

Samuel Merritt University

WSCUC Interim Report

Spring 2025

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**Samuel Merritt University History**

Founded in [1909](https://www.samuelmerritt.edu/discover/about-smu/our-history), Samuel Merritt University (SMU, or the university) has been educating healthcare providers for more than a century. During its first 75 years, the Samuel Merritt School of Nursing, affiliated with Samuel Merritt Hospital, graduated hundreds of students with nursing diplomas. In 1984, Samuel Merritt College became a separately incorporated not-for-profit entity with Samuel Merritt Hospital as its sole member, expanded its mission, and obtained regional WASC Senior College and University Commission (WSCUC) accreditation as a four-year institution of higher education. In 2009, the college became Samuel Merritt University, in recognition of the scope of its undergraduate and graduate programs. SMU was approved by WSCUC for a ten-year reaffirmation of accreditation in 2020, and in 2021 the university disaffiliated from Sutter Health to concentrate on our core mission and goals. The [mission](https://www.samuelmerritt.edu/discover/mission-and-values) of SMU is 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, 4.7)

**Academic Degree Programs**

Samuel Merritt University offers 3 bachelors, 6 masters, and 6 doctoral [degree-granting programs](https://www.samuelmerritt.edu/programs), ten of them through the College of Nursing (CoN). The three undergraduate nursing degree granting programs are the Bachelor of Science in Nursing (BSN), the Accelerated Bachelor of Science in Nursing (ABSN), and the Registered Nurse to Bachelor of Science in Nursing (RN to BSN). At the graduate level, the School of Nursing offers two Entry Level Master of Science in Nursing (ELMSN) degree granting programs in Case Management and Family Nurse Practitioner; three Master of Science in Nursing (MSN) degree-granting programs in Case Management, Family Nurse Practitioner, and Nurse Anesthesia; and four doctoral degree-granting programs, Doctor of Nursing Practice (DNP) and Doctor of Nursing Practice-Family Nurse Practitioner (DNP-FNP), Doctor of Nursing Practice Online Program – Psychiatric Mental Health, and Doctor of Nursing Practice – Nurse Anesthesia (DNP-CRNA). The five degree-granting programs that are not part of the College of Nursing are the Master of Physician Assistant (MPA), the Master of Occupational Therapy (MOT), the Doctor of Occupational Therapy (OTD), the Doctor of Physical Therapy (DPT), and the Master of Social Work. SMU has also just approved a new Master of Health Administration and a Bachelor of Health Sciences program for the College of Health Sciences. The Doctor of Podiatric Medicine (DPM) Program has its own college. All degree-granting programs are accredited or in the process of becoming accredited by their respective [program accreditors](https://www.samuelmerritt.edu/academic-affairs/accreditation). (CFRs 1.2, 1.5)

**Students and Faculty**

Fall 2023 [student enrollment (headcount)](https://www.samuelmerritt.edu/tableau.php?p=enrollment) was 1,911 (1,800.73 FTE), including 704 undergraduate nursing students, 1 certificate seeker, 655 master’s, 552 doctoral, and 60 non-degree seeking students. Since fall 2014, female students have made up approximately three-quarters of the student body. Fall 2023 student demographics were Asian (35%), White (23%), Hispanic/Latinx (19%), two or more races (7%), Black/African American (6%), unknown (6%), and Native Hawaiian/Other Pacific Islander (1%). By age, the largest student group is those between 26-35 years old (59%), followed by 36-40 (20%), 18-25 (12%), 46-55 (7%), and 56+ (2%). (CFR 1.4)



For 2022-2023, 39% of [faculty](https://www.samuelmerritt.edu/tableau.php?p=facultyandstaff) were full-time and 61% were part-time. The full-time faculty count was 179. While the majority of faculty are White (59.7%), this is a decrease from 79% in 2014-2015. Since 2015, African American faculty have increased from 4% (15) to 8.7% (40), reflecting SMU’s improved diversity hiring practices. The gender composition of faculty is comparable to students: seventy-five percent of SMU faculty are women. (CFRs 1.4, 3.1)

**Campus Locations and Distance Education**

The university’s main campus is located on the campus of Alta Bates Summit Medical Center in Oakland, CA. SMU also operates [campuses](https://www.samuelmerritt.edu/discover/smu-campuses) in Sacramento, the San Francisco Peninsula (San Mateo), and Fresno. The Sacramento campus offers the ABSN, RN to BSN, Entry-level MSN (CM and FNP), MSN (CM), and the DNP-FNP doctoral program. The San Mateo campus offers the ABSN and RN to BSN programs; the Fresno campus offers the RN to BSN program and shortly will debut the ABSN. Both the Doctor of Nurse Practitioner (DNP) and the MSN-Family Nurse Practitioner are offered as approved online degree programs. (CFR 3.5)

Robust technology and instructional design ([ITS](https://www.samuelmerritt.edu/faculty-and-staff/its), [Academic and Instructional Innovation](https://www.samuelmerritt.edu/academic-and-instructional-innovation) [A&II]) support resources and the fully accredited [Health Sciences Simulation Center](https://www.samuelmerritt.edu/health-sciences-simulation-center) (HSSC) enabled the university to pivot speedily and effectively to online instruction and operations during the Covid-19 pandemic. Samuel Merritt University will continue to deliver and assess educational opportunities and student success in face, online, and hybrid modes. (CFRs 2.8, 4.1, 4.3, 4.4)

To meet teaching and learning needs across the different campuses and modalities, the SMU [Library](https://www.samuelmerritt.edu/library/about-library) includes both digital capabilities (such as access to online journals, databases, video, and streaming media) and physical spaces at all university 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 are available to both students and faculty irrespective of location. (CFRs 2.13, 3.1, 3.5)

**Operations, Capacity, and Infrastructure**

SMU’s organizational structure includes its [Board of Regents, the Office of the President](https://www.samuelmerritt.edu/discover/about-smu/president-and-leadership), and the Offices of [Academic Affairs](https://www.samuelmerritt.edu/academic-affairs), [Student Affairs](https://www.samuelmerritt.edu/discover/student-experience/student-services), University [Advancement and Communication](https://www.samuelmerritt.edu/news/smu-names-two-new-senior-leaders), [Strategy, Innovation and Operations](https://www.samuelmerritt.edu/news/smu-welcomes-new-vp-strategy-innovation-and-operations), [People and Culture,](https://www.samuelmerritt.edu/faculty-and-staff/office-people-and-culture) and the Chief of Staff and University Initiatives. Within the Office of Academic Affairs there are three colleges (Nursing, Health Sciences, and Podiatric Medicine. (CFR 3.7, 3.8, 3.9)

SMU has existing capacity in personnel, resources, and facilities to fully resource current academic programs, and the university is engaged in planning for future growth. In conjunction with the university’s plan to create a new main campus in Oakland, CA, SMU engaged the services of Gray Associates to lead a process for creating an [Academic Master Plan](https://wascsenior.box.com/s/9c17ojutn8a7kgv0gtmbgbqn4xes8i5y) (AMP) for the [growth](https://wascsenior.box.com/s/z9c04s3fijn9ie6193fha6idlv8z5us3) of existing degree programs and the development of new degree programs. In 2020 SMU used the AMP to design and create financial models for the new campus in downtown Oakland. In addition, several campus visioning meetings led by architects Perkins and Will engaged faculty, staff, and students in determining design priorities for the new campus and current architectural planning. The building construction is well underway, with the exterior structure in place. The university is now engaged in planning across the organization for the coming move. Target opening date is January 1, 2026. The project as of this date is on track and on budget. (CFRs 3.5, 3.7, 4.3, 4.6, 4.7)

SMU is headquartered in one of the most ethnically and racially diverse cities in the country. The main Oakland campus is home to many of the degree programs, administrative offices, and research facilities. Overall, SMU’s facilities include classroom complexes, student recreation areas, a comprehensive health sciences library, computer learning laboratories, a [Center for Innovation and Excellence in Learning](https://www.samuelmerritt.edu/center-innovation-and-excellence-learning) (CIEL), the [Center for Community Engagement](https://www.samuelmerritt.edu/discover/mission-and-values/community-outreach) (CCE) launched in the summer of 2021, and specialized laboratories for gross anatomy (human cadaver laboratory), human performance, physical therapy, splinting/orthotics, nursing skills, human simulation and the [Motion Analysis Research Center](https://www.samuelmerritt.edu/marc) (MARC), a high-tech facility offering immersive and dynamic learning experiences for students in the physical therapy, occupational therapy, podiatric medicine, physician assistant, and nursing programs. The Oakland campus features the [Health Sciences Simulation Center](https://www.samuelmerritt.edu/health-sciences-simulation-center) (HSSC) and simulation facilities are available at the other campuses as well. Students gain professional clinical experiences in over 1,400 healthcare facilities. (CFR 3.5)

Samuel Merritt University has additional campus locations in Sacramento and San Mateo. The newest Fresno campus opened in December 2019 and 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. Future programs will be added in alignment with institutional priorities, the market need for the programs, and the Academic Master Plan. (CFR 3.5, 4.6, 4.7)

**Presidential Leadership**

In 2018, Sharon Clark Diaz retired from SMU after serving as the institution’s first president from 1982 to 2018. After a national search, [Dr. Ching-Hua Wang](https://www.samuelmerritt.edu/president-ching-hua-wang) became SMU’s second president in November 2018. Following her appointment, President Wang identified four priorities for the SMU campus community at a January 2019 town hall: 1) cultural change, 2) student success, 3) diversity and inclusion, and 4) the Fresno campus opening and planning for a new Oakland campus. The four priorities were refined a year later: 1) establish a new SMU culture, 2) ensure student success, 3) promote diversity and inclusion, and 4) update the university strategic plan.

To increase transparency and realign administrative roles, President Wang restructured the former 9-member president’s council, a purely advisory body, to a 6-member cabinet with decision making responsibility, due in part to several planned retirements and the reorganization of several positions. In addition, the University Planning and Advisory Committee was reconstituted as the [University Administrative Council](https://www.samuelmerritt.edu/academic-affairs/faculty-resources-and-support) (UAC), to include faculty, staff, and student representatives nominated by their respective Faculty Organization, Staff Council, and Student Body Association. This council embodies shared governance, ensures campus-wide communication, and seeks consultation from the campus community for significant university initiatives. (CFRs 3.6, 3.7, 3.10)

**Program Accreditation**

Samuel Merritt University has a strong history of successful [program accreditations](https://www.samuelmerritt.edu/academic-affairs/accreditation). On those rare occasions when opportunities for improvement are identified, SMU works swiftly and closely with the accrediting organization to address areas of concern. Our most recent program accreditation reaffirmation was for the Nurse Anesthetist program, in which they achieved a 100% rate of “In Compliance” with their accrediting standards. (CFRs 2.1, 2.2, 2.7, 4.1, 4.3)

**Response to Previous Commission Actions**

Samuel Merritt University achieved reaffirmation of WSCUC (WASC Senior College and University Commission) accreditation for the maximum interval of ten years due to a comprehensive and collaborative effort on our Thematic Pathway for Student Success (TPR). We were asked to provide an Interim Report to WSCUC at the five-year mark. This report focuses only on the seven recommendations resulting from the reaffirmation visit in 2020 and the disaffiliation from Sutter Health final approval visit in July of 2023. These are the seven recommendations received by Samuel Merritt University:

*From the reaffirmation of accreditation-*

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. (CFR 1.4, 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. (CFR 4.2, 4.3)
3. Foster shared governance based on cultural changes that extend throughout the university. (CFR 1.4, 3.6, 3.10)
4. Develop integrative systems and processes that facilitate collaboration across academic, co-curricular, administrative, and organizational lines. (CFR 3.7, 4.2, 4.3)

*From the disaffiliation visit-*

1. Provide regular communication opportunities for the campus community to arrive at a shared understanding of the new processes and expectations inherent in being an independent institution poised for growth. (CFR 3.7)
2. Evaluate and address needs for instructional facilities in light of new program development and possible changes to the schedule for completing the new Health Sciences building anticipated for late 2025. (CFR 3.4, 3.5)
3. Complete clinical placement agreements with health care providers commensurate with SMU’s current and projected program needs. (CFR 2.11, 2.13)

SMUs collective responsibility is to document for our peer reviewers the progress we have made in these areas over the past 4-5 years. We will provide both a written narrative (telling the story) and associated exhibits, documents, and other evidence (showing the progress) for each item above.

WSCUC Interim Report 2025 – Timeline

* Building the Project February-March, 2024
* Launching the Teams April-May, 2024
* Team Activities (collecting evidence, drafting sections) June-December, 2024
* First Edit December 16-20, 2024
* Public Review Period January 1-17, 2025
* Final Edit January 20-24, 2025
* Submission of WSCUC Interim Report January 27, 2025

In the spirit of widespread inclusion and broad excellence, the following individuals have consented to lead the various teams:

**Team 1:** Implement DEI&B Plan Vivie Nguyen

**Team 2:** Centralized Assessment Leslie Wasson

**Team 3**: Shared Governance Carl Garrubba

**Team 4**: Horizontal Collaboration Andrew Castro

**Team 5:** Disaffiliation Communication & Change Management Leslie Wasson

**Team 6:** Instructional Facility Needs Assessment Jeanette Wong

**Team 7**: Clinical Placement Sufficiency Heidi Garske

These team leaders reach out to others who have specific knowledge or exhibits that would add to demonstrating and documenting our compliance with the Standards and our ongoing pursuit of improvement so that we can fully highlight the excellence that we create together on behalf of our students and in delivery of our mission.

**Theme 1: Implementing the Strategic Vision for Inclusive Excellence 2025**

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. (CFR 1.4, 3.1)

After an interim period of two years, a full-time Assistant Chief of Diversity, Equity, and Inclusion was hired in June 2023. The role held a dotted line to the president as advocated for by the search committee. This position chairs the DEI Standing Committee, a team of faculty and staff directly appointed by President Wang to oversee the implementation of the Strategic Vision for Diversity, Equity, and Inclusion 2021 (DEI Plan). The Assistant Chief of DEI and DEI Standing Committee spent the summer of 2023 creating DEI Plan Goal Committees of faculty, staff, and students with areas of expertise and interest relevant to the goals laid out by the DEI Plan. In fall 2023, the President’s Cabinet was presented with a mid-year report on the progress the institution and the goal committees have made on advancing the DEI Plan.

In winter of 2023, the Assistant Chief of DEI received a directive from the President and Legal Counsel to revisit the DEI Plan to ensure compliance with the Supreme Court ruling on Affirmative Action in private institutions and reinvigorate the institution's commitment to inclusive excellence. In January 2024, Legal Counsel provided training to the DEI Standing Committee and DEI Plan Goal Committees that laid out legally permissible strategies to progress and achieve the institution’s commitment to equal opportunity and inclusion as intended by the DEI Plan’s goals.

The next year was spent transforming the former 2021 DEI Plan to become The Strategic Vision for Inclusive Excellence 2025 (The Strategic Vision) with notable changes. In order to continue to advance inclusive excellence at SMU in light of the Supreme Court decision, the Assistant Chief of DEI partnered with an independent consultant contracted through the university’s Legal Counsel who worked for over two decades navigating Prop 209 in higher education, which banned affirmative action in the public sector in the State of California. Highlights from the forthcoming Strategic Vision include centering the SMU Mission to “educate students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities”; institutional definitions for Inclusive Excellence that ground The Strategic Vision in the university’s commitment to academic excellence through inclusive practices and values; and, recruitment and selection of faculty and students focused on candidates with the abilities, experiences, and potential for leadership in support of the university mission.

The revised plan has five goals, with the first three prioritizing the student learning experience; faculty recruitment, selection, and retention; and student admission. The first and foremost goal focuses on the student learning experience and is dedicated to, “Enhance excellence through an academic and professional community that promotes the SMU Mission to ‘educate students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities.” The second goal prioritizes the hiring, developing, and promotion of faculty who “demonstrate an understanding of the barriers facing individuals from underserved communities in healthcare and health education and have record of or potential for leadership in teaching, research or practice that supports SMU’s mission.” The third goal conveys a commitment to, “Recruit and admit through individualized assessment a diverse student body with the background experience and potential for leadership in addressing the needs of underserved and vulnerable populations in healthcare.” The Strategic Vision names cultural humility as an avenue in addressing disparities tied to social determinants of health as well as expands upon the importance of a positive campus climate for the retention and success of underrepresented and marginalized groups.

Addressing disparities in graduation rates was a previous goal of the former 2021 DEI plan. Upon data analysis in 2024, there were no significant disparities in graduation rates by racial/ethnic demographic groups across all programs. The university will continue to track graduation rates and address any disparities should they arise. Addressing known racial/ethnic disparities in first-time licensure and exam pass rates is a priority area with the new plan. The transformed Strategic Vision for Inclusive Excellence 2025 is set to be approved by the Board of Regents in December 2024.

The independent consultant wrote memorandums for Admission and Financial Aid regarding student selection and gift agreements and scholarships, respectively, that guide university staff to utilize language that is both inclusive and legally permissible to recruit, retain, and financially support students that reflect the university mission. During the creation process of The Strategic Vision, it was noted by the Assistant Chief of DEI that each academic department and program had an independent process for candidate selection. It was determined that a foundational understanding of individualized assessment across areas would be essential for institution wide comprehension of strategies that center the university mission in recruitment and selection. In Fall 2024, the consultant provided training on inclusive practices and individualized assessments for the Admissions team and leaders in Student Affairs and Academic Affairs who hold influential roles in student and faculty selection and support.

**Faculty Hiring and Recruitment**

The Office of People and Culture formed at Samuel Merritt University in late 2019 which combined the former Office of Diversity and Inclusion and Human Resources. SMU hired a new Chief Human Resources Officer (CHRO) and Chief Diversity Officer in Spring 2023. Shortly after, a new Human Resources Director and Senior Recruitment Manager were hired in Fall 2023. These employees, alongside the aforementioned Assistant Chief of Diversity, Equity, and Inclusion, were all external hires that provided diverse perspectives and professional backgrounds to the university (e.g., healthcare, higher education, professional services, and technology). The collaboration and combination of these positions has resulted in notable efforts to advance inclusion in the workplace.

The Recruitment Mission Statement reads, “At Samuel Merritt University, we believe that a diverse workforce enriches our ability to deliver exceptional care to our patients, drives innovation in research, and reflects the vibrant and often underserved communities we serve. We strive to cultivate an inclusive culture where everyone – from faculty, staff, students to potential applicants - feels respected, valued, and empowered to contribute their unique perspectives. Our current and future initiatives are designed to support our employees’ sense of belonging, and their ability to succeed and thrive. In recruitment alone, we unapologetically continue to develop new ways to prioritize diversity, equity, and inclusion to ensure all of our hiring efforts prioritize equity at all times.” SMU’s future policy statement for hiring will align with the Strategic Vision for Inclusive Excellence’s goal to, “Recruit, hire, develop, retain, and promote faculty and staff with the abilities, experiences, and potential for leadership in support of the university mission to “educate students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities.”

The revised job description policy came into effect in October 2024. The new format stipulates a consistent, cohesive, and concise design and content, with emphasis on intelligible description of responsibilities, clear delineation between minimum and preferred qualifications, as well as a requirement to use inclusive language. In addition to Higher Education job boards, SMU intends to become a member of the following organizations in 2025: the National Black Nurses Association (NBNA), National Association of Hispanic Nurses (NAHN), National Organization of Nurses with Disabilities (NOND), Society of Healthcare Professionals With Disabilities and the Transcultural Nursing Society (TNS), and advertise career opportunities on these respective job boards (where applicable). Recruitment will also manually source candidates who are affiliated with the aforementioned organizations/associations. Since January 2023, SMU has listed pay ranges for all positions to comply with California law, which promotes a fair and equitable pay system. To align pay ranges with the market and ensure equity, the Office of People and Culture initiated a comprehensive review of salary structure for staff and faculty, including adjuncts. The revised ranges will be implemented in 2025, making SMU more competitive and attractive to potential applicants.

In 2024, search committees became a standardized hiring process beginning with high level positions such as the Dean of the College of Health Sciences. Search committees will also be reflective of the diverse community at SMU with evaluators of various backgrounds and levels in the workplace. In September 2024, Recruitment introduced an interview question bank, a resource containing behavioral and hypothetical questions, which can be used to assess a wide variety of soft skills. The interview questions bank is a crucial step towards improving the structure, consistency, and equity of the evaluative process. The resource provides a clear framework for assessing each candidate’s strengths and growth areas as they relate to the position, ultimately leading to more reliable hiring decisions. Interview questions assessing inclusivity will prompt candidates to elaborate on hypothetical scenarios and past experiences where they (for example): witnessed a discriminatory incident in the workplace, utilized inclusive practices for organizational events, and/or recognized times when they may have acted upon their own individual bias. Recruitment will launch a program in 2025 designed to measure the effectiveness of “redacted resumes” (elimination of information about the candidates, such as names, addresses, colleges, graduation dates, personal interests, associations, and affiliations that can lead to bias) practice at SMU. If successful, the program will further foster a culture of objective assessment of candidates’ qualifications, ultimately leading to a more diverse workforce and a better talent match.

The Assistant Chief of Diversity, Equity, and Inclusion and Director of Human Resources co-facilitated training on Inclusive Hiring Practices in 2024 that covered implicit bias. In 2025, Recruitment will provide an extended training to hire managers with an objective to increase awareness and understanding of various biases commonly impacting hiring decisions. Additionally, hiring managers will receive a refresher on recruiting compliance and best practices for facilitating an equitable evaluative process. In January 2024, the Office of People and Culture launched a monthly learning series aimed at enhancing skills and understanding for all managers and supervisors. Topics included team building, inclusive hiring, mentoring underrepresented and marginalized groups in the workplace, retention, staff development, morale building, performance management, and succession planning. These interactive sessions featured both internal experts and external consultants. In 2025, SMU plans to repeat the series with more in-depth content, along with quarterly sessions for all staff.

**Student Support Services**

Student Affairs continues to provide and update resources and services that aid in student well-being and academic success, which ultimately impacts retention. The LGBTQIA+ Working Group began in 2022 as a result of trans student advocacy and is composed of faculty, staff, and students. This group keeps a keen focus on intersections of identity given its diverse representation and understanding of LGBTQIA+ issues that disproportionately impact communities of color (e.g., trans violence). The first student affinity group at SMU, The Black Student Union, began in Summer of 2022.

In 2022, The Student Health and Counseling Center partnered with TimelyCare to deliver telehealth to SMU students. In its first year, 473 students utilized TimelyCare, with 521 students in 2023 and 168 students as of October 2024. Mental health appointments comprised the majority of TimelyCare usage during 2022 (88%), 2023 (87%), and thus far in 2024 (75%). TimelyCare’s website states, “With over 50% of our provider network identifying as people of color, TimelyCare is committed to offering college students, faculty, and staff a provider network that reflects the diversity of the campuses that we serve.” SMU will be renewing a 3-year contract with TimelyCare in 2024 to offer Mental and Medical Telehealth options to all students, through November 2027.

A Disability Resource Coordinator was hired in 2022 to respond to the high-volume need for on-campus, proctored testing (2,223 requests in 2022) and support the Director of the Disability Resource Center (DRC). In 2023 there were 950 scheduled exams and 755 in Spring 2024. Spring 2024 also saw an increase in active students served by the DRC by over 50%, with 100 students actively engaged in DRC services compared to 65 active students in Fall of 2023, and 50 active students in Spring of 2023. Building on the success of the Oakland Food Pantry at the Campus Service Center (CSC), a larger space was identified, and the service moved to a new location in May 2023. The larger space allowed the Food Pantry to carry a more diverse variety of foods, spices, and items. Personal care, hygiene, and cleaning products are now also available at the Food Pantry. Based on student feedback, in the Summer of 2024, Halal items were added to the Food Pantry in San Mateo, and the plan is to include the same for the Oakland and Sacramento campuses. The Student Food Pantry saw 1,887 visits in 2022 which increased to 2,735 in 2023 and 2,805 so far in 2024. In 2023, Student Affairs partnered with infuse to provide online tutoring. In 2024, the tutor training for all SMU tutors was updated by a new Director of Academic Support to reflect pedagogical practices based on equity and inclusion. Tutors learn strategies to empower students and address the actual and perceived power differential in a tutoring session. Tutors also receive training on working with students who are neurodivergent and/or have mental health concerns. Finally, tutors participate in discussions on how lived experiences can impact someone’s experience in higher education (e.g., model minority myth, stereotypes around Ebonics/AAVE, etc.) The overall goal of the tutor training is to understand students as individuals with different identities, levels of prior knowledge, and relationships with learning. This diversity of identity and experience should be understood to support students’ growth and development while being empowered in their academic careers.

Vector Learning Systems for students was adopted in 2023 to provide training for all incoming students to comply with Title IX regulations. By 2025, the goal is to have the Vector Communication for Inclusion training mandatory for graduate students. All Student Affairs staff will engage in ongoing professional development related to implicit bias and enhancing inclusive excellence at SMU. From 2024 onwards, requests for professional development will be evaluated with this goal in mind. All conferences and professional development opportunities (not strictly related to technical or procedural training) should address these important topics or include them in the program's overall goal.

**Theme 2: Centralized Systematic Assessment**

Build a centralized assessment and institutional effectiveness and research structure to systematically collect, disseminate, analyze, and act upon data for student success. (CFR 4.2, 4.3)

Institutional Research and Data Accessibility

The Institutional Research Office at Samuel Merritt University is a highly effective centralized source, repository, and clearinghouse for institutional data in support of [student success](https://www.samuelmerritt.edu/academic-affairs/student-success/student-success-measures) planning and innovation. The Director and staff of two FTE provide a systematic and timely source for consistent and accurate [key performance indicators](https://www.samuelmerritt.edu/evaluations-and-data-collection-cycles) (KPIs) used for a variety of purposes throughout the organization. They also undertake special projects and fulfill *ad hoc* requests.

Assessment and Program Evaluation

One highly effective way to implement, sustain, and promote the pursuit of improvement, innovation and excellence is to unify and centralize the collection, collation, and communication of assessment efforts and exhibits in a cogent yet coherent narrative that expresses the overall state of the organization and helps to lay out a strategic path for future efforts. Despite significant changes in institutional structure and leadership over the past few years, Samuel Merritt University has engaged in an ongoing program of bringing currency to the assessment processes and practices of our academic and co-curricular units. This multi-year initiative was designed and facilitated by the Office of Institutional Effectiveness (1 FTE) but draws on the expertise of individuals and departments across the university.

At the time of our most recent and successful reaffirmation visit in 2020, the assessment functions of the university had been covered by a team of interim leaders, assisted by a cross-functional committee of faculty from various programs. There were no co-curricular units contributing to the institutional assessment process at that time, although we discovered that assessment was happening in individual units. The design and content quality of assessment practice was exemplary, but assessment processes were still largely document-based, labor intensive, and not accessible to the larger university with the storage capabilities at hand.

Peer reviewers on the reaffirmation team made the recommendations that Samuel Merritt University continue the trajectory begun in the TPR (Thematic Pathway Report) to embed assessment throughout academic and cocurricular operations, and to resource the acquisition and implementation of centralized storage and analytic capabilities for assessment, accreditation, and strategic planning.

Three things occurred in the 2020-2021 academic year that accelerated the momentum of change at Samuel Merritt University:

1. A new Director of institutional Effectiveness and ALO started in June of 2020.
2. Samuel Merritt University participated in the inaugural year of the TPR process and earned a full ten-year reaffirmation of accreditation.
3. Samuel Merritt University and Sutter Health disaffiliated and became independent business entities.

Progress on Strategic Implementation of Centralized Assessment

SMU has been doing systematic assessment, analysis, and planning for many years. Earlier efforts were diffuse, locally kept, and quality and comparability varied. New institutional leadership in 2019 and 2020 urged the new Institutional Effectiveness Director, who arrived in June of 2020, to plan for and implement more centralized functions for greater efficiency and stronger institutional level utilization of results.

Centralizing assessment is a bit of a dance. Given the variety of functions and subject areas covered by SMU (Samuel Merritt University), one goal of centralized assessment has been to balance the uniqueness of the “local” assessments of student learning and student success with the ability to aggregate results from multiple areas for dissemination and organizational learning.

People and Paper Processes

Currently, annual assessment is launched early in the summer, with periodic email reminders throughout the year to harvest assessment data as they occur to prevent scrambling and searching later. There is a template for reporting annual assessment findings and providing an assessment plan for the coming year based on those data.

Annual Assessment Reports and Plans are evaluated using a systematic rubric, and program chairs are offered feedback by at least two readers from the Institutional Effectiveness Council (described below in more detail). In the event of conflict between two readers, a third reader is assigned.

Training and Coaching

Annual Assessment Training is offered online and virtually, for both new and experienced practitioners. Individual coaching is also available by appointment. The IE Director speaks at regular meetings and serves on both ongoing and *ad hoc* committees and task forces. A popular set of short monthly Assessment Tips was issued for two years until the university limited bulk email access.

One new method we will implement in the next cycle we learned in a WSCUC online seminar (thank you!). The use of writing prompts to help frame and guide responses to the items in the assessment template will be a nice scaffold for both new and experienced users.

Automation, Access, and Centralization Processes

One key finding of the early listening tour in late 2020 was that there was not a good central repository that would provide shared storage, indexing, analytic tools, and the ability to collaborate using assessment results to drive improvement and reporting. The IE Director convened a task force drawn from across the organization to represent various end users of assessment data at every level and proceeded to examine a range of software packages for the best fit for the institution's needs. After a thorough vetting process using a decision rubric, SMU invested in a subscription to Xitracs (<https://xitracs.com/>). The modular structure of the product met the needs of multiple constituencies and enabled subsequent adjustments as the institutional need profile grew and changed.

The IE Strategic Plan for the effective and timely deployment of Xitracs resources also allocated an existing and previously approved Project Manager role to be shared on a half-time basis (.5/.5 FTE) with the Academic and Instructional Innovation (A&II) team. That position funding has been removed from the IE budget for the past 4 years, despite persistent advocacy on the part of the Director.

A partnership effort is in motion with the already overcommitted IT department to move forward the automation of institutional data into Xitracs as time allows. Almost no automation of data transfer is in place at this time, adding to the labor needed to manage software processes.

Barriers to Full Implementation

Xitracs has capabilities to revolutionize how SMU does strategic planning, assessment, program review, and accreditation planning. The initial contract for three years, from 2021 to 2024, demonstrated success with voluntary pilot departments. However, the implementation and integration work will require some initial investment beyond the cost of the subscription, and regular data management and user training thereafter. We continue to recommend hiring the Project Manager role to add some much-needed additional “brains and hands” to the achievement of these core functions.

Multiple changes at the leadership level and a generational transition in faculty and staff have added to the barriers of implementing this multi-year strategic project. Also, with the sudden opportunity for disaffiliation and the much-needed new building project, institutional resources have been reprioritized. No institution ever has enough resources for all the important things that could be done.

Recommended Next Steps

Ongoing support for successful assessment is a strong goal for SMU. An investment in the implementation and systematic operation of the software suite already obtained would allow for the completion of the strategic goals identified in the IE Strategic Plan and would allow the institution to move forward with greater efficiency and effectiveness toward meeting its quality goals of the Thematic Pathway of Student Success for the future.

**Theme 3: Foster Shared Governance**

Foster shared governance based on cultural changes that extend throughout the university. (CFR 1.4, 3.6, 3.10)

For many decades, SMU has fostered a robust model of shared governance through the Faculty Organization (FO) promoting faculty participation in matters of university governance. Through this process, the FO fosters shared authority, accountability, and consensual decision-making with the university administration. The FO is led by a President, President-Elect, Past-President, Vice President, Vice President-Elect, and Secretary who also functions as the Treasurer.

The FO consists of eight committees, Executive, Admissions and Academic, Faculty Affairs, Faculty Curriculum, Faculty Development, Faculty Rank and Promotion, Research, and University Grievance. Committee membership is guided by charter, and faculty members are recommended by the FO.

The **Executive Committee** consists of the leaders noted above and the chairs of all committees of the FO. This committee solicits nominations for membership on all committees and reviews and recommends approval or changes to new and existing academic, academic integrity, admission, and readmission policies. In addition, this committee provides advice and consultation regarding the University’s long-range and strategic planning related to academic programs and policies.

The **Admission and Academic Policy Committee (AAPC)** is responsible for academic and educational policies, policies regarding academic integrity and professionalism, and admissions policies. The Committee's roles include leadership, consultation, oversight, approval, advisement, and development related to academic policies, academic integrity, and admissions. New policy, or changes to existing policy, in any of these areas, require submission to the AAPC for review and approval. Ex Officio members include the Academic Vice-president and Provost, Director of Admissions, Department or Program Chairs, Director of Institutional Research and Evaluation, Registrar, Vice-president of Student Affairs and Academic Support, Assistant Vice-president of Enrollment and Student Services, and the Student Body Association President. The Committee reports its actions related to policy approvals, policy development and submission, oversight, and advisement activities to the Faculty Organization Executive Committee. The Committee also reports back to policy originators the status of policy approval at each step of the approval process (at the level of AAPC, Executive Committee, and Academic Vice President's Office).

The **Faculty Affairs Committee** promotes academic and scholarly development, academic freedom, and the development and/or review of fair, impartial policies and procedures related to faculty rights, privileges, and standards. The Faculty Affairs Committee reports all recommendations and actions to the Faculty Organization Executive Committee. Ex-officio members include the Vice Provost and department chairs.

The **University Curriculum Committee** is responsible for maintaining the integrity and cohesiveness of the University's curricula. The Committee provides evaluation, leadership, consultation, oversight, approval, advisement, and development relative to the curricula of the Programs and Schools within the University. Ex-Officio members include the Academic Vice-president and Provost, the Director of Institutional Effectiveness, Department and Program Chairs, Registrar, and representatives from both the library and Academic and Disability Support Service. The Committee informs the Faculty Organization and Academic Vice-president and Provost of all actions and decisions.

The **Faculty Development Committee** assumes the leadership for faculty education development and shares responsibility with Academic Affairs in providing associated financial programs and incentives. The committee makes recommendations to the Faculty Organization Executive Committee regarding a budget for faculty development and manages that budget with the Vice-President of Academic Affairs and Provost. Ex-Officio members include the Vice Provost.

The **Faculty Rank and Promotion Committee** facilitates the addition and retention of qualified members of the faculty body as a whole. The Committee makes recommendations to the President on promotions and sabbatical leaves. The Committee consists of a minimum of seven members with one member selected by each department/School and the remaining members elected from the Faculty Organization at large. The Committee forwards rank and promotion recommendations to the President and informs the Academic Vice President and Provost of those recommendations.

The **Research Committee** serves as a venue for an interface between faculty conducting research and the Office of Academic Affairs to ensure that appropriate physical, human, and fiscal resources are made available. In addition, the committee will provide individual consultation to faculty on research projects. The Committee provides consultation to the Academic Vice President on issues related to achieving and maintaining a refined and robust doctoral culture for the University, reviews applications for faculty research grant awards, makes recommendations for the distribution of available funds, and advises the Academic Vice President on annual budgetary expenditures for research support, facilities, and equipment acquisition. The Chair reports Committee actions to the Faculty Organization Executive Committee and Academic Vice President. Ex-Officio members include the Vice Provost.

The **University Grievance Committee** has the responsibility for hearing all grievances that are received by the Office of Academic Affairs or the Office of Enrollment and Student Services. This Committee also has responsibility for oversight of the University Dispute and Grievance Policy. In cooperation with the Vice-presidents of Academic Affairs and of Enrollment and Student Services, the Committee shall develop and promote processes used for considering grievances and make recommendations about those processes. The Committee informs the Vice-president of the appropriate Division of its decisions and recommends sanctions as described in the University Dispute and Grievance Policy.

These faculty-led committees together with the university administration, share in the oversight, advisement, and policy development and change for appropriate and vigorous shared governance for the university. The university also utilizes occasional ad hoc committees with subject matter expertise and representation to address specific tasks and then dissolve, such as the committee that explored the viability of a potential Ed.D. program in 2021 and 2022.

**Theme 4: Cross-Functional Collaboration**

Develop integrative systems and processes that facilitate collaboration across academic, co-curricular, administrative, and organizational lines. (CFR 3.7, 4.2, 4.3)

**Introduction**

Samuel Merritt University (SMU) utilizes integrative systems and processes implemented throughout the University to promote constructive collaboration across academic, co-curricular, administrative, and organizational domains. Central to this collaborative ethos is the strategic leveraging of technology to bridge geographical distances and unite the SMU community across its four campuses. These collaborative efforts, interwoven with technological innovation, are instrumental in realizing SMU's mission to educate highly skilled and compassionate healthcare professionals prepared to excel in a dynamic healthcare landscape.

**Leadership and Shared Governance**

SMU's deeply ingrained culture of collaboration is nurtured and guided by its leadership. President Ching-Hua Wang, in partnership with the President's Cabinet, champions shared governance and collaborative decision-making across the university.

The President's Cabinet, composed of the senior university leaders of each division, provides strategic guidance and oversight, ensuring alignment between the university's vision, operational plans, and shared governance processes. This leadership team actively engages with the University Administrative Council (UAC), a representative body for faculty, staff, students, and administrators, to foster a collaborative approach to university governance.

The UAC plays a pivotal role in developing, monitoring, and implementing the University Strategic Plan, ensuring broad input and collaboration in academic decisions, and fostering a culture of open communication and shared responsibility. This collaborative partnership between the President's Cabinet and the UAC strengthens SMU's commitment to inclusive and transparent decision-making, ensuring that diverse perspectives contribute to shaping the university's direction.

The President’s Cabinet also drives the content and strategic direction of monthly managers and supervisors’ meetings, which provides a structured platform for leadership across different departments and campuses to connect, share information, and discuss challenges. This practice fosters open communication and transparency, ensuring everyone is on the same page and working towards common goals.

By bringing managers and supervisors together, these meetings help ensure that departmental goals and objectives are aligned with the university's overall strategic vision. This reduces the potential for siloed thinking and promotes a sense of shared purpose across the institution.

**Standing and Ad-Hoc Cross-Functional Committees**

Standing committees provide a structure for ongoing, focused attention to critical and recurring institutional issues. By establishing clear mandates and engaging individuals with relevant expertise, standing committees ensure that these issues are addressed consistently and effectively over time. This fosters institutional stability, continuity, and informed decision-making.

SMU Utilizes a number of standing committees to achieve horizontal collaboration. A few examples are:

1. SMU embraces a culture of continuous improvement, driven by ongoing assessment and collaborative reflection. The Institutional Effectiveness Council (IEC) plays a leading role in this process, guiding the design and implementation of effective assessment systems to enhance student learning and institutional performance. The IEC's diverse membership ensures a comprehensive and inclusive approach to assessment, incorporating perspectives from academic deans, enrollment and student services, and the student body association.
2. Crisis Response Team (CRT) comprised of individuals from various departments, the CRT ensures a comprehensive and collaborative approach to crisis management, safeguarding the well-being of the entire university community.
3. The Health and Safety Committee (HSC) further reinforces SMU's commitment to providing a secure and supportive environment for all. The committee proactively promotes a culture of safety and well-being, ensuring compliance with health and safety protocols and fostering a sense of shared responsibility.
4. The Information Technology Advisory Group (ITAG) serves as a vital bridge between technological advancements and the university's mission and goals. Comprised of a diverse group of faculty, students, and staff, ITAG ensures that technology initiatives are inclusive, responsive, and aligned with the evolving needs of the SMU community.
5. The Student Information Systems Leadership group has representation from various units to ensure that student data is handled responsibly, efficiently and effectively across different departments and operations that utilize this information.

SMU also leverages the potential of cross-functional ad hoc committees to effectively reach focused targets within a specific time frame. Ad hoc committees foster a collaborative environment where members work together to achieve shared goals. Examples of recent ad-hoc committees are:

1. The launch of SMU's new campus in Fresno involved close coordination between various departments, including Admissions, Academics and Student Affairs, Facilities, and Advancement to ensure a successful program launch. As a result, two ABSN cohorts in the Fall semester of 2024 successfully started, and contributed towards SMU’s goals for institutional growth and advancement.
2. The Occupational Therapy (OT) Program underwent a review process in Q3 of 2023, which involved the Budget and Academic subcommittees, representing different functional areas, working together to evaluate the program's effectiveness and make recommendations for improvement. These subcommittees utilized data and evidence, such as enrollment trends, financial performance, and student outcomes, to inform their decisions and recommendations. Through a collaborative SWOT analysis, they identify the program's strengths, weaknesses, opportunities, and threats, gaining a holistic understanding of its current state and future potential.
3. The relocation of the university campus to the City Center Campus (CCC) stands as a testament to this collaborative spirit. Formed in Q4 of 2023, the CCC Move Committee, along with its dedicated subcommittees, orchestrated a seamless transition for students, faculty, and staff, demonstrating exceptional cross-departmental coordination and communication.
4. Various search committees for high-profile staff and faculty positions incorporated representatives across various departments. Examples from recent searches are:
	1. Dean of Admissions – involved Deans from all academic programs, a representative from the President’s Cabinet and the Dean of Students
	2. Director of the Veterans Success Center – representatives from each campus, and a representative from the Registrar’s Office
	3. Dean of the College of Health Sciences – representatives from all Health Sciences Program, along with a representative from Student Affairs, and a graduate.
	4. Assistant Director of Financial Aid – representatives from the Financial Aid Office, the Finance Department, Admissions and Student Affairs

SMU committees are powerful tools for addressing specific issues, driving innovation, and promoting organizational effectiveness.

**Academic and Student Affairs: An Integrated Approach to Student Success**

Recognizing the interconnectedness of Academic and Student affairs, SMU has strategically unified these vital areas under the leadership of a single Vice President/Provost Brian Clocksin. This organizational structure fosters seamless integration of academic support, co-curricular engagement, and student services, creating a holistic and nurturing environment for students to thrive.

The Provost's Leadership Team (PLT) and the Student and Academic Affairs Leadership Team (SAALT) were formed to serve as collaborative bodies that ensure alignment between academic initiatives, student support services, program opportunities, institutional assessment, and divisional priorities. These teams engage in regular meetings and are committed to open dialogue to facilitate effective coordination and decision-making.

In addition to the PLT and the SAALT, teams comprised of various offices within the Academic and Student Affairs Divisions were formed to meet specific goals with a focus on Academic and Student Development. The Digital Content Accessibility Initiative is one example of this commitment, with the Office of Academic Affairs, Disability Resource Center, and Academic & Instructional Innovation partnering to enhance the accessibility of course content. This initiative not only ensures inclusivity for students with disabilities but also aligns with SMU's broader dedication to student success, as evidenced by the comprehensive measures outlined in the university's Student Success Measures.

In today's interconnected healthcare landscape, interprofessional education (IPE) is paramount. SMU's commitment to IPE is woven into the fabric of its curriculum and co-curricular activities. SMU's IPE program, with its innovative passport model, provides students with diverse opportunities to engage in interprofessional learning. The IPE Passport, with its Preparatory, Foundational, and Applied levels, guides students through a progressive journey of interprofessional collaboration. The recent revival of the IPE Passport and its integration into the Canvas LMS have further enhanced its accessibility and impact. The IPE Steering Committee, a diverse body representing various disciplines and stakeholders, provides collaborative leadership for the IPE program. With a dedicated budget and faculty workload hours allocated to IPE, SMU demonstrates its institutional commitment to fostering collaborative practice in healthcare.

Further enhancing this collaborative environment is SMU's innovative Caucus Model. Introduced in 2024 by the Provost, this model brings together diverse voices from across the university from all divisions to engage in discussion and collaborative decision-making to address specific issues identified by the provost. Focused caucuses on 1) programming, 2) impact, and 3 ethos, cultivate a rich exchange of ideas and perspectives, leading to consensus-building and strategic prioritization.

**Interprofessional Education at Samuel Merritt University**

According to the World Health Organization (WHO), interprofessional education is an experience that “occurs when students from two or more professions learn about, from, and with each other” (WHO, 2010). SMU has offered intentional, formalized interprofessional practice and education (IPE) opportunities to its students for more than ten years. Shortly after formally embracing IPE, SMU also adopted a “passport” model for organizing and promoting IPE opportunities to its students. The Passport allows students to engage with IPE to the extent they are able to, depending on the schedule and demands of their respective academic program. While many IPE experiences/activities are co-curricular, some have been offered as no-cost, credit-bearing elective courses. While the SMU IPE Passport was somewhat dormant during the pandemic, it was recently revived and migrated from its original “home” on the SMU Pulse platform (previously used to promote extracurricular and co-curricular activities for students) to an open-enrollment course in SMU’s Canvas LMS. The SMU IPE Passport is organized into three levels:

* Level 1—Preparatory​: Activities completed online, asynchronously (within the IPE Passport Canvas course) which provide learners with core foundational knowledge about IPE.
* Level 2—Foundational: Level 2 of the Passport is currently comprised of TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety) training, which is offered to all SMU students prior to graduation.
* Level 3—Applied: Level 3 activities are interprofessional, synchronous activities. Students choose from a menu of one-time and longitudinal options offered over each academic year. (A few exemplary past and current Level 3 experiences include the Interprofessional Student Hotspotting/Complex Care elective and the IPE Patient Safety & Communication Simulations series.)

The IPE Passport was reinvigorated at the beginning of the 2024-2025 academic year at the direction of Provost Clocksin, with leadership from the recently re-formed IPE Steering Committee. The IPE Steering Committee is co-chaired by the Assistant Provost for Strategy and one of the senior Simulation Educators in the Health Sciences Simulation Center. It is comprised of representatives from all of SMU’s academic disciplines, as well as a handful of faculty from IPE partner institutions. Now that the IPE Passport has been re-launched and made more robust, Dr. Clocksin has encouraged the committee to focus its work on developing proposals and strategies to integrate/embed IPE into the programmatic curricula across the University which address and overcome the scheduling challenges that come along with SMU’s multiple academic calendars. SMU’s IPE program has its own modest, but dedicated budget, including faculty workload hours. Individual IPE activities are supported by faculty as part of their service role to the university or they can opt to be compensated for overload hours, outside their regular instructional or administrative assignments.

**Technology and Innovation: Weaving Connections Across Campuses**

SMU has implemented a suite of technology tools that facilitate daily communication and collaboration across its campuses. This comprehensive approach to technology underscores SMU's commitment to providing a connected and engaged learning and working environment. By bridging geographical barriers and fostering a sense of community and shared purpose, technology serves as a vital enabler of SMU's collaborative culture. Microsoft Teams serves as a central hub for real-time communication, file sharing, and collaborative project management. Zoom facilitates virtual meetings, lectures, and workshops, enabling synchronous interaction and knowledge sharing across campuses. Advanced teleconference systems from Cisco enhance the quality and accessibility of virtual meetings, ensuring clear communication and effective participation for all attendees. Workday was introduced in 2022 to streamline business operations and allow all units to have a central hub for finance, timekeeping, HR functions.

This investment in technology underscores SMU's commitment to providing a connected and engaged learning and working environment. By bridging geographical barriers, technology fosters a sense of community and shared purpose across all SMU campuses.

**Conclusion**

Samuel Merritt University exemplifies a model of collaborative excellence in higher education. Through a diverse array of integrative systems and processes, accompanied by strategic technological integration, SMU has cultivated a dynamic ecosystem where collaboration thrives across all facets of the institution. This commitment to collaboration, woven into the very fabric of SMU's mission and values, propels the university's pursuit of academic distinction, student success, and institutional effectiveness.

SMU's collaborative spirit is evident in its unified approach to academic and student affairs, robust administrative and organizational framework, strategic embrace of technology, and dedication to ongoing assessment and continuous improvement. These collaborative efforts have yielded impressive results, including high first-time licensure pass rates, strong graduation rates, and excellent employment outcomes for SMU graduates.

**Theme 5: Disaffiliation and Change**

Provide regular communication opportunities for the campus community to arrive at a shared understanding of the new processes and expectations inherent in being an independent institution poised for growth. (CFR 3.7)

After the highly successful WSCUC reaffirmation visit in Fall of 2020, our business partner Sutter Health suddenly granted a request for legal independence made by Samuel Merritt University several times over the previous decade. This request followed recommendations made by more than one team of WSCUC peer reviewers and reflected the divergence over time in the missions of the two organizations. While relations continued to be quite amicable with numerous cooperative initiatives, it became more apparent that the flexibility of operating as separate legal and business entities was increasingly a positive opportunity for both institutions.

Initial feasibility discussions were held under a non-disclosure agreement from XXXXX TO XXXXXX. News of the potential disaffiliation was released to internal and external stakeholders more broadly in April of XXXX. A detailed transition plan was signed by both organizations and unanimously approved by the governing boards. SMU leadership scheduled recurring town halls and informational presentations to share progress and address questions. The communication stream was effective enough that there were actually a few complaints that it was too much information too often.

Since most space, service, and operating costs were already being paid by SMU, financial interdependencies were not a big tangle. The more complex part of the disaffiliation process for these two organizations was to disengage the many shared services. The SMU transition plan called for rolling services off gradually to minimize disruption for stakeholders. Any service that could stay as it was (security, parking) converted to or remained a paid agreement between SMU and Sutter Health. A few services (payroll, insurance) could be converted to new vendors without much difficulty. A few other services, such as our enterprise data system, required conversion to a much-improved new product (Workday) after the end of an existing contract. Doing conversions gradually in this fashion eased both the change process effects on users and developers and made cash flow easier to manage.

There was one change to office spaces, but it was due to Sutter Health building renovations and not a result of the disaffiliation. A wing of nursing faculty was moved up one floor to the equivalent spaces. Although no one likes to move their office, post-move feedback was rather positive, as it turned out to be a better location.

At the request of the reviewers, SMU obtained written leases for the office, classroom, and lab spaces that had been in use for the past decades under mutual agreement.

Credit As Due

WSCUC has been an incredible partner. Despite little prior experience with disaffiliations and a very compressed timeline in which agreements needed to be approved and signed, both WSCUC staff and peer review teams went the extra mile to make sure everything met or exceeded WSCUC Standards at a level of quality we could all appreciate. SMU may have set a speed record for such a large transaction, but it went remarkably smoothly with all parties contributing.

Later, as Sutter began planning for its required earthquake retrofitting of the buildings in which SMU traditionally operated, SMU began simultaneously to plan for a spec-built campus in downtown Oakland. In anticipation of the complex and lengthy process, the initial substantive change application for the new campus was filed with WSCUC in August of 2023, and has been supplemented with periodic updates. The project is on time and on budget, and the anticipated move dates are either in late 2025 or early 2026. There is a comprehensive project web site with a live video stream here.

Culture Work

Since employees and students were kept well-informed throughout the process, and so few services were affected by the legal change of ownership, there were few cultural effects noted in the short term. Over time, the university went forward with converting to new vendors, improving existing service agreements, and implementing a strategic plan for refocusing both leadership and workforce to reflect legal and functional independence into our future. SMU also used the implementation of a new Workday system to make budgeting more transparent and added a formal policy site to aggregate institutional policies and procedures.

SMU also developed and received approval from WSCUC for several new program designs, including Kinesiology, Public Health, Nursing Leadership (MSN-CLE), and Social Work. Disaffiliating from Sutter Health has liberated us to pursue innovations in keeping with our mission that were less feasible under the partnership. Given the significant independence with which Samuel Merritt University had been operating even under the agreement, the Pathway to Independence we have been walking has been smooth, and it has been taking us in the direction of better fulfilling our mission and vision.

**Theme 6: Sufficiency of Instructional and Educational Support Spaces**

Evaluate and address needs for instructional facilities in light of new program development and possible changes to the schedule for completing the new Health Sciences building anticipated for late 2025. (CFR 3.4, 3.5)

Samuel Merritt University currently inventories & allocates classrooms and other instructional spaces via reservation capabilities of EAB software used to manage the scheduling of the simulation spaces in the Health Sciences Simulation Center (HSSC). Previous WSCUC reviewers were concerned that pressures from the university’s disaffiliation from Sutter Health, legally mandated seismic retrofitting for several of Sutter’s buildings, and the university building a new purpose-designed campus building in downtown Oakland on a multi-year timeline carried risk for the smooth provision of instructional space until we can make our successful transition to the new downtown Oakland campus location (targeted for January 2026).

As one feature of the disaffiliation from Sutter Health, SMU obtained written leases for the instructional and administrative spaces we use at the Oakland location. This was the first time we had legal paperwork delineating our space needs, as previously we had simply negotiated these needs verbally with Sutter’s facilities office. The new leases formalized these good faith arrangements to provide an extra layer of protection for SMU as we transitioned to independence.

Existing Spaces for Instruction

Samuel Merritt University’s Oakland campus classrooms, lab space, and meeting rooms are on the Alta Bates Summit Medical Center of Sutter Health. The campus occupies three buildings, and all spaces are available to schedule in advance.

The following is a description of the existing space on the Oakland campus. In addition, there is more detail about the space on the [website](https://www.samuelmerritt.edu/catalog/university-facilities) and Attachment X describes how the space can be configured and how many people each space can accommodate.

**Health Education Center (HEC)** – the HEC is a 44,000-square-foot building that includes classrooms, large meeting spaces, event spaces and the library.

* Four classrooms and conference rooms equipped with audiovisual & videoconferencing capabilities.

|  |  |
| --- | --- |
| **Room** | **Capacity** |
| 103 | 54 |
| 105 | 54 |
| 311 | 70 |
| 312 | 70 |
| Computer Room | 32 |
| 3 Conf Rooms  | 14 – 16 each |
| 10 Library rooms | 4 – 10 each |

* **John A. Graziano Memorial Library**
* **Motion Analysis Research Center (MARC) – the 2,000 square foot facility serves as a teaching center on motion analysis for faculty and students from the University's California School of Podiatric Medicine (CSPM), Department of Occupational Therapy, Department of Physical Therapy, and College of Nursing.**
* Bechtel Room, a 300-seat large multipurpose room with audiovisual/videoconferencing capabilities. This space is available for large university events and classes.
* Fontaine Auditorium can accommodate 250 with audiovisual capability for multimedia presentations.
* Informal study space
* Student lounge and fitness room

**Peralta Pavilion** - Most of the University’s administrative offices are on the second floor of Peralta Pavilion. The third and fourth floors have faculty and administrative offices for the Departments of Physical Therapy, Occupational Therapy, and the College of Nursing. The Facilities Department and faculty offices for Basic Sciences are on the ground floor.

* The Peralta Pavilions lower level and ground floor also include classroom and laboratory facilities to support academic programs.

|  |  |
| --- | --- |
| **Room** | **Capacity** |
| Computer Lab | 50 |
| L830 | 40 |
| L835 | 45 |
| L836 | 45 |

* Student Lounge which includes microwave, refrigerator, vending machines, and four computers for research and study use
* Health Sciences Simulation Center – a 10,000 square foot facility providing skills labs, exam rooms, and simulation suites.
* **Human Occupation Laboratory - supports a range of activities, from splinting to facilitating small crafts for use as hand tools and applying adaptive equipment. This is a multipurpose laboratory where various projects and group activities can be conducted.**
* **Living Skills Laboratory - a simulated environment equipped with supportive, adaptive, and assistive devices for purposeful activities in the home, workplace, and for leisure pursuits.**
* **Splinting and Orthotics Laboratory**
* **Physical Therapy Laboratory - 2000 square feet and** **1400 square feet in size. They are equipped with high-low therapy tables, rolling treatment stools, metal foot stools, mat tables, parallel bars, physical agent and electrotherapeutic machines, and other therapeutic exercise equipment. These labs are designed for instruction in physical therapy patient evaluation and management.**

**Peralta Medical Office Building (3100 Telegraph)** - This is the University’s front door for applicants and students. This building includes the Offices of Admission, Student Services, Disability Resource Center, Student Health & Counseling, Financial Aid, Registrar, Campus Service Center, Student Accounts, Media Services, Veterans’ Services, and Media Services. In addition, the 3rd and 4th floor include classrooms for students.

|  |  |
| --- | --- |
| **Room** | **Capacity** |
| 360 | 60 |
| 370 | 60 |
| 380 | 60 |
| 4001 | 60 |
| 4002 | 70 |
| 4003 | 50 |
| 4004 | 50 |
| 4005 | 70 |
| 4006 | 60 |

Sutter Health has been a generous partner in supporting space conversions for labs and other dedicated functions. While the leased spaces have some limits, SMU has not encountered any loss of space beyond what we have amicably negotiated to support required building repairs and retrofitting. During the swift move to online during the pandemic there was significant demand for the Simulation Center Facilities, which we mitigated by broadening the days and times for which it could be reserved. At no point has any class that needed a space not been afforded one.

What people, groups, and programs do now to reserve spaces-

Once the academic class schedule has been finalized, each department works with the HSSC to detail space needs for their desired class days and times. Enrollment data trends and enrollment caps are checked to predict the likely number of seats needed for each section.

Specialized equipment needs or other “must-haves” are identified and matched to resources.

(<https://schedule.samuelmerritt.edu/EMSWebApp/Default.aspx>)

What programs will do in new building-

 Owned space

While it is common for programs on the existing campus to control their own spaces, there are also a few “hotel” work and meeting spaces that can be reserved on shorter notice for ad hoc events, visitors, or hybrid workers.

 Flex space

The new building to which SMU will be moving in late 2025 and early 2026 is a student-oriented design with significant sustainability and flexibility for educational use and community participation. The plan has a much broader space planning model with much greater flexibility to meet the needs of on-site programming. While some effort will be made to maintain proximity as a desirable feature of space assignments, it will be less frequent for individual spaces to be dedicated to singular uses. We recognize that moving from an owned-space to a shared-space model can be a significant cultural change for an organization; however, the overall design of the new building is fully committed to serving the needs of the students.

Changing the method by which we allocate spaces may require some adjustment of expectations about space use and local control. However, gains in usefulness may prove persuasive in practice. The new building is on time and on budget at just over 60% completion.

Screenshots...?

<https://smuconnect.sharepoint.com/sites/CityCenterCampus/SitePages/City-Center-Campus-Floor-Plans.aspx>

Beginning in January of 2025, SMU will convert its existing EMS system for reserving classroom spaces to a new tool, Live25. This tool is purpose-built for space reservations and will facilitate an even more efficient allocation of spaces for classes, hoteling offices, meetings, and other gathering purposes. The new system is managed by the SMU Facilities Manager rather than via the Simulation Center staff as in the past. Live25 has abundant support resources, including help menus, self-guided training, and online seminar training. The debut a year before the move to our new building will allow for implementation, testing, and refinement prior to the change in spaces.

The Facilities Manager has offered the following priorities for space assignment, to be codified in policy and procedure with the implementation of the new tool:

“When assigning space for courses, I create a scenario that prioritizes room selection in the following order:

1) enrollment size,

2) course length,

3) required room features, and

4) preferred buildings.

This approach ensures that larger classrooms are assigned to larger cohorts first. After that, the remaining rooms are allocated based on each cohort’s specific preference as indicated in their notes. Once I have completed scheduling the rooms, I reach out to the administrators and provide each cohort with a draft of their room assignments for review. This allows them to check the allocations before I publish the final schedule for the term.”

**Chapter 7: Clinical Education Site Sufficiency**

Complete clinical placement agreements with health care providers commensurate with SMU’s current and projected program needs. (CFR 2.11, 2.13)

**Description of the Issue**

In 2020, during the height of the COVID-19 pandemic, the institution faced significant challenges in clinical education as many clinical sites were closed or limited in their capacity to host students. This was primarily due to shortages of protective equipment and personnel and the difficulty of managing student learning amidst overwhelming patient loads. These disruptions severely impacted programs that rely on clinical placements to meet graduation requirements, leading to delays in student progress, extended graduation timelines, and reducing capacity to admit new cohorts. However, the Commission raised concerns about insufficient local clinical placements to accommodate the growing number of SMU students, highlighting the potential threat to on-time graduation and the ability to maintain adequate progression through the programs. This situation underscored the need for expanded clinical placement opportunities to ensure the continued success of the university and timely graduation of students in clinical disciplines.

As we move forward post-pandemic, we are navigating a distinct set of challenges compared to those faced during the period when the commission raised its concerns. This section of the report will outline the strategies and solutions we implemented to address the issues of that time, while also providing an overview of our current situation, including both our successes and ongoing challenges.

**Response to Issue Identified by the Commission and Actions Taken**

***Examples in the College of Health Sciences (CoHS)***

The university's response to the challenges posed by the COVID-19 pandemic included innovative solutions to ensure continuity of clinical education while adhering to public health guidelines and accreditation standards. When permitted by program accreditors, clinical experiences were supplemented with simulation-based learning. For instance, in the MOT/DOT program, the Level 1 fieldwork experience, which was traditionally a 5-day in-person clinical rotation, was adapted to include a simulation component within the guidelines of both regional and program accreditors. This modification reduced the number of on-site clinic days per student, enabling more students to be accommodated with fewer clinical sites.

Additionally, the university took proactive steps to secure clinical placements by establishing new contracts with organizations that have a statewide or national presence. This included partnerships with skilled nursing facilities and companies providing physical therapy (PT) and occupational therapy (OT) placements.

An example of utilizing an exception granted by the program accreditor can be found in the Doctor of Physical Therapy (DPT) program. While the accreditation standards require at least 30 weeks of full-time clinical education, the program typically offers 36 weeks of clinical experience. In response to exceptional circumstances, the accreditor approved a temporary modification for the graduating cohorts of 2020 and 2021, reducing the minimum requirement to 28 weeks. This adjustment enabled the clinical education team to maintain the same number of students across fewer clinical sites during the affected academic years while still meeting graduation requirements.

In both the Doctor of Physical Therapy (DPT) and Master of Physician Assistant (MPA) programs, a nationwide networking effort was implemented to secure clinical placements for students. The clinical education faculty teams collaborated with faculty from programs across the country to identify clinics willing to accept students for placements. This initiative required close coordination with the financial aid department, which identified federal emergency funds to support students who needed to travel outside the Bay Area for these extended clinical rotations. The financial assistance helped cover travel expenses, including airfare and accommodation, for students placed at out-of-town clinics. This collaborative effort was instrumental in enabling most students to graduate on time, despite the pandemic's challenges.

***Examples in the College of Nursing (CoN)***

The College of Nursing (CoN) employed a range of strategies to address clinical placement challenges during the pandemic. In response to disruptions, many students were reassigned to clinical placements outside their home campuses. For students at the Sacramento campus, this meant traveling to the Oakland and Berkeley campuses in the East Bay Region to fulfill their required clinical hours. Additionally, students participated in community-based initiatives, such as flu and vaccine clinics organized in partnership with local churches, clinics, and community organizations. These experiences included administering vaccines, providing patient education, coordinating clinic schedules, and offering virtual health education to "shut-in" individuals, primarily from the geriatric population. Students also gained clinical experience in home childcare centers and pediatric summer medical camps, contributing to the achievement of course learning outcomes.

To further support clinical education, the CoN incorporated simulation-based experiences, Skills Bootcamp sessions, skills refresher days, and virtual clinical experiences, including animated case studies and static case studies. Despite these orbitals, no student experienced delays in completing their clinical requirements or in their graduation timeline.

The Accelerated Bachelor of Science in Nursing (ABSN) cohort in 2020 was delayed their start date due to severe shortages in clinical placements in the Sacramento region. This was the hardest-hit area for pre-licensure clinicals during the pandemic. In addition to delaying the initiation of an entire cohort, the CoN reduced the number of in-person clinical days for their current cohorts from two to one per week for direct patient care. This adjustment allowed all students to complete their clinical requirements on time, with prior approval from the Board of Registered Nursing.

***Examples in the College of Podiatry (CoP)***

During the accreditation period, all 7 of the nation’s podiatry schools experienced lapses in clinical training due to widespread clinic closures. To adapt to the situation, the SMU College of Podiatric Medicine (CPM) converted clinical education to a remote learning model, incorporating a combination of live and prerecorded lectures, discussion groups, case study reviews, quizzes, exams, and OSCEs (Objective Structured Clinical Examinations). In-person workshops were also conducted at the end of the academic year to supplement hands-on skills and ensure students received practical training. Fortunately, all students met the minimum requirements for on-time graduation without disruptions to the rest of the program’s academic schedule.

***Supporting Data***

(Program spreadsheets showing that we did the amazing feat of providing what the students needed as data for the final report.)

**Identification of Other Changes and Issues Currently Facing the Institution**

Despite these efforts, programs within the College of Health Sciences (CoHS), which houses the DPT, DOT/MOT, and PA programs, continue to face a national shortage of hospital-based clinical placements. The primary challenge is securing sufficient inpatient clinical placements, which is exacerbated by clinical instructor burnout. All clinical instructors are practicing clinicians not employed by the university and do not receive compensation for supervising students. While the university has established enough clinical affiliation agreements with placement sites for these programs, the volunteer nature of clinical instruction—combined with the demanding responsibilities of clinical instructors—means that securing timely commitments can be difficult. As a result, these programs often face last-minute placement challenges, which creates extra work (often on an emergency basis) for faculty and has the potential to create instability in planning and delay student placements. All CoHS programs report no such delays in the last 3 academic year cycles, but all of them report that the challenge of this volunteer-based system and inpatient placement shortages creates consistent but temporary uncertainty.

The demands of consistently managing crises, developing essential clinical education program management skills with limited resources, and overseeing a clinical education program without adequate compensation for the role have contributed to burnout and turnover among clinical education faculty. For example, since the time of the Commission’s last report, the Doctor of Occupational Therapy (DOT) and Master of Occupational Therapy (MOT) programs have experienced four changes in their Fieldwork Coordinator position, while the Master of Physician Assistant (MPA) program recently appointed a new clinical education lead, and the pre-licensure nursing programs have recently filled two vacant coordinator roles. These positions involve managing significant portions of program curricula, networking with community partners, managing contracts between the university and clinical partners, supervising and mentoring students and clinical instructors during clinical rotations, training clinical instructors in optimally performing their role, teaching in the classroom, and mastering clinical education management and assessment software. Furthermore, the academic calendar often assumes that faculty are free during student off-campus time, but clinical education faculty frequently do not have breaks, as they are responsible for overseeing students in clinical settings, in addition to their classroom teaching duties. The demands of the role require at least one full academic year to master so this turnover is costing the university more in intangible effort than can be measured.

The prelicensure programs in the College of Nursing (CoN) have encountered several challenges related to a sudden turnover in faculty. The lack of a proper handoff of information to the new faculty members has hindered their ability to effectively manage and report on clinical education data, limiting their scope to only the years they have personally been with the university (see data). Additionally, the increasing student enrollment, particularly with the expansion of programs at the Fresno campus, has placed a strain on the already limited administrative support for these programs.

To address some of these challenges in the pre-licensure programs, the university invested in Exxat, a clinical education management software, to streamline clinical education processes and make critical data more accessible. However, faculty members have been unable to fully utilize the software due to time constraints and a lack of dedicated training. While Exxat is designed to improve efficiency and data management, the steep learning curve, combined with the limited support and faculty bandwidth, has led the clinical education team to continue relying on outdated methods such as Excel spreadsheets and paper-based systems for managing clinical placements and data. This situation underscores the need for more administrative support and dedicated resources to help faculty transition to more efficient, technology-driven solutions.

**Concluding Statement**

In response to the concerns raised in the Commission’s report, SMU’s clinical education faculty collaborated to develop and implement effective solutions. While many of the challenges from that period were alleviated with the resolution of the pandemic, the ongoing shortage of inpatient clinical placements in the College of Health Sciences (CoHS) programs remains a significant challenge. Additionally, faculty turnover in clinical education continues to hinder progress. Looking ahead, key steps include providing targeted administrative support, securing funding for student travel to inpatient clinical placements outside the Bay Area, and addressing the root causes of burnout and attrition among clinical education faculty. By focusing on these areas, we aim to strengthen the clinical education framework and ensure continued success for our programs.

GO BACK AND EMBED CFRs

**List of Appendices**

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| **2. Campus Climate for Diversity and Equity** |
| **Figure 1. Percent of Respondents who are Generally or Very Satisfied with Characteristics of the Campus Climate** | SMU | All Other HEDS Institutions |
| Overall Campus Climate | 65% | 73% |
| Extent All Community Members Experience a Sense of Belonging | 51% | 53% |
| **Figure 2. Percent of Respondents who Agree or Strongly Agree with Statements about Diversity on Campus** | SMU | All Other HEDS Institutions |
| Campus is Free from Tensions | 53% | 48% |
| Diversity Improves Campus Interactions | 92% | 89% |
| **Figure 3. Percent of Respondents who are** **Somewhat or Very Comfortable with Sharing Views on Diversity and Equity** | SMU | All Other HEDS Institutions |
| % Comfortable Sharing Views on Diversity and Equity | 68% | 67% |

|  |  |  |
| --- | --- | --- |
| **Figure 1. Percent of Respondents who Responded Yes or Unsure to having Experienced Discrimination or Harassment** | SMU | All Other Institutions |
| Yes, experienced discrimination or harassment | 16% | 18% |