**

**Faculty Staffing:** Faculty workload continues to be a challenge, though much progress has been made. Because of the distinct nature of each program, each college defines its faculty workload in terms of programmatic needs in the areas of instruction, research, clinical practice, and service. There is no one formula that meets the diverse needs of each of the programs and their diverse accreditation standards. All programs strive to stay in compliance with their professional accrediting body guidelines. Many new faculty members have been hired to complete the staffing necessary for the College of Pharmacy and COMP. The addition of clinical chairs in Family Medicine, Surgery, Pediatrics, Geriatrics, Internal Medicine, and Obstetrics/Gynecology has enhanced the ability of COMP to prepare students for their clinical rotations and to develop and monitor students’ progress throughout years three and four. In addition, research faculty, including a biostatistician and an epidemiologist, have been hired to assist in the development of a more active research presence.

All faculty members annually negotiate their distribution of effort with their program chair or dean. This allows for flexibility in faculty work assignments based on interest, expertise, and program need. Faculty then develop goals for performance and a professional development plan on which they are evaluated each year. A description of progress made in addressing faculty staffing is presented in Standards IV and V.

**Laboratory and Computer Facilities:** The institution has far exceeded its goals and expectations with regard to computing. The campus is wired; faculty, staff, and administrators all have desktop computers, which facilitate their daily work; computer training is readily available through self-paced programs on the University network, one-on-one and group instruction from I2T and CAPE personnel, and external courses; Pharmacy students have been required to have laptop computers for their educational program since the College's inception; COMP’s first-year class was required to have laptop computers this academic year, as will all future classes; classrooms are wired and have sophisticated instructional technology and multimedia services available; and Blackboard courseware has been installed on the network to facilitate technology-enhanced instruction. The College of Graduate Nursing distance program is fully developed and served well by instructional technology and other learning materials. Online courses and programs are in various stages of development. In terms of administrative systems, Banner 2000 software is well on its way to being implemented. The Student Affairs module is complete, and the Finance and Financial Aid modules are being put into place at this time. Legacy systems are being phased out as the new systems are completed.
Though enormous progress has been made in computing, faculty, staff, and students continually raise concerns regarding information and instructional technology needs. It has been difficult to meet all campus computer training needs, especially when some faculty and staff come underprepared in this area. As systems change over time, individuals who were comfortable with the legacy systems need time to develop such levels of comfort with new systems. As more and more individuals gain access to the network, concerns about computing speed and access to printers arise. Finally, though the size of the information technology staff has grown, there seems to be limitless need for their services, which at times are viewed as slow and unresponsive. New procedures and policies are being developed to enhance service.

An excellent description of the achievements of Western University in the area of information technology is presented in Standard VI, with complete details in tabular form of computing capabilities and policies. Details of institutional spending on information technology are presented in Standard IX.

**Library:** Another area of good progress is in the Library. Significant planning has occurred with regard to the Library as the completion of the new building approaches. Standard VI details the assessment process that occurred and continues to occur with regard to faculty, student, and program needs relative to the Library. A significant infusion of funds has occurred, and collections in all areas have grown. Electronic resources continue to be a priority, and new staff have been recruited to assist in this area. Library staffing has grown to accommodate the growth in the student body, and staff members have been provided training opportunities to improve skills. The staff members of the College of Veterinary Medicine have vigorously begun to gather print and internet resources so that when the College obtains reasonable assurance and enrolls its first class, the Library will be fully equipped to meet their reference needs for instruction and research.

As with information and instructional technology, library requirements and desires can continue to grow extensively. Though much progress has been made, individuals on campus still express needs for more resources, access to more resources on the Internet, and more open hours for study purposes. The table in Standard VI details all aspects of the Library’s operations and holdings.

**Institutional Policies:** The institutional policy noted as needing further development during the interim review was the staff grievance process, which lacked peer involvement. This situation has been remedied, and a new staff grievance policy has been implemented. This policy, renamed the Problem Resolution Procedure, is presented in Appendix I.3, and incorporates peer review as one of its many features. Staff response to this policy has been very positive, though some staff members have voiced concerns about how members of the Problem Resolution Committee are selected. This issue has been raised with the new Director of Human Resources and the Cabinet.
Part F - Preface

This Self-Study for the Western University review by the Western Association of Schools and Colleges (WASC) is designed to provide evidence that the University satisfies the criteria for reaccreditation as delineated by the Commission on Senior Colleges. The evidence accumulated by the nearly two-year process to create this self-study document strongly supports the contention that the University satisfies these criteria. The significant effort involved in the self-study process has had two other purposes that relate to the thematic approach taken by Western University in completing the Self-Study. First, the process allowed Western University to assess and evaluate its accomplishments over time. Second, the process helped the University to look forward and plan strategically for the evolving and dynamic educational and health care environments.

Western University has clear and publicly stated purposes consistent with its mission and appropriate to an institution of higher education. The institution has effectively organized the human, financial, and physical resources necessary to accomplish its purposes. Western University is effectively accomplishing its educational and other purposes, and can continue to accomplish its purposes, while continuously strengthening the educational effectiveness of all of its programs.

This report will demonstrate that Western University meets and is expected to continue meeting the Commission’s requirements and criteria as a distinctive institution of higher education.

To achieve the aims of our thematic approach, we established the following goals for our self-study process:

• To demonstrate that Western University is academically strong and anticipates the challenges of the next decade.
• To assure that the reaccreditation process is of long-term benefit to the University.
• To clarify and fulfill our mission as a graduate university of medical sciences that educates health professionals to practice and teach with excellence and compassion. Within a learner-centered environment, the University encourages lifelong learning, supports faculty and student scholarly activities, provides patient care in support of clinical training, and enhances the quality of life in the region through community service.
• To work toward achieving our vision of becoming THE graduate university of medical sciences of choice in the western United States.
• To inculcate our values throughout the organization. These values are to ensure that the people of Western University are dedicated to caring as they pursue their educational, scholarly, patient care, and public service activities. The University encourages the diversity and interdisciplinary nature of its programs, students, faculty, staff, and administrators. The ideals of continuous quality improvement, lifelong learning, long-term planning, fiscal strength, adaptability, and agility in the rapidly changing worlds of health care and education are realized through innovation, teamwork, and collaboration within the University as well as with its network of academic health centers and community partners.
• To demonstrate the significance of the transition beginning in 1996 from a college of osteopathic medicine to a graduate university of medical sciences.
Introduction

Western University is engaged in a process of strategic management that joined the institution’s strategic planning process with the WASC accreditation review process, the goal of which is continuous quality improvement.

Strategic Management Cycle

This methodology allowed Western University to demonstrate compliance with the original nine accreditation standards, while making the content and process of accreditation more relevant both to the institution and to the public. As such, we have shifted our focus from an “in/out of compliance” stance on every issue to a recognition that many aspects of quality are best addressed on a continuum, and have placed a greater emphasis on evidence of institutional and educational effectiveness. This process guarantees that Western University will:

- reflect on its vision and mission regularly;
- assess the environment in which it operates;
- specify goals, objectives, and strategies to pursue its mission and vision;
- measure outcomes on a regular basis to evaluate progress toward goals with the aim being quality improvement in all areas; and
- ensure that resource allocations and reallocations are tied to the strategic plan.

Western University, a private, nonprofit, graduate university of medical sciences, was in a unique position to accept WASC’s challenge of engaging in a nontraditional self-study process. In collaboration with Judie Gaffin-Wexler, our initial WASC liaison, it was decided that Western University would engage in a thematic self-study rather than the traditional approach of focusing simply on compliance with accreditation standards.

Because the professional programs that comprise the majority of Western University are separately accredited by their relevant professional accrediting bodies,
and because these standards are quite rigorous and, in fact, similar to the WASC standards, we have included as an appendix the most recent letters of accreditation for the following programs: Doctor of Osteopathic Medicine (American Osteopathic Association), Doctor of Pharmacy (American Council on Pharmaceutical Education—ACPE), Physical Therapy (Commission on Accreditation of Physical Therapy Education—CAPTE), Physician Assistant (Commission on Accreditation of Allied Health Education Programs—CAAHEP), and Master of Science in Nursing/Family Nurse Practitioner (Board of Registered Nurses and Commission on Collegiate Nursing Education) (see Appendix F.1). In addition, included as an exhibit are the relevant self-study documents prepared by our College of Veterinary Medicine, which is seeking reasonable assurance status from the Council on Education of the American Veterinary Medical Association (see Exhibit F.1).

In the paragraph that follows, we present the accreditation status of all Western University programs that are separately accredited. Two programs, the Master of Science in Health Professions Education (MSHPE) and the Master of Science in Health Sciences (MSHS), are the only programs not separately accredited. These programs undergo a regular academic program review process (see Exhibit F.2 for a description of the program review process).

The academic programs of the College of Osteopathic Medicine of the Pacific (COMP) are accredited by the Bureau of Professional Education of the American Osteopathic Association. The upcoming site visit for COMP is scheduled following the WASC site visit in April 2001 (see Exhibit F.3 for COMP self-study). COMP is approved by the Osteopathic Medical Board of California. The Doctor of Pharmacy program of the College of Pharmacy has been granted full accreditation by the American Council on Pharmaceutical Education (ACPE), the third of three steps in the ACPE accreditation process for new schools or colleges of pharmacy. This occurred as the charter class graduated in June 2000. The results of the most recent site visit of the ACPE to the College of Pharmacy (April 4-6, 2000) and the report of the ACPE regarding Accreditation Action and Recommendations are included in Appendix F.4. The Master of Physical Therapy program in the College of Allied Health Professions is accredited by the Commission on Accreditation in Physical Therapy Education of the American Physical Therapy Association. The most recent site visit for the PT program was November 8-10, 1999; the self-study and review results are presented in Exhibit F.5. The Physical Therapy program was notified of eight-year accreditation in June 2000. The Primary Care Physician Assistant Program of the College of Allied Health Professions is accredited by the Commission for the Accreditation of Allied Health Education Programs, and a site visit is expected in 2003. The self-study document and review results of the last accreditation review (April 1998) are presented in Exhibit F.6. The Master of Science in Nursing/Family Nurse Practitioner degree program is recognized by the Board of Registered Nursing (BRN) and the proposed criteria of the American Association of Colleges of Nursing. Concurrent with this review, the College of Graduate Nursing (CGN) is undergoing its site visit by the CCNE (see Exhibit F.7 for the CGN Self-Study).
Part G – Institutional History and Description

Introduction—Western University is a nonprofit, independent, graduate university of medical sciences, founded as the College of Osteopathic Medicine of the Pacific (COMP) in 1977. The founding mission of the institution was to educate primary care osteopathic physicians for the western United States. Over the past two decades, Western University has preserved and enhanced its mission, expanding it to include graduate and professional education programs in the allied health professions (PA, PT, MSHPE), pharmacy, nursing, and, soon perhaps, veterinary medicine.

Institutional Mission (revised May 2000)—Western University is a graduate university of medical sciences that educates health professionals to practice and teach with excellence and compassion. Within a learner-centered environment, the University encourages lifelong learning, supports faculty and student scholarly activities, provides patient care in support of clinical training, and enhances the quality of life in the region through community service.

Institutional Educational Philosophy—Western University is committed to sustaining an active learning environment within and across each of its academic programs. Several techniques are in various stages of development, evaluation, and improvement to accomplish this goal, each centering on the student: critical thinking, case studies, problem-based learning (PBL), competency-based evaluation, team-based learning, interdisciplinary education and training, individual and group student projects and demonstrations, evidence-based medicine and health care, and others (see academic program self-study documents). The foundation for this active learning environment is a developing system of health care informatics, built on a web-based educational platform that supports the roles of our graduates as lifelong learners, clinicians, educators/communicators, researchers, and managers.

Western University’s interest in creating an active learning environment is not new, but the resolve and resource allocation to support these activities is. Western University is in the process of moving away from a passive learner model in which the student receives information from the faculty member. In this evolving learning environment, students must take an active role in their learning through synthesis, problem-solving, and evaluation methods. Faculty members assume the role of guides and/or mentors to ensure that students have access to reliable, current information, are able to draw appropriate conclusions from various sources, and are able to apply these conclusions through the provision of patient-specific care.

The educational programs of Western University are based on the belief that schooling should not be allowed to get in the way of education, and that the content and substance of the curriculum, as well as the instructional and planning processes used to carry it out, should reflect the University’s humanistic approach to patient care. The University strives to provide a people-oriented program so that its students become people-oriented health care professionals.

The basic sciences are integrated with the clinical programs to make the knowledge, information, and technical skills we teach relevant to the role of the physician and health care professional. Each student is encouraged to reach his or her fullest potential by emphasizing the individual’s strengths. Western University students, therefore, are co-participants in the learning process.
The faculty, staff, and administration of Western University accept responsibility for:

- Building high quality, interdisciplinary health professions programs focused on teaching and learning; faculty-student interactions on a regular, ongoing basis; and the application of knowledge through practice and experience;
- Maintaining academic programs in the social context and ethos of good citizenship, caring, and humanism;
- Fostering an environment that promotes the discovery, application, integration, transfer, and dissemination of knowledge and technology in the basic and clinical sciences; the social, economic, and cultural aspects of health care; and health professions education;
- Fostering an environment for the detached, impartial evaluation of societal issues, particularly those surrounding health and disease;
- Providing a strong, financially sound foundation for patient care, educational and public service programs, and community service;
- Assuring a pool of specialized professionals that the University makes available to government, industry, and the public at-large; and
- Offering educational programs specifically targeted to adult learners.

Western University Values. The faculty, staff, administration, and students of Western University are dedicated to caring as they pursue their educational, scholarly, patient care, and public service activities. The University encourages the diversity and interdisciplinary nature of its programs, students, faculty, staff, and administrators. The ideals of continuous quality improvement, lifelong learning, long-term planning, fiscal strength, adaptability, and agility in the rapidly changing worlds of health care and education are realized through innovation, teamwork, and collaboration within the University as well as with its network of academic health centers and community partners.

Western University History. The founding institution of Western University, the College of Osteopathic Medicine of the Pacific, was established in 1977 as a direct and important response to a critical shortage of primary care physicians in the western United States. Philip Pumerantz, PhD is the founding president. In January 1978, COMP received pre-accreditation status from the American Osteopathic Association. Provisional accreditation status was achieved in July 1978, and full accreditation was awarded in February 1982. Classes began for 38 students in October 1978, and the charter class graduated on June 13, 1982.

In response to a national demand for qualified clinical educators, the College initiated a Master of Science in Health Professions Education (MSHPE) program in September 1986, housed within a newly created Graduate Division. The charter class graduated in June 1987. The program has since grown, and its student body reflects a wide spectrum of health professionals. The first class of Physician Assistant (PA) students matriculated in February 1990. With this programmatic addition, the Graduate Division became the Division of Allied Health Professions and, subsequently, the College of Allied Health Professions. The opening of the PA program signaled a new era in which COMP began to address an expanded mission of educating family-oriented health care professionals for the western United States.
The growing need for physical therapists nationwide led to the development of the Master’s Degree program in Physical Therapy (PT) in January 1992, housed within the School of Allied Health. The charter PT class was comprised of 49 students taught by five faculty members. The program educates physical therapists to be generalists who are concerned about wellness, health promotion, and a humanistic approach to the care of the whole patient.

In 1991, the institution achieved the status of an Academic Health Center owing to its multifaceted programs in medical and allied health education. The academic health center formed a partnership with San Bernardino County Medical Center, which moved to a new location in Colton under the new name, Arrowhead Regional Medical Center (ARMC), in the fall of 1998. The partnership, known as the Academic Center for Excellence in the Health Sciences (ACEHS), provides the University with a primary teaching hospital. Other institutions that meet specified standards have been invited to participate in the Center. ACEHS now includes ARMC, Riverside County Medical Center, Loma Linda, and Western University. A parallel organization, additional hospital partners represent a consortium of residency training programs and COMP (see report of the OPTI accreditation visit of August 2000, Exhibit G.1).

In August 1996, the institution was restructured and took a new name—Western University of Health Sciences. A new College of Pharmacy was opened and enrolled its charter class into the Doctor of Pharmacy program, the fourth college of pharmacy in the State of California. The College prepares pharmacists who are competent, qualified professionals who are educated in a humanistic, interdisciplinary manner. In January 1997, Western University expanded its presence in northern California by developing a site in the city of Chico, offering a Physician Assistant certificate program and a Master of Science in Nursing/Family Nurse Practitioner degree program. In March 1998, a College of Graduate Nursing was created to enhance the University’s educational offerings in advanced practiced nursing. A College of Veterinary Medicine was planned, and a request for reasonable assurance of accreditation was made to the American Veterinary Medical Association.

Western University Organization. (see following page)
Institutional Effectiveness Organizational Chart

**Center for Academic & Professional Enhancement**
- Learning Enhancement & Academic Development
- Staff Development
- Curriculum & Instruction
- Academic Evaluation & Assessment
- Faculty Development

**Management Information/Banner 2000**

**Data from Banner 2000 Operating System**
- Admissions/Registration
- Financial Aid
- Human Resources
- Finance
- Alumni Rotations

**Office of Information & Instructional Technology**
- Library

**Office of Strategic Planning & Institutional Effectiveness**
1) Ask the right questions/design & do studies
2) Coordinate reports
3) Conduct Analyses
4) Use assessment & evaluation tools
5) Teach campus to use information

**Institutional Strategic Planning & Resource Advisory Committee (ISPRAC)**
(Suellen Crano, Chair)

**Best Practices**
- Goals:
  - Continued Accreditation,
  - "Enhanced Student Learning and Outcomes,"
  - Strategic Growth & Fiscal Responsibility

**President’s Cabinet:**
G. Charney
S. Crano
G. Gugelchuk
D. Krpan
C. Oberg
M. Peshkam
P. Pumerantz

**Evaluation of Institutional Accreditation**

**Academic Affairs Council**
(George Charney, Chair)
- COMP
- COP
- Student Affairs
- CAHP
- CVM
- CGN
- OSPIE
- CGRA
- CDIHP

**Office of Strategic Planning & Institutional Effectiveness**
- Program
- Faculty
- Facilities
- Information (Library and Instructional Technology)
- Advancement

**Other Data Required**
- Program
- Faculty
- Facilities
- Information (Library and Instructional Technology)
Western University Location and Facilities

The main campus of Western University is in Pomona, California, located about 35 miles east of Los Angeles near the foothills of the San Gabriel Mountains. It is an area with a high concentration of private and public colleges and universities. The Pomona campus buildings include an Academic Center, a Business Center, a Health Professions Center, a Health Sciences Center, a University Bookstore, a Student Services Center, a University Administration Center, the new Library, and a campus restaurant.

Western University at Chico. During the 1995-1996 academic year, Western University established a task force to review opportunities and assess the potential for expanding its educational programs into the northern California region. The committee reviewed the need for health professionals in the northern California region and the availability of clinical opportunities, and recommended that a branch campus be established, initially offering midlevel practitioner education, with other educational programs following at a later date. The City of Chico was selected for this campus, based upon local community support and the availability of other higher education resources in the city. Initially, a satellite of the Pomona-based PA program, utilizing videoconferencing capabilities between the two campuses, and a new web-based MSN/Family Nurse Practitioner program were offered on the Chico campus. Initial classes of students were matriculated into both programs in January 1997.

The PA program enrolled a charter class of 30 students for the first year of didactic education of the program, and seven students were enrolled in the MSN/FNP program. Nearing the completion of the first didactic year for the PA program, efforts at recruiting sufficient clinical sites that met the PA program’s clinical education requirements fell short of what was needed to sustain 30 students entirely in the northern California region. The region’s clinical education opportunities were supplemented with sites in the southern California region. A second cohort of 38 PA students was accepted in August 1997, and these students successfully completed their initial didactic year in July 1998. However, regional clinical educational opportunities could not keep up with this size of student class. Strategies were considered to reduce the size of the PA classes in light of the clinical training shortfall and still sustain essential operations of the Chico campus. Growth in the MSN/FNP program remained below projected numbers, further adding to budgetary pressures. As a result, the PA program recommended that the number of students to be placed in the northern California region be drastically cut, and that offering the first-year curriculum of the PA program on the Chico campus be eliminated. Instead, students would receive their initial year of education on the Pomona campus, and a smaller group of 18-20 students would then be assigned to a northern California clinical track. This strategy eliminated the need for classroom space and student support personnel on the Chico campus. All but one faculty position were then transferred to the Pomona campus. Thus, beginning in August 1998, all first-year PA education took place on the Pomona campus.

Chico facilities were moved from their former location to space rented from the Northern California College of Law. To expand MSN/FNP recruitment into that program, the College of Graduate Nursing initiated a branch of its program on the Pomona campus. Finally, during the 1999-2000 academic year, it was determined that the University would be better served to locate a faculty and staff onto the Pomona campus, so even these reduced facilities at Chico were dropped at the end of that academic year. Clinical training activities for both programs could be supplied by sending faculty from
Pomona to northern California as the curriculum required. Significantly, coordinated
presence of the Nursing program on the Pomona campus has allowed enrollment in that
program to grow to 36 students starting in August 2000.

Simultaneous with the “rightsizing” of the northern California PA program, the faculty
and administration of the College of Allied Health Professions worked to open up training
opportunities in the Las Vegas area. As a result of growth of the City of Las Vegas,
there was a definite need for additional health care providers to meet this growth. In
addition, expanding the geographic focus of our PA program into the southern Nevada
market would also serve to alleviate some of the stress on clinical education sites in the
southern California region and introduce PAs to a geographic area where PAs were in
short supply. At the same time, the College of Pharmacy was considering an expansion
of its program to meet the need for pharmacists in the southern Nevada area. After
study, the Dean of Pharmacy recommended that this not be pursued. For the PA
program, establishment of a southern Nevada track similar in structure to that eventually
developed to support sustained education in northern California was determined most
compatible to the PA program. One faculty position and a full-time secretary position
were reassigned from Chico to Las Vegas to coordinate clinical educational
opportunities in southern Nevada.

**Western University Health Care Facilities and Medical Centers** comprise a health
care delivery network that has been established to serve as educational facilities for
Western University students and meet the needs of the communities in which they are
located. The Western University Medical Center on Mission Boulevard in Pomona
opened in 1984. It is an ambulatory primary care medical center that provides clinical
learning opportunities for Western University students and OPTI partner residents, and
addresses the health care needs of Pomona’s less advantaged communities as well as
those from participating managed care organizations. Osteopathic family physicians,
physician assistants, and nurse practitioners, who are also Western University faculty
and support personnel, staff the medical center. In addition, the Center provides health
screening for youth athletic programs and is a member of the Pomona Clinic Coalition,
which provides preventive and primary health care services to people who do not have
medical insurance or cannot afford medical care.

The Osteopathic Center for Children in San Diego (OCC) consists of osteopathic
physicians, a developmental optometrist, a neurological developmentalist, a therapeutic
musician, and support staff. Its mission is similar to that of Western University’s Mission
Medical Center.

Most of the physicians and physician assistants who work at Western University
Health Care Facilities and Medical Centers have faculty appointments at Western
University and are involved in both the didactic and clinical teaching aspects of the
curriculum.
Part H - Internal Assessment Standards I-IX

Standard I: Institutional Integrity

Western University clearly states its philosophy and policies regarding expected institutional standards of academic and social conduct. The current catalog (see Appendix I.1), as well as faculty (see Appendix I.2), employee (see Appendix I.3), and student handbooks and program brochures (see Appendix I.4 and I.5, respectively), all have clear statements regarding integrity, honesty, the exercise of critical and objective judgment, and the maintenance of an atmosphere conducive to freedom of inquiry and academic freedom. These statements also address the responsibilities associated with these freedoms.

The University maintains a commitment to diversity of students, faculty, and staff. This commitment is evidenced in the University’s statement on diversity (see Appendix I.6 and in the various University publications). The University has achieved much success in enhancing the diversity in various constituencies (see Demographic Information). The number of women and ethnic minorities has continued to increase across campus. There still has been difficulty in enhancing gender diversity among faculty in some programs (i.e. males in the Physical Therapy and Nursing programs, and female basic scientists in the COMP), and in attracting faculty of color as well. Student diversity remains an issue in some programs (i.e. the dearth of students of color in the Physical Therapy program, which is a national issue as well), but the University maintains its commitment to enhance the diversity of the student body and has implemented programs to encourage such diversity. The Strategic Enrollment Management process (see Standard II) addresses diversity issues as well.

A basic underlying principle of the COMP Admissions Process Improvement activity, overlapping academic years 1999-2000 and 2000-2001, was to maintain and enhance the diversity of the admitted class. In addition, the academic achievement of minority students was studied to develop methods and practices to enhance the abilities of students from diverse backgrounds to achieve their educational goals.

With all of the positive steps taken regarding diversity, there was, however, an indication that the situation was not optimal, especially regarding female employees on campus. The President convened a task force to study and address such issues, and a preliminary statement on the Environment for Employees, with goals to ameliorate the situation, has been developed (see Appendix I.7).

During the previous site visit, it was noted that none of the top executives was a woman. That situation has been remedied. In 1991, a woman was appointed as Vice President of Human Resources. Hired in January 1999, the Vice President of Strategic Planning and Institutional Effectiveness, who sits on the President’s Cabinet and the Academic Affairs Council, is a woman. The Assistant Vice President of University Advancement and the Vice President for Facilities are also women. Of the five academic deans, three are women (Allied Health, Veterinary Medicine, and Graduate Nursing). The Dean of Student Affairs and the Dean of Alumni are women as well. Two deans, as well as the Chair of the Department of Physician Assistant Studies, represent ethnic minorities. Therefore, the Academic Affairs Council is represented by individuals with diverse backgrounds and professions.
The institution has maintained its student and faculty grievance policies (see faculty and student handbooks). The grievance policy was revised and renamed the Problem Resolution Procedure in Fall 2000 (see Appendix I.8 for policy and composition of new Problem Resolution Committee). Faculty and student policies were viewed as less than optimal during the last site visit, and have since been reviewed and revised. In addition, the current Faculty Handbook is undergoing a review and revision process with completion expected by the end of Spring 2001.

Representations (both oral and in writing) about the institution to prospective students and to the public are accurate and consistent with institutional publications and practices. Attempts are made to ensure that precise, accurate, and current information about the University and its programs are disseminated in a timely manner, especially regarding educational purposes; degrees, curricular programs, educational resources, and course offerings; student charges and other financial obligations, student financial aid, and fee refund policies; requirements for admission and for achievement of degrees, etc. However, there have been instances in which information regarding issues related to students was not disseminated in as timely a manner as possible. For example, during the summer of 2000 a determination was made to require first-year students in the College of Pharmacy and COMP first-year programs to lease standardized laptop computers to enhance these academic programs. The $1250 annual fee was added to the tuition and fee structure at a late date (after tuition deposits had been paid) to accommodate this change. Many students were displeased with this decision because they either had comparable or better equipment or they had not planned on this expense given the prior communication from the institution. Students met with campus administrators regarding this decision, which was upheld. Consequently, there is student unhappiness about this particular issue. The administration is reviewing this situation and determining how to address similar situations better in the future by including a broader constituency in the decision-making process, and by making decisions and communicating the results earlier in the admission process.

Another such issue occurred with the change from a certificate to master’s degree Physician Assistant (MSPA) program. Some students in the first year of the MSPA program do not feel that they received adequate communication regarding the change in tuition from the rate of the certificate program to the rate of the master’s degree program until after they paid their deposit. This issue did not surface until a focus group session in late October 2000. The issue is being studied to determine how communication actually occurred and how to avoid such misunderstandings in the future.

Finally, some first-year COMP students have expressed concern regarding the policy changes for clinical rotations. Some students claim that they were attracted to COMP because of the flexibility of clinical rotation locations across the country. However, owing to its own concerns about improving and strengthening clinical education, COMP has been developing block rotations in a select group of hospitals and medical facilities in order to monitor student progress better and to maintain stronger control over the quality of the educational experience of students on rotations. This is in its second year and has successfully ingrained the clinical education process. As this information is communicated to first-year students, some are voicing complaints regarding the undesirability of this system and the fact that flexibility was one distinct attribute that attracted them to COMP. This, too, was raised in a focus group session in late October 2000, and will be addressed by the Dean of COMP and his administration.
Plan of Action:

1. Continue to enhance the diversity of faculty and students in academic programs, especially COMP, Physical Therapy, and Graduate Nursing.
2. Continue to focus on building a campus environment in which all employees feel valued, respected, and treated equitably.
3. Implement a diversity awareness program.
4. Monitor the implementation of the staff grievance policy and modify as appropriate.
5. Complete the development and implementation of the Strategic Communications Plan to ensure that information is shared effectively with constituents in a timely manner.
6. Ensure that programmatic decisions affecting students are made in a timely manner so that students receive complete information about program requirements, tuition, and fees prior to their accepting admission.
Standard II – Institutional Purposes, Planning, and Effectiveness

Western University is guided by clearly stated purposes that are appropriate for higher education and are consistent with the WASC Commission’s expectations.

New University Mission Statement:

Western University is a graduate university of medical sciences that educates health professionals to practice and teach with excellence and compassion. Within a learner-centered environment, the University encourages lifelong learning, supports faculty and student scholarly activities, provides patient care in support of clinical training, and enhances the quality of life in the region through community service.

As Western University has evolved from a single-purpose osteopathic medical college to a graduate university of medical sciences, many changes have occurred. In accordance with the institutional growth and development that has occurred recently, requisite institutional planning, assessment/institutional effectiveness, and development activities have been strengthened.

All educational programs are demonstrably related to the mission of the institution (see Standard IV, Educational Programs), and physical and financial resources clearly are related to the University’s purposes (see Standards VIII and IX, respectively).

As noted in the report of the WASC Initial Accreditation Visitation of the College of Osteopathic Medicine of the Pacific dated October 24-27, 1995, “Strategic planning seems to be coming into its own as a meaningful management tool for the campus. One of its obvious objectives is to get the campus in its entirety to constructively think about the campus—where it is and where it is going—and the implications it has for each. In various discussions, the team heard a sufficient number of ‘lack of involvement’ concerns to suggest that the planning roots have not yet fully penetrated through the campus.” As is presented in the remainder of this section, progress has been made. This is due, in part, to the entrepreneurial way in which some decisions about University growth and development have been made in the past. However, the President, the Cabinet, the Academic Affairs Council, and the Institutional Strategic Planning and Resource Advisory Committee (ISPRAC) continue to move forward in this area. The ISPRAC membership has been broadened and members of all groups have been encouraged to work with their constituencies and engage in dialogue regarding institutional issues. Information is shared and feedback is solicited at all levels. Perceptions do not change over night, nor do institutional power structures. The President, the Cabinet, and the Academic Affairs Council are committed to moving the institution further and further along in its development and implementation of a true shared governance model, with appropriate consultation and decision making at the right levels of the organization (see Exhibit II.1 for AAC minutes).

As indicated in the sections that follow, Western University is engaged in ongoing planning, and that process helps the University to analyze itself and review its purposes, policies, and procedures accordingly. Western University uses the results of its comprehensive institutional assessment activities to improve practice, and considers
both internal and external environmental factors in the planning process (see Parts H and I, Internal and External Environmental Scans).

In the 1995 WASC review, it was noted that “…overall planning by the institution appears to focus mainly on expansion and expansion is nothing short of amazing… Although the Board President stated firmly, ‘It is policy that we will do nothing that hurts existing programs,’ a continuing evaluation is essential to ensure the validity of that policy.” That policy still exists, and as the University is engaged in an attempt to achieve reasonable assurance from the American Veterinary Medical Association for a new College of Veterinary Medicine, the President and Cabinet members continue to assure the community that the College of Veterinary Medicine will not be built upon the resources of the existing colleges, but that external funding is being and will continue to be secured if that program were to begin. As stated previously, all but two of Western University’s programs are accredited by a professional accrediting body (the MSHPE and MSHS programs do not have such a body). The resources necessary to achieve such accreditations have been dedicated to each program and will remain with those programs so as not to jeopardize future WASC reaccreditation.

The suite of programs selected to be a part of Western University has been developed with great strategic thought. The addition of other new programs has been considered throughout the years, and those considered to date but not incorporated have been deemed inappropriate for a variety of reasons. Programs considered for development included a college of pharmacy in Las Vegas and incorporation of the California College of Podiatric Medicine into Western University of Health Sciences.

Western University’s strategic planning activities are under the purview of the Office of the Vice President of Strategic Planning and Institutional Effectiveness. The Office coordinates the activities of the Institutional Strategic Planning and Resource Advisory Committee (ISPRAC) and its Assessment Subcommittee (see Exhibits II.2 and II.3, respectively, for meeting agendas and minutes).

The proposed role of the Office of Strategic Planning and Institutional Effectiveness was redefined to include:

- Maintaining a dynamic and representative planning process grounded in continuous quality improvement.
- Maintaining a dynamic self-study process by college, program, unit, and, ultimately, the University.
- Identifying and/or responding to evaluation and assessment needs of the University, and its colleges, programs, and units.
- Serving as the liaison among programs, the University, and accrediting agencies.

During academic year 1999-2000, a review of institutional planning activities took place. It was determined that planning activities occurred at various levels of the institution, using a variety of methods, with different outcomes expected. These activities occurred at the following levels—Board of Trustees, President’s Cabinet, Academic Affairs Council, Institutional Strategic Planning and Resource Advisory Committee, and within individual colleges, programs, and units. Most of those planning activities were weighted heavily toward administrator involvement. In November 1999, a
proposal was put forth to reconstitute the ISPRAC so that it could serve as a forum for coordination, communication, and facilitation of all elements of University planning by:

- Focusing on faculty, staff, and student participation.
- Inclusion of administrators with direct links to faculty and student-related issues.
- Linking the agenda to resource planning (not just budget, but human, information and external resources).

The ISPRAC was reorganized in March 2000 (see Appendix II.1 for Committee membership).

A Strategic Planning retreat was held in October 1999, facilitated by a consultant, Michael G. Dolence. Participants were briefed on the Strategic Enrollment Management (SEM) activities of the University. A roundtable discussion by program identified additional information to support the development of an effective SEM process. Partnerships between the SEM team and offices/individuals around campus were identified to enhance success. A staffing plan for the Admission/Recruitment operation that is consistent with the SEM plan was determined to be essential.

Participants were briefed on the external environment facing higher education and the health professions locally, nationally, and internationally. This overview set the tone and established a context for future strategic planning activities by identifying opportunities and barriers to existing Western University programs. Participants examined several scenarios, and discussed and defended various strategies and tactics to address them. Finally, the next steps were identified for the planning process:

- Ensure involvement of the total organization
- Level the knowledge base
- Formalize a process
- Ensure that planning is linked to decision making
- Ensure that planning is linked to resources
- Determine who we are and who we should be
- Review our mission and revise as necessary

Managing For Results

The next step led to the conclusion that once we know who we are, where we are going, and how we will know when we are there, we can best decide how to get there. A brainstorming session was held to answer these questions. Presented below is the outline of activities that have informed our current planning process.

I. Who and What Are We? (Environmental Scan)
   B. Assessment Subcommittee/WASC Steering Committee (ongoing)
   C. Climate Study (Summer 1998)
   D. Admitted Student Survey (Summer 1999 and 2000)
   E. PT-Admitted Student Survey (Fall 1999 and 2000)
   F. Critical Thinking Assessments (ongoing, each fall)
   G. Faculty Profile (Fall 1999)
   H. Course Profile (Fall 1999; Spring 2001)
I. Faculty Development Needs Assessment (Fall 1999)
J. Staff Professional Development Needs Assessment (Fall 2000)
K. Process Improvement Survey (Fall 1999)
L. College and Program Graduation Surveys (COMP and Pharmacy beginning in Spring 2000, and other programs ongoing)
M. Alumni Survey (Fall 1999 and ongoing)
N. Interview Day Survey (Fall 1999 and ongoing)
O. OMAC Evaluation (Fall 1999 and ongoing)
P. OPTI Accreditation (August 2000)
Q. First-Year Student Survey (Spring 2000)
R. Library Review and Planning (beginning Summer 1999)
S. Student Evaluations (ongoing)
T. Student Outcomes Assessment Plan (beginning in Fall 1999, annual review and revision)
U. Faculty Evaluations (ongoing, annually)
V. Administrator Evaluations (ongoing, annually)
W. Specialized Assessments (e.g., ISAC program assessments, Admissions Process Review assessments)
X. Staff Evaluations (ongoing, annually)
Y. Hiring Authority Satisfaction Survey (Spring 2000)
Z. Employer Surveys (1999 and ongoing)
AA. Accreditation Self-Studies and Site Visits
  1. DO (Spring 2001)
  2. Graduate Nursing (Spring 2001)
  3. Pharmacy (Fall 1999-Spring 2000)
  4. PA (Spring 2003)
  5. PT (Fall 1999)
  6. WASC (Spring 2001)
  7. Veterinary Medicine (Fall 1999 and ongoing)
BB. Program Review of MSHPE (2000-2001 academic year)
CC. Program/Unit Annual Reporting and Goal Setting (annually in the spring)
DD. President’s State of the University Address and University Annual Report (annually in the fall)
EE. External Environmental Scan (updated annually in the spring)
FF. IPEDS and Other Federal and State Reporting (annually)

II. Where Are We Going? (Strategic Directions)
A. Institutional Strategic Planning and Budget Advisory Committee (ongoing)
B. Assessment Subcommittee/WASC Steering Committee (ongoing)
C. Strategic Planning Retreat and Revision of Strategic Plan (Fall 1999-Spring 2000)
D. Alignment of Budget with Strategic Plan (beginning with 1999-2000 budget cycle and ongoing)
E. College and Unit Strategic Planning (ongoing and reported annually in May)
F. Strategic Enrollment Management (beginning Summer 1999 and ongoing)
G. President’s Cabinet and Academic Affairs Council (ongoing)

III. How Are We Going To Get There? (Strategies)
A. President’s Cabinet (internal reorganization)
B. Academic Affairs Council
C. Faculty Senate
The Office of Institutional Effectiveness

The Office of Institutional Effectiveness was initiated and is supported and encouraged by the President, Board of Trustees, and Cabinet. Institutional effectiveness activities at Western University are focused on assisting with the University’s continuous quality improvement and strategic planning activities. Staff engaged in institutional effectiveness continue to coordinate the accumulation of accurate data about all aspects of the institution, analyze the interrelationships among the data and the issues, extrapolate future alternatives that might emerge out of present conditions, and evaluate...
progress toward goals. At the request and direction of the various academic deans, program directors, and administration in operational areas of the University, the staff are developing appropriate measures and databases to assist in decision making and resource allocation; collecting, organizing, and analyzing background data and information to produce policy and procedure action recommendations; surveying various groups of Western University constituents to learn about issues critical to operations and programs; and assisting with the WASC accreditation and other professional program accreditation reviews.

The recently founded Office of Institutional Effectiveness (January 1999) is led by an administrator experienced in strategic planning, assessment, evaluation, and communication. She serves as a member of the President’s Cabinet and the Academic Affairs Council. The Office is supported by effective graduate assistants from Claremont Graduate University’s program in organizational behavior and evaluation, in addition to highly competent clerical and administrative support. The staff is eager, efficient, effective, and caring about Western University and its programs and services. The Office administrator and staff maintain excellent working relationships with faculty, staff, administrators, and students from across the campus and from other universities. The staff members are committed to lifelong learning and continue to upgrade skills, knowledge, and abilities. Staff positively present Western University to the external community and stakeholders, and promote Western University through their professional activities. The President and his Cabinet have been a great support to the Office of Institutional Effectiveness.

The Office of Institutional Effectiveness had no real operations budget for academic year 1999-2000, and has been fortunate in its ability to share resources from other units to achieve its mission and conduct business. This has been rectified for academic year 2000-2001. In addition, the way in which data (both academic and financial) have been stored in the past has made it difficult to complete studies on a timelier basis. Again, the implementation of Banner 2000 will facilitate this situation. The fact that Western University is becoming more open to sharing data will assist the institution in achieving its goals.

Since its inception in early 1999, the Office of Institutional Effectiveness has worked with the Physical Therapy program, the College of Pharmacy, the College of Graduate Nursing, the College of Osteopathic Medicine of the Pacific (COMP), and the College of Veterinary Medicine in planning, developing, and editing accreditation self-studies. In addition, staff members have supported college and department faculty and staff members in the on-campus accreditation site visits.

Recent institutional effectiveness activities include surveys of all students admitted to Western University programs for the 1999-2000 and 2000-2001 academic years (see Exhibit II.4). These surveys are designed to enhance future marketing activities, admission and financial aid programs, and academic programs in general. A follow-up survey was completed at the end of the 1999-2000 academic year to determine whether the impressions and perceptions of those admitted students became reality during their first year at Western University.

An assessment of student outcomes for COMP’s graduating classes of 1994-1998 has also been completed. This assessment has assisted in the refinement of COMP’s admission process and in the curriculum review and revision activities. In
addition, an exit survey of the DO and PharmD classes of 2000 and an alumni survey have been completed to understand how Western University’s educational programs have affected current and former students’ academic and professional lives. The results of these surveys are being used to improve programs and practices (see Exhibit II.4).

A process improvement survey was administered to Western University students, faculty, staff, and administrators in September 1999 (see Exhibit II.4), and has informed process improvement activities at the University in the areas of budgeting and financial reporting, accounts payable and purchasing, hiring and recruiting, the Mission Medical Center, fundraising, and the admission process for COMP (see Exhibit II.5). The Office of Institutional Effectiveness has been collaborating with The Impact Group, LLC, Western University’s process improvement consultants. In this regard, the Office has developed and administered a survey of Hiring Authority Satisfaction, developed an “ideal student” profile for COMP and a satisfaction survey for patients at the medical center, and is assisting in developing outcome and process measures for the University’s change projects.

WASC Self-Study Focus Groups

In Fall 2000, the Vice President of Strategic Planning and Institutional Effectiveness conducted 36 focus groups over a 12-week period to determine and ensure that issues (strengths, weaknesses, opportunities, and barriers) relevant to the entire campus community were addressed in the draft self-study. The Vice President met for a minimum of an hour and a maximum of two hours with campus units, departments, programs, and groups of students, faculty, and staff. She first presented an update on the WASC self-study and the new WASC Handbook and process to each group, answering all questions regarding the current self-study process and the future WASC process. When all questions were addressed, she informed the group that true self-study meant that any and all issues were raised and addressed, and that it was important to have a continuing campus dialogue to address issues and concerns. She then told each group that she was there to hear their concerns, clarify the issues, respond to those issues that she could, and then bring the items identified to appropriate individuals and departments on campus, the Academic Affairs Council, and the President’s Cabinet. The list of issues raised was summarized into a table by category of issue, and a discussion of how each issue has been or is being addressed has occurred at Academic Affairs Council and President’s Cabinet meetings (see Exhibit II.6).

Development and refinement of goal setting for faculty, staff, and administrator evaluation and professional development has been another of the Office’s ongoing projects. The Office has worked with the Colleges of Pharmacy and Osteopathic Medicine of the Pacific to develop the tools used for faculty, and to assist in the goal setting and distribution of effort activities. The Office has provided the President with a tool to evaluate senior administrators, and has assisted other administrators in implementing this process for their own staffs. Finally, in collaboration with the Office of Information Technology and the Western University Medical Center, and with the consent of the Director of Human Resources, the Office has been working to develop an improved staff evaluation process and form.

In addition, the Office has been developing and further refining course and faculty evaluation tools in collaboration with the academic programs. Pilot reviews have
been completed of the Intensive Summer Anatomy course and the Gross Anatomy course and faculty to help further develop this program, and to inform the academic and professional development of faculty and students. Evaluation instruments for the Public Health, Introduction to Clinical Medicine, Endocrine and Reproductive Systems, and OP&P have been pilot tested. The results of these evaluations have been reported back to the program chairs and the faculty, and are being used to refine courses and to improve teaching. Staff members have been working with COMP and the College of Pharmacy to improve upon evaluation instruments for student rotations, both for evaluations of the students and their preceptors/rotation sites (see Exhibit II.4).

The Office of Institutional Effectiveness has been assisting with the development and analysis of survey and evaluation instruments to assist in the Strategic Enrollment Management activities. These include the Interview Day Surveys, Osteopathic Medical Awareness Conference Evaluations, Prospective Student Withdrawal Questionnaires, and others. In addition, the Office has worked with the Office of Information and Instructional Technology to assess user satisfaction with I2T services (see Exhibit II.4).

Strategic plan development is another component of the unit’s activities. A final draft of the University strategic plan has been approved by all campus constituencies, including the Board of Trustees at its meeting in May 2000. The plan sets forth numerous progress measures for which staff of the Office of Institutional Effectiveness collects and analyzes data (see Part J). In addition, the Office has provided assistance in the development of the Colleges of Pharmacy and Allied Health Strategic Plans.

The Office began handling all external requests for data and completes all surveys submitted to the University, including the annual IPEDS surveys (see Exhibit II.7).

The full implementation of the Banner 2000 project will facilitate institutional effectiveness activities. As such, staff members of the Office of Institutional Effectiveness have assisted the Office of Information and Instructional Technology in various stages of the Banner implementation.

Planning Goals for Academic Year 2000-2001:

- To assist in achieving full accreditation for the University and all of its academic programs.
- To encourage academic programs and support, service, and administrative units to use assessment and evaluation to continually improve practice.
- To develop a complete set of assessment and evaluation tools for all aspects and activities of the University.
- To provide complete, accurate information and data to inform University decisions at all levels, and to communicate more effectively with the University’s constituents.
- To combine the Office of Strategic Planning and Institutional Effectiveness into a single Office of Institutional Effectiveness with its own budget.

Strategies:
• To gain trust and then collaborate with faculty, staff, and students on assessment and evaluation processes by request within the various academic programs.
• To share the results of all assessment and evaluation activities appropriately and widely.
• To focus evaluation and assessment activities on areas in which the opportunity for improvement are the greatest, in concert with the faculty and deans of the academic programs.
• To assist senior management in using the results of assessment and evaluation activities to inform and improve practice.
• To collaborate with administrators, staff, and faculty of the various academic programs in developing and refining accreditation self-studies.

Measures of Success:

• Increase in stakeholder satisfaction with institutional data and evaluation support.
• Increase in number of institutional decisions based on data.
• Increase in stakeholder requests for surveys and data-gathering activities.
• Improved quality, efficiency, and effectiveness on an institutional and college/unit level.
• Increase in requests for assistance and consultations regarding surveys, data, and institutional effectiveness activities from outside sources.
• Full and continuing accreditation for the University and all of its programs.

Western University Assessment Activities and Strategy

Definition of Assessment

Assessment is a means of gathering information that can be used in evaluating the University’s ability to accomplish its purposes. Assessment is not an end in itself.

Assessment is a means of focusing our collective attention, examining our assumptions, and creating a shared academic culture dedicated to continuously improving the quality of higher learning. Assessment requires making expectations and standards for quality explicit and public; systematically gathering evidence on how well performance matches those expectations and standards; analyzing and interpreting the evidence; and using the resulting information to document, explain, and improve performance.¹

Assessment at Western University consists of four components:

1. **Goals:** The compilation and maintenance of a comprehensive list of institutional and programmatic goals (outcome statements).
2. **Survey Instruments:** The continual development and use of appropriate survey instruments to collect reliable and valid objective and subjective data concerning institutional and programmatic goals and objectives. These data are collected in a consistent manner over time to facilitate longitudinal comparisons. Care is taken to ensure that all aspects of the institution are addressed.

3. **Data collection and analysis:** To occur within the normal committee structure of the institution, with the assistance of the Office of Strategic Planning. Evaluation results form the basis for committee actions and institutional initiatives.

4. **Use of data:** The application of findings and conclusions toward improvement of institutional programs and the environment. Each unit within the institution uses assessment and evaluation results as part of an annual planning exercise to address the unit’s specific goals and objectives.

**Description of Student Outcomes Assessment**

As Western University’s programs all have a professional focus and emphasis, the assessment of student outcomes has been an inherent component of all programs since their inception. The ultimate goal of most students in most programs is to become a licensed professional, and, therefore, we view the ability to pass the licensing boards as the ultimate student outcome that we assess. In addition, there are steps along the way that provide indications of how our students are progressing toward their ultimate goal.

Each academic program at Western University has a Student Outcomes Assessment Plan that includes a list of expected student outcomes, and a description of how these are assessed and how the outcomes of the assessments are used to improve practice. These plans are reviewed and updated on an annual basis during the Program/Unit Annual Reporting process (see section on Unit Annual Reporting and Planning and Exhibit II.8 for Student Outcomes Assessment Plan for each program). The table below summarizes what is measured and for what purpose(s).

### Student Outcomes Assessment Tools

<table>
<thead>
<tr>
<th>Measures</th>
<th>Purpose</th>
<th>Use of Evaluation to Improve Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPA/Standardized Admission Tests</td>
<td>Admission decisions</td>
<td>Review of admission criteria as compared to student outcomes for possible modification</td>
</tr>
<tr>
<td>(MCAT, GRE, etc)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admission Interview</td>
<td>Admission decisions</td>
<td>Review of admission criteria</td>
</tr>
<tr>
<td>Course Examinations</td>
<td>Feedback to students and faculty about student learning and faculty teaching performance and competencies</td>
<td>Help students identify areas for review; help faculty revise course content, teaching methods, exams, and/or curricula</td>
</tr>
<tr>
<td>Competency Assessments</td>
<td>Feedback to students and faculty about student learning and faculty teaching performance and competencies</td>
<td>Help students identify areas for review; help faculty revise course content, teaching methods, exams, and/or curricula</td>
</tr>
<tr>
<td>Course/Block Profile</td>
<td>Course/block evaluation and improvement</td>
<td>Help instructor to revise course/block content and teaching methods</td>
</tr>
<tr>
<td>Course/Block Evaluations by Students</td>
<td>Feedback to instructor and dean</td>
<td>Help instructor to revise course/block content and teaching methods</td>
</tr>
<tr>
<td>Instructor Evaluations</td>
<td>Feedback to instructor and dean</td>
<td>Help instructor to revise course/block content and teaching methods; help</td>
</tr>
<tr>
<td></td>
<td>Supervisors to Evaluate Faculty</td>
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<td>--------------------------</td>
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<tr>
<td><strong>Student Ratings of Clerkships/Rotations</strong></td>
<td>Feedback about placement</td>
<td>Help administration to enhance student placement</td>
</tr>
<tr>
<td><strong>Exit Interviews</strong></td>
<td>Immediate evaluation of total experience</td>
<td>Identify strengths, weaknesses, opportunities, and barriers of the program as perceived by students</td>
</tr>
<tr>
<td><strong>Alumni Surveys</strong></td>
<td>Evaluation of total experience once some time has passed</td>
<td>Identify strengths, weaknesses, opportunities, and barriers of the program as perceived by alumni</td>
</tr>
<tr>
<td><strong>Alumni Job Placement</strong></td>
<td>Quality measure</td>
<td>Ensure that students are transitioning well from student to professional role</td>
</tr>
</tbody>
</table>

**The Student Outcomes Assessment Plan**

Western University’s plan to assess educational achievement and student outcomes reflects the University’s complexity—the multidimensional purposes, varied delivery systems, and diverse constituencies involved. Western University’s Student Outcomes Assessment Plan represents a realistic, responsive, and broad-based approach to monitoring, evaluating, and implementing improvements in teaching and learning. Complexity and diversity have influenced the development of the Student Outcomes Assessment Plan and laid the foundation for the multiple forms and methods of assessment.

The assessment of student learning at Western University is a multi-tiered process that incorporates the principle that the professorate is both the primary determinant of curricular requirements and the primary source of information about student achievement within those curricula. Accordingly, the Student Outcomes Assessment Plan entails a mixture of formal and informal procedures with varying degrees of central and local input and control, focusing on the value of student outcomes assessment as a tool for student, faculty, and institutional improvement. The Student Outcomes Assessment Plan assists Western University in meeting its vision, with a major goal being the shift from a focus on teaching to a focus on learning. The philosophy stemming from the University’s mission and vision provides a standard for student assessment and helps define the content of assessment activities.

Western University’s Student Outcomes Assessment Plan fosters improvement in the institution’s assessment activities in three ways. First, it provides for the dissemination of assessment information and the development of policies. Second, it provides resources to support program level efforts to develop and improve assessment activities. Third, through incorporation in other reporting and review processes, student assessment has become an integral part of the curricular development, planning, and decision-making processes of the University.

The Western University Student Outcomes Assessment Plan focuses on the value of assessment as a tool for institutional improvement and renewal, and represents an increased emphasis on the formal aspects of the assessment process. This has been furthered by the development of campuswide mechanisms to support local assessment and improvement initiatives, including the recent enhancement of institutional research and faculty development functions, such as the Office of Strategic
Conceptual Framework

Knowledge, intellectual skills, habits of mind, and personal growth and development are at the core of the professional and graduate educational experiences at Western University. A rigorous and coherent education should provide students with the knowledge and skills that are increasingly necessary for success in a complex and changing world. The knowledge, skills, and habits acquired can help to create a foundation for a lifetime commitment to learning, personal development, and social responsibility. Elaboration of these aims provides an anchor for assessing the quality and outcomes of the educational experiences at the University.

Assessment activities have evolved into a dynamic, longitudinal process that monitors all students’ growth and progress. These activities include:

- Baseline measures.
- Value-added assessments (institutional impact, repeated assessment of the same qualities on the same students at various points in their careers).
- Outcomes assessment (final exams, licensing exams, exit interviews, capstone courses, alumni and employer surveys).

Assessment Design

The assessment design is a multidimensional view that includes quantitative and qualitative measures that evaluate the institutional environment, assess student outcomes, and study the relationship between the environment and student learning.

The Western University Outcomes Assessment Plan is decentralized, faculty driven, and integrated into the evaluation and planning processes of each academic program. The development of assessments at the program level reflects the nature of the academic disciplines, goals of the particular programs, and success of the students being served by the programs. Student outcomes assessment is linked to the evaluation and planning processes at Western University through its accreditation processes. Teacher and course evaluations serve as one of the feedback mechanisms for instructional and curricular development. The integration of student outcomes assessment with accreditation reviews and curriculum development forms a continuous feedback mechanism that ultimately influences Western University’s ability to achieve excellence.

The figure below depicts the conceptual framework that relates the Student Outcomes Assessment Plan to the University’s mission and values and to the roles of the faculty and administration:
The strategic planning process at Western University provides a framework that links University and programmatic mission, goals, objectives, and strategies to student assessment. The process provides the means to carry out continuous evaluation and renewal. Student assessment is conducted as one aspect of evaluation, particularly complementing curricular, program, and faculty review. University and programmatic values, mission, goals, and objectives have been developed along with specific criteria for assessment and evaluation.

- **How the institution links mission, goals, and objectives for student learning and academic achievement to its plan for student assessment.**

  The strategic planning process at Western University provides a framework that links University and programmatic mission, goals, objectives, and strategies to student assessment. The process provides the means to carry out continuous evaluation and renewal. Student assessment is conducted as one aspect of evaluation, particularly complementing curricular, program, and faculty review. University and programmatic values, mission, goals, and objectives have been developed along with specific criteria for assessment and evaluation.

- **Evidence of faculty participation in the development and implementation of the plan and an institution-wide conceptualization and scope.**

  Faculty have contributed to the development of the Student Outcomes Assessment Plan through their:

  1. Assessment of students.
  2. Development and review of curricular programs.
  3. Participation in program and university-wide assessment planning activities.
  4. Participation as members of various academic committees, e.g., Curriculum Committee, Institutional Strategic Planning and Resource Advisory Committee, WASC Self-Study Working Groups, Assessment Subcommittee/WASC Steering Committee, and WASC Self-Study Subcommittee.
• Evidence that the Student Outcomes Assessment Plan will lead to institutional improvement.

A fundamental purpose of assessment is improvement—in this case, both of student learning and the institutional learning environment. At Western University, assessment is linked intrinsically to evaluation and renewal processes. Student assessment, in conjunction with curricular and program review and accreditation, faculty review, and administrative planning and budgeting, provides multiple opportunities for institutional improvement and advances in learning. Evidence of improvement is discernible through the tracking of students and subsequent refinement of educational programs in response to results. Because of the widespread involvement of faculty, support staff units, and administrators, the plan stimulates improvement of student learning.

Administrative support units such as the Office of Strategic Planning and Institutional Effectiveness, Center for Academic and Professional Enhancement, and Business and Human Resources offices serve as resources for programs in their assessment and improvement activities. The Assessment Subcommittee of the Institutional Strategic Planning and Resource Advisory Committee serves as the Advisory Committee in the development and monitoring of the plan.

Administration and Implementation

Administrative responsibilities for assessment rest primarily within the Office of Strategic Planning and Institutional Effectiveness, but emanate directly from the faculty through programs and campuswide committees. Procedurally, each academic program has identified the intended educational outcomes of the program, the methods used to measure these outcomes, and the means by which measures are used to improve the program. This information is updated and reviewed annually.

Assessment activities are expected to identify:

1. What students should know and be able to do after completing the program,
2. How student outcomes are measured,
3. What roles the faculty play in the assessment process, and
4. How assessment information is used to strengthen the program and improve outcomes.

More specifically, programs are asked to respond to the following questions:

1. **Student Outcomes:**
   A. What should students know, understand, and be able to do after completing their coursework in your program?
   B. How are these outcomes related to your program’s missions and goals and those of the University?
   C. How are faculty and students involved in the development and implementation of program and student outcomes assessment?

2. **Assessment of Programs and Student Outcomes:**
   A. What methods are used to assess academic programs (including clinical training experiences), student and institutional support programs (including
extracurricular learning activities), and student outcomes? What is the frequency
of data gathering?
B. How are data collected to ensure their reliability and validity?
C. How is the information gathered being disseminated internally and externally?

3. **Utility:**
   A. How are the results of assessments used to improve teaching and learning?
   B. How are the results incorporated into curricular review and strategic planning processes?
   C. What are the feedback mechanisms for sharing results with students and faculty, and with internal and external review and accrediting bodies?

Student assessment processes described in this plan are linked to the institutional strategic planning and accreditation processes at Western University. Each of these processes requires that academic program goals and objectives must be linked to institutional goals and contain measurable objectives. This feature of the plan facilitates the determination of satisfactory progress. The fact that University faculty and administration review plans and accomplishments in the student assessment realm, and that this same faculty and administration are held responsible for meeting institutionally developed goals, is another indication that improvement will occur.

Because the implementation of the Student Outcomes Assessment Plan is synchronized with the University’s planning processes and its accreditation review schedule, the assessment process does not prove onerous for the units that perform the requisite assessment functions. Close administrative support and monitoring of the assessment process follow as a consequence of the process being part of the regular planning and program review activities. That ensures that this important function receives the attention of the administration necessary to achieve its goals.

**Assessment Activities at Western University**

Presented below is a description of the surveys and assessments completed by the Office of Strategic Planning and Institutional Effectiveness to date and a summary of the results.

**Institutional Climate Survey**

The Institutional Climate Survey conducted in Spring 1998 was designed to help Western University understand the perceptions and experiences of the members of the campus community and to strengthen programs that support the University’s goal of providing a humanistic teaching, learning, and work environment.

Students, faculty, staff, and administrators (n=771) generally expressed agreement that they understood the mission of the University and that their personal philosophies were consistent with that mission. They stated that they have good relationships with colleagues on campus and would encourage their friends or associates to join the University. Nearly all of the faculty, administrator, and staff respondents (a total of 285 individuals returned the survey—a 36.9% response rate), reported that they take pride in their work, and a majority of the student respondents agreed that they are proud to be Western University students. In addition, most respondents felt that they are an important part of the University, and most believed that
people are caring, compassionate, and respectful toward one another at Western University.

The results also shed light on opportunities for improvement in the teaching, learning, and work environment. Although most described positive attitudes and perceptions of campus climate, certain subgroups of respondents departed from this trend. A number of staff and administrators disagreed with the statement that “Western University fosters an environment of openness and dialogue among students, faculty, staff, and administrators”. More than half of the students, staff, and administrators who completed the survey disagreed with statements concerning fair and impartial treatment of student- and work-related issues at the University. Students reported that they did not feel they had the chance to innovate or take risks, while faculty, staff, and administrators were more likely to report that they were encouraged to be innovative in their teaching and work. The majority of the student respondents did not feel that they received recognition from their professors when they performed well in their courses. The majority of faculty, administrators, and staff, on the other hand, believed that they did get recognition when they performed their job well.

In the open-ended section, students, faculty, staff, and administrators expressed concerns about enrollment growth, increasing class size, and expansion of facilities at Western University. Some students expressed concerns about the quality of teaching at the University. A number of students, faculty, administrators, and staff expressed a desire to have more input and participation in decision making at Western University. Several faculty, staff, and administrator respondents suggested that the University provide opportunities for increased dialogue and communication among students, faculty, staff, and administrators. Finally, a number of respondents expressed concerns relating to the University “living” its goal of being humanistic (see Exhibit II.4).

University Process Improvement Surveys

This survey was designed to follow up on the Institutional Climate Survey and determine which areas needed improvement to enhance morale at Western University. The survey was sent to all faculty, staff, and administrators at Western University (n=327) and to a sample of on-campus students (25%, or 207 students) in November 1999 (see Exhibit II.4). This survey was an attempt to increase dialogue and communication at Western University and to provide more opportunity for collective input and participation in decision making. The survey focused on each of the major operational processes at Western University, (such as educating students, managing financial and human resources). The goal was to determine how important each of these University processes is to achieving the community members’ goals at Western University, and how they viewed the quality of service that was being provided at the time. One outcome of the survey has been to help concentrate improvement efforts on the systems and processes regarded as most important and most in need of attention.

A total of 122 individuals returned the survey (of the 534 that were sent out—a 22.8% response rate). Based on the analyses of the entire set of respondents and of each separate subgroup (e.g., faculty, administrators, staff, and students), several recommendations emerged as key to improving the discrepancies between importance and quality among Western University’s organizational processes:

- Human resource management practices and policies were perceived as extremely important for the achievement of employees’ work, yet these
processes were rated as being of lower quality. As a result of the survey, efforts have been made to improve the recruitment and hiring process to hire the “right” people, to effectively evaluate and then motivate employees with proper rewards and incentives to increase job satisfaction and decrease turnover, and to increase access to training/development activities.

- Administrative policies and procedures regarding accounting and financial reporting, institutional data management, and communication among employees have been enhanced to improve the work environment and organizational performance.

- Increasing the frequency, regularity, and intensity of evaluations of departments, programs, units, and individuals across the University, and using the results of those evaluations to improve practice, has improved planning and assessment activities.

- Faculty members are being provided with tools and incentives to engage in more research and other scholarly activities. Revisions of the faculty review process (including the distribution of effort process and goal-setting activities and evaluations) and adjusted compensation have been two tactics to achieve this goal.

- As a result of this set of surveys, the institution engaged in a series of process improvement efforts, with the assistance of consultants from The Impact Group, LLC. Western University embarked upon three administrative process improvement efforts in December 1999. The three areas targeted for the improvement efforts were 1) recruitment and hiring, 2) budgeting and financial reporting, 3) purchasing and accounts payable (see Standard IX), and 4) COMP Admissions (see Standard IV—COMP). Additional process improvement activities initiated in Fall 2000 included the Mission Medical Center and Development operations (see Exhibit II.4).

Campuswide Student Financial Aid Survey
In September 1998, a survey was distributed to students in the DO, Pharmacy, PA, and PT programs (see Exhibit II.4). A total of 276 responses were received. The students were asked to rate the Western University financial aid process, counselors, the time it took to process the various applications for funds, and the various types of services offered by the Office of Financial Aid. Student ratings of the services of the Office of Financial Aid were low, with their concerns centering around accountability, communication, knowledge, misinformation, office hours, and the need to start the process earlier. Recommendations for improvement included increasing staff and office hours to manage workload more effectively; providing more information to students in a variety of means, including brochures, workshops, one-on-one counseling sessions, FAQ flyers, and checklists; updating the computer system; developing grievance and quality control procedures, and providing emergency funds.

The issues and recommendations identified through this survey were incorporated into the reorganization of the Office of Financial Aid in the improvement of financial aid processes.
Admitted Student Questionnaire

This survey had many purposes. It has been administered twice to all students offered admission to Western University for the 1999-2000 and 2000-2001 academic years. (For the 1999-2000 administration, the response rate was 55.7%, n=470; MPT students admitted for January 2000 received their questionnaires in November 1999). The main purpose of the survey was to assess the perceptions of potential students about all aspects of Western University, from the University's location to programs and services. The findings were used for purposes of marketing, and for determining areas of strength and improvement. Responses were received from both students who accepted and students who declined Western University's offer of admission. The responses from the students who declined were analyzed separately to assist in the Strategic Enrollment Management activities of the University.

For the June 1999 administration, 235 responses (55.7%) were received, of which 74% had accepted the offer of admission and 19% declined. Fifty-six percent of the responses were from males. Seventy-eight percent were California residents. The average age of the respondents was 26.3 years, and ethnicity was broken down as follows: 41.5% Caucasian, 32.2% Asian/Pacific Islander, 8.1% Latino/a, 4.2% African American, 0.4% Native American/Alaskan Native. The average GPA for the total group was 3.34 (3.30 for those who accepted). Forty-seven and one-half percent were accepted into the DO program, 24.2% into Pharmacy, 21.6% into the PA program, 0.8% each into the MSN and MSHPE programs, and 0.4% into the MPT program. Of the total group, 48.3% found Western University through a friend or an alumnus, 13.1% through their undergraduate campus, 11.9% via the Internet, 4.7% through an osteopathic conference, and 2.5% through advertisements. Sixty-six percent of the respondents planned to enter clinical practice.

The survey also included a range of open-ended questions. These responses were coded into the most frequently mentioned categories and provided detailed information and suggestions beyond that of the closed-ended questions. In addition, comparisons were made between the responses on both open- and closed-ended questions to provide a crosscheck and validation of the conclusions drawn from the data. This proved useful as the categories most frequently mentioned in the open-ended questions overlapped with the items mentioned in the closed-ended questions to a large degree.

Across all categories, ratings were generally at the upper end of the scales, indicating that items were important to very important, useful to very useful, and good quality to very good quality. These findings are not surprising given the population represented by the returned surveys, that is, individuals who had applied to Western University; therefore, responses toward the negative end of the scale should be infrequent. In addition, responses received overall were weighted more heavily by students who accepted offers of admission than those who declined or remained undecided.

The following paragraphs detail the data from respondents regarding the main categories of interest in the Admitted Student Questionnaire.

Academic Programs. In general, the perception of Western University’s academic programs was very positive. Students liked the focus on humanism, quality of life for patients, education to become compassionate health care providers, building
relationships, student-centered learning, and openness to new ideas. These items were ranked comparatively higher than items specifically addressing curricular issues, indicating that students place a high value on an education that provides a well-rounded skill set—that is, students attracted to Western University prefer an education that also trains them to be in touch with patients and able to meet a wide range of patient needs, in addition to training in academic medicine. The curriculum content and structure of the programs were also influential in students' decision to apply. In addition, the innovative teaching methods and the block system were each identified as “new and unique,” as well as “helpful in achieving students' performance goals.” The focus on primary care and student-centered learning were very important. Looking beyond the confines of the campus, applicants were influenced by the affiliations and rotations established by Western University.

Interestingly and as would be expected, students who declined Western University's offer of admission most frequently mentioned reputation and quality as factors. In addition, students who declined also had higher average GPAs, leading to the conclusion that these students probably were admitted to schools with higher national rankings.

Admissions. The questionnaire queried students about the admission process, interview, department, and staff, all of which were ranked relatively high on the usefulness and quality scales. The Osteopathic Medicine Awareness Conference was among the items that received the highest relative rankings for quality. The written materials distributed by the Admissions Office received mixed ratings. The general catalog and program-specific materials were considered useful, while supplementary materials were rated somewhat less useful. Students seemed to want only the specific information they needed when they needed it—just-in-time information.

Financial Aid. Overall, the items pertaining to financial aid were rated positively. However, when compared to other processes and items, the relative rankings were somewhat lower. However, at this point in the process, students would not have had a full opportunity to interact with the financial aid representatives. In addition, across graduate institutions, financial aid operations are subject to criticism, especially because students are less likely to report enjoying the process of incurring large amounts of debt.

Specific comments regarding the components of the financial aid process included the desire to have more information provided about financial aid at the time of the interview, and to have representatives from the financial aid office more readily available to answer questions and provide assistance with completing forms. Students also rated low the information provided by the financial aid and scholarship handbook for both usefulness and quality. Students, again, seemed to infer that they wanted just-in-time information.

Campus Services/Facilities. A wide range of campus services and facilities were addressed in the questionnaire, from parking, the bookstore, and the student commons to health care and tutoring. In general, relative to other areas addressed by the survey, services were not among the highest ranked for importance or quality. Though services are important, they appeared to not be as vital to student success and career preparation as other elements tapped by the questionnaire. However, many students seemed to address issues of environment and atmosphere in the open-ended responses.
Faculty. The range of questions regarding faculty received the highest relative rankings for importance and quality across the different areas of focus. The perceived quality of the faculty is supported by comments such as, “faculty were kind, helpful, and responsive” and “willing to answer questions.” Further, the faculty were perceived as “forward thinking,” including willingness to pursue a “partnership with students toward learning.” Students ranked faculty awareness of new development higher than involvement, which, given Western University’s modest emphasis on the pursuit of research, was expected.

The current Western University facilities were perceived as “state-of-the-art” and “well maintained and impressive;” however, students seemed to want more casual meeting areas. Students also expressed an interest in having more activities for students to “get to know each other.” Several students mentioned the benefits of a small campus and the increased amount of personal attention they would receive.

The environment, however, was the most frequently mentioned aspect for students who declined our offer of admission. Some who declined did not feel that they would be a good fit with the innovative and problem-based curriculum. Further, several stated a preference for an individual study orientation, rather than the team approach. Finally, a few reported a negative experience with a faculty or staff member.

Security was rated highly for both importance and quality. Health care, as with many universities, emerged as an important issue. Students seemed to fear that their health care needs would not be well met. There was a lack of understanding about the Western University student health fee as well.

The Western University Library was an area in which a big discrepancy between importance and perceived quality existed. Students were not pleased with the limited holdings of the Library. However, the few times that research facilities were mentioned, they were rated highly.

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Students. Applicants were asked to comment on students already enrolled. Helpfulness was rated to be of very good quality. The strength of ratings varied somewhat between those who accepted vs. declined the offer of admission.

Location. Although location did not surface among the most important factors in the closed-ended questions, location was mentioned frequently in the open-ended section. Students seemed to like the fact that the University was located in the west, then close to home, in southern California, and finally, in the Los Angeles area. Open-ended comments mentioned “close to home” as the most frequent response. A few students mentioned that living with parents was of primary importance due to convenience and financial reasons. Further, as most of the respondents reported residency in California, Western University’s location was viewed favorably. Location was less influential a factor in the decision to accept or decline, probably because it was weighted more heavily in the initial decision to apply.

Competitors. Students were asked to list the other schools to which they applied. The majority of the schools were located in the west, with USC being mentioned most frequently, followed by Arizona COM, and University of the Pacific (see Exhibit II.4).
First-Year Student Questionnaire

As a follow-up to the Admitted Student Questionnaire (ASQ), all first-year students (academic year 1999-2000) were surveyed during Summer 2000 to determine whether their expectations that were captured on the ASQ became realities during their first year at Western University (see Exhibit II.4). The survey took the ASQ items, which asked students to rate each item based on the importance to them and the perceived quality before entering Western University, and presented them again for students to evaluate their actual experiences with each of those items.

The ratings for quality dropped significantly from the beginning to the end of the students’ first year. The most notable drops occurred across facilities and location. There was also a significant difference between the initially perceived and experienced quality across student services, including tutoring, the library, and health care. Ratings of value of the Western University education dropped, as did perception that the tuition was affordable. Another decrease noted in the first-year student questionnaire was a decline in the helpfulness of students and faculty, faculty involvement in new developments in their field, and the intellectual competence of fellow students. Interestingly, the areas of concern indicated in this survey parallel the concerns raised through other survey methods and tools. Therefore, these issues are being addressed currently through process improvements, curricular change efforts, and other institutional effectiveness efforts.

Faculty Development Needs Survey and Database

In early fall 1999, as preparations were being made to launch the Center for Academic and Professional Enhancement (CAPE), faculty were surveyed to gather information for a CAPE database of faculty development needs and expertise. This survey contained three separate items: the Faculty Profile, the Course Profile, and the Faculty Development Needs Survey (see Exhibit II.4).

The Faculty Profile asked faculty to detail their academic, research, professional service, clinical, and outside interests, in addition to listing the courses/blocks they taught. This information was compiled and shared so that the Western University community would have one place to find such information to be able to collaborate with colleagues on a variety of projects.

The Course Profile asked faculty to detail the emphasis placed on a variety of instructional goals listed, ranging from “gaining factual knowledge” to “improving student’s self-concept and/or self-confidence.” Then faculty members were asked to describe how useful various instructional activities were that were part of the course, ranging from lecture to graded quizzes or tests to simulations/role playing. Another section of the survey asked faculty to detail the percentage of the final grade that was based on a variety of types of student evaluation methods, including homework, midterms and finals, laboratory exercises, units, and projects. The grading method of the course was described next, followed by some general information, including the number of times the individual has taught the class and whether or not changes were made in the design of the course.

Results from the items asking respondents to assess the emphasis placed on various instructional goals indicate that learning factual knowledge and fundamental
principles were most prominent. Other goals that respondents rated as having a strong emphasis were developing a favorable attitude toward the subject matter, increasing awareness about how these subject matter areas are related to other areas, increasing student motivation to learn, and developing skills for synthesis or evaluation.

Analyses of the items that rated the usefulness of various instructional activities reveal that lecture by instructor, graded quizzes or tests, and audiovisual media were the three most frequently utilized for COMP courses. Although not utilized as frequently, laboratory activities, hands-on in-class activities, practicum, fieldwork, clinical or internship activities, guest speakers, team/collaborative activities, and group discussions were also rated as useful. For example, the two most prominent grading options in COMP were midterm and final exams. Few faculty members reported evaluating student performance based on active learning activities such as presentations or demonstrations, laboratory exercises, or projects. The survey also determined that the majority of faculty members have made changes to the design of their courses over time. The most frequently cited changes were the integration of clinically relevant materials, technological enhancements to curriculum delivery, and changes in grading/student assessment methods.

This profile served a number of purposes. First, just getting faculty members to think about these issues relevant to their courses could lead to improvements/changes being made. Second, the institution was able to determine what was going on in all of the classes and how it could support faculty members in doing their job. For example, faculty development workshops were offered on student assessment activities and test construction, active learning strategies, etc., in response to this profile.

The Faculty Development Needs Survey

This survey presented a list of various faculty development topics arranged in seven logical groups (Academics and Curriculum, Academic Computing and Technology, Academic Assessments, Distance Education, Multimedia Technology, Osteopathy, and Miscellaneous), and asked faculty to rate these topics as very useful, useful, or not useful. A section was included for faculty members to suggest additional topics. Finally, as CAPE is a partnership among faculty, staff, and administrators, faculty were asked to list areas of expertise in which they might offer workshops, or advise and mentor others trying to enhance those capabilities.

Results indicated that the most useful faculty development topics were those related to various teaching models and methodologies. Innovative teaching strategies, competency-based learning, and teaching methodologies were three of the higher ranked topics on the survey. In addition, respondents also indicated that student assessment and evaluation was a strong area of interest for faculty development programs. Finally, technology training was rated highly, especially in the use of technology to enhance instruction. In terms of special skills that faculty would like to share with colleagues and serve as mentors, clinical teaching skills, classroom teaching skills, faculty-student relations, and communication skills were cited most frequently.

Results of this survey were used to develop the first round of faculty development workshops offered by CAPE in academic year 1999-2000 and informed the development of programs for 2000-2001. A series of workshops was designed to provide individuals from different colleges the opportunity to meet together, learn about, and discuss experiences with a topic of interest. The workshops offered included Introductory
PowerPoint Lab Training, Innovative Learning Strategies, Grant Writing, and Syllabus Creation. Although the workshops were not attended widely, as the need would have suggested initially, the participants provided positive feedback and encouragement for additional workshops, support has been generated from faculty through other means, and CAPE gained valuable insight toward creating more widely attended workshops in the future. (See Appendix II.3, CAPE workshop schedule.)

Alumni Survey

In November 1999, a survey was distributed via mail in the November issue of the Alumni Newsletter to all 2,700 Western University alumni, in an effort to gather valuable data regarding the educational experiences of Western University’s graduates (see Exhibit II.4). The survey asked students to provide information about them, as well as to evaluate several dimensions of their experience at Western University. In addition to indicating overall satisfaction with Western University, the faculty, and the quality of their education, respondents were asked to provide information regarding their employment status, areas of interest in relation to Western University’s value of humanism, and the extent to which Western University contributed to their personal and professional growth. A total of 255 responses (9.4%) were received, which is about average for mailed alumni surveys. The results were analyzed and served as a resource for decision making across programs.

Results indicated that respondents believed strongly that the education they received helped them achieve their career goals, that there is a friendly atmosphere on campus, and that the clerical and support staff members were caring and supportive. The alumni also agreed that the curriculum was challenging, that faculty members were supportive of students, that a degree from Western University is valuable, and that the quality of education at Western University is excellent. Alumni neither agreed nor disagreed that the tuition was reasonable in comparison to other programs.

Alumni were asked if there was a faculty member who had a major impact on their educational experience at the University. Eight Western University faculty members received multiple responses ranging from eight to 25 recognitions. Subsequently, these eight faculty members received a letter of recognition from the Executive Vice President of Academic Affairs.

Eighty-two percent of the respondents indicated that they would attend Western University again, 86% would recommend their academic program to someone who wanted to study in their field, and 86% indicated that, given the opportunity to start their careers over, they would choose the same field.

In terms of rating their education experience’s effect on their personal growth, alumni, on average, rated Western University as “somewhat” affecting areas such as working independently, working effectively in teams, personal and professional ethics, and defining and solving problems, and less so affecting areas such as understanding written information; speaking, writing, and using technology effectively; and participating as a citizen in their community.
The majority of the respondents were employed full time in the field in which they received their degree (79%, 67%). Some were involved in continuing education, and more planned to do so to increase earning power, satisfy job/career requirements, and for general self-improvement. Forty-three percent are specializing in primary care, 6% are serving in the armed forces, 11% are practicing in an underserved area, 3% are training in an underserved area, and 2% are attending school full time.

Current Job Salary

The majority of the respondents indicated that Western University prepared them “adequately” to “well” for their first and current positions, and that they are somewhat to very satisfied with their current positions.

Regarding the influence of Western University’s philosophy of humanism on alumni careers, alumni stated that they were able to approach, communicate, and relate to many different types of people and had gained good people skills as a result. Others stated that the holistic approach provided them a greater understanding of how life interacts with health, made them more compassionate with their patients, increased their tolerance of others, helped them to become better physicians, and assisted them in practicing in a more moral and ethical manner. A few respondents felt that these skills were ingrained and that the University had limited influence on this type of behavior.

When asked about recommended changes to Western University, the most common comments centered on improving the clinical rotations, improving instruction, decreasing tuition, and enhancing the clinical orientation in lectures. Some students recommended moving the school to a different location, decreasing class size, increasing the opportunity for interdisciplinary study, and improving the library. Many other suggestions, a number of which have been explored, were made by one, two, or a small handful of students. Those student recommendations for improvement have been
and are continuing to be addressed in the University’s improvement and planning efforts (all except changing the school’s location). A report to alumni responding to these issues was prepared for the Office of Alumni Affairs. The report findings were presented to the alumni representatives during a board meeting. The findings were not disseminated to more alumni because the Alumni Newsletter did not receive a favorable rating as a useful or often-read method of disseminating information, and no better mechanism has yet been established. Findings for this and future reports will be made available through the Western University website.

**Pilot Course Evaluations (Public Health, Anatomy, Endocrine System, Reproductive System, Introduction to Clinical Medicine, Medical Spanish)**

The Office of Strategic Planning and Institutional Effectiveness (OSPIE) has become involved in the process of course evaluations for COMP in Spring 2000 (see Exhibit II.4). The evaluation of courses is an important process because it provides important information to the faculty member(s) about their teaching approach, content of the course, assessment methods, and student learning. Because course evaluations can be used as a tool for assessment as well as development, the office has involved the faculty and students in the process of developing the forms. The information provided below details the actions taken by OSPIE, as well as the individuals involved in the creation of a course evaluation form.

1. A draft template of the evaluation form was shared with all COMP faculty, who had the opportunity for changes, additions, and deletions to the form. In addition, the template of the evaluation form was distributed to the Student Government Association for its review and comments.

2. An individual faculty member or system coordinator requested an evaluation of a course.

3. The OSPIE met with the faculty member(s) to discuss the goals and objectives of the course, what they are most interested in evaluating, and which specific faculty. In addition, the OSPIE discussed the purpose of evaluation to ensure all involved have a shared understanding of the purpose and process.

4. The OSPIE developed and distributed a draft version of the evaluation form to the faculty member originally interested, and any other faculty members involved in the course or system.

5. The OSPIE collected, discussed, and incorporated the feedback of the faculty members.

6. The final draft was distributed, either by OSPIE or the faculty member requesting the evaluation, to all involved faculty members for final approval.

7. The OSPIE distributed the evaluation form in a classroom, after explaining the purpose of the evaluation, ensuring student confidentiality, and encouraging them to complete the form.

8. Depending upon the class in which the evaluation was delivered, the students may have been encouraged to complete the evaluation forms at that time or to return them to the OSPIE as soon as possible. A box was placed outside the OSPIE for students to return the forms.
9. The OSPIE staff, faculty, and student government representatives made reminder announcements in subsequent classes to encourage students to complete the evaluation forms.

10. To ensure student confidentiality, the OSPIE staff entered and analyzed the data.

11. The summary report was shared and reviewed with the Department Chair and involved faculty.

12. OSPIE/CAPE staff worked with the chair and the faculty to determine the most effective ways to make improvements and incorporate the feedback to enhance teaching and learning.

13. Faculty whose evaluations indicated so were recognized for excellence in teaching as well as the best practices used in their teaching.

**Pilot Revised Rotations Evaluations**

**Evaluation Forms and Grades**

The format for the evaluation forms has been revised to encourage clinical faculty to provide complete and thoughtful responses (see Exhibit II.4). The evaluation forms provide the student with formalized feedback on his/her behavior/performance from a professional who recognizes the knowledge, skills, attitudes, and behaviors that will lead to success as a physician. This grade will be entered as a final grade on the student’s transcript. If the preceptor of record cannot or will not assign a grade, the Director of Clinical Education or Assistant Dean of Clinical Affairs will determine a final grade for the rotation. The grade represents a *summative* evaluation—a summary and interpretation of the student’s performance. The remainder of the evaluation form is a *formative* evaluation—aimed at forming or shaping the student’s behavior for future clinical experiences.

**Mid-Rotation Evaluation Form**

Clinical rotations should include frequent, frank, and honest feedback for students on an ongoing basis. To supplement and formalize this process, we encourage the preceptor and student to meet approximately halfway through the rotation and complete a Mid-Rotation Evaluation Form. The Mid-Rotation Evaluation is designed very similar to the Final Evaluation Form. The Mid-Rotation Evaluation Form provides an opportunity for the clinical preceptor and student to discuss the student’s performance and for the preceptor to interpret the student’s performance in terms of a grade earned thus far. The Mid-Rotation Evaluation is for the confidential use of the student and teacher and *is not returned to COMP*. Furthermore, a final grade will not be accepted on a Mid-Rotation Evaluation form.

**Evaluation of Clinical Sites/Preceptors by Students**

Because COMP is very concerned about both the academics and clinical experiences for students at its clinical sites, as well as student input into the academic program, evaluation of clinical sites by students is highly recommended for fourth-year
students and mandatory for third-year students for the academic year 2000-2001. As a result, grades for third-year students on clinical rotations will not be recorded and finalized until the evaluation form for each clinical site has been received in the Office of Clinical Education. For academic year 2001-2002, evaluations of clinical sites/preceptors will be mandatory for third- and fourth-year students.

**ISAC Evaluations.** The Intensive Summer Anatomy course was developed four years ago by the anatomy faculty to enhance the effectiveness of the anatomy lab as a learning environment (see Exhibit II.4). The faculty-to-student ratio had increased due to an increase in class size, causing both faculty and students to become frustrated with the time students were required to wait to receive attention in lab. Therefore, a group of more advanced incoming first-year students were invited to take the anatomy course at an accelerated pace over the summer and serve as facilitators in the fall. As part of the process to further develop and improve the Intensive Summer Anatomy course, a series of evaluations was completed during the 1999-2000 and 2000-2001 academic years. First came evaluations of the student facilitators, the cornerstone of the course (360-degree evaluation). The facilitators participated in a self-evaluation and were evaluated as a group by the first-year students in the regular Anatomy course and by the Anatomy faculty. These evaluations were designed to assess the strengths and weaknesses of the facilitator program for the Anatomy course, with special attention focusing on areas needing improvement. The items created for these surveys were based upon the role and function description of the facilitators in the ISAC program. The same set of questions was asked of students in the class, course facilitators, and faculty, making it possible to compare the perceptions of each group. The average of all responses was computed to observe trends across the groups. A set of open-ended questions was included in the evaluation form, designed to target specific areas of success and improvement for the ISAC program facilitators. Responses were received from 134 students, 14 facilitators, and 4 faculty members.

The strengths of their own performance most frequently identified by the facilitators included integration of material from lecture and lab, encouraging group participation, and providing a preview of material to be covered during lab. The following areas were recognized by facilitators as needing improvement: not providing too much information and detail, delivering information in an interactive manner, and addressing groups that were of a small or manageable size. Several facilitators commented that a slower pace and less material might enhance students’ ability to learn. All facilitators indicated that they would participate in the program again if given the chance, commenting that the experience enhanced their teaching abilities and the depth of their understanding of the material. Several commented on the joy of being able to help others learn.

In general, students expressed that facilitators were knowledgeable and helpful. However, as would be expected, some facilitators were perceived as being more helpful than others. Interestingly, students identified very similar strengths and areas needing improvement as those mentioned by the facilitators. The activities and facilitator behaviors that students found most helpful, in addition to those stated above, included quizzing, diagramming on the board, repeating information as needed, and providing mock practical exams. Other areas for improvement included providing accurate information, being more available and approachable, and not showing favoritism.
Students and facilitators recommended that as the program continues, providing additional training sessions for facilitators would be beneficial to help the ISAC students further develop facilitation skills.

As a result of these evaluations, in addition to a separate evaluation of the entire regular Anatomy course (see section on pilot course/faculty evaluations), a program of ISAC facilitator training was developed and implemented in Summer 2000. This training was developed to build facilitators’ understanding of learning preferences and styles, communication, group dynamics, and strategies for peer-led learning. The training included short lectures on each topic, individual and group exercises, and question and answer periods. The facilitators participated in a focus group to provide suggestions for improving the training. While facilitators felt the training was useful and the material introduced was new to them, they recommended that future training be provided after the summer anatomy course (as some of the students do not pass the ISAC and do not become facilitators), that the training be delivered all together in one day, and that the exercises focus more on anatomy-based examples, with more specific strategies for facilitating students. In addition, the facilitators suggested that facilitators from previous years participate in the training.

The facilitators for the Fall 2000-2001 Anatomy course rotated among groups less frequently than in the previous year (approximately every month and a half, rather than every two weeks), and each was evaluated by faculty, students, and themselves. This evaluation form was different from the previous year’s in several ways. First, the evaluation form was condensed from multiple pages to one page, capturing the most pertinent questions required for improvement of individual facilitator performance and the facilitator training program. Second, each facilitator was provided an overall report to inform them of how the group was doing as a whole. This was accompanied by a personalized report that enabled them to compare their individualized feedback with the group’s feedback. This feedback was provided as a formative evaluation and geared to help them adjust their facilitation accordingly. The Anatomy faculty members were provided only the overall feedback report.

Overall, the facilitators received very high ratings by the students and faculty, and rated themselves positively as well. Students commented that they did not think they could get through the course without the assistance of facilitators, and that the information and encouragement provided by the facilitators helped them to learn, study, and do well on exams. However, several issues emerged that should be addressed in future courses. The most prevalent concern revolved around clarity of expectations. Students expressed expectations that extended beyond the duties of the facilitators, and faculty had varying degrees of expectations for the facilitators and students. Although the role and function of the facilitator were addressed and clarified over the course of the past year, more work in this area is necessary. Other areas of concern included the amount of time spent in class and the amount of material to be learned, the lack of time for independent study, and the difficulty in keeping up on the dissection with the pace of the course. Facilitators also expressed concern for students who became too dependent on the assistance provided by facilitators.

**Human Resource Survey**

A survey of campus personnel (central administrators, deans, program chairs, and one group of nonexempt employees) was conducted (n=24) in August 1999 by the new director of the Human Resource Department. He used a structured interview
technique to determine what the most important human resource issues were in
departments on campus, how these issues should be addressed, and what the Human
Resource Department could do to assist units. In addition, individuals were asked to
provide their current opinion and a list of changes they would like to see in the future
regarding recruitment and selection of new employees, promotion of current employees,
employee relations, management/employee relations, performance appraisal, training
and development, and wage and salary structures.

The results of the survey indicated that the University needed to improve
recruiting and selection processes, analyze and implement an appropriate compensation
strategy, implement staff development programs, and change the perception that the
Human Resource Department is adversarial.

**Hiring Authority Satisfaction Survey**

A survey of campus individuals who, over the past year, had hired staff through
the Human Resources Department was completed in Spring 2000 (see Exhibit II.4). The
survey was designed to determine the level of satisfaction of users of Human Resources
Department services. The survey asked respondents to rate all aspects of the
recruitment and hiring process, including individuals’ ability to interview and select
employees, satisfaction with the candidates selected, aspects of individual candidates
that hiring authorities thought were important and how satisfied they were with the
outcome, satisfaction with candidates hired over the last two years, and open-ended
responses about how the Human Resources Department could improve the quality of
candidates.

Responses were received from 36 individuals across 26 different departments.
The individuals were responsible for a range of 1-10 permanent and 1-4 temporary
positions. Of the 36 hiring authorities who received the survey, 18 replied, for an
acceptable response rate of 50%. The respondents reported a total of 68 employee
requisitions within the last year, including 48 for permanent employees and 20 for
temporary employees. Overall, the most frequent job classifications of the employee
requisitions were clerical/secretarial (54%, n=26) and professional/managerial (31%,
n=5). The majority of respondents (66%, n=12) stated that in terms of their department’s
most recent opening for a permanent position, the Human Resources Department
provided the résumé(s)/application(s) for the respective position(s) in one week or less.
Regarding the hiring authorities’ knowledge of the recruitment and hiring process, only
28% (n=5) rated their knowledge as very good, while the majority of the sample stated
that their knowledge was adequate (55%, n=10) or insufficient (17%, n=3).

Overall, the hiring authorities who submitted requisitions for permanent positions
were moderately satisfied (M=3.63) with the candidates provided by Human Resources.
Although 57% (n=8) stated that they were either somewhat satisfied or satisfied with
the candidates provided by Human Resources, 36% (n=5) indicated that they were either
somewhat dissatisfied or dissatisfied. The respondents stated that they were very
satisfied with the length of time Human Resources took to provide candidates (M=4.14),
with only one respondent indicating any dissatisfaction. In a similar response to the
satisfaction ratings for permanent employees, the hiring authorities (n=10) who
submitted requisitions for temporary employees were moderately satisfied (M=3.71).
Overall, 67% (n=6) of the respondents indicated that they were either satisfied or
somewhat satisfied with the candidates provided by Human Resources.
Regarding several key employment outcomes, the hiring authorities’ satisfaction with their most recent permanent employee was overwhelmingly positive. The mean ratings for overall job performance (M=4.38), professionalism (M=4.50), and tenure (M=4.40) indicate high satisfaction with these candidate outcomes. The respondents offered several suggestions when asked how Human Resources could improve the quality of candidates provided to hiring authorities. Three respondents suggested that there be some kind of assessment of candidate knowledge and/or skills before a final list of candidates is sent to the respective department to begin the interviews. Another three respondents stated that the quality of candidates would improve if the salaries and/or compensation for the open positions were more representative of the employment market. In short, compensation must be competitive to attract high-quality employees.

Meet the President. During Spring 2000, President Pumerantz decided to “take the pulse” of Western University’s student body. He scheduled a lunchtime session with each class of each academic program on campus. In the beginning of each session, he provided the students with an update of activities and initiatives on the campus. Then, he opened the session up to student questions, concerns, praise, and gripes. The student comments and questions were compiled into a report after each session, and the reports were discussed at Cabinet and Academic Affairs Council meetings, with the goal being to respond to student concerns. The month following these sessions, the President returned to each of the classes with responses to their comments. The President followed up on this activity again in late Fall 2000.

Issues that were raised (both for compliments and concerns) included Western University’s philosophy of humanism and compassionate care, the family-like atmosphere, the new Library and current library policies and hours, development of the new College of Veterinary Medicine and its impact on other programs, professional fraternities, licensing board review courses, faculty issues and evaluation, curricular issues, grading policies, clinical rotations, new program development, computers and instructional technology issues, the blind student in the College of Medicine, interdisciplinary programs, faculty-student relations and due process for students experiencing academic difficulty, program accreditation processes and outcomes, student services such as food and housing, and tuition and student fees. (See Exhibit II.4.)

COMP Graduation Survey

At the end of Spring 2000, the graduating class of the College of Osteopathic Medicine received a graduation questionnaire (similar to the one used by the AAMC since 1978) during their last Essentials of Family Medicine Weekend (see Exhibit II.4). The questions posed in the graduation questionnaire focused on critical issues for all medical students and educators, such as whether or not the osteopathic education provided by Western University appropriately prepares students for residency and future practice, whether the school’s environment was conducive to learning, what was particularly good or bad about their education experience, what students’ financial situations were and how finances would affect their future career activities, and what were their long-term career goals.

Of the 165 students in the graduating class, 133 surveys (81%) were returned. Fifty-eight percent of the respondents were male; 59% were Caucasian, 20% were Asian American, 7% were Hispanic/Latino, and 4% were African American. Fifty-one percent were married or in a permanent relationship, and one-third had dependents under age
Ninety-four percent entered medical school in 1996, while a total of eight entered in 1994 and 1995. Forty-nine percent identified COMP as their first choice as a medical school, and 24% were employed full-time and 25% were employed part-time in the medical profession prior to medical school. Forty-four percent possessed medical certificates or graduate degrees, including master's degrees; PhDs; Nursing, Pharmacy, and PA degrees/certificates; and other medical degrees and certificates.

Summary of Analyses—The students stated that undergraduate Physiology, Biology, Comparative Anatomy, and Biochemistry were the most important courses as preparation for medical school, with Genetics, General Chemistry, English Composition, and Psychology not too far behind. In terms of the Western University basic science courses, students felt that course objectives were made clear, that there was timely feedback on performance, that course objectives and examination content matched closely, and that courses were sufficiently integrated and coordinated. Many students felt that courses developed problem-solving skills. Though many felt that courses were well organized and provided relevant preparation for clerkships, there were some who did not. This finding will be explored further. One possible explanation is that members of such a diverse student body have equally diverse learning needs that need to be addressed better. Students rated the quality of the basic science instruction and the courses were ranked on a continuum with Gross Anatomy, Micro- Anatomy/Histology, and Microbiology as the top three. These courses are laboratory courses in which students have more opportunities to engage in active learning strategies, which might explain the high ratings. The instruction in Pharmacology, Biochemistry, Genetics, and Biostatistics/Epidemiology were the lowest rated, and even prior to the survey, the college was working on addressing those weaknesses and has continued to do so.

The majority of the students stated that 25% or less of their time during years one and two was spent in case-based learning experiences, also something the College is working to enhance. In regard to the appropriateness of time devoted to clinical decision making and clinical care, students seemed generally pleased with such areas of care as patient interviewing skills, communication skills, primary care, physician-patient relationships, teamwork with other health professionals, care of ambulatory diseases, diagnosis and management of disease, clinical decision making, care of hospitalized and long-term care patients, and patient follow-up. Geriatrics, evidence-based medicine, decision analysis, and literature reviews/critiques were areas needing improvement and are areas in which we have developed programs/activities to address student needs. Again, when queried about appropriateness of time devoted to population-based medicine, practice management, and other medical topics, students felt pretty comfortable with most items other than geriatrics, genetics counseling, biostatistics, and quality/cost management and effective medical practice in a managed care environment. And, again, these items are being addressed in a variety of ways.

Regarding student educational experiences in clinical rotations, at least 50% of students rated all clinical rotations as being of good to excellent quality. The most highly rated rotations were family practice, internal medicine, and emergency medicine. The lowest rated rotations were ob-gyn, general surgery, pediatrics, and psychiatry. When asked about specific aspects of clinical rotations, the majority of students agreed or strongly agreed that the diversity of patient care was appropriate, that students were given appropriate roles in patient care, that the number of patient experiences in rotations was appropriate, that faculty and residents demonstrated use of current evidence-based information in patient care, that attending faculty were involved in
teaching and evaluating rotations, and that students were expected to demonstrate use of current evidence-based information in patient care. Fewer students agreed that they were provided feedback in a timely manner, that performance expectations and objectives were made clear to them, that rotations were well organized, and that they were taught sufficient skills in preparation for their rotations. These issues are being addressed in a variety of ways, primarily through faculty development activities with faculty at rotation sites, and through enhanced communication about expectations and evaluations to both students and rotation faculty.

Students generally were satisfied with student services, though less so with the University library, faculty mentoring, student study space, student health insurance, and career and educational debt management counseling. These issues are being addressed to varying degrees throughout the University.

Some of the activities in which graduates reported having participated during their schooling included delivering health services to underserved populations, educating high school and college students about careers in health professions/biological sciences, providing general health education, field experience in nursing home and community health care, international health experience, participation in research projects and authorship of research papers, and thesis projects.

In terms of general medical school experiences, about half felt that the diversity of the student body positively influenced professional growth and development. Only 10% felt that they had been mistreated during medical school, though only 16% were aware that Western University had a mistreatment policy (see Student Handbook, Appendix I.4, p.1). Students were also asked to report about issues of general, sexual, racial/ethnic, and sexual orientation harassment. Fortunately, there was little harassment reported; however, what little was reported was enough for us to develop some programs to address those issues. Several campus programs have been developed to address harassment issues. First, a group of female administrators have met to discuss issues of concern regarding gender discrimination or unequal treatment, and to brainstorm strategies to address their concerns. These concerns will be shared with the upper administration and taken very seriously in future planning and decision making. In addition, the Department of Human Resources will develop and deliver campuswide diversity training for all levels of staff. The goal of the training is to move past awareness and tolerance, and toward understanding. Interestingly, the majority of the incidences were attributed to residents/interns, clinical faculty, nurses, and patients at clinical sites, although some were attributed to students and preclinical faculty. Only 30% indicated that they reported such incidents to a designated faculty member or administrator, generally to the Dean of Students, a designated counselor/advisor, or to a faculty member or other member of the University. Though most students were neutral on this issue, more students than not were satisfied with the application of Western University’s student mistreatment procedures.

In terms of the overall evaluation of COMP, 69% of graduates agreed or strongly agreed that they have acquired the clinical skills required to begin a residency program; 61% agreed or strongly agreed that they were satisfied with the quality of their medical education. Students were also asked to evaluate how confident they were about a variety of computer skills and how adequately they were covered in the curriculum. Most were confident in basic computer skills, but less so in more advanced areas. They also felt that most computing-related areas were not covered adequately in the program.
addition, a survey was sent to all incoming students to determine their level of computer skills so that workshops and support could be developed to address deficiencies.

As far as graduates' career intentions, 71% stated that they would prefer to work in a group of three or more physicians; 69% reported preferring clinical discipline teaching, research, and patient care; 63% stated that they would prefer to be salaried and hospital based; 58% were contemplating solo practice; and 47% declared basic science teaching and research. Only 26% expected to be involved at least somewhat in research during their medical career. Thirty-three to 39% would locate their practice in an underserved area and serve an underserved population. Seventy-five percent plan to become certified in a specialty or subspecialty, and 60% declared that educational debt played no role in that decision, but rather an understanding of professional opportunities in the future medical marketplace influenced their specialty choice.

Most students reported being in debt. Forty-three percent received scholarships or grants, 31% from the armed forces, 38% from the Public Health Service, 33% from the National Medical Fellowship, 35% Financial Assistance to Disadvantaged Health Professions, 47% Exceptional Financial Need Scholarship, 60% School Scholarships for Disadvantaged Students, 47% Need-based School Scholarships, 57% School Merit Scholarships, 39% Cal Grants, and 54% received other sources of funds. Forty percent had outstanding educational loans from their undergraduate education and 85% have outstanding loans for medical education, which they are required to pay. The average debt of a COMP graduate is $127,733.

College of Pharmacy Graduation Survey

At the end of Spring 2000, the graduating class of the College of Pharmacy (the charter class) received a graduation questionnaire, especially developed to determine student satisfaction with their Western University College of Pharmacy educational experience (see Exhibit II.4).

The survey measured the perceived importance and satisfaction of many aspects of the program. These aspects included decision factors to attend, relationships with faculty, extent to which they were exposed to various teaching styles, the overall school environment, their rotation experience, plans for the future, and the overall curriculum. More specifically, students were asked to rate the amount of learning, extent of value, degree of preparation and degree of difficulty for each of the 21 blocks in the curriculum. Because the curriculum was developed on a competency-based model, students were asked about the extent to which they developed certain competencies, as well as the learning environment created to help develop these competencies and abilities.

Of the 63 students in the graduating class, 55 surveys (87%) were returned. Almost three-quarters of recent pharmacy graduates had a prior degree when they enrolled at Western University of Health Sciences.

Regarding their initial decision to attend Western University, students were somewhat dissatisfied with the location, but were satisfied with other aspects that they rated of great importance, such as intellectual environment. Once enrolled, students reported that access to on-campus faculty and faculty motivation were very important, and they were, overall, very satisfied with these factors. Across the factors of the Western University environment, students reported the greatest dissatisfaction with the library. In addition, respondents gave the highest importance ratings to the faculty,
curriculum, academic standards, rotations, and comprehensive reviews. When asked to rate the quality of these factors, responses were positive.

When asked about their blocks specifically, students reported learning the most in Infectious Disease, Cardiology, Psychiatry, Pulmonary, and Oncology. The courses that added the most value toward their career goals included Infectious Disease, Cardiology, Pulmonary, Psychiatry, and Pharmacology. The courses that provided the best preparation for experiential learning were the same as those previously mentioned. Interestingly, no courses were rated in the lower extremes of the scale regarding amount learned, value to career, and preparation for experiential learning. However, several courses were rated in the lower end of the scale for degree of difficulty (somewhat easy), including Introduction to Pharmacy Practice, patient-based blocks, Health Care Administration, and Pharmacy Administration. Interestingly, few courses received ratings indicating that they were very difficult, and the most difficult courses were Infectious Disease and Oncology.

Responses to the curriculum overall indicated that students perceive their personal confidence in their preparation and capabilities to be adequate to good. This indicates that there is room for improvement, especially in the area of comprehensive review. Respondents generally were in agreement that they did, in fact, acquire specific personal abilities, including the ability to reason about ethical and moral problems, a sense of responsibility for decisions and actions, and increased self-confidence. When asked about core pharmacy-related abilities, students were most strongly in agreement that they achieved the following goals: “counsel patients regarding issues of health care management and proper use and effects of medication,” “provide ethical and compassionate pharmaceutical care,” “provide education to the public,” and “monitor the safety and efficacy of therapeutic plans.” Students reported that exams, lectures, and quizzes facilitated their learning to the greatest extent. Interestingly, all teaching approaches used helped the students learn “some” to “quite a lot,” except for the Patient Family Program, which was reported to only help a little. All aspects of the rotation program were found to be adequate to good, including feedback on work assigned, exposure to a variety of clinical problems, and quality of role models.

When asked about their plans after graduation, most students intend to practice full-time (78%), while 14.5% of students plan to complete a residency program. Almost half of the respondents indicated they would work in community pharmacies (46%). The majority of respondents indicated that they had already received a job offer, and geographic location and salary were the biggest drivers of accepting employment offers.

**COMP Outcomes Assessment Project.** A study was undertaken in academic year 1999-2000 to determine the relationship among admission selection criteria, student achievement in coursework, and DO licensing board passage (see Exhibit II.4). The students in the COMP graduating classes of 1992-1998 were selected for inclusion in the study (n=1284, usable data n=567). Data gathered include demographics, admission information [GPA (science and non-science), MCAT score, prior degrees and type of university attended, transcript data [grades (didactic and clinical), special coursework (e.g., ISAC and 5-year program), and scores on parts 1 and 2 of the NBOME. Analyses were completed to determine whether or not there are predictors to passing the boards, and to determine the relationship between course grades in a particular subject area and board scores. The information gathered from this study was
used to inform the COMP Admissions Process Improvement and the curriculum revision projects (see Standard IV—COMP.)

During Spring 2001, similar analyses will be conducted for the charter class of the College of Pharmacy, the first few graduating classes of the College of Graduate Nursing, and the Physical Therapy program (see Exhibit II.8).

**COMP Ideal Student Survey**
To assist in the Admissions Process Improvement project, a study was undertaken to determine what attributes the ideal COMP student possesses and then to develop admission criteria to select for these attributes. To obtain this information, a survey form was sent to all COMP faculty (basic science and clinical) asking them to identify between five and 10 students that they have known over the years whom they would identify as IDEAL students (see Exhibit II.4). The word “ideal” was not defined in order not to limit thinking. Once students were identified, their admission files were researched to determine what characteristics they possessed at the time of admission that made them ideal. These characteristics included volunteer experience, work experience, teaching experience, research experience, physician/health professional shadowing, advanced degree (i.e. MA), osteopathic motivation, GPA and MCAT scores, and letters of recommendation. Once these characteristics were discussed at length with the Admissions Process Improvement team members, a scale was developed to assist the admissions committee and faculty members reviewing admission files to evaluate applicants systematically, based on criteria that would ensure that those invited for interview would have qualifications for success.

**OMM Program Assessment Activities.** The Office of Strategic Planning has been collaborating with the OMM department with COMP to enhance the OMM Fellowship program. In the fall of academic year 2000-2001, a survey was designed and sent out to previous graduates who participated in the fellows program to inquire about the benefits they received from the program, and the extent to which they believe the fellowship experience impacts their practice today (see Exhibit II.4). The survey also provided the department with the opportunity to ask some specific questions that have surfaced in the academic literature about the use of OMM in practice. The Office of Strategic Planning and CAPE are also working with the OMM department to enhance the course evaluations used, develop evaluation forms for frequent presentations, and enhance the existing training program for the fellows.

**Evaluation of the MSHPE Program Alumni.** In November 1999, after the Alumni Survey, the Dean of the College of Allied Health Professions, as part of the Academic Program Review of the MSHPE program, administered an evaluation of the MSHPE to the program’s alumni (see Exhibit II.4). This survey form asked questions specific to the MSHPE, focusing on how the MSHPE program affected their career choices, their teaching, and their professional goals. The survey also asked whether alumni have engaged in teaching and for a description of that teaching experience, and whether alumni have submitted publications or received any awards/recognition since graduation. Finally, alumni were asked to list three changes/improvements they would make to the program.

**Osteopathic Post-Graduate Training Institute (OPTI)-West Faculty Development Needs Assessment**—The Director of CAPE surveyed members of OPTI-West who have postdoctoral programs and clinical rotations for Western University students. The
results indicated that faculty at these sites desired faculty development in the following areas: development of educational objectives; assessment of educational outcomes, including test construction; osteopathic history, reasoning, philosophy, and clinical procedures; planning, communication, time management, and self-assessment skills; and instructional technology/distance learning skills. In Spring 2000, the directors of CAPE and the Center for Graduate Studies and Lifelong Learning completed a telephone survey of all of the directors of medical education at OPTI-West to gain further insight into these faculty development needs. The most salient needs identified were presentation software and skills training, assessment and evaluation training, techniques for the delivery of feedback, strategies for enhanced communication skills, and facilitation of a regular journal reading and review group. Pursuant to this survey, CAPE staff began developing and delivering programs to meet the identified needs. (See Exhibit II.4.)

**Strategic Enrollment Management Surveys—**

- **Survey of Enrollment Management in Colleges of Osteopathic Medicine—**

  The primary purpose of this study was to examine the current enrollment management strategies and practices at colleges of osteopathic medicine, and to identify student affairs deans’ and admissions directors’ perceptions of recruitment practices that yield the best results. The study further explored perceptions of the level of importance and the degree of implementation of five essential components of enrollment management (planning, marketing/recruitment, financial aid/policy pricing, retention, and academic curriculum review). Perceptions of the level of importance placed on each of the essential components were examined relative to institutional characteristics (institutional type, public versus private, geographic location, and entering class size). A secondary purpose was to generate information that could be useful in assisting colleges of osteopathic medicine in developing or improving a strategic enrollment management plan. A third purpose was to provide a contribution to the literature on enrollment management to aid others in developing enrollment management strategies outside of the osteopathic medical profession.

  The population consisted of deans of student affairs and directors of admissions at all 19 colleges of osteopathic medicine in the United States. A 75-item survey of Enrollment Management Strategies and Practices (EMSP) at Colleges of Osteopathic Medicine was utilized to collect data to answer five research questions. The questionnaire was mailed to 37 deans of student affairs and directors of admissions at the 19 colleges of osteopathic medicine in the United States that are member institutions in the American Association of Colleges of Osteopathic Medicine. Twenty-eight surveys were returned, for a response rate of 75.6%. At least one survey was returned from each college of osteopathic medicine.

  Eighty-two percent or more of survey respondents identified 13 recruitment strategies that are being utilized most frequently at their institutions. These strategies included faculty, student, and alumni participation in recruitment presentations to undergraduate students; faculty participation in interviewing applicants; providing campus tours for prospective students; conducting programs on campus for prospective students, and workshops to provide an awareness of the individual colleges and the osteopathic medical profession; developing marketing brochures; building relationships with pre-medical advisors; targeting specific states for recruitment; and conducting
communication campaigns via direct mailings. In addition, a website for applicant inquiries was among the most frequently utilized recruitment strategies.

Institutional characteristics (public or private, geographic location, and entering class size) did not significantly influence enrollment management strategies and recruitment practices at colleges of osteopathic medicine.

On a scale of zero to three, survey respondents rated Retention (2.73) Planning (2.44) and Financial Aid/Pricing (2.51) as having a high degree of importance. Marketing/Recruitment (2.13) and Academic Curriculum Review (1.82) were rated as having a lower degree of importance.

Using a scale of zero to two, all colleges of osteopathic medicine were actively engaged in implementing Marketing and Recruitment activities (1.78). Academic Curriculum Review (1.19) and Planning (1.19) were being implemented with less frequency than other components. According to survey results, only six colleges were identified as having implemented all five essential components of enrollment management at their institutions.

A number of recruitment strategies were perceived to yield the best results: campus visitations and presentations to pre-medical students, hosting on-campus open houses, conducting osteopathic medicine awareness conferences on campus and in each geographic region, building relationships with pre-medical advisors, communicating with students via direct mailings, alumni referrals of prospective applicants, and using current students as ambassadors of the institution.

Even though only six colleges of osteopathic medicine were identified as having a comprehensive enrollment management plan in place, the other 13 colleges were engaged in some enrollment management strategies, or were in the process of developing an enrollment management plan. Survey respondents deemed all five essential components of enrollment management important. However, degree of importance and level of implementation were not influenced significantly by institutional characteristics.

It is evident that insufficient emphasis was being placed on the planning component of enrollment management. Enrollment management is not a well-planned and formalized process within osteopathic medical colleges. The results of this study indicated a high degree of importance and implementation for recruitment activities. Deans of student affairs and directors of admissions indicated that they perceived all five components of enrollment management as having a high degree of importance.

Finally, since many colleges conduct similar recruitment activities, common strategies to impact the osteopathic applicant pool could be created and implemented. Activities identified as common and costly to colleges could be coordinated collectively and delivered in a more cost effective and efficient manner through more collaboration among deans of student affairs and directors of admissions at osteopathic colleges, institutions sharing resources, and working more closely with the American Association of Colleges of Osteopathic Medicine (AACOM) staff. Recommendations for further research in enrollment management in health professions programs are also provided.
• **Prospective Student Withdrawal Questionnaire**—This form is sent to students who decide not to enroll in Western University after being accepted, and is disseminated on an ongoing basis (see Exhibit II.4). It queries students who have chosen not to enroll in Western University about why they have made the decision; what they will be doing instead of attending Western University; what they liked best/least about Western University; their perceptions of the admission process and the interview day on campus, i.e. what was most helpful about various activities during the interview day; and their perceptions of the amount and quality of financial aid information they received.

  This information is used in the continuous quality improvement efforts at Western University to enhance programs and processes so that students find the University more attractive in meeting their needs.

• **Interview Day Questionnaire**—This form assesses applicants’ experiences during their day on campus to interview (see Exhibit II.4). Survey questions include assessments of the utility of the orientation they receive; the presentations made by admissions, financial aid, and student affairs staff members; the campus tour; their interaction with students; presentations made by faculty about the curriculum, including clinical rotations; and a lengthy section about all aspects of the actual interview. Applicants are asked to provide open-ended comments about what was most and least useful during the process, and how Western University could improve the experience.

  As a result of continually evaluating Interview Days, many changes have been made to ensure that applicants have positive experiences, learn what they need to learn, and feel comfortable about asking questions and interacting with members of the Western University community.

• **OMAC Student Information Survey.** The Osteopathic Medicine Awareness Conferences (OMAC) are recruiting tools used to educate prospective students about the profession. The OMAC information survey is partly a recruiting tool to locate students who are potentially interested in pursuing an osteopathic medical education, and partly an assessment of the conference to enhance its efficacy (see Exhibit II.4). Participants are asked to rate the information presented, the speakers, the tour and lunch discussions, and the conference overall. In addition, participants are asked to rate the materials they receive at the conference (e.g., course catalog, AOA newsletter and description of osteopathic medicine, suggested reading list).

• **Prospective Student Withdrawal Questionnaire.** Each student who withdraws the offered seat of admission to any program at Western University receives a brief questionnaire (see Exhibit II.4). The purpose of the questionnaire is to identify why students chose not to enroll at Western University. In addition, the questionnaire asks what other schools they applied to and may have accepted instead, and why. The questionnaire also asks what they liked best and least about Western University, and how they perceived their experience during the application process and interview. In the past, the above questions were asked in an open-ended format, and little useful data were collected. However, beginning with Fall 2000, a more user-friendly form was designed with the expectation that more data of higher quality will be collected.
• Prospective Student Survey-Department of Physical Therapy Education. A survey was created in Fall 2000 for individuals who have been identified as having an interest in Physical Therapy (see Exhibit II.4). The survey targets individuals through a variety of sources for strategic enrollment in the health professions, and probes the factors that influence a decision to pursue or not to pursue a career in health professions, factors influencing the decision to apply to a degree-granting program, current status, what other schools and programs they may have applied to, the process they went through to make their decisions, and comments on the admission and recruitment process at Western University. No results have been collected to date.

• Comprehensive Orientation Evaluation. Students campuswide participated in a weeklong orientation in Fall 2000. An evaluation form was designed to determine the usefulness and effectiveness of an interdisciplinary orientation; a workshop format to address professionalism, harassment, computer training, and student services; and other changes to orientation for the academic year (see Exhibit II.4). Overall, students had mixed responses regarding some of the content, as would be expected given the range of backgrounds of the student population. Students overwhelmingly responded that a week was too long for the orientation, although they enjoyed the opportunity to meet their peers and felt that a positive environment was created.

• COMP Specific Orientation Evaluation. The COMP specific daylong orientation was evaluated on a separate form to determine the usefulness and effectiveness of each day’s content (see Exhibit II.4). Participants were introduced to various faculty members, walked through the student handbook, lectured about professionalism, and involved in other similar activities. The activities received mixed ratings, and again, overall orientation was perceived as being too long.

• Summer Anatomy Prep Program (SAPP). An evaluation was designed to determine the extent to which the SAPP met its goal to provide students with a bridge from their undergraduate experience to the anatomy course (see Exhibit II.4). The program is designed around brief lectures and extensive small group learning experiences. Participants overwhelmingly reported that the program was useful for them, and recommended making it available to more incoming students.

• Health Careers Opportunity Workshop Weekend. The OMAC program was expanded into a two-day program as a recruitment and information tool for all of the health professions available. The first day was dedicated to providing information regarding different professions and clarifying expectations. The second day consisted of diagnostic academic and learning preference/style tests, followed by training in note- and test-taking skills, study skills, and the like. The program was offered in Fall 2000 and will be offered again in the spring (See Exhibit II.4).

• Information Sessions and Interview Day Preparation Programs. The office of recruitment offers a series of three all-day workshops across the programs at
Western University. The workshops are designed to 1) provide information about each program, 2) provide assistance in the application process, and 3) provide training and strategies for interviewing and note- and test-taking. The process of creating evaluation forms helped the recruitment team better crystallize the purpose and objectives for each workshop, and the feedback received across the workshops has been utilized. (See Exhibit II.4.)

- **Alumni Assistance Assessment.** In summer of the academic year 1999-2000, the recruitment department administered an assessment to the alumni to determine the extent to which they would be willing to assist in the recruitment of incoming students. The alumni answered questions about their previous experience in talking with and presenting to undergraduate students, and the ways in which they would be willing to assist the recruitment team when they travel across the country.

- **Admitted Student Computer Experience Questionnaire (COMP, Pharmacy).** Incoming students for the academic year 2000-2001 were required to lease a laptop computer through Western University. These incoming students were asked to complete a questionnaire to identify their experience with computers and need for computer skills training (see Exhibit II.4). The respondents indicated that they had a reasonable comfort level with basic skills, such as accessing and utilizing email, creating documents in the Microsoft Office programs, troubleshooting, and utilizing the Internet. The areas identified for training included web page design, database creation, and other, more advanced skills. However, less than one-half of the admitted students responded; therefore, the needs of the group as a whole were not assessed completely and accurately. Given the information available at the time, the Office of Strategic Planning did not prioritize the delivery of basic skills training, and forwarded the results to the Office of Information Technology’s training staff.

**Assorted Administrative Assessment Activities.** The Office of Strategic Planning was called upon to assist various offices and groups across campus in meeting their assessment needs, and to either spearhead or facilitate the evaluative process. The Office of Strategic Planning has taken a train-the-trainer approach, and focused on teaching individuals how to ask the right questions to design effective survey instruments to gain the information desired (see Exhibit II.4). Projects include evaluation of the CLER (Certification and Licensure Exam Review) site for the PA and Nursing programs, organization and administration of the critical thinking exam, data-gathering instrument for the process improvement efforts of the COMP admissions committee, and needs assessment for child care concerns campuswide. The Office of Strategic Planning also created an evaluation instrument for the online education-based Education Scholar program. This program, developed in collaboration with other institutions, has been renamed the Education Scholar Program. The response rate was very low for this evaluation, which has led to further developments on how to increase the utility of the site.

**Staff Training Needs Survey.** A survey was administered during Summer 2000 to determine the skills, knowledge, and abilities on which the staff would like to be trained (see Exhibit II.4). These included computer and technology skills, time management and communication skills, and supervisory and other professional development skills. As resources always are limited, HR must ensure that it provides a training program that is
appropriate for the staff and administration and best meets institutional needs. Therefore, participants were asked to rate specific computer programs and personal development topics as “not useful,” “useful,” or “very useful” based on usefulness for their job and usefulness to them personally. In the Computing Technology section, respondents were asked to rate their skill level for the specific program as “no skills,” “some skills,” or “highly skilled.” A brief list of the skills associated with the computer programs was provided to help participants determine their skill levels. In the Personal Development section, they were asked to rate the likelihood of attending the specified seminar as “not likely,” “maybe likely,” or “likely.”

The response rate was 36%; 68 of the 188 people who received surveys responded. In the Computing Technology section, Introductory Word, Email, and Intermediate Word were ranked as the top three “very useful” computer programs. It should be noted that of the people who indicated their skill level with these programs, over 90% had some skills in these programs. Two-thirds of the participants indicated that they are highly skilled in Introductory Word, while over half of the respondents indicated that they are highly skilled in Email. It would be reasonable to conclude that, although these programs are important for their jobs, most people’s skills levels in these programs are adequate to do their jobs. Therefore, these programs should be given low priority in the training schedule.

The computer programs that should receive high priority for training are Intermediate Excel, Beginning Access, and Intermediate Internet. For each of these programs, over 45 respondents indicated that they are useful or very useful for their jobs. In addition, 30 or more people indicated that they had no skills in these programs. These are programs that are valuable to people’s work, and yet they indicated that they do not have adequate skills to use them.

In the Personal Development section, the top three topics were Written Communication Skills, Time Management, and Goal Setting/Continuous Quality Improvement. At least 60 people indicated that these topics were either useful or very useful. Of the participants who indicated the likelihood of attending a seminar, over 50 indicated that they would be “maybe likely” or “likely” to attend these seminars.

Based on this survey, CAPE, in conjunction with the Human Resources Department, is developing and administering workshops, courses, and training materials in the following areas:

**Computer Technology**
- Intermediate Excel
- Beginning Access
- Intermediate Internet

**Personal Development**
- Written Communication Skills
- Time Management
- Goal Setting/Continuous Quality Improvement

**Teaching and Learning Enhancement**
- Peer-Led Learning
Each year, all units (academic and support, service, and administrative) are required to submit annual reports to the President (see Exhibit II.9). The Office of Strategic Planning and Institutional Effectiveness reviews the annual reports and assists the President in compiling the University’s Annual Report, presented to the community, along with the President’s State of the University Address (see Appendix II.4 for 1998-1999 and 1999-2000 reports, and Exhibit II.10 for previous years). In addition, the President and the Cabinet devote September’s Cabinet meeting to the review of these annual reports, and to ensuring that all programs and units are working collaboratively toward the common goals of the institution, so that the whole can remain greater than the sum of its parts. The ISPRAC also reviews the annual reports to help focus discussion on strategic issues.

The unit annual reports contain the following:

- Outcome of previous year’s plan: Report of actual outcomes and results from previous year’s activities, and lessons learned from carrying out plans (1-2 pages) Optional Attachment: Key awards and outcomes of unit and its members.
• Current situation: A discussion of unit mission, strengths, weaknesses.
  Attachment: List of 2-4 programs across the country that are 1) realistic peers, 2) aspirational peers, 3) the top programs in the country (1-2 pages).
• Measurable planning goals for next year: Outline the goals for the following year and the activities to be conducted to improve programs and performance, both within the unit and in cooperation with other units. Discuss any proposed changes in the unit’s strategic plan (1-2 pages).
• A description of academic program student assessment activities.
• The unit/program Strategic Plan.

The report is limited to five pages (single-spaced), excluding attachments. The report and attachments are distributed and used for such purposes as planning, budgeting, marketing, and development.

**Strategic Enrollment Management (SEM)**

**Mission**

The purpose of Western University’s Strategic Enrollment Management process is to improve the overall quality and quantity of applicants to all Western University educational programs, and to track and evaluate recruitment efforts to determine the methods that yield the best outcome.

**Goals**

To establish and maintain a relationship with all prospective students, from first contact to matriculation, to increase their interest in making Western University their first choice.

- To improve overall recruitment efforts within the 15 targeted western states.
- To provide equal and consistent dedication of time and effort for the promotion of all Western University programs.
- To identify new sources of potential students.
- To implement SCT Banner as our primary database management system.
- To maintain consistent communication with college advisors.

**Overview of SEM 1999-2000**

Prior to academic year 1999-2000, all Western University recruitment efforts were focused on the DO program. The University employed only one recruiter and did not have an integrated database. In August 1999, Western University began working with an enrollment management consultant to develop the infrastructure necessary for the development and implementation of a Strategic Enrollment Management plan.

In October 1999, two additional recruiters were hired. This team of three recruiters (including the Director of University Recruitment), along with directors and staff of the admissions office, comprise the core SEM team. During the 1999-2000 academic year, the foundation for SEM was laid. To date, the team members have identified resources, developed and refined procedures, collaborated with other University departments, gathered information, and created a communication campaign for student recruitment. The following summarizes the efforts of the SEM team to date:
Communication Plan

The SEM team has been designing an aggressive communication campaign to increase the number of applications, encourage application completion, and improve the overall academic quality of applicants to all Western University programs. The goal is to build a relationship with prospective students, beginning with their first contact with Western University and continuing through matriculation. Various methods of communication are being employed, including written correspondence via e-mail and regular mail, the Western University website, and student phone-a-thons.

In addition, the SEM team has compiled a listing of all health care providers within a 50-mile radius of Western University. This will be an invaluable resource of potential students, partnerships, and collaborative programs.

<table>
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<tr>
<th>Phase</th>
<th>Status of Prospect</th>
<th>Goal of this Phase</th>
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| Recruitment Outreach        | Prospect may or may not have heard of Western University. Contact has been made via a college fair, presentation, direct mail, publication, etc. | • Inform prospects of the programs and services Western University offers.  
                              |                                                                    | • Encourage them to obtain more detailed information on the program in which they are interested.                   |
| Pre-Application Phase       | Prospect has requested information about Western University.                         | • Educate prospects about program requirements.  
                              |                                                                    | • Maintain their interest so that they will request an application.                                                 |
| Application Out Phase       | Prospect has requested an application.                                               | • Maintain communication.  
                              |                                                                    | • Offer useful information.                                                                                   |
                              |                                                                                     | • Encourage them to complete and submit application.                                                              |
| Application In Phase        | Applicant has submitted a completed application and is waiting to see if he or she will be offered an interview. | • Maintain applicant interest in Western University.  
                              |                                                                    | • Continue to build the relationship with the goal that the applicant will make Western University their first choice. |
| Admitted Student Phase      | Applicant has been offered a seat.                                                  | • Help applicants choose Western University.  
                              |                                                                    | • Address applicant questions and issues.                                                                     |
                              |                                                                                     | • Make applicants a part of the Western University family.                                                       |
Accomplishments

To date, the SEM team has developed the multi-phase communication plan illustrated above and has been trained to use SCT Banner’s communication plan capabilities, with a Fall 2000 implementation.

Workshops

The SEM team has designed key recruitment events (workshops and campus tours) with the understanding that if prospective students visit the campus and meet Western University students and faculty, they will be more likely to choose Western University. Western University has hosted five Osteopathic Medicine Awareness Conferences (OMACs) during 1999-2000 to address the unique needs of those interested in osteopathic medicine. The conferences provided attendees with a clear understanding of osteopathic medicine, specific insights into the Western University-COMP curriculum, and application process. Participants were also provided admission information, an opportunity to interact with Western University-COMP students, and a demonstration of osteopathic manipulative medicine.

The SEM team also coordinated several recruitment workshops for the PharmD, Master of Science in Physician Assistant Studies, Master of Physical Therapy, and Nursing programs. These workshops were designed to: 1) attract and inform prospective applicants, 2) encourage them to complete and submit an application, and 3) retain interest in Western University as their first choice for their health professions education.

<table>
<thead>
<tr>
<th>Recruitment Workshop Series</th>
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<td>Type of Workshop</td>
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<td><strong>Information Workshop</strong></td>
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<td><strong>Application Workshop</strong></td>
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Interview & Study Skills Workshop

Potential students who have Submitted a completed application.

Interview Skills
Study Skills
Campus Tour

Tracking and Analyzing Data

With the implementation of SCT Banner and assistance from Western University’s Office of Institutional Effectiveness, the SEM team will have the capacity to monitor, track, and analyze data collected from prospective applicants. Banner is an integrated, campuswide database management system. It has the capacity to organize, crosscheck, track, and manage high-volume communication plans. The SCT Banner system will allow the SEM team to monitor communications with an emphasis on tracking and analyzing for yield. The team will be able to capture and use data to measure the effectiveness of the recruitment process (i.e. college presentations, workshops, alumni contacts, phone-a-thons, advisor contacts, etc.), and to make appropriate changes along the way.

As of May 2000, the team had completed an 11-month training process and was set to begin implementation of the SCT Banner Student Module in June 2000.

Accomplishments

To date, the SEM team has used the analysis of the November 1999 OMAC evaluations to improve the format of the April 29, 2000 conference, and has analyzed college advisor questionnaires that focus on program interest and the capability to receive catalogs and other information via the Web, fax, or mail. Finally, the team has collected and tracked some data indicating how prospects first hear about Western University.

Campus Tours

In contrast to the staff-led, once-a-week tours offered in previous years, tours are now provided by the Western University Student Tour Team. From its inception in February 2000 until the end of classes in May, the Tour Team has given 34 tours to 73 prospective students. The team is composed of a group of Western University students from all programs, who were selected and trained to provide comprehensive campus tours to prospective students. These tours are available four times per week and on one Saturday per month.

To date, the SEM team has recruited and trained 14 Western University students from all campus-based programs to provide a comprehensive tour for prospective students and developed a 15-page, cross-program Tour Team Guidebook as a reference tool for the student tour guides. The tours are publicized in the Communiqué advisor newsletter, Western University This Week, and Campus Commotion; on the Western University website; via phone contacts; and on the NAAHP listserve (National Association for Advisors of the Health Professions). Finally, the SEM team has established a Summer Tour Schedule.

Campuswide Team Effort
Various administrators and staff have worked cooperatively with the SEM team in support of the SEM process. To date, the Publications and Media Relations Office has assisted in the design and development of various brochures, pamphlets, and newsletters. The Multimedia group was instrumental in helping to identify and process photos for tabletop display units. The Western University Facilities crew provided set-up and equipment necessary for workshops and meetings, and faculty and administrators have assisted with workshops and off-campus presentations.

**Western University’s SEM Program**

The core SEM team is a group of dedicated administrators who have excellent interpersonal skills and who are knowledgeable about Western University programs and philosophy. They are competent and, given the resources, have the skills to develop, organize, and implement all components of the enrollment management strategy. However, the simultaneous implementation of SEM and the SCT Banner student module was ambitious. Learning and implementing both processes divided the SEM team’s time and energy and impaired the ability to master either process.

Resources for 1999-2000 were not adequate to support SEM (budget, staffing, support for desktop publishing and layout projects, storage/work space, etc.). Bureaucratic procedures required that the team obtain approval for the printing of brochures, pamphlets, and other materials, which hindered the team’s ability to present a professional image to constituents and compete with other universities as effectively as possible.

See Exhibit II.11 for additional strategic enrollment management information.

**SEM Goals for 2000-2001**

The Goals for the SEM team for the 2000-2001 academic year are as follows:

<table>
<thead>
<tr>
<th>Goals</th>
<th>Strategies</th>
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<tr>
<td>● To establish and maintain a relationship with all prospective students, from the first contact to matriculation, to increase their interest in making Western University their first choice</td>
<td>➢ Implement a multimedia communications plan.</td>
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<td>➢ Coordinate and host informational workshops for each program.</td>
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<td>➢ Supervise the Student Tour Team to ensure quality campus tours.</td>
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<td>➢ Provide college presentations utilizing PowerPoint.</td>
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<td>● To improve overall recruitment efforts within the 15 targeted western states.</td>
<td>➢ Establish and maintain regular contact with college pre-health advisors in targeted states.</td>
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<td>➢ Target the 15-state region in all direct mail projects and other recruitment outreach.</td>
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<td>➢ Increase college presentations in targeted states by 10% (87 college presentations).</td>
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• To provide equal and consistent dedication of time and effort for the promotion of all Western University programs.
  ➢ Utilize professional-quality brochures and admissions pamphlets for all programs.
  ➢ Continuously evaluate allocation of time/effort given to each program and adjust accordingly.
  ➢ Cross-train recruitment staff in all programs.

• To identify new sources of potential students.
  ➢ Actively network with professional associations, health professional employers, and educational institutions.
  ➢ Develop a clear understanding of our prospect population and our desired student profile.

• To implement SCT Banner as our primary database management system.
  ➢ Learn and use all available capabilities in Banner.
  ➢ Transition all data previously stored in Word and ACCESS files into Banner.

• To maintain consistent communication with college advisors.
  ➢ Publish four issues of the Communiqué newsletter each year.
  ➢ Participate in the national and regional advisor conferences held annually.
  ➢ Design informational workshops for advisors.
  ➢ Communicate program changes/updates in a timely fashion.
  ➢ Meet with advisors during college visits.

Plan of Action:

1. Ensure that the Assessment Subcommittee and the ISPRAC monitor the institution’s key performance indicators, and use this information as the institution reviews and revises strategic directions.
2. Empower the ISPRAC to engage fully in a campus master planning process, and share the output of that process with campus constituents.
3. Develop a consultative process for participative evaluation of new programs and initiatives.
4. Ensure that adequate resources are allocated to fully implement SEM process.
Standard III - Governance and Administration

Western University’s Board of Trustees is responsible for the quality and integrity of the University and discharges the necessary duties and responsibilities related thereto. The Board Bylaws provide for up to 10 members, including the President (ex officio). Membership represents the public interest, and there is increased diversity with the addition of Dr. Richard Bond and Mr. Wen Chang in May 2000, and Ms. Cassandra Malry in December 2000 (see Appendix III.1 for Board membership). The Bylaws do not provide for student or faculty representation; however, the practice has been that the Chair of the Faculty Senate and the President of the Student Government Association are invited and do attend Board meetings on a regular basis.

The Board meets four times per year, with December dedicated as the annual meeting and budget adoptions occurring at the March meeting. The Board membership is active and involved with the campus in a variety of activities, including serving on the Institutional Strategic Planning and Resource Advisory Committee and the Assessment Subcommittee, thus increasing the dialogue between the campus and the Board. Board members serve on each of the institutional policy committees and, according to the 1995 WASC site visit report, “…this involvement by its membership gives the Board considerable depth and breadth of knowledge in the affairs of COMP.” The Board focuses much of its attention on financial concerns of the University (see Section IX for discussion of Board financial committees).

See Exhibit III.1 for Articles of Incorporation.

In the prior review, the need for a more informal modus operandi of the Board was noted. To address this concern, more formal procedures have been implemented. This includes the review of the President. In addition, as the founding President approaches his 25th year at the institution, the Board has developed a succession plan (see Exhibit III.2).

The President’s full-time responsibility is to the University. The President and the administration endeavor to serve institutional purposes effectively by providing educational leadership through an environment conducive to learning and high morale, and by focusing all of the resources of the institution on accomplishment of its purposes. In this regard, administrative organization, roles, and responsibilities are defined clearly, and an effort has been made to ensure that resources are focused on academic programs while still directing attention toward management and leadership of these programs. For example, certain administrative positions have been eliminated and/or reassigned (Vice President of Strategic Planning, Vice President of Campus and Human Resources, Director of Special Events, and Director of Purchasing and Risk Management). Also, the Executive Vice President of Academic Affairs (Dr. Krpan) was reassigned to an external position of University Provost. This individual is on paid leave and has the honor of serving as the President-elect of the American Osteopathic Association. His academic duties were assigned to the Executive Vice President of Academic Affairs, Dr. George Charney. In a move to strengthen the institution’s fundraising efforts, the position of Vice President of Advancement was filled after a period of vacancy. In addition, the position of Assistant Vice President of Advancement was created to provide support for that area.
Though the University’s personnel evaluation is performed on an annual basis, a distinctive process for the evaluation of administrators was lacking. A pilot program, which involves an annual goal-setting activity and distribution of effort, began in the 1999-2000 academic year and was institutionalized in 2000-2001. Baseline evaluations were gathered, beginning with the President and moving through the administrative ranks, and follow-up goal setting and evaluation is occurring on an annual basis.

The President was evaluated by all members of his staff and all senior administrators reporting directly to him. A form was used (see Appendix III.2), and a dialogue took place between the President and each evaluator in a supportive environment. The results of this evaluation are being reported to the Board of Trustees during the December 2000 meeting, and will inform the Board’s annual review of the President (see Board of Trustees Bylaws, Exhibit III.3). The Executive Vice President of Academic Affairs and the Vice President of Strategic Planning and Institutional Effectiveness completed similar processes. It is expected that other senior administrators will engage in the same process by the end of the 2000-2001 academic year.

Though the President encourages evaluation of administrators, the process is not carried out in a uniform manner. Some administrators are reviewed only by their immediate supervisors, while others seek input from their subordinates. Requests have been received from some faculty members to have a 360-degree evaluation of college and University leaders. These evaluation issues will be discussed by the Assessment Subcommittee during the 2000-2001 academic year, and a recommendation will be made to the President’s Cabinet.

Many of the Western University senior administrators have come to the University with experience in similar roles at other universities, and advanced degrees in higher education and university administration. Other administrators have spent their entire careers at Western University, and the University has assisted them in obtaining related higher education and relevant professional development. The American Osteopathic Association (AOA), the accrediting body for colleges of osteopathic medicine, has a primary requirement that all deans of osteopathic colleges be Doctors of Osteopathic Medicine (DOs). Given the small pool of DOs nationwide (approximately 44,000), and given the number of colleges of osteopathic medicine (19), there is a need for experienced educators filling those roles. The recently hired Dean of the College of Osteopathic Medicine of the Pacific has come to Western University as a former Director of Medical Education, Clinical Coordinator for the University of New England’s Area Health Education Center, and emergency room physician, but has had limited experience in university administration. Since taking office, he has been provided opportunities for professional development and is being mentored by other senior administrators. In addition, some of his immediate staff members are administrators with experience at other institutions and appropriate education and training in the areas of educational program administration and assessment, curriculum design, and development. The Executive Vice President of Academic Affairs, also a DO, with a background as Chief Medical Officer and DME for multifunctional systems associated with medical universities (UMDNJ, PCOM) and colleges involved with medical school administration, Clinical Dean, and Vice Dean, comes from a similar background as the Dean of COMP, and is receiving professional development as well as mentoring from his colleagues.
Administrators are endeavoring to assure that resources are allocated and reallocated to reflect institutional purposes. This process has been facilitated by the development of a more participative strategic planning process, a better informed budget process aligned to the strategic planning process, an annual goal-setting and reporting process, and a change from a centralized to more of a shared decision-making process.

The role of faculty governance is described in the current Faculty Handbook (see Appendix I.2, pp. 78-79). There are 38 standing committees relating to curriculum, personnel, and other aspects of governance (see Appendix III.3). The Faculty Senate has representatives from all academic programs according to program size. Prior WASC visits noted that the Senate viewed itself as powerless, and that decision making was top-down, with limited consultation. Such concerns still remain, and faculty in some programs question the number of committees and the large number of participant hours devoted to committee work, in light of the decision-making process. However, the President, Cabinet members, Academic Affairs Council members, and members of the ISPRAC are trying to rectify this situation and change campus perceptions. The Chair of the Faculty Senate meets regularly with the Executive Vice President of Academic Affairs.

All but one of Western University’s colleges have governance structures and relevant faculty committees that work effectively, and during the focus group activities engaged in for this WASC self-study, the lack of shared governance was raised only by COMP faculty. This strategic issue will be addressed by the new Dean and his administration (see Standard IV).

The Student Government Association is very active and is comprised of representatives from each academic program. There is a constitution and all students are informed about student governance during orientation and through student handbooks (see Standard VII). Students sit on key policy committees, including curriculum committees and the ISPRAC. As stated previously, the President of the Student Government Association is invited to attend all Board of Trustees meetings. The SGA President meets regularly with the Executive Vice President of Academic Affairs.

The area perceived to have achieved the least amount of progress since the last WASC review is communication. The 1995 WASC team recommended, “The Administration should fully communicate the process and time-frame for major decisions, including Board actions, to all constituencies in the campus community. An effective feedback mechanism needs to be incorporated that informs the campus community, in a timely manner, of major decisions that have been made.” In response to the previous WASC site visit, Board and administrative policies have been made available to the campus community. However, interest is only piqued when an issue becomes salient and little dialogue has occurred. As Western University completed its evolution from a college to a university, policies regarding faculty work expectations have developed as well (see Standard V). The Board of Trustees approves all campus policies, and therefore, approved faculty workload policies. During its October 2000 retreat, the Academic Affairs Council began to address strategic communication issues and decision-making processes.
Enhancing Campus Communications: Two Strategies

The first strategy has to do with informing. There are many things that happen on campus about which one hears rumors, and like the telephone game, those rumors expand into mangled tales. Therefore, we have begun a practice of issuing Occasional Papers, at the rate of one every five to six weeks, or more frequently if needed. These will be issued on the Intranet, in the same way the WesternU This Week is disseminated. Each paper will deal with a topic that concerns the campus community, and serves to inform and clarify. The proposed list of topics for occasional papers includes:

1. Prisma Netsourcing, Inc.
2. Sources of Revenue and Types of Expenditures. This paper could also address fiscal stability, long-term debt, and issues of “overhead.”
3. Fringe benefits: What are they, who pays for them, what is required by the government, what is optional, how they compare (especially such things as vacation).
4. New ventures: Center for Drug Development, California College of Podiatric Medicine, College of Veterinary Medicine, and other activities that have a distinctly academic emphasis.
5. SCT Banner: What is this database management system? Who made the decision to get into it? Why is it important? What’s next?
6. Physical resources: What kind of space do we really have? What are our campus needs for the future? (NOTE: This will also be included in the second strategy of communication.)
7. Training: What are the results of surveys that have suggested training needs? What are we going to do about it?
8. Non-tuition revenue: What is it and why is it important?
9. Policies and Procedures: What are we developing?
11. Pomona Leadership Forum: The importance of Western University as a leader in the community.

The second strategy is consultation. The administration is faced with many issues on which advice is needed. Asking for the opinions of employees not only would give them the opportunity to participate in helping to shape our evolving culture jointly, but would also turn up good ideas. A proposed list of topics for consultation is presented below. Each one would require an accompanying explanation of the actual issue:

1. Which types of benefits are most important: Subsidized health insurance for dependents versus more retirement contributions, et al. This would have to be framed very carefully. But if it were done after the Occasional Paper on benefits, we could learn firsthand what is of most crucial interest (besides higher pay, of course!).
3. Gender and ethnic issues: What are our issues and how can they be addressed?
4. Communication itself: Are the two strategies we might implement effective? What do the employees think?
5. Training: What kind of training do people want? And when?
6. Tuition remission: This actually comes under benefits; should we direct more University resources to helping people continue their education, irrespective of their rank?
7. Policies and procedures: After we issue the new employee handbook, what other policies and procedures should we have?
9. Space needs (see prior list).
10. Flexible work hours.

Information obtained during the campuswide self-study focus groups that were held in Fall 2000, as well as from prior surveys (see Standard II), detailed the continued campus concern regarding lack of communication and ineffective communication. Though many more avenues of communication have opened since the last site visit, the consensus is that information is not consistent, nor is it shared in a timely manner or in a way in which all individuals needing such information should receive it. A consultant has been hired to assist in this area, and a Strategic Communications Plan is being developed (see Appendix III.4). This project is in the information-gathering phase, with a member of the Office of Institutional Effectiveness (see Standard II) conducting an assessment of the current state of affairs. Once the assessment is completed, a communication planning subcommittee of the ISPRAC, as well as the Academic Affairs Council, will be engaged with the consultant to develop the Strategic Communications Plan.

Plan of Action:

1. Continue quality improvement activities focused on enhancing campus administration and effectiveness, to ensure that the administration is better organized and staffed to reflect the size and complexity of the institution and to provide more economical and efficient management.
2. Continue to move toward a more pervasive culture of shared governance through further empowerment of faculty, staff, and students, and development and implementation of a full range of policies and procedures.
3. Assist staff members in developing a staff association through which staff can have and exercise a substantial voice in matters of institutional policy that relate to their areas of responsibility.
4. Continue to review Board of Trustees Bylaws, and faculty, employee, and student handbooks, to ensure that they are consistent, compatible, and complete.
5. Ensure the implementation of the Strategic Communications Plan to enhance campus communication, to be reviewed by the President’s Cabinet.
Standard IV: Educational Programs

Western University’s educational programs are appropriate in content, standards, and nomenclature for the degree level awarded regardless of their mode of delivery, and are staffed by sufficient numbers of faculty qualified for the kind and level of curriculum offered.

Western University currently offers the following degree/certificate programs, by college:

**College of Allied Health Professions**
- Primary Care Physician Assistant Program—Master of Science in Physician Assistant Studies (MS) degree
- Master of Science in Health Sciences (MSHS) degree
- Master of Physical Therapy (MPT) degree
- Master of Science in Health Professions Education (MSHPE) degree

**College of Pharmacy**
- Doctor of Pharmacy (PharmD) degree

**College of Graduate Nursing**
- Master of Science in Nursing (MSN) degree
- Post-Master's Family Nurse Practitioner (FNP) Certificate

**College of Osteopathic Medicine of the Pacific**
- Doctor of Osteopathic Medicine (DO) degree

The Doctor of Osteopathic Medicine, Doctor of Pharmacy, and Master of Physical Therapy degree programs are offered at the approved entry level for professional licensure, and the curricula and program standards have been assessed and approved by the appropriate professional accrediting bodies (N.B. The DO program is undergoing a reaccreditation review by the American Osteopathic Association concurrent with this WASC review).

For classes entering in 1999 and earlier, the Primary Care Physician Assistant program offered a Certificate of Completion. The physician assistant (PA) profession has yet to make any determination about requiring a particular degree level for entry into the profession. However, the majority of programs nationwide offer at least a bachelor’s degree, and about 40% offer an entry-level master’s degree or master’s level option. This latter proportion is growing. Our current certificate program has been assessed and accredited by the Commission on Accreditation of Allied Health Educational Programs. Beginning with the class entering in August 2000, the program will offer only a Master of Science in Physician Assistant Studies and will phase out the certificate program with the completion of studies of the class that entered in August 1999.

This change in degree level was made after reviewing educational outcome measures from our current certificate program, which indicated that students lacking a bachelor’s degree encountered more significant problems in meeting the academic standards of the program, and fulfilling the roles and responsibilities expected of an entry-level physician assistant in today’s managed health care marketplace. These studies indicated that considerably more autonomy was granted a physician assistant in managing the care of patients assigned to him/her, and that the skills needed to maintain
competency as a practicing PA demanded greater academic preparation. Specific curricula involving clinical research, critical thinking skills, and a broader awareness of the socioeconomic aspects of health care delivery were added to the curriculum, to complement the core biomedical and clinical science education contained in the certificate program. A final integrative exercise involving a written critical assessment of the research literature on current patient management was also added to the program requirements to warrant the offering of a Master of Science degree, consistent with other MS degrees offered by the University.

The College of Graduate Nursing offers three tracks: a Master of Science in Nursing (for nurse practitioners who do not currently possess a master’s degree), a Family Nurse Practitioner Certificate (for nurses who already possess a master’s degree in nursing), and a combined MSN/FNP program. Professional recognition of nurse practitioner credentials is moving toward requiring all nurse practitioners to possess a minimum of a master’s degree. Western University’s program has been approved by the California Board of Registered Nursing, and the University is in the process of applying for national accreditation through the Commission on Collegiate Nursing Education.

The Master of Science in Health Professions Education has been designed to provide practicing health professionals with the knowledge, skills, and attitudes necessary to function as a teacher in a health professions education program. It is the one program of the University that does not have a professional accrediting body, yet it is similar in design and structure to other programs desiring to increase the number of quality health professions educators. Most courses are conducted in a seminar format, with provision for independent study so that students may explore unique areas of interest. Completion of a final integrative exercise (a comprehensive written examination, a report of a special project, or a traditional scholarly thesis) is a requirement for graduation.

Western University’s graduate programs ensure levels of student achievement commensurate with those commonly expected of graduate level work, and require evidence of capacity for graduate work as a condition of admission. As indicated above, all academic programs of the University are offered at the graduate/professional level. Curricula are demanding of students, in light of the volume of knowledge required in the various health professions and of the significant role graduates will play in making major decisions affecting the lives of patients. The Doctor of Pharmacy, Doctor of Osteopathic Medicine, and Master of Physical Therapy degrees are required by professional accreditation standards. The Master of Science in Nursing is well on the way to being the required entry-level degree of an advanced practice nurse. Again, the physician assistant profession has yet to formally require a standard entry-level degree for licensing in that profession, but most physician assistant programs nationwide offer a BS degree and about 40% offer a master’s degree, commensurate with the MSN standard for nurse practitioners.

All academic programs utilize an admissions committee, composed of faculty and academic administrators, to assess the capabilities of applicants for professional/graduate education. Except for the DO program, which requires MCAT scores, and the MPT program, which requires the GRE, formal entrance examinations are not required for admission to Western University programs. All admissions committees utilize undergraduate (preprofessional) transcripts, letters of reference/recommendation, and interviews to determine the capacity of applicants to
negotiate the curriculum successfully. The MSHPE program required the GRE early in its development, but faculty found that the examination results were not effective in assessing the potential for practicing health professionals (the focus group for recruitment to this program) to benefit from the curriculum.

While the DO, PharmD, and MSHPE programs do not require a bachelor’s degree for admission, most successful applicants possess this credential. The DO and PharmD programs do require a specific set of undergraduate courses that have been deemed necessary for successful matriculation in the program. The MSHPE program allows admission of practicing health care providers who possess a professional degree, while not necessarily possessing a bachelor’s degree. This is an accommodation to the variety of degree requirements among the various health professions for entry into practice. For such candidates, both the undergraduate and professional transcripts are assessed by faculty to determine an individual’s qualifications for graduate studies. Currently, all MSHPE candidates possess a bachelor’s degree.

For all programs and degree levels, Western University identifies entry-level requirements and defines levels of achievement necessary for graduation. Entry-level requirements are published for each of our programs in the University Catalog (see Appendix I.1), and a Student Handbook (see Appendix I.4) generated for each program also indicates graduation requirements.

All Western University programs, as mentioned in VII. Introduction, are subject to review, including analyses of achievement of the program’s learning objectives and outcomes, to improve program currency and effectiveness. Western University, through evaluation and planning procedures, assesses its capacity to sustain its programs into the foreseeable future on a regular basis.

See Exhibit IV.1 for a listing of realistic peers for each college/program. See Table IV.1 for colleges and their administration.

Scholarship and Creative Activity

Western University actively values and promotes scholarship and creative activity in relationship to the University’s mission and vision, including the dissemination of their products through service. Faculty members engage in scholarship and creative activity at levels and of the kinds appropriate to the institution’s purposes and character.

Up to the current time, Western University has emphasized its teaching mission, but not to the exclusion of scholarly activity. Evaluative criteria for all full-time faculty members include assessment and recognition of scholarly activities. With a recently implemented faculty evaluation process (see Standard V), faculty are allowed discretion in developing an annual plan for distribution of effort among teaching, scholarship, and service. This plan is discussed with the department chair and the dean of the college, modified as appropriate, approved, and then evaluated at the end of the year.

Western University Definition of Scholarship and Research

Scholarship—The Western University definition of scholarship recognizes that knowledge is acquired through research, synthesis, practice, and teaching. Webster’s Dictionary defines scholarship as “the systematized knowledge of a scholar” (defined as

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“a learned person”). The use of the term “scholarship” in this manner includes research as only one form of scholarship. The Carnegie Foundation (1990) broadened the definition of scholarship to bring legitimacy to the full scope of academic work. It includes not only the discovery and integration of knowledge, but also the application of knowledge. The Carnegie Foundation included the “scholarship of teaching” in its report *Scholarship Reconsidered* (Boyer, 1990).

**Western University’s Research Mission**

To initiate and conduct scholarly scientific and health-related research in areas critical to the region, state, and nation; to make major contributions to multidisciplinary research related to the basic understanding, prevention, diagnosis, treatment, and control of various illnesses and debilitating conditions; to integrate research activities and outcomes into the educational, practice, and service missions of the University.

In 1998, Western University’s Research Committee studied the research environment on campus and issued a report titled “Western University’s Expanding Mission: Developing a Plan for Research” (see Appendix IV.1). This report, which was revised in May 1999, included observations about how to encourage and enhance a research enterprise on campus. Six recommendations about how to move forward the research mission of Western University were developed. These are:

- Placing the responsibility for the coordination of all basic and clinical research in the hands of a reconstituted University research committee charged with developing a long-term plan for research at the University;
- Designating the research committee as the advocate for and advisor to the University on all matters related to research;
- Stating that the first priority of intramural research funding be individual investigator-initiated grants, and that a secondary priority be the development of focused efforts in specific areas of current strength;
- Recommending that all faculty intramural research proposals be evaluated by the research committee, and that intramural funding for research be adjusted to reflect the growth of the institution;
- Reconstituting the committee to reflect more accurately the various constituencies and its expanded role in research development at the University;
- Appointing a University director of research with broad-based academic research experience, who would serve as the head of the committee.

**Research Goals, Objectives, and Strategies:**

To promote excellence in basic and clinical research by:

- Further developing the requisite infrastructure to sustain and grow research activities;
  - Director (researcher)
  - Personnel (“right” faculty and staff support)
  - Space
  - Equipment
  - Mentoring
- Policies—Faculty work, ICR, Entrepreneurism, Conflict of Interest, P&T
- Develop partnerships
  - Establishing a stable funding base to support research activities;
  - Obtain and provide seed money
  - Develop partnerships with government and industry
- Ensuring that newly hired faculty are active researchers with a history of funding;
  - Focus efforts on areas in which we have the greatest impact or in which Western University can make a distinctive contribution
  - Implementing appropriate faculty rewards and consequences
- Integrating research activities and outcomes into educational, practice, and service missions by communicating our research activities and outcomes effectively via
  - Publications (scholarly and other),
  - Conferences—local, national, and international,
  - Faculty speaking engagements and guest lectures;
- Implementing faculty development programs;
- Implementing appropriate faculty rewards and consequences

To date, laboratory space has been developed for bench researchers in the biomedical sciences, and the University has provided limited seed monies to support individual faculty in research initiatives (see Appendix IV.2). The level of productivity has been modest, reflecting the overarching demands of the curriculum of the various programs, but has been increasing in recent years. A Research Advisory Council to the Office of Academic Affairs has been established to explore strategies to enhance scholarship on the campus. Its members have proposed to establish a “start-up” funding package for newly hired faculty members, with increased accountability in terms of productivity commensurate with this additional benefit.

The staff of the Office of Grants, Research and Contract Administration has been expanded to assist faculty in developing and identifying research funding opportunities (see Appendix IV.3) and to provide administrative support for faculty committees involved in the research process (the IRB and the Animal Care and Utilization Committee). Students have formed a research Journal Club. Their interest in research opportunities prompted the establishment of a Summer Research Scholarship fund, which allows students to work with faculty mentors and participate in the faculty member’s ongoing research activity or propose an area of their own under faculty tutelage. For the past five years, students have made presentations at the Western Student Research Forum, and a few medical students have presented formal papers at the American Osteopathic Association’s annual meeting (see Appendix IV.4 for listing).

As the activities of the Research Advisory Council develop further, Western University expects an expanded emphasis on scholarship as part of the role of each faculty member. The College of Pharmacy has developed an applied research unit that looks at pharmaceutical services delivery issues. The Center for Disability Issues and the Health Professions has applied research as one of its central missions (see Standard VII). As part of the consortium arrangement between the University and its primary teaching hospitals, the University administration is working out affiliation arrangements that would facilitate Western University faculty access to patients at these facilities for clinical research activities. With the growth in the number of residency
programs in a wider variety of medical specialties, greater participation will serve to advance the scholarly activities of clinical faculty members. A department of geriatrics has been established in COMP to expand research opportunities (as well as educational opportunities) in this field. As suggested by the above examples, the University, in developing its research and scholarship mission, is concentrating on areas that are currently underserved by the research community to develop its academic niche.

Western University recognizes and promotes appropriate linkages among scholarship, teaching, and student learning. Within the context of a primarily teaching institution, sponsoring programs directed to produce practicing health professionals while striking an appropriate balance between scholarship and the teaching/learning process has not been easy. Contrary to the situation encountered at other health professions institutions, where concerns have been raised about an overemphasis on faculty scholarship and an assumed lack of emphasis on teaching, Western University historically has placed more emphasis on teaching. As related above, this emphasis is gradually changing to advance the scholarly activities of the faculty and to be responsive to student and professional demands for evidence-based approaches to health care practice. This forces a transformation in the relationship between faculty and students, and in the outcome measures for successful student learning, in that a greater emphasis will be placed on developing students' critical abilities to interpret original research (rather than a traditional reliance on secondary and tertiary reviews, continuing education programs, etc.) and preparing students to become active learners rather than passive recipients of “tradition.”

Western University recognizes and advocates a broad view of scholarly endeavors, from original “discovery” approaches to scholarship through application, synthesis, and teaching. The institution has expanded its support of faculty scholastic endeavors by employing laboratory technicians, encouraging the incorporation of students into faculty projects, and expanding the extramural support administration to assist faculty in identifying financial support for their scholarly endeavors.

The College of Pharmacy developed a research plan that calls for a commitment from the Western University administration to provide realistic financial support for research and scholarly activity. To date, the College of Pharmacy has hired faculty with strong research credentials, and the University has purchased research equipment and remodeled the physical facility to include laboratories and animal facilities to accommodate this effort. The College of Pharmacy faculty members were recruited with the assumption that the University would continue to support their established research programs. The College also recognizes the complementary need for the faculty to help develop a plan for the stepwise progression to enhance their research objectives and use these achievements toward developing graduate education programs. These plans have been incorporated as part of the University’s Strategic Plan.

The College of Pharmacy believes that an administrative structure is necessary to ensure that important functions such as laboratory safety procedures, disposal of hazardous waste and laboratory solvents, and the oversight of accreditation requirements are carried out according to regulations specified by the state and federal governments and accrediting agencies. Such a structure is in place.

The College of Pharmacy faculty members do not view research in a university setting as an end in itself, but rather as a mechanism for fostering and guiding the education of
students in the principles of research. Moreover, it is recognized that before initiating a proposal for degree-granting graduate programs, faculty members must be given the opportunity to develop their research programs. Because of a focus of strength in particular areas of the pharmaceutical sciences, the College of Pharmacy offers opportunity to develop graduate programs in pharmaceutics, pharmacokinetics and specialized areas of pharmacology. In addition, research and development in areas of pharmacy practice provide other opportunities for postgraduate programs.

See Standard IX—GRCA for more detail on research at Western University.
The Colleges

College of Allied Health Professions (CAHP)

Mission

The College of Allied Health Professions supports the mission of Western University by providing high quality professional and graduate education in selected allied health fields. The College develops competent and compassionate professionals who provide service to the community and continually develop their skills, knowledge, and abilities through independent lifelong learning activities. The education and skills gained allow students to provide culturally sensitive care to underserved populations. The College embraces the diversity of its students, staff, and faculty, and promotes the teamwork concept. The College also supports faculty and staff development to foster the concept of lifelong learning.

The College of Allied Health Professions includes the Physical Therapy program, the Physician Assistant program, the Master of Science in Health Professions Education program, and the Center for Disabilities and the Health Professions. The Dean meets regularly with the chairs, Assistant Dean of Research, and Director of the CDIHP to conduct college business and to expedite joint planning activities. The CAHP held a college-wide faculty strategic planning retreat in August 2000 (see Appendix 4.5 for outcomes of the retreat). Since the retreat, each department has been developing its own strategic plan. Further, the College is in the process of reviewing its entire evaluation process including Promotion and Tenure.


Primary Care Physician Assistant Program

Mission

The Western University Primary Care Physician Assistant (PA) Program provides education to students who will provide culturally sensitive medical services to underserved populations in a humanistic and competent manner. The PA program embraces the diversity of its students, staff, and faculty, and promotes the teamwork concept. The program also supports faculty and staff development to foster lifelong learning.

The primary goal of the Western University Primary Care Physician Assistant Program is to educate individuals to serve as physician assistants under the direction and supervision of a physician. The education provided by the program prepares the entry-level graduate with the knowledge, skills, and attitudes to perform in a primary care setting, and to function in a variety of roles within numerous clinical settings. This program goal is founded on the understanding that the broad-based education needed to prepare an individual to serve in a primary care setting is the most effective form of initial preparation, and permits the development of attributes that will serve the graduate in the greatest spectrum of potential employment opportunities.
The Program has an established goal of incorporating appropriate elements of the traditional osteopathic philosophy into the training of physician assistants. These elements include:

- an understanding of the patient as a whole person;
- an emphasis on those aspects of health education that stress wellness and disease prevention;
- an appreciation of the role of physical medicine in the diagnosis and management of illness.

**Faculty, Students, Alumni**

Western University's Department of PA Education continues to enhance the professional growth of its faculty and staff. One faculty member has entered the final phase of a doctoral program. Another faculty member is in the middle of his doctoral program. A third faculty member began a doctoral program in Fall 2000. Three recently hired faculty members have enrolled in master's degree programs, two at the University of Nebraska and one at Western University. Staff members have enrolled in University (CAPE)-sponsored workshops to enhance professional skills and productivity, and will continue to do so.

Western University's Department of PA Education strives to increase collaboration between the program and the alumni. More alumni have become active in various portions of the curriculum. Their talents have been utilized to assist in Physical Assessment Checklists, and Clinical Skill and Differential Diagnoses courses. The alumni have also assisted in the interview process for new applicants. The increased alumni activity occurred in response to program personnel directly calling alumni and asking for assistance. One setback this year was the announcement that there will no longer be a separate newsletter developed and disseminated by the Alumni Association. The PA Program traditionally has utilized this source of communication and will have to fill the void in the department.

Western University's Primary Care PA department has committed to promoting continued enrollment of a diverse student body. The PA program has hired diverse faculty members.

**Full-time Faculty by Gender and Diversity – as of November 2000**

<table>
<thead>
<tr>
<th>Non-resident alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
</tr>
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<tbody>
<tr>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
</tr>
<tr>
<td>1</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

M=Male, F=Female

Communication between students and faculty members remains strong. Students are able to access faculty during, as well as outside of, office hours. Monthly meetings take place between the chair and students. Regular meetings and informal chats occur among the class officers, the academic liaison, the Chair, the Dean, the Executive Vice President of Academic Affairs, and the President.
The PA Class of 1999 achieved a passing rate of 94% for first-time test takers on the national board examination (NCCPA). The goal has been to stay at or above 90%. An informal survey showed that many alumni from the class of 1999 are employed.


Curriculum

Western University’s Primary Care PA department has committed to increasing student knowledge through the implementation of a master’s degree PA curriculum. The curriculum, which was approved by the Curriculum Committee as well as the Board of Trustees, has been offered beginning Fall 2000 (see Exhibit F.6, self-study report).

Facilities

The PA classroom continues to be upgraded with better information and instructional technology equipment to enhance student learning. The Chico Campus has been relocated to the Pomona Campus during the 1999-2000 academic year. Approximately eight students will continue clinical education in the northern California area. All others have been absorbed into the Southern California and Nevada tracks.

<table>
<thead>
<tr>
<th>Program Strengths</th>
<th>Opportunities for Improvement</th>
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<tbody>
<tr>
<td>Continued growth</td>
<td>Time management</td>
</tr>
<tr>
<td>Geographic locations – Pomona/Nevada (clinical)</td>
<td>Space/Facilities</td>
</tr>
<tr>
<td>Service to the community</td>
<td>Budget management</td>
</tr>
<tr>
<td>Flexibility in the curriculum</td>
<td>PA faculty as viewed by University faculty</td>
</tr>
<tr>
<td>Values and beliefs</td>
<td>Internet/Information and instructional technology education</td>
</tr>
<tr>
<td>Student/Faculty relationships</td>
<td>Chico area inability to cope with the number of Western University PA students</td>
</tr>
<tr>
<td>Communication among other chairs/faculty</td>
<td>Low number of staff and full-time faculty</td>
</tr>
<tr>
<td>Students</td>
<td>Limited library resources</td>
</tr>
<tr>
<td>Diverse talented faculty and staff</td>
<td>Communication among remote campus sites</td>
</tr>
<tr>
<td>Open to change</td>
<td>The large number of students in each PA class</td>
</tr>
<tr>
<td>Interaction with the community</td>
<td></td>
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<tr>
<td>Sense of humor</td>
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<tr>
<td>Small integral faculty</td>
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<tr>
<td>Student/faculty/administration relationships</td>
<td></td>
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<tr>
<td>Preceptors</td>
<td></td>
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<tr>
<td>Faculty flexibility</td>
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</tbody>
</table>

Planning Goals:

- To support and enhance the intellectual and professional growth of PA faculty and students.
- To increase collaboration between the program and the alumni.
- To enhance student knowledge through the implementation of the master’s program.
• To promote a continued enrollment of a diverse student body and employment of faculty representative of the diverse population PAs serve as health care providers.
• To maintain a first time test-takers national board score (NCCPA) pass rate at or above 90%.
• To embrace technical advances by increasing awareness in utilization and access to the technologies that are important for professional education and services.
• To continue to enhance students’ problem-solving ability to improve their competence as practitioners.
• To improve the environment for instruction.
• To improve teaching and learning for the students.
• To increase the faculty involvement in PA professional organizations beyond basic membership.

The PA Program plans to achieve the goals listed above by:

• Revising curriculum to expand managed care concepts.
• Continuing to write grant proposals for external funding to enhance curriculum- and PA-oriented research to further the goals of the program.
• Implementing a master’s degree program for incoming students, as well as assisting in the implementation of a master’s degree for licensed PAs (achieved).
• Encouraging all faculty to obtain an advanced degree.
• Implementing meetings between the program and president-elect of the Alumni Board PA section to elicit strategies that will increase alumni participation within the program and to discuss how the program can support alumni in their careers as physician assistants.

See Table IV.12 for licensing examination results and Table IV.13-16 for retention and attrition statistics for Pomona and Chico.

Western University Regional Center at Chico (Closed in June 2000)

The Western University of Health Sciences PA program in Chico supported the University’s mission by educating primary care providers trained in delivering humanistic care as integral members of a health care team. Graduates continue to practice in areas with traditionally underserved populations.

A goal of the 1999-2000 strategic plan for Chico was for the clinical coordinator to visit a majority of the northern California clinical sites utilized for the clinical education of Physician Assistant students. This was accomplished. The clinical coordinator logged over 4,000 miles of driving in canvassing northern California, southern Oregon, and western Nevada during the last year. Many excellent clinical partnerships were forged during the time spent visiting hospital administrators and clinicians.

Another goal was to obtain enough high-quality clinical rotation sites to educate 16 students throughout the region. This goal was not met, and this was part of the reason the decision was made to close the regional center at Chico. (It should be noted that this was not for lack of effort on the part of Western University; the region has not
been able to yield the quantity and quality of clinical education sites to support the standard that Western University has set for its PA students’ education. As such, the Honors Day and Preceptor Appreciation Dinner were cancelled due to the decision to close the Chico campus. The University did not want to misrepresent itself as still being actively involved in the community.)

The lesson learned from the Chico experience is that in establishing new programs, the University must rely on objective data from the medical community regarding clinical training of students. The lack of formal signed affiliation agreements with major medical training sites such as Enloe Hospital was a major detriment and led to the eventual closing of the PA program in Chico.

The decision to close the Chico campus and to discontinue the Northern California clinical track has created a situation of downsizing, both in community representation and personnel. All clinical preceptors in the region have been notified in writing of the decision to close the regional center. All employees were notified in writing of the decision to close the campus. All employees were given the opportunity to relocate to southern California and assume equivalent positions with the University. The Cal Northern School of Law will continue to serve as a lecture site for PA and MSN/FNP students from the class of 2001, who are in their final year of training. No permanent offices or Western University logos will be present in the northern California region.

There were 20 students in the PA program based in the Chico area. These students have been provided excellent academic and clinical education support throughout the year, with the stability of a fine campus housed at the Cal Northern School of Law. Students completed clinical rotations in July 2000, and sat for the NCCPA board examination in October 2000.

Master of Science in Health Sciences-
Licensed Physician Assistant Track Program

In fulfillment of the missions of the University and the College of Allied Health Professions, the MSHS-LPAT program goals are to:

- Educate health care professionals who function as physician assistants in health care settings.
- Create advanced educational opportunities for physician assistants.
- Enhance continuing professional education in health care.
- Provide an educational service to the physician assistant community.

Rationale for the MSHS-LPAT Program

A new, innovative, online program is proposed for PAs who possess a baccalaureate degree and who are board certified or interim licensed. There is a need for PAs with baccalaureate degrees to obtain a Master of Science degree. Through informal surveys, Western University alumni expressed the wish to obtain a Master of Science degree to remain competitive in a health care marketplace where an increasing number of existing clinicians (NPs and PAs) have been awarded or are graduating with Master of Science degrees. This program is designed to fill the need of Western University alumni and other PAs who wish to obtain an MS degree while still working as
clinical PAs. All coursework will be offered online to encourage working PAs to participate in this new program without disrupting their busy clinical schedules.

1. The coursework will be administered through the Department of Physician Assistant Education.

2. Prerequisites for the MSHS-LPAT include:
   a. A bachelor’s degree from an accredited institution.
   b. A 2.5 GPA or above for undergraduate work; 3.0 or above for graduate work.
   c. Applicants must be an Interim License or Certified PA.

Faculty, Students, Alumni

Current faculty members are practicing physician assistants, advanced practice nurses, clinical pharmacologists, and professional educators. All faculty hold a Master of Science degree or doctoral degree in their respective discipline. The Chair of the program is in the final year of doctoral studies in educational leadership. The program has recently hired a full-time secretary (October 2000).

The program currently has five students enrolled in the charter class. The MSHS-LPAT program is committed to promoting continued enrollment of a diverse student body. Communication between students and faculty occurs through electronic mail and telephone conversations. Students also access the chair of the program by e-mail and telephone as needed. Currently, the program has no alumni as the charter class of five students matriculated August 2000.

Staff

There is one full-time staff member dedicated to the program. This staff member works closely with the Office Coordinator for the Physician Assistant program. The staff member is also being trained through the curriculum coordinator to work more with online students successfully.

Curriculum

The program curriculum was developed through the efforts of the Dean of the College of Allied Health Professions, the Chair of the Physician Assistant Program, and the Chair of the MSHPE program. The College of Allied Health Professions Curriculum Committee and the Board of Trustees approved the curriculum. The curriculum design has divided coursework into three areas: Core Master of Science courses, Core Health Science courses, and Core Physician Assistant courses. All courses, including HSCI 5999, Thesis/Special Project, must be completed to graduate from the program with a Master of Science in Health Sciences degree. The program is designed to be completed in two academic years, including a three-unit course during a summer session. The curriculum is offered exclusively online, accommodating the needs of PAs working in a clinical setting.
Summary of Curriculum

The Master of Science in Health Sciences—Licensed Physician Assistant Track Program (MSHS-LPAT) is sponsored by the Department of Physician Assistant Education. The degree granted will be a Master of Science in Health Sciences. The online curriculum is multidisciplinary in approach, providing 11 units of Core Master of Science courses, 12 units of Core Health Science courses, and 10 units of Core Physician Assistant courses. Students also must complete one of the following to meet graduation requirements: 1) thesis or 2) special project. Applicants must be board certified physician assistants or interim licensed. They also must possess a baccalaureate degree.

A curriculum coordinator and liaison with the instructional technology department works with faculty to transfer course content to the electronic medium. The curriculum coordinator has also been responsible for a series of faculty development workshops, which help faculty improve their instructional techniques in the online medium. These workshops have occurred in various phases. The workshops have occurred six to nine months prior to the course being offered. This has allowed faculty ample time to enhance their use of electronic and online teaching media.

Faculty Research and Scholarly Activities

Program faculty are involved in scholarly activity, but at relatively low levels due to their teaching loads and cross-involvement with other programs in the University. Some faculty work for the program on an adjunct basis. The Chair is in the last year of an EdD degree and has a Physician Assistant Certificate. The Chair is the only full-time faculty/administrator dedicated to the program. The first faculty member has a PhD in anthropology. The second faculty member has a BS in nursing and an EdD degree. The third faculty member has a PharmD. A fourth faculty member has an MS degree and is completing a PhD program. A fifth faculty member has an MS degree. A sixth faculty member has a BS degree, Physician Assistant Certificate, and is completing an MS degree. A seventh faculty member has an EdD degree and Physician Assistant Certificate.

Academic Quality

1. Students must complete a basic program of 11 credit hours of Core Master of Science courses, 12 credit hours of Core Health Science courses, and 10 credit hours of Core Physician Assistant courses.

2. Total program evaluation is completed annually. The Dean of the College of Allied Health Professions, the Chair of the Master of Science in Health Science-Licensed Physician Assistant Track, the Chair of the Primary Care Physician Assistant Program, and faculty conduct a comprehensive analysis of course offerings, course content, and course evaluation instruments. Changes will be made as needed.

The Chair of the Master of Science in Health Science-Licensed Physician Assistant Track and faculty evaluate resource needs annually, i.e. books, periodicals, audiovisuals, and other instructional materials. The MSHS-LPAT Chair, the Chair of the Department of Primary Care Physician Assistant Education, and the Dean of the College of Allied Health evaluate the program budget to ensure that the budget is appropriate for
all coursework instructional needs. The Chair of the MSHS-LPAT program and faculty evaluate the level of support services to the program annually.

**Student Assessments and Course Evaluation**

Students are evaluated in each course using multiple-choice examinations, projects, and essays. Students receive feedback via e-mail or telephone response to questions. In addition, students evaluate courses and the department chair makes adjustments to the courses, as deemed appropriate.

**Resources and Administration**

The faculty report to the chair of the program and the chair reports to the Dean of the College of Allied Health Professions, who reports to the Executive Vice President of Academic Affairs. Students are asked to discuss issues with the instructor of record first, then the Chair, followed by the Dean and the Executive Vice President of Academic Affairs. The program has a full-time Chair and administrative assistant.

**Facilities**

The program is housed in the College of Allied Health, on the Pomona campus. Facilities are adequate for the program Chair and administrative assistant to perform their assigned duties.

**Strategic Enrollment Management**

All Western University Physician Assistant alumni were notified in writing of the new MSHS-LPAT program and were encouraged to apply. All PAs in the State of California were sent a mailer advertising the new program, with application information. The program sent out a letter to all PA program directors across the nation advertising the program. The program also placed advertisements in PA journals such as the *Journal of the American Academy of Physician Assistants* (JAAPA), *Clinician Reviews* and the *California Academy of Physician Assistants* (CAPA) *News*. The program has a target goal to enroll 17 students for the January 2001 semester. Tuition for the program is $225 per credit hour.

**Master of Physical Therapy**

**Mission**

Western University’s fourth academic program is the Master of Physical Therapy (MPT) degree program, with the first class seated in January 1992. Students applying to the two-year, four-month MPT program must have a baccalaureate degree in a field other than physical therapy. The course of study prepares students to apply for state licensure examinations and to practice physical therapy. This program initially was accredited in May 1994 by the Commission on Accreditation in Physical Therapy Education (CAPTE), American Physical Therapy Association, and was recently reaccredited for eight years (see Appendix F.1).
In keeping with the University’s mission, the mission of the Physical Therapy program is to educate competent, caring, culturally sensitive, reflective practitioners who will:

- Participate as members of the health care team to provide high quality care to patients.
- Participate as lifelong learners, and acquire, analyze, synthesize and apply knowledge in new settings.
- Contribute to the advancement of physical therapy evaluation and intervention techniques, and discover new, more effective methods of patient care.
- Be leaders in providing health care service and education to promote health and fitness of community members.
- Play important roles in developing health policy and appropriate standards for physical therapy practice.

The graduates of the MPT program are mature individuals whose professional education is based on a foundation of the requisite preparation in the biological, behavioral, and social sciences, as well as the humanities. The graduates possess the necessary knowledge, skills, and attitudes to function as clinical generalists; will have an appreciation for the value of all aspects of the research process; and will be responsible members of the community and the profession. Upon completion of the educational program in physical therapy, graduates will be able to:

- Practice physical therapy as an entry-level clinician generalist by assuming responsibility for the components of that role.
- Demonstrate an understanding of the osteopathic philosophy, with its emphasis on caring for and appreciation of the patient as a whole person.
- Demonstrate respect for all individuals.
- Communicate with peers, colleagues, patients, clients, family members, and the community at-large in a style that is commensurate with their level of understanding.
- Appreciate the place of research in the advancement of physical therapy.
- Serve as role models for health behaviors in both the clinical setting and the community.
- Participate in the community as representatives of the physical therapy profession, as advocates for patients or clients in a health care environment, and as concerned citizens.
- Continue lifelong learning through continuing education, specialization, advanced study, and participation in professional organizations.
- Establish priorities in order to maintain a balance between personal and professional life.

Faculty, Students, Alumni

The major activities in which faculty, students, and alumni were involved in academic year 1999-2000 were the completion of the self-study report (SSR) and the on-site evaluation visit for reaccreditation by the Commission on Accreditation in Physical Therapy Education (CAPTE). The SSR was submitted on September 1, 1999 and the on-site evaluation visit was November 8-10, 1999. The report of the on-site
evaluation team (ROSET) was very positive and the program was granted continuing accreditation for eight years.

Compared to prior years, there has been improved teamwork among faculty this past year. Three full-time faculty members are team-teaching the musculoskeletal dysfunction courses. In addition, faculty members have been working together by assisting each other in labs or presenting lectures in each others’ courses. There has been a marked increase in participation during faculty meetings by most members. CAPE provided a workshop in January 2000 on team building to all full-time faculty members.

The PT program was successful in filling one of the full-time faculty positions that had been vacated the previous year. Two part-time positions were filled in September 2000. Two faculty members were promoted this year, and one of these faculty members was also awarded tenure.

**Full-time Faculty by Gender and Diversity – as of November 2000**

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Non-resident alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
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Communication between faculty and students has improved. Students have been receiving module schedules of courses and textbook lists at least one month in advance of the module start date. The Department Chair continues to meet with each class at least one to two times per year, or more often upon request. A member from each class has attended weekly faculty meetings, and feedback from these individuals reaffirmed the value of being allowed to attend.

A concern arose at the end of the previous year regarding the low applicant pool and the potential for low enrollments, common across the profession. A rolling admission process was instituted, and a full and fully qualified class of 54 students was enrolled in January 2000. The first PT Awareness Day was held in September 1999. Feedback indicated that this should be continued on an annual basis. Considering the low enrollment problem that now exists in the local area, California, and across the nation, student recruitment will remain a concern and is being addressed by the strategic enrollment management process on campus (see Standard II).

A working relationship has been established between the PT program and Casa Colina Rehabilitation Center. The results of this relationship included two $10,000 scholarships awarded to PT students, and a full-time faculty member has agreed to work eight hours/week at the Center. The faculty member has also scheduled student observations on a weekly basis as part of a laboratory class. This provides students with an opportunity to gain clinical hands-on exposure early in the program.

Alumni have been responsive to requests for support during the accreditation process. Response to an alumni survey, the focus of which was to evaluate the curriculum, was good (39%). Results were analyzed and included in the SSR.
Exhibit F.5). Nine alumni participated in interviews on campus with the on-site evaluation team. Their feedback was very positive. In April 2000, eight alumni attended the workshops that were part of the elective courses for third-year students. This was double the number that attended the previous year.

See Tables IV.17-19 for enrollment data, Table IV.20 for licensing examination results, and Table IV.21 for student attrition information.

**Staff**

Turnover of the three staff positions in the Physical Therapy program has remained high. Ten permanent employees have worked in the department since June 1998. Although current staff members have adequate computer skills, staff development is needed and is being provided by the Center for Academic and Professional Enhancement (CAPE). The Office Coordinator has attended Supervisory Skills Training. Currently, the work-study student is not fully utilized because of time issues. The working relationship between staff and faculty often is strained due to the high volume of work and high turnover of staff. This is an area that is being worked on during the upcoming year.

When staffing becomes stable, plans include initiating cross-training so that staff can cover for each other when one is away from the workplace. Although salaries are not the only reason for the high turnover—lack of advancement opportunity is another issue—it will be important to raise the pay scale so that staff will not be drawn away by better offers, as has happened in the past.

**Curriculum and Related Issues**

Faculty members attended mini-retreats throughout the year to review the curriculum. A thorough review was performed and included in the SSR for reaccreditation. According to the ROSET, there are no areas of deficit in the curriculum. Students continue to raise issues regarding the content, teaching methods, and testing in the anatomy courses. Adding a physical therapist as a lab assistant did not seem to help the problem. This concern will be addressed in the upcoming year.

Discussions have been held regarding changing the program start date from January to August. For the year 2001, a decision was made to keep the start date in January. It was felt that it is not advisable to start in August because of the competition with other programs for a low applicant pool. Two local programs had to decrease their class size, one program lost two students at the beginning of the year, and a fourth program accepted students they had originally rejected when they exceeded their alternate list. We were fortunate to still have an alternate list from which to choose, and would not enroll students who were deemed unqualified. By starting in January, we are competing with only one other local program rather than the six programs that start in the fall.

As the faculty members begin to develop their own research projects, more equipment will be needed. Additional equipment is also needed for current teaching, especially in the area of therapeutic exercise and evaluation techniques. Some research equipment was purchased at the end of the previous academic year. Cooper Hall was
equipped with an A-V console, including computer/VCR and projector, and a document projector. Trendle and Swift Halls are still in need of this A-V update.

Faculty members have also discussed the possibility of adding a post-professional doctoral degree program. The student enrollment in the post-professional program would provide tuition to support the programs so that the enrollment in the entry-level MPT program could gradually be decreased. Adding the doctoral programs would keep the department marketable and viable. An Advisory Board met in April 2000 to discuss the plans for doctoral programs and the process for assessing the feasibility. A survey and focus groups of alumni and clinicians have been conducted to assess the interest for a transition DPT and an advanced clinical DPTSc (see Appendix IV.6).

Faculty Practice

Although a full-scale faculty practice does not seem feasible in today’s economy, faculty members have discussed the possibility of evaluating and treating University students and employees who sustain musculoskeletal injuries. A smaller-scale faculty practice could be developed first and then expanded to University employees' family members. The advantage of treating these individuals in the PT department would be reduced time away from work/class due to the convenient location and the ability to obtain early intervention, thus reducing the rehabilitation time. A needs assessment for a faculty practice will be undertaken this coming year.

Somewhat related to a faculty practice is the relationship developed with Casa Colina. Currently, one full-time faculty member is providing service to the rehabilitation department at Casa Colina. She is not reimbursed for her clinic time by Casa Colina, but has received a 2.5% increase from the University to compensate for some of her time at Casa Colina; she continues to carry a full teaching load.

Faculty Research and Scholarly Activities

Faculty scholarly activity remains comparatively low due to high teaching loads (260 to over 400 classroom contact hours/year). Two faculty members are continuing to pursue doctoral programs and are in the final dissertation stage. One faculty member expects to complete her DPTSc degree by June 2001. The second faculty member has not set a date for final completion of her dissertation. The program hired two part-time faculty members to reduce the workload of some faculty and increase time available for scholarly activities. These faculty members are responsible for student advisement, mentoring, and research projects.

Planning Activities

Last year, the faculty revised the program’s mission statement to reflect the goals of the curriculum and University more accurately. The primary mission of the program is to educate general practitioners who will be able to use clinical research, the most current knowledge and skills, and a humanistic approach to provide high quality care to their patients.

Program strengths, barriers, and areas for improvement were determined by the faculty and included as part of the self-study report for reaccreditation. These are as follows:  

135
<table>
<thead>
<tr>
<th>Program Strengths</th>
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<tbody>
<tr>
<td>♦ Philosophy of the University</td>
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<td>♦ Communication among students, faculty, staff, and administrators; open forums</td>
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<td>between students and faculty/administrators</td>
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<td>♦ Establishment of University Center for Academic and Professional Enhancement;</td>
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<tr>
<td>budget for individual faculty continuing education/development</td>
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<td>♦ Student and faculty diversity on campus</td>
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<tr>
<td>♦ Qualifications and expertise of program faculty, both full- and part-time</td>
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<tr>
<td>♦ Qualifications and expertise of program chair</td>
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<tr>
<td>♦ Addition of Generic Abilities to develop/assess student professional behaviors</td>
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<td>♦ Enthusiastic support staff and student body; number of support staff and</td>
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<tr>
<td>additional temporary staff when needed during peak loads</td>
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<td>♦ New and expanded library facilities when building opens</td>
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<td>♦ Laboratory and classroom space; good relationship with vendors for loan of new</td>
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<tr>
<td>equipment</td>
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<td>♦ Faculty office space that provides privacy for faculty/student meetings</td>
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<tr>
<td>♦ Computers for faculty with Internet access; computer lab for students</td>
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<tr>
<td>♦ Freedom to design and structure curriculum as needed; no restrictions due to</td>
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<td>semester or other system</td>
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<td>♦ Clinical exposure early on and throughout program with a variety of experiences</td>
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<td>♦ Employer satisfaction of program graduates</td>
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<tr>
<td>♦ High retention and graduation rate of students (&gt;93%)</td>
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<td>♦ High pass rate on state licensure examination (92-96%)</td>
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<td>♦ Strong support from local clinical facilities; a local facility administrator is</td>
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<td>donating two $10,000 scholarships for PT students</td>
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<td>♦ Administrators who are willing to listen to faculty and students, and then</td>
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<td>provide support; very supportive dean</td>
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<tr>
<td>♦ Program’s location in medical university and interaction with faculty/students</td>
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<tr>
<td>of other health professions education programs (osteopathic physicians,</td>
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<td>pharmacists, physician assistants, graduate nurse/family practitioners)</td>
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<td>♦ Safe, visually pleasing campus</td>
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<tr>
<td>♦ Potential for interdisciplinary courses and increased classroom/clinical</td>
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<tr>
<td>interaction among students in all programs; i.e. Interdisciplinary Case</td>
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<tr>
<td>Management Course offered in April 1999</td>
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</tbody>
</table>

Also identified were barriers to success and areas in which improvement could be achieved. These are presented below, along with methods that are being or have been implemented to address the issues:
<table>
<thead>
<tr>
<th>Barriers/Areas for Improvement</th>
<th>Proposed Methods to Address Issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>No process in writing for hearing complaints or appealing admission decision, handling complaints from parents/family member, and handling complaints from clinical sites</td>
<td>⇒ The Chair will meet with CAHP Dean to discuss written procedures and they will then provide guidance to the Dean of Student Affairs and Vice President of Academic Affairs.</td>
</tr>
<tr>
<td>No handbook on policies and procedures specifically for adjunct/clinical faculty</td>
<td>⇒ The Chair will review the Faculty Handbook and consult the CAHP Dean on revisions, and provide orientation for all new adjunct faculty.</td>
</tr>
<tr>
<td>Inconsistent application of promotion and tenure policies</td>
<td>⇒ The Department Chair, faculty, and Dean will meet to discuss solutions; then CAHP faculty will meet to develop guidelines.</td>
</tr>
</tbody>
</table>
| Declining applicant pool and job market | ⇒ Participate in University’s Strategic Enrollment Management process.  
⇒ Change admission process to rolling admission to allow for more timely acceptance and to reduce the number of declines.  
⇒ Increase recruitment efforts by encouraging prospective students to visit campus prior to submitting an application.  
⇒ Provide information sessions and tours on a regular basis.  
⇒ Seek additional scholarship sources for students.  
⇒ Develop articulation agreements with PTA programs and four-year institutions in the area.  
⇒ Consider reducing class size to 40.  
⇒ Track job market and provide job placement service/job bank for graduates and alumni.  
⇒ Survey new graduates regarding how long it took them to obtain their first full-time job. |
| Lower level of scholarly activity by core faculty | ⇒ Two part-time faculty members were added to assist faculty in developing research, and to help reduce the teaching loads of some faculty to allow them more time to pursue scholarly activity.  
⇒ Provide faculty development on research methodology and grant writing (in conjunction with CAPE). |
<table>
<thead>
<tr>
<th>Issue</th>
<th>Solution</th>
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<tbody>
<tr>
<td>Intensity of teaching load is too high for some faculty.</td>
<td>Spreading the courses over a longer period of time, i.e. increasing the</td>
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<td>number of weeks in a module, will reduce the number of hours/weeks for</td>
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<td>the courses and thus reduce the intensity of the faculty’s workload.</td>
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<td></td>
<td>Develop team teaching for intensive courses.</td>
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<td>Add an eighth full-time faculty position (proposed target date)</td>
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<tr>
<td>Learning Enhancement and Academic Development Office (recently</td>
<td>Obtain more resources for LEAD office to proctor exams.</td>
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<tr>
<td>consolidated as part of CAPE) is understaffed and lacks space;</td>
<td>Provide space for the LEAD office for testing and counseling.</td>
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<tr>
<td>faculty must make their own arrangements to accommodate students</td>
<td>Use staff from Center for Disability Issues and the Health Professions</td>
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<tr>
<td>during testing</td>
<td>to assist in proctoring exams.</td>
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<tr>
<td>Program is primarily tuition driven, which affects the amount of</td>
<td>Develop grants to supplement funds for research equipment.</td>
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<tr>
<td>available resources</td>
<td>Work with administration to develop special fundraising activities for</td>
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<tr>
<td></td>
<td>the PT program.</td>
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<tr>
<td>More physical therapy-related journals are needed in the University</td>
<td>Consult with librarian to add texts, audiovisual materials, and journals</td>
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<tr>
<td>Library</td>
<td>upon faculty recommendation; plans are under way to increase inventory</td>
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<tr>
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<td>(see Standard VI).</td>
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<tr>
<td>Multimedia equipment installation in lecture halls; no Macintosh</td>
<td>Multimedia equipment installation in one lecture hall should be</td>
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<tr>
<td>hardware, software, and support for faculty</td>
<td>completed by the end of September 2000; second lecture hall is</td>
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<td>scheduled, with no date of completion determined at this time.</td>
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<td></td>
<td>Upgrades include lecture podium with mounted computer and VCR, and</td>
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<td>projector mounted from ceiling. Multimedia equipment will include compatibility technology enhanced presentations.</td>
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<tr>
<td>Faculty development on student objectives and assessment methods</td>
<td>Provide in-service education through the recently established CAPE (see</td>
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<td></td>
<td>Standard V).</td>
</tr>
<tr>
<td>Poor alumni support of the program</td>
<td>Develop weekend workshops to be offered by an alumna from the first class.</td>
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<td>Develop alumni focus groups to encourage constructive feedback and</td>
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<td>more alumni involvement in the curriculum review process.</td>
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<td></td>
<td>Invite alumni to serve on an advisory</td>
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</table>
committee, assist with applicant interviews, and provide lectures in courses.
⇒ Provide continuing education courses for alumni; encourage alumni to participate in elective courses.
⇒ Increase communication with alumni through newsletter and other sources to keep them informed of changes in curriculum and program.
⇒ Provide more social activities and announce receptions to be held at conferences in advance.
⇒ Invite alumni to serve as mentors for current students.

The report of the on-site evaluation team (ROSET) included several strengths, such as administrative support, commitment of faculty and staff, physical plant, supportive students, clinical education experiences, and educational methodologies. The primary areas for improvement reported in the ROSET involved faculty policies, workload, and the faculty evaluation process. The college faculty and the Faculty Evaluation Committee are beginning to address the issues related to the evaluation process. The only area for improvement related to the curriculum, as noted in the ROSET, deals with behavioral course objectives that do not match the level of student performance expectations. In January 2000, a workshop was held for program faculty to review course objectives as related to testing. Plans for academic year 2000-2001 include having CAPE work with faculty on this issue.

There are no measures that rank or compare physical therapy programs across the country. There are four major competitors in California. They are Loma Linda University, University of Southern California, Chapman University, and Samuel Merritt College. The Physical Therapy program keeps abreast of competitors to ensure that Western University’s program remains competitive.

Planning Goals

The Physical Therapy faculty developed goals, strategies, and expected outcomes. They are presented in the table below:

<table>
<thead>
<tr>
<th>Goals</th>
<th>Strategies</th>
<th>Expected Outcomes</th>
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<tbody>
<tr>
<td>• Support intellectual and professional growth of faculty and students</td>
<td>➢ Provide opportunities for professional growth and development</td>
<td>♦ Student is mature individual who has sound theoretical base and an ability to problem solve</td>
</tr>
</tbody>
</table>
| **• Development commitment to lifelong learning** | ➢ Role modeling by faculty  
➢ Interaction with alumni and clinicians | ♦ Graduates will participate in continuing education  
♦ Graduates will pursue certification in specialization or advanced degree |
| --- | --- | --- |
| **• Enhance teaching and learning** | ➢ Incorporate appropriate technological resources into learning environment  
➢ Collaborate with other disciplines/programs in the University  
➢ Establish alliances with community facilities to provide preclinical experiences  
➢ Improve full-time to part-time program faculty ratio by increasing the number of full-time positions and reducing the number of part-time positions | ♦ Students will participate in more interdisciplinary courses  
♦ Students will perform better on clinical affiliations  
♦ Faculty will have increased time for clinical practice, research, and/or community service  
♦ Faculty evaluations will improve  
♦ Student satisfaction ratings will increase |
| **• Enhance faculty research and connect research to instructional mission** | ➢ Increase the number of full-time faculty to reduce full-time teaching load  
➢ Establish faculty development program to assist with integration of teaching and research  
➢ Develop network for collaborative research within and outside of the University | ♦ Faculty will conduct research and be successful in obtaining grants  
♦ Students will complete research projects  
♦ Graduates will participate in clinical research studies |
| **• Integrate research, teaching, and practice into curriculum** | ➢ Perform needs assessment for faculty clinical practice and establish practice if feasible  
➢ Establish alliances with facilities to provide clinical experiences, and patients for classroom teaching and | ♦ Students will perform better on clinical affiliations  
♦ Students and faculty will participate in clinical research  
♦ Student performance on lecture and lab exams will improve |
- **Enhance student problem-solving ability to improve their ability as practitioners**
  - Incorporate the Guide to Practice and IDH model into all courses as appropriate
  - Offer workshop for faculty to learn how to incorporate the Guide to Practice

- **Bridge transition from student to clinician**
  - Obtain 100% student enrollment APTA
  - Consider alternatives for student to actively participate

- **Improve environment for instruction**
  - Improve facilities
  - Enhance feedback

- **Improve faculty work environment**
  - Enhance faculty opportunities for promotion and tenure through faculty development activities
  - Adjust and individualize faculty workloads

- **Provide an environment that encourages mutual respect of individuals**
  - Improve communication among faculty, students, and administrators
  - Conduct student forums to voice concerns regarding program issues

<table>
<thead>
<tr>
<th>research</th>
<th>Revisions of course syllabi and curriculum</th>
<th>Improve student problem solving in clinical setting</th>
<th>Improved employer satisfaction</th>
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| ♦ | ♦ | ♦ | ♦ |

Most of these goals and strategies will be continued for academic year 2000-2001. Additional activities that are planned include the following:

- Continuing to meet with each class and/or class representatives to discuss student issues as they arise.
- Inviting alumni to participate in focus groups and become involved in curriculum review.
- Providing staff development, such as training in use of computer software and supervisory skills.
- Initiating cross-training of staff.
- Increasing staff salaries and salary scale to competitive levels.
- Improving working relationship between staff and faculty.
- Upgrading A-V system in Trendle and Swift Halls.
- Working with the admissions office on enrollment management and student recruitment.
• Investigating the need for physical therapy services to be provided on campus for students and employees; if feasible, begin planning for faculty practice.
• Increasing the working relationship with Casa Colina to include recruitment of patients for classroom demonstration and student hands-on experiences.
• Developing ways to reduce faculty teaching loads to allow time for scholarly activity.
• Supporting and encouraging completion of doctoral level education for all faculty.
• Working with PA faculty to determine which lectures or courses could be taught jointly.

The major change in the program’s strategic plan for academic year 2000-2001 will be to develop a curriculum plan for post-professional doctoral degree programs. The profession is moving toward doctoral entry level and the applicant pool has been declining. The lower applicant pool may be due primarily to concerns about the decreasing job market. To keep up with changes in the profession, the program should consider reducing the number of students per class in the entry-level MPT program and adding transition Doctor of Physical Therapy (DPT) and advanced clinical Doctor of Physical Therapy Science (DPTSc) degree programs. This would keep the department viable if the enrollment in the current program drops sufficiently to have a negative fiscal impact. Student enrollment in the post-professional degree programs would also eliminate the need to accept two entry-level MPT classes during the year that we move the start date from January to August.

Department of Health Professions Education

Master of Science in Health Professions Education (MSHPE) Program

The Department of Health Professions Education consistently endeavors to provide students within the Master of Science in Health Professions Education (MSHPE) program with a strong theoretical background, while simultaneously maintaining a commitment to the practical application of the material. This instructional strategy has developed for two reasons: 1) as adult professional learners, students expect to realize the immediate relevance of the material within the context of their chosen health care field, and 2) the strategy fosters critical thinking skills and encourages aggressive learning by providing scholarly opportunities consistent with quality endeavors in graduate education. By this method, it is hoped that students will develop increased problem-solving skills that will lead to improved health professions education, and thereby improve health care delivery. The faculty and administration involved with the MSHPE program actively solicit feedback from the graduates regarding the relevance of the MSHPE degree in the performance of their professional responsibilities.

Mission

The mission of the Department of Health Professions Education is to provide a learning environment in which current and prospective educators of health professionals are encouraged to expand their knowledge and skill, consistent with principles of adult education, so as to prepare them to provide positive educational experiences for health care students that will accommodate the needs of the students, their profession, and the health care community they serve. The Department of Health Professions Education supports the University in its mission to increase the availability of primary health care
providers to serve the needs of people living in the western region of the United States. The Department of Health Professions Education program also affirms the educational philosophy of the College of Allied Health Professions in its goal to offer classes in an environment intended to foster respect for the uniqueness of humanity.

The Department of Health Professions Education places graduate studies in health professions education within a framework of theory and practice that integrates the functional needs of the working health practitioner with the scholarship and professional experiences necessary to meet requirements for an advanced degree in education. The program staff and the faculty are committed to the improvement of teaching in the health professions through the process of professional development. The program is designed for professionals who currently are teaching or plan to teach in any of a number of health disciplines, and learning activities draw on functional requirements of health professionals to illustrate educational concepts and methodologies.

The degree awarded on completion of the program is the Master of Science in the Health Professions Education. A basic program of 17 semester hours of core graduate work must be completed. Nine units of selective coursework is also required of all Department of Health Professions Education candidates, with the remaining nine units being earned through independent study, elective coursework, or submission of an approved thesis/special project.

The program’s objectives are to:

- Demonstrate proficiency in adult education practices based upon sound principles.
- Apply educational theories, models, and concepts in a health care setting.
- Create, implement, and analyze valid research projects in health professions education or the clinical setting.
- Collaborate with other academic health care specialists.
- Teach in a health professions setting.
- Contribute research to the health professions.

The Department of Health Professions Education program is designed to prepare health care professionals with skills in teaching and learning, educational administration, scholarship, and research. Upon completion of the program, students should be able to:

- Educate health care professionals who will function as academic leaders in various health care settings.
- Create educational opportunities for health care professionals.
- Enhance continuing professional education in health care.
- Further develop clinical education partnerships throughout the western United States.
- Provide educational service to the health care community.

**Academic Quality**

1. Students must complete a basic program of 17 semester hours of core graduate work, which includes nine units of selectives.
2. Total program evaluation is completed biennially. The Dean of the College of Allied Health Professions, the Chair of the Department of Health Professions Education, and the faculty conduct a comprehensive analysis of course offerings, course content, and course evaluation instruments. The data are compiled and shared with the curriculum committee and students. Changes will be made as indicated.

The Chair of the Department of Health Professions Education and the faculty evaluate resource needs annually, i.e. books, periodicals, audiovisuals, and other instructional materials. Recommendations are made based on availability of resources and individual course needs. The Department of Health Professions Education Chair and faculty evaluate the program budget to ensure that an appropriate funding level is provided for instructional needs. Recommendations are made to the Dean of the College of Allied Health Professions. The Department of Health Professions Education Chair and faculty evaluate the level and adequacy of support services annually.

See Tables IV.22-25 for enrollment data.

Faculty

Currently, the program has no full-time faculty dedicated exclusively to the Department of Health Professions Education program. However, the program does have a chair who is at 80% time, with the remaining 20% time being dedicated to the Primary Care Physician Assistant Program. Professors receive adjunct faculty appointments in the Department of Health Professions Education, but have administrative appointments on campus in other departments. In addition, there are adjunct faculty, employed outside the University, who provide valuable curricular expertise to the Department of Health Professions Education. The Department Chair, who makes hiring recommendations to the Dean of the College of Allied Health Professions, evaluates all faculty members’ credentials. After careful review of the individual credentials and Curriculum Vitae, the Dean makes a recommendation to the Executive Vice President of Academic Affairs for the appropriate appointment. If an appointment is granted, the individual receives notification and is privileged to all the rights of that appointment. Faculty meetings are held quarterly and all faculty members are invited to attend. Faculty curriculum retreats will be held annually beginning in academic year 2000-2001.

The Academic Program

The program Chair is recruiting new students actively with the assistance of the Admissions Department and the Strategic Enrollment Management team. The program Chair makes presentations to health care providers in the surrounding hospitals of southern California to increase interest in the program and subsequent enrollment. Students are also recruited through alumni connections and mailers. Current program advisement is provided through the Chair and the Dean of the College of Allied Health Professions. Students make appointments with the Chair or the Dean of the College of Allied Health Professions. The advisement process is assessed by the Chair.
Student Demographics - Fall 1999

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>36%</td>
</tr>
<tr>
<td>Male</td>
<td>64%</td>
</tr>
<tr>
<td>Black, non-Hispanic</td>
<td>18%</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>0</td>
</tr>
<tr>
<td>Hispanic</td>
<td>0</td>
</tr>
<tr>
<td>Underrepresented</td>
<td>18%</td>
</tr>
</tbody>
</table>

Graduates

Most of the graduates are teaching in clinical settings as well as in academic medicine and school-based programs, among other settings. In a January 2000 survey, the graduates who responded (n=13 total, with at least one from each graduation year from 1991-1999, except for 1997) reported the type of teaching experience they had varied from informal patient education to group lectures and formal training. Alumni reported that the program helped to increase understanding of teaching and learning styles and characteristics, as well as to improve relationships with patients and their families through enhanced communication skills. The program also increased organization skills and helped alumni reach their goals. While some alumni reported that the program had not yet had an impact on their goals, they felt that there would be an impact in the future. Of those who responded, nine are currently working full-time, while a couple are completing their residencies. A couple are working part-time. Only a few are working in family practice settings, with most working in a variety of settings such as group practice, county hospitals, HMOs, a military pediatrics clinic, a school, and in solo practice. The graduates rate their experience as positive, and offered the following modifications to the program:

- Continuously improve the quality of teaching faculty.
- Move curriculum online.
- Offer a better educational administration class.
- Require a research project.
- Offer classes more often.
- Treat participants with more respect.
- Make the curriculum more relevant to industry.
- Make tuition more competitive.
- Maintain the core curriculum.
- Do not change too much too quickly.

All responses to the survey are reviewed by the Chair, and presented to the faculty for discussion and implementation, as appropriate. Graduates are surveyed two years after graduation, and results are reviewed as part of the total program evaluation process.
Student Assessments and Course Evaluation

Students are evaluated in every course using various methodologies, such as multiple-choice examinations, presentations, projects, and essays. Students receive timely feedback. In addition, students evaluate courses and faculty members discuss their feedback. Changes are implemented, as appropriate. (See Student Outcomes Assessment Plan, II.7.)

Resources and Administration

The governance structure of the program is as follows: The faculty report to the Department Chair and the Chair reports to the Dean of the College of Allied Health Professions, who reports to the Executive Vice President of Academic Affairs. Students are requested to discuss issues with the professor of record first, then the Chair, followed by the Dean and the Executive Vice President of Academic Affairs. A full-time secretary provides support to the program.

Facilities

Facilities for the MSHPE program are adequate. Courses are held in the Primary Care Physician Assistant Program conference room in the College of Allied Health Professions. The program has an audiovisual projector, white board, and overhead projector.

Response to Alumni Survey Results

The University distributed a questionnaire to all graduates, including MSHPE program alumni, in January 2000. Sixty-one MSHPE alumni were sent surveys and 15 responded. Analyses led to the following recommended changes:

- New faculty are being recruited on the basis of their past reputation and teaching expertise, and how their field of expertise relates to the topic of study they will be teaching in the program, rather than on availability.
- Research Methods I and II will be taught online beginning in September 2000.
- For those concerned that Dr. Daum has left her administrative post at the University, she is still teaching Introduction to Community Health and Introduction to Clinical Teaching as an Adjunct Professor of Health Professions Education.
- To address concerns about the quality of instruction in the Educational Administration course, a new instructor will teach the course.
- A research or special project is required of all students to complete the program. The program provides students with the option to tailor their culminating project to the varying needs of adult learners.
- To ensure that students can complete the program in a timely manner, five courses will be offered over four evenings during Fall 2000.
- Instructors are focusing on considering each learner as a respected individual and scholar in health professions education.
- To make the curriculum more relevant to industry, the Instructional Technology course will focus on the use of instructional technology in the health educator’s workplace and in the field of instruction.
Strategic Enrollment Management

The Department Chair is delivering presentations to health care providers in the surrounding hospitals of southern California to promote the MSHPE program and to expand enrollment. Presentations have been offered at Arrowhead Regional Medical Center, Loma Linda University, University of Southern California, and Casa Colina to increase enrollment in the program. The program hopes to grow to 25 students by the start of the 2001 academic year, and to 30 students by the 2002 academic year. Currently, no full-time faculty are dedicated to the program. The program will need to add one to two full-time faculty members to help the program thrive when the program reaches 25 students. Specifically, core courses such as Teaching and Learning Theory, Instructional Design, Introduction to Clinical Teaching, and Evaluation Methods should be taught by two full-time faculty members well versed in these topics.
College of Pharmacy

Mission

The College of Pharmacy, a major academic unit of Western University, serves society through its programs in pharmaceutical education, scholarship, patient care, and public service. It endeavors to prepare students for the practice of pharmacy as competent, caring, ethical professionals. The College is committed to the profession and to society for creating, communicating, and applying knowledge about drugs and drug therapy management, thus promoting efficacy, value, and appropriate health care outcomes. It seeks to provide an environment open to the free exchange of ideas, where professionalism, scholarship, and learning can flourish.

At the beginning of the 1999-2000 academic year, the College of Pharmacy was searching for a permanent Dean to fill the vacancy created by the resignation of Dr. Harry Rosenberg, the founding Dean of the college. Dr. Carl Trinca served as interim Dean during the search. Based on a national search, Dr. Max Ray was selected to become the Dean of the College, effective November 1, 1999. The College of Pharmacy became eligible for consideration for full ACPE accreditation with the completion of one full cycle of its curriculum. One of the major objectives for this academic year was to meet all requirements for accreditation by ACPE. An ACPE evaluation team conducted a site visit on April 4-6, 2000. The draft report from ACPE was very positive (see Appendix 4.11). The final decision regarding accreditation was made by the Council at its June 16-18, 2000, meeting. The College received full accreditation and will be revisited by ACPE in 2006.

One of the principal goals for this academic year was to fill all vacant faculty positions, including new positions and replacements. During this year, the College hired 14 new faculty members, bringing the current total to 28 full-time faculty members. Four of the new hires did not begin until July.

This year, a committee was appointed to help the College develop a plan for faculty orientation, evaluation, and development. The Committee on Faculty Orientation, Evaluation, and Development has made good progress. A formal orientation plan for new faculty members has been developed, which involves the Dean, the associate deans, and the assistant deans (see Appendix IV.7). A plan for performance-based evaluation of faculty and administrators in the College has been developed and has been implemented (see Standard V). A distinct plan for faculty development has not yet been completed, but it is envisioned that the planned-for department structure in the College, with two department chairs, will assist in faculty development, along with the University’s Center for Academic and Professional Enhancement. Department chairs are responsible for ensuring that an appropriate mentoring system for faculty members at the assistant professor level is implemented.

By the end of the 1998-1999 academic year, the College of Pharmacy had completed and implemented all didactic courses for the core curriculum of the PharmD program and had established affiliation agreements with a sufficient number of clinical practice sites to accommodate all students in their required clinical rotations. During the 1999-2000 academic year, the remaining challenge was to develop elective courses for the fourth-year students. For their electives, students were given a choice of advanced clinical rotations, research projects in the laboratories of our pharmaceutical sciences
faculty, or coursework (including classroom instruction and seminars). All current fourth-year students selected either an advanced clinical rotation or a research project, and the college was able to identify a sufficient number of clinical sites to accommodate all students who chose to take advanced clinical rotations. All students who selected research projects were also accommodated.

A major part of the PharmD curriculum consists of advanced professional practice experiences (APPEs), which occur in a variety of practice settings (hospitals, hospital-based clinics, extended care facilities, home health care organizations, and community pharmacies). In many cases, the students have volunteer faculty as preceptors in their rotations. In other cases, the students’ preceptors are members of the College’s full-time faculty. To measure the quality of the clinical rotations our students receive, and to improve the quality where indicated, the College established a subcommittee of the Curriculum Committee called the APPE CQI Subcommittee. This year, this Subcommittee collected data both from students and volunteer faculty (preceptors) concerning the quality of the rotations, and a number of changes have been implemented based on this feedback. The continuous quality improvement process will persist into future years.

Strengths of the College

Based on considerable feedback from students, it is believed that the curriculum is a key strength of the college. Key features of the curriculum include the following:

♦ The block system—Students take one course at a time (a typical block consists of 18 days, six hours per day).
♦ The team concept—Students are assigned to an eight-member team for an entire year. Teams are given a number of assignments in each block, designed to develop their mastery of the content of that block. As members of teams, students learn to work effectively with each other, learn from each other, and develop trust and respect for each other's abilities.
♦ The pass/no pass system—The grading system is designed to avoid competition for grades, thus promoting learning for the sake of learning.
♦ Emphasis on communications skills—The curriculum requires students to make frequent presentations and submit a number of written reports. By the end of their first year, most students are very comfortable speaking in public and have improved writing skills.
♦ Use of computer technology—Computers are used in a variety of ways to enhance the learning process (see Exhibit F.4, Curriculum, in self-study report). Frequent use is made in class of internet resources. Students and faculty communicate with each other regularly by e-mail.

Clearly, one of the College’s strengths is its physical facilities, including classrooms, student breakout rooms, faculty laboratories, and office space (see Standard VIII). Another strength of the college is its faculty. All members of the faculty of the College of Pharmacy are engaged in some form of research or scholarship, including basic research, clinical research, social and administrative research, development of practice models, development of professional practice position papers, and a number of other examples. This creates an environment that is enriching to both the faculty and
students. (See the section in this standard on Research Goals, Objectives, and Strategies.)

Full-time Faculty By Gender and Diversity – as of November 2000

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Non-resident alien</th>
<th>Black non-Hispanic</th>
<th>American Indian or Alaskan Native</th>
<th>Asian or Pacific Islander</th>
<th>Hispanic</th>
<th>White non-Hispanic</th>
<th>Race/ethnicity unknown</th>
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<tbody>
<tr>
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<td>4</td>
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<tr>
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</tbody>
</table>

M=Male, F=Female

See Table IV.26 for the distribution of faculty effort.

In the past few years, the applicant pools in pharmacy and in other health professions have been declining nationally. Recently, some schools of pharmacy have not been able to fill their classes. Despite this national trend, the applicant pool at Western University has remained strong. This suggests a very strong competitive position.

At a recent faculty retreat attended by several students (representing all four classes), the students singled out the faculty as one of the key strengths of the College of Pharmacy. They commented on the accessibility of the faculty, their practical knowledge, their teaching methods, and their student-oriented attitude.

Areas of Vulnerability | Opportunities for Improvement
--- | ---
1. Dependence on student tuition as the major source of revenue | 1. Generation of non-tuition revenue
2. Competition from other schools of pharmacy (especially in light of the fact that two new schools are being planned in southern California) | 2. More creative use of computers in the educational program (building on what has already been established)
3. Faculty salaries that are not competitive with what other pharmacy employers are paying | 3. Faculty development
4. Educational resources (i.e. library holdings) | 4. Educational resources (i.e. library holdings)
5. Quality and quantity of clinical rotations | 5. Quality and quantity of clinical rotations

Planning goals for academic year 2000-2001 include:

- Filling all vacant faculty positions with highly qualified individuals.
  - Although the college made good progress in faculty recruitment this year, there still are several open positions. Next year’s goal is to recruit four new faculty members.
- Appointing two department chairs.
  - During the next academic year the College of Pharmacy will create two departments: Pharmaceutical Sciences and Pharmacy Practice. A chair will be
recruited for each department. If the chair positions are filled internally, then replacement faculty for those positions will be recruited.

- Generating at least $250,000 in non-tuition revenue.
  - Potential sources of income include grants from eleemosynary foundations, research grants, contract research, continuing education programs, and certificate programs for mid-career practitioners.

- Completing an assessment of the feasibility of establishing a Center for Drug Development.
  - One opportunity for non-tuition revenue (as mentioned above) is contract research. Some college faculty members in the area of pharmaceutics have contacts with several pharmaceutical and biotech companies in southern California (and elsewhere) that could lead to opportunities for contracts in such areas as product formulation and bioanalytical assays. The college currently is working with a consulting firm to assess potential to operate a profitable contract research laboratory. If the results of this assessment warrant it, the college will propose to establish a Center for Drug Development within the College of Pharmacy.

- Completing a strategic plan for development of a graduate program in pharmaceutical sciences.
  - The Assistant Dean for Research and Graduate Programs (Dr. Ed Soltis), in consultation with other members of the pharmaceutical sciences faculty, has begun work on a strategic plan for a PhD program. It is estimated that it will take three to five years to build the research program to a level that would justify establishing a graduate program. It is a goal of the college to have the plan for a graduate program completed during this next academic year.

- Incorporating the state board exam scores of our charter class into the College’s CQI program.
  - One of the earliest indicators of the success of our PharmD program is the result of the state board exams taken in June 2000. The college received a report from the Board of Pharmacy indicating how students performed in relation to graduates of other schools. The results of the board scores will be evaluated by the Curriculum Committee, and appropriate recommendations will be submitted to the full faculty for follow-up action.

### Board Passage Rates

<table>
<thead>
<tr>
<th>Pharmacy State Board Examination Results (June 2000)</th>
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</thead>
<tbody>
<tr>
<td>School</td>
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<tr>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>USC</td>
</tr>
<tr>
<td>UC-San Francisco</td>
</tr>
<tr>
<td>University of the Pacific</td>
</tr>
<tr>
<td>Western University’s (1st graduating class)</td>
</tr>
</tbody>
</table>

See Tables IV.27-31 for student enrollment data.
College of Graduate Nursing

Mission

The Mission of the College of Graduate Nursing is to provide graduate and post-master’s education for nurses to become advanced practice practitioners.

Current Situation

The College of Graduate Nursing, which was administered from Western University’s Chico campus, is now being administered from the main campus since the move in June 2000. The College is seeking professional accreditation with the Commission of Collegiate Nursing Education (CCNE) in Spring 2001, to coincide with the WASC site visit. This past year, the College submitted two grant applications. Although the College was denied the Helene Fuld Trust grant for program and faculty support, the College received acceptance for a Health Resources and Services Administration (HRSA) federal grant for student stipends in August 2000. The College will apply again for an HRSA grant in November 2000.

In academic year 1999-2000, the College of Graduate Nursing enrolled 26 students. Of these students, 12 participated in the graduation ceremony on June 2, 2000. Five Chico-based students are completing their second year. Starting Fall 2000, all future students (50) will attend didactic seminar weekends on the main campus in Pomona.

See Table IV.32-34 for student enrollment data.

Restructured tuition and increased recruitment efforts have had a positive impact on enrollment. For academic year 2000-2001, the college received 70 applications and considered 47 for admission. The class was seated with 36 students. In addition, the first cohort of students for the master’s completion track for Harbor-UCLA women’s health practitioners began this fall. While applicants are primarily from California, the college is now attracting prospective students from neighboring states. In addition, Nurse Week, the college’s best vehicle for advertisement, has expanded its market to include all western states (AK, AZ, CA, CO, ID, MT, NM, NV, OR, UT, WA, WY). This publication reaches all nurses within each respective state. In addition, the College has participated in two statewide career fairs, held numerous informational meetings throughout the state, and regularly attended informational meetings at Harbor-UCLA Women’s Health Program. These efforts reflect the College’s strategic plan for recruitment, which will be reviewed continually. Ongoing efforts to partner with University recruitment staff have been facilitated by relocation of the College administration to Pomona.

In reviewing the benchmarks of success in internet-based distance education prepared by the Institute for Higher Education Policy (published April 2000) and the position paper published on Distance Education in Nursing (American Association of Colleges in Nursing 1999), the College has achieved a high level of success and quality (recognition within the professional arena, faculty and administrative expertise unusual for a small university such as Western University of Health Sciences). The College is proud of its accomplishments, but continues to focus on the quality of the educational experience to assure high standards of excellence for graduates. As the College grows,
there must be a continued focus on these benchmarks for success that will continue to guide the outcomes and quality of programs as well as reputation. These benchmarks for success include curricula development and structure; faculty, student, and institutional support; and evaluation and continuous assessment of program and student effectiveness.

Quality internet-based distance education cannot be secured without the institutional support of a centralized system for building and maintaining the distance education infrastructure. Reliability of technical assistance for faculty and students must be as failsafe as possible. Integrating into the main campus will further assist the College of Graduate Nursing with this infrastructure. With the upcoming plan to seek and accomplish professional accreditation for our programs, it will be imperative to demonstrate how the College meets these standards to assure quality.

The College of Graduate Nursing currently has five full-time faculty members, with one new position to be filled prior to the fall semester 2001. Increasing the full-time faculty will better position the College for accreditation and provide additional faculty to assist the greater University with inter-campus activities. In addition, two support staff members have been hired due to the relocation.

**Full-time Faculty by Gender and Diversity – as of November 2000**

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>M</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-resident alien</td>
<td>M</td>
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<tr>
<td>Black non-Hispanic</td>
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<td>F</td>
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<tr>
<td>American Indian or Alaskan Native</td>
<td>M</td>
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<tr>
<td>Asian or Pacific Islander</td>
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<td>F</td>
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<tr>
<td>Hispanic</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>White non-Hispanic</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>Race/ethnicity unknown</td>
<td>5</td>
<td></td>
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</tbody>
</table>

M=Male, F=Female

Three College of Graduate Nursing faculty members received recognition for excellence this past academic year. Diana Lithgow, MSN, FNP, was nominated as Nurse Practitioner of the Year by the California Coalition for Nurse Practitioners on March 16, 2000. Carol Huston, RN, DPA, was nominated as the National Regional Director of Sigma Theta Tau, which consists of 20,000 members for the western United States and Pacific Rim. Karen Hanford, MSN, FNP, was awarded Nurse Leader for the northern California regional chapter of Kappa Omicron.

Western University assumes the responsibility for and exercises oversight over the College of Graduate Nursing distance programs, ensuring both the rigor of the programs and the quality of instruction, including that the technology used is appropriate to the nature and objectives of the programs. The College of Graduate Nursing programs provide for timely and appropriate interaction between students and faculty, and among students. In addition, the College ensures that the materials, courses, and programs are up-to-date through its continuous quality improvement activities and through its accreditation processes. Through the Office of Strategic Planning and Institutional Effectiveness and the Office of Information and Instructional Technology, Western University provides appropriate faculty support services and training for faculty. Western University, as well as the College itself, evaluates the educational effectiveness of the programs, including assessments of student learning outcomes, student retention, and student satisfaction (see Standard II).
<table>
<thead>
<tr>
<th>College Strengths</th>
<th>Opportunities for Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Experienced faculty</td>
<td>1. Limited support staff (need to hire two due to relocation of offices)</td>
</tr>
<tr>
<td>2. Educational model (internet-based and learner-centered)</td>
<td>2. Institutional commitment (in terms of resources) to new college seems limited</td>
</tr>
<tr>
<td>3. Knowledge and expertise in utilizing the technology to create high-level</td>
<td>3. Distance model limits number of full-time faculty for participation on University committees</td>
</tr>
<tr>
<td>learning for students (not allowing the technology to drive the curriculum)</td>
<td></td>
</tr>
<tr>
<td>4. Advanced practice roles in nursing continuing to increase</td>
<td>4. Limited University resources designated for student recruitment</td>
</tr>
<tr>
<td>5. 85% + employment of nurse practitioner graduates (AACN 1999)</td>
<td>5. Support services for distance students, i.e. bookstore, library (interlibrary loan and</td>
</tr>
<tr>
<td></td>
<td>limited nursing holdings)</td>
</tr>
<tr>
<td>6. Relocation of administrative center will provide increased opportunities for</td>
<td></td>
</tr>
<tr>
<td>faculty and students on Pomona campus</td>
<td></td>
</tr>
<tr>
<td>7. Affiliation with certificate program</td>
<td></td>
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</tbody>
</table>

**Environmental Scan**

California continues to have the lowest percentage of nurses per capita in the nation. In actual numbers, California's supply of nurses appears to be adequate for the demand over the next three-year period. Almost all nursing programs in California are fully subscribed (associate degree and baccalaureate) with students. However, they lack the resources to expand enrollments, and limited resources exist at the state or federal level in the form of grants and scholarships for students. This past year, the need to recruit students into the profession has been voiced by both state and national organizations. Task groups have been assigned and are formulating media campaigns. Projected demand for licensed vocational nurses (LVNs) and registered nurses (RNs) from 1995-1998 is expected to be higher for full-time equivalent (FTE) positions when all inpatient and outpatient employment sectors are combined (CSPCN 1999).

However, there are major shifts in the location of positions among employment sectors. Anticipated growth in patient services is expected in Clinics, Home Care, and Medical Centers (acute care hospitals with home health and/or outpatient services). Increases in employment are expected for LVNs, RN staff nurses, and RNs in the advanced practice roles (nurse practitioners, clinical nurse specialists, nurse midwives, and nurse anesthetists). Continued movement of patient care out of the acute care hospitals will result in the continued decrease in LVN and RN staff positions. A loss of nearly 4,000 RN staff FTE positions is expected during this period in acute care hospitals (CSPCN 1999, BRN Summit 1999).
California’s nursing workforce is aging. Half of the RNs working full-time were over 45 years of age in 1994 and 30% were over 50 years of age. Nationally, California is 50th in the proportion of RNs per 100,000 people. With the demand for nursing services over the next three years showing minimal growth, the proportion of RNs per 100,000 people will continue to decrease as California’s population continues to grow. Short-term complacency about a sufficient number of nurses in the aggregate will result in longer-term shortages of appropriately prepared RNs (CSPCN 1999).

**Advanced Practice Nursing**

The need for educational programs for RN advanced practice roles is being addressed in California. Nationally, the growth in nurse practitioner programs has increased dramatically in the past 10 years. Western University’s programs are positioned to meet the growing need for advanced practice primary care practitioners. In addition, Western University’s ability, and now expertise, in web-based education (learner-centered delivery) is gaining recognition both in the state and within our community of interest. As the college’s community of interest expands to include the western states, Western University is less impacted by the utilization of local preceptors and competition for employment, and graduates are well positioned for opportunities for employment in their community. As the program now has 36 graduates, the college can begin to utilize alumni as site evaluators for students in their clinical training.

**Strategic Plan**

Due to the national shortage of trained faculty, anticipated retirements of current faculty, and the major shifts in the skill sets required of current and future nurses, the College of Graduate Nursing will be expanding its mission beginning 2002. Initially, the college plans to offer a master’s track to prepare nurse educators. The college will partner with Western University’s Master of Science in Health Professions Education faculty and utilize existing resources of the MSN web-based core, as well as the Education Scholar Faculty Development Series. The community of interest then will be broadened to include schools of nursing in order to develop/educate new faculty. Strategic planning will be ongoing to continually scan the environment. Interviews with local nurse executives have elicited an educational need to include courses in management, budgeting, and leadership for employed nurses. As the college mission expands, there will be other avenues for courses to be taken for CEU or for unit credit independent of a master’s degree. Currently, the college is working with a pharmacology faculty member to complete a three-unit advanced therapeutics course that will meet the licensing requirement for both physician assistant and nurse practitioners as a free-standing, web-based module. While this can be utilized by both programs at Western University, this course could be taken by students in other programs or for CEUs.

The current student population and nursing workforce do not reflect the ethnic/racial group representation of California’s population. While applicants to the Fall 2000 class are more ethnically diverse than in previous years, the college needs to increase efforts to recruit minorities.

Regional competitors include the University of Phoenix; Azusa Pacific University; California State University, San Bernardino; UCLA; UC Irvine; Loma Linda University; California State University, Long Beach; and California State University, Dominguez Hills.
(CSUDH). All programs offer nurse practitioner programs. CSUDH and the University of Phoenix offer distance education models, which most directly compete for nontraditional students (community of interest for College of Graduate Nursing). A consultant for the College of Graduate Nursing was hired to explore the market for local and regional competitors as well as the RN to BSN educational market. The current assessment is that many programs in the region offer multiple pathways for associate degree-prepared nurses to further their education to achieve their BSN. These data will be used to explore future educational partnerships with these colleges and universities.

<table>
<thead>
<tr>
<th>Accomplishments 1999-2000</th>
</tr>
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</table>
| Outcomes measurement of program effectiveness | • All incoming students will be required to take the national certification exam. Data will be gathered on all alumni. (Of the percentage of students [25%] who voluntarily took the national certification exam in 1999, all have passed.)  
• The College of Graduate Nursing survey of its 26 graduates was completed. In general, alumni are satisfied with the education they obtained, found support services inadequate (financial aid, bookstore, library), and are unhappy with the change in tuition policy (see Standard II).  
• CGN graduates were sent the university-wide alumni survey. There was a limited response from CGN graduates, so no valid conclusions could be drawn (see Standard II—Western University Alumni Survey). |
| Establishment of faculty performance process | • Completed Faculty Handbook.  
• Developed performance evaluation criteria and process for CGN (see Standard II).  
• Faculty will submit their materials in May 2000. |
| Submission of grant applications to support growth of the college | • Submitted grant application to Helene Fuld Trust for $42,000 to expand modules and financial support for staff and part-time faculty positions. Denied—December 1999; will reapply in 2000.  
Expand applicant pool

- Strategic Enrollment Management Plan (see Standard II—SEM).
- 495 applications mailed; 70 completed applications received.
- Completed information for major online catalogs, Peterson’s, etc.
- Attended SEM retreat.
- Assisted with training of new University recruitment staff member.
- Participated in monthly telephone conferences with designated media representatives for CGN.
- Developed brochure for new recruitment materials.

### Planning Goals for Academic Year 2000-2001

<table>
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<tr>
<th>Goal</th>
<th>Action Items</th>
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<tbody>
<tr>
<td>Achieve professional accreditation, scheduled for March 2001, from the Commission of Collegiate Nursing Education (CCNE) (see Exhibit F.7 for self-study). This will strengthen the reputation, broaden the market for applicants, and validate the quality of the programs.</td>
<td>Submit self-study February 1, 2001. Site visit Spring 2001.</td>
</tr>
<tr>
<td>Continue to recruit students and promote stability of the college. The goal is to accept 40 students per year. Continue with current SEM recruitment plan and partner with the University recruitment office.</td>
<td>SEM plan. Hire support staff for student services/recruitment/alumni. Hire two full-time faculty members and decrease utilization of adjunct and part-time faculty. Engage in more intercampus activities and promote an interdisciplinary model of health education. Interviews May 2000. Assign faculty to University communities.</td>
</tr>
<tr>
<td>Share expertise in web-based education with faculty members from other colleges</td>
<td>Revise and update the faculty manual for orientation to web-based courses. Assist/mentor faculty. Provide faculty resources for the Center for Academic and Professional Enhancement.</td>
</tr>
<tr>
<td>Promote awareness of the College of Graduate Nursing in the national, regional, and local community, and participate in service activities to</td>
<td>Attend professional meetings: CACN, CCNP, AACN, and NONPF. Attend and participate in service activities within academic health</td>
</tr>
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<p>| 157 |</p>
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<tr>
<th><strong>integrate into the community.</strong></th>
<th><strong>centers.</strong></th>
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<tbody>
<tr>
<td>• Meet with nurse executives of health care agencies in the area.</td>
<td>• Meet with nurse executives of health care agencies in the area.</td>
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<tr>
<td>• Submit articles of interest to media.</td>
<td>• Submit articles of interest to media.</td>
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<tr>
<td>• Sponsor CEU programs for local health care professionals.</td>
<td>• Sponsor CEU programs for local health care professionals.</td>
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<td>• Invite national speaker to campus.</td>
<td>• Invite national speaker to campus.</td>
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<td>• Submit abstract for NONPF meeting April 2001.</td>
<td>• Submit abstract for NONPF meeting April 2001.</td>
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<tr>
<td>• Contribute to professional community to validate outcomes of web-based curriculum.</td>
<td>• Contribute to professional community to validate outcomes of web-based curriculum.</td>
</tr>
<tr>
<td>• Monitor certification pass rate for all graduates.</td>
<td>• Monitor certification pass rate for all graduates.</td>
</tr>
<tr>
<td>• Utilize FNP CLER as outcomes measurement of knowledge pre- and post-program.</td>
<td>• Utilize FNP CLER as outcomes measurement of knowledge pre- and post-program.</td>
</tr>
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</table>

- Explore affiliations and partnerships with other schools/colleges of nursing to provide alternative avenues for nurses to achieve graduate and continuing education

- Completed affiliation with Harbor-UCLA Women’s Health (2000) for MSN track. Continue to evaluate and promote this relationship. Have received contacts for two other women’s health programs.

- Explore affiliation with UC Irvine. Meet with director April 2000. Continue to promote MSN completion.

- Assist with marketing of FNP CLER (certification review); promote at meetings, include with marketing for MSN track, serve as a resource for database, and collect data and evaluation from alumni and graduates to validate course.
College of Osteopathic Medicine of the Pacific (COMP)

Mission

The mission of COMP is to prepare compassionate, humanistic, culturally sensitive, highly capable osteopathic physicians to provide comprehensive health care to the community with an emphasis on health promotion and disease prevention.

College Organization

Following the retirement of the Dean and the untimely death of the Assistant Dean for Basic Sciences, the following organization structure was created:
The WASC/COMP Design Process

A key characteristic of this WASC self-study is its mandate for COMP to identify the focal points of the study. Having established elsewhere in this report that Western University is in essential compliance with basic accreditation standards, this self-study is an occasion for COMP to reflect upon and select those self-study foci that are most critical for college improvement.

The following data sources were referenced in determining the emphases for the 2001 COMP self-study:

1. The 1995 WASC recommendations: The WASC evaluation team made 35 recommendations pertaining to COMP as a result of its 1995 site visit (see Appendix IV.8). Since COMP evolved into Western University subsequent to that visit (and university-wide issues are addressed elsewhere in this report), only those recommendations deemed directly relevant to COMP were considered for this portion of the self-study. While a large number of the recommendations have been addressed substantively in the intervening years, several deserve further attention.

2. AOA self-study: The self-study prepared for the April 2001 site visit by COMP’s professional accreditation body, the American Osteopathic Association, served to focus institutional attention on several key issues. These tended to parallel the issues brought to attention by the WASC self-study (see Exhibit F.3).

3. Institutional surveys and listening sessions: The Office of Strategic Planning and Institutional Effectiveness (OSPIE) conducted a number of surveys and listening sessions with faculty, staff, and students to assess opinions and attitudes about institutional effectiveness. The listening sessions and surveys with COMP faculty, staff, and students helped to inform this aspect of the report (see Exhibit II.4).

4. ALO-WASC dialogue: Western University’s Vice President of Institutional Effectiveness/Accreditation Liaison Officer has maintained ongoing dialogue with WASC to clarify the most effective way to frame this self-study to optimize its value to the University. Her input was sought in determining the issues to be addressed.

5. Miscellaneous data sources: The COMP administration and faculty considered various indicators of COMP effectiveness, such as COMP students’ performance on the COMLEX and its graduates’ career pathways. COMP conducted comparison studies on the policies, curriculum, and performance data of other medical colleges in identifying key planning issues.

Significant Achievements

The data sources listed above were evaluated on several occasions by the COMP Dean’s Cabinet. During these meetings, significant achievements since the 1995 visit were noted. These include the following:

1. Strategic Enrollment Management: Working in close cooperation with the University Admissions Office, the COMP Admissions Committee has clarified the process by which DO applicants are evaluated for acceptance. The University retained for professional consultation the Compact Team to reengineer the process and train Committee members. As a result, the admission process has been protected further from unwarranted intrusion from persons outside the Committee. They have agreed upon appropriate weights for various criteria such as MCAT scores, GPA, and other subjective considerations. Acceptance criteria have been linked to student
performance data to support ongoing review of those criteria as predictors of success at COMP.

2. **Technology-supported teaching and learning:** Beginning with the MS1 class that enrolled in 2000, all entering students are leased a laptop computer. Lecture rooms are networked to the level of individual student workstations so students can download presentations as they are being made, or review them later on the Intranet. Instructors are engaged in the process of preparing their presentations in PowerPoint, Blackboard, and other media to facilitate student learning. Courses such as Gross Anatomy, Histology, and Embryology are extensively supported in an electronic format.

3. **Learning resources:** A new 40,000 square foot Library is scheduled for opening in Spring 2001. In the interim, major progress has been made in the existing Library to expand permanent holdings, journal subscriptions, and online data sources. Bibliographic and technology literacy are addressed early in the student’s program.

4. **ISAC:** The Intensive Summer Anatomy Course (ISAC), a special program to give first-year students a solid head start in anatomy studies, was the subject of a focused quality initiative. Working with the staff from the Center for Academic and Professional Enhancement, the faculty and student facilitators engaged in significant training and effectiveness assessment. This resulted in important innovations in instructional strategies and an increase in student learning and satisfaction (see Standard II—Assessment Activities).

5. **Curriculum revision retreats and plan:** The COMP faculty, with the assistance of CAPE, conducted three retreats to address curriculum revision needs and strategies. The Curriculum Committee has been active in structuring a significant revision for the entire four-year program.

6. **Opportunities for listening:** Several recurring events have been built into the schedule for COMP to attend to the interests and needs of its various stakeholders. The Dean’s Hour, for example, provides a monthly opportunity for MS1 and MS2 students to interact with the COMP Dean. The Dean also meets regularly with the elected representatives of the MS1 and MS2 classes. A COMP Director of Student Services has been appointed to provide additional professional attention to COMP student needs.

7. **Clinical rotations:** The COMP administration made substantive changes in the clinical rotations program for third and fourth-year students. Several new affiliate sites were added. More of the rotations are arranged as blocks so students do not need to relocate between each rotation. Students engage in more consistent evaluations of their rotation. Limits are set on decisions to change rotations; students must fulfill a 60-day commitment before they can leave a rotation. Student feedback is provided to faculty by department chairs to enhance their effectiveness as educators. Greater care is taken with regard to preceptor selection and training, including setting geographical limits for third-year rotations to monitor more carefully the quality of the learning experience. The *Clinical Education Manual* has been updated and distributed to all sites (see Exhibit IV.2).

8. **Assessment of student learning:** In addition to course grades, COMP faculty are referencing several additional sources of data on student learning. COMP
students’ performance on the COMLEX Level 1 and 2 exams was analyzed and presented to the faculty. Clinical skills are assessed by the Clinical Performance Exams (CPE) in both the second and fourth years. The Curriculum Committee reviews these scores as it plans revisions in the curriculum.

9. Assessment of the learning environment: The Office of Strategic Planning and Institutional Effectiveness (OSPIE) has conducted a number of surveys at key points on the student pathway. Surveys assess expectations for admitted students, compare those expectations with actual experience at the conclusion of the first year, and explore summary experiences at the end of the fourth year. Extensive surveys have also been conducted for alumni. The OSPIE team distributes summaries of these data to key decision makers in COMP and the University (see Standard II—Assessment Activities).

10. Faculty development: The University has established and staffed the Center for Academic and Professional Enhancement to provide an in-house source for faculty development for all programs. CAPE has been particularly beneficial in working with the faculty to refine COMP’s Intensive Summer Anatomy Course. They are also working with the OMM fellows in a manner similar to their work with the anatomy course. They are providing ongoing support for the curriculum development process and for related pedagogical training.

11. Critical thinking/Evidence-based medicine: Under the leadership of the current Dean, COMP has begun several strategies to enhance student skills in critical thinking. Each MS class is tested by a broadly normed content-neutral exam, the California Critical Thinking Skills Test (CCTST). This exam, and its significance to students, are presented as part of the new student orientation experience. As COMP generates adequate CCTST scores to set its internal norms (n=500), faculty will be able to track changes in student skill levels at any of several points in a student’s pathway. Students with low critical thinking skills are advised to receive special training from the LEAD staff. In addition, faculty received training in the medical practice dimension of this skill. Dr Daniel Friedland, author of *Evidence-Based Medicine*, conducted an in-service workshop for faculty during the March 2000 retreat. The Curriculum Committee is studying ways to incorporate this emphasis more broadly across the curriculum.

12. Summer institute: As a means to prepare students for a range of courses, COMP arranged for one of the profession’s most respected anatomists, Dr. Schechter from USC, to present a summer institute in July 2000. It will be expanded for Summer 2001 to include pharmacy students and entering students as well.

13. Osteopathic philosophy: In keeping with the mission of the college to prepare osteopathic physicians, content for the Osteopathic Principles in Practice course has been expanded and integrated more fully into the curriculum. Four full-time faculty and 17 undergraduate teaching fellows support instruction in lecture and lab settings. Curriculum has been developed for including OPP in the third- and fourth-year rotations and in OPTI. A third-year OPP rotation will be required in academic year 2001-2002.

14. Clinical skills labs: With the assistance of a major establishment grant, the College has designed and built a complex of sophisticated skills labs in which students can rehearse and demonstrate their clinical skills. Sixteen labs are equipped with a video camera; eight of them are equipped with dual cameras.
Facilitators sit in a central control studio and can select individual labs, move camera angles, and record the demonstration. Upon completion, students view and critique their session from a monitor in each lab. The labs are designed to support the Doctor/Patient Communication course as well as the Clinical Performance Exams. Sensing the inherent potential for these labs to address a range of interpersonal skills, other University programs are envisioning their curricular role as well. These labs represent cutting edge pedagogy and technology in a well-crafted whole.

See Tables IV.35-37 for enrollment data, Table IV.38 for a listing of OMM Fellows, Table IV.39 for a tuition comparison, Table IV.40 for faculty teaching hours, Table IV.41 for graduate data, Table 4.42 for alumni practice data, and Table IV.43 for a listing of AOA-approved internship residencies.

**Self-Study Focus**

In evaluating these evidences of progress, COMP has also identified a number of areas requiring continuing attention. The following four areas have been selected as the primary focus of this self-study. They are framed as questions within each area to prompt institutional reflection.

1. **Institutional Effectiveness:**
   
   To what extent has COMP designed and implemented a comprehensive system to assess and improve its effectiveness?
   
   A. To what extent were relevant stakeholders involved in identifying the key performance indicators, assessment tools, and evaluative processes leading to improved effectiveness?
   
   B. What evidences are available to demonstrate that data-supported decisions have led to improved institutional effectiveness?
   
   C. Have systems and processes been established to document student learning in both the basic sciences and clinical settings? To what extent have faculty been involved in their design and trained in their use? How are the resulting data used to improve instruction?

2. **Curriculum Review and Development:**
   
   A. Has COMP designed and implemented a systematic plan to periodically review and revise its curriculum?
   
   B. Is the curriculum built around observable learning objectives and linked with procedures to assess a student’s degree of attainment of those objectives?
   
   C. How does the curriculum review process provide for consideration of appropriate reference points such as:
      
      - Changing professional environment and requirements.
      - Student scores on objectively-normed measures.
      - Recognized developments in graduate level pedagogy and technology-supported instruction.
      - The institution’s mission and vision.
D. To what extent are faculty significantly involved in both the design and implementation of the curriculum development process?

E. How are faculty workloads evaluated, compared, and linked to the curriculum?

F. How is curriculum revision linked to the institutional budgetary and resource allocation processes?

G. To what extent do the several elements of the curriculum review process reflect an understanding of the principles of continuous quality improvement?

3. Faculty support and development:

A. To what extent are faculty involved in the planning, budget, curriculum, and personnel development processes of COMP? Have limiting factors on such involvement been addressed successfully since the 1995 visit?

B. Have effective processes for faculty performance appraisal been developed and implemented? To what extent have faculty been involved in their design, use, and evaluation? How is faculty performance appraisal linked to student learning?

C. To what extent does the faculty reflect gender and ethnic diversity? What strategies are in place for increasing such diversity?

4. Student support:

A. To what extent has COMP evaluated the various factors contributing to student retention and achievement of goals; how has such evaluation been linked to planning?

B. What factors were considered in developing a comprehensive plan for student services? What are the goals for such a plan and the key measures for success?

These four areas of self-study frame COMP’s component in the following pages of this report.
Self-Study Area: 1. INSTITUTIONAL EFFECTIVENESS: (A) To what extent has COMP designed and implemented a comprehensive system to assess its effectiveness?

Description: Since COMP is part of an institution of higher education in a rapidly changing and highly competitive field, the faculty and administration at COMP believe it is imperative to evaluate progress toward the achievement of its goals. Ongoing self-evaluation implies a shared understanding of COMP’s mission and vision, and agreement on the key indicators of success in achieving its mission. It also implies that COMP has identified: (a) assessment tools to measure performance, (b) methods for generating and evaluating performance data, and (c) structures to link such evaluations to decision making for improvement.

Evaluation: The mission statement for COMP is concise, focused, and appears to be understood broadly by students, faculty, and administration. It is referenced frequently in decision-making settings, planning documents, and student materials. It reads:

_The College of Osteopathic Medicine of the Pacific prepares compassionate, humanistic, culturally sensitive, highly capable osteopathic physicians to provide comprehensive health care to the community, with an emphasis on health promotion and disease prevention._

In the 1998-2003 COMP Strategic Plan (see Exhibit IV.3), the need for data-supported planning and decision making was identified as a major element of strategic planning: “In order to progress, every institution must identify areas for improvement, which capitalize on its unique strengths and opportunities.” Eight distinct areas for improvement are listed in this plan and are clearly linked to fulfillment of the COMP mission:

- **Curriculum:** Continuous innovation, empowered faculty role, articulated four-year design, increased student participation and accountability, consistent clinical experiences, emphasis on “doctoring” competencies, innovative instructional and innovation strategies
- **Applicant Pool/Admissions:** Improved methods for processing and evaluating applicants, enhanced marketing and recruiting, expanded applicant pool (quantity and quality), institutional alliances, clarification of DO career pathways
- **Accreditation (AOA/WASC):** Full compliance with new standards and processes, use of data to inform planning, expansion of research and scholarly activity, expansion of learning resources and related training
- **Faculty Development:** Enhanced pedagogical skills for both clinical and basic sciences faculty, expansion of assessment concepts and skills, more effective use of instructional technology, integration with off-campus educators, embracing lifelong learning
- **Research/Scholarly Activity:** Expansion of basic sciences research and scholarly activities—especially in OMM, primary care, and medical education; encouragement of inter-institutional cooperation in research; obtaining new financial support from foundations and government agencies
- **Student Support:** Active integration of principles of humanism and diversity into students’ experience, support of co-curricular involvement, development of LEAD and related services, securing scholarships, coordination of board reviews
- **Osteopathic Postdoctoral Training Institution (OPTI):** Work for quality and consistency in pre-/post-doctoral clinical educational experiences, integration of
evidence-based medicine and critical thinking in clinical settings, development of clinical competency standards, integration of distinctive osteopathic principles, development of outcome measures and assessment tools, use of data to improve instruction

Community Service/Health Care Delivery: Increase of COMP presence in the community, focus on community health promotion, support for Mission Clinic programs and staff, evaluation of effectiveness and making improvements

As the following report will suggest, COMP has experienced significant progress in most of these areas. Many of these improvement steps have begun with an assessment of current effectiveness. For example, COMP conducted an analysis of its students’ scores on the Comprehensive Osteopathic Medical Licensing Exam (COMLEX) administered by the National Board of Osteopathic Medical Examiners (NBOME). These scores can serve as a valid, externally normed indicator of institutional effectiveness. This analysis was published as *A Study of the NBOME/COMLEX Level 1 and 2 Examinations from October 1995 to June 2000* (see Exhibit IV.4). Its preliminary and final distribution in the spring and September 2000, respectively, played a role in informing both the admission process improvement and the curriculum revision process for COMP.

COMP has also worked closely with the Office of Strategic Planning and Institutional Effectiveness to design and administer effectiveness surveys. For example, the Admitted Student Survey was administered to recently admitted students in the summer of 1999 and 2000. Data were gathered regarding student expectations for the nature and quality of their COMP experience. These data were compared with the First-Year Student Experience Questionnaire, which was administered at the end of the MS1 year for the Fall 1999 cohort and will be administered for the 2000 cohort. An executive summary of the results was published in August 2000 for consideration by various stakeholders. In addition, a twice-monthly event known as the Dean’s Hour has been initiated to provide a formal listening session in which each COMP class can ask questions and express concerns to the COMP academic leadership. These hours also provide a forum for issues raised by the Office of the Dean that are of importance to the students. These meetings have been well attended and the participants have been candid. The Director of COMP Student Services documents trends and recurring issues addressed in these meetings and then tracks the COMP response.

COMP acknowledges, however, that planning with a view to institutional effectiveness is a complex, long-term activity. While COMP has taken a number of promising steps, specific strategies are necessary in order for this approach to become operational in all aspects of the institution.

**Planning Agenda:**

1. By July 2001, COMP will work with all relevant stakeholders to identify key performance indicators linked with its mission, determine attainable measures and instruments by which to assess its performance on each of these indicators, and establish a process by which decision makers will evaluate these performance data.

2. COMP will set performance goals that reflect achievable improvement on each indicator, determine appropriate timelines for such achievement, identify resources necessary for improvement, and determine the persons accountable for implementation. These goals will be documented in a Gantt-type chart, and
performance benchmarks will be regularly reviewed by the COMP faculty and leadership team.

**Self-Study Area:** 1. **INSTITUTIONAL EFFECTIVENESS:** 

*(B) To what extent were relevant stakeholders involved in identifying the key performance indicators, assessment tools, and evaluative processes leading to improved effectiveness?*

**Description:** Since effective planning requires both the informed input and the understanding of all parties who will be affected by the planning, it is critical that COMP's various stakeholders participate in effectiveness planning. For the purposes of this study and resulting planning, such stakeholders include:

1. Faculty (basic sciences faculty, clinical faculty, preceptors).
2. Students (applicants, matriculants, OPTI, alumni).
3. Administration (for COMP, ACHES, Western University—both as an entire organization and by each University program).
4. Support teams and staff (Strategic Planning, CAPE, LEAD, Student Services, Admissions, Library).
5. Persons involved in supervising and delivering clinical rotations and residency training experiences.
6. The medical practice community, whose opinions and decisions affect training and practice opportunities for COMP students and graduates.

**Evaluation:** Several initiatives have increased the involvement of some of COMP’s stakeholders in institutional planning during the past few years. We note the following as key examples:

1. **Faculty retreats:** COMP faculty participated in three retreats to address the issues, vision, and skills related to curriculum review and revision. These events addressed the following issues:

   - January 27, 2000: COMP retreat to review the COMP curriculum in comparison to curricula of other osteopathic and allopathic medical schools.
   - March 21-23, 2000: Clinical skills to be assessed in the COMLEX I and faculty role in preparation; COMP admission process improvement; evidence-based Medicine Symposium with Dr. Daniel Friedland; and the learning goals, organizational framework, delivery methods, and assessment strategies for the COMP curriculum (see Exhibit IV.5).

   As a result of their participation in these retreats, faculty generally exhibit a growing sense of participation in the COMP educational experience.

2. **Curriculum Committee:** The Curriculum Committee was reconstituted to provide for greater input from the clinical faculty. Historically, they had not been part of the curriculum process, since clinical chairs had not been staffed fully prior to the naming of the current COMP Dean. Though the new Curriculum Committee provides for their input, the method by which it was accomplished is a source of continuing irritation since the process was not in conformity with Faculty Handbook policy.
Based on the findings of the January 27, 2000 Faculty Retreat, in which student needs were identified, the Curriculum Committee adopted five goals to guide its work in the immediate future:

- Develop a more active learning process for students.
- Reduce seated classroom time.
- Use more technology-enhanced teaching/learning tools.
- Better prepare students to become lifelong learners.
- Introduce evidence-based medicine across the curriculum.

3. **Stakeholder Surveys:** The Office of Strategic Planning and Institutional Effectiveness has been active in administering surveys that assess perceptions of effectiveness among various COMP stakeholders. For example:

   **Alumni Survey** (February 2000): Based on 255 responses (165 of which were from COMP alumni), a 46-page report was prepared for consideration by University personnel. Both quantitative and narrative data were presented in the report (see Exhibit II.4).

   **Fourth-Year Student Graduation Questionnaire:** This 20-page survey was administered to the graduating class of 2000 approximately three months prior to graduation. It generated valuable responses from 136 students (85% of the class) covering a broad range of their COMP experience. This survey was developed following a template used by AAMC (allopathic) medical schools, allowing for comparison of responses (see Exhibit II.4).

   **First-Year Student Questionnaire:** This survey of students' perceptions of their learning environment is now administered at the conclusion of the first year of study for all COMP students (see Exhibit II.4).

4. **Clinical Rotations Preceptors:** COMP has undertaken a major initiative, under the direction of the Assistant Dean for Academic Affairs, to build closer links with the Clinical Supervisors, Directors of Medical Education, and rotations preceptors. This involves obtaining useful evaluations from their experiences with COMP students and using these data to improve instruction.

   Even as COMP has taken initiatives such as these to include some stakeholders more fully, there are a number of indications that suggest the need for continuing improvement in this area:

   A. Beyond these endeavors to obtain input from students and faculty, some external stakeholders (such as alumni and rotations preceptors) are not engaged sufficiently in evaluation and planning.

   B. Effectiveness data obtained from these stakeholders are not used consistently to inform decision making. Planning groups are not held accountable consistently for making decisions based on these data and assessing the impact of those decisions.

   C. Some faculty feel that their planning efforts are circumvented by top-down directives from higher levels of the organization, that committee structures and processes can be bypassed by persons with the presumed authority to do so, and that the Faculty Handbook can provide a semblance of policy that is, in fact,
sometimes ignored. These perceptions lead to a certain level of indifference toward continuing involvement in the planning process.

D. Some faculty report the sense that Western University is focused more on immediate operational efficiency than on building the structures and processes to sustain quality education.

E. Very little collective discussion has taken place to identify COMP’s key performance indicators and related measures of their achievement.

In general, it appears that formal planning processes appropriate to the degree of effectiveness desired for COMP are still in the early stages of development.

Planning Agenda:

1. The planning process described in the Planning Agenda for item 1 (A) (above) specifically will include each of the stakeholder groups identified in this item. Every effort will be made to address the causes for indifference or non-involvement of the COMP faculty.

2. The Faculty Handbook will be reviewed (and revised as indicated) to assure that it does, in fact, describe appropriate practice for institutional planning. Western University’s Chief Academic Officer is responsible for seeing that policies related to the work of the faculty are carefully observed.

Self-Study Area: 1. INSTITUTIONAL EFFECTIVENESS: (C) What evidences are available to demonstrate that data-supported decisions have led to improved institutional effectiveness?

Description: This area of inquiry assumes that (a) there is broad agreement on the core indicators of institutional effectiveness, (b) data are generated and considered by which to evaluate this effectiveness, and (c) data-supported decisions are made to improve effectiveness in key areas. It is assumed further that this three-step process is embedded in the ongoing operations and structures of the organization.

Evaluation: A primary example of data-supported improvement is the assessment and development of the Intensive Summer Anatomy Course. COMP faculty worked with the Center for Academic and Professional Enhancement and the Office of Strategic Planning and Institutional Effectiveness to identify the goals and vision for this innovative program. Assessment tools then were created to inform planning for students, faculty, and lab facilitators. This evaluation was critical, in part, because of the increased reliance on well-trained student facilitators for group-based learning in the dissection labs.

Based on the data gathered at the conclusion of the ISAC session in October 1999, specific training was developed for the facilitators and faculty. This training was delivered prior to the 2000 ISAC, along with refinements in the curriculum and instructional approaches. At the conclusion of the first five weeks of Anatomy during the fall term, a 360-degree evaluation was conducted on behalf of the facilitators. With these additional insights into their roles and tasks, facilitators were able to make specific improvements in supporting student learning.

Another significant example of process improvement relates to the medical school admission process. The University hired the Impact Group, LLP, to empower and assist the members of the admissions committee in examining its processes. The goal was to secure a well-considered, high-quality cohort of entering students consistent with the mission of the college. The admissions committee adopted several new policies and
practices. The admissions team received training on conducting applicant interviews so that they could gain skill to discern key information more accurately. The committee agreed on minimum applicant MCAT scores and GPA, and assigned weighting to these criteria. The primacy of the role of the admissions committee in determining acceptable applicants was reaffirmed, and safeguards against circumventing the process were put in place. The committee adopted nationally recognized practice in managing the traffic flow of applicant materials and acceptances. These actions have increased the confidence of the faculty in the outcomes of a more professional admission process. They also appear to be producing higher quality acceptances to COMP.

A faculty team has designed a process to assess more adequately student feedback on the learning environment. This process is continuing to be refined as part of a more comprehensive assessment plan.

The OSPIE team has assisted in conducting evaluations for many other aspects of COMP’s programs, such as training events for faculty. This enables various teams to assess perceptions of the planning processes, learning environment, and instructional process for key aspects of its programs.

Many of these tools for assessment suggest that COMP is ready to engage in significant new levels of planning. This is exhibited in several ways:

1. There have been few institutional efforts to establish overall effectiveness goals and measures, and to identify the related persons responsible for the use of effectiveness data to support planning.

2. It is not clear that data are being used to their maximum advantage by various planning entities to support improvement. Some well-designed assessment tools and their reports seldom are utilized fully.

3. While University management, in its annual report, references educational continuous quality improvement, the concepts and strategies are not operationalized as a routine part of the COMP culture.

Planning Agenda:

1. By July 2001, a clear, COMP-based process will be designed that links the various sources of evaluative data to specific planning tasks. The Director of Academic Research will be responsible for overseeing the generation and use of such data, and will report key results in an appropriate “COMP Annual Report Card” to relevant stakeholders.

2. The assessment and improvement process that has been piloted with the ISAC will be expanded to other instructional and planning tasks within COMP. Specific attention will be given to data-supported improvement in both the preclinical and clinical educational experiences.

Self-Study Area:  1. INSTITUTIONAL EFFECTIVENESS:  (D) Have systems and processes been established to document student learning in both the basic sciences and clinical settings? To what extent have faculty been involved in their design and trained in their use? How are the data used to improve instruction?

Description: Since COMP’s primary “product” is student learning, it must develop and use concrete measures of the quality and quantity of this product to assess its effectiveness. COMP’s mission suggests that student learning embraces a rich combination of scientific knowledge, clinical and interpersonal skills, and lifelong learning competencies. As the primary agents for student learning, faculty must be involved in
designing and administering mechanisms for assessment of student learning and in evaluating the resulting data.

**Evaluation:** At present, there are several primary sources of data being used to assess student learning:

1. **COMLEX:** The Comprehensive Osteopathic Medical Licensing Examination is an externally normed testing system used at all colleges of osteopathic medicine. COMLEX Level 1 is administered at the conclusion of the second year, Level 2 in the mid-portion of the fourth year. Test data from COMP students are available on individual and total pass rates, and on the seven areas of the curriculum measured by the COMLEX.

2. **GPA:** Students’ grades by course and cumulative GPA during the first two years are based on a percentage score of demonstrated mastery for each course in the COMP curriculum. These assessments are internal to COMP and measure performance against expectations for mastery of content as determined by the faculty.

3. **CPE:** The Clinical Performance Exam is designed by a COMP clinical and academic team, and is administered during the second and fourth years. Using trained standardized patients who present simulated medical conditions, the CPE is a form of assessment that closely replicates an actual professional setting. It measures complex medical knowledge, reasoning processes, and interpersonal communication skills as students conduct an actual history and physical, evaluate the data, and prepare a differential diagnosis (see Exhibit IV.6).

As with many institutions of higher educational nationally, COMP is struggling to find more effective means to document student learning and use these data to improve instruction. COMP faculty and administration have identified the following opportunities for improvement in assessing and improving learning:

1. Faculty continue to struggle with the time, skills, and/or incentives associated with writing the curriculum around measurable learning outcomes. This deficit manifests itself in classes that are shaped more often by what an instructor intends to say than around the expectation of what the student will know and be able to do upon the completion of the course.

2. As a direct outgrowth of the scarcity of course-specific learning outcomes, assessment often becomes primarily an audit of students’ ability to recall what an instructor has said. This type of assessment tends to reinforce the lower levels of cognition (such as factual recall) rather than to encourage the students’ capacities to use information to solve complex problems and communicate meaning effectively. Faculty are seeking to use assessment to drive a more significant focus on critical thinking and other higher cognitive processes.

3. COMP’s limited ability to assess specific learning outcomes constrains its ability to link such assessment with curriculum review and revision. For example, students’ COMLEX scores have been formally presented only recently to the Curriculum Committee for inclusion in curriculum review. Until recently, CPE scores were not evaluated either by individual faculty or by the Curriculum Committee. While CPE scores are now being communicated to students in a manner that facilitates diagnosis and improvement, there are still opportunities to integrate the CPE more fully into the learning process.
4. Students’ learning in clinical rotations during their third and fourth years has been structured around learning outcomes, as expressed in the Clinical Education Manual (see Exhibit IV.2). This document is given to students, the on-site Director of Medical Education, and individual preceptors. While it contains objectives and expectations, it typically does not specify methods and criteria for assessment. As a result, evaluation of student learning on rotations has lacked consistency. Clinical preceptors’ use of outcomes to frame their evaluation of students’ learning has been somewhat uneven; methods to monitor this are in development.

5. COMP faculty and administration need to be working from a program-wide set of integrated learning outcomes. This will ensure the full alignment of the entire COMP curriculum with such reference points as:

- Student performance on the COMLEX 1 and 2.
- Student mastery of clinical and interpersonal skills sufficient to support entry into the world of osteopathic medical practice, as evidenced by performance on the two clinical practice examinations.
- Student access to residency and sub-specialty programs of choice.
- Student readiness for the emerging and rapidly changing demands of the medical profession, such as have been expressed in the Pew Competencies (see Exhibit IV.5) and required by the emerging dominance of a managed care environment.

Planning Agenda:

1. The COMP faculty and administration will continue their efforts to design and implement a comprehensive strategy to assess student learning. This strategy will include the following steps:

   A. By December 2000, faculty will have completed an interim review and revision of the MSI and MSII curricula, and reallocated total hours by discipline to reflect best practice in selected aspirational peer institutions.

   B. By March 2001, all course syllabi for MSI and MSII will be revised to reflect this reallocation of hours. These syllabi will include specific learning outcomes for each course. COMP will provide training and ongoing support to faculty through CAPE and other resources as needed to achieve this goal.

   C. By June 2001, specific strategies to assess student learning will be adopted for each course. Specific attention will be given to the selection of assessment strategies that reflect the kinds of learning most closely linked to the identified learning outcomes.

   D. By August 2001, a central repository of comprehensive student performance data will be created and implemented to support ongoing curriculum review, the identification of faculty development needs, and COMP resource planning.

2. COMP will continue its efforts to design and implement appropriate methods for assessing clinical competencies. This will include the following strategies:

   A. By February 2001, COMP will have implemented plans to enhance the role and effectiveness of the Clinical Performance Exam as an integral part of its assessment strategies. This plan will address how the CPE will improve student
learning, enhance instructional strategies, and inform the curricular review process.

B. By May 2001, COMP clinical chairs and rotations administration will have designed an instructional template for use by rotations preceptors. This will guide their instructional approach to students and lead toward a consistent method for assessing clinical skills that will focus the student’s continued learning.

Self-Study Area: 2. CURRICULUM REVIEW AND DEVELOPMENT: (A) Has COMP designed and implemented a systematic plan to review and revise its curriculum periodically?

Description: A well-designed process for systematic program review is regarded as an integral function of a university. A program is regarded as that comprehensive set of learning experiences that produce the qualified graduate. The review process, then, is an orderly set of steps by which the institution periodically inquires into the effectiveness of its program in achieving that goal. A program review may result in a recommendation for no change, for minor refinements, or for major transformation, and should clearly specify the nature of such changes. Program review addresses all aspects of curriculum, instruction, learning, and assessment. Both the program review process and the implementation of its findings are the primary responsibility of a university’s faculty.

Evaluation: Following some years of minimal program review and revision activity, the COMP faculty has responded to a curriculum revision proposal offered by the Dean and the Assistant Dean of Academic Affairs (see Exhibit IV.7). This proposal took into consideration a prevailing pattern for the allocation of instructional hours at comparable colleges of osteopathic medicine. It was presented to the faculty in October 2000 and is guiding current curricular planning. This revised curriculum (see Exhibit IV.8) has a target implementation date for the students who enroll for the August 2001 class. The Curriculum Committee retains responsibility for determining the time and steps for full implementation.

The curriculum revision task is guided by the following goals:

1. To reduce the number of in-class hours.
2. To eliminate excessive duplication of materials.
3. To ensure that the clinical relevance of a lecture is clear to the students.
4. To introduce evidence-based medicine into the curriculum.
5. To introduce needed areas of learning, such as genetics and gene therapy, immunology, nutrition, oral/dental medicine, and geriatrics.
6. To utilize innovative instructional technologies in an effective manner.
7. To use innovative instructional design techniques.
8. To promote active learning by students.
9. To promote lifelong learning skills.
10. To implement a more valid means to assess student learning in courses and rotations, and to assess course and faculty effectiveness.
11. To enhance communication between students and faculty.
The current revision process is framed around the reallocation of instructional hours. This task, however, has become the occasion to address other issues, such as more extensive integration of clinical skills earlier in the program, small group learning experiences, use of a more extensive palate of instructional strategies, and consideration of innovative assessment methods. Faculty will also consider how well the curriculum prepares students for the COMLEX and CPE exams.

In response to this curriculum task, the COMP faculty has created a method of mapping its many component parts for years 1 and 2 of the DO program. They are organizing into task groups, identifying needs for supplemental training, and planning for changes in faculty workload and instructional space requirements associated with these changes.

It should not be interpreted that these recent activities represent a systematic, ongoing process for curriculum review within COMP. It does suggest, however, that several key ingredients are coming together that will serve as a foundation for an embedded curriculum review process. For instance, the COMP administration has recently added several persons with more extensive academic backgrounds to assist in this process. Key faculty leaders have been selected by their peers, at least in part because of their exhibited interest in enhancing expertise in curriculum and pedagogy, to play lead roles in this revision. The OSPIE team has been working with COMP to generate multiple sources of data that will be useful in a formal program review process. A number of previously vacant clinical chairs have been staffed, enabling a closer integration of related clinical education demands into the academic process.

The Curriculum Committee would do well to define its role in driving the program review and curriculum revision processes. Among the various elements of this task, there are linkages to be created and used, data to be identified and generated, and calendar-based processes to be specified.

Planning Agenda: Several planning aspects for this item have been addressed in the Planning Agenda for item 1(C), above. In addition, COMP will implement the following:

1. By June 2001, the COMP Curriculum Committee will have designed a systematic plan to review and revise its curriculum. This plan will include the following elements:
   A. The persons responsible for initiating and completing each aspect of the program review process.
   B. The criteria by which the effectiveness of the current program is measured.
   C. The data sources and metrics that will inform the use of these criteria.
   D. A calendar that delineates the frequency of the review process.
   E. Timelines for the implementation of the review process and the resulting revisions.

2. The role of the Director of Academic Research will include responsibility for regular tracking of progress in each of these tasks, keeping the Dean apprised of needed resources, and working with the faculty as needed to facilitate time- and quality-related goals.
Self-Study Area: 2. CURRICULUM REVIEW AND DEVELOPMENT: (B) Is the curriculum built around observable learning objectives and linked with procedures to assess a student’s degree of attainment of those objectives?

Description: Assessment determines learning. Educational wisdom is expressed as “What gets measured gets learned.” From a student’s point of view, the method of the measurement often will drive the nature of the learning. Good curriculum design, therefore, always generates a matched pair: a measurable learning outcome and an appropriate method to measure the achievement of that outcome.

Evaluation: Several initiatives are in process within the various programs of the University to frame instruction around assessable learning outcomes. COMP is preparing for a more extensive engagement with this University strategy by developing outcomes for all courses. For example, the Department of Family Medicine, which is responsible for nine courses interspersed across the MSI and MSII curricula, has identified extensive learning outcomes for each of its courses.

According to a survey of COMP courses published by the OSPIE team in January 2000, faculty members see most instruction as an occasion to impart facts and concepts. This teaching-centered approach is reinforced by a heavy reliance on examinations, which are primarily objective, multiple-choice tests, to assess learning. The Faculty Handbook mandates that exams for systems-based courses rely exclusively on objective (multiple-choice or true/false-type) questions; this standardizes the test process when multiple faculty participate in a course. Personnel from the CAPE Office have continued to coach faculty on innovative instructional strategies on an individual and group basis.

Outcome-based instruction has been enhanced recently through two academic policy changes:

- A grade of D is no longer recognized as a passing grade in a course. Students who score below a C are assigned specific remediation until they can demonstrate outcomes at the C level.
- The five-year program, in which under-performing students were given an extra year to complete their program, has been discontinued. Students who are not making progress with their peers are now assigned to staff at the LEAD office until they perform at an acceptable level.

Planning Agenda:

1. By March 2001, COMP faculty will have received at least six additional hours of professional training in creating learner-centered instructional experiences. This training will address:
   A. Composing course outcomes from the learner’s perspective.
   B. Selecting instructional strategies that engage the learner, with an emphasis on the higher thought processes (as per Bloom’s taxonomy).
   C. Using assessment strategies that are aligned with the desired outcomes.

2. By June 2001, the COMP faculty and administration will have collated all course learning outcomes within a comprehensive set of program outcomes that will define its several areas of intended learning:
   A. Scientific knowledge.
A. Critical thinking and information acquisition/processing skills.
B. Clinical skills, including interpersonal and communication skills.
C. Lifelong learning attitudes and competencies.
D. Ethical and professional values.

With the oversight of the Curriculum Committee, these learning outcomes will be framed in such a manner, and linked to appropriate assessment instruments, so that they can support curriculum review and instructional improvement.

3. The planning team for international rotations will continue its work, leading to the full implementation of this opportunity for international learning and cross-cultural understanding that is critical for the global practice of medicine.

Self-Study Area: 2. CURRICULUM REVIEW AND DEVELOPMENT: (C) How does the curriculum review process provide for consideration of appropriate reference points, such as student performance scores, changes in professional demands, and pedagogical best practice?

Description: Curriculum review requires consideration of issues beyond the walls of the classroom and the campus boundaries. Because COMP is preparing professionals to enter a rapidly-evolving field, it must inquire into the emerging demands of that profession on an ongoing basis. A formal process for such inquiry will then link such findings into revision of curriculum and instruction.

Evaluation: In recent years, COMP has taken specific steps to relate curriculum development more fully to multiple external and/or changing requirements:

1. Data from COMP students’ scores on the COMLEX are analyzed and displayed in a manner that will show performance trends over time, by content areas and by total scores. These data are presented by the COMP administration to the Curriculum Committee to help in identifying strengths and weaknesses in the current program, and to plan for resources required for change.

2. Compared to September 1999 when there were no clinical chairs, the current Dean has hired chairs in pediatrics, geriatrics, family medicine, surgery, and internal medicine. In November 2000, a contract was offered to an Ob/Gyn Chair. These chairs have been drawn into the curriculum process explicitly to reflect more fully current practice in clinical settings as accepted by their subspecialty associations.

3. At its March 2000 retreat, the faculty considered various emerging competencies required by future practitioners. Included were those competencies identified by the Pew Charitable Trusts in its study on health care professionals for the 21st century.

4. The Assistant Dean for Academic Affairs conducted an extensive survey of curricula from several other colleges of osteopathic and allopathic medicine, to determine how they allocate instructional hours by discipline. This study (see table below) has been offered as the basis for COMP’s current revision activities for the basic sciences curriculum.
### Teaching hours in basic science courses—COMP vs. Others by Type

<table>
<thead>
<tr>
<th>Type of College (n=36)</th>
<th>Average Number of Teaching Hours</th>
<th>Difference in Hours Between Type and COMP</th>
<th>% Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMP</td>
<td>892</td>
<td>-158</td>
<td>-21.53</td>
</tr>
<tr>
<td>Allopathic</td>
<td>736.2</td>
<td>-155.8</td>
<td>-21.16</td>
</tr>
<tr>
<td>Private Osteopathic</td>
<td>748.6</td>
<td>-143.4</td>
<td>-19.16</td>
</tr>
<tr>
<td>Public Osteopathic</td>
<td>702.5</td>
<td>-189.5</td>
<td>-26.98</td>
</tr>
<tr>
<td>Total Osteopathic</td>
<td>731.3</td>
<td>-160.7</td>
<td>-21.97</td>
</tr>
<tr>
<td>Total Sample</td>
<td>734</td>
<td>-158</td>
<td>-21.53</td>
</tr>
</tbody>
</table>

5. The Dean’s office and several faculty have proposed the inclusion of greater emphases in such areas as critical thinking, evidence-based medicine, lifelong learning skills, genetics, pathophysiology, library research, and others.

The COMP Curriculum Committee has identified its need to become a recognized forum in which these various sources of information can be weighed, prioritized, and integrated into the four-year curriculum.

**Planning Agenda:**

1. As a part of the program review process identified in item 2(B) above, COMP may draw on the wisdom of the anticipated COMP Advisory Board to bring knowledge on curricular outcomes from multiple reference points. This panel will work to keep the curriculum from becoming isolated from societal and professional expectations.

**Self-Study Area:** 2. CURRICULUM REVIEW AND DEVELOPMENT: (D) To what extent are faculty significantly involved in both the design and implementation of the curriculum process?

**Description:** Since University faculty members are expected to possess both the content knowledge and pedagogical skills to deliver effective instruction, it is primarily their responsibility to attend to curriculum review, revision, and implementation. Faculty do this work in concert with the administration, which assures that the curriculum is aligned with institutional mission and is supported by appropriate resources.

**Evaluation:** Traditionally, COMP faculty have been responsible for instructional delivery and for refining and updating content within individual courses or systems. Faculty members have been somewhat less active in the comprehensive curriculum review and revision processes. Some would attribute this non-involvement to the sense that this was not required of them; others would suggest it was not allowed or supported.

Within the past year, however, there appears to be a significant change in this pattern, as faculty have engaged in the challenge to revise the MSI curriculum in time for the August 2001 class. This revision activity has brought to light a number of challenges that the faculty face in their expanded involvement. These include:

1. Addressing this immediate revision task within the framework of a larger program review process (as described above).
2. Integrating the roles and vision of the clinical faculty with the traditionally primary role of the basic sciences faculty.
3. Working harmoniously with the administration in defining the scope and outcomes of the task.
4. Expanding the revision task to include issues such as authentic assessment, reduced reliance on lectures, integration of complex thinking skills, and documenting student learning.

5. Embedding all of these skills and processes into the operational life of the organization.

6. Linking training needs to the resources of CAPE.

Planning Agenda:

1. To empower and equip faculty for enhanced and ongoing involvement in the curriculum development process, the program review process planned in item 2(A) above will identify the responsibilities and accountabilities of COMP faculty at each step in the process. Faculty designated to carry these responsibilities will be provided with professional training and support as needed for optimal performance in these tasks. Internal resources such as CAPE, LEAD, and the OSPIE team will be utilized to achieve these goals.

Self-Study Area: 2. CURRICULUM REVIEW AND DEVELOPMENT: (E) How is faculty workload evaluated, compared, and linked to the curriculum?

Description: Curriculum planning will include a direct link to faculty time and competency requirements. It will anticipate and quantify changing workload needs as changes in the curriculum are planned.

Evaluation: The Faculty Handbook contains an “Institutional Faculty Workload Policy Statement” (pp. 63-66, published 9/13/99). This policy requires each college to design guidelines and procedures to implement its principles. The COMP Guidelines are published in pages 65 and 66 of the Handbook (see Appendix I.2).

In September 2000, the COMP administration prepared a survey instrument to obtain standardized information on faculty workload for use in implementing this policy (see Appendix IV.9). The form elicits data to evaluate work hours as a percentage of one’s annual workload. It identifies ancillary forms of work (such as committee membership, research, and community service), identifies time allocation to other Western University programs (such as the Pharmacy and PA programs), and tracks changes in workload over a two-year period. These data are forwarded to the department chairs for evaluation and needed adjustments.

The need continues, however, to link faculty workload more closely to factors such as changes in class size, anticipated curriculum revisions, and instructional innovations. Various program budgets need to be adjusted to reflect the distribution of faculty assignments among those various programs.

Planning Agenda:

1. By June 2001, the COMP faculty and administration will have formulated a plan that links curriculum revisions (as anticipated in the Planning Agenda for item 2(A) above) with changes in faculty workload. This plan will centralize the role of the department chairs, working with course directors, to interface faculty workload changes with the resource planning responsibilities of COMP administration.

Self-Study Area: 2. CURRICULUM REVIEW AND DEVELOPMENT: (F) How is curriculum revision linked to institutional budgetary and resource allocation processes?

Description: As with the faculty workload, curriculum revision has implications for other resources, such as workspace, training needs, software and technology, and student
learning resources. All such resources must be anticipated and planned for as a part of the curriculum process.

**Evaluation:** Western University has made ongoing commitments to provide appropriate instructional resources. Lecture rooms represent a high standard in terms of design and instructional technology. An intranet infrastructure and technical support team continue to be developed. Grants for instructional enhancement (such as for the CPE) have been secured and renewed. New offices for clinical chairs have been provided.

There is need, however, for a more intricate linkage between the curriculum planning process and budgetary allocations. For example, the University leadership made a decision to require laptop computers of all entering students, effective with the Fall 2000 cohort, for which the students were charged. There was inadequate prior collaboration with the faculty and related support persons to fully exploit the educational value of this resource; this has led to considerable student disappointment, with a resulting loss of credibility in University leadership. University commitments to continue support for this resource are not yet clear.

Those involved with the current curriculum revision activities have been given some assurances that resources will be in place to support anticipated changes. The process and accountabilities by which this will be assured, however, have not been made explicit.

**Planning Agenda:**

1. The program review and curriculum revision process identified in item 2(A) above will include a specific step that:
   A. Identifies all anticipated resource requirements issuing from curriculum revision.
   B. Quantifies needed resources within a time-referenced pro-forma budget.
   C. Communicates this budget to the appropriate authority.
   D. Makes adoption of the curriculum changes contingent upon allocation of such resources.

2. A policy will be implemented by the University to assure that resource-linked initiatives affecting the instructional processes of COMP and other programs will not be implemented apart from the full participation of the faculty and, wherever appropriate, with student input.

**Self-Study Area:** 2. **CURRICULUM REVIEW AND DEVELOPMENT:** (G)To what extent do the several elements of the curriculum review process reflect an understanding of the principles of continuous quality improvement?

**Description:** Educational continuous quality improvement (CQI) requires that everyone involved in producing COMP’s primary product (student learning) keep asking, “How can we do it better?” It means agreeing on the measures of performance, documenting present levels of performance, setting goals for improved performance, and implementing improvement strategies and assessing their effectiveness. Primarily, educational CQI involves creating a culture of evidence and improvement.

**Evaluation:** Under the leadership of the OSPIE team, the University has begun to incorporate many of the CQI practices as part of University operations. The Institutional Strategic Planning and Resource Advisory Committee has identified key institutional performance indicators and measurement strategies. The Assessment Subcommittee has taken initial steps to set improvement goals and strategies. Large numbers of
effectiveness surveys and listening sessions have been conducted in the past two years as a means to expand thinking about effective performance. OSPIE reports have set these data before decision-making bodies to inform their planning. A number of persons trained in CQI principles are in positions to influence planning within the organization.

It is generally recognized within higher education, however, that it can take years for CQI principles to become embedded within the culture of an organization. The COMP faculty and administration believe that curriculum revision can be an effective doorway through which CQI planning is introduced into the larger organizational structure, since it frames the core activity for COMP.

Planning Agenda:

1. Within the program review and revision process identified in item 2(A) above, specific steps will be identified that will embed the principles of continuous quality improvement within that process. These steps will include:
   A. Identification of COMP’s key instructional performance measures.
   B. Development of an appropriate set of metrics by which to evaluate such performance.
   C. Development of a systematic method to collect and evaluate performance data.
   D. Identification and empowerment of the appropriate persons to set, implement, and evaluate improvement strategies.

Self-Study Area:  3. FACULTY SUPPORT AND DEVELOPMENT: (A To what extent are faculty involved in the planning, budget, curriculum, and personnel development processes of COMP? Have limiting factors on such involvement been addressed?

Description: The development of a truly collegial academic community involves appropriate opportunities for faculty to shape the processes and conditions within which they perform their professional responsibilities.

Evaluation: Faculty participation in the academic processes at COMP has been enhanced through several specific initiatives:

1. Department chairs have been given an expanded scope of responsibility in issues such as faculty performance evaluations and goal setting, department budget allocations, space planning, and committee structures.

2. Faculty carried the primary role in the refinement and implementation of the student course evaluation process. Each course or system is evaluated, and the data are forwarded to the faculty for reflection and improvement. Faculty chairs have been designated as responsible for follow-up in each of these areas. (For examples of evaluative instruments, see Exhibit II.4.)

3. Through the process improvement planning with the admissions team, faculty responsibilities for setting entering student acceptance criteria and for making decisions among COMP applicants have been clarified.

4. With the input and assistance of the Dean, the current curriculum revision process places accountability on the faculty for decisions about content, delivery methods, and assessment.

5. A survey instrument has been implemented to obtain data that will inform faculty workload allocation and compensation decisions. This instrument revealed, for
example, that during Years 1 and 2 of their program, COMP faculty provide the following instructional services for other Western University programs:

<table>
<thead>
<tr>
<th>Program</th>
<th>Physicians Assistant</th>
<th>Physical Therapy</th>
<th>Pharmacy</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lecture</td>
<td>116</td>
<td>220</td>
<td>31</td>
<td>367</td>
</tr>
<tr>
<td>Laboratory</td>
<td>6</td>
<td>316</td>
<td>7</td>
<td>329</td>
</tr>
</tbody>
</table>

Faculty members also proctor exams for first- and second-year students for an average of 173 hours per academic year. They serve as assigned mentors to between 32 and 60 students per year, with between eight and 15 students assigned from each class. Faculty serve on an average of 3.75 committees; a third of the basic sciences faculty serve on six or more committees.

6. A decision grid is being designed within COMP that will (among other things) clarify the roles and responsibilities of faculty in making decisions (see Appendix IV.10).

7. At their November 16, 2000 meeting, COMP faculty decided to form their own, program-specific faculty forum. They elected a chair who will prepare the agenda for subsequent meetings, interact with the COMP administrative team on faculty issues, and perform other duties.

8. Beginning in November 2000, faculty have led the process to plan for office space utilization and to anticipate funding and other resources needed for initiating research.

It should be noted that the 1995 WASC self-study and evaluation requested that COMP/Western University address issues related to significant non-involvement of faculty in the academic processes. At that time, the issue was seen as more systemic than operational. There are evidences that previous collaboration between COMP faculty and administration to address this matter has not been adequate. These evidences include the following:

1. At listening sessions conducted in preparation for this self-study, faculty expressed the sense that their participation has been ignored or overridden on several occasions. This contributes to a sense that professionalism and collegiality are either not prized or understood within the culture.

2. Some faculty expressed that they are expected to implement hastily conceived or academically questionable initiatives without a due process forum to address the broader implications and training needs associated with these initiatives. The mandate to require laptop computers of MSIs, and the requirement to reallocate instructional hours in the MSI and MSII curricula, are cited as cases in point.

3. Well-defined lines of authority and accountability—expressed within job descriptions, performance evaluations, and operational decisions—are seen as lacking within some aspects of the COMP structure.

4. Faculty are looking for more effective strategies to build an academic community. These strategies would lead to the creation of a culture of trust and collegiality among faculty and with the administration.

5. Changing or expanding faculty workloads are frequently not matched with related resources. For example, as faculty move into levels of research appropriate for a
university, such initiatives are not always met with needed physical space, time, equipment, or personnel to support such research.

Planning Agenda:

1. By February 2001, COMP will conclude a series of sessions involving its faculty and administration, in which key issues related to faculty non-involvement are identified and addressed through appropriate planning. The central purpose of this planning will be the creation of effective academic processes and structures. This planning will deal with both operations and culture at COMP.

2. A specific aspect of the planning identified in item 1 above will be to create linkages between faculty responsibilities and institutional resource allocation and planning.

3. A faculty development curriculum will be developed to build skills in the following areas: a) Assessment innovation in classrooms, labs, and clinical settings; b) Curriculum development philosophies and skills; c) Utilization of instructional technologies; d) Enhancement of professionalism; e) Improvement in communication; and f) Reestablishment of peer evaluations among faculty.

Self-Study Area: 3. FACULTY SUPPORT AND DEVELOPMENT: (B)Have effective processes for faculty performance appraisal been developed and implemented? To what extent have faculty been involved in their design, use, and evaluation? How is faculty performance appraisal linked to student learning?

Description: Performance appraisals define and encourage professional behaviors that are aligned with the mission of the organization. When linked with a means to acknowledge and reward excellent performance, they can drive quality in an organization. Those whose performance is affected by an appraisal should be involved in its design and in the development of its usage protocols.

Evaluation: Several processes are in place to support faculty performance appraisals. These include the following:

1. As described above, faculty workload is being evaluated and assigned with much greater precision, based on more accurate data about the extent and diversity of various tasks and the different University programs they may serve.

2. The basic sciences chairs have engaged their faculty in an appraisal process that includes direct classroom observation, self-reflection, and student evaluations. A written and oral appraisal is then shared with faculty on an individual basis.

3. The Department of Family Medicine has designed an evaluation instrument that is aligned with department mission and values for use in its faculty evaluation process.

4. Specific training strategies are being designed to raise the awareness of COMP on “best practice” approaches to faculty performance appraisals, including the standardization of such terms as “formative” and “summative” assessment.

There are, however, indicators for improvement in the performance appraisal processes.

1. A coherent system for faculty performance appraisal that balances diverse sources of input, and expresses a commitment to their growth and development, has yet to be designed and implemented. This need is reinforced by the perception that excellent work is seldom defined, acknowledged, or rewarded. Poor performance is perceived as a basis for punitive action rather than for diagnosis and development.
2. Even though the current Dean has expressed a commitment to protect faculty from inappropriate student evaluative comments, some long-standing attitudes and memories of historical events inhibit rapid change. As a result, some faculty are hesitant to have students’ course evaluations reported to the deans, for fear such information will be used for summative rather than formative purposes.

3. There is little (if any) link between student learning and faculty performance appraisals. Measurable data on student learning are neither standardized nor part of the internal vocabulary of COMP. Some faculty are apprehensive that student appraisals may have more to do with instructor popularity than with the degree of students’ engagement in the learning process. The need for more explicitly crafted instruments and processes is evident.

Planning Agenda:

1. By December 2000, the COMP faculty and administration will design a comprehensive faculty performance appraisal system that includes the following elements:

   A. The several purposes of the appraisal, along with how various instruments and data sources will be used for each designated purpose, and the role of post-tenure formative appraisal.

   B. The protocols that define such appraisal, such as frequency of administration, privacy of data, potential outcomes from the assessment, key persons involved, the nature of the data to be obtained, opportunities for faculty involvement in the design, and validation of data.

   C. The various data sources that will be taken into account, such as student evaluations of the learning process, self-reflection, peer appraisal, committee involvement, total workload, chair or dean observations, professional and research responsibilities, achievement of personal and department goals, and other factors. The plan will address the weighting of these sources when their data are used to support decisions affecting awards or advancement. It will also indicate needed training for optimal use of the appraisal system.

   D. The various types of institutional awards, incentives, and acknowledgements that are most appropriately linked to the appraisal system.

   E. The methods and criteria that will be used to conduct systematic performance appraisals on the Dean and other administrative staff within COMP.

Self-Study Area: 3. FACULTY SUPPORT AND DEVELOPMENT: (C)To what extent does the COMP faculty reflect gender and ethnic diversity? What strategies are in place for increasing such diversity?

Description: COMP has long affirmed that an educational experience is enriched and enhanced when the gender and ethnic diversity of the faculty reflects that of the students they teach.

Evaluation: According to data submitted as part of Western University’s IPEDS report, the ethnic diversity of the COMP faculty approximates that of its student population.
Of the four clinical chairs that have been retained by COMP, one is a female. The gender diversity of the COMP basic sciences faculty is more problematic. Of the 20 faculty on the basic sciences instructional roster, two females are listed. Some have expressed that this reflects the pool of available candidates in basic sciences. Others have reported that in past years female faculty members have not been treated with respect, nor have they anticipated equal opportunities for advancement in salary or other professional opportunities.

Concerns about gender and ethnic diversity have been moved to the University level for institution-wide planning. COMP faculty members anticipate benefits from this planning.

Planning Agenda:

1. The COMP faculty and administration will work with the University task force to develop and adopt, by June 2001, a specific plan to achieve greater diversity in all COMP personnel categories. This plan will address minority recruiting for available positions, as well as specific training needed to enhance COMP’s culture of diversity and inclusiveness.

Self-Study Area: 4. STUDENT SUPPORT: (A) To what extent has COMP evaluated the various factors contributing to student retention and achievement of goals, linking such evaluation to planning?

Description: The purpose of the student services function of a university is to bring vision, purpose, and planning to the broad range of co-curricular experiences that contribute to students’ successful integration into the academic community and the eventual achievement of their personal and professional goals. Student affairs professionals use extensive information about the needs and challenges of their students to inform their planning.

Evaluation: While student affairs has traditionally been the responsibility of a University-based central office, COMP has recently hired its own student affairs officer. The purpose for this organizational change was to provide a qualified professional to support the distinct needs of COMP students.

The job description for the Director of COMP Student Services lists 27 areas of responsibility and envisions a significant scope of effective involvement in assuring student success. The Director reports that she is responding to approximately 10 or 12 student contacts per day, even though her office is newly created. Students present issues such as requests for leaves of absence, complaints about curriculum and
instruction, board exam preparation, rotations issues, club and professional association planning needs, and personal issues that can inhibit academic success.

The OSPIE team has conducted student satisfaction surveys and has begun to create baseline data of the type that typically informs student services planning. Through the years, Western University has actively supported a very broad range of student clubs and professional associations; the ones that are distinctive to COMP students are being brought under the supervision of the Director of COMP Student Services.

There appears, however, to be some lack of broad understanding within the COMP and University structures regarding the scope and vision for this office, as measured by best practices within higher education. The Director’s job description anticipates alliances with committees and groups that are yet to be activated. Access to decisions and information flow that are representative for persons in this position is still being developed.

The Director has attended several professional conferences, yet she will need additional support to fulfill expectations associated with her role. Though she serves as an ex-officio member of the student awards committee, her influence with other entities that deal with student issues is not fully actualized.

Planning Agenda:
1. By January 2001, the COMP administrative team will have developed and refined a statement of the vision and role of the Director of COMP Student Services that is responsive to the needs of COMP students and represents prevailing practice within professional higher education. In preparation for this plan, the Director will engage as needed with professional associations, journals, and conferences, and will participate more with internal planning.

Self-Study Area: 4. STUDENT SUPPORT: (B) What factors were considered in developing a comprehensive plan for student services? What are the goals for such a plan and the key measures for success?

Description: Student affairs professionals increasingly engage in data-supported planning, based on specific objectives and measurable outcomes. This strategy keeps student affairs efforts linked to actual student needs, and permits evaluation of the effectiveness of various programs and interventions.

Evaluation: The appointment of a COMP-based student affairs professional makes this type of planning a feasible goal. General data are available regarding COMP student attrition and the number of students needing to repeat courses. Results from the Admitted Student Survey and exit survey have been important in identifying issues that are critical to COMP students. The Director has prepared an informational brochure for distribution to entering students that identifies the types of assistance available from her office.

Little has been done to generate specific student needs data and link them to the tasks of the Director of COMP Student Affairs. The Director is not informed consistently about at-risk or underprepared students, nor is she involved directly in tracking their progress. Information obtained from student satisfaction surveys is not parsed into accountabilities for this office. Performance goals and measures have yet to be identified.
Planning Agenda:

1. As an aspect of the planning identified in item (A) above, the Director of COMP Student Affairs will identify core performance goals and indicators of achievement related to this office. These indicators will be linked as needed to data sources from the University as a whole. The Plan will also indicate the frequency with which certain indicators will be evaluated.

2. Mechanisms will be designed and implemented by which students in academic difficulty are identified at the earliest possible stage, their needs diagnosed, supportive action prescribed, and their progress tracked.

Academic Center for Excellence in the Health Sciences (ACEHS) & OPTI-West (Osteopathic Post-Graduate Training Institution)

The Academic Center for Excellence in the Health Sciences continues to evolve as a cooperative venture between Western University and the San Bernardino County Board of Supervisors. ACEHS is dedicated to promoting excellence in health professions education, with a strong emphasis on primary care, establishing and maintaining postdoctoral training programs, ensuring that medical school graduates continually upgrade their skills and knowledge, engaging in health sciences research, promoting access to quality health care services for area residents, and working to make health professions education as cost effective as possible. During 1999-2000, the Arrowhead Regional Medical Center officially opened its doors as a major training facility for Western University.

The ACEHS was expanded in the past year to include Riverside County General Regional Medical Center and Loma Linda University. A search for the executive director has resulted in the selection of Dr. John Hurtado.

The current, most pressing issue is a pending grant application to the National Institutes of Health to fund a community and rural access program for the two-county area. The two counties have rural and underserved areas, and encompass 44,000 square miles. Both have new state-of-the-art tertiary care public hospitals, and house staff and students on rotations to meet the needs of the medically underserved. In addition, ACEHS is laying the groundwork for an Inland Empire community outreach program, which includes house staff/student teaching at middle/high schools to foster interest in health-related careers and lecture on wellness/disease prevention, substance abuse, and teen pregnancy and parenting.

The Mission of OPTI-West is to provide for the establishment of standardized osteopathic postdoctoral training through a collaborative arrangement between Western University of Health Sciences/College of Osteopathic Medicine of the Pacific and Arrowhead Regional Medical Center (ARMC) (founding partner), as well as with other health care provider institutions capable of quality postdoctoral training and willing to commit the necessary resources to such an undertaking. Further, OPTI-West resolves to meet all criteria and standards for osteopathic postdoctoral training, as established by the American Osteopathic Association and its Council on Postdoctoral Training (COPT), and will undertake to enhance the number and quality of member osteopathic postdoctoral programs in the western United States, with the goal of providing AOA-approved internship and residency training for osteopathic graduates. (See Exhibit IV.9 for the OPTI-West Bylaws.)
A greater variety and number of quality college-affiliated osteopathic postdoctoral programs have been approved in the past 11 months than in any prior year in the history of the University. OPTI-West has benefited from the addition of the following postdoctoral programs:

1. Arrowhead Regional Medical Center
   - 3 Neurosurgery
   - 4 Orthopedics
   - 2 Obstetrics/Gynecology (in addition to the 8 existing slots)
2. Riverside General Regional Medical Center
   - 9 Anesthesiology
3. Sunnyside, Washington
   - 4 Rotating Internships
   Application will be submitted this year for Family Practice program with 8 slots
4. University of New Mexico
   - 4 Family Practice Residencies
   - 3 Internal Medicine

(See table below for list of current postdoctoral training programs.)

**Planning goals for 2000-2001:**

- To continue growth in the number of OPTI-West postdoctoral training slots.
- To increase the Sunnyside program to include four second-year and four third-year family practice residents.
- To obtain grants to fund the ACEHS with community access.
- To begin 2000-2001 with an ACEHS Executive Director.
- To begin community outreach to schools in ACEHS service area.
- To provide computer technology for OPTI-West affiliates and the University from the existing grant from the Pacific Hospital of Long Beach Foundation.
  - Apply to the Pacific Hospital of Long Beach Foundation for a second round of funding.
- To begin regular professional development on site at OPTI affiliates (see CAPE).
  - Curricular design
  - OPP/OMT instruction
  - Faculty development
- To continue to visit OPTI-West affiliates on a regular basis.
The College of Veterinary Medicine (CVM) at Western University was established by a vote of the Board of Trustees in August 1998, and the founding Dean, Shirley D. Johnston, DVM, PhD, was hired in October 1998. The programmatic plan calls for a four-year curriculum with 100 students per class, with the charter class matriculating in the fall of 2002 or 2003, pending achievement of pre-accreditation status (a Letter of Reasonable Assurance) from the accrediting agency, the Council on Education of the American Veterinary Medical Association (AVMA-COE). Founding principles of the college include commitment to student-centered learning, to a reverence for life philosophy, and to strategic alliances with stakeholder partners. The first two years of the planned curriculum will be developed around a Problem-Based Learning pedagogy, and around acquisition of clinical skills in a companion animal clinic and at the College of Agriculture, California Polytechnic University, Pomona. The third year will provide core curriculum learning in veterinary medicine in companion animals, horses, food animals, laboratory animals, and zoo animals in regional veterinary practices and other biomedical institutions, with oversight by campus-based faculty. The fourth year will be a tracking year by species or discipline in specialty practices in the region, or in national or international veterinary opportunities. The main goal of the CVM in the next year is to secure a Letter of Reasonable Assurance from AVMA-COE that will permit generation of a confirmed timeline for recruitment of CVM faculty and the charter class in a nontraditional and innovative program consistent with the interdisciplinary and humanistic values of Western University. A second, and equally important, goal is the generation of a solid financial base on which to open the college.

The College’s strengths and opportunities for improvement in 2000-2001 are listed in the following table.

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Opportunities for Improvement</th>
</tr>
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<tbody>
<tr>
<td>The tremendous progress made in getting AVMA approval of nine of the 11 essentials, including the finance and research essentials, plans for which generated substantial opposition.</td>
<td>⇒ The challenge to accomplish the first step in accreditation with a nontraditional program.</td>
</tr>
<tr>
<td>The small, lean, but very productive faculty and consultants group, capable of influencing major segments of the profession.</td>
<td>⇒ The need for substantial capital and operating funds to implement the program.</td>
</tr>
<tr>
<td>The good support from regional veterinarians, the California VMA, and the Southern California VMA.</td>
<td>⇒ Concern within the veterinary profession about the adverse effects of litigation.</td>
</tr>
</tbody>
</table>
Planning Goals for 1999-2000 and Outcomes

Securing of Reasonable Assurance status from the AVMA-COE, to include:

1. **Expansion of the Self-Study document by mid-October 1999:**
   
   **Outcome:**
   A three-volume, 946-page revised self-study document was written by the CVM faculty and submitted to the AVMA-COE Executive Committee on October 15, 1999 (see Exhibit F.1).

2. **Advancement of physical plant expansion, especially primary care clinic and sample PBL room.**
   
   **Outcomes:**
   Plans for the Primary Care Clinic on Western University property (at Jefferson and Park in Pomona) were developed by Ms. Janice Yip, Kal Kan Project Engineer, with input from Western University-CVM faculty. The building of this facility is on hold until we receive a Letter of Reasonable Assurance from AVMA-COE, after which time we will enter negotiation with Kal Kan on funding this building and an adjacent feline research building.

   A sample PBL room was constructed by Western University Facilities and was equipped with skeleton models and textbooks for the February 2000 site visit. The appearance of this room drew accolades from the COE team. A demonstration psychomotor skills laboratory was assembled for the 2000 AVMA-COE Site Team in Eby Clinic by Dr. Lara Rasmussen, with models donated/purchased for the skills program.

3. **Expansion of the safety and effectiveness of the California Polytechnic University, Pomona, teaching site.**
   
   **Outcomes:**
   Dr. Borje K. Gustafsson, Dean emeritus of the College of Veterinary Medicine at Washington State University, was retained as a consultant to evaluate the safety and effectiveness of the Cal Poly Pomona teaching site, which he did in 1999 with assistance from the Cal Poly faculty and administration. His resulting report, with input from Dean Bidlack (Cal Poly), was included in the 1999 self-study document, and the COE approved the Cal Poly plan in that document.

   In April and May of 2000, with the assistance of California State Senator James Brulte and his staff, Western University and Cal Poly Pomona put in a special request for an $11 million building program on the Cal Poly campus, in support of large animal necropsy education and bovine surgery training of students from both institutions. Two million dollars was appropriated for planning of this building in the June 2000 California state budget, with architectural and impact plans to be submitted to the State Department of Finance in accordance with capital funding policy.

4. **Strategic hires of faculty and staff to expand the program prior to Fall 1999, and development of the preclinical faculty recruitment plan for recruiting in the spring of 2000.**
   
   **Outcome:**
   CVM hires this year included Robert Ashley Robinson, DVM, MPH, PhD (temporary Associate Dean for Preclinical Programs, 6 months); Lara M. Rasmussen, DVM, DACVS (full-time Assistant Professor of Surgery); Robert V.
Mason, DVM (20% time clinical site recruiter); and Dr. Cal Kobluk, DVM, DVSc (20% time, Summer 1999, large animal clinical site recruiter). These faculty, and consultants Dr. Billy Hooper, Dr. Borje Gustafsson and Dr. Larry Tilley, expanded the Western University-CVM plan for presentation to the COE in 1999-2000. The preclinical faculty recruitment plan was put on hold until after receipt of Reasonable Assurance.

5. Development of library collection plan, acquisition of donated collections, and development of website for Fall 1999 demonstration of instructional technology capability.
Outcome:
As of May 12, 2000, a veterinary serials collection of 146 separate journals had been accumulated through gifts from individuals and other veterinary medical libraries in the United States and Canada. Complete collections back to the 1940s or from the beginning of the publication of the journal have been developed, and may be viewed on the CVM website under the Library hyperlink. The serials collection, if purchased new at time of publication, would cost about $60,000, and many of the older issues are not currently available for purchase from the publisher.

6. Development of letters of interest or memoranda of understanding with third- and fourth-year practice sites.
Outcome:
In 1999-2000, Drs. Gary Johnston, Robert Mason, and Cal Kobluk visited numerous veterinary practices in the greater Los Angeles area to inform them of the Western University curriculum and recruit them as clinical site coordinators in our program. To date, 37 practices have signed memoranda of understanding and have provided us with practice information (facilities, caseload, etc.); these are being added to the Western University website under the Curriculum hyperlink.

7. Continued expansion of the PBL curriculum, to include faculty training plans and needed resources.
Outcome:
Expansion and refinement of the PBL curriculum included the development of faculty training plans that were included in our 1999 self-study document, written by Dr. Ashley Robinson following trips he made to observe the PBL programs at Mississippi State University, Cornell University, and Tufts University.

8. Coordination of a successful site visit by AVMA-COE in November or December 1999.
Outcome:
The site visit originally scheduled for December 1999 by AVMA-COE was canceled by the COE Executive Committee following receipt of the self-study document in October 1999. Following Western University’s retaining counsel, threat of litigation, and attendance at a planning meeting in Schaumburg on December 21, 1999, the COE reversed its decision and scheduled a site visit for February 9-13, 2000. This visit was coordinated successfully by the CVM, and resulted in subsequent (February 29, 2000) COE approval of 9 of the 11 essentials, with what Western University perceives as minor criticisms in the last 2 essentials, those of Physical Facilities (#3) and Curriculum (#9) (see Exhibit F.1).
Update:
On May 3, 2000, Western University-CVM presented an appeal of the 1999 and 2000 denials of a Letter of Reasonable Assurance to an AVMA appeal panel in Schaumburg, Illinois. The appeal panel found that AVMA had violated its own procedures and had failed to consider all of the evidence in the 1999 and 2000 denials. During Summer 2000, in coordination with AVMA-COE staff and counsel, the CVM prepared an 18-page document containing proposals to address criticisms of the last two essentials (such as the addition of a molecular and cell biology course, information on a necropsy building at Cal Poly Pomona, and proposed changes in the third-year equine rotations). These proposals were provided to the COE prior to its meeting October 1-3, 2000, as was the outcome of a May 3 appeal. Unfortunately, at that meeting, the COE declined to reverse its previous decisions on essentials 3 and 9, and declined to consider the Western University proposal to address perceived deficiencies, suggesting instead that Western University reapply and begin the process anew next year. Following review of that recommendation by Western University administrators, counsel, and national consultants in veterinary education, Western University served AVMA with an antitrust lawsuit on October 13, 2000, contending that AVMA is unfairly restraining trade in the provision of veterinary medical education.

9. Securing of $300,000 in external support (philanthropic, grants) in support of the program.
Outcome:
See Exhibit IV.11 for a listing of philanthropic support obtained in support of the College of Veterinary Medicine during the 1999-2000 academic year.

A. Securing political support in veterinary medicine nationally to enhance the success of the accreditation process (bringing influential partners to campus, coordinating a think tank at the annual AVMA meeting in July).
Outcome:
On July 12, 1999, a “think tank” working lunch was convened at the New Orleans Hilton Riverside Hotel, hosted by Dr. Shirley Johnston and co-chaired by Drs. Billy Hooper and Ashley Robinson, to discuss the Western University plan and strategize on the achievement of AVMA accreditation. Attendees (see Exhibit IV.12) learned about the Western University plan and assisted us in generating a new self-study document for the October 1999 submission.

B. Providing educational programs in the State of California and across the nation to educate the profession on the unique aspects and merits of our plan.
Outcomes:
See Exhibit IV.13 for a listing of programs.

See Appendix IV.14 for a timeline (1998-2000) for the College.

Planning Goals for Academic Year 2000-2001

➢ Securing of Reasonable Assurance status from the AVMA-COE, to include:
• Provision of a letter of compromise on plans for Essential 3 (Physical Facilities) and 9 (Curriculum) by Dean Johnston to AVMA-COE by mid-October, followed by a presentation by Dr. Johnston and a positive vote of the COE to grant a Letter of Reasonable Assurance.

• Advancement of physical plant expansion, especially Veterinary Sciences Center, Primary Care Clinic, Psychomotor Skills Laboratory, and Cal Poly Pomona necropsy floor using funds raised in support of the college following receipt of a Letter of Reasonable Assurance.

• Continued development of curriculum and library collection, acquisition of donated collections, and continued development of website as partnerships advance, relying predominantly on philanthropy in 2000-2001.

➢ Securing of philanthropic contributions to the capital plan and operating budget of the College of Veterinary Medicine.

➢ Provision of educational programs in the State of California and across the nation to educate the profession and the public on the unique aspects and merits of our plan; this will include continued publication (and e-mail distribution) of the Western University-CVM newsletter, designed to keep communication open with our partners in veterinary practice.

➢ Development of a Veterinary Continuing Education Center at Western University.

See Exhibit F.1 for College of Veterinary Medicine’s Strategic Plan.
Standard V – Faculty and Staff

The Faculty Handbook describes the processes and structures that enable the faculty to carry out their responsibilities as enumerated by this standard. Development and change of the curriculum is the responsibility of the faculty. Any major alterations of curriculum originate in the curriculum committees of the colleges and programs, which have broad faculty, as well as student, representation. The committees ensure that there is coordination among all disciplines in the teaching programs. Each committee is responsible for recommending the curriculum of the program to the faculty, for their vote, and then to the appropriate dean. As indicated, each of Western University’s separate professional programs is accredited, with COMP and the College of Graduate Nursing undergoing professional accreditation site visits during or just after the WASC visit (AOA and CCNE, respectively).

The Faculty Handbook provides procedures for faculty recruitment, evaluation, retention, and promotion, and improved grievance policies and procedures. In addition, a workload policy has been developed and is reviewed annually in each college. Faculty in each college collaborate with their respective deans or department chair to determine their distribution of effort in terms of teaching, research, service, clinical work, and administration. Faculty goals are developed annually at the same time, so that evaluation can occur.

In the report of the 1995 site visit, it was noted that “the Faculty Council and the Executive Vice President of Academic Affairs are having difficulty communicating and having effective dialogue.” An attempt to resolve this impasse evoked an administrative change with a new Executive Vice President of Academic Affairs in office since July 1999.

Faculty development, which had been an institutional concern over a number of years, has been addressed (see section on Center for Academic and Professional Enhancement), and a commitment has been made to continue to enhance faculty development activities. In addition to CAPE’s efforts to assist faculty, the Office of Strategic Planning and Institutional Effectiveness assists with the development and analysis of evaluations to enhance teaching, and the Learning Enhancement and Academic Development Office and the Center for Disabilities in the Health Professions assist faculty in better understanding the learning needs of students. Faculty in all programs continue to receive funding to attend professional conferences and workshops. In addition, the colleges bring in guest speakers and offer workshops to enhance faculty development. The Office of Grants, Research, and Contract Administration assists faculty in developing research proposals and in seeking funding sources. The addition of an epidemiologist and a biostatistician to the CAPE staff have assisted faculty in their research endeavors.

Student-to-faculty ratios are generally in the 20:1 range. The lowest ratio, approximately 3:1, occurs within the MSHPE program. This is consistent with the level of intensity and close interaction with students demanded by the curriculum. It should be noted that the faculty members of this program also have administrative assignments within the University.

Full-time faculty are vested with the responsibility to ensure the integrity and implementation of the curriculum, oversee and implement the curriculum, and develop
academic policies and ensure compliance with them, among other responsibilities (see Faculty Handbook, Appendix I.2). Approximately 28% of the full-time faculty hold the rank of Professor, 15% Associate Professor, and 57% hold the rank of Assistant Professor or Instructor (see Part D, Demographic Information). Explicit procedures and criteria for appointment, retention, evaluation, advancement, termination, and due process are published, accessible, and reviewed periodically (see Faculty Handbook, I.2, pp. 36-35). Appropriate policies and procedures relevant to faculty (full- and part-time), assurance of academic freedom, details of terms of employment, and faculty responsibilities relevant to University operations and academic programs are published in the faculty and employee handbooks and are revised regularly.

Western University employs a diverse faculty with substantial and continuing commitment to the institution, sufficient in number and professional qualifications to achieve its educational objectives, to establish and oversee academic policies, and to ensure the integrity and continuity of its academic programs. Currently, the University employs 42 full-time, tenure-eligible faculty members distributed over five colleges. In addition, the University employs 36 individuals in part-time faculty capacities to ensure appropriate education of students in specialized subject matters that, while important, are not required extensively enough for the entry-level health professions curriculum to warrant full-time faculty member coverage. Above and beyond this level of staffing, the majority of the clinical education provided to our students is derived from the part-time and volunteer efforts of physicians, pharmacists, nurse practitioners, physician assistants, physical therapists, veterinarians, and ancillary health care professionals at affiliated clinical training sites (hospitals, community clinics, and private practices).

Faculty Work

The ultimate goal of the Western University policy for faculty work is to provide flexibility to achieve different missions at all levels of the University effectively. This is achieved by providing for ranges of appropriate instructional commitment at the program level, based on faculty strengths and student demand. Academic units may have different, but equally valuable missions, and faculty within academic units may make different, but equally valuable contributions to those missions (Faculty Handbook, Appendix I.2, pp. 63-65).

Guiding Principles:

- A quality learning environment is a primary responsibility of the faculty.
- Academic mission should determine the relative balance between teaching, research/scholarship, patient care, and service.
- The academic unit is the logical unit to hold accountable for work assignments and for seeing that its instructional and institutional needs are met.
- Because academic units have diverse missions, there should be flexibility in delivering instruction among units. Units with different missions should have different instructional expectations.
- Within academic units, there should be flexibility in the teaching assignments for individual faculty. Work assignments should be complementary and serve the strengths and needs of individual faculty and the unit. In a given academic year, some faculty may devote more effort to teaching, while others may devote greater effort to research/scholarly activity, patient care, and service.
Each academic unit should develop a work policy that is consistent with that of the University. There may be ranges in teaching, research, patient care, and service responsibilities of faculty, and the work policy should provide for differentiation of faculty roles. Work policies should establish expectations that are fair and equitable.

In accommodating variations in individual faculty responsibilities, academic units must provide a full complement of courses and related learning activities in accordance with their mission and student demand.

The faculty reward system should reflect unit and institutional values.

Distribution of faculty effort activities include:

- Statements of work expectations to ensure a balance of faculty time and effort spent in teaching, research, and service. Achievement of this balance for an academic unit (through assignment of individual faculty) is the responsibility of the program chair or dean.
- Statements of the types and amounts of instruction needed to accomplish the teaching mission of the unit. This includes an analysis of the likely number and types of courses necessary to satisfy demand.
- Statements of overall expectations for research and creative activity of the faculty.
- Statements of overall patient care contributions expected of the faculty, as relevant.
- Statements of overall service contributions expected of the faculty.

Faculty Salaries

A compensation study was undertaken during 1999-2000 to address faculty salary issues. Results were utilized, in part, to amend salaries for the 2000-2001 budget year. A report of the results was disseminated to faculty in December 2000 (see Appendix V.2).

The Faculty Senate

The Faculty Senate is the forum for faculty members to discuss issues of importance as a University faculty. (See Faculty Handbook for specific details about the Faculty Senate.) In 1999-2000, the Faculty Senate set out to open lines of communication further between faculty and administration. According to Burton Routman, DO, Chair of the Faculty Senate during 1999-2000, this goal has been accomplished. Meetings were well attended by members of the faculty and the administration, and all issues/problems were discussed in open forums and solutions were implemented. Some of the most salient issues discussed were faculty salaries, access to campus facilities after hours, Faculty Handbook revisions, and faculty workload issues. Throughout this self-study, the work of the Faculty Senate will become self-evident.

Principles of Academic Integrity

Western University is adopting principles of academic integrity to promote professionalism and integrity among its constituents. These principles² include the following:

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² These “Ten Principles” first appeared as “Faculty and Academic Integrity” in the Summer 1997 issue of Synthesis: Law and Policy in Higher Educations, Gary Pavela, editor, and have been adapted.
• Affirming the importance of academic integrity—Western University is dedicated to the pursuit of truth. Western University faculty members affirm that the pursuit of truth is grounded in certain core values, including diligence, civility, honesty, and professionalism.

• Fostering a love of learning—Western University’s commitment to academic integrity is reinforced by our high academic standards. We believe that students thrive in an atmosphere in which academic work is challenging, relevant, useful, and fair.

• Treating students as ends in themselves—Western University faculty members treat their students as ends in themselves, deserving individual attention and consideration. Students reciprocate by respecting the best values of their teachers, including a commitment to academic integrity and professionalism.

• Fostering an environment of trust in the classroom—Most students value an environment that is free of arbitrary rules and trivial assignments, in which trust is earned and given. Western University faculty members provide such an environment in which students thrive.

• Encouraging student responsibility for learning and academic integrity—With proper guidance, Western University students are given significant responsibility to help promote and protect the highest standards. Students want to work in communities in which competition is fair, integrity is respected, and academic honesty is the norm.

• Clarifying expectations for students—Western University faculty members have primary responsibility for designing and cultivating the educational environment and experience for students. They clarify their expectations in advance and reinforce them in class.

• Developing fair and relevant forms of assessment—Students expect their academic work to be assessed fairly and fully. Western University faculty members use and continually revise forms of assessment that require active and creative thought, and promote learning opportunities for students.

• Reducing opportunities to engage in academic dishonesty—Western University faculty ensure that students are not tempted or induced to engage in acts of academic dishonesty by ambiguous policies, undefined or unrealistic standards for collaboration, inadequate classroom management, or poor examination security.

• Challenging academic dishonesty when it occurs—Western University faculty provide examples for students as students observe how faculty members behave and what values they embrace. Faculty members promote the positive core values of academic life, and community in general.
• Helping define and support campuswide academic integrity standards—
Although faculty members should be the primary role models for
academic integrity, responsibility for defining, promoting, and protecting
academic integrity must be a community-wide concern to affirm the
shared values that make Western University a true community.

Each college and program has policies and procedures regarding professionalism,
integrity, and honesty.

**Performance Evaluation**

There is an institutional policy for regular and systematic evaluation of faculty and
staff. Faculty and staff are evaluated annually. For faculty, these evaluations are a
shared responsibility of faculty (promotion and tenure) and administration. Evaluation of
professional staff and hourly/support personnel is coordinated through the Human
Resources Department, using a standardized rating instrument that is completed by the
individual’s immediate supervisor (see Appendix V.3).

Formal faculty evaluations are conducted through the activities of faculty
evaluation committees (or equivalents) of the various colleges. At the outset of each
academic year, each faculty member is required to establish goals/outcomes for the
upcoming year; a projected distribution of effort in the three areas of teaching,
scholarship, and service; and evaluative criteria to be used to measure accomplishment
of goals and objectives. These materials are reviewed by appropriate academic
administrators of the college, and a mutual agreement on goals and objectives is
reached.

At the end of the academic year, these goals and accomplishments are reviewed
by the faculty evaluation committees (in CAHP) and/or administrators (in COMP, CGN,
and COP), and a summary evaluation (which includes input from student course and
instructor evaluations, peer reviews of teaching and service, and document reviews of
course and scholarly materials) is prepared. In the case of reviews for tenure and
promotion in the College of Pharmacy, a separate faculty committee conducts these
reviews (in a manner similar to that utilized by COMP and CAHP), and forwards
recommendations to the appropriate academic dean. The outcomes of all review
processes are shared with faculty members, with improvement as the goal.

Academic administrators and professional support personnel are now required to
complete a similar goal-setting document as is used for faculty (see Appendix V.4).
However, review of accomplishments is made by the supervisor/department head of the
appropriate administrative unit. This protocol was tested during the 1999-2000
academic year. Further implementation occurred in the 2000-2001 academic year.

As stated previously, the President of the University was evaluated by the
members of the Cabinet and his immediate staff during the summer and fall of 2000. He
met with each individual to discuss his/her evaluations and determine how to turn
constructive criticism into a plan for action. This process will be repeated annually. In
addition, the Board of Trustees reviews the President annually.
The Center for Academic and Professional Enhancement (CAPE) assists faculty in their professional development needs.

**Center for Academic and Professional Enhancement (CAPE)**

**Mission and Description**

Striving for excellence is a core value of Western University. To support this commitment, the Center for Academic and Professional Enhancement (CAPE), formerly the Center for Faculty Development, has been established to create, support, and recognize a community of learners—students, faculty, staff, and administrators. Specifically, the Center assesses learner needs (both on campus and at affiliated sites), targets group and individual learning activities, evaluates the effectiveness of its programs and activities, and formally recognizes individual completion and excellence.

CAPE is an interdisciplinary center headed by a Director, who reports to the Vice President of Strategic Planning and Institutional Effectiveness. The Center is tied closely to the Office of Strategic Planning and Institutional Effectiveness. It identifies, plans, coordinates, delivers, and evaluates all academic and professional enhancement efforts on behalf of the University, both on campus and at its affiliated sites (e.g., Academic Center for Excellence in the Health Sciences, OPTI-West).

Resources currently available to the CAPE come from various sources:

- **Personnel directly responsible to CAPE**—T. Levitan (Director of CAPE), D. Hacker (Director of LEAD), J. Kellogg, A. Olschwang (organizational effectiveness and training expert; 75% time), Maja Altarac (biostatistician/epidemiologist; 100% time: 50% to COMP research project/50% to CAPE programs and activities), Ryan Quist (biostatistician/epidemiologist; 50% time), and secretarial support (1 FTE).
- **Department personnel**—for example, from Human Resources (S. Hugh, B. Katz), Information and Instructional Technology (V. Peshkam, S. Helf), Instructional Technology and Distributed Learning (D. Devellerez), Strategic Planning and Institutional Effectiveness (S. Crano), Grants, Contracts and Research Administration (G. Clayton), Media Relations (J. Henshaw), Clinical Affairs (C. Lenz, R. Berezniak), and the President’s Office (C. Atwell).
- **Specialized personnel**—faculty from the colleges and department staff, who are requested to serve as program faculty on an ad-hoc basis (S. Johnston, G. Johnston, L. Rasmussen).

CAPE focused on two audiences during academic year 1999-2000: 1) on-campus students (through the programs and activities of the Learning Enhancement and Academic Development (LEAD) office and the Intensive Summer Anatomy Course (ISAC) program], faculty, staff, and administrators (through the Human Resources Department), and 2) OPTI-West faculty.

The Office of Institutional Effectiveness, in partnership with CAPE, gathered data necessary to assist CAPE members in meeting the needs of on-campus faculty and students. This included the development of a Faculty and Course Profile, and Faculty and Staff Development Needs Analyses (see Exhibit II.4). In addition, a needs analysis
was conducted by CAPE staff through telephone interviews with each OPTI-West Director of Medical Education (see Exhibit II.4). Programs to meet these identified needs were designed, delivered, and evaluated (see Exhibit V.1). Such workshops, training sessions, and presentations included Introductory and Advanced PowerPoint, Using PowerPoint in an Academic Setting, Advanced Excel, Educational Format (Syllabus, Course Objectives, and Goals), Writing Clinical Test Questions, Innovative Teaching Strategies, Writing Grants, Course Assessments, Creative Approaches to a Professional Curriculum, Measuring Student Outcomes, Problem-Based Learning, and a six-session Supervisory Skills Certificate Program. CAPE staff, faculty with expertise, CAPE associates (e.g., the Director of Human Resources), and other University personnel presented these workshops. Evaluations were completed for all workshops, and the results were discussed with presenters (see Exhibit V.1). If a workshop was offered more than once, the feedback was integrated prior to the subsequent offering. Finally, prior to the Supervisory Skills Training program, participants completed a self-evaluation of supervisory skills, knowledge, and abilities. In addition, their own supervisors and a colleague or subordinate employee completed a similar measure, so that six months to a year after the completion of the course, these results could be compared with the same evaluation of the same three areas to determine whether or not learning occurred (see Exhibit V.1). Participants’ evaluation forms stated that they enjoyed the course; a concern is whether or not this program achieved its objectives of enhancing performance.

In addition, CAPE continues to serve as a resource for faculty initiatives (especially COMP faculty, to date), including the Intensive Summer Anatomy Course (ISAC) (see Exhibit II.4); the COMP Summer Institute (see Exhibit II.4); COMP curricular reform (see Standard IV—COMP and Exhibit IV.7); and measures of goal setting and performance. Based on the experiences from this academic year and the learning priorities of CAPE’s various constituencies, programs and activities have been and will continue to be designed to enhance student learning and teaching in all programs at the University.

**Considerations include:**

- Ensuring that all CAPE personnel have been adequately prepared to serve as Center faculty (e.g., through participation in teach-the-teacher activities).
- A complete audit and review of all academic and professional enhancement activities (on campus and at affiliated sites) (e.g., the College of Pharmacy’s Orientation, Evaluation and Development Committee), goal setting and evaluation of CAPE personnel, and group meetings of other key personnel to further develop the mission and goals of the Institute.
- Development of cooperative and beneficial working arrangements with other area professional development programs (e.g., Claremont Graduate University and others).
- The role of the LEAD office in preparing students to function as successful participants in the summer anatomy course and to prepare for board examinations.
- Planning for an institute/certificate program, to be offered by CAPE, to prepare pre-medical students for entry into medical school.
- Methods to integrate Institute activities with annual faculty DOE/goal setting/evaluation, to recognize completion of program activities (especially on a continuing basis) and to reward individual excellence.
• Seeking long-term solutions to academic and professional enhancement at affiliated sites (including the use of distance education).

During Spring 2000, CAPE staff engaged in conversations with five of the OPTI centers, during which a few themes arose consistently (see Exhibit II.4). For most of the programs, the most pressing faculty development need is for assistance in student evaluation and assessment. Most of the Directors of Medical Education (DME) indicated that evaluation and performance review of students was a top priority, both for the full-time core faculty and for the adjunct/volunteer faculty who work with students. Closely linked is a desire for workshops and activities that help staff become more effective teachers. One DME talked about developing faculty into good mentors to enhance student learning. Another suggested that CAPE include activities to help faculty and other staff members develop research skills to assist with presentation and publication. Finally, one suggested an interest in journal clubs, which will be a good addition to our implementation of Blackboard.

To accommodate the needs and desires of the OPTI faculty and staff, a series of workshop offerings was developed and presented as possibilities to OPTI leaders. This series included sessions on assessing and evaluating student performance, developing effective mentoring relationships, developing a research agenda, performing online research, reading and understanding the statistics of research literature, an overview of osteopathic medicine for the faculty at allopathic medical centers in which we place students, and effective presentations.

A major project in which CAPE took the lead was Western University’s Education Scholar Program, designed to promote teaching excellence development for health professions educators. This project was conceived to provide a national, health professions-wide program that develops and enables the scholarship of teaching and recognition of excellence in teaching. Western University worked in partnership with the American Association of Colleges of Pharmacy to develop this program. Participating health professions education associations include the American Association of Colleges of Nursing, American Association of Colleges of Osteopathic Medicine, American Association of Podiatric Medicine, American Association of Dental Schools, Association of Schools and Colleges of Optometry, Association of Schools of Allied Health Professions, and Association of Schools of Public Health. The Education Scholar program provides information and learning experiences that:

• Make current, relevant educational research and theory practical and accessible.
• Explain and model practical strategies that can be implemented readily in a teaching setting.
• Alert users to publications, electronic resources, and education experts to provide ongoing support for professional development.
• Encourage interaction with other health professions faculty who are interested in improving their teaching skills.
• Help users document their teaching experiences for the purposes of meeting continuing education, promotion, retention, or tenure requirements.

The curriculum in the Education Scholar program is contained in six modules, for which participants can register online through the URL www.educationscholar.org. The initial modest registration fee allows users one year of unlimited access to a specific
module and all the support services provided through the website. The first module completed and put into use is titled “Improving Outcomes through the Use of Active Learning.” This module was made available to all Western University faculty members free of charge as part of the faculty development activities.

Another innovative program developed to promote lifelong learning activities for health professionals is the Certification, Licensure, Evaluation, and Review (CLER) course for Physician Assistants. This comprehensive course is designed to prepare physician assistants for success in the PANCE and PANRE certifying and recertifying exams, respectively. The course is an interactive, self-assessment learning tool developed to meet the growing demand for certification exam preparation alternatives. It provides PAs with an affordable method to review and expand their knowledge. The program is highly interactive and thoroughly individualized to meet the academic and situational needs of the learners. It provides a competency-based assessment, individualized curricular planning, and interactive learning, through a personalized curriculum generated for participants based on the results of their preliminary exams. The curricular plan ensures that learners focus their study efforts on those areas in which there are greatest needs. Interactive strategies replace the traditional lecture-based format to ensure that participants are engaged in the learning process at all times. The complete course contains 18 modules, covering such topics as health promotion/disease prevention, pediatrics, geriatrics, emergency medicine, legal/ethical issues, and disorders of various body systems.

In planning sessions during the summer of 2000, based upon surveys, focus groups, and informal discussions, CAPE staff and affiliate members decided to focus on the following issues and needs over the course of the next three academic years.

<table>
<thead>
<tr>
<th>Focus</th>
<th>Development Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td>COMP</td>
</tr>
<tr>
<td></td>
<td>• Curriculum development, content, and delivery</td>
</tr>
<tr>
<td></td>
<td>Faculty computer skills</td>
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<tr>
<td></td>
<td>• Communications: e-mail, file sharing</td>
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<td></td>
<td>• Blackboard (Bb)</td>
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<tr>
<td></td>
<td>• Internet use, development</td>
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<tr>
<td></td>
<td>Pedagogical skills</td>
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<tr>
<td></td>
<td>• Interesting, meaningful lectures</td>
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<tr>
<td></td>
<td>• Leading classroom discussion</td>
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<td></td>
<td>• Peer-led learning</td>
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<td></td>
<td>• Assessment of student learning</td>
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<tr>
<td></td>
<td>• Assessment of teaching methods and skills</td>
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<tr>
<td></td>
<td>Admissions and other global education issues</td>
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<tr>
<td></td>
<td>Continuing Medical Education</td>
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<tr>
<td></td>
<td>Grant writing</td>
</tr>
<tr>
<td>Students</td>
<td>• Computer needs/skills/communications</td>
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<td></td>
<td>• PDA</td>
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<tr>
<td></td>
<td>• Professionalism</td>
</tr>
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<td></td>
<td>• Writing</td>
</tr>
<tr>
<td></td>
<td>• Library Research</td>
</tr>
</tbody>
</table>
A series of educational activities, including workshops, institutes, speakers, courses, and one-on-one mentoring has been developed by CAPE and LEAD staff and affiliate members to address these needs. See Exhibit V.1 for detail.

CAPE staff members have played and will continue to play a role in facilitating the curriculum development process in COMP. CAPE staff members organized the curriculum development workshops and continue to work with faculty to provide resources, information, and ideas necessary to move forward with curriculum reform.

Consolidating CAPE, LEAD, and the University Center for Graduate Studies and Lifelong Learning

A strategic decision was made late in academic year 1999-2000 to pave the direction for combining CAPE, LEAD, and the functions and activities of the University Center for Graduate Studies and Lifelong Learning. This consolidation of activities and personnel was completed by the end of the academic year, with the LEAD Office maintaining its distinct identity, but reporting to CAPE. The decision was based on the fact that the activities of each of these groups were complementary and possibly duplicative, though the focus of each was on different target groups (i.e. faculty vs. students). The decision to consolidate has allowed for enhanced programs and efforts that are more comprehensive and benefit a wider audience, with the expenditure of fewer resources.

Staff

Western University employs an academic and non-academic staff sufficient in number and professional qualifications to maintain the institution’s operations and to support the academic programs, consistent with its institutional and educational objectives. As of December 2000, Western University employs 356 individuals, 164 (46%) of whom are nonexempt (i.e. hourly) employees. Of the exempt employees, 84 are full-time faculty members, 30 are full-time academic administrators, and 78 provide a variety of professional/academic support roles within the University (laboratory technicians, administrative assistants, coordinators of special units, etc.). This staffing level meets the current needs of the institution.

The newly revised Employee Handbook (see Appendix I.3) outlines rights, responsibilities, policies, and procedures. Staff members receive an excellent benefits package, which is appreciated by almost all, with the exception of those who desire subsidized health insurance for spouse and children, and a standardized policy regarding educational benefits outside of Western University. Salaries, on the other hand, are viewed by staff members, especially at the lower end of the pay scale, as
being less than competitive. A salary and compensation review process was promised for academic year 2000-2001, but due to the constrained budget, this study was delayed. In addition to the salaries being considered barely adequate, at most, given the cost of living associated with the region, there are perceived large discrepancies within individual job classifications (Secretary III compared to a Secretary III) as well as across pay scales (nonexempt versus exempt staff salaries). Finally, the workload and job expectations among various individuals within a job classification may vary widely, and the perception is that there is no rationale for the variability. These inequities are being discussed by the President’s Cabinet, with its goal to complete a study and make recommendations for improvement by the end of this academic year.

There is a policy regarding performance appraisal for staff members (see Employee Handbook, Appendix I.3, p. 2.3); however, implementation of this policy is not monitored. Many departments on campus do complete such a process and use it for the personal and professional development of staff members, as well as for salary determination, while others do not. During the self-study focus group activity conducted in Fall 2000, many staff members complained that they had not been evaluated. As this fiscal year was the first in which staff members did not receive an across-the-board 5% salary increase, but rather a 2.5% maximum increase, the sense among staff was that a favorable evaluation of their work would have been nice to have in concert with the limited monetary reward.

Other staff concerns raised during the focus group activity included the limited training and development opportunities, increased workload with decreasing resources, desire for flexible work schedules owing to family and further education needs, desire for daycare, desire for enhanced communication, desire for equitable implementation of policies, and need for better-defined policies and procedures.

The Human Resources Department has been reorganized, with the elimination of the position of Vice President of Human Resources and the hiring of a new Director. The University response to this new operation has been positive. The new atmosphere was lauded in most focus groups. The new staff grievance procedure, renamed the Problem Resolution Procedure (see Appendix I.8), was welcomed by staff; however, the composition of the Problem Resolution Committee was a concern of some, who wanted to know how the composition of the committee was determined. Finally, though a supervisory skills training program has been offered twice, there is still an outcry from staff for more development activities.

Though the establishment of a Staff Council to formalize input into the administrative process and to provide guidance regarding human resources policy was recommended during the 1995 site visit, no such council has been developed to date. However, staff members have participated at all levels of institutional planning and human resource policy development processes.

**Human Resources**

**Mission**

The short-term mission of the Human Resources Department is to establish a professional operation on campus. The goals that have been set to achieve this mission are 1) to improve employee recruitment and selection programs; 2) to analyze and
implement appropriate compensation strategy, particularly in the support staff
categories; 3) to implement a staff development program; and 4) to change the
perception that the Human Resources Department is adversarial.

The short-term mission was developed based upon responses to a survey
administered to University administrators in July/August 1999. Through telephone and
face-to-face interviews, participants were asked to describe the areas where human
resource assistance was needed the most. The perceptions of the administrators
surveyed have been confirmed as accurate by surveys conducted by the Office of
Strategic Planning and Institutional Effectiveness, and through numerous conversations
with employees at all levels of the organization.

The major thrusts of the Human Resources change efforts in academic year 1999-
2000 (continuing beyond 2000) included:

• Reengineering the recruitment and hiring processes (see Standard II—Process
  Improvement of Recruitment and Hiring Processes).
• Review and revision of the Employee Handbook (see Appendix I.3) and Human
  Resources Policies and Procedures Manual (see Exhibit V.2).
• Review and revision of employee problem resolution process (grievance
  procedure) (see Appendix I.8).
• Staff development (in collaboration with CAPE).

While a great deal has been accomplished, much remains as work in progress.
Specifically, the following initiatives have been started during academic year 1999-2000.
This section, as well as following sections, will describe Western University's Human
Resources initiatives.

• Improve recruitment and selection programs

The supply of job candidates has been expanded due to the utilization of multiple
sources including Web resources, rather than reliance solely on one agency as in the
past. Recruitment and hiring procedures have been streamlined, assisted by the Impact
Group (see Exhibit II.5). Planning is taking place to incorporate technology in the
transmission of recruitment information and applicant data both, internally and externally.

While improvement is being and will continue to be made in the recruitment area,
improved selection practices cannot be achieved until facilities are in place to perform
various types of pre-employment testing and to conduct improved interviews. The
requisite facilities should be in place during academic year 2000-2001.

• Analyze and implement appropriate compensation strategy

Pay levels of some support staff are below market rates on average, and some
department rates are below others. Some adjustments have been made to restore
internal equity within certain departments. As a whole, however, low pay levels are
contributing to employee turnover, especially in those departments in which salaries are
well below market rates.
Hand in hand with the low compensation level is the University practice of passing the entire cost of dependent medical insurance to the employee. A benefits survey conducted during Spring 2000 revealed that most comparison academic institutions subsidize 60-80% of the cost of dependent coverage.

These needs will be addressed in academic year 2000-2001, as it will be difficult to develop a comprehensive employee retention strategy without so doing, with a change in subsidy occurring in the 2001-2002 fiscal year.

- **Implement a staff development program**

  On January 13, 2000, the first Supervisor Skills Certificate Program was begun. The program was targeted to current first-line supervisors and consisted of eight half-day sessions on relevant topics. Sixteen employees started the program. Fourteen completed it and received certificates on April 20. Reviews have been excellent and enough interested persons have been identified to conduct the program twice more. Prior to the beginning of the training sessions, participants completed a self-evaluation, and were evaluated by their supervisors and either a subordinate or a colleague. Post-program evaluation to determine whether participation enhanced performance is scheduled for late Spring 2001.

  This program was the first of what is intended to be a comprehensive staff development strategy. A staff development needs analysis was administered during Summer 2000, and programs to respond to perceived needs are being developed and delivered (see section on CAPE).

- **Change the perception of Human Resources from adversarial to helpful and problem-solving**

  Just as the academic goal of the University is to teach students to have a professional and caring relationship with their patients, it is the goal of the Human Resources Department to mirror that philosophy. Human Resources will foster and be an example of a relationship of respect and trust between management and employees.

  This change in philosophy has been noticed on campus, and comments about the change have been made to staff members. In addition, favorable comments are included in surveys in which employees and managers are asked to comment about the Human Resources Department.

**Strengths and Opportunities for Improvement**

One strength of the Human Resources Department is the skill of the staff members. In addition, the staff is in philosophical agreement with the role the Human Resources Department must play in setting an example of a respect and trust relationship between management and employees.

The major area of potential improvement is infrastructure. At the present time, the Human Resources Department does not have the technical capability, in terms of hardware and software, to computerize human resources procedures fully. In addition, the attainment of one of the short-term goals, the development of better employee
selection through an assessment center approach, will require facilities in which to
conduct testing, including furnishings and equipment.

Planning Goals for 2000-2001

- Conduct salary survey and recommend adjustment.
- Conduct employee training needs assessment (completed; see Standard II).
- Present two Supervisor Training series (Fall 2000 and Winter 2001).
- Present at least four stand-alone training opportunities.
- Publish new Employee Handbook (Winter 2000, pending approval from
  President’s Cabinet).
- Implement Problem Resolution Procedure (completed; see Appendix I.8).
- Prepare plans for the implementation of a skills testing program for applicants.

Strategies:

- Recommend and provide human resources element of University strategic
  initiatives.
- Lay the foundation for an atmosphere of respect and trust between management
  and employees. Operate as a role model for this relationship, and provide advice
  and counsel that is valued by both groups.
- Provide exemplary human resource programs in the areas of recruitment and
  selection, compensation and benefits, training and development, and employee
  relations that are appropriate for the University.
- Utilize technology to become a virtual human resources department.

Employee Benefits Review

Employee benefits at Western University were evaluated and assessed for
competitiveness by reviewing the employee benefits practices of those universities that
are most like Western University of Health Sciences in terms of competition for
employees, location, and degrees that are offered. The universities surveyed were the
University of La Verne, Claremont Graduate University, Whittier College, Occidental
College, University of Redlands, and Chapman University; all are private institutions.
The survey instrument used was the Association of Independent California College and
Universities (AICCU) Benefits Survey of 1999-2000. This study did not evaluate benefits
that were not included in the AICCU survey.

The findings are as follows:

- Medical Insurance
  Western University is significantly behind the others in terms of the contribution it
  makes to dependent coverage. Western University does not contribute at all,
  whereas most others are paying 60-80% of the premium cost. However, the
  other institutions require that employees contribute toward single coverage. Most
  others require an employee contribution of 10-30%. Western University pays the
  entire premium for single coverage. All other institutions in the sample provide
  benefits for domestic partners. Most do not limit the benefit to same-sex
  partners.
• **Retirement**
  These data were hard to compare; however, it appears that most other universities contribute two times the employee contribution, whereas the Western University contribution is one and one-half times.

• **Other Benefits**
  Most other Western University benefits are fairly comparable, with the exception of holidays. Western University shuts down for two weeks during the winter break; others shut down for one week.

**Recommendations:**

The University should:

- Pay for the dependent coverage portion of the upcoming insurance premium increase. This figure is approximately $25,000. Further, a plan should be developed to increase the subsidy to 60% of the cost of dependent coverage.
- Expand medical insurance to include coverage for domestic partners.
- Increase the vacation cap for nonexempt employees to 44 days.
- Change from the private doctor approach to an Employee Assistance Program (EAP) and purchase the service through a traditional EAP provider.
- Eliminate the years of service break contained in the sick leave plan, thus allowing the continuation of accrual to 60 days in five years (assuming no use of sick leave).

**Plan of Action:**

1. Implement faculty and staff evaluation processes consistently across the campus, and use the results of these evaluations to ensure institutional and program improvement.
2. Continue faculty development programs.
3. Develop and empower a Staff Council.
4. Devote resources to and develop a comprehensive staff training program.
5. Engage University community further in a discussion of working conditions and their enhancement, including flexible work hours and a consistent policy regarding further education and training.
6. Develop a comprehensive staff training program.
Standard VI - Library, Computing and Other Information and Learning Resources

As reported in this section, what was perceived by WASC during its last visit as "a very inadequate, deteriorating library budget," has been ameliorated. Campus concerns relevant to the library, and information and instructional technology needs, have been assessed and continue to be on an ongoing basis. Major improvements have occurred through the years, and Western University will continue to enhance its library, computing, and learning resources. As indicated in the section on information and instructional technology that follows, Western University moved from an inadequate state to meeting the needs of the University in this area.

Library

The Western University Library presently serves students in the College of Osteopathic Medicine, College of Pharmacy, College of Graduate Nursing, and College of Allied Health Professions (Physician Assistant, Physical Therapy, and Master of Science in Health Professions Education programs). In addition, the Library currently serves the faculty and will serve the students of the College of Veterinary Medicine. The entire library collection is available for checkout to University staff, alumni, and community members. The Library’s collection buying strategy for this year has focused on filling any major holding gaps to support the existing programs and curricula. The Library will also focus on purchasing books, CDs, and videos for future programs and curricula.

Mission

The mission of the Western University Library is to assist in the educational process by providing information services to the students, faculty, alumni, and staff of the University. This is accomplished by making available books, journals, and audiovisual and electronic resources to the community, and by providing individual and group instruction in the Library or in the classroom. To further that aim, the staff of the Library is committed to building a collection that supports the curriculum; aids faculty, student, and staff research; and assists in the continuing education of alumni. Western University’s unique osteopathic collection, both historic and curriculum-related, is used by other academic institutions as well. The Library staff monitor and evaluate the ever-growing electronic sources on the Internet, link them to our internal computer collection, and teach database and internet searching so that students, faculty, administration, staff, and alumni can use these resources at home, in the office, at public and hospital libraries, or wherever they may be.

Presently, the Library occupies a portion of the Health Sciences Center on the Campus Mall. All library materials are housed on the first floor, with access for disabled students. The present location will be maintained as a Library annex when the new Library opens. By the end of March 2001, the Library will be relocated to a five-story building just south of the present Library location. The basement of this building will house the Office of Information and Instructional Technology. The first floor (10,000 square feet) is designated for circulation, a historical museum, a disability center, and general reading areas. The second floor (10,000 square feet) will house books. The third floor (10,000 square feet) will house journals. The fourth floor (10,000 square feet)
is designated for office space/conference areas for the Library and the Office of Information and Instructional Technology staff.

<table>
<thead>
<tr>
<th>Year</th>
<th>Books</th>
<th>Serials</th>
<th>Media</th>
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</thead>
<tbody>
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<td>180</td>
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<td>1994</td>
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<td>1998</td>
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<td>2001 Projected</td>
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<td>78,000</td>
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<td>208,000</td>
<td>13</td>
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</tbody>
</table>

The new University Library will have more than three times the circulation area compared to the current Library. The shelves will continue to have adequate space for student browsing and staff re-shelving. The layout of the Library will be accessible to students with disabilities.

The Library collection, study areas, and staff offices will be on four floors. The Library will have 648 shelves for books, 332 shelves, and 320 fiche cabinets for journals. There will be 10 study rooms with whiteboards and microfiche readers for up to six students each. Available seating will include carrels and tables and chairs for 107, for a total capacity of 167. There will be study areas for 120 in two other buildings, with 12 study rooms containing whiteboards and x-ray viewers for up to 75 students. These will be designated for students of the College of Veterinary Medicine, and will be located in the CVM building. The Veterinary Sciences Center is projected to have 30 small group learning rooms, each of which will accommodate seven students. All will have whiteboards and x-ray viewers.

**Library Hours**

Hours for the Library are 7:00 a.m.-11:00 p.m., Monday-Thursday; 7:00 a.m.-6:00 p.m., Friday; 11:00 a.m.-7:00 p.m., Saturday; and noon-8:00 p.m. Sunday (the Library extends the weekend hours 10 weekends during the year during heavy testing time and course finals. The Library’s entire catalog of holdings (books, media, and journal catalogs) is accessible on the University website. Electronic circulation services (including reserves and holds) will be available at a future date.

**Staffing**

The Library staff consists of a director, a systems librarian, a serials librarian, an acquisitions librarian, reference librarians, multimedia resources librarians, circulation librarians, and circulation assistants. Staffing for special projects comes from the two local library science schools.
Holdings include:

- More than 9,000 monographs and books in the reference collection, health education, basic science, pharmacy, public health, research methods, statistics, writing, medical practice development, physical therapy, rehabilitative therapy, osteopathic manipulative medicine, kinesiology, clinical medicine, nursing, and medical history.
- Over 200 rare and antique monographs, books, and journals representing the early days of osteopathic medicine.
- Student and research-oriented journals and serial titles totaling more than 600 in number in osteopathic and clinical medicine, education, pharmacy, physical therapy, and nursing areas.
- A small collection of popular fiction and general interest magazines, along with the local daily newspapers.

Multimedia reference resources include:

- 49 slide sets in dermatology, anatomy and histology, cardiology, muscle bone and joint diseases, neurophysiology, advanced cardiac life support, manipulative therapy, and others.
- Videotape collections numbering 18 in anatomy and dissection, manual medicine, sports medicine, diagnostic techniques, heart and breath sounds, advanced cardiac life support training, and psychosocial diagnosis and treatment.
- 12 sets of audiotapes in heart and breath sounds.
- Five-year collection of Audio Digest tapes in emergency medicine, psychiatry, anesthesia, internal medicine, family medicine, pediatrics, and obstetrics/gynecology.

Literature Searching

As the world of bibliographic retrieval changes and improves, students, faculty, and staff gain more ability to do literature searches independent of a library setting. In the past, a librarian had to have specialized training in MedLine searching, and access to the database was only through a paid subscription intermediary. Each additional database—ERIC, CINAHL, AGRICOLA et al.—had to be learned and paid for annually. The cost was a significant portion of an academic library’s budget for approximately five years. Today, due to the Internet and the advances made by the federal government in providing information access, everyone with a computer can access the national Library of Medicine’s PubMed and be led easily through the same steps that had to be learned and memorized two years ago. ERIC and AGRICOLA can now be accessed from the Web. There is no reason to believe that this trend will stop. This change has virtually eliminated the Library’s need for paid specialized database subscriptions for any of our existing programs. Library staff members teach students and faculty the basics of searching on the Internet. In addition, Library staff members provide handouts and pathfinders, and one-on-one instructional sessions. Each year, students, faculty, and staff are arriving better able to navigate the Internet on their own. The Library staff members keep up with quick find techniques, other information websites, and regularly provide that information to the students and faculty through the Library Web page, paper, and/or bulletin board.
Even with the quantum change in information gathering methods, the Library staff members either perform or assist in setting up approximately five searches per week for students, staff, faculty, and external users. Electronic searching is not the only means of gathering subject-oriented citations. The Library maintains 10 years of *Index Medicus* as a basic source of medical journal article citations. In addition, 10 years of *Indexus Veterinarius* volumes are being gathered for the College of Veterinary Medicine.

**Library Process Improvement**

In Spring 2000, Library planning, staffing, equipment, and service goals were reassessed. Western University had changed significantly in the previous four years, and the Library needed to upgrade to keep up with student and faculty expectations and needs. In addition, the renovation of a four-story building on the edge of the present campus for the Library and the IT department, and the planned move in early 2001, were just beginning, and the Library was participating with accreditation teams for each of the present programs and one for the proposed Veterinary Medicine program.

The first change reassigned the Library to report to the Vice President of Business and Finance (who was also responsible for the Office of Information and Instructional Technology). This brought the Library and the Office of Information and Instructional Technology under an administrator who was committed to both departments, to encourage as much coordination and synergy as possible. This new reporting structure brought into clear focus the need for resources and for upgrading the library collections and staffing, while simultaneously adding the electronic resources needed for a comprehensive information access system for the growing University.

In May 1999, a consulting librarian was hired to evaluate the collection supporting the curricula, hire and train additional staff, and ensure that the design of the new Library would be effective for students and staff. The first consulting report noted that:

- The book collection was not current, and had not added enough volumes necessary for the Pharmacy, Physical Therapy, and Graduate Nursing programs that had joined the University in the previous four years.
- The multimedia collection consisted primarily of slides and ¾-inch videotapes; the audiovisual equipment was old, unable to be repaired, and inadequate for the number of students. Audiotapes were not well catalogued, and tape players and headphones did not work.
- The DOS-based circulation system was deteriorating, and did not operate well on the Windows NT operating system.
- The two research computers for students located in the Library did not have Internet access, and though database searching was taught to students, it was carried out primarily by librarians.
- The staff were underpaid, undertrained, and unsettled by having had three directors in four years.
- The Library design did not use the space well for book and journal shelving, study, staff, or research.

By July 1999, the following had been accomplished:
• Two trained circulation staff, a systems librarian, and a multimedia librarian had been hired, and the consulting librarian agreed to stay on and complete the initial plan.
• Two-hour reserve textbooks, which had accounted for 17% of the entire collection budget previously, had been changed to circulation status and moved to the regular shelves.
• Videotapes were reformatted by the AV department; four new TV/VCR combos, three new tape/CD players, and 12 headphones were purchased.
• Six new research computers with medical information CDs and Internet access were installed.
• A new, automated circulation/catalog system had been chosen, and the systems librarian was working with IT on the hardware implementation.
• The new Library plan was redesigned with input from Library staff, and included more bathrooms, drinking fountains, study rooms, computers and multimedia equipment, and staff office/work suites on each floor, as well as space for a reading room, a museum, and a disability learning resources center. (The floor plans are included in Appendix VI.1.)

The next task was to articulate general policies to guide the Library changes, and to set out the collection development and buying plan (see Appendix VI.2).

For the next six months, Library staff focused on updating the old circulation system and developing the collection. Reports of the Library Committee (see Appendix VI.3) document this work. At the beginning of the new year, students, faculty, and staff noted the following:

• Enhanced collection of books, media, and journals as outlined by the collection development plan.
• Increased staffing as a result of hiring an acquisitions librarian and two additional circulation librarians.
• Increased database search training on the improved PubMed and other free Internet databases, offered during classroom sessions and one-on-one in the Library Computer Research Lab.
• Increased availability of videos directly related to basic science and physical therapy.
• Reduction in photocopy pricing, addition of another copier, and reduction of photocopy equipment downtime.
• A Student Library Handbook (see Appendix VI.4) and a Faculty/Staff Library Handbook (see Appendix VI.5).

The Library staff, in conjunction with faculty, spent the next six months assessing the collection. During Fall 1999, the Library staff and college/program faculty engaged in an assessment and upgraded the library collection. The specialty area books of each college and program were assessed for student usage, historical value, currency, quality of authorship, and student and faculty research use. They were also evaluated for usage and relevance to the goals of the University.

Complicating the process was the curriculum redesign process in COMP and reorganization of the clinical rotation residency sites. The Allied Health departments—Physical Therapy, Physician Assistant, and Health Professions Education—were adding...
master’s level research components. Buying materials necessitated significant
discussion and involvement of the Library Committee. The College of Pharmacy has
settled on a stable block system of topics for students, which made their materials
somewhat easier to choose; however, the college added faculty with broad research
backgrounds who started looking to the Library for a higher level of materials,
particularly journals and e-journals.

The training and cross-training of staff focused on learning the health science
materials and learning how to assist students and faculty better. A battery of searching
exercises for PubMed was developed and tested. Much time was spent in discussing
the best way to accommodate students’ needs. Some of the work was documented in
the Library Committee reports (see Appendix VI.3).

There remain some challenges that the Library needs to consider in the next
year:

• As more computer access is established for students and faculty, more
  attention needs to be devoted to copyright policy.
• The effect that the College of Osteopathic Medicine’s exploration of evidence-
  based medicine techniques in the learning process will have on print and
electronic needs.
• The Library and IT need to further develop online journal access to students
  and faculty through expanding the IP address capabilities.
• Refinement of the computer search training and exercises for students with
  learning disabilities.
• After completing the indexing thesaurus for the basic science and clinical
  information, pharmacy and physical therapy materials need to be analyzed
  for adequacy.
• Employing staff with extensive health information retrieval experience to work
  in the Library during afternoons and evenings when students are present.

The Library has a five-year budgeting plan. This plan includes efforts to:

• Stabilize the staff at a professional compensation level, and reward as
  appropriate.
• Spend appropriate amounts of collection purchase money on books and
  journals, with a triennial cycle for increasing the book budget to maintain a
  current (within six years) collection.
• Use free Internet databases for electronic access.
• Keep monitoring e-journal access, as publishers find the most effective
  means.
• Choose equipment with a three-year effective life span and then replace,
  thereby reducing maintenance and repair.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of books or other materials circulated</td>
<td>10,379</td>
<td>3,161</td>
<td>3,957</td>
<td>6,500</td>
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213
<table>
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<tr>
<th>Total circulation to students annually</th>
<th>7,826</th>
<th>2,735</th>
<th>3,702</th>
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<td>Per capita student use</td>
<td>5.4</td>
<td>1.9</td>
<td>2.6</td>
<td>4.3</td>
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<tr>
<td>(circulation to students divided by the number of enrolled students)</td>
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<td></td>
<td></td>
<td></td>
</tr>
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<td>Total circulation to faculty</td>
<td>953</td>
<td>142</td>
<td>139</td>
<td>200</td>
</tr>
<tr>
<td>Per capita faculty use</td>
<td>7.9</td>
<td>1.2</td>
<td>1.2</td>
<td>1.6</td>
</tr>
<tr>
<td>(circulation to faculty divided by the number of enrolled faculty)</td>
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<td></td>
<td></td>
<td></td>
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<td>Total circulation to community users</td>
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<td>17</td>
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<td>3</td>
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<td>Number of items borrowed via interlibrary loan</td>
<td>248</td>
<td>343</td>
<td>228</td>
<td>325</td>
</tr>
<tr>
<td>Number of items lent via interlibrary loan</td>
<td>248</td>
<td>343</td>
<td>165</td>
<td>325</td>
</tr>
<tr>
<td>Hours open per week</td>
<td>96</td>
<td>91</td>
<td>91</td>
<td>91</td>
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<tr>
<td>Online electronic database searches mediated by library staff</td>
<td>N/A</td>
<td>205</td>
<td>215</td>
<td>220</td>
</tr>
<tr>
<td>Total library staff presentations to groups/classes</td>
<td>N/A</td>
<td>5</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Tours and one-time presentations</td>
<td>6</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Hands-on instruction for using electronic databases</td>
<td>N/A</td>
<td>2</td>
<td>2</td>
<td>2</td>
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<tr>
<td>Hands-on instruction for Internet searching</td>
<td>N/A</td>
<td>2</td>
<td>4</td>
<td>6</td>
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<tr>
<td>Semester-length bibliographical instruction</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Collections</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Total number of different titles in collection</td>
<td>N/A</td>
<td>7,500</td>
<td>8,246</td>
<td>8,600</td>
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<tr>
<td>Books and other printed materials</td>
<td>11,123</td>
<td>6,487</td>
<td>7,246</td>
<td>7,600</td>
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<tr>
<td>Print serials/periodicals</td>
<td>460</td>
<td>459</td>
<td>460</td>
<td>465</td>
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<td>Electronic serials/periodicals</td>
<td>0</td>
<td>0</td>
<td>90</td>
<td>200</td>
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<tr>
<td>Other electronic materials (except serials/periodicals)</td>
<td>N/A</td>
<td>1,337</td>
<td>1,870</td>
<td>1,950</td>
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<tr>
<td>Microforms</td>
<td>1,500</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>--------------------</td>
<td>-------</td>
<td>-----</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td>Non-print materials (e.g., films, tapes, CDs)</td>
<td>N/A</td>
<td>1,337</td>
<td>1,870</td>
<td>1,950</td>
</tr>
<tr>
<td>Computer software</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Number of subscribed/purchased electronic online databases</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Number of CD-ROM databases available for searches by students</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of subscriptions to scholarly journals</td>
<td>450</td>
<td>450</td>
<td>450</td>
<td>450</td>
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<tr>
<td><strong>Staff</strong> (1 FTE staff member = 35-40 hours per week)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of FTE professional staff</td>
<td>2</td>
<td>4</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Number of FTE nonprofessional staff</td>
<td>5</td>
<td>6</td>
<td>6</td>
<td>9</td>
</tr>
<tr>
<td><strong>Facilities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of seats</td>
<td>130</td>
<td>130</td>
<td>130</td>
<td>130</td>
</tr>
<tr>
<td>Number of publicly accessible computers</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Estimated linear shelving space remaining for expansion (in feet)</td>
<td>0</td>
<td>0</td>
<td>48</td>
<td>84</td>
</tr>
<tr>
<td><strong>Expenditures</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total for staff (excluding fringe benefits)</td>
<td>195,000</td>
<td>240,275</td>
<td>376,000</td>
<td>486,000</td>
</tr>
<tr>
<td>Total professional staff salaries</td>
<td>80,000</td>
<td>70,000</td>
<td>130,000</td>
<td>180,000</td>
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<tr>
<td>Total nonprofessional staff salaries</td>
<td>115,000</td>
<td>121,000</td>
<td>246,000</td>
<td>306,000</td>
</tr>
<tr>
<td><strong>TOTAL for collection</strong></td>
<td>111,000</td>
<td>190,000</td>
<td>200,000</td>
<td>208,000</td>
</tr>
<tr>
<td>Books/other printed materials</td>
<td>33,000</td>
<td>100,167</td>
<td>119,000</td>
<td>125,000</td>
</tr>
<tr>
<td>Printed serials/periodicals</td>
<td>70,300</td>
<td>105,702</td>
<td>74,000</td>
<td>78,000</td>
</tr>
<tr>
<td>Microfilms</td>
<td>5,000</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Non-print materials (e.g., films, tapes, CDs)</td>
<td>8,000</td>
<td>8,000</td>
<td>6,000</td>
<td>5,000</td>
</tr>
<tr>
<td>Computer software</td>
<td>500</td>
<td>34,000</td>
<td>10,000</td>
<td>10,000</td>
</tr>
<tr>
<td>Services</td>
<td>2004</td>
<td>2005</td>
<td>2006</td>
<td>2007</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>Access and other services</td>
<td>N/A</td>
<td>2,750</td>
<td>2,750</td>
<td>2,750</td>
</tr>
<tr>
<td>Interlibrary loan</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
</tr>
<tr>
<td>Binding, preservation, and restoration</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
</tr>
<tr>
<td>Production of materials (on or off site)</td>
<td>0</td>
<td>0</td>
<td>500</td>
<td>600</td>
</tr>
<tr>
<td>Other equipment and furniture purchase/replacement</td>
<td>0</td>
<td>40,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other operating expenses (excluding capital outlay)</td>
<td>65,000</td>
<td>72,000</td>
<td>70,000</td>
<td>70,000</td>
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<tr>
<td><strong>Total Library Expenses</strong></td>
<td>378,000</td>
<td>594,780</td>
<td>660,250</td>
<td>779,350</td>
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<tr>
<td>Number of patron visits to the library</td>
<td>400/day</td>
<td>320/day</td>
<td>384/day</td>
<td>460/day</td>
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<tr>
<td>Number of reference questions answered</td>
<td>N/A</td>
<td>8.4/day</td>
<td>10/day</td>
<td>12/day</td>
</tr>
<tr>
<td>User satisfaction survey</td>
<td>No</td>
<td>No</td>
<td>Yes**</td>
<td>TBA</td>
</tr>
<tr>
<td>Does the library attempt to measure/record in-library use of other resources? (If so, enter data.)</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
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</table>

**Policies & Procedures**

<table>
<thead>
<tr>
<th>Question</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there formal, written agreements to share library resources with other institutions?</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there formal, written agreements allowing the institution’s students to use other institutions' libraries.</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there written policies and procedures for deselection of materials?</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Are there written policies and procedures for archiving images and ephemerals?  
No

Is the library involved with the copyright policies and procedures?  
Yes

How often is the collection assessed in relation to the curriculum?  
Every 3 years

What is the response time for getting new materials into the collection?  
Average turnaround is about 3 days (from receipt of book to shelving)

*1998-1999 figures are based on 18 months versus 12.
**Focus group reported student, faculty, and staff dissatisfaction with certain aspects of the Library. A survey is being conducted in January 2001 to obtain a better indication of necessary improvements.

Office of Information and Instructional Technology

Mission

The mission of the Office of Information and Instructional Technology (OII2T) is to provide the vision and leadership for strategic technology planning, deploying a modern integrated digital learning infrastructure, and implementing information and instructional technology initiatives that create and maintain educational leadership for the University. In addition, OII2T strives for excellence, provides efficient user support, encourages and teaches effective use of emerging technologies to users for optimum productivity, and develops pilot projects to demonstrate its valuable employment in instructional technology to enhance teaching and learning.

The Office of Information and Instructional Technology has implemented a robust information infrastructure, which is compatible with almost any hardware platform and network, and is scalable to accommodate the University’s rapid expansion and growth in the number of users, with networks, servers, and the fiber rings to provide adequate throughput to individual colleges and users. In addition, the entire infrastructure is adaptable to encompass future technological advances. Also, technological superiority is demonstrated in a myriad of other technical arenas, from suitability of the users’ hardware to adequacy of individuals’ and colleges’ network bandwidth and capacity of the servers.

The OII2T has enjoyed the benefits of having many highly qualified technical personnel who have worked with dedication, commitment, and conviction to ensure
materialization of the infrastructure in an unprecedented timeframe. However, attracting highly qualified IT professionals and managers to take the existing network to the next level and become a digital global learning infrastructure has been a major challenge for the OI2T, and will continue to remain one for the foreseeable future, unless radical measures are taken to improve the situation. Most academic institutions have neither the wealth of resources nor the capital available, as does industry, to offer lucrative compensation, bonus, and stock options to their employees.

Since last year, Western University’s information infrastructure has become stronger by phasing out the legacy systems, upgrading all NetWare servers to NT, and making all databases and systems Y2K compliant. This has facilitated rapid adaptability of the information infrastructure to new and emerging technologies in a more efficient and cost effective manner. Also, the aforementioned personnel who were added to the I2T staff have further strengthened the atmosphere of excellence in the following ways: insisting on ever-higher quality, making professionalism their hallmark, taking pride in their work, taking charge and making things work, being loyal to the organization and its values, and being confident in the tradition of success and leadership in the field.

Despite recent successes, OI2T’s weaknesses, by and large, remain the same as last year’s—attracting, recruiting, and retaining high-quality IT professionals. According to a report by Gartner Group, there will be a 50% shortfall in the supply of applications development professionals by 2004. Through 2004, more than 20% of IT positions in higher education will remain unfilled, severely threatening the execution of IT-based business initiatives. To combat this ever-increasing shortage of qualified IT professionals, which is a national problem, the CIO has formed a for-profit entity within the institution (see Standard IX—Prisma Corporation).

The other weakness is inadequate applications development staff, stemming from a less than adequate operating budget for OI2T. OI2T has made a substantial investment to implement an outstanding information infrastructure, and now needs funds to recruit applications developers for the next stage: e-business, distributed-learning, and e-learning.

In addition, IT is the most rapidly changing and evolving industry, which forces the professionals in the field to keep abreast of the constantly emerging technologies. Organizations faced with this dilemma often offer tailor-made training packages to their professionals to keep them sufficiently interested to remain their employees. This requires an enormous training budget, which is prohibitive for most academic institutions.

Howard Gardner, in his 1993 book *Frames of Mind: The Theory of Multiple Intelligences*, argues that, “there are at least seven types of intelligence, but traditional Western pedagogy, based on lectures and textbooks, makes use of only two (verbal and logical). Engaging the other five types of intelligence—spatial, musical, kinesthetic, interpersonal, and intrapersonal—will increase student success.” Five years ago, academic institutions could not envisage the means of developing the curricula that engaged other forms of intelligence. But, they will, five years from now, thanks to the ubiquity of the Internet, which is the foundation of the integrated digital learning infrastructure. Western University plans to continue to allocate adequate funds, develop a discipline-specific strategy, and channel efforts in this area. It is evident that Information Technology will bring the best lectures to students via multimedia anytime
and anywhere so that, like the recordings of the country’s most celebrated artists, “those of the best will drive out those of the merely good.” Western University has the information infrastructure and the technology know-how to develop and deliver such lectures not only to our students, but also to all those across the globe who seek the best in education and lifelong learning.

During the course of the 1999-2000 academic year, Western University’s Office of Information and Instructional Technology:

- Upgraded one-third of the University’s workstations, as per the University Information Technology policy (see Exhibit VI.1).
- Completed the implementation of the SCT Banner 2000 Student Services module and began the implementation of the Financial Aid and Finance modules.
- Hired both a Webmaster and a Web author to develop and maintain the University’s Internet/Intranet Web servers and the associated sites.
- Assisted the Library in the transition to a new automated library system.
- Participated in the engineering of the new Medical Sciences Library and Learning Resources Center.
- Migrated all Netware servers to NT servers.
- Developed training sequences for new and familiar users of the University’s systems, including an introductory course for new hires.
- Assured the technical success of the CLER site and Education Scholar projects (see Standard V).

Comparative Technology in Other Academic Institutions:

A recent survey has been conducted to determine the top 100 wired colleges in the United States (Yahoo Monthly, May 1999). The number one-ranking institution is Case Western University, with a score of 91.49 out of 100. Case Western has 41.2 computers per 100 students, and 90% of all computers across the campus are available 24 hours a day, seven days a week; 100% of the dorms are wired for Internet access. Computer features include online registration, drop/add courses, course schedules, transcripts, and distance learning. Technical support is available 16 hours a day, seven days a week. The university offers 25 megabytes of free space to each student for their online activities, provide multiple e-mail accounts for life, and have e-mail for their alumni.

The nation’s 100th most wired college is University of Wisconsin, Madison, with a score of 63.31 out of 100. They offer 6.65 computers per 100 students, technical support, and 10% of computers are available 24 hours a day, seven days a week; 85% of the dorms have access to the Internet. They also offer 15 megabytes of free Web space per student. MIT and Wake Forest are ranked number two and three, respectively.
To keep track of how Western University is growing and developing in the IT area, the table below has been developed and provides a summary of Western University’s computing resources and policies.

### Western University’s Computing Resources and Policies

<table>
<thead>
<tr>
<th>Organization, Planning, and Policies</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designated administrator for institutional computing?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Designated administrator for academic computing?</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>Designated administrator for administrative computing?</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>Centralized computing services?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Formal, written, and approved technology plan?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Technology plan linked to institutional mission and purposes?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Computing resources included in institutional strategic plan?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Policies on the purchase, replacement, and repair of hardware?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Policies on the purchase and updating of software?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Institutional computing responsible/ethical use policy?</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Institutional policies that include institutional computing issues?</td>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Facilities</th>
<th>Yes</th>
<th>No</th>
<th>% if yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional network backbone?</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>Computer labs networked?</td>
<td></td>
<td>x</td>
<td>100</td>
</tr>
<tr>
<td>Classrooms functionally networked?</td>
<td></td>
<td>x</td>
<td>75</td>
</tr>
<tr>
<td>Multimedia computers in labs?</td>
<td></td>
<td>x</td>
<td>100</td>
</tr>
<tr>
<td>Multimedia computers in classrooms?</td>
<td></td>
<td>x</td>
<td>75</td>
</tr>
<tr>
<td>Administrative offices networked?</td>
<td></td>
<td>x</td>
<td>100</td>
</tr>
<tr>
<td>Academic offices networked?</td>
<td></td>
<td>x</td>
<td>100</td>
</tr>
<tr>
<td>Number of networked labs</td>
<td></td>
<td>2</td>
<td>100</td>
</tr>
<tr>
<td>Total number of stations</td>
<td></td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Number of non-networked labs</td>
<td></td>
<td>0</td>
<td>?</td>
</tr>
<tr>
<td>Total number of stations</td>
<td>0</td>
<td>?</td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Intra-institution e-mail?</td>
<td>x</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Inter-institution e-mail?</td>
<td>x</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Type of access (check all that apply)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wired through network</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wired ports</td>
<td>x (3000)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remote dial-up</td>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Administrative Functions</th>
<th>Access Available To</th>
<th>Via</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Students</td>
<td>Faculty</td>
</tr>
<tr>
<td>University calendar</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Class schedules</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Financial aid</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Online registration</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Student academic record</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Academic Functions</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of full-time faculty offices with computers</td>
<td>100</td>
</tr>
<tr>
<td>% of computers in full-time faculty offices networked</td>
<td>100</td>
</tr>
<tr>
<td>% of part-time faculty with access to computers</td>
<td>100</td>
</tr>
<tr>
<td>% of department/unit offices networked</td>
<td>100</td>
</tr>
<tr>
<td>% of students required to have computers</td>
<td>40</td>
</tr>
<tr>
<td>Internet access available from what percent of faculty offices?</td>
<td>100</td>
</tr>
<tr>
<td>Library access available from what percent of faculty offices?</td>
<td>100</td>
</tr>
<tr>
<td>Library access available from what percent of classrooms?</td>
<td>50</td>
</tr>
<tr>
<td>% of instruction requiring computers</td>
<td>TBD</td>
</tr>
<tr>
<td>% of faculty with off-campus access</td>
<td>TBD</td>
</tr>
<tr>
<td>% of students with off-campus access</td>
<td>TBD</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>% of administration and staff with off-campus access</td>
<td>TBD</td>
</tr>
<tr>
<td>Courses offered exclusively through the World Wide Web (zero or minimal classroom contact)</td>
<td></td>
</tr>
<tr>
<td>College of Graduate Nursing</td>
<td>25</td>
</tr>
<tr>
<td>College of Allied Health Professions</td>
<td>8</td>
</tr>
<tr>
<td>College of Pharmacy</td>
<td>3</td>
</tr>
<tr>
<td>Note: Several other courses use Web to supplement</td>
<td></td>
</tr>
<tr>
<td>Number of interactive courses in real time (e.g., two-way video and voice)</td>
<td>0</td>
</tr>
</tbody>
</table>

**Support and Training**

| Number of FTE technical staff | 31 |
| Number of FTE training staff | 2 |
| Number of programmers | 6 |

**Finances/Budget for Computing (current fiscal year)**

| Total annual outlay (institutional computing) from operating funds | 3,908,200 |
| Capital funds (institutional computing) | 584,900 |
| Amount of grants received for computing | 0 |
| If YES, amount per student per academic year | $1,250* |
| Formal system of evaluation by faculty of institutional computing? | Y N |
| Formal system of evaluation by staff/administrators of institutional computing? | Y N |
| Results of evaluation linked to institutional planning and budgeting processes? | Y N |

*Fee for MSI & II and Pharmacy I & II students this year (2000-2001) will be the same for MSI & II and Pharmacy I & II in 2001-2002.

**Planning Activities**

The Office of Information and Instructional Technology (OI2T) outlined 13 goals in its 1998-1999 annual report (see Exhibit II.9). All of the goals were accomplished with the exception of the first, which was abandoned for strategic reasons. The OI2T has accomplished more than planned by recruiting higher caliber IT staff members, a result of the change in its strategic direction from being purely support- and service-oriented to becoming a business partner with the senior management team.

In addition to the defined goals set forth in the 1999–2000 unit report, and for reasons provided in OI2T’s Strategic Plan, OI2T has acquired and installed the Blackboard (Bb) software package for faculty and students. The software will facilitate a true distributed learning environment. Faculty will be able to use Bb to develop multimedia-enriched, web-enhanced courses for the students at Western University, and later expand, extend, and exploit the courses to a wider audience across the world. The new courses will complement the traditional didactic pedagogy at the institution; allow students to access courses anytime, anyplace, and from anywhere; and create a medium through which students can interact with faculty and each other more effectively.
Furthermore, OI2T has acquired a suite of software development tools called WebSphere to develop the University’s Portal and Intranet, and to link Bb and Banner 2000. This is in concert with OI2T’s strategy to bridge the gap between the traditionalists who segregate academic and administrative computing, and alleviate the virtual wall between faculty and administrators in this new era of e-learning and e-business.

As planned, OI2T successfully recruited a Director for Network Operations, a webmaster, and a web developer. In addition, and in line with the University’s new business strategy outlined in the OI2T’s Strategic Plan, also recruited were the following: database administrator, curriculum and instructional technology integrator, user support specialist, telecommunications administrator, project manager, and assistant project manager for implementation of Banner 2000.

In the middle of the fall semester 2000, a major change was effected in User Support Services, in response to the perception that Information Technology was not managing service calls well. User Support and Network Operations were combined into a new Technical Support Services, with new leadership and new software. This software provides for the individual tracking of all calls and e-mails received by Technical Support, including a confirmation to every caller/writer that the work has been completed (and if not completed expeditiously, when it will be completed). At the time of the writing of the self-study, the system had been in place for approximately five weeks, and over 830 requests for assistance had been received. Less than 10 of those requests remained to be filled.

At the end of Fall 2000, a second reorganization took place: the areas of web development and multimedia were combined with distance education to form the Instructional Technology and Distributed Learning Department. This move recognizes that all media forms are going digital, and integrates the resources of three separate departments under a single umbrella. As a function of this move, the overall IT area was renamed as well, to Information and Instructional Technology (I2T).

Finally, a survey of user needs and perceptions will be conducted during the beginning of the spring semester, with the expectation that these data will be available for review by WASC evaluators during the March visit.

IT is considered to be the fastest growing industry in the United States, with ever faster emerging new technologies, some of which are more robust and cheaper, and have greater performance and wider capabilities than their predecessors. New products are launched within a very short time span, which makes it extremely difficult for information and instructional technology departments to research and study their imperatives, and introduce them into the organization. IT has created a self-adapting, self-renewing, and instant action information and instructional technology division within Western University, firmly believing that our success will depend upon how quickly we can respond to the new developments and seize the new opportunities (i.e. how to act in zero real time.)

Network Operations Center (NOC)

The Network Operations Center houses the University’s Information and Instructional Technology staff. Currently, all campus buildings are linked to each other
via several fiber optic backbones, with the NOC as its main hub. The resulting campus area network allows all faculty, students, staff, and administrators to log onto the network from all locations on campus. The University’s e-mail server has been configured and implemented, and all students, faculty, staff and administrators have been issued e-mail addresses. A comprehensive website has been completed to facilitate distributed learning activities and to introduce Western University to the Internet audience. The Office of Information and Instructional Technology also supports technology needs for the MSN/FNP program and the innovative learning pods in the College of Pharmacy.

Non-Print Media Production Capability

Western University has an audiovisual production department independent of the University Library. The audiovisual department consists of six professionals who prepare audio, video, slide, and photographic course materials, and presentations for administration and faculty. Student clubs and functions use their services to prepare presentations for community outreach projects.

I2T Planning Goals:

During the course of the 2000-2001 academic year, OI2T should achieve the following:

- Lease laptops to all incoming DO and PharmD students (achieved).
- Provide orientation on the effective use of the laptops to the incoming DO and PharmD students (achieved), support their computing needs throughout the course of their studies at the University, and provide regular training.
- Cable the DO MSI classroom, allowing students to access the University’s network, email, and Internet from the classroom (achieved).
- Assist faculty in developing courses in Bb, and consolidate all Web development activities under OI2T.
- Assure the technical success of the CLER site and Education Scholar projects.
- Upgrade one-third of the University’s workstations.
- Complete the implementation of the Banner 2000 Financial Aid and Finance modules.
- Hire two programmers to support implementation and use of Banner 2000 by functional departments, and one senior network administrator to support the network operations.
- Hire two programmers/applications developers and an e-commerce specialist to further develop the University’s Portal and Intranet, and allow credit card transactions through the website.
- Integrate Banner Web for Students and Financial Aid modules, and bring them online for internal use and use by the outside community.
- Integrate/link Bb and Banner through WebSphere.
- Design and engineer voice, data, and video infrastructure of the new Learning Resources Center, prepare the RFQ, select the contractors, and supervise the implementation.
- Design, engineer, and implement a new server operations room for the campus, and relocate the existing servers and the entire Network Operations Center to the new Learning Resources Center.
Western University Bookstore

The Western University Bookstore is committed to providing the faculty, staff, students, and administrators of Western University with the resources needed to achieve their academic and professional goals. The Bookstore team consists of four members who have over 50 years combined experience working in a bookstore. In academic year 1999-2000, the Bookstore added school supplies, medical equipment, and office products to the inventory management system. This allows inventory to be scanned at the cash register and automatically reordered based on preset minimum and maximum recommendations. It also streamlines buying decisions and helps eliminate overstock situations.

Purchasing office products was added to the Bookstore’s responsibilities this year, enabling departments to shop at their convenience and have more immediate access. Special orders are filled in an average of 4-5 days. This has provided the Bookstore with an opportunity to become familiar with the wants and needs of the University community. Previously, Bookstore services and experience were directed at student needs, but have shifted to the University as a whole. The Bookstore has developed and implemented a monthly raffle, which, in turn, is creating customer loyalty. Our vendors have supported this through the donation of electronic goods, medical equipment, and books.

Bookstore hours have been augmented to enhance student accessibility before and after classes. In addition, the Bookstore opens on Saturdays of weekends when students have classes and are on campus.

Planning goals:

- To finalize the bookstore e-commerce website.
- To add sundries and gift items to the inventory management system.
- To work more closely with the commencement committee, coordinating the distribution of gowns with the announcements.
- To develop a magazine and general book section.

Standard VII – Student Services and the Co-Curricular Learning Environment

Office of Learning Enhancement and Academic Development (LEAD)
The LEAD Office provides academic counseling and referrals to other campus support services for all students on a confidential basis. The Office also administers the Tutorial Assistance Program (TAP), oversees the Summer Anatomy Prematriculation Program, and ensures reasonable accommodation for students with known disabilities. LEAD has collaborated with the University’s Center for Disability Issues and the Health Professions, and is providing transcription, readers, note-takers, and other services to assist students with disabilities. The LEAD Office was incorporated as a major component of CAPE in Spring 2000.

The mission of the LEAD Office is to foster the active role of health professionals and educators in the teaching and training of knowledge and skills necessary for the lifelong learning needs of health care providers. Through a commitment to the humanistic application of health care, the LEAD Office actively promotes the University’s goal of attaining diversity by stressing educational initiatives promoting the health care needs of all segments of the United States’ population.

See Exhibit VII.1 for LEAD Quarterly Report, November 2000.

Educational Process and its Meaning to the LEAD Office

Every student must establish his or her own health profession school; in this school, which must last the learner’s life, the student will be dean, faculty, and student. He or she must never believe that the educational process will end, for if it does, he or she will have not fulfilled his or her mission to serve the public. The LEAD Office must do everything possible to facilitate this process.

Every educational activity the office helps develop or implement must satisfy both the model described above and:

1. Be based on solid principles of adult education.
2. Meet both the perceived needs and the real needs of the individuals, students, and health care professionals who are the office’s clients.
3. Be delivered by faculty enthusiastically committed to the importance of teaching.
4. Be delivered in a high-quality manner that creates the same enthusiasm in the students as the teachers who teach it.
5. Be based on the principle of total quality improvement, which will be a fundamental guiding principle for all members of the educational team.
6. Be evaluated constantly, based on the needs of the clients served.
7. Be based on the concept of the delivery of quality health care in the most cost-effective manner.
8. Must change, based upon the learners and, ultimately, the patients they serve, in a continuous quality improvement manner.
9. Believe that if the LEAD Office helps achieve this quality educational product, our ultimate customers will tell others and us. This is our best measure of success.
10. Finally, the LEAD Office must strive to make a qualitative difference in the United States’ health care system and the delivery of that system to the citizens of the United States.

Goals:
The LEAD Office serves all Western University students throughout their educational programs. Academic counseling, personal counseling, and referrals to other campus support services are confidential.

- **To provide a strong support system for Western University students throughout their years of education.**

  The LEAD office provides a comfortable environment for students to ask questions, and to discover and define their own academic and personal needs, concerns, and strengths. The LEAD Office serves students enrolled in all of Western University’s educational programs.

  The LEAD Office helps enhance student academic performance by providing students with individual counseling and assistance to improve and/or enhance their study skills, reading/writing, test-taking, time management, note-taking, and comprehension/retention skills. Group instruction in these topics is also provided through workshops and seminars. The Office acts as a student advocate, produces letters of support and recommendation, provides advice on preparing for national board exams (COMLEX), assists second-year DO students in establishing faculty board reviews, and provides local referrals for study skill courses for DO students on the five-year curriculum and MPT students on the modified plan.

- **To administer a quality Tutorial Assistance Program (TAP) to ensure advancement of knowledge in the basic sciences and health professions.**

  The Tutorial Assistance Program (TAP) offers supplemental academic instruction for students in academic difficulty. Competent and sensitive peer tutors selected by the faculty from each department facilitate course content instruction. Students are scheduled individually or in small groups to work with a tutor. The LEAD Office works closely with the tutors and tutees during the tutoring process to ensure effective tutoring is maintained, and oversees the TAP budget.

- **To oversee the Summer Anatomy Prematriculation Program (SAPP) and to provide the environment necessary to ensure excellence in education.**

  The LEAD Office coordinates and oversees the SAPP budget, assists the SAPP Director in program planning, and provides students with individual and group study skills instruction. SAPP is designed to orient incoming, first-year medical students to Western University, and to ease adjustment to the demands of their academic environment. Students are encouraged to monitor their own personal and social adjustments as well as their academic progress. The LEAD Office’s efforts enhance students’ sense of belonging by working closely with individual students in overcoming environmental, social, cultural, or academic barriers that may interfere with their learning.

- **To ensure that reasonable accommodations will continue to be provided for students with known disabilities so they can participate fully in Western University educational programs and activities. Western University is**
committed to full compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA).

The LEAD Office provides an individualized academic support system for students with learning disabilities, including effective study techniques, content area tutoring, special exam administration, advocacy, and a network referral system. With the awareness that the number of students with disabilities is increasing and will continue to increase on campuses, the LEAD office, in cooperation with the Center for Disability Issues and the Health Professions, provides faculty workshops and disseminates information to the deans, program chairs, and faculty regarding accommodation of students with disabilities.

- In cooperation with other offices and centers on campus, the LEAD Office coordinates efforts related to training of students, faculty, and staff on topics/skills related to teaching, learning, and other issues.

- The LEAD Office collects, analyzes, and disseminates data, reports, and other documents related to learning and professional development through conferences, handouts, and publications.

Counseling

One of LEAD’s major responsibilities is to counsel students regarding their learning and study habits and skills. Over the past academic year, the Director of LEAD has had individual counseling appointments with students covering a range of problems. On a weekly basis, five hours were spent in individual student meetings. The following table breaks down these sessions by number of students, college attended, and total hours spent counseling.

<table>
<thead>
<tr>
<th>College</th>
<th>Number of Students</th>
<th>Number of Sessions</th>
<th>Average Number of Sessions Per Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>MS1</td>
<td>36</td>
<td>36</td>
<td>102</td>
</tr>
<tr>
<td>MS2</td>
<td>17</td>
<td>7</td>
<td>24</td>
</tr>
<tr>
<td>MS3</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>MS4</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>PA</td>
<td>15</td>
<td>6</td>
<td>30</td>
</tr>
<tr>
<td>PT</td>
<td>10</td>
<td>3</td>
<td>17</td>
</tr>
<tr>
<td>PharmD</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>TOTALS</td>
<td>78</td>
<td>55</td>
<td>176</td>
</tr>
</tbody>
</table>

*MS1 = COMP Year 1; MS2 = COMP Year 2; MS3 = COMP Year 3; MS4 = COMP Year 4; PA = Physician Assistant; PT = Physical Therapy; PharmD = Pharmacy

These numbers reflect two points. First, students are consistently coming in to ask for counseling, but for fewer sessions. Second, students from the PharmD program, as well as third- and fourth-year medical students, are now coming in for assistance.
Another duty that takes considerable time and effort is coordinating the Tutorial Assistant Program (TAP). This entails recruiting and training tutors, arranging for assignment of tutors, and completion of paperwork for payment of tutors. The table below shows the number of students tutored by college, the average number of hours tutored per student, the total number of hours tutored, the number of tutors, and the costs for tutoring. The information in the following tables covers the period from August 1, 2000 to November 15, 2000.

### Tracking of Student Tutoring Hours

<table>
<thead>
<tr>
<th>Number of Students Tutored</th>
<th>Average Number of Hours Tutored</th>
<th>Total Hours Tutored</th>
<th>Number of Tutors</th>
<th>Cost of Tutoring At $9.00 Per Hour</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 DO Students (2003 &amp; 2004)</td>
<td>17.08</td>
<td>290.30</td>
<td>17</td>
<td>$2,747.25</td>
</tr>
<tr>
<td>1 PA Student</td>
<td>6.00</td>
<td>6.00</td>
<td>1</td>
<td>$54.00</td>
</tr>
<tr>
<td><strong>GRAND TOTALS</strong></td>
<td><strong>18 Students</strong></td>
<td><strong>16.46</strong></td>
<td><strong>18</strong></td>
<td><strong>$2,801.25</strong></td>
</tr>
</tbody>
</table>

There are two ways for students to work with a tutor—one-on-one or in small group tutorials. One-on-one tutoring is reserved for students in academic difficulty (GPA below 2.0) who have been referred for tutoring by a member of the faculty or administration. Small group tutorials implemented in Fall 2000 are open to marginal to fair students (GPA of 2.0 to 2.8), and are held at scheduled times each week. Literature on student learning suggests that small group work can be most effective to enhance student learning. The group tutorials are presently structured for COMP students only; however, based on feedback and evaluations of the process, LEAD plans to develop group tutorials for the MSPA and MPT students.

Group tutoring is necessary for two reasons: 1) there often are not enough qualified tutors to work with students one-to-one, especially students who are marginal but not failing, and 2) it is cost effective to use one tutor to work with three or four students as they are paid the same rate for tutoring, and these students can then develop skills to work together in a group. As the tutors conduct the sessions, the other students can observe how the tutor analyzes the subject matter and the methods they have used to understand and retain it. This process is reinforced further by the dynamics of the self-study group model, which encourages discourse and interaction among the students.

### Tracking of Group Tutoring

<table>
<thead>
<tr>
<th>Number of Students in Group</th>
<th>Average Number of Hours Tutored</th>
<th>Number of Weeks Groups</th>
<th>Number</th>
</tr>
</thead>
</table>
### Tutorials

<table>
<thead>
<tr>
<th>Tutorials</th>
<th>Subject(s) Tutored</th>
<th>(per week)</th>
<th>Held</th>
<th>of Tutors</th>
</tr>
</thead>
<tbody>
<tr>
<td>80 MS1</td>
<td>Biochemistry, Microbiology</td>
<td>2</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>15 MS1</td>
<td>Anatomy (Lab)</td>
<td>5</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>35 MS1</td>
<td>OPP (Lab)</td>
<td>3</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

**COMLEX Course**

The University determined that there was a need to provide DO students with some form of review for the COMLEX exam. This need was met by offering a special COMLEX workshop and providing an on-campus, three-week content review course conducted by Kaplan Medical. This course was offered for the first time in Spring 2000. The impact of this special review process is being determined through analysis of scores achieved by this year’s students as compared with the scores of students from previous years. Student feedback was very positive, both during the course itself and after the COMLEX exam. Western University has received a summary of the course evaluations from Kaplan for review. The evaluation process also identified areas of the curriculum that Western University students felt had not been covered fully in their instruction. These are being included in the curriculum review and revision process.

In addition to the COMLEX, students in the other colleges must pass their requisite licensing exams. LEAD will hold special workshops, in cooperation with the faculty of the other programs, on how to study for these exams. These will include pointing the students to the FNP and PA-CLER sites, etc. (see Standard V).

**Grants**

The LEAD office applied for and received funding on two small grants in support of student learning assistance services, funded by the State of California. The Director continues to seek extramural support, and is currently working with the Department of Grants, Research, and Contracts Administration to apply for a federal Health Careers Opportunity Grant (HCOP) in January 2001. The grant will target K-12 students in the Pomona and Colton school districts, undergraduate students at Cal Poly Pomona, and Western University students for recruitment and training programs. The objective of the programs will be to make students more competitive as applicants to a health professions school, as well as more successful once admitted.

**Workshops**

In Fall 2000, the Director of LEAD held a series of small workshops on study skills for each of the colleges. Attendance at the workshops varied by college, but averaged approximately 10-15% of the entering class for each college. These were considered pilot workshops, to help determine student problems and the learning needs of each college. Based on these experiences, additional workshops have been developed to meet the needs of students.

**Recruitment**

The LEAD Director continues to work closely with the admissions and recruitment offices. The two grants received from the State of California, mentioned previously, are specifically related to admissions and recruitment. One grant provides
for a reapplicant conference, which will be held in April 2001, for students reapplying to medical school, and the other grant will help to expand the Osteopathic Awareness Conferences to include all of Western University’s colleges. The first conference was held on November 4-5, 2000, and the second conference is planned for Spring 2001. A total of 145 students, the majority of whom are disadvantaged/minority students, attended the November conference.

5-Year Program Summer Study Skills Course

A special Summer Study Skills Course was taught during Summer 2000 for students on the 5-Year Program. Twelve students attended the course. The primary goal of the Summer Study Skills Course is to equip students with the tools to enable them to become independent learners. Course objectives include helping students develop:

- The ability to set short-term and long-range goals, and to design a plan of study that leads to short-term goals.
- Techniques for building comprehension and retention.
- Note-taking techniques for reading and listening.
- Knowledge of learning strategies, and techniques to improve memory retention and understanding of how people learn.
- Skills in following instructions, search techniques, types of learning and use of feedback.
- Knowledge of effective test review and test-taking techniques.
- Good study habits and create appropriate study environments.
- Techniques in combating forgetting.
- Knowledge of stress management techniques.
- Understanding of how the memory works and where the memory principles fit into the process.
- Understanding of the importance of taking notes.
- Strategies for taking effective notes from lectures, and how to process lecture material into long-term memory.

All students completed the course successfully, with passing grades. The course was evaluated by the students, and received an overall 4.6 on a five-point scale for meeting course goals effectively. The instructor, the LEAD Director, received an overall 4.94 out of a possible 5 for effectiveness, content, and teaching ability. Student progress is being monitored, and the program will be modified as needed.

Center for Disability Issues and the Health Professions (CDIHP)

The mission of the Center for Disability Issues and the Health Professions (CDIHP) is to enhance health professions education and to improve access for people with disabilities to health, health education, and health care services. The primary goals of the Center are as follows: 1) to improve health professionals’ understanding of the whole person with a disability, through the development of a curriculum that is integrated into the students’ education at pre- and post-graduate levels; 2) to increase the number of qualified health professionals with disabilities through development and implementation of a recruitment program and University support services; 3) to develop and deliver training for people with disabilities regarding effective access, use, and
communication so that they may become active participants in their health care; and 4) to develop and distribute research on community-based health education, prevention, and health care services for persons with disabilities.

The CDIHP was established in January 1999, with $52,000 in community contributions and a funding commitment from Western University. In March 1999, the Center received a $670,000 grant from The California Endowment to continue to develop and implement curricula that will assist health professionals in better serving persons with disabilities. The Center has entered into a partnership with UC Irvine to develop a lecture series on disability issues in health care for family practice and gerontology residents at the University of California, Irvine Medical Center. CDIHP staff also visited the University of Montana in October 2000 to discuss potential collaborations in disabilities education.

CDIHP has developed working relationships with the disabled student services offices at UC Berkeley; California State University, Long Beach; Cal Poly Pomona; and Pomona College.

In the 1999-2000 year, CDIHP provided support services to 31 Western University students and eight Western University staff members with disabilities. The Center also completed a disabled students handbook and established guidelines for integrating disability topics into the University’s curriculum and clinical experiences.

In Spring 2000, the Center offered a survey class on disability issues for the health professional, in conjunction with the Master of Science in Health Professions Education program (see Exhibit VII.2). The course included modules that will be presented to MSN/FNP students in January 2001, and curricula that will be utilized in Western University’s other educational programs.

This year CDIHP conducted workshops for Los Angeles county workers who oversee in-home support services for persons with disabilities and families of children with significant disabilities. A workshop was presented for the National Association on Aging, and a survey was distributed to 400 primary care physicians in California regarding their knowledge and experience when treating people with physical disabilities.

The Center’s goals for the coming year include revising and updating the survey class on disability issues for the Spring 2001 semester, and finalizing and offering an online version of the class by June 2001. CDIHP will also be developing an online course for the PA Department and the College of Graduate Nursing, and a section for the DO program on the topic of physical exams for persons with disabilities. The Center will be continuing its efforts to integrate educational materials relating to disability issues into the University’s didactic and clinical programs, finalizing the next grant application for The California Endowment, and submitting proposals to other private foundations to support Center projects and programs.

Other activities planned for CDIHP for the future include the following: design and implementation of a student recruitment program for qualified applicants with disabilities, identification and incorporation of assistive technology, and providing assessment and training for students with disabilities in the use of computer technology as an accommodation. The Center will continue to coordinate support services for disabled
students, faculty, and staff at Western University, and will be developing and delivering educational programs for people with disabilities and their caregivers.

The Center will also be updating and expanding its website to include such topics as questions and answers related to “how to be a savvy health care consumer.” CDIHP plans to develop a listserv, which will enable people with disabilities and their families to have updated information on current health, wellness, and long-term care issues.

The Division of Student Affairs

Mission

The mission of the Division of Student Affairs (DSA) is to provide and facilitate programs and services for all medical and health profession students at Western University. Services provided by the Division of Student Affairs are woven into the fabric of the University from pre-admission through graduation. The Division of Student Affairs fosters partnerships among students and the University community.

The Division of Student Affairs is well organized and managed, and remains highly regarded by students. There is an open-door policy, and staff members are available to counsel students.

Based on recommendations from the previous WASC site visit, the Division of Student Affairs coordinated a revision of the Student Handbook. There is one handbook section that applies to all students across all programs, eliminating the need for repetition across program handbooks. Each program has a separate section detailing policies and procedures unique to its program. The Student Handbook has been placed on the University’s Intranet for ease of access by students, faculty, and administration. As the Faculty Handbook is being reviewed and revised this academic year, the new Student Handbook will be reviewed to ensure consistency between handbooks.

There is still little need expressed by students for a career placement office. Each program has its own means of placing students in clinical rotations; faculty members and rotations offices serve in career advisory roles.

One area of student concern remains the lack of a variety of food options on campus. Since the last site visit, the Campus Gourmet has opened with a Subway sandwich shop, a pizza restaurant, and a yogurt/ice cream shop. This is in addition to the vending areas on campus, the Bookstore’s provision of snack foods, and the lounges in which there are refrigerators and microwaves for student use. In addition, student groups do, on occasion, sell a variety of foods during lunch (primarily to raise money for club activities). However, results of student surveys indicate a persistent desire for a cafeteria that serves a variety of healthy foods. The possibility of attracting such an entity is being explored as part of the University Village project (see Standard II). Housing for students is also being explored as part of the University Village project.

In the last site team’s report, a recommendation was made to “review the annual fall report regarding student profiles to ensure standard, consistent, comparable data portrayal for each school and clarity of labels…” Since the review and through the Strategic Enrollment Management and Admissions Process Review activities, all reporting and documentation regarding all aspects of the recruitment and admission
processes have become standardized and more professional. In addition, with the implementation of the Banner 2000 information system, all such reports will be standardized automatically and are more accurate because of the nature of the system. Finally, with the Office of Institutional Effectiveness taking over keyholder responsibility for the IPEDS reporting (see Standard II—OIE), another level of quality control of such data has occurred.

The Division of Student Affairs includes:

1. Office of Student Affairs
2. Office of the Registrar
3. Office of Recruitment/Strategic Enrollment Management (see Standard II)
4. Offices of Admissions—College of Osteopathic Medicine of the Pacific; Colleges of Allied Health Professions, Pharmacy, and Graduate Nursing

The Division of Student Affairs is located in the Student Services Center (SSC) on the south side of the campus. The Office of Financial Aid, which reports to the Vice President of Finance and Business, is also located in the SSC, which allows easy access to the full complement of services for Western University students.

The Division of Student Affairs strives to be an advocate for students, while consistently applying student policies, procedures, and services for all students. Staff within each office work closely with applicants, students, administrators, faculty, and staff within each academic program. There is collaboration campuswide on various programs, including Strategic Enrollment Management, Orientation, Registration, Getting Ready Weekend, White Coat Ceremony, Convocation, Commencement, Honors Day, Graduate Awards, and Parents Day. Over 37 diverse student organizations and a Student Government Association are strengths of the University’s campus culture. These groups provide opportunities for extracurricular activities, leadership development, social interaction, and a voice in institutional governance for all students.

Student handbooks are revised and published annually, and are available on the Western University website (www.westernu.edu). One vehicle for campuswide communication is the Campus Commotion, a monthly newsletter distributed to students, faculty, and staff (see Exhibit VII.3).

Fitness center memberships are provided free of charge to all Western University students, to support and promote physical activity and wellness. Student health services and psychological counseling are also available to all students as needed.

The Student Affairs Division has been involved in two major process improvement projects over the past year: the implementation of a new computer database system SCT Banner 2000, and the development of a Strategic Enrollment Management plan. Both processes have been a primary focus of the staff in Admissions, Recruitment, Registrar, and Student Affairs offices. Involvement and implementation of these process enhancements will ultimately improve the way in which students’ needs are met.

Achievements toward meeting the immediate 1999-2000 academic year goals:

- Hire a new Assistant Dean of Admissions and Enrollment Management by September 1, 1999. There was a change in strategy so that rather than hiring for this position, a Strategic Enrollment Management consultant was contracted to
work with the current staff for one year. Detailed goals and accomplishments are included in the Strategic Enrollment Management section (see Standard II).

- Hire a Director of Learning Enhancement and Academic Development by September 1, 1999 (LEAD moved to the Center for Academic and Professional Enhancement in Spring 2000). This goal was met. Mr. Dave Hacker was hired to reorganize and direct the programs in the LEAD Office. Mr. Hacker brought a variety of talents, skills, and experience to the position, which have benefited faculty and students across the University. The Lead Office has been consolidated with the Center for Academic and Professional Enhancement, as there was opportunity for synergy between the two units, and because of the interconnectedness between teaching and learning (see Standard V—CAPE).

- Restructure the Office of Learning Enhancement and Academic Development. Establish a more collaborative working relationship between the Center for Disabilities in the Health Professions (CDIHP) and LEAD. Although the LEAD Office was moved to a new division on campus, the goal of establishing a more collaborative working relationship with the Center for Disability Issues and the Health Professions was met. The protocol for assisting students with physical and learning disabilities was redesigned, published in the Student Handbook, and communicated to students needing services from either.

- Redefine the position of Director of Student Development. This goal was met, as the Director’s job description was rewritten and defined to accurately reflect the responsibilities of this position. The primary focus of this position is to coordinate, advise, and ensure compliance of the activities of student organizations and SGA. Yearbook advisement, Parent Support Group, and some orientation-related activities are also within the scope of this position.

- Student Affairs, Admissions, and Recruitment/SEM have begun working on several projects with the Office of Strategic Planning and Institutional Effectiveness to evaluate various programs and activities. Program changes have been and will continue to be implemented based upon the evaluation of the following:
  - COMP admission process
  - Osteopathic Medicine Awareness Conferences
  - Orientation
  - Registration
  - Convocation
  - Recruitment

Changes and improvements are included throughout each individual unit section below.

- Develop a Strategic Plan by March 2000. The completion of this goal has not been met. However, a more solid foundation has been established for planning and evaluation within the Division. This will allow for development of a clearer and more realistic plan during the 2000/2001 academic year.
### Student Affairs Achievements

<table>
<thead>
<tr>
<th><strong>SCT Banner Implementation</strong> – SCT Banner is a new database management system for the University.</th>
<th>The first module implemented was for Student Affairs, Admissions, Registrar, and Recruitment. The implementation involved 11 months of additional hours and training time for all staff in the division. A successful Mock Registration was held on April 27-28, 2000, with “live” registration completed on June 5, 2000.</th>
</tr>
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<tbody>
<tr>
<td><strong>Publication of Monthly Campus Commotion Newsletter</strong> – The <em>Campus Commotion</em> is a Student Affairs newsletter distributed campuswide and to students off campus.</td>
<td>Ten issues were published between September 1999-June 2000. Publication continued for the 2000-2001 academic year.</td>
</tr>
<tr>
<td><strong>Revision of Student Handbook</strong></td>
<td>University policies and procedures were developed in collaboration with all academic deans and program chairs. A Student Handbook retreat was held on May 6, 2000 at the Claremont Faculty House to revise the 2000-2001 student handbooks, which are available to students on the Western University website (see <a href="http://www.westernu.edu">www.westernu.edu</a>). The revision of each handbook has been completed, and all were posted on the University website before Convocation in August 2000.</td>
</tr>
<tr>
<td><strong>Commencement Awards and Commencement Programs</strong></td>
<td>These awards and programs were completed for all academic programs.</td>
</tr>
</tbody>
</table>
| Fall 2000 Orientation Planning | Planning with academic deans, program chairs, the Office of Information and Instructional Technology, LEAD, and CAPE to develop a more comprehensive interdisciplinary and program-specific orientation for all new students was successful. Topics covered in the orientation programs include:  
- Introduction/overview of each academic program at Western University  
- Professionalism and ethical issues  
- Harassment (sexual, other)  
- Academic integrity  
- Library orientation  
- Hands-on computer training  
Each program will be responsible for program-specific orientation.  
Evaluations were completed for both the interdisciplinary and program specific-orientations (see Exhibit II.4) |
<p>| Military Dine-Out Commissioning Ceremony | Student Affairs worked with a planning committee of military students to coordinate the ceremony scheduled on May 31, 2000 at Mountain Meadows Country Club in Pomona. This will become an annual event honoring military graduates. |
| Basic Cardiac Life Support Training (BCLS) | Contracts were finalized for BCLS Training for all incoming DO, PA, and PharmD students. DO and PA observers will be present, and evaluations will be collected at the end of the training. |
| Fitness Center Memberships | Contracts have been negotiated and finalized for fitness memberships for all students. This program will need further evaluation before entering into another contract. The major change for this academic year is that students in the Las Vegas track will receive a refund to cover the cost of the fitness fee, as the program is not available for students on rotation in Las Vegas. |
| Student Government Association (SGA) | New officers were elected for the 2000-2001 academic year. |</p>
<table>
<thead>
<tr>
<th>Class Officers</th>
<th>Elections were held for class officers for PharmD and DO classes for the 2000-2001 academic year.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yearbook</td>
<td>Yearbook: Graduates receive complimentary yearbooks after commencement. Plans are under way for the 2000-2001 yearbook.</td>
</tr>
<tr>
<td>Student Organization Reports</td>
<td>Year-end reports were received from 37 active student organizations (see Exhibit VII.4).</td>
</tr>
<tr>
<td>Student Organization Directory and Handbook</td>
<td>Student Organization Directory and Handbook have been revised for the 2000-2001 academic year (see Exhibit VII.5).</td>
</tr>
<tr>
<td>White Coat Ceremony</td>
<td>White Coat Ceremony: Incoming students participate in a ceremony in which they don white lab coats and recite a pledge of commitment toward becoming competent and compassionate health care professionals. The ceremony is coordinated twice each year (August and January) during orientation. A new format has been planned to promote greater student and family attendance.</td>
</tr>
<tr>
<td>Honors Day</td>
<td>Honors Day: This ceremony is coordinated annually by DSA for all academic programs and was held on April 10, 2000. There are 25 awards for DO, 9 awards for PA, 9 awards for MPT, 6 awards for MSN/FNP, 8 awards for PharmD.</td>
</tr>
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</table>

**Office of Student Development**

The Office of Student Development is a unit of the Division of Student Affairs. The Director of Student Development reports directly to the Dean of Student Affairs. The Office oversees student life other than academics on campus. It is directly responsible for the following services:

- Getting Ready Weekend
- Student Government Association
- University Student Associations and Organizations
- Student Association and Organization Handbook and Directory
- University Yearbook
- Parent Support Group

**Getting Ready Weekend**

Getting Ready Weekend (GRW) was held July 24 –25, 2000 at Alpine Conference Center located in Blue Jay, California. Getting Ready Weekend is an off-campus retreat held for incoming students prior to the commencement of classes, to acquaint them with their classmates, students from other programs, and second-year students. It is administered by the Division of Student Affairs and is hosted by the second-year DO, MSPA, and PharmD students. Although attendance is not mandatory, students are encouraged to attend and to bring their friends and family.
Students gain valuable information on how to “survive” their first year at Western University. There are informative workshops on curriculum, stress management, financial aid, and academic support services. In between workshops, students are engaged in interactive recreation, and there are separate activities planned for the spouses and parents of students.

A total of 150 incoming DO, PA, and PharmD students, including family members, attended the weekend: 73 incoming DO students, 30 incoming PA students, 13 incoming PharmD students. Twenty second-year students from the three programs served as GRW coordinators and also attended the weekend. Eight members from the faculty, administration, and staff attended, and one parent from the Parent Support Group (PSG) attended. The PSG contributed $1,350 for the 20 second-year students to attend the weekend at no cost to the students.

According to surveys, students rated the weekend as excellent. Students stated that they enjoyed the recreational activities because the weekend was interdisciplinary and allowed them to meet students outside of their program. Many students stated that the weekend allowed for a smoother transition during the first week of school. Constructive comments detailed the need for more participation from faculty members and alumni, and more activities for spouses. Scheduled activities on Sunday afternoon after lunch were not well attended. A low number of Pharmacy students attended the weekend.

Goals for the future include to increase participation from the Pharmacy student body by conducting a phone-a-thon and to develop more planned activities for spouses by working closer with the Complements Organization for spouses and significant others.

**Student Government Association**

The Student Government Association (SGA) was unique this year, as there were two students who held the SGA President office successively. SGA was successful in planning and organizing the annual Halloween Party. The annual Extravaganza and Talent Show was also successful. Students were very vocal this year and participated in Board of Trustees meetings, Parent Support Groups, and Strategic Planning meetings. Students also welcomed faculty and administrators to attend SGA meetings. Communication between the SGA executive officers and the Director of Student Development was excellent. The Senate ratified a Community Outreach student coordinator for community programs. Agendas and minutes were always prepared in a timely manner. Various SGA committees need to be formed and plans are under way.

Goals for the coming academic year are to break the student senate up into smaller committees at the first SGA meeting, ratify revised bylaws at the first SGA meeting, train new SGA executive officers on Robert's Rules of Order, have agenda setting meetings with SGA executive officers prior to meetings, and create time limits for agenda items.
University Student Organizations and Associations

**Student Organizations**

The University is currently home to approximately 37 active student clubs and organizations, reflecting continued student enthusiasm with and involvement in professional development, leadership, and community service and partnership. The University's drama club SANUS (Latin for "soundness of mind, emotions, and behavior") directs and performs plays, including Fall 1998's *A Midsummer Nights Dream*, 1999's *Ten Little Indians*, and 2000's *Cactus Flower*. Other active student organizations include California Doctors Out to Care (Cal-DOC), which sponsored an anti-smoking poster contest for elementary school children in conjunction with a visit to Western University by former U.S. Surgeon General C. Everett Koop; the Pomona Community Health Action Team (PCHAT); and the International Medicine Club (IMC). PCHAT and IMC provide free health screenings to citizens in Pomona and in Tijuana, Mexico under the supervision of licensed physician faculty members and other health care professionals.

All organizations/clubs are open to all students on campus. The organizations/associations can be placed in four categories: academic, cultural, religious, and fine arts. The DO program is involved in the majority of the organizations. There are monthly meetings with the organization presidents, the SGA Organization Coordinator, and the Director of Student Development.

Monthly meetings create a forum in which the organization presidents can exchange ideas and discuss problems that they may be having in planning/organizing an event. Organization presidents were more informed about University policy this year. Organizations generated their own funds rather than depending solely on SGA. Student organizations allow for community outreach programs (PCHAT, CAL-DOC, AMWA-NOWPA, APHA-ASP). The organizations bring cultural and religious awareness to campus. Student organization members are given the opportunity to display their leadership qualities. The organizations are an avenue for students to take a break from the rigors of academics.

Goals for the coming year include assigning a student to be a recording secretary at all meetings, revising the student organization sanction policy so that organizations lose a percentage of allotted SGA funding for each meeting missed, and following up with faculty advisors to ensure they are aware of club activities and efforts.

**Student Association and Organization Handbook and Directory**

The Student Association and Organization Handbook is designed, created, and published annually by the Director of Student Development. The Student Association and Organization Directory is updated twice each year. It contains a list of student officers' names and program. The purpose of this directory is for all Western University students, administrators, staff, and faculty to know the officers for each club (see Exhibit VII.5).
University Yearbook

The 1999-2000 yearbook theme is “Strength in Diversity.” Seven hundred fifty books were ordered. Total publication cost is estimated at $30,000.

The yearbook enhances creativity, teaches students to work with students from other programs, and allows students to interact with faculty, administration, and staff. Working on the yearbook strengthens writing skills. Yearbook staff members were able to generate some money by charging $5.00 to graduating students who wished to include a personal quote and photograph in the book. Working on the yearbook is a time intensive project, and although students participate, it is difficult for them to complete tasks on time due to exams and school projects. Production of the yearbook is costly to the University.

Goals for the coming year include working together with Multimedia, Publications, and Taylor Publishing Company in reviewing options to make the book less expensive while maintaining its professional appearance.

Parent Support Group

A support group consisting of Western University parents has assistance to students as its main focus. Activities such as the tutorial program, Getting Ready Weekend, Extravaganza, the University Yearbook, class/club activities that support the entire student body, and Parents Day are part of this group’s activities. The Kretchmar endowment supports the tutorial program. Interest earnings from the Bob Turull Emergency Loan Fund, which was established by PSG and awards $1,000 loans to students, are very helpful.

During academic year 1999-2000, six additional parents participated on a regular basis at the quarterly meetings. Four parents represented the students in the PA program and two parents represented the DO program. PSG was more visible to students this year. Students utilized the PSG for many campuswide activities. The sale of t-shirts at the Parents BBQ generated over $500. Parents were also active in the PA Health Fair and attended the 2000 GRW. The Development Office sent out calendars to the parents as a fundraiser and generated $910 for the group. The parents have voted to use this money for a tutorial program that will serve all students attending Western University. They will be working with the LEAD Office to develop this idea further. Although meeting participation increased by six members, attendance in PSG activities is still low. A new president and secretary were elected at the September 2000 meeting.

Goals include increasing visibility by hosting a campus event, such as a philharmonic group performance. In addition, the group plans to continue to invite local parents to attend meetings to increase participation. PSG intends to work with the Director of LEAD to create a program to utilize the $910 in donations for the Student Skills Enhancement Program. They will create a directory consisting of e-mail addresses and phone numbers of active parents so that information can be sent to them efficiently and effectively. Finally, the PSG will explore the idea of a joint activity or meeting with the Complements Group, to explore additional ideas for providing support to students attending Western University.
### Office of the Registrar

#### Achievements

<table>
<thead>
<tr>
<th>Registration</th>
<th>Registration was conducted for DO, PA, PharmD, MSN/FNP, and MSHPE programs. Enrollment Status Reports and Summaries were distributed campuswide (see Appendix VII.1).</th>
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<tbody>
<tr>
<td>Banner 2000 Training</td>
<td>The Registrar and Student Affairs staff members have completed “End User” training on Banner 2000. First-time entering students for Fall 2000 have been registered using the new unified database system.</td>
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<tr>
<td>Commencement Programs</td>
<td>Grade audits and verifications of credentials and degrees were completed to prepare the 2000 commencement program.</td>
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<tr>
<td>Diplomas</td>
<td>Diplomas for graduates were distributed at Commencement. An appropriate contract was established with a new diploma printing company. The cost saving per diploma is over $100.</td>
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<tr>
<td>Other Services</td>
<td>The offices of Student Affairs and the Registrar continue to provide the following services in addition to the ones described in this report:</td>
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<tr>
<td></td>
<td>• Academic Records—Transcripts, Class Rankings, Enrollment and Degree Verification</td>
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<td>• Military Reimbursements</td>
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<td>• Loan Deferments</td>
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<td>• Student Health Insurance</td>
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<td></td>
<td>• Western Interstate Commission on Higher Education (WICHE) Reports</td>
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<td>• Getting Ready Weekend</td>
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<td>• Portion of University Catalog</td>
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<td>• University Polices and Procedures Section for University Student Handbooks</td>
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<td></td>
<td>• Campus Commotion (monthly newsletter)</td>
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<td></td>
<td>• State, Federal, and Program Enrollment Reports</td>
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<td></td>
<td>• University Enrollment Reports</td>
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<td>• Surveys for Numerous Publications</td>
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<td></td>
<td>• Student Directories</td>
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<td>• Student Grade Reports</td>
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</tbody>
</table>
Goals for the Division of Student Affairs 2000-2001

- Establish a Student Affairs Council by September 2000. The council will be comprised of one student representative and the Student Services Administrator for each college, who will work collectively on university-wide student-related programs and activities. This council will also serve to enhance communication across academic programs.
- Hire a University Registrar by July 1, 2000 (achieved). Create a separate Office of the Registrar.
- Provide 2000-2001 University student handbooks on the Western University website (achieved).
- Reorganize orientation and registration week for Fall 2000 and for the future. Changes will include timelines, program content, small group sessions, and evaluation (achieved).
- Develop a unit strategic plan by March 2001.

In the Division of Student Affairs, students are the priority. Staff members are committed to providing seamless services to students in a courteous, professional, and timely manner. However, resources, specifically budget and Registrar Office staff, were
less than adequate. These resources have not increased to accommodate the steady
growth in enrollment over past years. Student Affairs is a centralized service of the
University and is impacted significantly by growth in student enrollment and in the
number of alumni. Services to alumni, such as degree verifications and transcripts, are
provided by Student Affairs and Registrar’s office staff.

The implementation of SCT Banner 2000 Student Module required a tremendous
amount of staff time. Although assistance was offered late in the training process, the
early identification of needed assistance was not met. This created voids in offices,
particularly in the Office of the Registrar, and required other staff members to work
overtime to keep other essential functions running. Staff morale was low at times, but
employees were committed to being successful. Implementation of future SCT Banner
2000 modules, hopefully, will provide more support as a result of learning experiences
from the Student Module implementation.

Office of Admissions

The Admissions Office recognizes its mission-related responsibilities to recruit
and admit students who will become compassionate health professionals providing care
to a multicultural society. The University enrolls a diverse and balanced student body
reflecting the communities we serve (see Part D, Demographic Information).

The Admissions Office processes between 2,500 to 3,000 applications to the DO
program each year, and has streamlined its application management efforts across all
academic programs (see Application Statistics, Appendix VII.2). Between 1993-1994
and 1998-1999, the percentage of underrepresented minority students applying to and
enrolling in the University’s DO program increased by 8.2%—the largest increase of any
medical school in California, according to the April 1999 issue of The New Physician
magazine. In 1999-2000, the Division of Student Affairs implemented a Strategic
Enrollment Management process and engaged in a process improvement activity to
continue to strengthen its application management efforts (see section on SEM in
Standard II).

In addition, the Office began to develop and implement a College of Allied Health
Professions recruitment program, and to invite 25 students from each academic field to
participate in the Admissions Student Ambassador Program to respond to admission
inquiries, provide campus tours to interviewees, and serve on information panels. The
Admissions Office is developing an interactive website to enhance communication with
applicants, and to promote and strengthen programs and services.

In previous years, communication with applicants during the admission process
was somewhat limited. As a result, the University received a number of phone calls
from applicants regarding their status. Last year, two new procedures to increase
communication during this timeframe were implemented: 1) Applicants were notified by
postcard, phone call, or e-mail when their file was processed, informing the applicants of
their status at that time. This allowed applicants time to respond to our correspondence
if necessary. 2) The application files were monitored on a monthly basis, and status
letters or e-mails were sent as needed. In addition, all telephone messages were
returned within 48 hours and written correspondence was answered within one week.
These new procedures decreased the number of applicant phone calls significantly.
In previous years, the application deadline for the Pharmacy program was February 1. The application processing time is about six weeks with four admissions staff. Because of the amount of time necessary to process applications, acceptance letters were mailed in May. This put Western University at a disadvantage with other pharmacy schools that mailed acceptances at an earlier date. To decrease processing time, Western University changed the application deadline date to December 1, and hired four temporary staff from the end of November to the end of February to assemble and process incoming applications. This allowed the current staff to begin calculating GPAs two weeks earlier than usual. Staff members were able to process 50% of the files and prepare them for review by the Pharmacy Admissions Committee by the middle of December. Interviewing began earlier (end of January) and the first group of acceptance letters was mailed at the beginning of February. The remaining files were calculated and ready for review by the middle of January, and interviews were scheduled for February. All letters of acceptance were mailed by March 1. With strong support and open communication with the Pharmacy Admissions Committee chairperson, Admissions staff members were able to meet the processing goal successfully.

Currently, there are five Admissions staff members supporting the admission process for the PA, MPT, MSHPE, PharmD, and MSN/FNP programs. These positions include the Director of Admissions, one secretary, and three admissions assistants. The staff continues to be a strength in this area of admissions. They have the ability and skills necessary to process applications efficiently for multiple programs. Their organizational skills, attention to detail, and ability to communicate effectively with applicants are essential to the evaluation of academic coursework and calculation of GPAs. Their dedication and skills enable the Admissions Office to process applications in an efficient and timely manner. With the addition of two University recruiters, along with the implementation of SEM, the Admissions staff has been able to focus on the needs of the Allied Health, Pharmacy and Graduate Nursing programs. This has enabled the University to increase communication with prospective applicants and, in turn, increase the University’s applicant pool.

There is, however, a shortage in the number of staff necessary to process applications simultaneously for all programs that matriculate in August. Once again, there is a plan to hire four temporary staff to meet processing needs for the upcoming academic year. This allows the admissions assistants to process files, communicate with applicants, and calculate GPAs in a timely manner. The limited knowledge of INS policies, laws, and regulations is also a weakness in this area of admissions. With the increasing number of international applicants, there is a need to be able to assist them with questions and the necessary documentation required for INS.

Office of Admissions Goals for 2000-2001

- Assure that all work is in alignment with the SEM process.

  - This process will increase communication and develop better methods of keeping prospective applicants informed about Western University. This process involves the entire University, and can be accomplished by continuous communication between Admissions, recruitment, and all program chairs.
• Eliminate the delay in providing updated admissions materials after each application.

- With the implementation of SEM, there is a better understanding of the need for updated admissions materials to be available in a timely manner. This can be accomplished by keeping the program chairs involved and informed about admissions and recruitment communication plans and activities. There is also a plan to eliminate any date-sensitive information from brochures and create an insert with this information.

• Enhance the level of knowledge regarding INS policies, laws, and regulations to assist foreign students.

- This will allow the Director of Admissions to communicate and meet the needs of our international students effectively. This can be accomplished by joining NAFSA’s Association of International Educators and attending workshops.

• Change Admissions Assistant job title to Admissions Counselor for Allied Health, Pharmacy, and Graduate Nursing programs.

- There are two admissions assistants who counsel, evaluate academic coursework, and calculate GPAs for prospective applicants, applicants, and reapplicants. In addition, they present and facilitate the interview day orientations. All support staff in Admissions are classified as secretaries or admissions assistants, and have a variety of job responsibilities. Based on the two Admissions Assistants’ specific job responsibilities, it would be more appropriate to identify them as Admissions Counselors rather than Admissions Assistants.

Office of Financial Aid

The Office of Financial Aid is dedicated to meeting the financial needs of all students who need assistance. The Office seeks to promote a student-friendly environment, and to enhance communication with students and University departments and units. The Office has implemented an automated financial aid system that is fully integrated with the University’s campuswide management information system.

In the 1999-2000 academic year, over $46 million in financial aid was awarded to Western University students. Nearly 93% of all students received some form of financial assistance. See Appendix VII.3 for the 1999-2000 Student Financial Aid Resources Report.

In 1999-2000, the Office of Financial Aid hired three additional staff members to assist in day-to-day operations. Student employees have been utilized as a sounding
board for changes in the Financial Aid Office, including expansion and further development of services.

The Office of Financial Aid continues to strive toward excellence in meeting the financial needs of all students applying for financial aid, as follows:

- Communication. Staff meetings are held every Monday morning to enable the Financial Aid staff to discuss issues related to processing financial aid, from new regulations issued by the Department of Education to establishing procedures for streamlining the financial aid process. Email has enhanced the ability to communicate new and updated information among staff members.

- Communication with Other Administrative Offices. The Office of Financial Aid (OFA) has been working very closely with the Bursar’s Office in a joint effort to expedite funding to the student for tuition and fees, as well as other educational and living expense dollars. This has, at times, required daily communication between the offices. As both offices strive to serve Western University students more efficiently, the door has opened up for sharing ideas and planning for upcoming events. The Bursar’s Office has been trained to review OFA Excel spreadsheets containing financial aid data for all students by program and year. The Bursar’s Office receives these Excel spreadsheets via email prior to registration. WhizKid, the OFA electronic loan processing software, has been incorporated into the Bursar’s Office system. Bursar’s Office staff members have been trained on WhizKid, and have the ability to access electronic loan disbursements for processed loan dollars. The Bursar’s Office also has access to another tool called NetWizard. NetWizard is a web-based loan delivery system that allows Western University to obtain guarantee and disbursement information.

The OFA and the Admissions Office have established a more efficient way of communicating information to entering students for all Western University programs. During the orientation process, an overview of the financial aid process and financial aid information was distributed to prospective students. This has made it possible to enhance service to our entering students who are applying for financial aid.

The OFA has been working along with the Registrar’s Office to coordinate information regarding students who have a change in status. A change of status would include students beginning or returning from a leave, or withdrawing from the University. Each change must be evaluated for its impact to the student’s financial aid. These changes have moved from a paper communication to an electronic communication via email. Grade-point average (GPA) data needed for scholarship criteria have also been changed from a paper request from the OFA to an email request.
• Department Master Calendar. An OFA master calendar, which includes staff vacations, blackout dates, and staff training dates, has been established. It also includes the registration date and first day of classes for each program by program year, and specific financial aid functions such as entrance and exit interviews. This affords the Financial Aid Office a visual tool to access upcoming deadlines and events.

• Financial Aid Planner. A Financial Aid Planner, which contains tasks to be accomplished for both the 1999-2000 and 2000-2001 academic years, has been developed in tabular form. It contains the staff assigned to complete the task, the anticipated task completion date, and the date when the task is successfully completed. This was designed to keep all staff on target for current and upcoming events for each processing year. This Financial Aid Planner is reviewed and updated at each Monday morning staff meeting.

• Staff Training. Staff training was very limited in the past, but has now become part of the mainstream for all Financial Aid staff. In the ever-changing and evolving world of financial aid, workshops provided by several financial aid organizations such as the Department of Education, California Student Aid Commission (CSAC), California Association of Student Financial Aid Administrators (CASFAA), and National Association of Student Financial Aid Administrators (NASFAA) are an essential resource in ensuring that staff have the necessary tools to serve Western University students effectively. These training conferences and mini-sessions allow the staff to stay current regarding new federal regulations and updates.

• Student award letters were distributed to students earlier than the previous year; award letters were available for students in May for the 1999-2000 academic year. Award packages were distributed to students prior to their departure for summer break.

• Electronic Funds Transfer (EFT) has become the primary method lenders and guarantors use when disbursing loan funds to Western University's OFA. In previous years, individual checks were issued by some lenders, which generated extra paperwork for the OFA and the Bursar's Office. This change has enabled both offices to expedite processing of student loan funds. As a direct result for the 1999-2000 academic year, approximately 95% of the disbursements to cover tuition and fees were received prior to registration.

• Veterans Affairs (VA) Benefits have been expanded to include Pharmacy students. On July 6, 1999, the Financial Aid Office received confirmation from the State of California Department of Consumer Affairs, Bureau for Private Postsecondary and Vocational Education, of the revised approval to incorporate Pharmacy students with other eligible VA programs at Western University. This has opened up another avenue of financial aid funding for Western University's Pharmacy students.

• The Office of Financial Aid staff has grown to include one new Financial Aid Counselor and a replacement for a departed counselor, and a Financial Aid
Technician. The new staff members bring new ideas and a new perspective to the office, which will enhance how students are served.

In an effort to communicate new financial aid information to students, the OFA reach has extended beyond postings and phone calls to include Western University e-mail and even faculty. Faculty members have been incorporated into the communication cycle, and are assisting the OFA by announcing key financial aid information in classes.

- A Financial Aid Policy and Procedures Manual is being developed (see Exhibit VII.6). The manual will document all aspects of the financial aid process and Western University policies from beginning to end. It will document how information is received from the Central Processing Center, the awarding process, the steps in processing federal Stafford loans and alternative loans, how to process scholarship dollars, and so on. It will be comprehensive in nature and requires input from all staff to make it a useful reference tool for the entire office.

- A New Financial Aid website is housed on the Western University homepage. It contains an overview of the financial aid process, a “Who’s Who” within the OFA, and the various types of funding available for students, depending on their program and year within that program. It also lists other financial aid resources, such as scholarships and military website links, that students may research.

- An Access database has been developed to provide detailed and accurate information of student financial aid records. The Financial Aid Office interfaces with two different software programs, the Department of Education’s Electronic Data Exchange and WhizKid for loan certification. The Access database combines data housed in each of the systems into one database. This allows the OFA to serve students more efficiently, and eliminates the need to toggle between two different systems to determine a student’s financial aid status. This transition moves the OFA closer to being an automated office.

- The Financial Aid Packet for students has been simplified. Last year, the packet contained five pages for the student to complete. This year, further streamlining has reduced that packet to a single, double-sided form, the Western University Financial Aid Questionnaire (see Exhibit II.4). The Office of Financial Aid has received positive feedback from students regarding this simplification of the often-cumbersome task of applying for financial aid.

The emergency loan application has been revised from a two-page application to a single-sided application (see Appendix VII.4). Areas of duplication on the original application were eliminated, and the format of the form is now user-friendly. The format of the form also allows an easy method of tracking fund balances, thereby eliminating overspending of a particular account.

The Financial Aid Handbook/Scholarship Book has been updated with current information regarding applying for financial aid via the Web, new Stafford loan limits, and updated scholarship information (see Exhibit VII.7). Areas impacted by the Department of Education 1998 Reauthorization have been updated.
The Exit Handbook, provided to graduating students, has also been revised to provide students with information about contacting their lender(s), deferment, forbearance, consolidation, and website addresses for loan calculators (see Exhibit VII.8).

- Veterans Affairs Certification (VaCERT) is a web-based program currently being used to certify student eligibility for VA Benefits. VaCERT is more than a computer program used by the U.S. Department of Veterans Affairs and school certifying officials throughout our nation. It is a step towards the paperless processing of enrollment certification and a method of administering VA Benefits in a timely and efficient manner.

Western University’s Cohort Default Rate is 0.7%, which is excellent. The national average is approximately 10%. The cohort default rate is the percentage of a school’s student borrowers who enter repayment on Federal Family Education Loan (FFEL) Program loans and then default.

Planning Goals

As the OFA looks toward the future, it continues to evaluate avenues to serve Western University students more efficiently and effectively. As the world around us becomes progressively wireless, the pathway for communication has become electronic. With this in mind, the OFA is reviewing policies and procedures in an effort to move forward to a paperless operation mode. This is just one key element among many that can only enhance how Western University serves its students.

- Western University is committed to finding the most cost-effective way for all Western University students to finance their education. With this goal in mind, the University has determined that the best way to serve student borrowers would be to assume the lending function. Starting with the 2000-2001 academic year, Western University will be offering a specialized Federal Stafford Loan program designed exclusively for Western University graduate students (see Appendix VII.5). This program has been structured with cost savings to the students in mind. Students will not have to pay any origination fees in obtaining a loan from Western University. This will mean a cost savings of up to 4% annually, and will ensure that students receive the exact amount they have borrowed.

- Western University is in the process of testing Electronic Funds Transfer (EFT) to student accounts with a select group of students. If successful, EFT will be extended to all students. All students will have the option to deposit living expense dollars into their checking or savings accounts electronically. Students’ living expense dollars would be deposited after tuition and fees are calculated. Students electing to use EFT will receive living expense dollars more quickly because the manual check process will be eliminated.

- The Financial Aid website will be expanded to include other financial aid tools that will benefit students. Other links will be added that will give students access to important financial aid information.
• SCT Banner allows each administrative and faculty office of the University to be served jointly under one electronic system. This will make communication among offices much smoother. The Financial Aid Module began implementation training on May 9, 2000, with a “live” date set for February 2001.

• An Access table has been placed on a common drive shared by the Financial Aid Office and the Bursar’s Office. This allows the Bursar’s Office to access current information at any time, and will eliminate the need to e-mail financial aid information prior to registration. The table will extract data from the OFA Access database, providing a continuum of accurate information for the Bursar’s Office to utilize.

• Exit interview counseling will be moved from a paper-intensive process to an online process. The National Student Loan Data System (NSLDS), which is the first national student database of information relating to Title IV loans and other financial aid disbursed to students, may be a possible resource in achieving this goal. Students will be able to access loan history, review lender and guarantor information, and complete the exit process, all electronically.
Standard VIII - Physical Resources

Western University is committed to improving its physical resources to provide superior educational and work environments for students, faculty, staff, and administrators. Since Western University’s initial WASC accreditation, the core campus has grown from 14 to more than 20 acres, student enrollment has increased approximately 59%, and the size of the faculty has also increased. Western University has approached this growth in a manner consistent with its mission by committing to two primary objectives: 1) to focus on providing additional operating funds to critical areas and programs and 2) to issue California Educational Facilities Authority (CEFA) Revenue Bonds to fund capital projects.

To capture a view of facilities used for instructional, research, and support activities, a campus map, description of facilities, and land and building square footage measurements of the core-campus area are presented in Appendix VIII.1. Other off-campus educational facilities include 1) the Western University Medical Center, an ambulatory, primary care medical center for area residents located in downtown Pomona, California, which also serves as an important clinical training site for Western University students; 2) the Academic Center for Excellence in the Health Sciences (ACEHS), the University’s main clinical teaching program site, which represents a partnership of the new Arrowhead Regional Medical Center in Colton, California; the University; and other regional health care providers; 3) the Osteopathic Center for Children, where osteopathic and alternative medicine are applied in diagnosis and treatment of special children, and where research plays an integral part, as does teaching osteopathic medical students about the diagnosis and treatment of exceptional children through formal instruction and observation (staff physicians also have faculty status at the University); 4) the Western University Regional Center at Las Vegas, Nevada, currently coordinating regional clinical sites, as well as future facilities for the Physician Assistant program; and 5) numerous affiliated hospitals and community-based clinics and private practice sites used for educational training for all disciplines.

In the last five years, the expansion of building space for research and other educational purposes has been coupled with a modernization of the technological infrastructure provided to faculty, staff, and students. The real estate expansion, technological infrastructure construction, equipment upgrades, off-campus clinical site development, and other educational enhancements have primarily been a result of proceeds from the 1995, 1998, and 2000 CEFA Revenue Bond Issues. A total of $16,000,000 has been or is currently being allocated to the following projects:

1. Acquisition and renovation of a 120,000-square-foot vacant building (Health Professions Center) to provide facilities for the College of Pharmacy, two 250-seat classrooms for the Osteopathic Medical College, additional faculty offices, research and laboratory space, and breakout and conference rooms.
2. Acquisition and renovation of a 20,000-square-foot vacant building for the new College of Veterinary Medicine.
3. Acquisition, renovation, and equipping of a 35,000-square-foot building for educational technology to address and resolve the issues surrounding the level of service of the Library and Learning Resources Center.
4. Completion of construction of the technological infrastructure for the campus-based network.
5. Acquisition of vacant land for the construction of two parks (Founders Park and the Arts and Cultural Gardens) to provide facilities for student activities and campus community outdoor events.
6. Renovation of the rear of the Campus Gourmet building to provide a student lounge/study hall, increasing available space for student-centered activities.
7. Acquisition of a building (Maintenance Building) to house the campus maintenance department, designed to centralize services, equipment, and vehicles.
8. Renovation of the Student Services Center to provide additional space and centralization of the student affairs, admissions, and financial aid activities.

Of the facilities presented in Appendix VIII.1, the Health Professions Center, Health Sciences Center, Alumni Center, Health Sciences Library and Learning Resources Center, and Veterinary Sciences Center are currently used or planned for use as research and/or educational facilities. The planning, design, and determination of purpose for those facilities have involved participation of individuals from many sectors of the University community.

Within the Health Professions Center, Health Sciences Center, and the Alumni Center, adequate spaces are provided to conduct educational, health service, and biomedical science research. A 12,000-square-foot facility has been renovated to provide an animal care facility, faculty laboratories, a large gathering area, and storage space for research equipment. Western University’s research facilities also include a physiology-microbiology laboratory, a shared use pathology-histology preparation room, walk-in cold storage facilities, and several high-performance liquid chromatographs with diode array, fluorescence, and UV detection supplemented with computerized software, dissolution apparatus, sample purification modules, UV spectrophotometers, centrifuges, and other small laboratory equipment. The University is maintaining its commitment to develop and equip existing laboratories to accommodate specific research projects.

The University has also constructed a new Clinical Skills Laboratory in the Health Professions Center. This lab is used primarily for Department of Family Medicine courses. University labs are equipped to provide closed-circuit videotaping of physician-patient sessions, and are used by students in the osteopathic medical and other University programs.

Currently, the Library is located in the Health Sciences Center (see Standard VI). The complete renovation and construction of the new Health Sciences Library and Learning Resources Center is under way. This construction is a direct response to concerns regarding space and increasing technology requirements. The facility will significantly increase student study space, provide room for increasing library resources, and house the relocated Network Operations Center. The 35,000-square-foot Library and Learning Resources Center is scheduled for completion in March 2001.

Planned construction for the new College of Veterinary Medicine program awaits the granting of Reasonable Assurance by the American Veterinary Medical Association. A preliminary layout has been approved (see Standard IV).

All buildings are fully connected to the campuswide computer network. The network provides high-speed access to all developing educational technologies.
Facilities Department

The Facilities Department is responsible for the daily maintenance and operations of all on- and off-campus facilities, as well as University-owned properties. Western University currently employs a facilities manager and 13 full-time maintenance personnel in various journeyman specialties, including painters, HVAC specialists, and plumbers. To reduce construction costs, a full-time, on-campus general contractor and an architect are responsible for coordination of all significant renovations on campus. The overall maintenance and condition of the facilities and grounds of Western University are excellent.

Staff, faculty, and students request all general repairs through work orders, which are monitored and processed daily by the Facilities Department. Work is completed by campus maintenance staff whenever possible. Careful maintenance and repair performed by the University's Facilities Department has helped to minimize costs.

Custodial service for the interior of University buildings is outsourced, as it has been for the last 20 years. In general, this service has been exceptional. The custodial service responds to any additional assignments that arise (special cleaning of furniture, carpets, etc.).

Environmental Health and Safety

Health and safety play an important role in the daily operations of the University. In the summer of 2000, a new Office of Environmental Health and Safety, reporting to the Office of Human Resources, was created to monitor all safety issues, from hazardous waste to disaster planning to protective clothing in the anatomy lab. Facilities and practices are inspected and reviewed on a regular basis. Each building is equipped with required safety equipment.

Alarm systems have been installed in all buildings on and off campus. In the past, due to the downtown location, only authorized personnel, security, and cleaning crews had key access to the campus buildings after hours. This policy has since been expanded to provide University faculty with after-hours access to the buildings. Panic buttons are placed strategically in main entrance areas on each floor of all campus buildings. These allow an employee, usually the building receptionist, to send out an alarm discreetly in the event of a security-related emergency.

Each member of the campus community is required to wear an identification badge, and visitors are issued badges for the duration of their stay on campus. Full-time security guards are supplied by an outside security service. These guards are responsible for patrolling buildings, grounds, and parking lots daily and nightly. Security guards also serve as courtesy officers to provide information and direction to visitors to the campus. Security guards and facilities staff members use mobile radios for increased communication. These radios have proven to be very effective, and tend to reassure everyone that emergency situations will be handled quickly. In accordance with the Campus Crime Awareness and Campus Security Act of 1990, a safety report that describes security procedures and actions is updated annually and is distributed to each student and staff member. (See Exhibit VIII.1 for the Fall 2000 Report.)
All special events that occur after hours require security services as well. Security guards are notified daily of all activities and the designated personnel who are to have access to certain buildings. Each guard keeps a daily log. Security guards have the authority to deny access to anyone without a proper identification badge. Security guards and personnel have been notified that the University does not allow solicitors on campus. Therefore, if a solicitor or unauthorized individual enters a building, that person is generally denied access either by a guard or an employee from the Facilities Department.

A formal disaster preparedness plan has been completed in conjunction with the establishment of the Environmental Health and Safety office (see Exhibit VIII.2). A large container is located on campus, fully stocked with emergency supplies. Inventory of the container is taken on a semiannual basis, and perishable supplies are replaced. Earthquake and fire drills are held on an annual basis.

All buildings are accessible to individuals with disabilities, especially with regard to entrance and restroom access. However, there are some areas that are not accessible, and appropriate accommodations have been made to deal with these issues. The lower level of the Alumni Center is reached by stairs; however, for emergency purposes, a freight elevator is available. The second floor of the Business Center is reached by stairs; however, meetings are arranged in other areas of the University that are accessible. There is ongoing coordination between the Facilities Department and the Center for Disability Issues and the Health Professions to maintain and assure compliance to current standards.

The University is committed to maintaining a drug-free workplace in compliance with applicable laws. The use of illicit drugs and other substances is not tolerated. An Employee Assistance Program provides employees with counseling and referral services on a confidential basis to help with alcohol and drug abuse problems (see Appendix VIII.2).

**Physical Resources Planning**

While the University’s Board of Trustees is involved in the final authorization of all capital projects, there has not been a formal process for campus master planning because of the rapid growth of facilities during the last half-decade. As part of the creation of a new Board committee devoted to Business and Finance, the administration will propose a process for the ongoing development of the campus and its facilities. In Spring 2000, the President initiated a broader engagement with the President of California State Polytechnic University, Pomona and the Pomona Redevelopment Agency, with respect to the development of neighboring land parcels, many of which are owned by the City of Pomona. The result of that engagement is an emerging consensus to create a “University Village” to the south of campus, relying on an external developer for funds. By the time of the visit in March 2001, these plans will have been refined and a project master plan should be ready for review.

**Accomplishments: 1999-2000**

The Facilities Department at Western University:
• Completed the pilot project for the use of electronic pass keys to enter buildings and decided against using the system.
• Developed plans for and implemented the Arts and Cultural Gardens at the east end of the campus.
• Completed conceptual drawings for the development of a veterinary college in the old furniture store.
• Developed and built a prototype classroom for visits of the Veterinary Medicine site team.
• Concluded the vacation of 2nd Street between Palomares and Gibbs.
• Rehabilitated the Executive Offices.
• Transferred the Purchasing and Duplicating functions to a first-floor location in the Health Sciences Center.
• Issued keys to faculty members desiring after-hours access, and trained them in the use of the security system.

Goals for 2000-2001

• Reduce the number and rotation of security personnel, to effect a savings to be invested in academic affairs without jeopardizing the safety and security of the campus.
• Reduce the number and rotation of cleaning personnel, to effect a savings to be invested in academic affairs without negative impact to campus facilities.
• Complete the renovation of the Pacific Telephone and Telegraph building into the Library and Learning Resources Center.
• Begin the landscape design for the redevelopment of the land claimed in the vacation of 2nd Street.
• Complete the acquisition and begin the renovation of the property on the end of 2nd Street for the Facilities staff to utilize as a workshop and organization area.
• Contract for the development of a campus master plan.
• Participate as a principal player, along with the Pomona Unified School District, Cal Poly Pomona, and the City of Pomona, in the development of a University Village to the south of campus.
Standard IX – Financial Resources

Western University has enjoyed continuously successful fiscal management during its 23 years of operation. The following commentary highlights financial performance and institutional changes related to business and fiscal management since the last WASC visit.

Sufficiency of Financial Resources

During the last four years, Western University has experienced dramatic growth in all areas of financial resources. The growth has been attributable primarily to the addition of two new colleges: the College of Pharmacy and the College of Graduate Nursing. The University began enrolling students in the College of Pharmacy and College of Graduate Nursing programs using budget provision methods that were applied successfully to the existing Osteopathic Medical and Allied Health colleges. While the two new colleges began and became a part of the University, there was no decrease in the level of financial commitment to the existing colleges. Throughout this period, the University was able to maintain quality academic programs, continue the planned expansion of the core campus, and provide competitive salaries and fringe benefits for faculty, staff, and administration. This was accomplished while maintaining balanced budgets and increasing operating and endowment reserves.

In summarizing the financial activity since the last accreditation site visit, the following represent the key indicators of the University’s financial condition, performance, and trends. The financial details that support this information are derived from the University’s audited financial statements as of June 30, 2000. The financial statements are included as an appendix to this report (see Appendix IX.1 for required financial documentation).

- Total assets have increased from $51,605,008 on June 30, 1996 to $81,896,044, a 59% increase.
- Total net assets have increased from $11,543,115 to $20,657,082, a 79% increase.
- The University has posted an operating surplus for each fiscal year. Current financial year 1999-2000 operating surplus is $2,546,045.
- Unrestricted net asset reserves have increased from $5,685,676 to $14,641,129, a 158% increase.
- Endowment fund assets have increased from $4,014,612 to $6,710,748, a 67% increase. The unrestricted endowment balance at June 30, 2000 is $4,510,978.
- Annuity and Life Income Fund assets have increased from $4,953,311 to $7,461,469, a 51% increase.
- The University has remained in compliance with all financial covenants set forth by the California Educational Facilities Authority Bond Issues. The performance and compliance has been reviewed and confirmed by the University’s CEFA Bond Committee (now the Business and Finance Committee).
- The University has received an Unqualified Opinion with respect to the University’s financial statements from independent auditors in all years.
- Sufficient funds have been available for long- and short-term debt; there have been increases in Unrestricted Net Assets, after consideration of debt service costs, in all years.
The above have been achieved while reducing the annual percentage rate of tuition increases and containing controllable costs, with no decreases in budgets in any of the educational programs. With the reduction of the annual percentage rate of tuition increase for each of the last five years, the University stands firm in its commitment to provide a high-value service while trying to limit the costs of delivering medical and health professions education (see Appendix IX.2).

### Tuition by Program

#### Osteopathic Medical Program Tuition

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#### Master of Physical Therapy Program Tuition

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<td>97/98</td>
<td>$21,165</td>
<td>5.3</td>
</tr>
<tr>
<td>98/99</td>
<td>$22,240</td>
<td>5.1</td>
</tr>
<tr>
<td>99/00</td>
<td>$23,320</td>
<td>4.9</td>
</tr>
<tr>
<td>00/01</td>
<td>$24,430</td>
<td>4.8</td>
</tr>
</tbody>
</table>

#### Master of Science in Health Professions Education Program Tuition

<table>
<thead>
<tr>
<th>Year</th>
<th>Tuition</th>
<th>% Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>94/95</td>
<td>$1,575</td>
<td>0.0</td>
</tr>
<tr>
<td>95/96</td>
<td>$1,575</td>
<td>0.0</td>
</tr>
<tr>
<td>96/97</td>
<td>$1,575</td>
<td>0.0</td>
</tr>
<tr>
<td>97/98</td>
<td>$1,575</td>
<td>0.0</td>
</tr>
<tr>
<td>98/99</td>
<td>$1,575</td>
<td>0.0</td>
</tr>
<tr>
<td>99/00</td>
<td>$1,575</td>
<td>0.0</td>
</tr>
<tr>
<td>00/01</td>
<td>$2,025</td>
<td>28.6</td>
</tr>
</tbody>
</table>

#### Pharmacy Program Tuition

<table>
<thead>
<tr>
<th>Year</th>
<th>Tuition</th>
<th>% Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>94/95</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>95/96</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Year</td>
<td>Tuition</td>
<td>% Increase</td>
</tr>
<tr>
<td>--------</td>
<td>--------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>98/99</td>
<td>FNP=$16,400</td>
<td>N/A</td>
</tr>
<tr>
<td>99/00</td>
<td>FNP=$16,400; MSN/FNP=$10,800</td>
<td>0</td>
</tr>
<tr>
<td>00/01</td>
<td>FNP=$16,400; MSN/FNP=$9,600 (2nd year); MSN=$9,450; MSN/Harbor-UCLA=$5,950</td>
<td>0</td>
</tr>
</tbody>
</table>

Note: (1) one-time increase to arrive at prevailing market tuition rate.
*Tuition for new MPA Program.

In addition, the following table presents the University’s tuition rate position among similar institutions:

<table>
<thead>
<tr>
<th></th>
<th>Osteopathic Medical Program</th>
<th>Primary Care Physician Assistant Program</th>
<th>Master of Physical Therapy Program</th>
<th>Pharmacy Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private Osteopathic Schools</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KCOM</td>
<td>23,200</td>
<td>23,500</td>
<td>24,400</td>
<td>N/A 99/00 N/A 99/00</td>
</tr>
<tr>
<td>PCOM</td>
<td>21,250</td>
<td>22,000</td>
<td>23,100</td>
<td>N/A 14,903 14,575 N/A 18,639 N/A 16,443</td>
</tr>
<tr>
<td>CCOM</td>
<td>23,940</td>
<td>25,377</td>
<td>26,645</td>
<td>N/A 13,948 14,575 18,492 18,639 15,438 16,443</td>
</tr>
<tr>
<td>LECOM</td>
<td>20,800</td>
<td>21,500</td>
<td>22,115</td>
<td>N/A N/A N/A N/A N/A N/A</td>
</tr>
<tr>
<td>UNECOM</td>
<td>22,500</td>
<td>23,850</td>
<td>24,970</td>
<td>N/A 17,250 18,050 14,320 14,990 N/A N/A</td>
</tr>
<tr>
<td>WESTERNUNI</td>
<td>22,430</td>
<td>23,570</td>
<td>24,720</td>
<td>12,500 13,110 22,240 23,320 21,570 22,620</td>
</tr>
<tr>
<td>UOMHS</td>
<td>21,500</td>
<td>22,150</td>
<td>22,950</td>
<td>12,000 12,600 13,260 13,525 N/A N/A</td>
</tr>
<tr>
<td>UHSCOM</td>
<td>23,310</td>
<td>24,710</td>
<td>26,200</td>
<td>N/A N/A N/A N/A N/A N/A</td>
</tr>
<tr>
<td>NYCOM</td>
<td>21,000</td>
<td>23,000</td>
<td>23,000</td>
<td>12,750 13,610 12,750 13,610 N/A N/A</td>
</tr>
<tr>
<td>NOVA</td>
<td>21,750</td>
<td>23,860</td>
<td>N/A</td>
<td>16,450 18,900 19,850 16,200 16,220 16,220</td>
</tr>
</tbody>
</table>

| Allopathic Schools           |                            |                                        |                                   |                 |
| Loma Linda                   | 24,645                     | 26,088                                 | N/A                               | 16,932          |
| Stanford                     | 26,385                     | 27,375                                 | N/A                               | 15,100 14,104   |
| USC                          | 29,184                     | 29,184                                 | N/A                               | 22,190 20,962 23,000 |
| Charles Drew                 |                            | 9,100                                  | 12,500                            |                 |
| UC Davis                     |                            |                                        | 12,000                            |                 |
| Univ. of the Pacific         |                            |                                        |                                   | 19,510 29,915 30,770 |
| Univ. of California          |                            |                                        |                                   | 16,896          |
| SOME AVERAGES:               |                            |                                        |                                   |                 |
Over the last five years, beginning with the fiscal year ended June 30, 1996, total revenues have increased by 42.6%. In the same period, the total expenditures for instruction have increased by 98.8%. Student services expenditures have increased by 87.6%; this trend is reflective of the continuing commitment toward strengthening instructional activities and supporting the student population.

The following financial analysis charts reflect the growth, sources of revenue, and allocation of expenditures since the transformation from the College of Osteopathic Medicine of the Pacific to Western University.
For purposes of examining the activity of individual programs as they relate to total tuition, the following table presents the development of new programs over the last four years.

<table>
<thead>
<tr>
<th>Program</th>
<th>Total Tuition &amp; Fees 96/97</th>
<th>% of Total</th>
<th>Total Tuition &amp; Fees 97/98</th>
<th>% of Total</th>
<th>Total Tuition &amp; Fees 98/99</th>
<th>% of Total</th>
<th>Total Tuition &amp; Fees 99/00</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DO</td>
<td>15,050,529</td>
<td>73.3</td>
<td>15,592,293</td>
<td>64.0</td>
<td>16,331,805</td>
<td>58.9</td>
<td>17,302,755</td>
<td>54.7</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>1,342,800</td>
<td>6.5</td>
<td>3,423,320</td>
<td>14.1</td>
<td>5,738,716</td>
<td>20.7</td>
<td>8,468,350</td>
<td>26.8</td>
</tr>
<tr>
<td>MPT</td>
<td>2,496,416</td>
<td>12.1</td>
<td>2,666,180</td>
<td>11.0</td>
<td>2,728,638</td>
<td>9.8</td>
<td>2,889,244</td>
<td>9.1</td>
</tr>
<tr>
<td>PA</td>
<td>1,502,368</td>
<td>7.3</td>
<td>2,245,855</td>
<td>9.2</td>
<td>2,403,499</td>
<td>8.7</td>
<td>2,610,046</td>
<td>8.3</td>
</tr>
<tr>
<td>APN</td>
<td>121,182</td>
<td>0.6</td>
<td>402,212</td>
<td>1.6</td>
<td>497,200</td>
<td>1.8</td>
<td>306,900</td>
<td>1.0</td>
</tr>
<tr>
<td>MSHPE</td>
<td>50,688</td>
<td>0.2</td>
<td>32,095</td>
<td>0.1</td>
<td>46,675</td>
<td>0.1</td>
<td>48,620</td>
<td>0.1</td>
</tr>
<tr>
<td>Total</td>
<td>20,563,983</td>
<td>100.0</td>
<td>24,361,955</td>
<td>100.0</td>
<td>27,746,533</td>
<td>100.0</td>
<td>31,625,915</td>
<td>100.0</td>
</tr>
</tbody>
</table>

To maintain the high quality of education through the application of long-term capital projects, the University successfully issued tax-exempt revenue bonds in May 1998 and June 2000. The University participated in pooled issues in both situations, netting just over $6 million in the first issue and just under $4 million in the second, with funds reserved for various capital projects described further on. The University obtained a BAA2 underlying bond rating from Moody’s Investor Service. Moody’s commented on the 1998 issue that, “The University has a strong admissions profile, characteristic of most medical schools, with applicants to its osteopathic medical school consistently exceeding the number of accepted students by at least 20 times. Successful programmatic expansion into pharmacy as well as allied health fields (physician assistant, physical therapy) are expected to sustain moderate enrollment growth beyond
the current 1,256 students. Employment trends favoring medical education generalists and primary care physicians, coupled with strong student retention and high matriculation yield, reduce potential longer-term threats from more traditional medical schools that offer a Medical Doctor (MD) degree. Good geographic diversity reflects the relative absence of osteopathic medical schools in the far west, with nearly 75% of Western University of Health Sciences students from outside California. Strong tuition pricing power has allowed the University to generate strong operating results and good debt service coverage.” These conditions still exist today.

The plans for financing specifically addressed the critical needs for acquisition, renovation, equipment upgrade, and technological improvement to enhance the educational and campus community environment. Also, priorities were given to various action plans discussed during the University’s last accreditation site visit. As a result, the $10 million in bond proceeds were committed to the following capital projects:

- Acquisition and renovation of the Health Sciences Library and Learning Resources Center.
- Continued acquisition, construction, and upgrade of campuswide technology infrastructure, including networks, servers, and multimedia.
- Acquisition of equipment and software for the implementation of the University administrative database management system, SCT Banner 2000.
- Acquisition of land to provide green space and outdoor facilities for student activities.
- Acquisition of land and building to centralize and maintain Physical Plant Department staff and equipment.
- Acquisition and renovation of buildings for the further expansion of laboratory and student learning-centered activities.

These projects were focused on addressing underlying academic needs, along with an eye to furthering the geographic unification of the campus.

The University understands that upon providing resources for long-term capital projects, a corresponding commitment must be made to support the projects with sufficient annual operational funding. The following summaries evidence this commitment by showing the trend and corresponding increase in three critical areas—Learning Resources/Library, Information and Instructional Technology, and Multimedia.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Expense – Operational</td>
<td>276,720</td>
<td>280,108</td>
<td>278,041</td>
<td>330,216</td>
<td>354,511</td>
<td>570,861</td>
</tr>
<tr>
<td>Expense Capital</td>
<td>39,856</td>
<td>39,915</td>
<td>36,794 (1)</td>
<td>54,843</td>
<td>191,766 (2)</td>
<td>145,000 (2)</td>
</tr>
<tr>
<td>Total</td>
<td>316,576</td>
<td>320,023</td>
<td>314,835</td>
<td>385,059</td>
<td>546,277</td>
<td>715,861</td>
</tr>
</tbody>
</table>

Notes:  
(1) Director position vacated during portion of the year.  
(2) Does not include building construction and infrastructure costs associated with the 1998 Revenue Bond issue.
Information Technology

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Expense – Operational</td>
<td>114,556</td>
<td>256,783</td>
<td>476,038</td>
<td>614,431</td>
<td>1,358,057</td>
<td>2,493,697</td>
</tr>
<tr>
<td>Expense Capital</td>
<td>176,177</td>
<td>751,912</td>
<td>774,023</td>
<td>763,368</td>
<td>662,433</td>
<td>165,000</td>
</tr>
<tr>
<td>Total</td>
<td>290,733</td>
<td>1,008,695</td>
<td>1,250,061</td>
<td>1,377,799</td>
<td>2,020,490</td>
<td>2,658,697</td>
</tr>
</tbody>
</table>

Also, to address the need for improvements in the area of multimedia and audiovisual technology, the University has allocated the following resources since 1995-1996.

Multimedia and Audiovisual Technology

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Expense – Operational</td>
<td>133,263</td>
<td>133,785</td>
<td>176,295</td>
<td>231,177</td>
<td>244,769</td>
<td>260,347</td>
</tr>
<tr>
<td>Expense Capital</td>
<td>24,331</td>
<td>13,870</td>
<td>48,233</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>157,595</td>
<td>232,693</td>
<td>210,165</td>
<td>241,545</td>
<td>293,002</td>
<td>260,347</td>
</tr>
</tbody>
</table>

Office of the Executive Vice President of Finance and Business

This unit combines the area of technology and learning resources with the business and finance function. The chief administrator assumed management of the Office in January 2000, and since that time, has sought to stabilize the various areas that report to the Office (Finance, Human Resources, Advancement, Library, Bookstore, and Information Technology).

Mission

This unit provides infrastructure support to the primary activities of the institution: teaching and learning. The mission is to be the best partner possible to those academic units needing support. The concept is that infrastructure is the mechanism that promotes and supports the academic side of the institution. This has not been the prevailing attitude and perspective to date. Rather, many of the units historically have seen their work as an end in itself, instead of a contribution to the greater effectiveness of the whole. The greatest area in need of improvement for the unit has been this provincialism.

A parallel area of improvement is the need for a strategic perspective that will knit the units together. There are discrete strategic intents for each of the subunits, but, at the current time, they do not weave themselves coherently into a single, supportive direction. This is not surprising, given the amount of organizational change that has occurred, beginning in August 1999 and continuing through the present.

The strength of the unit lies in its people. Almost without exception, there is a desire to perform better, to be more effective, and to contribute to the progress of the University. This desire has not been extinguished by many years of inflexible and
constraining management. The challenge will be to harness the goodwill and energy in support of not only unit, but also University, goals.

The Office of the Executive Vice President of Finance and Business has ambitious planning goals for academic year 2000-2001. They are to:

- **Reinvent the budget process at both the Board of Trustees and functional levels.**

  The budget process has been centralized, opaque to its participants, and developed without a fiscal context. Development of the succeeding year’s budget shall begin in the early fall, within a month of the start of classes, and should conclude by late winter or early spring. The greater community will be informed about the sources of revenue for the University and the ways in which they are allocated. Information about average salaries in the professorial ranks will be disseminated widely. The Board of Trustees will be oriented to the five to seven major factors affecting revenues and those affecting expenditures, and will be educated about the tradeoffs between revenues and expenditures as proposed by the administration.

- **Restructure the finance-related committees of the Board of Trustees, and educate the committee chairs to take the lead in reporting to the Board.**

  The Board of Trustees formerly had two finance-related committees, neither of which dealt comprehensively with the fiscal and business issues of the institution. A single oversight committee, composed of seven members of the Board, will provide for a better Board perspective on the fiduciary activity of the administration. In addition, the chair of this committee (Business and Finance Committee) would be sufficiently knowledgeable about the financial affairs of the institution so that he or she could report to the Trustees at each meeting.

- **Establish continuous quality improvement and business process reinvention as ways of being.**

  The institution has initiated significant efforts to improve the way it does business, and the outcomes of these initial efforts are being integrated into daily work. A key challenge is to make ongoing, periodic, systematic review and assessment of our daily work a way of “being,” not simply an adjunct to our way of “doing”. Reinvention and adaptation need to become the accepted ways to approach each day. To reach this goal, the University will add a dedicated employee whose sole responsibility will be operations improvement, and will conduct at least six process improvement efforts in the course of the year.

  The University took on a major initiative in December 1999 when it invited the Impact Group, LLC, of Windsor, Connecticut, to assist it in the review and improvement of key institutional processes. The Impact Group, with experience with over 300 companies nationally and internationally, was initially retained to review the recruitment and hiring of personnel, the accounts payable process, and budgeting and financial reporting. Because of the close relationship between Accounts Payable and Purchasing, the latter was added to the engagement. The work was generally perceived as an unqualified success, giving employees an opportunity to reconstruct the way they conducted their daily work.
Building on this success, the Group proceeded to work during the spring and fall of 2000 with the Admissions Committee of COMP, the Western University Medical Center, and the Advancement Department. The central theme of this intervention has been the commitment to continuous examination and improvement of how the institution conducts its business. The emphasis has been on empowering employees to originate better processes. The methodology of the Impact Group assumes that employees need assistance in analyzing their work—they don’t need to be **told how** to do their work.

The next step in the quality improvement effort is to determine if the University should license the Group’s proprietary methodology. In addition, the President’s Cabinet has committed to working with the Group and one of its partners to help the senior leadership develop its own team dynamics. This ongoing effort is one of the most energizing and well-received initiatives of the past half-decade.

- **Launch the for-profit outsourcing company, Prisma Inc.**

  Prisma, Inc. will provide network solutions to colleges, universities, health professions institutions, and health care delivery organizations. It has the promise to be a major revenue generator for the University. The company should have a complete Board of Directors, up to 10 professional staff, and at least five contracts by the end of the academic year.

- **Complete and move into the Learning Resources Center no later than the end of March 2001, be fully operational for the Library by academic year’s end, and be more than 50% operational for IT by academic year’s end.**

- **Reinvent the Advancement Office.**

  GG & A, the University’s development consultants, have suggested a template for reconceiving the development operation, under the leadership of a Vice President for Advancement, as well as integrating currently separate departments (Advancement Alumni Affairs, Gift Planning, and Grants and Contracts). By the end of the year, the development operation should have raised 50% of its budget, adopted a strategic communications plan, and successfully integrated the operations of all of its components.

**Financial Planning**

As a result of this change in leadership, and the normal evolution of institutional practice, a new form of financial planning is being undertaken in the 2000-2001 fiscal year. Key to the new efforts is the initiation of the budget process early in the fall term. The goal is to have the next year’s budget approved by the requisite Board of Trustees’ committees no later than January, and for the full Board to approve the budget proposal at its March meeting. Previously, the final budget was not approved until May, leaving little time to complete the current fiscal year and prepare for the next.

Equally key to the refined planning efforts is the inclusion of the President’s Cabinet in the determination of the key planning parameters, as well as consultation with the University’s Institutional Strategic Planning and Resource Advisory Committee and Academic Affairs Council. The intent is to gather as much broad-gauged input about the
budget, from external trends that have an impact on internal affairs to reviews of the level of periodic cleaning services. It is understood that this process is one of taking consultations and soliciting advice and observation, not an attempt to forge a consensus about what the budget should be.

The actual building of the budget will follow a typical course, from the distribution of data to date, with a request to document current trends and future needs through the assimilation of these department-based pieces into an initial college-based budget, and concluding with discussions at the President’s Cabinet level about which priorities can be honored. Because of the prior practice of limiting these debates to a small number of very senior administrators, the first year of the new activity will necessarily be one of education and acclimatization, with the expectation that a foundation will be built for more sophisticated resource allocation in the future.

However, a major change has occurred in the orientation of the budget process. In the 2000-2001 budget process (albeit a truncated one), emphasis was shifted from institution-wide priorities to academic priorities through the University’s strategic planning process. That is to say a specific effort was made to trim non-academic expense to reallocate those dollars to identified academic priorities. Certain administrative jobs (the Director of Risk Management and the Director of Events and Programs, for example) were eliminated and the dollars that funded them were assigned to professorial lines and other academic pursuits. This redirection of funds was a joint effort of the chief academic and financial officers, working at the direction of the President and with the support of their immediate colleagues. It is anticipated that this will be a multiple-year effort, as the institution realigns its core missions to provide greater synergy. The initial effort netted about a 2% shift in institutional expenditures that was redirected to strategic needs in academic affairs.

In the context of this realignment, dollars were also directed strategically to burgeoning technology initiatives. In Fall 1999, the President’s Cabinet adopted the principle that “the Internet will be the core development platform for all programs and services, new and continuing.” This principle can be realized only with a significant investment of dollars, especially in the area of personnel, where competition for qualified individuals is fierce. The previous charts have displayed the amounts and percentages of resources directed to these initiatives (see Standard VI as well).

Financial Management

The Board of Trustees provides fiscal oversight of the administration’s management of the budget. The Board approves the annual operating budget, as well as monitors its status throughout the fiscal year. The daily financial management responsibility is assigned to the Executive Vice President of Finance and Business/Chief Financial Officer (EVP/CFO/COO). This office has as direct reports the Business Office, Human Resources, Information and Instructional Technology, Library, Bookstore, Purchasing, and Facilities.

Effective with the 2000-2001 academic year, upon the recommendation of the Executive Vice President, the Board of Trustees voted to reorganize its oversight of the business affairs of the University. It dissolved the CEFA Bond and the Financial Advisory committees and replaced them with a single Business and Finance Committee. This new body meets six times annually, reviewing reports on long-term investments.
twice each year, and at different meetings twice each year, reporting on compliance with CEFA covenants. The Business and Finance Committee receives the annual audit, recommends the budget to the full Board, does the preliminary reviews of real property transactions, and otherwise engages all business matters that warrant Board review or action and that are not part of academic affairs.

The accounting firm of Vicenti, Lloyd & Stutzman conducts the annual certified audit of financial representation and activities. The audit of the University financial statements and internal controls, as well as the student financial assistance programs and federally funded grants and contracts, has been performed in full accordance with generally accepted auditing standards and the standards applicable to financial audits of colleges and universities. As mentioned previously, all University audits since inception have contained unqualified opinions. They have also been accompanied by the appropriate management letters and are available in the team room.

The financial covenants of the University’s long-term debt are structured to assure current and continuous financial strength. A high level of financial performance is required to meet CEFA guidelines. In general, upon meeting these requirements, all other requirements and financial ratios have been met and exceedingly passed each year (e.g., Department of Education Viability Ratios, Commercial Banking financial ratios, and other educational institution standard ratios). Since the initial bond issue in 1993, the University has met or exceeded all covenants contained in all agreements for all bond issues.

Since 1995-1996, the total investment portfolio has increased from $13,640,728 to $20,037,857, a 46.9% increase. Appropriate market indices, as well as NACUBO investment return standards, are used as benchmarks for the University’s performance (see Exhibit IX.1).

The Business Office conducts the financial management of day-to-day business activities. Management letters prepared by the outside auditors report that operations are without material weaknesses. Since the last accreditation site visit, the decision was made to convert to the SCT Banner software package to use as the foundation for a campus administrative student services database network. During this time, the Business Office has anticipated this conversion, and rather than waste hundreds of thousands of dollars on human physical resources for an interim accounting software package (the Business Office began the Banner software implementation phase on July 1, 2000), has continued to use the existing system. Although the legacy system is not at the level of the Banner system, it fulfills basic financial activity requirements of the University adequately.

Revenues, Expenditures, and Assets

With respect to revenues, Western University is tuition driven, relying on student tuition for 82.5% of revenue. That is not surprising given the age of the University. Indeed, more than 90% of private higher education institutions derive more than 50% of total revenues from student tuition payments. In some quarters, being labeled a tuition-driven institution is viewed negatively—we take the view that this is one reminder that we are here to serve our clients. Being tuition driven is not bad if there is an accompanying practice of trying to secure alternate, complementary resources, which practice Western University follows. It is important to note that the tuition revenue streams are
differentiated: they are not solely from an undergraduate population, for example. These multiple streams balance the periodic ups and downs of the different professions.

The second largest source of revenue is from private gifts (4.8%), followed by the medical centers and investment income (3.7%). It should be our immediate goal to increase private gifts to above 10%, and to work on raising investment income to over 5%. The latter will be more difficult than the first goal, because investment income generally generates a usable return of 5% on the principal. Accordingly, a gift of $1 million generates an annual return of $50,000; 1% of this year’s revenue equals just over $400,000. Therefore, we would need 10 $1 million gifts to achieve an investment income equal to 5% of total revenues. Finally, auxiliary enterprises represents the operation of the bookstore, and government grants and contracts are targeted funds from external sources.

On the expenditure side, we are (appropriately) dominated by expenses for instruction and research (69%), followed by institutional support (9%), academic support (7%), operation and maintenance of the plant (7%), student services 5%, and
fellowships 3%. The 3% in fellowships reflects the institution’s practice of not “discounting” tuition (giving back tuition dollars in the form of aid), which has helped to solidify the financial base of operations. Nonetheless, it also points out the absence of restricted funds to support this area, and emphasizes the importance of developing programs and events where proceeds are for the benefit of scholarships.

The relatively small percentage devoted to student services reflects the demographics of our students, who are older and more mature than traditional university populations that have a large undergraduate cohort. The institutional support category is probably higher than it should be, due to the fact that the payment for long-term debt is categorized in this area. This will be broken apart in the future. Normally, one would expect academic support (which includes libraries and computing) to exceed institutional support. Finally, the maintenance of the plant represents our favorable geographic placement and is well under a 10% threshold, which is easily exceeded by institutions in harsher climates.

The following chart documents Western University’s asset growth over the last 10 years, and is a fiscal portrait of the wisdom exercised by the Board and the President when it was decided to diversify the educational offerings of the (then) College of Osteopathic Medicine of the Pacific. Growth in assets is due to two things: 1) annual surpluses and 2) the ability to incur long-term debt on the basis of those surpluses.

**Alternative Sources of Revenue**

In a concerted effort to focus on alternative sources of revenue, the University has expanded staff and resources in a number of areas. The following is a brief overview of activities and outcomes in these areas.
Business Office

During 1999-2000, the Business Office experienced a year of transition. The Business Office was afforded the opportunity to analyze critical processes, particularly the budget process; internal reporting; and expenditure disbursement activities. These analyses enabled the Business Office to reorganize and redesign its methods for processing information, and position itself to assist and support University core activities.

The process of change was accompanied by the typical challenges of maintaining timely preparation and presentation of internal financial reports. The plan for redesigning reports (reporting by college) progressed appropriately, and will be introduced as a reporting model in fiscal year 2000-2001.

The Business Office’s strategy for strengthening its working relationship with the Financial Aid Office, with an emphasis on heightening the level of service to the student, proved to be a success. Throughout the year, the University’s students voiced their approval of Financial Aid operations. This approval clearly indicated satisfaction with the Business Office’s underlying involvement in providing financial aid funds, both in a timely manner and comprehensibly. In addition, the improved communication between these two departments resulted in the Business Office’s ability to reduce the turnaround time for the refund of student living expenses.

As stated before, the process improvement changes focused on improving the timeliness of internal Supervisor Reports. Many of the agreed-upon procedures have had a direct impact on shortening the processing time for report distribution. Although increased efficiencies occurred sporadically throughout the year, efforts to enhance consistency continue. In addition, the Business Office continues to provide representation, accurate financial reporting, and administrative support for the developing Academic Center for Excellence in the Health Sciences.

Current Situation

A philosophical change has occurred in the operations of the Business Office. The business philosophy has moved from that of gatekeeper to one of assistant and supporter of the individual departments and programs within the University. The focus is on providing useful, timely, and informative financial data to individual department supervisors to assist them with their increased responsibility for sound fiscal management. This focus is consistent with the framework that was established during the Business Office’s process improvement sessions with the Impact Group. It will also prepare the University community for processes inherent to the SCT Banner computer network software.

The Bursar’s Office is using the new Banner software and is noticing the expected efficiencies associated with the network connection to the Student Affairs Office. These efficiencies will clearly be recognized in the Business Office upon Banner’s Finance implementation on July 1, 2001. Currently, the Business Office is applying the process improvement changes within the framework of the Business Office Banner software. The Banner Finance training sessions will allow continual analysis of ways to improve financial processing and reporting methods.
At this time, the Business Office has received feedback from various members of the University community with regard to timely availability of check disbursements and improved communication in the area of department expenditure activity. The Business Office will continue to promote the idea of efficient support to the educational and administrative units. It is believed that further enhancement can be realized when full electronic connection is made between the Business Office and the Purchasing, Financial Aid, and Human Resources departments, and with the Bookstore.

Planning Goals for Academic Year 2000-2001

- Implementation of the process improvement objectives using the framework provided by the SCT Banner Finance software.

  The Business Office is developing the fundamental electronic data and processing information for the Banner Finance system. The training and building phase will occur throughout the upcoming fiscal year. The full implementation of the Banner Finance system will occur on July 1, 2001. In addition to planning sessions with the core departments involved with Business Office processing (e.g., Purchasing, Financial Aid, Grants and Contracts, and to a degree, Human Resources and University Advancement/Fundraising), workshops will be offered to educational and administrative units describing the new processes. The workshops will be accompanied by electronic correspondence in an effort to assure and promote full understanding of University Business Office processes in the new environment. Focus will be placed on teamwork and mutual understanding of the various budget and expenditure processes. The improved and open communication will be offered to all levels of employees, as appropriate.

- Fiscal budget process.

  The Business Office will endeavor to distribute necessary data to appropriate personnel to facilitate a presentation of a proposed budget to the Board of Trustees in March 2001. The Business Office plans to conduct periodic workshops and provide sufficient communication to promote a participatory and open budget process. The Business Office will then combine the data in a more timely and informative manner.

- Financial Information.

  The Business Office will continue to refine existing and create new financial reports that communicate financial information accurately and in a timely manner for colleges, programs, and units. These reports will also contain accurate allocations of indirect cost/overhead rates. The financial reports will identify and deepen specific knowledge in the areas of student relations, research/grants financial management, capital base financing, and day-to-day University department financial activity. The Business Office will distribute all financial reports by established target dates.

- Maintenance of financial objectives and bond covenant compliance.

  The Business Office will structure its financial processes and reporting methods toward the monitoring of financial performance levels that assure established objectives and bond covenant compliance. Activities, transactions, and trends to be interpreted as
potential risks to the University’s financial position will be reported effectively and in a
timely manner. The Business Office will report and communicate the potential risks to
management on a quarterly, monthly, and daily basis, dependent upon the type of
financial information involved. The reporting methods will include an expanded use of
the campus-based network. The campus-based network will be used to accumulate
financial activity/data, as well as to provide access to compiled financial information for
use by specific departments/programs.

- High level of service to Western University students.

The Business Office will continually strive to offer students the highest level of
service. Primary focus will be placed on the continued attention to student financial
issues and immediate resolution of student requests. Human resources from within the
Business Office will be directed toward supporting student activities, such as work-study
student payroll checks, student club disbursements for student activities, student living
expense disbursements, and account activity information. The Business Office will
provide this high-level service by continually striving to encourage the development of
partnerships with related administrative units. As stated earlier, the new business
philosophy will provide an environment that blends the expertise of many areas into a
common effort.

Grants, Research and Contracts Administration

The Department of Grants, Research, and Contracts Administration (GRCA) is
committed to strengthening the University’s fiscal base through grant awards and
financial partnering. The department is responsible for all extramural and intramural
funded awards at the University, including research- and education-related grants and
contracts from federal, state, corporate, and foundation sponsors. The department
provides administrative oversight for funded awards; serves as a resource center for
identifying new funding opportunities; assists in the writing, development, and
preparation of grant applications; cultivates support from foundations; coordinates the
activities of the University Grants Committee and the Research Advisory Council; works
closely with and oversees related institutional compliance committees; and interprets
federal, state, and private sponsors’ guidelines and policies. In addition, the department
serves as the Contract Office for the University, working in conjunction with legal counsel
to review all new contracts to the University and respective colleges, as well as
establishing sub-contractual relationships with external entities.

The Office of Grants, Research, and Contract Administration is being
consolidated with other units under the Office of the Vice President of Development.

The expansion of the GRCA has resulted in the increasing receipt of federal,
state, and private grants and contracts. The following presents the activity since 1995-
1996.

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<tr>
<th></th>
<th>For Year 1995/96</th>
<th>For Year 1996/97</th>
<th>For Year 1997/98</th>
<th>For Year 1998/99</th>
<th>For Year 1999/00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government Contracts and Grants</td>
<td>$408,541</td>
<td>$338,775</td>
<td>$477,623</td>
<td>$737,129</td>
<td>$937,034</td>
</tr>
</tbody>
</table>
These increases have contributed to indirect cost allocation to the University, as well as assisted in the development of the Center for Disability Issues and the Health Professions (in February 1999, the University received $670,000 from The California Endowment, to be expended over two years) and other grant activities that will aid and improve educational activities.

In the coming years, the department will continue to seek new sources of grant funding for the University’s expanding educational programs and projects. The department will increase efforts in the areas of fundraising and grants administration, and create in-house scholarship endowments. The department will also work closely with the Board of Trustees, institutional support groups, and alumni to build corporate and foundation networks.

In addition, the department plans to institute a faculty mentoring program, through which senior faculty with successful grant writing experience will work with and advise others in the grant application process. Seminars in grant writing have been delivered. Finally, the department has been guiding the development of a university-wide research initiative, including the establishment of a Research Task Force.

Since the establishment of the department, the staffing levels have increased to six employees, including the Director, the Assistant Director, an administrative assistant, a research technician, a secretary, and an outside consultant to aid in the preparation of federal and research grants. The Office has initiated the Funders’ Forum, a bimonthly informal luncheon/meeting, with program officers of funding agencies and representatives from community nonprofit organizations in attendance. These forums have provided Western University the opportunity to explore collaborative opportunities with other associations in the surrounding communities and to discuss guidelines with foundation representatives. This has been an extremely successful program, establishing a greater presence of the University in the community, and creating a stronger relationship with potential funders.

The Office continues to provide administrative oversight to the Institutional Review Board (IRB), which is responsible for reviewing all research-related protocols involving human subjects. Oversight includes coordinating the monthly meetings; reviewing all proposals and distributing copies to the board members; maintaining the confidential files; developing and updating the IRB policy and procedures manuals, as well as forms, (see Exhibit IX.2); and general record-keeping for audit purposes.

A major strength of the office lies in the many years of collective experience and success of the employees. It was a conscious decision to divide the grant writing duties between proposals to public entities (federal and state), including research awards, and private entities (foundations and corporate sponsorships). In addition, those functions that encompass post-award administration are handled apart from the proposal development activities. This division of duties allows the employees to focus on their areas of expertise. There is, on occasion, an overlapping of responsibilities, which allows for employee professional development.

Another strength of the office is its centralization of all University interests in foundation and corporate support, allowing for greater control over solicitations to these entities and reducing the chances of conflicting, duplicated, or untimely proposals being
sent to external sponsors. Centralization also allows for consistency in proposal
development and greater accuracy of the information being supplied about the
University.

The greatest strength of the office is its ability and willingness to offer full support
to faculty, staff, and administration in the preparation of grant applications and in
contract development. The department is responsible for ensuring that all applications
are accurate, complete, and mailed in time to meet deadlines. In addition, once an
award is made, it is the department’s responsibility to establish the grant accounts,
oversee all monetary matters related to the proposal, administer the submission of fiscal
and program reports, and guarantee that the project and the University remain in
compliance with sponsor policies and guidelines.

Another important contribution of the office, as a whole, is the ability of the
employees to recognize areas of shortfall within the University and to try and respond to
these needs. By maintaining a constant vigil on the changes affecting the world of
grants and contracts in both the private and public sectors, GRCA has been able to
begin the processes of building those relationships and academic components
necessary for the University to compete effectively for those awards and programs.

The office also functions as the resource center for identifying potential sources
of financial support for various programs and projects. The difficulty has been, and
continues to be, the lack of certain fundamental components needed to pursue grant
opportunities. Because of the institution’s youth, the University has in place only limited
defined partnerships with community organizations that would allow it to pursue projects
requiring collaborative efforts. Another difficulty is matching the research and service
interests of Western University faculty and administrative representatives with the
funding sources available for new programs and projects.

One of the greatest challenges has been the problem of communication and
direction, from a strategic planning perspective. Ideally, the role of the office is to
respond to the needs of the University as communicated by the consultants, and then
locate external funding sources and assist in the submission of applications in support of
the mission and future plans. While the department continues to develop applications in
support of the existing programs, and in many cases, has been proactive in the building
process of future programs, it is imperative that everyone has a clear understanding of
the future direction the University will be taking so that all efforts can be focused and
properly defined.

During academic year 1999-2000, a task force, chaired by Gary Gugelchuk, PhD,
was created to examine the development of research at Western University and create
policies to assist in that development (see Appendix IX.3). In July 2000, Matthew Katz,
Director of GRCA, became chair of the Research Advisory Council (RAC). The purpose
of the RAC is to advise the Office of Academic Affairs and facilitate the University’s
mission as it relates to research activities by strategic planning and through the
development, recommendation, and implementation of applicable policies and
procedures. The RAC advocates a broad array of research activities that encompass all
avenues in the pursuit of knowledge. To that end, the RAC has established five main
priorities to serve as guidelines for the fostering and growth of research at Western
University of Health Sciences.

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1. Research activities should advance knowledge.
2. Research activities should enhance the University’s global academic standing as an institution of higher learning.
3. Research activities should enhance faculty development and allow for academic freedom.
4. Research activities should enhance student education and be designed to encourage student participation and advancement.
5. Research activities should be environmentally sound and safety compliant in terms of the process and the products.

The RAC also advocates for the development of focus areas that will allow a cross-disciplinary approach to research and allow for collaborative opportunities among the various colleges and their faculty. These focus areas should be based on the ever-changing health care environment, to allow the University to participate in potentially highly successful endeavors and thereby better prepare students for the kind of health care market in which they will work. The creation of these focus areas does not preclude the development of individual faculty research initiatives.

As of May 2000, the University has submitted more than 40 grant applications to private foundations, corporations, and federal and state agencies. New funding has been secured from the Hearst Foundation, The California Endowment, the John Gogian Family Foundation, the National Institute for Healthcare Research, and the Centers for Disease Control and Prevention. GRCA purchased software to develop a database of information on foundations and corporations, and acquired the Foundation Center’s published directories. GRCA continues to offer the Funders’ Forum program, as well as courses and workshops in grant writing. In addition, the University has received $100,000 in endowed scholarship support from the William Randolph Hearst Foundation, and has established a University Scholarship Committee to review and examine existing scholarships for possible reclassification. The current scholarship endowment is approximately $349,000.

Planning Goals for 2000-2001

**Develop Health Careers Opportunity Program Grant.**
Activities include: The development of external partnerships with Cal Poly Pomona, Colton Unified School District, the Fontana Collaborative, Pomona Unified School District, Valley Community College, and other community-based organizations.

**Develop Geriatric Education Center Grant.**
Activities include: Working in collaboration with Brenda Premo and the CDIHP to create the Geriatric Education Planning Board comprised of University faculty, community representatives, and health professionals. The objective is to build onto existing curricula in the various academic programs a cross-disciplinary approach to geriatric medicine, and incorporate all health professional services, consumer participation, and education.

**Design, Develop, and Implement a Major Fundraising Initiative.**
Activities include: Working in concert with the Office of University Advancement and the GG & A consultants to recognize the major needs of the University and create a campaign to meet these needs.
Expand Continuing Efforts for Endowed Scholarship Program. Activities include: Identifying new foundations that support scholarship endowments and establishing relationships with them, creating and implementing an Employee Giving Program, and working with Alumni Affairs to stimulate alumni support and explore the potential for Employee Matching Programs. The annual goal is to raise $150,000 for general scholarship endowment.

Develop and Strengthen the University’s Community Outreach Program. Activities include: Continuing to identify community-based organizations interested in developing long-term, collaborative relationships with Western University; ascertaining information on new publicly and privately funded programs to support collaborations that provide services to the community and service-learning opportunities for Western University students; building on existing relationships established with the Health Careers Opportunity Program, the Center for Disability Issues and the Health Professions, and the Geriatric Education Center.

Develop Web page for Grant- and Contract-related Activities. Activities include: Working in collaboration with the Office of Information and Instructional Technology and User Support Services, creating an Internet Web page that will contain information on current grant and contract activities, compliance issues, policies, forms, sponsor opportunities, and general information to assist faculty, staff, and administration.

Assume Administrative Oversight for Institutional Animal Care and Use Committee (IACUC) (See Exhibit IX.3.)

See Table IX.1, Analysis of 1996/1997-1999/2000 Department Activities.

Fundraising/Development/Gift Planning

The University has fundamentally reorganized its approach to fundraising. After a detailed consultation from the Chicago-based philanthropic advisory firm Grenzebach, Glier and Associates, the Development Office has become the Office of University Advancement, and now includes Alumni Affairs, Gift Planning, and Grants and Contracts, as well as the Office of Development and its functions of media relations, publications, and events. This integration of advancement efforts across the institution, along with the continuing expert counsel of GG & A, is designed to lift the solicitation levels of the University to a higher plane. Crucial to the success of that effort is the articulation of specific goals by function, and the sharing of those goals across the institution. The University seeks to make advancement a part of all areas of the institution, and not just the effort of a separate office. Based on the modest successes of the past for unrestricted support, the University believes it is well positioned to elevate the annual flow of unrestricted, non-tuition dollars.

The University’s Endowment Fund has grown to $6,710,745. Based upon the University’s Endowment Spending Policy, the University can now provide more than $335,000 each year in intramural funds for scholarships, awards, and other educational support activities. Currently, the University’s Endowment Spending Policy allows for a 5% spending rate.
As mentioned later in this report, the Gift Planning department has increased the University’s Annuity and Life Income Funds from $4,953,311 in 1995-1996 to $7,461,469.

Medical Centers

The following are examples of other non-tuition revenue.

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<th>For Year 1995/96</th>
<th>For Year 1996/97</th>
<th>For Year 1997/98</th>
<th>For Year 1998/99</th>
<th>For Year 1999/00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Centers</td>
<td>$998,000</td>
<td>$1,188,000</td>
<td>$1,481,000</td>
<td>$1,529,000</td>
<td>$1,681,000</td>
</tr>
<tr>
<td>Miscellaneous Income</td>
<td>$112,000</td>
<td>$354,000</td>
<td>$475,000</td>
<td>$600,000</td>
<td>$359,000</td>
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New Ventures

In May 2000, the Board of Trustees approved the administration’s launch of a new venture, a for-profit consulting services company incorporated as Prisma Netsourcing, Inc. (Prisma). The idea behind this effort is that the University has significant levels of information technology expertise, it is competing for IT professionals in an increasingly fierce bidding environment, salary levels in the not-for-profit area will not keep pace with the rest of industry, and there is a growing trend in higher education to outsource operations. Rather than outsource its IT functions, a decision was made to create an outsourcing company, of which the University will be a 30% owner, with the rest of the equity held by employees. Prisma will ultimately provide all technology services for the institution. It is expected that Prisma will also provide a wide array of IT services to other colleges, universities, and health care institutions. Within three to five years of its inception, the business plan calls for the royalty payments of Prisma to the University to equal the outsourcing fees the University pays to Prisma. The Board approved a maximum 18-month outlay of $150,000 to get the company going, with a maximum five-year investment not to exceed 10% of the University’s unrestricted assets (which equates to $750,000).

To protect the University’s not-for-profit status, the company will rent office space off campus, hire its own employees with separate salary and benefits plans, and follow all accepted accounting and business practices of a normal small- to medium-sized business. Reports on the development of Prisma are provided to the full Board at each of its meetings.

University Advancement Department

The University Advancement Department established three primary goals for fiscal year 1999-2000. The first was to assess the effectiveness of the department’s operations in addressing the University’s relationship-building and fundraising needs. The second was to make the systems and staff changes required to improve the department’s efficiency and productivity. The third was to work in a more collaborative and supportive fashion with the University’s colleges and programs to help them achieve their fund development objectives.
The University hired an Assistant Vice President of University Advancement, with 15 years of experience in directing fundraising operations, to play a leadership role in implementing these goals. This freed up the Vice President of University Advancement from oversight of the day-to-day department operations and management of the staff, and enabled him to concentrate on cultivating present and prospective donors to generate major gifts. Prior to his departure in June 2000, he raised over $1,289,000 in gifts of $5,000 and above during the 1999-2000 fiscal year. A new Vice President of University Advancement will arrive on campus on January 3, 2001.

To help meet the University’s goal of enhancing non-tuition revenue, the President’s Cabinet conducted a search for a firm that specializes in philanthropic management. After interviewing four firms, the University engaged the services of Grenzebach, Glier and Associates (GG & A) to carry out a development program review. GG & A provided a detailed outline for a self-study of advancement activities, which the University Advancement Department prepared on behalf of the University. In addition, GG & A interviewed members of the University advancement staff and staff members from other departments, faculty, administrators, and donors. GG & A consultants also reviewed Western University’s fund development material for the past five years, as well as the self-study.

GG & A found that the University lacked a fully integrated advancement program that links the work of all the departments whose accountabilities are related to developing constituents and raising funds. At the time of the report, the Gift Planning, Grants and Contracts, and Alumni Affairs departments did not report to the Vice President of University Advancement, and did not work collaboratively with the University Advancement Department to achieve jointly established goals. Prior to the report, the Vice President of University Advancement directed only the development, events and programs, media relations, and publications functions. That situation has been changed, and all the department heads referred to above now report to the Executive Vice President of Finance and Business until the new Vice President of University Advancement arrives.

In addition, the report called attention to the fact that the preponderance of staff positions in the University Advancement Department were devoted to activities unrelated to fund development. The consultants recommended a new staffing structure, along with accountabilities for each position, most of which directly support either constituent development or fundraising. The department has implemented these recommendations.

In their report, the GG & A consultants also stated that an analysis of the fund development database and other donor and prospect records demonstrated that these contain inadequate information and could not be used effectively for fund development planning purposes. Furthermore, the consultants noted that donor records were not, for the most part, centralized, which further impeded the development of a strategic University advancement plan that takes into consideration all the pertinent functions. To address these issues, the data management department has been increased by two staff members. These staff members are working in close cooperation with all other fund development staff members to gather and store information about donors, and are coding donor records so that they can be segmented for more focused fundraising endeavors.
The Current Situation

One of first steps taken in the reorganization of the department has been to downsize. The University Advancement Department has gone from a staff of 21 to a staff of 15 persons. Of equal importance is that more emphasis is being placed on functions directly related to fund development.

During the 1999-2000 fiscal year, targeted mailings were developed for the new College of Veterinary Medicine to introduce the college to potential constituents in the broader community. A closer relationship was established with the College of Pharmacy, the purpose of which is to assist the College in generating more scholarship funds. The first "Honor Roll of Donors" was developed and mailed to 1,700 of the University's supporters (see Exhibit IX.4). Protocols for the processing of gift revenue were developed by the University Advancement department and the Business Office, and have improved the efficiency of both departments. While endeavors such as these did not generate more revenue immediately, they are the foundation that will make it possible for the department to raise more funds.

From the GG & A consultants’ experience, the events, programs, and media relations departments were larger than one would typically find at a university of this size. The Cabinet, too, felt that these departments were very large given the results being achieved. Whereas some departments have been made smaller, the data management and fund development departments have grown to make increased fundraising and all its related functions possible.

In the past, the University Advancement Department has functioned without clearly defined goals, especially in the area of actual dollars raised. This fact has had negative consequences for the University because activities, such as planning events, developing publications, or engaging in public relations endeavors, were viewed by the staff as ends in themselves rather than being tied to the more typical fund development department goals of funds raised or constituents developed. For example, in 1999, the University held a prestigious event that was supported and/or attended by a cadre of notable people—new to the University—many of whom should have been cultivated after the event occurred. This will be the new modus operandi.

The staff now understands that the Office of University Advancement will play a role in generating $2 million of gift income—the goal established for the 2000-2001 fiscal year. To provide the training that will make it possible for staff members to understand fund development more clearly, not only as it applies to their particular jobs, but also from a more global university advancement perspective, many of the department staff members participated in the Region VII Case Conference in San Diego this fall. Staff members networked with people who have jobs like theirs at other institutions. They also began learning to view their work in a way that makes them full partners in fundraising for Western University. Next, the University Advancement Department must take some concrete steps forward in terms of raising funds, while at the same time, continuing to do the critical foundation work that will increase its effectiveness in doing so.

There are several impediments to the University Advancement Department's success, beyond those already mentioned. The first is that, although the Alumni Affairs, Grants and Contracts, and Gift Planning departments, as well as the University
Advancement Department, report to the same administrator, these departments have not as yet met to establish joint goals with shared accountabilities for meeting them. We hope that the new Vice President for University Advancement will accomplish this.

The department’s key strengths are the skill and experience of key data management and development staff. Its key weaknesses are the lack of substantive information in its donor records; the lack of an integrated, focused marketing plan; and the lack of alumni support and formal linkages to the University’s colleges and programs that would enable the University advancement department to help them generate funds.

Planning Goals for 2000-2001

Activities performed by the University Advancement Department will be an outgrowth of the following overarching goal:

The University Advancement Department will construct a fully integrated advancement plan and begin its implementation. Each of the following departments—alumni affairs, gift planning, grants and contracts, development, communications, and events and programs, will contribute its particular skills to develop relationships with key constituencies and generate more revenue in support of the University’s mission.

University Advancement Department Goals

- To develop a plan that addresses external communications and marketing, prospect research, donor cultivation and stewardship, annual giving, and targeted fund development for the University’s colleges and programs, and begin its implementation.
- Conduct a thorough analysis of the database and past solicitations.
- Clean up database by archiving donor records for which no current addresses can be obtained, and eliminating from donor records the names of multiple solicitors and codes that are no longer relevant.
- Prepare the database for segmented mailings and solicitations by first having it screened by an outside service provider (for pertinent philanthropic variables) and record relevant information regarding donors’ histories and endeavors carried out to cultivate or steward them, beginning with donors who have made contributions totaling $500 or more a year.
- Provide leadership and support in the development and implementation of a communications plan that enables Western University to recruit a higher caliber of students, increase its recognition and support in the broader community, and generate more non-tuition revenue.
- To form a development committee made up of key constituencies.
- To develop and begin implementing a

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up of key volunteers, alumni, and faculty who can provide advice and support for the staff in carrying out both fundraising and constituent development objectives.

Phone program with volunteer callers—alumni and other volunteers—to complement direct mail solicitations.

- To increase by 15%, the financial support for A Tribute to Caring by enlisting the help of both committee members and volunteers

➢ To raise $2,000,000.

Office of Gift Planning

Gift planning is truly long-range work. Because of the comparative youth of the University and its alumni, strong prospects are still relatively few in number. On the other hand, the histories of other institutions indicate that alumni are the strongest possible base of major giving. The presence of the gift planning procedure and personnel at alumni functions serves the purpose of laying a subtle foundation of comfort. Alumni who are currently 55 years old, in the height of their practices, and are trying to accumulate wealth, are someday going to be 75 years old. These alumni may have more wealth than they will need for their lifestyles, and thus they become the very best prospects. It is very important for the University to continue to lay the groundwork, build this relationship, and thus enhance the results of the University’s development activities in future years.

The Office of Gift Planning prepares major articles for *WesternU View* (see Exhibit IX.5), featuring trust or annuity donors. There is an attempt to have at least one major article in every issue of the *WesternU View* that includes names, places, details, and especially pictures that are attractive, upbeat, and carry the message of a positive decision. The *WesternU View* covers the largest audience on behalf of the University—approximately 12,000. These articles become the University’s broadest net for potential donors. Virtually anyone reading the magazine may be attracted to the concept, both for charitable intent and tax motives. The presence of these articles lays down a subtle foundation of knowledge in this area for the whole Western University community. Over a period of years, many of the best prospects and eventual transactions have or will come from responses to this foundation of knowledge of the program. As mentioned above, the Office of Gift Planning is being consolidated with other units under the Office of the Vice President of Development.

Two or three times annually, the Office of Gift Planning sends a newsletter dealing with financial topics to a selected mailing list of approximately 6,900 people (see Exhibit IX.6 for Western Advi$or newsletters). The purpose is to educate a more select donor base continually and subtly. This publication, while it features financial planning of a non-charitable nature, always carries a minor educational item about a specific type of charitable transaction. This is done without ever requesting a gift, but, again, its purpose is to provide a foundation of knowledge. On average, the University receives 20 written responses to every newsletter sent. Most of these responses are asking for financial information, but some include specific referrals and opportunities for major conversations.

To date, there has been an excellent response from alumni to the Western Advi$or. The building of relationships at state and national conventions shows results in
the willingness of alumni to assist in contacting their parents and friends. In the last few years, the University has had major conversations or completed transactions with parents of alumni or students, and has begun to impact the alumni constituency to some extent.

The Office maintains active files on approximately 426 donors. The Office specifically targets College of Osteopathic Physicians and Surgeons (COP&S) graduates. On a recurring basis, the University sends specific information about its programs to COP&S graduates. They obviously have mixed emotions about their own alma mater, now the medical school of UC Irvine, versus Western University of Health Sciences/College of Osteopathic Medicine of the Pacific. While Western University cannot control their loyalty, the University can continue to invite all of these people to consider Western University for major support. Five of Western University’s major gift transactions in the last few years have been from COP&S graduates, and some of the strongest prospects are also from this group. The Office keeps a continual presence in front of our alumni regarding gift planning. It has been beneficial to visit state conventions, where there are major groups of alumni, as well as the national American Osteopathic Association and American College of Osteopathic Family Practitioners conventions.

In discussions with key people involved in gift planning at other osteopathic medical schools, it was amazing to discover that Western University, one of the youngest schools, is doing gift planning work and achieving results comparable to the oldest and most established of the schools, e.g., Kirksville and Philadelphia. In addition, Western University learned that some of the older schools—Chicago, Kansas City, and Des Moines—have virtually no programs dealing with gift planning and related subjects.

In the local community, Western University does as many gift planning transactions as any other organization in the Pomona area, and significantly more than either Casa Colina or Pomona Valley Hospital in quantity of transactions. In addition, Western University compares favorably to local institutions, such as the University of La Verne and the Claremont Colleges. Part of this, of course, reflects Western University’s attitude—being aggressive about what we are willing to do, and taking on challenges and tasks in gift planning. The single largest challenge for Western University’s program is to reach out, contact, and build close relationships with multimillion-dollar prospects.

See Table IX.2, Results of Gift Planning Activities.

**Alumni Affairs**

Alumni Affairs, comprised of the Alumni Affairs Department and the Alumni Association, is dedicated to building and strengthening partnerships between the University and its alumni. The Department is charged with facilitating and enhancing communication among all Western University graduates and the University. The Alumni Association was founded in 1982 and has four primary missions: 1) to cultivate and foster professional and social relations among the graduates, matriculates, and staff of the University; 2) to support and advance osteopathic medicine, the allied health professions, pharmacy, nursing, and veterinary education, and the respective professional communities at large; 3) to provide a recognized medium for the expression of sentiment of the alumni; and 4) to promote the interests and well-being of the
University. As mentioned above, the Office of Alumni Affairs has been consolidated with other units under the Office of the Vice President of University Advancement.

In 1991, there were 813 graduates of COMP; today, there are over 3,000 alumni of the University (see Appendix IX.4 for an alumni profile). The number of dues-paying alumni has also increased, and now includes over 200 lifetime members.

In the 1999-2000 academic year, the Alumni Affairs Department and Alumni Association continued to expand and support efforts to promote alumni relations at Western University. The Department updated and redesigned the alumni newsletter; improved, modified, and increased the size of the alumni database; and established an alumni page on the University website.

The Alumni Association promoted membership and networking by sponsoring student receptions and lunches for Western University’s graduating classes; continuing to present a gift to students and 20 book scholarships (totaling $1,000) to first- and second-year DO students at August 2000 registration; and increasing alumni volunteer participation at Western University’s annual Continuing Medical Education (CME) seminar.

The goals of the Department and Association include efforts to expand and modify the alumni database, network with other campus departments, facilitate alumni giving, expand the alumni website, encourage the participation of alumni in scholarship fundraising campaigns, and continue to hold receptions for graduating students and the annual CME/Homecoming Weekend.

The vision of the Alumni Affairs Department and the Association for the next five years builds on their successes in establishing partnerships with Western University students and alumni. Five-year goals include efforts to examine the feasibility of establishing geographic alumni chapters or groups; beginning publication of an alumni brochure; establishing student-alumni mentoring programs and/or career placement programs; conducting additional alumni surveys (see Alumni Survey Exhibit II.4) and assessing the extent to which alumni are working in underserved communities; and planning for the future role of pharmacy, nursing, and veterinary medicine alumni in the ongoing activities and efforts of the Alumni Department and Association.

See Tables IX.3-5 for total alumni by program, total alumni by gender, ethnicity, and location.
Part I - The External Environmental Scan

The Environment Overall

While major, federally legislated health care reform initiatives have languished, regional, state, and local market pressures have continued to accelerate. The market is changing in ways that threaten what health sciences universities do: prepare future health professionals, conduct scholarly inquiry, care for patients, serve communities, and operate in a cost-effective manner.

To provide a continuing planning framework for the Western University of Health Sciences Institutional Strategic Planning and Resource Advisory Committee (ISPRAC), this environmental scan addresses current and anticipated environmental changes. The study of the many tactics and opportunities that are presented to the institution has enabled planners to construct informed decisions and directions for the future. This scan has been designed to evolve and remain dynamic to assist faculty, staff, and administrators in addressing events and circumstances that pose potential threats to the University.

The environmental scan begins with an executive summary. The next six sections examine demographic trends, economic issues, the political scene, information and telecommunications, health care, and higher and health professions education. The final section presents implications of the environmental changes for the future of the health professions university.

Summary

- Dramatically changing demographics in California and across the nation—including increasing ethnic diversity and an aging population—will require the health professions university to revise curricula and programs to prepare students to deliver health care to a diverse and older population. The recruitment of diverse students, faculty, and staff at the University will also be important in meeting the needs of a culturally diverse society.
- New approaches and flexibility in University programs will be required to accommodate the needs of the growing population of adult learners and working students. There will be an increasing emphasis on continuing education and lifelong learning.
- A robust national and local economy will enable the University to strengthen and expand its educational and outreach programs and services. Marketplace issues will continue to impact all sectors of higher education and the health professions, and should continue to be monitored by the University.
- Expansion of California’s public higher education institutions will provide new opportunities for student recruitment and institutional partnerships.
- Managed care and cost-cutting pressures at the national, state, and local levels will continue to impact the nature of health care delivery and health professions education. International issues relating to health systems and the role of the government in providing access to health care should be monitored.
- Many academic medical centers, including large university teaching hospitals, are struggling financially. Intense competition among providers, decreasing state and federal research funding, and Medicare cuts have produced a wave of mergers and sales of teaching hospitals.
Advances in information technology, including the World Wide Web, virtual classrooms, and distributed learning will result in the need to restructure curricular approaches and designs, medical services, and patient interactions to keep pace with revolutions in technology.

The job market for health professionals should be closely monitored. Nursing shortages are a perennial problem in California and across the United States. The job market for primary care physicians and pharmacists has expanded, although an oversupply of physicians is expected in the years ahead. The job market for physical therapists, physician assistants, and veterinarians is expected to tighten (although veterinarians may continue to be in high demand in California). Creative and innovative student recruitment efforts, program planning, and resource support will be critical in the years ahead for the continued success of the University’s educational programs.

The rise and popularity of alternative and complementary medicine and home-based care should be taken into account in planning the future curricula and clinical training experiences of health professionals.

Forward-thinking leadership, institutional reorganization, flexibility, innovation, and broad-based campus and community support will be essential in the years ahead if the health professions university is to be successful in meeting the challenges of the changing environment.

Demographic Trends

In a recent essay on the dynamically changing health care environment, Dr. Phyllis Beck Kritek reports that the single greatest challenge confronting health care in the United States today is the changing social and cultural diversity of the nation. According to the U.S. Census Bureau, in 1995, European Americans comprised 74% of the U.S. population; by 2050, that percentage is expected to decrease to 53%. Latinos, who represented 10% of the U.S. population in 1995, will account for about 24% of the nation in 2050; African Americans, who comprised 12% of the U.S. population in 1995, will comprise 14% of the nation in 2050; and Asian Americans, who accounted for 3% of the nation in 1995, will represent about 8% of the U.S. population in 2050. The size of the Native American population—approximately 1% of the nation—will remain relatively unchanged.

In addition to becoming more ethnically diverse, the population of the United States is aging. According to U.S. Census Bureau projections, the number of Americans age 65 and older will double in the next 30 years, dramatically increasing the number of patients with age-related disabilities, including decreased mobility, sensory perception, and reasoning. In California, researchers, educators, and other presenters at a February 2000 Joint Informational Hearing of the California State Senate Committee on Education and the State Senate Subcommittee on Aging and Long-Term Care reported that the number of individuals in California age 65 and over will triple in the next 40 years. Currently, there are approximately 3.7 million older persons in California, but only about 800 doctors specializing in geriatric medicine.

Health care systems and health professions universities must be responsive to these shifts by supporting educational and curricular changes that prepare health care workers to treat the elderly and the disabled. The diverse needs of the older population (e.g., in terms of ethnic diversity and diversity in health and wellness) should be
incorporated into health systems planning, policy development, and health professions education. Resources will be needed at both the public and private levels to assist campuses and schools in developing career pathways and programs that respond to the need to educate health professionals in geriatric care.

The dramatically changing demographics of the population present both a challenge and an opportunity to the health professions university in delivering educational programs and reframing curricular objectives to educate students to meet the needs of an increasingly diverse and aging society. Public and private resources will be needed to support the education of health professionals in geriatric care. The demographic trends also underscore the importance of admitting and employing diverse students, faculty, staff, and practitioners at our nation’s health professions universities.

Economic Issues

According to economic analysts, the U.S. economy remains strong in early 2000 and will continue to expand in the coming months, although at a slower pace than in 1999. In his semiannual report to Congress in February 2000, Federal Reserve Chairman Alan Greenspan stated that the nation’s economy “posted another exceptional performance in 1999.” He reported that the ongoing expansion of the U.S. economy has been maintained, and that “inflation has remained subdued, in marked contrast to the typical experience during previous expansion” periods. Greenspan also stated that productivity growth in the U.S. has improved substantially since the mid-1990s, “boosting living standards while helping to hold down increases in costs and prices despite very tight labor markets.”

At the Annual Inland Empire Economic Forecast Breakfast in December 1999, Jack Kyser, Chief Economist for the Los Angeles County Economic Development Corporation, indicated that there are six major economic concerns for the United States today: 1) a “very tight” labor market, 2) a 4.1% national unemployment rate, 3) an uptrend in inflation, 4) increases in oil prices, 5) a rise in consumer credit and debt levels, and 6) the possibility of Y2K issues, particularly in the international sector.” Other key issues that may impact U.S. economic development include two major presidential elections (in the United States and Mexico), health and defense concerns, and stock market turnarounds, particularly in the technology fields. The Asian economy, according to Kyser, is rebounding and should continue to be closely monitored. European and Latin American countries are experiencing economic growth.

At the state level, Economic Forecast Breakfast speaker Bill Lloyd, Director of Labor Affairs and Senate Relations for Governor Gray Davis, reported that California will have a surplus of $2.5 billion by year’s end, a higher figure than anticipated. Lloyd remarked that business-labor partnerships remain at the forefront of the Governor’s agenda, including significant labor bills related to the workweek, sick leave, disabilities, and fair and equitable retirement plans.

Senator James Brulte, member of the Senate’s Finance, Investment, and International Trade Committee, reported at the 1998 Economic Forecast Breakfast that California remains the nation’s largest exporting state and is a significant player in the world economy, particularly in the economy of the Pacific Rim. According to Brulte, four major trends will impact the economy of California over the next five to six years: increased spending on roads, highways, and technological products; continued efforts to
deregulate industries, including public utilities; expansion of higher education through growth in the California State University and University of California systems, and partnerships among public and private institutions; and continued revision and improvement of California’s tax code to reflect the changing economic environment.

The Inland Empire continues to be one of the fastest growing areas in the nation. According to local and regional economists, in the past eight years, the Inland Empire has added 169,400 jobs—the highest increase in job growth in southern California. Home prices, on average, remain lower in the Inland Empire than in nearly all other areas of southern California, including Los Angeles, San Diego, Ventura, and Orange counties. Industrial space lease rates are lower in the Inland Empire than in most other major areas of southern California, which provides an incentive and an opportunity to develop new businesses. At the same time, labor costs in the Inland Empire are lower than those in other major West Coast labor markets, such as San Francisco, Los Angeles, and Seattle. Finally, major trucking industries are moving to the Inland Empire, which promotes local economic growth. Between 1998 and 2010, it is expected that the population of the Inland Empire will grow by some 59% or 1,500,000 people—an increase of 128,000 persons per year.

Dr. John Husing, principal with the firm, Economic and Political Analysis, reports that the greatest economic development challenge facing the Inland Empire in the new millennium is investing in the talents and skills of the region’s human resources. Most of the businesses in the Inland Empire, Husing explains, are small businesses employing educationally underskilled workers. According to Husing’s research and site visits to 200 small manufacturing companies in the Inland Empire, these workers are disenchanted with the traditional educational system and in need of basic educational training, including reading, writing, English language, and computer skills. Husing recommends that companies provide on-site (or local) training centers where employees can take courses to enhance their general education abilities. The education of these “forgotten workers,” Husing says, represents a new sector of the education of adults that should be incorporated into statewide educational programs, partnerships, and planning. Dr. Husing recommends that the training be conducted by school districts (with increased funding), proprietary schools, and/or labor unions.

Economic issues will continue to impact all sectors of higher education and the health care industry. The economic expansion and population growth of the Inland Empire and California’s public higher education systems will provide new opportunities for Western University to reach out to serve students, both local and from across the state, who are seeking careers in the health professions. The calls for education and training of the “forgotten worker” may also involve the University in a new arena of adult education. The robust economy may offer opportunities for additional growth and enhancement of health care services that are congruent with the mission, activities, and future directions of the University. The University should continue to monitor marketplace conditions to remain competitive and adaptable in the years ahead.

The Political Scene

In the political arena, there are a host of issues, policies, and developments that impact the environment for health professions education and health care delivery. The 1997 Budget Reconciliation Act, which placed a cap on the number of residency positions that postgraduate medical training institutions could offer, and lowered the
reimbursement that these institutions receive for delivering residency care to Medicaid patients, continues to limit the ability of the osteopathic profession to establish new residency training opportunities.

The FDA continues to implement the provisions of the FDA Modernization Act (FDAMA) of 1997, including efforts to accelerate the review of new medications, increase patient access to experimental drugs and medical devices, charge the pharmaceutical industry user fees for submitting new drug applications, and regulate medical devices. In addition to the initiatives of the FDAMA, the agency is tackling issues such as labeling requirements for over-the-counter medications, the regulation of nicotine, tobacco use prevention among youth, the safety of the blood supply, the safety of the food supply, the illegal sale of drugs over the Internet, efforts to combat bioterrorism, and the pharmaceutical industry’s continued concern with time-to-market issues and prescription to over-the-counter status for medications.

There are also developments pertaining to scientific research. The National Institutes of Health (NIH) received a budget increase of $1 billion (or 5.6%) for fiscal year 2001. In an opening statement on the NIH fiscal year 2001 budget before the House Appropriations Subcommittees on Labor, Health and Human Services, and Education, NIH Acting Director Dr. Ruth L. Kirschstein reported that the new 2001 budget will enable the agency to continue to move forward with its agenda for scientific research. NIH activities will include an expanded program of clinical research devoted to pediatric cardiovascular disease, diabetes, digestive diseases, and the treatment of drug abuse, and studies of complementary and alternative medical practices for insomnia, pain relief, and liver diseases. A new Coordinating Center for Research on Health Disparities will be established, and genetic medical research will be conducted to identify the genes involved in heart diseases, cancer, epilepsy, Alzheimer’s disease, and psychiatric disorders. The NIH will also focus its efforts on research in neurosciences, bioengineering, and bioimaging.

On the education side, President Clinton’s continuing efforts to provide incentives for postsecondary education attendance, technology initiatives, and proposals to expand higher education will be important to health professions universities. The priorities of the U.S. Department of Education concerning approaches to student financial aid, accreditation, and quality assurance efforts within higher education also deserve careful monitoring. The results of the 2000 presidential election and the initiatives of a new administration will have implications for higher education, health care, and public policy.

In California, the Governor’s continuing agenda includes expanding the economy and improving the state’s health care, public safety, and education systems. The state’s involvement in addressing diversity and access issues in health care and education is evolving and should be closely observed.

In the international sector, the World Health Organization recently completed The World Health Report 2000. Among the key conclusions of the report is the need to increase government responsibility for health care, including allocation of funding for health services for poor or marginalized populations, and monitoring of national health services and resources. The report recommends that every country develop health policies and strategies that incorporate public and private funding of health services, and address goals for health and health services improvement. The report also recommends
that countries expand efforts to educate consumers about health and available health services.

In planning for the future, Western University of Health Sciences should continue to monitor the changing local, national, and international political environment, ensuring that the policies, plans, and developments of the institution are flexible, adaptable, and dynamic to respond to the changing political climate. The national scientific health care research initiatives should inform, in part, the University’s teaching, scholarship, and curricular objectives. Access issues in higher education will continue to affect the admission and enrollment management activities of the University.

Information and Telecommunications

In the age of telecommunications reform, manufacturers of equipment, regional telephone monopolies, and long distance providers, as well as television and cable networks, may begin to protect their turfs. Reformers are beginning to allow large broadcasters to increase their concentration of television stations, cable outlets, and radio stations in any given market; in addition, many companies are entering into each other’s businesses. Consolidations, including strategic alliances and acquisitions, continue to affect the telecommunications industry. Service providers may gain inroads in manufacturing and vice versa. Although clear monopolies do not yet appear to be on the horizon, new products, competition for customers, and market position will be drivers in the near run.

The World Wide Web has, in many ways, revolutionized the nature and flow of communication and information in all sectors of our society. A recent California poll revealed that 51% of the state’s workers are now “wired”—they routinely use personal computers and share information as part of a team. These wired workers outnumber blue collar and retired workers two to one, they are optimistic and believe that California is on the right track, they are neither free market conservatives nor big government liberals, they are moderate on taxation, they oppose government programs that guarantee economic outcomes, and they are libertarian on lifestyle issues. With a quarter of the nation’s Internet hosts and half of its multimedia companies located in California, the state may again be the premier political trendsetter of the country.

Education and training for the health professions will evolve with the changing technological environment. Web-based instruction and virtual learning environments will increasingly appear on the education horizon, and will impact the nature of postsecondary instruction and health care delivery. This presents a challenge for the health professions university to incorporate internet-based instruction to educate an increasingly technologically savvy student population that will provide health services to an increasingly technological society. Advances in computerized patient record systems, electronic publishing, multimedia patient simulation exercises, and medical research will also impact the future of health care delivery, research, and health sciences education. Issues relating to access and quality of health information and services on the World Wide Web (including internet-based pharmacy services) should also be monitored.

Virtual learning communities, web-based instruction, and other technological advances are revolutionizing higher education, health professions education, health services, and information access and exchange. Curricular reforms, instructional
delivery, and institutional information systems in the health professions university must actively and innovatively incorporate changes in technology if our campuses are to educate students to succeed in an increasingly technology-driven health care industry and society.

**Health Care**

Market forces will continue to work both for and against the current health care system. Hospitals, doctors, and other providers will band together, rather than going it alone. Although companies that manage care are growing and prospering, regulators increasingly scrutinize them. The largest purchaser of health care—the federal government—will reallocate its ties in the years ahead based on continuing evidence that the Medicare system will bankrupt early in the new century. Rising health care costs (including the growth in prescription drug costs) and the looming retirement of the Baby Boom generation threaten the long-term financial stability of Medicare.

Managed care is pushing the need for health care providers who are capable of practicing in diverse settings and in interdisciplinary teams. Health care providers are also finding themselves subjected to the rules of supply and demand, price sensitivity, and market competition—situations from which they were insulated just a few years ago. Many of the nation’s most prominent academic medical centers, including large university teaching hospitals, are struggling financially. Intense competition among providers, decreased federal research funding, and Medicare cuts have produced a wave of mergers and sales of teaching hospitals.

Cost-cutting pressures at the state, local, and federal levels may result in a rising caseload of charity care for private industry providers. These providers will be squeezed between the rising costs of uncompensated care and the inability to raise private sector prices—as managed care companies give more bargaining power to formerly disparate groups of consumers. We may also be witnessing more mergers, acquisitions, and outright failures of larger managed care organizations. Rising costs in managed care systems may lead to a new wave of price increases to purchasers of care.

The pharmaceutical industry must also be closely monitored. Large pharmaceutical companies are likely to take one of two pathways in the coming years. The first allows for the acquisition of or alliance with small biotechnology research firms and more established firms with unique products. These research-driven companies will seek to safeguard their position by offering a widely diversified, cost-effective product line to large managed care organizations. The other pathway appears to foster integration beyond manufacturing to include service providers. These firms will specialize in treating specific classes of diseases by coordinating physician, hospital, nursing home, and drug treatment regimens to reduce costs and optimize outcomes. These firms will also leverage information systems and rely on large volume to weed out inefficiencies and lower costs.

Attention must also be given to the regulation of health care providers, including licensure, certification, and accreditation issues. Growing public and employer discontent with the current systems that tend to protect the provider may lead to new experimentation with scopes of practice.
Many rural and some urban areas continue to be underserved in terms of access to health care. There has also been a shift to home-based or home-like care and away from hospital and clinic settings, resulting in new types of personnel and services. This development affects financing, workforce, and legal issues. By 2010, the Institute for Alternative Futures projects that self-managed care will be a major source of competition for managed care. Individuals and families will increasingly choose to manage their own care, using only high deductible catastrophic insurance as a backup. Individuals will also have access to effective self-care tools, including biomonitors, personal electronic health coaches, and diagnostic expert agents, enabling them to handle most of their health care needs in their homes.

In addition, the rapid growth and popularity of alternative and complementary medicine will also have a major impact on the nature of health care delivery. According to the Institute for Alternative Futures, complementary and alternative therapies—such as chiropractic, Oriental medicine, and homeopathy—are among the fastest growing approaches in U.S. health care today. In 1990, over one-third of Americans sought alternative therapies. By 2010, forecasters are predicting that at least two-thirds of Americans will be using some form of complementary or alternative medicine. In a recent comprehensive study of complementary and alternative medicine, the Institute reported that complementary and alternative approaches will become major tools for health promotion and disease prevention in the United States, and that conventional health care providers will increasingly integrate complementary and alternative approaches into their practices. According to the report, "Integrated therapies, which synthesize body/mind/spirit approaches with conventional modalities, are already showing among the highest outcomes for treating heart disease, and will grow."

In a recent article in Academic Medicine (Vol. 73, December 1998), Dr. Douglas L. Wood, President of the American Association of Osteopathic Medicine, emphasized the need for educating health care professionals for the 21st century. He stated that "medical schools must work collaboratively with managed care organizations and integrated health care delivery systems to modify curricula and develop clinical experiences that will adequately prepare medical students to meet the health care needs of populations and individual patients while practicing high-quality, cost-effective medicine" (p. 1280).

Issues relating to the supply of and demand for qualified health professionals will also impact the future of health care delivery and health professions education. The field of osteopathic medicine is experiencing explosive growth. According to a recent article, "Osteopathic Medicine’s Growing Pains," the number of osteopaths in the United States increased by 50% in the past decade. This is due, in large part, to the profession’s emphasis on primary care. Each year, the nation’s 19 osteopathic medical schools enroll approximately 2,000 new students. The supply of both osteopathic and allopathic physicians may exceed demand in the decade ahead as the nation’s medical schools continue to expand capacity and admit additional students. This may result in intensified competition for jobs for physicians, and lower earnings. These trends should be taken into account in University admission and enrollment planning.

Nursing shortages are a perennial problem in California and across the United States. According to a recently released report by the California Strategic Planning Committee for Nursing Colleagues in Caring, California has the lowest proportion of employed registered nurses (RNs) per 100,000 people in the United States. The
national proportion of employed RNs per 100,000 people is approximately 798; the proportion in California is 566. Although California’s population continues to increase, admission to schools of nursing in the state has declined. The nation’s nursing workforce is also aging, and many RNs will retire in the next several years. At the same time, the nursing faculty is growing older, and there will be a shortage of qualified nursing faculty in the years ahead. A recent survey sponsored by the American Organization of Nurse Executives (AONE) reported that enrollment in four-year nursing programs has dropped; at the same time, hospitals are having more difficulty filling nursing vacancies. Researchers from the University of California, San Francisco Center for California Health Workforce Studies estimate that an additional 43,000 registered nurses will be needed in California by 2010, and an additional 74,000 nurses will be needed by 2020, to maintain a stable ratio of RNs to the population of the state.

The demand for pharmacists is currently very high and will continue to be high in the foreseeable future as a result of several driving factors: 1) the rapid expansion of chain drugstores; 2) the number of major new drugs that have appeared on the market and the number of drugs that are expected to be released in the near future; 3) the aging population, which increases the need for pharmaceutical products and services; and 4) the expanding roles and scope of practice of pharmacists in such areas as immunizations, collaborative drug therapy management, patient education, and disease screening.

Despite a favorable marketplace for physical therapists (PTs) and physical therapist assistants (PTAs) during the last 10 years, the number of PTs and PTAs has increased, along with managed care cost controls. The American Physical Therapy Association (APTA) predicts a nationwide surplus of PTs and PTAs in the years ahead. According to APTA’s Workforce Study, by 2005-2007, there will be a 20-30% oversupply of physical therapists in the United States. PT and PTA salaries are decreasing and job competition has increased. As a result, fewer individuals are entering PT education programs. These findings, again, have implications for revising admission practices and implementing curricular innovations that will attract students to the University’s program.

Physician assistants (PAs) are also facing an intensely competitive job market. According to a recent report that was prepared by the Association of Physician Assistant Programs (APAP) for the Bureau of Health Professions under the Health Resources and Services Administration in the Department of Health and Human Services, “there is a growing concern among PAs that the job market for their services is tightening, especially in regions with a large supply of PAs such as the Northeast and southern California.” This is a result of a “tremendous demand” for PA education, which fueled growth in PA educational programs in the past seven years. To address the oversupply issue, APAP recommends that educational programs, policy makers, and health care professionals collaborate to address the contributions of PAs across the health professions, and to encourage PAs to work in underserved communities.

In the field of veterinary medicine, a recent study by the American Veterinary Medical Association, American Animal Hospital Association, and Association of American Veterinary Medical Colleges projects an oversupply of veterinarians in the United States, which will result in a downward pressure on veterinarians’ incomes. Although demand for veterinary services has grown significantly in recent years, economists forecast a slowing of demand by the year 2015. According to the report,
“Modifications in the education of veterinarians will enable the profession to capitalize on emerging markets and to create new services.” Veterinarians in the State of California may experience different market conditions. According to a 1998 UC Davis newspaper editorial, “Veterinary Medicine: Mandates and Missions for the 21st Century,” California has the fewest veterinarians per capita of all states in the nation. There are only 17 veterinarians per 100,000 state residents, compared with the national average of 21 veterinarians per 100,000 people.

To address the current market for health professionals and the implications for the University, the University is conducting a salary survey to compare faculty positions to market conditions. Strategic enrollment management and university-wide marketing efforts and curricular enhancements are also being pursued.

Health care professionals will require new skills and competencies if they are to succeed in the changing, market-driven health care environment. Incorporation of self-directed learning and problem-solving skills, as well as grounding in principles and application of information management, health care finance, managed care, home-based care, and alternative/complementary medicine, will be essential for future health workers. At the same time, interdisciplinary, collaborative education across health science disciplines will be critical if we are to ensure that our health professionals succeed in team-based interactions in research and patient care.

The job market for health professionals should be closely monitored. Continued efforts are needed to encourage individuals to enter the nursing profession. Student recruitment efforts, expanded resources, and scholarship funds will be critical in the years ahead for the promotion of nursing and the other health professions programs at the institution. Western University should continue to explore innovative curricular approaches, enrollment, and marketing strategies to promote its professional fields and prepare students to succeed in an increasingly competitive marketplace.

**Higher Education and Health Professions Education**

Higher education is positioned to occupy a pivotal role in society in the new millennium. In the coming years, demand for college and university education is expected to skyrocket, while resources available under existing models of educational delivery should remain fairly static. According to a January 2000 report by the University of California, Berkeley, by 2010, more than two million new, full-time students are expected to enroll in the nation’s colleges and universities. Campuses, including health professions universities, must be prepared to meet the new tidal wave of students.

There are currently 3,842 institutions of higher education in the United States. Together, these campuses enroll more than 14 million students and spend $120 billion per year in operations. These institutions also serve an increasingly diverse population of students. In Fall 1997, for example, White/Caucasian students comprised 80.7% of the total college and university enrollment in the United States, African Americans 10.6% of the student enrollment, Asian Americans 5.3%, Latinos 4.2%, Native American/Alaska natives 3.1%, and other groups 2.9%. By the year 2030, it is predicted that the proportion of non-Hispanic white high school students will drop to 50%, thus increasing the ethnic diversity of our nation’s colleges and universities.
According to a December 1998 article in the *AAHE Bulletin*, over the last three decades, the percentage of nontraditional-age college students increased from 28% to 44%; at the same time, the number of women attending colleges and universities rose by 23%, and the percentage of full-time college students who were employed rose from 36% to 69%. These demographic changes, again, will impact the future of educational delivery in the health professions—universities will need to restructure their curricular offerings to accommodate the needs of working students.

Continuing, lifelong learning will be essential for health care providers and other workers in the coming years. Looking to the future, it is estimated that, just to stay even—perhaps to maintain basic employment—each individual in the workforce will need to accumulate learning equivalent to that currently associated with 30 credit hours of instruction, every seven years. This can translate to the full-time equivalent (FTE) enrollment of one-seventh of the nation’s workforce at any point in time, or over 20 million FTE learners—which is more than double current capacity. The same assumptions can be extrapolated to other industrialized countries.

Although a variety of institutions have tinkered with these realities in the hopes of capturing the market for more accessible and responsive education, most efforts have been transitions, not transformations. A typical, contemporary, enabling cycle has included retrenchment, reorganization, restructuring, and reallocation of higher education institutions. Strategic transformation will require simultaneously realigning higher education with the needs of learners, redesigning higher education to achieve this realigned vision, redefining roles and responsibilities, and reengineering organizational processes to respond to the shifting demographics and to increase productivity and quality dramatically.

In a recent article examining the changing role of higher education in the 21st century, James J. Duderstadt reports that today’s institutions are “intensely entrepreneurial,” and that if campuses are to tap that entrepreneurial spirit and transform themselves into environments that foster learning, they will need to embrace new paradigms. These new models for the future include campuses that are increasingly international, diverse, creative, and integrated rather than specialized, and institutions that accommodate cybereducation and promote the scholarship of teaching and learning.

One means of redesigning higher education is through the development of community partnerships and K-12 alliances, including teaching and health professions academies that build career pathways for students of all ages and ability levels. Collaborative arrangements among health professions universities, the community, and the K-12 sector will be especially critical in California as the state confronts a serious shortage of skilled workers in the years ahead.

Four recent reports by the Pew Health Professions Commission evaluate the context and environment for the future of health care delivery. These reports place various challenges before health professions schools, and include recommendations for educational change. In addition, the American Association of Colleges of Pharmacy, based on the recommendations of its Commission to Implement Change in Pharmaceutical Education, has published a collection of resources addressing issues of curricular context and process. These resources can easily be adaptable to other health professions educational programs.
The attached document, *Ten Paradigms for the 21st Century University*, describes several unique institutional models and key questions related to each paradigm. In reality, none adequately defines the future of our University, but rather establishes a conceptual framework for addressing critical issues facing Western University.

The future higher education curriculum must take into account the demographic changes in the student population, trends in continuing education and lifelong learning, new models or paradigms of the University, and collaborative partnering efforts at all levels of the educational system if we are to educate increasing populations of students to be successful health care practitioners in the 21st century.

**KEY, OVERALL OBSERVATIONS OF THE IMPACT OF ENVIRONMENTAL CHANGES ON THE HEALTH PROFESSIONS UNIVERSITY**

1. **In the changing economic, educational, and sociopolitical climate, it is essential that health professions universities reevaluate the nature of their curricula, and teaching and learning strategies.**

   Open dialogues, classroom exercises and assignments, and curricular changes will be critical if health professions universities are to ensure that they are providing culturally inclusive learning opportunities for students, faculty, and staff, along with curricular programs that prepare health care workers to succeed in a changing social, political, educational, and economic environment.

   The University’s curriculum must incorporate education in the new competencies that will be required of the future health care worker. These competencies include technology; managed care; geriatric care; care for people with disabilities and their service animals; alternative and complementary medicine; and interdisciplinary, team-based education and health services.

2. **As a result of market change, health professions universities must dramatically reinvent themselves to remain financially viable and to accomplish the mission of education, scholarship, patient care, and public service.**

   University enterprises, governance, organization, and leadership must support and enhance a strategic plan that meets the demands of the new health care market. These market demands include speed and decisiveness, ability to take risks and manage change, primary care capacity, unified response, collaboration, and demonstrated value.

3. **The University must be adaptable to change. Organizational structures should be flexible to meet the needs of the dynamic social, political, and educational climate.**

   Given the complex and rapidly changing environment, the University must develop mechanisms that can easily adapt when necessary. This usually translates into flatter, less complex organizational structures for staff, faculty, and administration.
Partnerships and strategic alliances will also enhance organizational response and capacity. However, collaboration often requires creative financing structures and integrated information systems.

4. **Leadership, at all levels, is the critical variable in managing change.**

To be successful in managing change, leaders must be skilled in understanding the market environment; defining and communicating a common vision; rewarding risk-taking behavior; building trust; establishing and strengthening external relationships; recruiting excellent employees; and being politically savvy, consistent, disciplined, and focused.

5. **Health professions universities must capitalize on the potential competitive advantage of linking health care providers and delivery systems into an integrated clinical enterprise.**

Speed, flexibility, and the ability to resolve the critical problems facing the health care delivery system are paramount for the health professions university. Institutional and provider (teacher and clinician) behavior should be better aligned through gain-sharing arrangements between hospitals and physicians, and other methods.

6. **Effective governance is essential for mission fulfillment and market competitiveness.**

A future-oriented planning agenda must be supported by the University. Governing board representatives should be selected to provide the skills required to operate in the current health care and educational environments, and should have the stature necessary to add value to external relationships. The Board must understand and support strategic initiatives while providing considerable operating freedom.

7. **The University should strive for distinctiveness.**

It is no longer sufficient for an institution to be just another health sciences university, or to maintain a primary care mission as its only area of excellence. To attract students and to provide high-quality education, health services, and scholarly research that will meet the needs of the changing society and the needs for a clinically competent health care provider, the University must be innovative. The institution’s mission, strategies, and values should support this distinctiveness.

Each academic unit at the institution must also be distinctive in a manner that supports the overall mission and goals of the University. Teaching, scholarly activity, patient care, administration, and public service are areas that will benefit from innovation, experimentation, discarding ineffective practices, and evaluation.

8. **Planning must be well conceived, supported, broad-based in participation and impact, and communicated.**

The Institutional Strategic Planning and Resource Advisory Committee should confidently advance its agenda throughout the University. A more direct relationship should exist between planning and budgeting, and between planning and priority setting.
Incentives should be in place to encourage the institution to test new ideas, fast-track need initiatives, and evaluate long-standing practices.

Planners should seek information and feedback from the grassroots; all planning actions must be widely communicated and inclusive of all constituents in the University community.

9. **Expertise must be available to implement change.**

The institution must invest in its priorities, whether such investment constitutes human resources, physical resources, fiscal resources, or infrastructure. Such investments should be communicated in the context of the overall University mission and goals.

By looking to the future and striving to achieve these operational and planning visions, Western University of Health Sciences can move forward confidently, and with distinction, in the new millennium.
As a result of the six WASC working groups, the Assessment Subcommittee and the work of the Office of Institutional Effectiveness, and the deliberations of the Institutional Strategic Planning and Resource Advisory Committee (with a feedback loop to and from the President’s Cabinet and the Academic Affairs Council), the University has developed a revised strategic plan to guide its development for the next five years. The plan is presented below.

**Mission:** Western University is a graduate university of medical sciences that educates health professionals to practice and teach with excellence and compassion. Within a learner-centered environment, the University encourages lifelong learning, supports faculty and student scholarly activities, provides patient care in support of clinical training, and enhances the quality of life in the region through community service.

**Values:** The people of Western University are dedicated to caring as they pursue their educational, scholarly, patient care, and public service activities. The University encourages the diversity and interdisciplinary nature of its programs, students, faculty, staff, and administrators. The ideals of continuous quality improvement, lifelong learning, long-term planning, fiscal strength, adaptability, and agility in the rapidly changing worlds of health care and education are realized through innovation, teamwork, and collaboration within the University, as well as through its network of academic health centers and community partners.

**Vision:** To be THE graduate university of medical sciences of choice in the western United States.

**Goals:**

1. To provide top quality, learner-centered educational programs in selected graduate medical sciences to educate a health workforce that meets the needs of the State of California and the western United States.

2. To link educational, research, and service activities and programs in a learner-centered environment through partnerships with academic health centers and other health- and education-related organizations to improve the quality of life of the surrounding communities.

3. To ensure top quality postgraduate education and training opportunities for graduates of its programs.

4. To be renowned for using the Internet to promote “e-effectiveness”, “e-efficiency”, and “e-learning”.

5. To ensure organizational effectiveness and development.

**Objectives:**

1. To ensure full, continuing accreditation for the University and all of its academic programs.
2. To maintain and enhance the quality of learner-centered professional and graduate education in the medical sciences.

3. To recruit, admit, and retain a high-quality and diverse student body by providing learner-centered programs.

4. To recruit, retain, and renew high-quality and diverse faculty, staff, and administrators.

5. To continuously enrich the environment for teaching, scholarly activities, and research.

6. To share our educational, research, and clinical expertise with the local professional and public communities, and in partnership with members of our academic center for excellence and OPTI (Osteopathic Postgraduate Training Institute)-West.

7. To strengthen postgraduate education and training through effective and efficient partnerships with our academic health centers, OPTI-West, and other teaching/learning institutions within our postgraduate university network.

8. To integrate planning, resource allocation, and assessment activities.

9. To build a more inclusive on-campus community through collaborative efforts among all campus units and programs, both academic and non-academic.

10. To promote the University’s standing and reputation in the region, state, and nation, and internationally.

11. To use human, physical, financial, and information resources more effectively, while continually developing new sources.

12. To increase revenue through gifts, grants, contracts, and for-profit activities.

**Strategies:**

1. Provide a strong learner-centered orientation in all activities.

2. Further develop Center for Academic and Professional Enhancement to address student, faculty, and staff learning needs.

3. Build strong, learner-centered clinical training capabilities through partnerships with academic health centers and clinical education.

4. Further develop learner-centered, interdisciplinary curricula.

5. Develop sources of revenue through programs and partnerships with our academic health centers and other health-related initiatives.

6. Review and enhance institutional advancement and development activities.

7. Explore new markets for students and programs.
8. Manage enrollments effectively through the strategic enrollment management process.

9. Review and revise admission processes as required.

10. Identify and support students who may be at risk.

11. Review, integrate, and continually improve upon all didactic and clinical curricula.

12. Refine the student outcomes assessment plans, and use outcomes to improve practices.

13. Enhance the availability of information in support of teaching, scholarship/research, and service activities.

14. Develop resources and support that ensure an optimal physical environment and facilities to meet the educational, research/scholarly, and service missions of Western University of Health Sciences.

15. Consider, and implement where appropriate, the utilization of an internet-based platform for all educational and business-related activities.

16. Modify and expand selected research programs.

17. Integrate scholarly and research activities into all instructional programs.

18. Develop external strategic alliances that support the University’s mission and scholarly activities.

19. Develop requisite policies and procedures to motivate scholars to become active in research (and inclusion as part of distribution of effort, indirect cost recovery policy, etc.)

20. Establish guidelines for accountability.

21. Implement faculty distribution of effort, goal-setting, and professional development activities.

22. Standardize course and faculty evaluation processes, and use the outcomes to improve practice (including a system of rewards and consequences).

23. Review, revise, and implement staff and administrator evaluation and development processes.

24. Make strategic faculty, staff, and administrative hires.

25. Encourage ethics, honesty, openness, inclusion, fairness, objectivity, and patience in all interactions.

26. Establish a strong spirit of university community on campus and at all Western University clinical sites.
27. Encourage faculty, staff, and student participation on University, community, and professional committees.

28. Establish communication processes that promote shared decision making.

29. Support student, faculty, and staff activities and organizations.

30. Continually monitor changes in health care and education environments.

31. Develop and support initiatives that anticipate and respond to lifelong learning needs of health professionals.

**Proposed Measures of Success**

(To be defined specifically in academic year 2000-2001):

1. Accreditation status of each academic program. (100% of accreditable academic programs should be fully accredited within the appropriate timeframes of their individual accreditation processes)

2. Number of completed applications received. (Increase by 5% annually)

3. Percent of student applicants offered admission to program. (Decrease by 5% annually)

4. Acceptance rate of admitted students. (To be determined)

5. Quality of entering classes (as measured by undergraduate GPA, MCAT, PCAT, GRE, et al.).

6. Race, ethnicity, gender, and age data.

7. Results of Admissions Process Improvement project. (Increased satisfaction, as measured by quality of entering classes and “customer” satisfaction surveys)

8. Comparison of results of Admitted Student Questionnaire to First-Year Student Year-end Survey (student satisfaction survey). (Increased quality ratings)


10. Percent of students graduating on time.

11. Alumni employment statistics. (100% employment in position of choice within six months of graduation)

12. 100% participation in course/faculty evaluations. (Increase by 25% per year until 100%)
13. Student ratings of courses and professors (including clinical rotations). (95% of students either satisfied or very satisfied with courses and professors within three years)

14. Evaluations of students on clinical rotations/practica. (95% of all students receiving A’s and B’s within three years)

15. Student evaluations of clinical rotations and preceptors. (95% of students either satisfied or very satisfied with clinical rotations and preceptors within three years)

16. Number of block clerkships secured for COMP.

17. Exit surveys. (95% of students either satisfied or very satisfied with Western University education within three years)

18. Student outcomes assessments.

19. Outcomes of curricular reviews.

20. Employer satisfaction surveys. (95% of employers either satisfied or very satisfied with Western University alumni within three years)

21. Alumni survey results. (95% of students either satisfied or very satisfied with Western University education and experience within six years)

22. Annual faculty, staff, and administrator evaluations. (Full implementation within three years)

23. Faculty, staff, and administrator turnover rates.

24. Process Improvement Survey data. (95% of students, faculty, staff, and administration either satisfied or very satisfied with Western University processes within three years)

25. Amount of money reallocated to academic programs. (10% of total non-academic expenditures to academic programs per year for five years)

26. Expenditures on research. (Increase of 25% per year)

27. Number of grants submitted.

28. Number of grants received.

29. Number of publications in peer-reviewed journals.

30. Number of publications in non-peer-reviewed journals.


32. Number of editorships of professional journals.
33. Number of courses in which research is incorporated.

34. Offices in professional associations held by faculty, staff, and administrators.

35. Faculty presentations to local and professional communities.

36. Number and quality of community partnership activities.

37. Awareness and recognition of Western University in local community.

38. Awards received by faculty, staff, administrators, programs, colleges, et al.

39. Success of annual/planned giving. (Increase of 25% per year)

40. Prizes received for PR materials.

41. Number of alliances with external health and educational agencies.

42. Size and comprehensiveness of library collection.

43. Student and faculty satisfaction with library holdings and facilities. (95% of students and faculty either satisfied or very satisfied with library holdings within three years)

44. IT measures

45. Student, faculty, and staff satisfaction with IT services.

46. Quality of new hires. (90% of supervisors either satisfied or very satisfied with new hires within three years)

47. Complete complement of institutional policies.

48. Evaluations of all faculty, staff, and administrators. (90% of students giving either “good” or “excellent” ratings within three years)

49. Expenditures on student activities and organizations.

50. Amount of revenue received from non-tuition sources.
Part K - Integrative Chapter

“There was once a pilgrim, who had traveled many hard miles in his effort to reach a monastery high in the Italian Alps. Finally, he could see the monastery on the next mountain, but his path was blocked by a deep chasm. With great relief, he spotted a rope stretched across the chasm and noticed a monk with a large wicker basket attached to the rope by a pulley. Recognizing his salvation in this primitive transportation system, the pilgrim rushed over to the monk and began to climb into the basket. Then he noticed with dismay that the rope spanning the chasm was badly frayed. ‘How often,’ the pilgrim asked the monk, ‘How often do you change the rope?’ ‘Whenever it breaks,’ said the monk. ‘If it ain’t broke, why fix it?’”

At Western University, we see the problem with that approach. Sometimes an organization is in such obvious trouble that everyone recognizes the need for major surgery. That is when change is easiest, because people generally respond to crises. More often, however, the need for significant change is not self-evident and resistance to change is likely. When we wait until our systems are broken before fixing them, the fixing gets more difficult and, sometimes, as in the case of the monk and the basket, people get hurt. The time for change is all the time, with continuous improvement the constant goal.

Constant change can, however, be unsettling unless the change is in a consistent direction toward a stated goal. Then, change becomes progress, and progress is welcomed. Such transformation can still be difficult, but can be facilitated when the key people involved understand why the change is necessary. Continued progress through planned change has been a major goal for our WASC self-study process, and continues to be for all of our strategic planning and management activities for the future.

Strategic management at Western University is the process of positioning the University so it can prosper in the future. Strategic management at Western University integrates strategic planning with quality (or continuous improvement) efforts, budgeting, resource planning, program evaluation, and performance monitoring and reporting. In practice, strategic management may not be sequential, but there are strong interrelationships among the various key components. The diagram below represents Western University’s planned approach to strategic management.

**Strategic Management Cycle**

- Strategic Planning
- Resource Planning: Human, Capital, Information Technology
- Budgeting
- Program Enhancement/Implementation
- Performance Monitoring and Reporting
- Program Evaluation and Accreditation

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**Quality management** at Western University is an approach based on the participation of all members of the University in improving the processes, products, services, and culture in which they work. The emphasis is on continuous improvement, rather than on a one-time fix. The fundamental elements of quality management and strategic planning at Western University are the same. Both are systematic approaches to identify issues and opportunities that:

- Promote customer-focused services and products.
- Use performance measurements to focus on results.
- Emphasize employee involvement, broad participation in decision making, and teamwork.
- Rely on data/information collection and interpretation.
- Support management based on facts.
- Involve efficient and effective resource allocation and management.

**Strategic planning and budgeting** at Western University mean managing for results. Our current strategic plan (see Part J) is a practical, action-oriented guide based on an examination of internal and external factors, which directs goal setting and resource allocation to achieve meaningful results over time. Our plan incorporates the key support functions of the University, including process improvement efforts, information and instructional technology, human and physical resources, and budgeting.

Given that these are the foci of the WASC accreditation as well, and given that another of our institutional goals is continuous improvement, our WASC self-study focused on the theme of “managing for results.” It incorporated all of the accreditation standards within a strategic planning framework. This demonstrates that continuous improvement is a commitment at Western University in all of its activities. In planning and carrying out our programs and services, we consider the needs and expectations of our customers, stakeholders, and policy makers in defining our vision, mission, goals, and performance measures. Our plan guides our activities and operations by asking and responding to five basic questions:

- Where are we now?
- Where do we want to be?
- How do we get there?
- How do we measure our progress?

Successful implementation of quality management and strategic planning requires a vision. At Western University, our vision is “to be THE graduate university of medical sciences of choice in the western United States.” In addition, quality management requires planning and active involvement from top management, support through continuous training and education, and sufficient time to allow processes to unfold and have a positive impact. Quality management efforts have gained popularity because they improve work quality, customer satisfaction, and employee morale, as well as increase productivity and institutional effectiveness, empower the members of the institution, and reduce bureaucracy. These outcomes are our desired ends at Western University.
The effectiveness of our operations can be evaluated by examining the degree to which our planned priorities and objectives have been achieved. As budgets are representations of planned priorities that reflect the mission and strategy of the University, implemented within the general boundaries and intent of a plan, it has been imperative for us to construct a comprehensive process that links our budget and our strategic planning activities. Too often in higher education, administratively convenient decisions are made under the pressure of budget requirements, but are not necessarily consistent with institutional planning priorities. To assist the University in achieving its strategic goals, specifically to integrate the budget and the strategic plan, we have expanded the role of the Institutional Strategic Planning and Resource Advisory Committee (ISPRAC). This group, along with the Cabinet and the Academic Affairs Council, will advise the President on institutional priorities and make recommendations for resource allocation.

The integrated planning and budgeting process implemented at Western University will:

- Have active leadership.
- Be broadly participative.
- Translate planning priorities into budget development.
- Provide informational support to participants.
- Provide feedback on decisions to the community served.
- Measure performance.
- Be linked to the budget.
- Be simple and readily understandable to multiple constituencies.
- Encourage entrepreneurial approaches and thoughtful risk-taking that are tied directly to the mission and goals of the whole institution, as well as to those of individual planning units.
- Provide planning units, e.g., colleges, departments, and senior management, adequate flexibility to modify operating decisions within a fiscal year.
- Provide a means for establishing and measuring progress against stated planning objectives and strategies.
- Promote collaboration and partnership development among planning units in undertaking new initiatives and reengineering existing programs and services.

In addition, we have fostered a culture of continuous learning that keeps the University growing and developing in positive ways. The following tenets are the foundation of our learning culture:

- We possess the evaluative attitude—we seek out tough constructive criticism for our work.
- We are committed to true diversity of thought—groups in this organization are deliberately constructed to maximize the range of different perspectives.
- We experiment organizationally—continually trying new ideas and retesting the tried and true.
- We value continuous learning—the organization nurtures people’s aspirations, rather than tying them down to some set formula for learning and development.
- We practice systems thinking.
Key to the success of this undertaking has been the commitment of the University community to being a learning organization. We continue to provide information and education sessions to bring everyone to the same level of knowledge. Planning and priority setting, and linking those activities to budget development, will continue to take place as a collaborative effort among the Cabinet, ISPRAC, the Academic Affairs Council, the Faculty Senate, and the Student Government Association. We have begun to ensure broad representation in the advisory process, and will continue to provide frequent feedback to the campus and the communities in which we operate.

Western University’s Philosophy of Being a Learning Organization

There is a significant body of scholarship and research on learning. What is clear from the literature is that the limited success in improving learning has not been for lack of trying. To date, educators have worked without a true understanding of what learning really means, and among uncertainties about the specific strategies that promote learning. In addition, attempts to improve learning have been piecemeal. At Western University, we have reviewed this literature and will share our analysis of what works, how it relates to our focus for the University in the recent past, and how it will guide our future.

Learning:

- **Is a developmental, cumulative process involving the whole person, relating past and present, and integrating the new with the old.**

Each of Western University’s academic programs continues to develop its carefully crafted curriculum, based on sound pedagogical practices (see self-study reports for each of the academic programs). We move from the simple to the complex, and make intellectual connections both within and across disciplines. Just as the osteopathic philosophy integrates the mind and body in the process of healing, our academic programs focus on the education of the whole person.

A good example of this is our Doctor of Pharmacy curriculum, which is delivered in a block format. On a daily basis, students are engaged with faculty and peers in a combination of traditional and active learning formats. The block system offers several advantages, such as the opportunity to read, hear, and talk about, reflect upon, and study the block curriculum without the distraction of other subjects, and includes a variety of class activities such as discussions, case presentations, simulations, role playing, group projects, and traditional lectures. New knowledge is added sequentially to prior learning, and each student must achieve what faculty members deem as competence in each block prior to moving on to the next. Students having difficulty in a block receive remediation, in which faculty and students work together to ensure that students have mastered the requisite skills, knowledge, and abilities.

- **Is about building and sustaining connections—individually through concepts, ideas, and meanings, and collectively through interaction between the mind and the environment, the self, others, and a context.**

Connections are essential in education. The curriculum in each of Western University’s programs integrates the basic and clinical sciences. Our interdisciplinary
programs build connections among the various disciplines to provide students with a focus on the health care team, and what it means to be a member of an interdisciplinary team. In addition, with the assistance of our Division of Student Affairs, we effectively integrate the curriculum with co-curricular activities, based on known principles of effective learning.

At Western University, there are more than 30 active student clubs and organizations, fostering student enthusiasm with and involvement in academic, professional development, leadership, and community service endeavors. We have clubs representing our diverse student population, whose members share their cultures with the University community. Other clubs provide service to the community, such as California Doctors Out to Care, the Pomona Community Health Action Team, and the International Medicine Club. These groups provide health-related services and education to communities in need.

- Is done by individuals who are tied to others as social beings, collaborating and competing, but who can enhance their experiences through cooperation and sharing. Educators, students, businesses, and public, private, and nonprofit groups need to be active partners.

The most promising and powerful of new approaches to learning is the development of learning communities, in which learning is viewed as beyond the scope or capabilities of any one department or unit. Western University’s Center for Disability Issues and the Health Professions is a fine illustration of a group developing a learning community. This Center collaborates with all campus programs and units to improve health professionals’ understanding of the whole person with a disability, through the development of curricula that is integrated throughout and across the educational programs. In addition, the Center is developing and delivering training for individuals with disabilities so that they may become active participants in their health care, and is developing and distributing research on community-based health education, prevention, and services for persons with disabilities.

Another example of effective partnerships is the Western University Academic Center for Excellence in the Health Sciences (ACEHS), which has continued to evolve as a cooperative venture among Western University and a group of medical centers. It is housed in Arrowhead Regional Medical Center in Colton, which is the new state-of-the-art medical center. ACEHS is dedicated to promoting excellence in health professions education, with a strong emphasis on primary care. As a learning community, the partnership between Western University and ACEHS will establish and maintain DO postdoctoral training programs, provide continuing professional education, engage in health sciences research, promote access to quality health care services for area residents, and make health professions education more cost effective. It is our main clinical training center.

- Is improved when it occurs within a framework that maintains a balance between challenge and opportunity.

Being a health professions student is both a challenge and an opportunity. It is a challenge because of the demanding courses of study, long hours involved, intense relationships that develop, and need to devote one’s self to a lifetime of learning. It is an
opportunity because of the joys inherent to a life of healing and helping, the career opportunities, and the potential financial benefits.

The learning environment at Western University capitalizes on both challenges and opportunities. We provide students with daily intellectual and social challenges to which they rise. Yet, we provide them with opportunities—to learn, to participate in research and scholarly activities independently and with others, and to engage in service activities on campus and in the community. Western University students are benefited by both challenge and opportunity.

- Is grounded in particular contexts and individual experiences, requiring effort to transfer specific knowledge and skills to other circumstances or to more general understandings, and to unlearn or adapt personal views or inaccurate information when confronted with new information.

After the didactic portion of students’ educational programs at Western University, they spend considerable time in the clinical setting, applying what they have learned. The Clinical Rotations office and faculty members are key to arranging and supervising the clinical practice portion of our educational programs. As capstone experiences, our students have opportunities to work in a variety of patient treatment centers, with a diverse group of practitioners and students. In addition to clinical medicine, topics such as communication, cultural awareness, humanism, and professionalism are covered during this phase of the learning process.

The clinical component of our curriculum is reviewed regularly to ensure consistency in curricular content, instructional strategies, and evaluation methods. We are in the process of conducting pilot tests on a variety of new assessment and evaluation tools for the clinical component, and will continue to refine them over time (see self-study reports for academic programs).

- Involves the ability of individuals to monitor their own learning, understand how knowledge is acquired, develop strategies for learning based on discerning their capacities and limitations, and be aware of their own ways of knowing in approaching new bodies of knowledge and disciplinary frameworks.

Helping students meet challenging standards requires new ways of teaching. In each of its programs, the University is working to develop new approaches to learning and teaching, placing significant responsibility on the student as learner, and not just on the faculty member as teacher. At Western University, we strive to employ the right people to deliver our innovative educational programs, and then to provide them with the latest technological innovations and faculty development programs so they can continue to be educational leaders.

As an example, the College of Veterinary Medicine’s proposed curriculum, currently being developed, will clearly involve students in monitoring their own learning and in developing the essential lifelong learning skills. The College’s curriculum will feature innovative instructional technologies and educational materials, and will incorporate the Problem-Based Learning Model—an instructional approach that develops skills in problem solving, interpersonal interactions, cooperative learning, communication, and information access (see self-study report for Veterinary Medicine).
The student-centered Intensive Summer Anatomy Course (ISAC) works to develop the learning and teaching skills of a select group of incoming students each year. A group of incoming students are selected to take the basic anatomy course in the summer before their first year of medical school, and then serve as facilitators who assist classmates in the anatomy laboratory during the fall while reinforcing their own learning.

The College of Graduate Nursing offers an internet-based educational program, primarily geared toward nontraditional students, including those who work or live in rural communities in which access to higher education may be limited. Students in this program successfully work interactively with their mentors in developing and fulfilling their learning plans, using alternative modalities. In July 1998, the Board of Registered Nursing recognized the College of Graduate Nursing for its standards of educational quality.

- Requires frequent feedback if it is to be sustained, practice if it is to be enhanced, and opportunities to use what has been learned.

At Western University, much learning takes place informally and incidentally, beyond explicit teaching or the classroom, in casual contacts with faculty and staff, peers, campus life, active social and community involvement, and unplanned but productive and complex situations. Western University students have open access to faculty and staff in a variety of settings and formats. Students are evaluated continually, using a variety of methods—quizzes, exams, papers, individual and team projects, and the like. This feedback is used to help the students seek remediation in areas needing attention and develop more effective learning strategies, and to help faculty revise curricula and teaching strategies.

The intimate size of Western University’s academic programs allows for rich opportunities for student-to-student, student-to-faculty, and faculty-to-faculty interactions, promoting learning on a variety of levels. The close relationships among students, and between students and faculty, allow for continuous feedback and, therefore, learning enhancement. Finally, as stated before, during clinical rotations, students have structured opportunities to turn theory into practice, and thereby use what they have learned to benefit both themselves and others. Western University’s clinical faculty members play an important part in the process of students becoming professionals.

- Is strongly affected by the educational climate in which it takes place, the settings and surroundings, the influences of others, and the values accorded to the life of the mind and to learning achievements.

We know from the literature that high expectations and standards, and enriched course content, produce better student performance. When we expect more of students, they work harder and achieve more. Western University’s outstanding faculty and student body, state-of-the-art facilities, and continually improving information infrastructure are the raw materials necessary for such success. And the fruits of our labor—Western University graduates—continue to excel in their work environments. Western University’s Physical Therapy and Physician Assistant graduates continue to rank at the top of all students across the nation on the licensing exams.
While recognizing the need to earn the approval of external constituencies, Western University realizes that external relations can be excellent only if internal relations are equally fine. Improving the quality of campus life has become a recognized University priority. Students, faculty, and staff at all levels are valued, and our goal is for all to celebrate the privilege of belonging to this University community. As a learning community, Western University is committed to innovation and continuous improvement, not in response to the rhetoric of administration, but as a natural element of the campus culture. We deliberately set high standards for community behavior, respecting differing views and diversity.

Western University’s commitment to the value of humanism is a guiding light for students, faculty, and staff. Our working definition of humanism, as a way of caring that is fundamental to positive interaction and manifested as a responsiveness to the needs of fellow human beings through respect, compassion, empathy, and understanding, influences all we do. The Humanism Committee, which was developed to create a climate for defining, teaching, and implementing humanism throughout the University, supports and encourages scholarly and social activities that promote humanism. The Committee’s activities—the publication of the *Humanism in the Health Sciences* journal, lecture series, discussion groups, and special events—have a positive impact on the campus climate.

- **Deeper learning comes when knowledge and abilities are practiced, reinforced, and applied over time—in other courses and in the wider contexts of life.**

Western University’s curricula ensure that all students regularly and continually practice, reinforce, and apply the skills, knowledge, and abilities they gain in their programs. In the didactic component of the programs, review and application are basic to the learning process. In the clinical components, students practice, reinforce, and apply what they learn in the classroom to the real world. Under the supervision of preceptors, Western University students learn to become compassionate, competent health care providers. The students move through series of well-structured and continually reviewed clinical rotations to further develop the skills, knowledge, and abilities to become successful, new professionals. In addition, through service activities with community groups such as the Pomona Unified School District, students gain valuable experiences that reinforce what they are learning in a real life context.

- **In our world, the value of an individual’s contribution to society is based not only on what he or she knows and can do, but on the individual’s ability to adapt to a changing environment, acquire new knowledge and skills, and apply them to life.**

At Western University, we make lifelong learning a reality for all. Learning experiences that deserve the greatest priority are those that prepare students for a lifetime of learning, which will enable them to assume leadership roles in society and lead productive and fulfilling lives as health practitioners and educators. The University’s Center for Academic and Professional Enhancement coordinates the University’s efforts to meet society’s lifelong learning needs as they relate to the Western University mission and vision. New graduate degree programs; partnerships with school districts, other universities, and businesses; and distance learning and certification review programs are just a few efforts under way at Western University in this domain. For example, we recently collaborated with the Office of Extended
Learning at Claremont Graduate University to offer a joint medical Spanish course for Western University students, alumni, and other practitioners.

The University Center has collaborated with the Pomona Unified School District (PUSD), Cal Poly Pomona, and the Pomona Valley Medical Center to establish a career pathways curriculum for underrepresented students in the Pomona region, and to coordinate service learning and clinical training experiences for Western University students in PUSD clinics and classrooms. In cooperation with Cal Poly Pomona and the American Association of Colleges of Pharmacy, Western University has developed an Education Scholar/Teaching Excellence Development Program for Health Professionals, designed to improve the teaching effectiveness of faculty members in the health professions. Also under way is the development of an array of online certification/licensing training in a variety of health professions areas (CLER projects).

As Western University grows and develops, we like to think that we have become a learning organization. We manage by fact, pose good questions, collect actionable data, act quickly when we learn something, assess ourselves regularly, use assessment to improve practice, and align processes to maximize our potential.

We continue to capitalize fully on the synergistic effect of designing, developing, and delivering curricula, programs, and services that collaborative and collectively deepen, enhance, and enable higher levels of learning. We continue to help students define what they should know and be able to do. We have encouraged the development of a new generation of student performance assessments—new methods of gauging student achievement—and are linking these measures to national and statewide standards that are valid and reliable.

We always keep in mind the three C’s of education—collaboration, connection, and community. For Western University to remain a true learning community, in which both faculty and students alike have both the opportunity and the responsibility to learn from and help teach each other, we have been moving from a culture of implicitly held individual hopes, preferences, and beliefs, to a culture of explicit, broadly shared goals, criteria, and standards. That is why we have moved from a culture that has ignored what is known about learning to one that applies relevant knowledge to improve practice, from a culture of isolation to one of collaboration, and from a teaching-centered philosophy to a learning-centered philosophy.

Western University’s Partnerships for Learning

There has been much recent discussion in education over the importance of university-community partnerships, and many issues have been raised. Are partnerships relevant to the academic core and mission? What forms should partnerships take? Should partnerships be considered components of scholarship? Will universities be overwhelmed with community and outside needs? The current sense is that, while all university-community partnerships may not be relevant to the missions of all institutions, for many, such partnerships are a way to build relationships with the community, improve both the university’s and its partners’ image and support, help increase recruitment and retention of students, and, finally, enhance student learning. Some partnerships even help institutions determine what knowledge, talents, and skills graduates need to work and be productive in their communities.
The success of a university depends on the value placed on it by the citizenry—the alumni and benefactors; the business community; the city, state, and federal governments; and the students and their families. We understand the centrality of the learning agenda and have made that our mission. And if we reach out to others, wherever they are, in the State of California or beyond, people all over the country and the world will benefit. Strategic collaboration is increasingly recognized as the best way to achieve competitive excellence, through the combination of strengths of all parties.

Western University is not just a local enterprise. We, in collaboration with our colleagues in higher education, working closely with business and industry, and with government—state, local, and national—and with the backing of our trustees, achieve greater things. Current and future challenges cannot be met without a pervasive commitment to the success of the University community as a whole. To this end, the University community has developed a degree of loyalty and institutional pride that reaches beyond the campus boundaries to partner with alumni and friends everywhere.

While partnerships take many forms, there are common features associated with successful ones. First is sustainability. Successful partnerships grow from mutually agreed-upon goals, with outcomes measured against both University and community needs and interests. The educational component of partnerships has clear consequences for the community and the institution, and there must be an ongoing commitment to evaluation that involves all partners.

At Western University, we are changing curricula and culture to encourage partnerships that are based on mutual learning and mutual benefit. We have developed rewarding and sustainable relationships. Our partnerships take many forms—service learning, internships, clinical rotations, and outreach to recruit historically underrepresented populations into the medical professions. Faculty are key to facilitating these relationships, which also lead to additional opportunities for them to engage in a variety of scholarly activities, applied research, evaluation, and service. Western University is currently engaged in partnerships with other universities, such as the Claremont Colleges and California State universities at Pomona, Chico, and Dominguez Hills; school districts, such as the Pomona Unified School District; and various businesses.

Our relationships mutually benefit both partners. In some partnerships, either the institution or the community identifies a need, and the University offers a solution. This type of situation enhances community relations while improving student learning. The level and types of service activities in which we can engage is shaped by the role of the institution in the community and the community’s capacity to address its own issues. We at Western University are working with the health care industry and other postsecondary institutions to define the knowledge and skills needed for tomorrow’s jobs.

Our president continually states that despite our many impressive accomplishments, we cannot rest. We have not rested, and we will not stop. Presented below are highlights of our achievements in the recent past.

To summarize, we have:

- Preserved and expanded our goal of educating compassionate, competent health professionals, who provide comprehensive primary care, traditional and
complementary treatment of disease and disability, wellness promotion, and culturally sensitive care.

- Developed programs based on the needs of our students and those who will employ them.
- Restructured our organizational and management systems.
- Redefined roles and responsibilities.
- Enhanced our information and instructional technology systems and library.
- Forged new partnerships.
- Worked to enhance our humanistic culture.
- Remained fiscally sound through good management practices, the development of new programs and new sources of revenue, and the development of resources to reinvest in and improve our existing programs.

We have continued to work in teams, both disciplinary and interdisciplinary. And, finally, we have made a concerted effort to be accountable to all involved with us.

As Western University is accredited by the Western Association of Schools and Colleges (WASC), as well as by the many professional accrediting bodies that ensure the quality of our professional programs, we are constantly studying ourselves. In the past two years alone, we have worked on the self-study components of our WASC reaccreditation, as well as those for our Pharmacy, Physical Therapy, Graduate Nursing, Osteopathic Medicine, and Veterinary Medicine accreditations. In so doing, we compare our institutional and programmatic practices and student learning outcomes to the standards set by the accrediting bodies. It is through these efforts that we continually improve upon who we are and what we do.

As Western University moves forward with strategic management over the next five years, we plan to ensure that we:

- Focus the current strategic planning cycle on revenue planning and the connection of Western University’s strategic plan to its budget and other resources (human, physical, et al.).
- Continue to build upon the essential institutional effectiveness and assessment activities for the University.
- Use the results of our institutional effectiveness and assessment activities for the purposes of program and process improvement, including faculty development, new program development, strategic enrollment management and marketing, and to facilitate accreditation activities.
- Continue to develop management databases.
- Continue to survey our potential, current, and former students, faculty, staff, and administration to help make more informed decisions as we grow and develop.
- Continue to develop and implement leading edge technology and information resources to enhance teaching and learning, as well as administrative capabilities.
- Reorganize where there are excessive administrative layers, or where responsibilities for critical University functions are fragmented, and align units for more efficient collaboration.
- Ensure that support services relate to the accomplishment of academic priorities.
- Perform cost/benefit analyses to control expansion, ensuring that full infrastructure costs are assessed before new initiatives are undertaken.
• Identify policies and procedures in need of development, revision, and communication.
• Ensure that decision making occurs at the appropriate level of responsibility, with appropriate consultation.
• Continue to develop faculty, staff, administrators, and students.