

REPORT OF THE WSCUC TEAM
For Reaffirmation of Accreditation

To Samuel Merritt University

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

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SECTION I – OVERVIEW AND CONTEXT

A. Description of Institution and Accreditation History

At the time of the visit, Samuel Merritt University (SMU; the university; the institution) was a health sciences institution offering both undergraduate and graduate degrees. It was founded in 1909 as the Samuel Merritt School of Nursing affiliated with Samuel Merritt Hospital. In 1984 then Samuel Merritt College (the college) became a separately incorporated non-profit, with Samuel Merritt Hospital as its sole member. Samuel Merritt Hospital is now Sutter Hospital, and remains the sole member of Samuel Merritt University. At the time the college became a separately incorporated non-profit, it also first gained independent regional accreditation from WSCUC. In 2009 the college became a university, reflecting the scope of its undergraduate and graduate programs.

The mission of Samuel Merritt University was to “educate students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities.” (CFRs 1.1, 1.4, and 4.7) The main SMU campus was located in Oakland, CA, with additional sites in Fresno, San Mateo and Sacramento. As of fall 2019, the university had 2,029 students (1891 full time equivalent, FTE) and offered 3 bachelor’s degrees in Nursing, 7 masters’ degrees, and 5 doctoral degrees. The history of the institution was in training and educating nurses, and the nursing program continued to be the largest area of focus, although the university had expanded into other health sciences fields in recent decades.

Reaffirmation of accreditation was granted to the university in 2012. Since that time, WSCUC had approved SMU to offer new degree programs, including the Master of Science (MS) in Nursing in Family Nurse Practitioner, the Doctor of Occupational Therapy, and the MS in Nursing in Case Management. In 2016 a Special Visit raised concerns about the autonomy of the university and issues with the Board of Regents. In 2017 a Mid-Cycle Review found no issues with continued compliance. Also

in 2017, the university was approved to participate in the Thematic Pathway for Reaffirmation (TPR) process; the results of that process are the substance of this report.

B. Description of Team's Review Process

The evaluator team (the team) engaged in a thorough review of the documents provided by SMU. As part of its review, the team conducted a multi-day virtual visit where 21 sessions were held to engage different groups or individuals in dialogue. The team also reviewed the confidential email and additional materials provided during the visit. SMU was responsive to requests for additional information, and the team had the necessary resources to do its work.

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

SMU produced an organized, well-written report that accurately portrayed the condition of the university. Based on conversations with the steering committee and faculty members, the faculty were actively engaged in the work described in the TPR report. Faculty redesigned the institutional learning outcomes (ILOs), and each program aligned the new ILOs to their program outcomes and courses. Faculty were also involved in the development of student success metrics and actively engaged in the assessment of student success in their respective programs. Faculty also participated in writing groups that generated content for the report. According to the steering committee, students were involved in conversations related to the development of the ILOs, and the Academic Affairs Subcommittee of the Board of Regents met regularly to review materials. Less clear to the team was the level of staff involvement in the TPR process. Although it was reported that staff participated in writing groups, the open meeting with the staff indicated limited awareness of the TPR process. The staff meeting was mixed in its sense of the institution in general, with some enthusiastic about new directions, and others expressing a feeling of disconnect and anxiety concerning changes at the institution in general.

Both the report and the conversations at the time of the virtual visit indicated a strong commitment to self-reflection and the use of evidence to inform judgments and claims made by SMU.

The institution engaged in transparent and honest communication about its areas of strength, as well as areas of growth, both of which were supported by evidence.

SECTION II – EVALUATION OF INSTITUTIONAL ESSAYS

A. Component 1: Response to Previous Commission Actions

The team believed that SMU responded in a direct and candid manner to previous Commission findings. The response included focus on concerns about governance structures in relation to Sutter Health. (2008 CFRs 1.3, 3.8- 3.9; 2013 CFRs 3.6-3.7, and 3.9) Sutter Health is the sole member of Samuel Merritt University, and in this role previous Commission findings raised concerns about appropriate autonomy for the university in this relationship. As noted in the Commission Action Letter of March 9, 2017, the institution revised board by-laws to ensure appropriate autonomy for the university. The team explored the practical implementation of these board by-laws and believed that the relationship between SMU and Sutter Health was more clearly defined with appropriate institutional boundaries. In addition, the board had been recently tasked with the most important responsibility of a governing body, that of recruiting and appointing a new president for the university. The board hired the president through a national search; the new president had a strong background in both higher education and health care, as well as experience in strengthening campus governance and operational systems. Both the result of the search and the team's subsequent conversations with the SMU community suggested that the presidential search was completed with care and with a focus on the institutional integrity of the university. Additionally, this process suggested commitment to an appropriate level of institutional autonomy for the university.

Both Sutter Health and SMU had used the occasion of new leadership to improve relationships between the entities, including the chief executive officers (CEO) meeting with their counterparts' governing boards and ongoing communication on major issues. A good example of improved navigation between the two entities was a change in plans for a new campus for SMU. Initially SMU had been given

a 2022 deadline for vacating its current space to make room for the expansion of Sutter Health. The team was encouraged to learn that Sutter Health extended its timeline for the university to establish a new campus home until at least 2025 (and possibly later), and the university had slowed considerations for identifying the site for a new campus. Given the uncertainty of the pandemic and concomitant impacts on finances, telework, telehealth, and online learning, it seemed wise for decisions about the new campus to wait until there was greater clarity.

While significant improvement in the autonomy and operations of SMU relative to Sutter Health were notable, there remained embedded systems and processes that confused the relationship with Sutter Health and which needed to align with the broader governance structures to help the university succeed on its own academic and organizational merits. These included budget and operational systems that inhibited the university's ability to be nimble and to plan effectively. In the team's view, these issues did not rise to the level of concern for accreditation, but it was nonetheless worth noting that the campus could be more effective and efficient if it had a greater degree of alignment with typical academic protocols. Overall, the team was encouraged by the improvement in relations between SMU and Sutter Health, while recognizing these changes were relatively recent and would require ongoing effort.

In March 2012 the Commission also recommended that the university implement its established, ambitious diversity initiatives. The SMU Diversity Action Plan of 2012 established a goal of at least 25% of the student body to be from under-represented populations, and the population of under-represented students at the time of the visit was approximately one-third of the student body. SMU had implemented a number of programs to provide engagement with and support for this student profile. The fundraising focus on developing diversity funds, scholarships, mentorships, and targeted admissions outreach was a tangible manifestation of the commitment for those students to be

successful within the university, and the assessment data was disaggregated by student profile and well developed. (CFRs 1.4, 2.10, and 2.13)

Increasing the diversity of faculty and staff had been somewhat slower. The team was pleased to see robust metrics and aspirations for diversifying the faculty and staff. The team was also pleased to learn of new appointments to the Board of Regents and three senior leadership positions, as well as the president herself, whose backgrounds were more representative of the student population. The new Strategic Vision for Diversity, Equity, and Inclusion (DEI) 2021-2026 must remain a priority, as it provided a template to address not only diversity in hiring, but the development of a campus community fluent in and committed to DEI. (CFR 3.1)

Finally, the Commission recommended that the university sustain their focus on assessment of student learning, which the institution had done and is addressed by the team throughout this report. (2008 CFRs 2.6, 3.5, 4.1-4.4, and 4.8; 2013 CFRs 2.6, 3.4, 4.1, and 4.3-4.7)

B. Component 2: Compliance: Review under WSCUC Standards and Compliance with Federal Requirements; Inventory of Educational Effectiveness Indicators

The team engaged in a comprehensive review of materials, with subsequent follow-up conversations, in order to collect sufficient information to make evidence-based recommendations to the Commission as to SMU's compliance with the WSCUC Standards and federal requirements.

Federal Requirements and Inventory of Educational Effectiveness Indicators

SMU provided sufficient information for the team to complete the federal requirement forms, which are appended to this report. SMU also provided a complete Inventory of Educational Effectiveness Indicators (IEEI). At both institutional and program levels, SMU had formal learning outcomes that were published on the institutional effectiveness website. To assess these outcomes, SMU utilized a combination of licensure pass rates, student work evidence, course evaluation scores, and student performance in key assignments to determine if graduates had achieved stated outcomes for each degree program. The evidence was reviewed and interpreted by the academic leadership,

program directors, Director of Institutional Effectiveness, and the Institutional Effectiveness Council.

Findings from the reviews were used for student learning assessment planning, student success support, improving teaching and learning, specialty accreditation, curricular review, and program review.

Standard 1: Defining Institutional Purposes and Ensuring Educational Objectives

Institutional Purposes (CFRs 1.1-1.2)

SMU had clear, readily accessible published statements of its general purpose and specific mission as an educational institution and of its educational objectives and outcomes. With the focus of the TPR on student success, the alignment between mission and educational programming was especially salient. This was evident both in the SMU report and in the virtual visit, with consistent testimony among all individuals and groups interviewed. Academic and administrative personnel, as well as students, emphasized the importance of fulfilling the SMU mission and focusing on preparedness for professional practice and leadership roles in redress of health disparity. Furthermore, the website of the institution provided multiple access points for prospective students and the general public regarding program requirements and student achievement. It was apparent on multiple fronts that commitment to student success in alignment with the SMU mission was ingrained in the current culture of the institution as a matter of distinctive organizational values and character. (CFRS 1.1-1.2)

Integrity and Transparency (CFRs 1.3-1.8)

SMU published policies and procedures related to academic freedom in student, faculty, and employee handbooks, and in the catalog and multiple website pages. The institution clearly recognized and respected the need for academic freedom to maintain the integrity of educational and scientific endeavors. (CFR 1.3) Although not an explicit sub-theme of the TPR, issues of policy, programs, and practice pertaining to diversity, equity, and inclusion (DEI) permeated all aspects of the institutional report and virtual visit discussions. In addition to maintaining progress on student diversity, the institution recognized the need to accelerate initial traction on diversifying the faculty and senior

management of the university, including the Board of Regents. The campus community was eager for imminent release and embraced the challenges of implementing a new DEI plan for the coming five years. (CFR 1.4)

The TPR report and virtual visit results demonstrated that SMU remained cognizant of the fact that it continued to mature as an autonomous educational entity within Sutter Health. The team was aware of prior concerns of the Commission and resulting work of SMU in collaboration with WSCUC to ensure its distinctive purpose and to exercise autonomy within its parent organization. (CFRs 1.5 and 1.8)

The team's finding, which is subject to Commission review, was that the institution had provided sufficient evidence to demonstrate compliance with the Standard. Final determination of compliance with the Standards rests with the Commission.

Standard 2: Achieving Educational Objectives through Core Functions

Teaching and Learning (CFRs 2.1-2.7)

In its report, SMU addressed how the achievement of educational objectives through core functions was fundamental to its primary theme on student success. The institution offered multiple academic programs, primarily at the graduate level and within the field of nursing, which accounted for eight out of 13 degree programs and three out of four certificate programs. Given specialized accreditation of nursing, occupational therapy, physical therapy, physician assistant, podiatric medicine, and orthopedic primary care, there was little room for ambiguity about educational program requirements and resources. (CFR 2.1)

Programs were designed, had sufficient qualified faculty, and met student learning outcomes consistent with required competencies for entry level or advanced practice within the respective healthcare profession. (CFRs 2.1-2.3) All academic programs were accredited by their respective national professional organizations, which comprised external validation of program rigor and quality. The

physician assistant (PA) program was on probation by its professional accreditation agency, the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), until its next review in 2021, which would determine whether a focused site visit and/or withdrawn accreditation was warranted.

Faculty appeared to exercise collective responsibility for setting and assessing student learning outcomes. (CFR 2.4) Student achievement data for retention and graduation rates and time to degree were strong, as were licensing pass rates for entry-level and advanced practice (SMU student pass rates exceeded regulatory requirements and usually national averages for the field as well). Institutional learning outcomes (ILOs) were aligned with the curriculum (specific program and course learning outcomes tailored to the discipline of practice) and were assessed through signature assignments and capstone projects. (CFR 2.6) Although the team met with only a few students, those students emphasized common understanding and respect for them as adult, self-directed learners with valuable feedback to share for program improvement purposes. (CFR 2.5)

SMU had an established program review system which is discussed more fully in Standard 4. The university had consolidated staff support for assessment and program review activities and invested more broadly in institutional effectiveness and research capacity, also discussed later in this report. (CFR 2.7)

Scholarship and Creative Activity (CFRs 2.8-2.9)

The introduction to the SMU report spoke to how the institution valued and supported scholarly and other creative activity. Indeed, during the remote review, the team noted several examples of curricular and instructional innovation due to the sudden challenges of remotely delivering and participating in their programs in the midst of a pandemic. Faculty promoted evidence-based teaching and learning, many were engaged in sponsored research and community service grants, and the institution linked scholarship with teaching and service performance for faculty evaluation and

promotion purposes. The SMU faculty handbook identified teaching, scholarship, and community service as required at each rank, with increasing levels of productivity as faculty progressed through and to each rank. (CFRs 2.8-2.9)

Student Learning and Success (CFRs 2.10-2.14)

SMU maintained multiple mechanisms for readily identifying and supporting the needs of its students, including the production of disaggregated data for its various student success indicators. (CFR 2.10) SMU self-identified and the team confirmed slower progress (even pre-pandemic) with major room for improvement in delivering and assessing co-curricular programs. (CFR 2.11) Although the demonstrated impact of such initiatives were pending, the team found a clear and compelling commitment among all faculty and staff it interviewed to fully support student learning and success, consistent with the primary theme and organizational impact of the TPR.

At the time of the visit, SMU did not accept transfer students, but the catalog stated that students may transfer a minimum of 66 semester units, including all prerequisites. However, there was a direct admission option for transfer students into a Bachelor of Science in Nursing (BSN) program, the terms of which were clearly stated and available on pertinent web pages and catalog sections. (CFR 2.14) To be considered for admission as a first semester junior with four (4) additional semesters to complete the BSN program, students must have a minimum of 66 semester units of transferable work, including all prerequisites by the time of entry into the program. Also see the results of the transfer policy review conducted by the team and filed in the attached federal requirement form, which confirmed institutional compliance with federal regulations on transfer policy and practice.

The team's finding, which is subject to Commission review, was that the institution had provided sufficient evidence to demonstrate compliance with the Standard. Final determination of compliance with the Standards rests with the Commission.

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

Faculty and Staff (CFRs 3.1-3.3)

SMU had a faculty staffing plan that ensured all faculty roles and responsibilities were fulfilled and included a sufficient number of full-time faculty members with appropriate backgrounds by discipline and degree level. For its programs, SMU employed 184 full-time and 332 part-time faculty in various ranks and specializations, as well as 163 full-time and 11 part-time staff. (CFR 3.1) Through its faculty curriculum committee, SMU ensured the integrity and continuity of its academic and co-curricular programs wherever and however delivered. The faculty handbook included detailed descriptions of faculty employment classification and a statement of academic freedom. Faculty evaluation, promotions, and rights and responsibilities were articulated and consistent with best practices in performance appraisal, including multisource feedback and appropriate peer review. (CFR 3.2) Faculty reported being resourced in areas of evaluation, particularly as it related to teaching. In addition to the consultative work of the Office of Academic & Instructional Innovation (A&II), the university instituted a new faculty peer-review teaching observation process and had also created a Center for Innovation and Excellence in Learning (CIEL) to foster faculty and staff members' own experience of transformative learning and their mastery of inclusive pedagogies. At the time of the visit, the work of CIEL was commended by numerous groups, and the team also commended the combined efforts of A&I and CIEL toward the transformational learning of its faculty. (CFR 3.3)

While sufficient in number, SMU acknowledged the need for a more diverse faculty and outlined a plan to standardize recruiting and hiring processes across programs to facilitate the recruitment of more faculty from underrepresented groups. The team commended initial steps taken to diversify the senior leadership and create a faculty diversity pipeline. However, with the exception of the nursing program, there was still a significant lack of diversity in the faculty profile for other programs. The team recommended the adoption and implementation of the Strategic Vision for Diversity, Equity, and

Inclusion - 2021-2026 with a particular focus on supporting students of color and diversifying the faculty and staff to reflect the diversity of the student body. (CFR 3.1)

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

Based on review of the most recent audited financial statement and interviews with the university leadership, the team believed the institution was financially stable. The resource planning was guided by both the new Academic Master Plan and the 2017-2026 Strategic Plan focused on growing enrollment, addressing student access, creating synergy with Sutter Health for clinical placements, advancing diversity, providing physical and virtual venues, and planning for campus and other infrastructure. The institution reported a reduction in enrollment from 2,141 in fall 2017 to 2,029 in fall 2019. However, a comprehensive Academic Master Plan that reviewed data for each market and possible program opportunities for future consideration had been developed to facilitate enrollment growth. At the time of the visit, SMU planned to grow its enrollment to 3,000 by 2026 and desired to move the main campus to a new location. (CFR 3.4)

The institutional report and interviews with various groups affirmed that that the university had successfully developed sufficient infrastructure needed for its academic offerings and the research and scholarship of its faculty, staff, and students. Through the collaborative efforts of A&I, CIEL, institutional research, information technology services, and media services, SMU provided training and support for faculty members who used technology in instruction. The information resources, services, and facilities available for faculty were consistent with the institution's educational objectives and aligned with needs and modes of learning delivery. (CFR 3.5)

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

A review of leadership position descriptions and SMU policy documents, confirmed by meetings with the leadership team and board, demonstrated that the institution followed the accreditation standards related to organizational structures and decision-making processes. SMU had a full-time

president/CEO and full-time Chief Financial Officer (CFO) and an independent governing board with appropriate oversight, including the hiring and evaluation of the CEO. (CFRs 3.8-3.9) The current president had led SMU since November 2018 and reported to the independent Board of Regents (the board) with legal and fiduciary authority. The team noted the board's support for the institution as demonstrated by their commitment to student success initiatives and an improved working relationship with Sutter Health. Several members of the president's leadership team were fairly new but had clearly defined roles and responsibilities. The search processes for the Vice President for Student Affairs and the Executive Director of the Office of People and Culture were at advanced stages.

Through the University Administrative Council (UAC), the leadership implemented a shared governance structure to encourage transparency and collaboration in all university operations and mission-related strategic goals. (CFR 3.7) The faculty, through the Faculty Organization Committee and its sub-committees, participated in a range of governance areas, including curricular matters, academic programs, admission and graduation standards, and promotion and tenure. (CFR 3.10)

In addition to better shared governance, the team supported SMU's goal of an improved culture, as noted in its report. Conversations with several groups confirmed a desire to improve the culture at SMU to be more collaborative and transparent. The team believed that positive strides had been made on this initiative, particularly through the creation of the UAC; however, some discomfort had remained, particularly with the staff, who reported feeling disconnected and outside the pathways of communication in some instances. The team heard a variety of reports that existing systems and processes were not yet aligned to facilitate collaborations across academic and administrative units, which would facilitate better decision-making (see Standard 4). The team believed that until such time as all constituents felt safe and connected to the mission of SMU, shared governance would not be fully obtained. As such, the team recommended that SMU foster shared governance based on cultural changes that extend throughout the university. (CFRs 1.4, 3.6, and 3.10)

The team's finding, which is subject to Commission review, was that the institution had provided sufficient evidence to demonstrate compliance with the Standard. Final determination of compliance with the Standards rests with the Commission.

Standard 4: Creating an Organization Committed to Quality Assurance, Institutional Learning, and Improvement

Quality Assurance Processes (CFRs 4.1-4.2)

In both the report and subsequent conversation, SMU described a number of processes designed to ensure quality. Curricula were regularly reviewed by faculty and appropriate administration, with a clear process for changes, based on findings from assessment, program review, and/or specialty accreditation. Disaggregated data was provided to ascertain student success in various student populations and to provide appropriate remedy in the case of less than ideal performance. Online courses were designed with expert instructional designers, and ongoing quality assurance was maintained by preventing edits to the master course shell. In all, SMU understood the importance of process and practice related to academic quality. (CFR 4.1)

The capacity for ongoing quality improvement, especially in light of stated growth plans, was less clear. SMU had recently increased its staffing in the quality assurance arena with a Director of Institutional Effectiveness, but conversations with institutional effectiveness and institutional research staff indicated a desire for more streamlined processes for data collection, especially as co-curricular assessment improves. The use of a centralized site in the Canvas learning management system to record assessment, program review and accreditation evidence was a good beginning, but various constituents repeated the need for more staff and a more cohesive set of structures to build the desired "data rich culture" identified by SMU in its report. (CFR 4.2-4.3)

Institutional Learning and Improvement (CFRs 4.3-4.7)

In a similar manner, SMU portrayed itself, in writing and in conversation, as an institution committed to institutional learning and improvement. Substantive assessment and program review

processes were developed and had faculty involvement, although only two programs had undergone program review at the time of the visit. Co-curricular assessment was still undergoing revision, but a process was in place. Stakeholders were regularly surveyed and provided input into academic quality and accomplishment of student outcomes. (CFRs 4.3-4.5)

The creation of the UAC was a positive step for SMU to bring multiple stakeholders and voices into continuous improvement conversations. Consisting of students, staff, faculty, and administration, the UAC was designed to serve as an advisory committee to the president on matters related to university quality and functioning. While still in its infancy at the time of the visit, the team was encouraged to see a representative body that would consider the most appropriate strategic initiatives given SMU's mission, financial realities, and the changing nature of higher education. (CFRs 4.6-4.7)

As indicated above, while the commitment to continuous improvement was verified in numerous conversations, at the time of the visit, the institution still lacked the structure, systems, and processes necessary to work collaboratively across the entire SMU network in order to make the most impactful decisions for student success. The team recommended that SMU develop integrative systems and processes that facilitate collaboration across academic, co-curricular, administrative, and organizational lines. (CFRs 3.7 and 4.3)

The team's finding, which is subject to Commission review, was that the institution had provided sufficient evidence to demonstrate compliance with the Standard. Final determination of compliance with the Standards rests with the Commission.

C. Component 8: Student Success

SMU produced an exceptionally well-written and cohesive discussion of its institution-specific theme around student success. From its articulation of a new student success framework to the sub-themes that supported it, SMU provided a thoughtful, evidence-based analysis of its progress toward living out the framework, as well as its areas for continued improvement. Conversations at the time of

the visit indicated a genuine commitment to student success and the various means by which SMU intended to produce it. A number of different groups confirmed knowledge of the framework, especially the three habits (e.g., habits of the mind, hands, and heart), and SMU was able to articulate various ways in which the habits were assessed in their students. Additionally, a re-design of the institutional learning outcomes (ILOs) and subsequent alignment of those ILOs down through the programs supported the assessment practices that accompanied framework development. While only three ILOs had been assessed at the time of the visit, a plan was in place to continue assessment protocols for the other ILOs. SMU had also begun to think more strategically about aligning co-curricular activities with academic program outcomes.

The university also consistently expressed its interest in and commitment to transformational learning, although in most circles, transformational learning could also be coined “faculty development.” In point of fact, the primary medium for promoting transformational learning was the newly designed faculty development center, CIEL.

Of particular note, the interprofessional practice and education (IPE) model that was developed was particularly noteworthy and, ultimately, commended by the team. The team’s finding was that SMU authentically engaged the TPR process, and in so doing, created a level of collaboration across the university that was to be commended. Each sub-theme of the student success theme is discussed in detail below.

Assessment of Student Learning

SMU’s sub-theme related to assessment of student learning was the longest section of its report and produced the most evidence of its attainment. However, not all of the content reflected new initiatives. The most notable new element related to the assessment of student learning was the redesign, realignment, and beginning assessment of the ILOs. Both faculty and students were aware and

involved with the development of the ILOs, and the report provided more than sufficient evidence that SMU was well on its way to assessing them for programmatic improvement. (CFRs 2.3-2.4)

Other elements in this section that connected to the framework, such as specialty accreditation and its mapping to program review, as well as the seven indicators used to measure student success (e.g., licensure pass rate, employment, retention, graduation, grade point average, community service participation, and achievement of outcomes) were successfully incorporated into the framework.

Involving faculty in the assessment of student learning was an important component of the student success framework. As someone in an interview said to the team, “faculty are doing assessment all the time; they just haven’t wanted to document it.” Assessment staff were hopeful that the creation of standardized methods for documenting assessment evidence would address the reluctance to engage reporting requirements. For example, the Program Review Accreditation Self-study Articulation Reports created an easier flow of information from material covered in specialized accreditation that needed to also be addressed in program review. (CFR 2.7) SMU had been successful in most of its professional accreditation efforts, so creating a process that capitalized on the significant work of the program to achieve programmatic accreditation was an important development that allowed SMU to collect the data it needed in other venues to address student success. (CFR 4.3)

Additionally, as part of the commitment to student success, SMU bolstered its assessment infrastructure by adding a Director of Institutional Effectiveness in June 2020 (with administrative assistance on the forefront at the time of the visit) and adding support in the institutional research office. Conversations at the time of the visit indicated a level of anticipation that assessment processes would become more standardized and streamlined across the university with these new positions, and that faculty participation in the process would increase. Notably, the university still lacked a cohesive repository for its assessment data, having implemented a space in its learning management system to collect all assessment and program review materials (called the Institutional Effectiveness Center (IEC)).

Having a named space was a step in the right direction, given that assessment evidence was collected and stored differently in every department prior to its implementation; however, the IEC, at the time of the visit, was not easily navigated nor intuitive to an outside viewer and needed better organization and functionality. While formalized software systems are not always the answer, the team noted that SMU needed some type of system that would facilitate the accumulation, storage, distribution, and ultimately, the use of assessment data for strategic decision-making about student success. As such, the team recommended that SMU build a centralized assessment and institutional effectiveness and research structure to systematically collect, disseminate, analyze, and act upon data for student success. (CFRs 4.2-4.3)

Co-Curricular Contributions to Student Learning

SMU used the TPR process as an opportunity for both reflection and action concerning how co-curricular activities contributed to student learning. In the assessment section of the Institutional Report, the institution specified co-curricular program participation as a lead indicator of student success and professional readiness (page 45). Furthermore, as a sub-theme under the student success umbrella, the Institutional Report described co-curricular programming and outcomes in more detail in a dedicated section (pages 46-48).

The evidence in the TPR report on co-curriculum programs and outcomes was also published on the [SMU co-curricular website](#). This included a schematic which specified 11 co-curricular programs and their alignment with four of SMU's institutional learning outcomes. The programmatic emphasis on issues of patient safety, provider wellness, and health disparities connected directly with the mission and ILOs of the university and with the priorities of national health professions initiatives and associations.

SMU's published materials highlighted strong rates of student participation and satisfaction with co-curricular programs. The percentage of students participating in at least one co-curricular activity

increased from 65% in the 2018-2019 academic year to 74% in the 2019-2020 academic year. The institution also posted satisfaction data on three factors, including whether co-curricular learning: (i) met expected ILOs; (ii) contributed to student success; and (iii) contributed to professional development. SMU students were highly satisfied across three prior academic years; the share of students indicating yes to each item was consistently in the mid-90s to 100 percent.

Such satisfaction outcomes served as encouragement for sustaining student engagement in co-curricular programming, and strong faculty commitment and student interest were also evidenced during the remote review. The team posed several targeted questions about co-curricular programming and assessment, including with groups of faculty, students, and professional and support staff. The remote interviews reinforced initial team impressions based on the Institutional Report: the institution was committed to building out co-curricular programming in support of student learning and success both within and beyond the classroom.

There were multiple examples offered by SMU faculty, staff, and students during remote interviews about how co-curricular programming reinforced the core curriculum of their chosen profession and the mission of the university. This included coursework and co-curricular training on implicit bias and team-based care and a wide variety of readily available exercises on provider wellness, equally relevant for faculty and students alike; staff also noted appreciation about being able to participate in and not merely support co-curricular programs. These programs were clearly in alignment with the academic goals of SMU. (CFR 2.11)

SMU demonstrated strong outcomes on student participation in co-curricular activities and high levels of student satisfaction with co-curricular programs. However, the institution emphasized and the team confirmed that assessment of co-curricular programming's contribution to student success was in early stages of development with substantial room for improvement. In particular, the institution had not conducted direct assessment of how participation in co-curricular activities supported student

learning, per se. There were no conceptual or technical obstacles to such direct assessment, and relevant faculty and staff were confronting the same challenges posed by the pandemic for other primarily campus-based programs. There was, however, a related and increasingly consequential structural impediment unique to the co-curricular domain.

Specifically, faculty, staff, and students emphasized during the virtual visit that there was little if any interstitial space (extra time) for co-curricular activities, given the compressed nature of program design, rigor of the core curriculum, and type of student population served. Executive style and other forms of accelerated programs were common in the nursing profession (including at SMU) which demanded concentrated classroom sessions and clinical shifts for days rather than hours at a time. The institution concluded and the team concurred that co-curricular activities in support of student learning must be directly embedded or seamlessly sequenced with delivery of the core curriculum. Otherwise, students simply would not have sufficient time to deeply engage and evaluate co-curricular programs, and the return on faculty and staff investment in design, delivery, and assessment of such programming would be low.

The institution saw and the team agreed that there was room for improvement in delivering and assessing co-curricular programs. (CFR 2.11) The need for direct assessment of co-curricular programming in support of student learning outcomes was clearly recognized by the institution. It was less clear among those interviewed by the team—especially given uncertainty about the duration of campus closures—about the extent to which co-curricular programming could or should be moved primarily to an online domain, analogous to interprofessional practice and education (IPE) programs (see section on IPE).

The team encouraged the institution to research best practice in the integration of co-curricular activities within a core curriculum and to explore resulting implications for SMU working relationships between academic and student affairs staff, including in collaboration with faculty and faculty

administrators. Given SMU's strong foundation for direct assessment of core curriculum learning outcomes, the team encouraged the institution to utilize a collaborative approach toward the assessment of co-curricular effectiveness.

Faculty Engagement in Student Success

In its report and in the conversations during the visit, SMU clearly articulated its commitment to faculty engagement in students' success, most notably by resourcing and developing faculty into effective educators. SMU's resources for faculty were quite extensive, especially given the size of the institution. Conversations with faculty, department chairs, and deans confirmed that they knew what resources existed and how to access them. As noted in Standard 3, the infrastructure for faculty support included primarily AI&I and CIEL, with some specialty support in the skills labs, which provided faculty with extensive resourcing for online course development, teaching with technologies, inclusive pedagogy, and a variety of workshops made available to the university electronically. Other development initiatives included teaching with technology grants, professional enrichment day, and an educational campaign to help faculty align the curriculum at the assignment, course, and program levels. (CFR 3.3)

SMU's foundational premise that faculties' transformative learning leads to students' transformative learning (and, ultimately, student success) had not been assessed at the time of the visit. Conversations with CIEL staff resulted in an acknowledgement that the assessment of CIEL's effectiveness in producing transformed faculty was still limited to faculty and staff participation rates and satisfaction surveys, although the CIEL staff had engaged in its own self-assessment of its effectiveness by completing a rubric designed by the American Council on Education. Going forward, given SMU's premise that faculty transformative learning facilitates student success, data should be collected that supports that assertion.

Interprofessional Education

The SMU report and supporting evidence for the TPR detailed multiple interprofessional practice and education (IPE) programs over the past decade, beginning in 2012-13 when the institution designed and launched its first university-wide IPE initiative. Although not an explicit facet of regional accreditation standards, IPE programming and assessment are core features of specialized accreditation review elements across healthcare professions. Recognizing the scheduling constraints of clinical faculty and students based in accelerated programs in particular, the SMU leadership, in collaboration with IPE faculty, created specific IPE courses for credit; examples included a 2-unit elective on error management (IGNITE), which grew into a collaborative with three other regional universities and students from nine disciplines. Similarly, simulation-based IPE activities were embedded as course requirements in four academic programs, including the entry-level masters (ELM) program in nursing, as well as the physician assistant, occupational therapy, and physical therapy programs.

The [SMU IPE website](#) reinforced the centrality of IPE training to the institution with a general overview of IPE programs and multiple webpages with information and supporting resources for specific IPE courses and activities. Importantly, the institution also used its online tools (SMU Pulse) to host an IPE passport platform which functioned as a dedicated learning management system for connecting students to required and elective IPE activities and for documenting the progress of students in fulfilling IPE training goals. The team confirmed during the virtual visit that SMU had realized its original IPE task force vision of a comprehensive, scalable, and sustainable model of IPE programming. As described in detail during team interviews with SMU faculty and support staff, IPE infrastructure and offerings were firmly established and extended well beyond the institution and its various campuses.

IPE programs at SMU were designed in alignment with external regulatory requirements and with institution-wide ILOs and program learning outcomes (PLOs) specific to the discipline of clinical practice. Additionally, IPE activities were designed to develop the *Habits of the Mind, Hands, and Heart*

at the center of the SMU academic brand, reflecting the distinctive character and identity of the institution. (CFR 1.1) Multiple robust IPE programming included early adoption (in 2013) of the Agency for Health Research and Quality team strategies and tools to enhance performance (TeamSTEPPS®) and a 2-unit course on error management (IGNITE) in collaboration with the University of California, Berkeley – University of California, San Francisco (UCB-UCSF) joint medical program, JFK University, and a Behavioral Health Workforce Education and Training (BHWET) consortium of social work schools. SMU also rightly highlighted its “IPE Hotspotting” program sponsored by the Camden Coalition of HealthCare Providers; the institution was one of four sites in the United States selected in 2017 by the coalition to receive this recognition.

As a long established face-to face experience, the IPE collaborative led by SMU was able to pivot well to pandemic circumstances. Even so, as evidenced by testimony during the virtual visit, SMU faculty estimated several months of lost traction on intra-campus and multi-institution IPE programming. Going forward IPE activities will be organized efficiently and documented effectively through an on-line “IPE Passport” program and via infrastructure support based in a health science simulation center and motion analysis research center. Students from a number of regional universities will participate in these IPE activities, which were designed to sequence students from preparatory through foundational to advanced learning outcomes. As explained in the Institutional Report (pages 56-57), the IPE system at SMU supported multi-faceted transformative learning toward summative success in program completion and readiness to begin professional work and life.

In addition to substantial evidence presented with the Institutional Report and posted on the SMU website, the team interviewed several personnel involved in IPE program design, delivery, and evaluation; they consistently confirmed the commitment of the institution to IPE as a fundamental feature of the curriculum that was critical to the success of both students and faculty as clinical practitioners. SMU faculty and support staff organizing IPE activities spoke directly with supporting

anecdotes about the importance of IPE for team-based care on behalf of patient safety and provider wellness. Students also confirmed (akin to co-curricular programming) that IPE activities stimulated transformative teaching and learning that connected didactic instruction (or book learning and skill building) with actual clinical practice. The team commended the institution for its sustained contributions as a nationally certified hub for a regional collaboration of universities on IPE programming.

Consistent with the habits of the mind, hands, and heart framework for SMU education, and even prior to its recent prominence in the pandemic, the redress of health care disparities was a chief priority of health professions accreditation agencies and related professional associations. There was abundant evidence across the Institutional Report and remote review interviews about concerted action to embed themes and topics concerning the social and structural determinants of health throughout the student experience and within the IPE curriculum in particular. Therefore, the team also commended SMU faculty and senior leadership, including the Board of Regents, for demonstrating deep appreciation of the changing ecology of health care and its implications for healthcare education.

Regarding assessment of IPE learning outcomes, SMU noted in its Institutional Report (pages 57-58) that the institution began piloting the entire passport system with faculty in spring 2020. It aimed to progressively build a deep reservoir of data across student developmental stages to assess the efficacy of IPE programming in support of transformational student learning. IPE faculty and support staff intended to deploy validated tools such as the inter-professional attitudes scale (IPAS) and inter-professional collaboration competency attainment survey (ICCAS). They planned to administer such direct assessment instruments in a retrospective pre-post design, to obtain student data on the impact of IPE training on student professionalism and demonstrated skills in team-based care.

SMU remained attentive to alignment of IPE learning outcomes with its relatively new ILOs and had adopted a new systematic program review process (PRASAR) to connect institutional with

professional accreditation agency review cycles and substantive requirements, including concerning IPE.

The team encouraged SMU to establish comparative metrics and consistently measure and evaluate student learning, process, and satisfaction outcomes across its various campuses relative to corresponding outcomes for IPE partner universities. While both direct and indirect assessment of IPE learning outcomes already occurred—including through conventional Objective Simulated Clinical Exam (OSCE) simulation programs with rubrics for scoring student performance—the institution recognized the need to implement a comprehensive system for conducting and documenting assessment of IPE activities.

As with the other three sub-themes specified by the institution, the team commended SMU for using the TPR process to systematically address the efficacy of its IPE programs in support of student success. To reinforce the importance of legacy programs and in order to fully institutionalize continuous improvement of IPE initiatives, the team recommended that SMU sustain its priority on IPE programming and assessment with appropriate inter-office collaboration and centralization of data infrastructure and service center support. (CFRs 3.7 and 4.2-4.3).

D. Component 9: Reflection and Plans for Improvement

The report from SMU noted that the institution was undergoing significant cultural change, and that assessment was confirmed throughout the team's visit. Given the long tenure of the previous president, the challenges of the pandemic, the need to identify a new main campus for SMU, and the evolving relationship with Sutter Health, this cultural shift was not surprising. The team saw a number of new initiatives that were designed to increase transparency, expand shared governance, and ensure mission focus. Many members of the leadership team were new, and these governance changes were also in their infancy. Many members of the campus community expressed considerable enthusiasm for these new directions. In addition, the leadership team had strong credentials, and the board was committed to transformational change -- indeed, the board explicitly sought a change agent through

their presidential search. There were some members of the campus community that expressed concerns about communication and general anxiety about new leadership. While this, too, was to be expected, the team encouraged the campus leadership to remain committed to strengthening shared governance even in the midst of needed change.

The university had a compelling mission to “educate students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities.” The team was impressed with the university’s commitment to the success of this mission and noted the significance of the institution’s decision to make student success the cornerstone of its thematic review.

SMU had ambitious plans for the future and aimed to become a “nationally recognized premier, multi-specialty health sciences institution.” Included in their vision was substantial enrollment growth. At the time of the visit, the campus enrolled just over 2000 students and had set an enrollment target of 5000 students in the next 15 years. Given its status as a well-respected health sciences institution and its solid financial position, this goal was not unreasonable; nonetheless it would require significant adaptation, innovation and planning for the physical, technical, and personnel resources of the institution to keep pace. It was a worthy vision, for SMU was a strong institution in a profession that will have increased demands not only for delivery of health care, but delivery in a manner that addresses social, economic, racial, and geographic disparities. The team was impressed with SMU’s understanding of these issues and its commitment to addressing them through innovative education.

In the midst of change and disruption, SMU was well positioned to respond to the changing needs of the healthcare industry.

SECTION III – OTHER TOPICS (such as Substantive Change)

Not applicable for this report

SECTION IV – COMMENDATIONS AND RECOMMENDATIONS

Samuel Merritt University engaged in a thorough process of reaffirmation and provided appropriate documentation to support its outcomes and future directions. The team believed the university had employed the TPR process to reify its commitment to student success and develop a vision for the future.

The team commended SMU on:

1. Using the TPR to establish a model for authentic and collaborative processes that are designed to improve student success and institutional learning;
2. Initiating changes in structures and leadership to promote a culture of shared governance;
3. Recruiting and supporting a diverse student population and taking initial steps toward diversifying the senior leadership and Board of Regents;
4. Responding to the rapidly changing ecology of health care, including strategies to address health care disparities;
5. Creating a model Interprofessional Education Program and serving as a hub for regional collaboration;
6. Infusing faculty and staff development throughout the university, through the work of the Center for Innovation and Excellence in Learning and the Office of Academic Instruction & Innovation; and
7. Improving the relationship with Sutter Health.

The team made the following 4 recommendations

1. Adopt and implement the Strategic Vision for Diversity, Equity, and Inclusion - 2021-2026 with a particular focus on supporting students of color and diversifying the faculty and staff to reflect the diversity of the student body; (CFRs 1.4 and 3.1)

2. Build a centralized assessment and institutional effectiveness and research structure to systematically collect, disseminate, analyze, and act upon data for student success; (CFRs 4.2-4.3)
3. Foster shared governance based on cultural changes that extend throughout the university; (CFRs 1.4, 3.6, and 3.10) and
4. Develop integrative systems and processes that facilitate collaboration across academic, co-curricular, administrative, and organizational lines. (CFRs 3.7 and 4.2-4.3)

**APPENDIX A
FEDERAL COMPLIANCE FORMS**

1 - CREDIT HOUR AND PROGRAM LENGTH REVIEW FORM

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the Comments sections as appropriate.)
Policy on credit hour	<p>Is this policy easily accessible? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If so, where is the policy located?</p> <p>https://www.samuelmerritt.edu/sites/default/files/2020-07/Faculty%20Handbook%20-%202020-07%20Revision.pdf</p> <p>“Definition of a Credit Hour POLICY: A credit hour is defined as an amount of work that reasonably approximates one hour of classroom or direct faculty instruction and a minimum of two hours out-of-class student work per unit, each week for approximately fifteen weeks or the equivalent of one semester. Courses fully online require the same work effort for award of credit. All expected course efforts, regardless of instructional format, must be verified by achievement of course learning outcomes, quality of work assignments, and effective online engagement (if applicable) that promotes collaborative learning. Regarding clinical/laboratory coursework, a credit hour is defined at a minimum ratio of 1/3 (direct instruction to study/preparation/clinical experiences) as cited above. Clinical or laboratory ratios vary by program beyond the minimum identified in this policy, based on specialized accreditation requirements by discipline. Clinical experience hours and laboratory hours completed as part of any course must be logged by students and meet graduation and national board examination requirements.”</p> <p>Student Catalog and Handbook https://www.samuelmerritt.edu/catalog/academic-policies The actual definition is under the “Course Credits and Course Numbering System” menu bar.</p> <p>Comments:</p>
Process(es)/ periodic review of credit hour	<p>Does the institution have a procedure for periodic review of credit hour assignments to ensure that they are accurate and reliable (for example, through program review, new course approval process, periodic audits)? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Program review, please see</p> <p>If so, does the institution adhere to this procedure? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments: UCC submission instructions 01-23-20</p>
Schedule of on-ground courses showing when they meet	<p>Does this schedule show that on-ground courses meet for the prescribed number of hours? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments:</p> <p>Example Schedule with Days Times and Credits - Fall 2019</p>
Sample syllabi or equivalent for online and hybrid courses	<p>How many syllabi were reviewed? Four</p> <p>What kind of courses (online or hybrid or both)?</p> <p>What degree level(s)? <input type="checkbox"/> AA/AS <input checked="" type="checkbox"/> BA/BS <input checked="" type="checkbox"/> MA <input type="checkbox"/> Doctoral</p> <p>What discipline(s)? Nursing</p>

Please review at least 1 - 2 from each degree level.	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? X YES ☐ NO
	Comments: In addition to the syllabus guides in Canvas and in the Faculty Handbook, course leads have the option to use the Syllabot , which generates an editable syllabus template using systems of record. N158 Fall 2020 Syllabus N534 Fall 2020 Syllabus N623 Fall 2020 Syllabus N601 Fall 2020 Syllabus
Sample syllabi or equivalent for other kinds of courses that do not meet for the prescribed hours (e.g., internships, labs, clinical, independent study, accelerated) Please review at least 1 - 2 from each degree level.	How many syllabi were reviewed? Three
	What kinds of courses? Theory and clinical
	What degree level(s)? ☐ AA/AS ☐ BA/BS X MA ☐ Doctoral
	What discipline(s)? Nursing
	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? X YES ☐ NO
	Comments: N534L Fall 2020 Syllabus N623L Fall 2020 Syllabus N675L Fall 2020 Syllabus
Sample program information (catalog, website, or other program materials)	How many programs were reviewed? Two
	What kinds of programs were reviewed? Nursing BSN and MSN
	What degree level(s)? ☐ AA/AS X BA/BS X MA ☐ Doctoral
	What discipline(s)? Nursing
	Does this material show that the programs offered at the institution are of a generally acceptable length? X YES ☐ NO
	Comments: Program descriptions are available on the SMU website: For example, MSN Nurse Anesthesia: https://www.samuelmerritt.edu/programs/school-nursing/master-science-nursing-nurse-anesthesia BSN: https://www.samuelmerritt.edu/programs/school-nursing/bachelor-science-nursing MOT and OTD: https://www.samuelmerritt.edu/programs/doctor-and-master-occupational-therapy

Review Completed By: **William Shay**
Date: **October 15, 2020**

2 - MARKETING AND RECRUITMENT REVIEW FORM

Under federal regulation*, WSCUC is required to demonstrate that it monitors the institution's recruiting and admissions practices.

Material Reviewed	Questions and Comments: Please enter findings and recommendations in the comment section of this table as appropriate.
**Federal regulations	Does the institution follow federal regulations on recruiting students? X YES ___ NO
	Comments: The university does not offer incentive compensation for the recruitment of students. It was reported that there is information on this in the Sutter Healthstream training modules
Degree completion and cost	Does the institution provide information about the typical length of time to degree? X YES ___ NO
	Does the institution provide information about the overall cost of the degree? X YES ___ NO
	Comments: Time to degree is specified on the webpage for each degree program, such as the Doctor of Physical Therapy page (https://www.samuelmerritt.edu/programs/doctor-physical-therapy), which specifies that "Our 32- month program includes 36 weeks of full-time clinical education experiences." For the cost of the degree: https://www.samuelmerritt.edu/admission/affording-smu .
Careers and employment	Does the institution provide information about the kinds of jobs for which its graduates are qualified, as applicable? X YES ___ NO
	Does the institution provide information about the employment of its graduates, as applicable? X YES ___ NO
	Comments: Students attending SMU have selected a professional role in health care prior to admission and the academic program prepares the student for this specific role. https://www.samuelmerritt.edu/discover/life-after-smu

*§602.16(a)(1)(vii)

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

Reviewed Completed by: Elizabeth Bossert

Date: October 16, 2020

3 - STUDENT COMPLAINTS REVIEW FORM

Under federal regulation*, WSCUC is required to demonstrate that it monitors the institution's student complaints policies, procedures, and records.

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)
Policy on student complaints	Does the institution have a policy or formal procedure for student complaints? X YES ___ NO
	If so, is the policy or procedure easily accessible? If so, where?
	<p>Comments:</p> <p>SMU Complaints Policy (for students, faculty, staff and the public) is accessed through the web- based application Policy Stat. This requires logging into a Sutter Health intranet. A copy of the Complaint Policy can be found here [SMU Complaint Policy-- Policy Stat].</p> <p>Student Catalog and Handbook: https://www.samuelmerritt.edu/catalog/academic-personal- professional- integrity#Policy%20and%20Procedures%20for%20Equal%20Opportunity,%20Harassment%20and%20Nondiscrimination</p> <p>https://www.samuelmerritt.edu/catalog/academic-personal-professional- integrity#Student%20Grievance%20Policy,%20Process,%20and%20Procedures</p> <p>Bias incident report form: https://www.samuelmerritt.edu/bias</p> <p>Campus Safety: https://www.samuelmerritt.edu/discover/student- experience/safety-and- security</p> <p>Sexual Assault: https://www.samuelmerritt.edu/discover/student- experience/safety-and- security/sexual-assault-and-violence-prevention- resources</p> <p>SMU Voices: https://www.samuelmerritt.edu/smuvoices</p> <p>There are multiple ways for members of the SMU community to request attention to a problem or complaint, including direct contact with a staff or faculty member, with the President at open Town Halls, with diversity staff in the Office of People and Culture, or through multiple web- and email-based routes.</p>

Process(es)/ procedure	Does the institution have a procedure for addressing student complaints? X YES ___ NO
	<p>If so, please describe briefly:</p> <p>With the new President's shared governance initiative, SMU Voices was launched in 2019 as a new process. One year of data collection, synthesis and actions taken indicate that the SMU Voices tool and process are more effective than the previous complaints form.</p> <p>The SMU Voices team, comprising a university student, a faculty, a staff member, and the Director of Institutional Research, has a formalized method for reviewing submissions, and the process workflow has undergone improvements to address the submissions quickly and efficiently.</p> <p><u>SMU Voices Flow Chart 2020-08-19</u></p> <p>From inception to June 2020, SMU Voices has received and reviewed 105 submissions, including 62 from staff, 22 from students, and 21 from faculty. All SMU Voices submissions through the end of May have been reviewed, addressed or are currently under review for disposition.</p> <p>Procedures for addressing complaints that are submitted through SMU Voices are at: https://www.samuelmerritt.edu/smuvoices</p>
	If so, does the institution adhere to this procedure? X YES ___ NO
	Comments:
Records	Does the institution maintain records of student complaints? X YES _ No If so, where?
	Does the institution have an effective way of tracking and monitoring student complaints over time? X YES ___ NO If so, please describe briefly:
	Comments: Records of student complaints are maintained in the Office of the President; a spreadsheet tracking those complaints since 2013, which contains confidential information about students, is available on request.

*§602-16(1)(1)(ix)

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

Review Completed By: Stephanie Juillerat

Date: October 15, 2020

4 – TRANSFER CREDIT POLICY REVIEW FORM

Under federal regulations*, WSCUC is required to demonstrate that it monitors the institution's recruiting and admissions practices accordingly.

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)
Transfer Credit Policy(s)	Does the institution have a policy or formal procedure for receiving transfer credit? X YES ___ NO
	If so, is the policy publicly available? X YES ___ NO If so, where? https://www.samuelmerritt.edu/catalog/academic-policies#Transfer%20Credit
	Does the policy(s) include a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education? X YES ___ NO
	Comments: SMU does not admit transfer students. Students may transfer in a limited number of outside credits toward their degree programs with SMU. The Registrar office evaluates requests for transfer of credit: https://webapps.samuelmerritt.edu:8443/iFiller/iFiller.jsp?fref=9047076577ed-430f-be2f-2032797965c9

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

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

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

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

Review Completed By: Stephanie Juillerat

Date: October 15, 2020

**APPENDIX B
OFF-CAMPUS LOCATIONS REVIEW**

Institution: Samuel Merritt University
Type of Visit: Reaffirmation
Name of reviewer/s: Dr. Taiwo Ande
Date/s of review: October 8, 2020

1. Site Name and Address

Samuel Merritt University, Fresno Campus
1791 E. Fir Avenue
Fresno, California 93720
800.607.6377

2. Background Information (number of programs offered at this site; degree levels; FTE of faculty and enrollment; brief history at this site; designation as a branch campus standalone location, or satellite location by WSCUC)

Mission & Strategic Importance of Location

SMU Mission: We educate students to become highly skilled and compassionate health care professionals who positively transform the experience of care in diverse communities.

The Fresno campus is an ideal implementation of our mission and values. Its location in the diverse Central Valley of California, coupled with the surrounding rural area's need for quality health care and wellness support, places it highly on our strategic plan for sustainable growth.

The Fresno campus has dedicated staff and faculty. We've invested in renovating the facilities already (video link below), and have plans to add additional high-demand programs based in feasibility research and our Academic Master Plan as detailed in the Substantive Change Application.

Presently Offered Program information:

<https://www.samuelmerritt.edu/programs/school-nursing/rn-bsn-program>

Please scroll down the page for links to curriculum, cost & aid, requirements, outcomes, resources, faculty and admission information. These are the same at any location of program delivery.

Qualified students in the draw area for this location also have access to any of the online program offerings, MSN-FNP, DNP, DNP-FNP: <https://www.samuelmerritt.edu/online-programs>

The Baccalaureate/Pre-Licensure Division curriculum, consisting of four tracks (BSN, ABSN, ELMSN-PL, and RN to BSN), was developed in accordance with the School of Nursing's pre-licensure and undergraduate mission, goals, and expected student outcomes. The Baccalaureate curriculum reflects professional nursing standards, the Quality and Safety Education for Nurses (QSEN)

Competencies, the California BRN requirements, and the AACN Baccalaureate Essentials, as well as the needs of the communities of interest across SMU's four campuses (Oakland, San Mateo, Sacramento, and Fresno).

We are mostly on track to implement the remaining programs proposed in the Substantive Change Application for the site:

- Master Physician Assistant (MPA): 20 students per annual cohort in fall 2019 to 50 per cohort by fall 2024. (This program needed to make some adjustments based on their specialized accreditation review, so their implementation is delayed.)
- Accelerated Bachelor of Science in Nursing (ABSN): Three annual cohorts of 48 for a total enrollment of 144. Enrollment begins with a single cohort in 2022, with three total annual cohorts by 2024.

As noted in the response to the review of our Substantive Change Application, planning has accounted for the initial investment costs in the campus and the programs are already self-sustaining.

Facilities & Technology Resources

The campus has been engaged in a significant renovation process, including the installation of state-of-the-art technology and learning resources. Here is a recent marketing video that shows the facilities.

<https://www.dropbox.com/home/2020%20IT%20Media%20Services>

Faculty & Staff

Sixty percent of faculty teaching at the site are regular faculty, with the remaining instructors serving in adjunct roles. For the inaugural year, an experienced full time faculty member is (was, pre-COVID) commuting to the campus twice a week while we identify and orient a local full time person. The total FTE for the site at present is 2.11 (Exhibit folder: RNBSN Workload Table Fresno.pdf).

Students

An initial cohort of students in the RN to BSN program track was added in Fresno in January 2020. Of the 24 beginning students, 22 also attended during the summer term, and 23 are still enrolled as of the fall of 2020. This 96% retention rate is in keeping with retention rates across our programs and campuses.

For comprehensive data, our dashboards are [here](#)

Support Services

To meet teaching and learning needs across the different campuses and modalities, the SMU library includes both digital capabilities (such as access to online journals, databases, video, and streaming media) and physical spaces at all of the university's campuses. The library also provides free delivery

of materials from the Oakland campus library and interlibrary loan. Reference help, in-class training, and individual instruction on library resources is available to both students and faculty.

SMU's Fresno campus, newly opened in January 2020, much like our other campus sites, includes a computer laboratory, a library, a video conference room, offices, two active learning classrooms and two standard classrooms, student study spaces, and a Health Sciences Simulation Center. Additional university services are available to students via the internet or by email/telephone.

Quality & Assessment

All SMU programs adhere to the standards of [professional accreditation in their respective fields](#), in addition to the WSCUC Standards & Criteria. All locations and delivery modes participate together with their departmental colleagues in planning curriculum, implementing student success, measuring results, and evaluating improvements. For RN-BSN assessment documents and program review, information may be found in the [Institutional Effectiveness Center](#). Learning Outcomes and other effectiveness information may be found on this page:

<https://www.samuelmerritt.edu/academic-affairs/institutional-effectiveness>

3. Nature of the Review (material examined and persons/committees interviewed)

Due to the COVID-19 pandemic, the Fresno Campus was reviewed via a video conference with group of administrators, faculty and staff of the campus. Seven separate meetings were conducted with groups of individuals representing the Facilities, Information Technology, Strategic Leadership, Academic Team, Student Affairs and the ALO. Materials examined included a campus video, student support materials and IT support systems.

Lines of Inquiry	Observations and Findings	Follow-up Required (identify the issues)
<p><i>For a recently approved site.</i> Has the institution followed up on the recommendations from the substantive change committee that approved this new site?</p>	<p>According to the sub change action letter dated 2/14/2019, two recommendations were proposed: 1) Future substantive change proposals for either new campuses or new programs must include evidence that adequate student support services will be available. (CFRs 2.13, 3.1) and 2) The institution should review the current Teach Out Policy to ensure that all steps of essential communication are included in the policy and that the policy aligns with WSCUC criteria and policies. (CFRs 1.7)</p> <p>Fresno campus student support services are similar to services provided to students at the other campuses. At present, only the BSN completion students are on Fresno campus. The students are supported through several student success initiatives e.g. mentoring, learning support, coaching, student support group and financial aid support. There is a designated admission counselor for the campus. The campus provides sufficient support services to serve the needs of current students on the campus.</p> <p>Based on the documents provided, it was impossible to validate the Teach Out Policy to ensure all steps of essential communications are included in the policy.</p>	<p>Need a copy of the most recent Teach Out policy for the Fresno campus. The policy needs to be reviewed.</p>
<p><i>Fit with Mission.</i> How does the institution conceive of this and other off-campus sites relative to its mission, operations, and administrative structure? How is the site planned and operationalized? (CFRs 1.2, 3.1, 3.5, 4.1)</p>	<p>The location and existence of Fresno Campus is designed to support the mission of SMU. Fresno campus enables the university to fulfill its Academic Master Plan, respond sustainably to market demand for programs and contribute to the development of a healthcare workforce that draws students from rural areas, and equips graduates with the skills and dispositions to work with underserved populations, including rural populations with a particular focus on mental health care, trauma-informed care, and substance abuse care. Practitioner graduates would then be positioned to “transform the experience of care in diverse communities.”</p> <p>Fresno campus operational systems, policies and processes, as well as its administrative structure, were designed to be in complete alignment with those of the three other campuses. There is a Fresno Campus Implementation Team comprised of department heads and principal leads of all major departments/divisions that ensures consistency and equity across campuses following templates and pre-existing mechanisms at the main campus. The campus is a state-of-the-art facility that enables speedy and effectively synchronous and asynchronous instructions. Currently, the oversight of the campus is carried out by staff of the facilities department. However, there is a plan to hire a site manager in the nearest future.</p>	<p>No follow up needed</p>
<p><i>Connection to the Institution.</i> How visible and deep is the presence of the institution at the off-campus site? In what</p>	<p>The implementation of the campus was highly collaborative. Various staff, faculty and administrators are at campus regularly. The Student Affairs staff rotates visits to the campus on a monthly basis. Local staff and students are included via web meetings in workgroups, planning, and professional development. BSN completion students on campus</p>	<p>No follow up needed</p>

ways does the institution integrate off-campus students into the life and culture of the institution? (CFRs 1.2, 2.10)	are fully integrated with their peers on other campuses. Classes and faculty are shared across campus. Advising and student support systems are the same like other campuses. Students are able to remotely take classes from other campuses. Same university standards and policies used for hiring SMU faculty are used at the Fresno campus. Fresno Campus students are able to participate in co-curricular workshops offered to all students on other campuses	
<i>Quality of the Learning Site.</i> How does the physical environment foster learning and faculty-student contact? What kind of oversight ensures that the off-campus site is well managed? (CFRs 1.8, 2.1, 2.5, 3.1, 3.5)	Fresno campus is a state-of-the-art facility designed to foster learning and student contact. The campus currently opens 8-5pm, but designed to be opened 8.00am – 10.00pm. The high-tech facility is ADA compliant and comprises of a 24-seat computer lab, study room library, study areas, faculty offices, student lounge, and a library. The facility supports both synchronous and asynchronous learning models which facilitates students and faculty interaction. The Simulation infrastructure is almost completed and a Simulation Center technician is on ground to support students. A technician is also on site to attend to students and faculty tech support needs. Most activities at the Campus are currently managed by BSN completion program which is the sole program on campus. However, there is a plan to hire a site manager as more programs are offered at the campus.	No follow up needed
<i>Student Support Services.</i> What is the site's capacity for providing advising, counseling, library, computing services and other appropriate student services? Or how are these otherwise provided? What do data show about the effectiveness of these services? (CFRs 2.11-2.13, 3.6, 3.7)	The SMU Student Support Services are replicated at the Fresno campus. Students have occupied the campus for less than a year. Comprehensive student success initiatives such as mentoring, learning support, coaching, student support groups, disability services, early warning systems, financial aid and counseling are available for students both on ground and online. The BSN completion students are the current beneficiaries of the support services available at the campus. There is no data available on the effectiveness of these services. However, there is a plan to evaluate the student support services effectiveness in Spring 2021 as part of the institution wide student satisfaction survey.	No follow up needed
<i>Faculty.</i> Who teaches the courses, e.g., full-time, part-time, adjunct? In what ways does the institution ensure that off-campus faculty is involved in the academic oversight of the programs at this site? How do these faculty members participate in curriculum development and assessment of student learning? (CFRs 2.4, 3.1-3.4, 4.6)	A total of 2.11 FTE faculty are assigned to teach the 2020-2021 curriculum for the BSN completion program at the campus. In addition to a dedicated Regional Coordinator responsible for clinical placements for students, there is a RN BSN completion program director that coordinates the activities of the program and associated faculty. Curriculum development and assessment of student learning follows the same process as in existing programs at other campuses. Each program establishes an assessment plan under the guidance of the designated university's institutional effectiveness champion to ensure clear alignment among ILO, PLO, and CLO	No follow up needed

<p><i>Curriculum and Delivery.</i> Who designs the programs and courses at this site? How are they approved and evaluated? Are the programs and courses comparable in content, outcomes and quality to those on the main campus? (CFR 2.1-2.3, 4.6)</p>	<p>Programs currently offered at this site are existing programs at other campuses, all of which have gone through SMU's comprehensive & rigorous design, evaluation, and approval process beginning with the faculty SMEs. Additionally, these programs have a strong track record at other campuses prior to their offering at Fresno.</p>	<p>No follow up needed</p>
<p><i>Retention and Graduation.</i> What data on retention and graduation are collected on students enrolled at this off-campus site? What do these data show? What disparities are evident? Are rates comparable to programs at the main campus? If any concerns exist, how are these being addressed? (CFRs 2.6, 2.10)</p>	<p>The RN to BSN program in Fresno started in Spring 2020. Graduation and retention data are not yet available. However, the retention rate for RN to BSN students from spring to summer 2020 is 96%.</p>	<p>No follow up needed</p>
<p><i>Student Learning.</i> How does the institution assess student learning at off-campus sites? Is this process comparable to that used on the main campus? What are the results of student learning assessment? How do these compare with learning results from the main campus? (CFRs 2.6, 4.6, 4.7)</p>	<p>Fresno campus follows identical assessment process across all SMU campuses. Each program establishes an assessment plan under the guidance of the designated university's institutional effectiveness champion to ensure clear alignment among ILO, PLO, CLO and ultimately produce evidence, both direct and indirect demonstrating student learning and accomplishments. Assessment activities and evidence are documented in two primary internal electronic systems: the course management system (<i>Canvas</i>) and SharePoint (<i>Collaborate</i>). Currently, data collection on students attending Fresno campus is ongoing. No data is available at the time of visit</p>	<p>No follow up needed</p>
<p><i>Quality Assurance Processes:</i> How are the institution's quality assurance processes designed or modified to cover off-campus sites? What evidence is provided that off-campus programs and courses are</p>	<p>Program Learning Outcomes (PLO) and ILOs are similar across all SMU locations. The first RN to BSN cohort on Fresno campus participated in the first summative and formative course evaluations in Spring 2020. Program learning outcomes and ILOs are the same across all locations. Faculty uses the assessment process and the program reviews to document that their educational quality is consistent in every delivery. Fresno location will join the existing cycle of evaluation for its departments. The institutional practice with existing programs at other locations have been modeled for the campus.</p>	<p>No university wide approach to monitoring effectiveness and quality of satellite campus. Recommend that a clearly defined process be created for this.</p>

educationally effective? (CFRs 4.4-4.8)		
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APPENDIX C
Distance Education Review

Institution: Samuel Merritt University
Type of Visit: Reaffirmation
Name of reviewer/s: Elizabeth Bossert
Date/s of review: October 15, 2020

1. Programs and courses reviewed (please list)

MS Nursing, Family Nurse Practitioner

<https://www.samuelmerritt.edu/programs/school-nursing/master-science-nursing-family-nurse-practitioner-online>

Doctor of Nursing Practice (with or without FNP specialty)

<https://www.samuelmerritt.edu/programs/school-nursing/doctor-nursing-practice>

2. Background Information (number of programs offered by distance education; degree levels; FTE enrollment in distance education courses/programs; history of offering distance education; percentage growth in distance education offerings and enrollment; platform, formats, and/or delivery method)

Two graduate programs, one Master level (MSN-FNP) and one Doctoral (DNP, DNP-FNP), which may or may not include the FNP specialty designation. These online-delivery programs are very practitioner-focused, designed primarily to help advance practice & leadership in these high-need fields.

Background information:

Number of programs offered by DE: One – Family Nurse Practitioner (FNP)

Degree levels:

1. Masters of Science in Nursing (MSN)
 - a. Entry level Masters of Science in Nursing
 - b. Master of Science in Nursing
 - c. Master of Science Nursing – post professional
2. Doctor of Nursing Practice
 - a. Post Baccalaureate Family Nurse Practitioner
3. Also a certificate without a degree

FTE Enrollment – fall 2019

1. Certificate: 18.5
2. MSN 390.50
3. DNP: 26
4. Total: 435.0

History of offering distance education

The DE offering of the FNP occurred in the last 8 years. At this point, the FNP is the only focus area offered via DE at SMU

Percentage growth in distance education

Fall 2014 – 227 students

Fall 2019 – 446 students

Growth: 95.6%

Platform formats and delivery method:

Canvas, Distance Education

3. Nature of the review (material examined and persons/committees interviewed)

Review of SMU TPR report

Review of SMU website

Meeting with Distance Education faculty

Meeting with Distance Education students

Meeting with Recruitment and Marketing

Meeting with Admissions

Meeting with Student Affairs

Meeting with Institutional Research and Institutional Effectiveness

Meeting with Deans and Chairs

Observations and Findings

Lines of Inquiry (refer to relevant CFRs to assure comprehensive consideration)	Observations and Findings	Follow-up Required (identify the issues)
<p><i>Fit with Mission.</i> How does the institution conceive of distance learning relative to its mission, operations, and administrative structure? How are distance education offerings planned, funded, and operationalized?</p>	<p>The kind of educational outreach made possible by distance learning technologies allows SMU to enact its mission of transforming the experience of care in diverse communities.</p> <p>https://www.samuelmerritt.edu/discover/mission-and-values</p> <p>These practitioner-focused programs are often high-demand in their communities, urban and rural.</p>	<p>No follow-up needed.</p>
<p><i>Connection to the Institution.</i> How are distance education students integrated into the life and culture of the institution?</p>	<p>SMU is not a residential university, and most students are already working in their field of choice. For many, SMU will be the provider of their second degree, allowing them to increase their skills and potentially progress professionally. The asynchronous nature of online learning can be a significant benefit for people who are working, raising families, or both.</p> <p>All students have access to identical services and support, both academic and student affairs. Students may also participate on university committees and in student government as their schedules allow.</p>	<p>No follow-up needed.</p>
<p><i>Quality of the DE Infrastructure.</i> Are the learning platform and academic infrastructure of the site conducive to learning and interaction between faculty and students and among students? Is the technology adequately supported? Are there back-ups?</p>	<p>Canvas is used for the LMS. For the FNP program there is a partnership with Synergis that is contracted to 2025.</p> <p>There is outstanding instructional support available:</p> <p>https://www.samuelmerritt.edu/academic-and-instructional-innovation</p>	<p>No follow up needed.</p>
<p><i>Student Support Services:</i> What is the institution's capacity for providing advising, counseling, library, computing services, academic support and other services appropriate to distance modality? What do data show about the effectiveness of the services?</p>	<p>Most support services are already accessible at a distance, so moving to DE was not difficult. As health care professions are 24/7, students cannot always be available during business hours, even if they are local to the main campus. Online delivery is a flexible solution to delivering educational access in a variety of challenging conditions. All students have the same services, regardless of location or content delivery mode.</p> <p>https://www.samuelmerritt.edu/discover/student-experience/student-affairs</p> <p>Also, the library has provisions for support of students at a distance:</p> <p>https://www.samuelmerritt.edu/library</p>	<p>No follow up needed.</p>

<p><i>Faculty.</i> Who teaches the courses, e.g., full-time, part-time, adjunct? Do they teach only online courses? In what ways does the institution ensure that distance learning faculty are oriented, supported, and integrated appropriately into the academic life of the institution? How are faculty involved in curriculum development and assessment of student learning? How are faculty trained and supported to teach in this modality?</p>	<p>Faculty are hired for their expertise and evaluated regularly on their effectiveness. There are many options available for faculty development regardless of program or mode. All faculty serve on internal committees, and outreach is intentional to include a diversity of voices.</p> <p>https://www.samuelmerritt.edu/faculty-and-staff</p> <p>https://www.samuelmerritt.edu/academic-affairs/faculty-resources-and-support</p>	<p>No follow up needed.</p>
<p><i>Curriculum and Delivery.</i> Who designs the distance education programs and courses? How are they approved and evaluated? Are the programs and courses comparable in content, outcomes and quality to on-ground offerings? (Submit credit hour report.)</p>	<p>All courses and programs follow a proposal and development process through subject matter experts, feasibility study, budget, enrollment projections, and committee reviews. The PLOs and student learning objectives also meet the standards for professional accreditation for each field. There is an ongoing cycle of program review and improvement, and a change approval process via the Curriculum Committee (p. 26 of the Faculty Handbook linked below).</p> <p>Here is the definition of credit hours from p. 27 of the faculty handbook, followed by the link to the full document:</p> <p>“Definition of a Credit Hour POLICY: A credit hour is defined as an amount of work that reasonably approximates one hour of classroom or direct faculty instruction and a minimum of two hours out-of-class student work per unit, each week for approximately fifteen weeks or the equivalent of one semester. Courses fully online require the same work effort for award of credit. All expected course efforts, regardless of instructional format, must be verified by achievement of course learning outcomes, quality of work assignments, and effective online engagement (if applicable) that promotes collaborative learning. Regarding clinical/laboratory coursework, a credit hour is defined at a minimum ratio of 1/3 (direct instruction to study/preparation/clinical experiences) as cited above. Clinical or laboratory ratios vary by program beyond the minimum identified in this policy, based on specialized accreditation requirements by discipline. Clinical experience hours and laboratory hours completed as part of any course must be logged by students and meet graduation and national board examination requirements.”</p> <p>https://www.samuelmerritt.edu/sites/default/files/2020-07/Faculty%20Handbook%20-%202020-07%20Revision.pdf</p> <p>SMU prefers that courses <u>exceed</u> the Carnegie minimum of 2 hours out-of-class time noted in the faculty handbook for every 1 hour of instructional contact, as noted in the Course Credits and Course Numbering System expandable tab on this web page:</p> <p>https://www.samuelmerritt.edu/catalog/academic-policies</p>	<p>No follow up needed.</p>

<p><i>Retention and Graduation.</i> What data on retention and graduation are collected on students taking online courses and programs? What do these data show? What disparities are evident? Are rates comparable to on-ground programs and to other institutions' online offerings? If any concerns exist, how are these being addressed?</p>	<p>All courses and programs are tracked, and rates are comparable across delivery modes. Any disparities are promptly addressed.</p> <p><i>Assessment documents and program review information may be found in the Institutional Effectiveness Center (scroll way down for specific program folders).</i></p>	<p>No follow up needed</p>
<p><i>Student Learning.</i> How does the institution assess student learning for online programs and courses? Is this process comparable to that used in on-ground courses? What are the results of student learning assessment? How do these compare with learning results of on-ground students, if applicable, or with other online offerings?</p>	<p>The same PLOs and course outcomes are used across learning locations & modes. The online programs add a module to some of measurement indicators currently under revision by the Online/Hybrid Task Force, to further evaluate the effectiveness of their interaction with the delivery technology.</p> <p><i>Learning Outcomes and other effectiveness information may be found on this page:</i></p> <p>https://www.samuelmerritt.edu/academic-affairs/institutional-effectiveness</p>	<p>No follow up needed</p>
<p><i>Contracts with Vendors.</i> Are there any arrangements with outside vendors concerning the infrastructure, delivery, development, or instruction of courses? If so, do these comport with the policy on <i>Contracts with Unaccredited Organizations</i>?</p>	<p>A contract is in place with Synergis to help develop and deliver the FNP program and runs until 2025. This experienced partner was selected for help in the early efforts in online delivery. Subsequent programs have not used Synergis, and the contact will probably not be renewed.</p>	<p>No follow up needed.</p>
<p><i>Quality Assurance Processes:</i> How are the institution's quality assurance processes designed or modified to cover distance education? What evidence is provided that distance education programs and courses are educationally effective?</p>	<p>All courses go through identical processes of department review, institutional program review, professional accreditation review, and assessment. There is a dedicated Online/Hybrid Task Force of interested professionals in Ed Tech, Faculty Development, and Student Learning who focus specifically on matters pertaining to the delivery of learning at a distance, in addition to the existing evaluative framework for all courses. It started as conversation, and will likely become a formal subcommittee of the Institutional Effectiveness Council or possibly be located in Academic and Instructional Innovation, who have been very active advocates. It has been waiting until the new IE person (Leslie) started work in June of 2020.</p> <p>There is a set of minutes from the initial organizing meeting in the Box folder for Additional materials. This was presented at the first Faculty Organization meeting asking for faculty appointees for this effort and for the co-curricular assessment team.</p>	<p>No follow up needed.</p>