

Standard 1 Version 7 5-14-2014**Standard 1: Defining Institutional Purposes and Ensuring Educational Objectives**

The institution defines its purposes and establishes educational objectives aligned with those purposes. The institution has a clear and explicit sense of its essential values and character, its distinctive elements, its place in both the higher education community and society, and its contribution to the public good. It functions with integrity, transparency, and autonomy.

CFR 1.1

The institution's formally approved statements of purpose are appropriate for an institution of higher education and clearly define its essential values and character and ways in which it contributes to the public good.

Guidelines: The institution has a published mission statement that clearly describes its purposes. The institution's purposes fall within recognized academic areas and/or disciplines.

The mission, vision, and purposes of the Kaiser Permanente School of Allied Health Sciences are all the result of the history of operation in concert with The Permanente Medical Group (TPMG), which has its foundation in an understanding, appreciation, and delivery of effective health care, coupled with the social consciousness of the community being served. The specific statement of mission reads: "The mission of the Kaiser Permanente School of Allied Health Sciences (KPSAHS) is to prepare qualified professionals for delivery of health care services, through traditional educational methods and distance learning, with a concentration on demonstrated competencies developed through clinical practice. Graduates are prepared to sit for the certifying or registering body within the applicable field of study."

(Attachment: CFR 1.1.01 KPSAHS Mission).

Since the inception of operation as a School in 1989, Kaiser Permanente School of Allied Health Sciences has offered academic programs and administrative support consistent with its stated purpose. Consistency of its operation and integrity are confirmed with the fact that all programs offered are in the arena of allied health sciences, and that each of the Core Programs recognized for degree approval, to include Sonography, Radiography, and Nuclear Medicine, has acquired programmatic accreditation – testament to the integrity and alignment of its purpose.

The School Catalog and the website including the Statement of Mission and the Institutional Learning Outcomes (ILOs) were created, then modified when the School began its quest to secure WASC accreditation. (Attachment: CFR 1.1.02 KPSAHS Mission on Website). Since that time, under direction of the Accreditation Liaison Officer (ALO), the mission is reviewed on an annual basis by the Faculty Senate, Program Directors, Asst. Medical Directors, Administrative Leadership Team and the Board of Directors.

Visible demonstration to educate and orient all staff, students, and visitors to the mission for the School is addressed through KPSAHS posters representing School goals to achieve WASC accreditation and the relationship between that goal and the School mission. (Attachment CFR 1.1.04)

This mission is also understood and consistently represented to outside agencies such as the California Bureau for Private Postsecondary Education (BPPE) and the programmatic accrediting commissions of the School programs. The Board of Directors has reviewed and approved the mission in concert with its responsibilities. (Attachment: CFR 1.1.03 KPSAHS Board Review of Mission). The Board also reviewed the Candidacy Self-Study Narratives for the review for Educational Effectiveness and made comments and recommendations as applicable.

Through this process of regular review and assessment from a variety of different perspectives, the School affirms the clear sense of relevant institutional purpose throughout its community, the intent and accomplishment of appropriate and qualified medical care of

need within the allied health community, and uses this purpose to inform and direct all strategic planning, faculty involvement, and assessment strategies.

CFR 1.1 Attachments

[Attachment: CFR 1.1.01 KPSAHS Mission](#)

[Attachment: CFR 1.1.02 KPSAHS Mission on Website](#)

[Attachment: CFR 1.1.03 KPSAHS Board Review of Mission](#)

[Attachment: CFR 1.1.04 KPSAHS Poster Examples](#)

CFR 1.2

Educational objectives are widely recognized throughout the institution, are consistent with stated purposes, and are demonstrably achieved. The institution regularly generates, evaluates, and makes public data about student achievement, including measures of retention and graduation, and evidence of student learning outcomes.

See also CFR 2.4, 2.6, 2.10, 4.2

The ILOs for the School were developed by School Program Directors and faculty, and then approved by the Faculty Senate and Asst. Medical Directors in concert with the WASC Application for Candidacy for Educational Effectiveness. The process used was: 1) initial and comprehensive review of all coursework for each degree program, updating and modifying the prior statements of course objectives to reflect the expectation of outcomes; 2) course outcomes were then rolled up to ensure they were in concert with Program Objectives, and the previously stated Program Objectives were updated and transitioned into new statements of Program Outcomes; 3) Program Outcomes were reviewed to establish the parallels and alignments that existed with the Institutional Learning Outcomes (ILOs). This process ensured consistency of approach, validated the programmatic accreditation at each level of the review, and engaged all program faculty very early in the regional accreditation process. In response to WASC Team recommendations following the review and visit for the CPR component of Candidacy, significant effort had been directed to validation of learning outcomes with data compiled through institutional research with program review and assessment effected through both review by programmatic accreditors, and in concert with the internal School review and assessment process. Nuclear Medicine hosted its programmatic reviewers in 2013, and the two remaining programs are calendared for future dates.

Public data related to student achievement of the outcomes of retention, graduation, certification/credentialing pass rates and employment in the field has been reviewed, updated, and posted on the School website to ensure public access to concrete and relevant data. Updated posted information is also included on the meeting agenda for the Board of Directors.

The Director of Assessment/Institutional Research works directly with Program Directors, Assistant Medical Directors, and instructional faculty in all programs on program review and assessment. In addition, all degree programs are subject to periodic program review by their respective programmatic accreditors. Specific detail on projected learning outcomes, and accomplishment of those outcomes, are a part of the review by program-specific accreditors. Using the WASC document of Concurrent Accreditation, the School has focused on defining the parameters of program review by each of the programmatic accreditors, then expanding with the School-specific developed parameters of what has not been a part of the review-assessment process. The School intends to present the most compelling arguments of validated quality assurance of curricula and instruction toward accelerated accreditation with WASC. ([Attachment: CFR 1.6.01 Programmatic Accreditor Affirmation of BS Program](#))

The School-specific generated efforts, uses the tools of assessment – rubrics, matrices, and processes. i.e., of establishing benchmarks, embedded assignments, calibration, that require the engagement of instructional faculty.

Institutional and Program Learning Outcomes (ILOs – PLOs) are clearly identified in the School Catalog and on the website. Course learning outcomes (CLOs) are detailed within the course syllabi. ([Attachment: CFR 1.2.01 KPSAHS Catalog ILOs](#); [Attachment: CFR 1.2.02 KPSAHS PLOs on Website](#); [CFR 1.2.03 KPSAHS Syllabus Example with CLOs](#)).

ILOs and PLOs for each degree program have now also been presented to the relevant program accreditors as a part of the program review process. ([Attachments 1.2.01 and .02](#)).

In November 2013 the Nuclear Medicine program was reviewed by the Joint Review Committee on Educational Programs in Nuclear Medicine Technology (JRCNMT) and qualified for a continuation of accreditation for a three year period; assessment and validation of outcomes was a part of that review.

Integration of the clinical preceptors into the review and assessment process provided the opportunity for validation of the clinical adjunct training and for integration of this population into the curricular review process, as shown with Attachment: CFR 1.2.05a. Discussion and application of learning outcomes are a part of this review and assessment process with all subject-matter meetings.

The bachelor degrees for KPSAHS are upper-division Completion Programs. General education at a lower division level is required as a prerequisite and an admission requirement. Students qualifying for admission to the Bachelor of Science program have already completed all lower division general education coursework corresponding to coursework as required of students completing a two-year degree in preparation for transfer to the California State University system.

At the upper division level, LOs were developed for GE coursework accepted in transfer, with the process anticipating the need for curriculum mapping of learning outcomes at all levels. Beginning in 2012 and continuing into 2013, the School began offering upper division general education courses through distance learning, planning that all required upper division GE courses will be offered by the School before the end of 2014. Protocols for each step of the assessment loop are reflected in the Program Review Handbook and Assessment Manual. (Attachment: CFR 1.2.04 KPSAHS Map Aligning ILOs and PLOs; Attachment CFR 1.2.05 KPSAHS Faculty Review of ILO's, PLO's and CLO's).

The first core competency to be assessed was the competency in writing, with all instructional faculty involved in the assessment process, across programs. After input from faculty members of the Assessment Committee, agreement was reached to have Written Communication be the first Institutional Learning Outcome assessed. It was felt that written communication was an issue across programs and across classes; juniors and seniors. This was presented to the faculty senate in April 2013 and the vote was carried. Implementation of this assessment is addressed with Attachment: CFR 1.2.14.

KPSAHS has a long history of program assessment as required by the program accreditors, and an equally long history of success in meeting these expectations (Attachment: CFR 1.2.07 Assessment Example - Outcomes). The School also reports program accomplishment to the State regulatory body, the BPPE, relative to program enrollment, completion, and employment in the field of study. (Attachment: CFR 1.2.08 BPPE School Performance Report).

Prior to the last WASC review, programmatic accreditor assessment represented only certificate enrollments. State regulatory required statements of outcomes (enrollment/graduation/employment) also represented only certificate enrollment. From 2013 forward, assessments and outcomes are disaggregated as applicable to degree programs, as a direct response to recommendations from the WASC CPR Team.

Assisting with the review process, Academic Advisory Committees (AACs) are of particular benefit to the School and programs. These Committees are unique to each program subject and are comprised of Assistant Medical Directors (AMDs), Program Directors and instructional faculty, clinical preceptors, and students. The history of these Committee meetings details the assessment and input from professionals in the field of study that provide an ongoing awareness of changes in the field.

CFR 1.2 Attachments

[Attachment: CFR 1.2.01 KPSAHS Catalog ILOs](#)
[Attachment: CFR 1.2.02 KPSAHS PLOs on Website](#)
[Attachment: CFR 1.2.03 KPSAHS Syllabus with CLOs](#)
[Attachment: CFR 1.2.04 KPSAHS Map Aligning ILOs and PLOs](#)
[Attachment: CFR 1.2.05 KPSAHS Faculty Review of ILOs and PLO](#)
[Attachment: CFR 1.2.05a Clinical Preceptor Review of LO's](#)
[Attachment: CFR 1.2.06 KPSAHS Newsletter](#)
[Attachment: CFR 1.2.07 JRCNMT Assessment Example – Outcomes](#)
[Attachment: CFR 1.2.08 BPPE School Performance Fact Sheet – by Program](#) and Disaggregated
[Attachment: CFR 1.2.09 Student Survey Response](#) - Update and Charts of Synthesis
[Attachment: CFR 1.2.10 Curriculum Maps](#)
[Attachment: CFR 1.2.13 Permits and Certificates on the Web](#)
Attachment: CFR 1.2.14 Assessment of Written Communication

CFR 1.3

The institution publicly states its commitment to academic freedom for faculty, staff, and students, and acts accordingly. This commitment affirms that those in the academy are free to share their convictions and responsible conclusions with their colleagues and students teaching and writing.

The School Statement of Academic Freedom was developed and implemented by the Faculty Senate, then approved by the Board of Directors. The due-process procedures for ensuring this policy is effectively enacted and supported by TPMG are in place. At the time of the annual faculty job performance evaluation, the statement of Academic Freedom is again reviewed by program faculty. This statement is included in the KPSAHS Faculty Handbook, and is made available to all faculty and staff upon hire. The School prides itself on providing a learning environment that exhibits a high standard of integrity and that contributes to learning (Attachment: CFR 1.3.01 Academic Freedom Statement; Attachment: CFR 1.3.02 Grievance and Due-Process Policy).

The Statement on Academic Freedom is included on the School website and in the Faculty Handbook and Catalog, and is discussed with school employees at the time of hire. As an example of the operational aspect of the Policy on Academic Freedom, faculty are encouraged to attend classes and conferences for professional development, and to bring back to the School setting, new or diverse ideas for program development, review, and implementation; one purpose of these efforts is to ensure they are prepared to professionally address and support policies and practices appropriate to higher education, and to support and defend positions they may take..

The Statement of Policy on both Academic Freedom and policy on Grievance and Due-Process was revised to ensure compliance with expectations of WASC.

CFR 1.3 Attachments

[Attachment: CFR 1.3.01 Academic Freedom Statement](#)
[Attachment: CFR 1.3.02 Grievance and Due-Process Policy](#)

CFR 1.4

*Consistent with its purposes and character, the institution demonstrates an appropriate response to the increasing diversity in society through its policies, its educational and co-curricular programs, **its hiring and admissions criteria**, and its administrative and organizational practices.*

The academic programs at KPSAHS are all within the core subject-areas of allied health sciences. Programmatic accreditation in these fields of study requires an adherence to very rigorous admission requirements and prerequisites to better ensure the probability that admitted and enrolled students are capable of meeting requirements leading to retention, program completion, and ability to pass

the examinations for certificate/credential and to secure employment in the field of study. The School is able to demonstrate recognition of diversity as reflected in program coursework and an outcome relating to patient care from the perspectives of diversity, and this perspective is a part of the core curriculum of each program. (Attachment CFR 1.4.01)

As addressed by KPSAHS faculty, the general education at the School provides students with the acquisition of Student Learning Outcomes (SLOs) that demonstrate the integration of knowledge that transcends and complements the subject-specific discipline of each Bachelor of Science degree. The faculty-directed General Education Committee elected to additionally address the issue of diversity by identifying an upper division general education course option in that subject, GE 803 Cultural Diversity in the 21st Century.

As stated in the document General Education Philosophy (Attachment: CFR 1.4.02), the Student Learning Outcomes (SLOs) for the General Education segment of each program include the diverse fields of study that enable students to make intellectually honest and ethical decisions reflecting a knowledge of and respect for diverse people, ideas, and cultures. Such breadth of education also cultivates skills critical to student success in academic, personal and professional and community endeavors both within and beyond the school.

The recognition and appreciation for the benefit of diverse perspectives in the School setting also requires respect for the value each individual contributes to the whole, and in this way, independent of cultural, ethnic, religious, or gender differences, expectations for addressing outcomes are consistently applied. (Attachment: CFR 1.4.01)

The composition of the KPSAHS Leadership Team and instructional faculty is also reflective of diversity relative to cultural, ethnic, and gender distinctions. From this foundation, there is an inherent respect and appreciation for the variety of student populations and experiences. (Attachment: CFR 1.4.04)

Students and staff are invited to attend conferences, events, and participate in professional societies for diversity, such as the Kaiser Permanente-sponsored organizations of Asian-American, African-American, Latino, and Women's Conferences to ensure understanding and appreciation for the value of diversity, and in demonstration of KP/TPMG/KPSAHS support. Additionally, Kaiser Permanente hosts a national Diversity Conference each year.

CFR 1.4 Attachments

[Attachment: CFR 1.4.01 KPSAHS Diversity Statement](#)

[Attachment: CFR 1.4.02 General Education Philosophy](#)

[Attachment: CFR 1.4.03 KPSAHS Summary Data Form](#)

[Attachment: CFR 1.4.04 – Chart on Diversity of Administration and Faculty](#)

CFR 1.5

1.5 Even when supported by or affiliated with governmental, corporate, or religious organizations, the institution has education as its primary purpose and operates as an academic institution with appropriate autonomy.

KPSAHS qualified for WASC eligibility in concert with the WASC Policy on "Related Entities"; TPMG has been a for-profit, California-based corporation since 1983. KPSAHS has existed since 1989, and for the entirety of its operation to date, all fiscal responsibilities for school operation have been addressed and met by TPMG.

The School has operated with fiscal support from its inception, as evidenced by the pledge from Gerard Bajada, Vice President TPMG Financial Services, to underwrite and support the institution through the commitment of fiscal, physical, and human resources. This support has embraced all operative policies for an institution of higher education, and this support and resources are consistent with expectations for programmatic accreditation. This commitment has been made separate and independent of expectations to achieve regional accreditation. (Attachment: CFR 1.5.08 TPMG Commitment of Support)

There has never been a history of interference in substantive decisions or educational functions by political, religious, corporate or other external bodies from outside the institution's own governance arrangements. The creation and implementation of an independent Board of Directors, with primary membership separate and independent from both the School and TPMG, was formed to provide for direction and leadership from an independent body. (Attachment: CFR 1.5.01 Policy on "Related Entities", Attachment: CFR 1.5.02 Signature Statement of "Related Entity". Attachment CFR 1.5.03 Governing Board By-Laws)

Contrary to any history of interference from TPMG, the role and relationship between KPSAHS and TPMG has been a very positive factor in the success of the School operation. Examples to support this statement include the history of securing both TPMG and non-TPMG clinical sites to support delivery of the educational programs, establishment of branch operations in non-TPMG facilities, and the TPMG Statement of Commitment. KPSAHS functions separately from TPMG with regard to curricular and programmatic decisions, as represented in the following examples:

Macro-view of Expansion from School

In 2010 the Diagnostic Medical Sonography Program Director determined a need to implement a Cardiac concentration in the program. This decision was based on data received from the Bureau of Labor Statistics which indicated an 18% increase in the need for Medical Sonographers specifically. The decision was made also based on information on the number of Cardiac Sonography programs located in the State of California; of the two programs identified, neither was in northern California. The data demonstrated a need to construct and implement a Cardiac concentration. The decision was proposed by the Program Director, and approved by the KPSAHS CEO, Director of Academic Affairs, and the Board of Directors

The School expanded from a school of radiography to include sonography, nuclear medicine, radiation therapy, radiography and a cardiac program under the umbrella of diagnostic medical sonography. The radiation therapy program was suspended prior to the move to seek regional accreditation.

Delivery of allied health programs requiring clinical sites in sufficient numbers for student enrollment is incredibly problematic if sufficient sites are not available. The KPSAHS/TPMG relationship has provided ready access to these critically-important sites, as well as including access to professionally qualified preceptors to assist in program delivery, oversight in the field with qualified medical practitioners, and the investment of clinical preceptors to serve in an advisory capacity with each of the Program Directors. Non-TPMG clinical sites are also available based in large part on the positive and exemplary history and reputation of Kaiser Permanente in the medical and health-related fields. (Attachment: CFR1.5.04 Listing of Clinical Sites and Affiliates).

The KPSAHS opportunity to develop a branch-site facility in Stockton is also a tribute to the positive image of KPSAHS and TPMG in the community. California State University, Stanislaus, opened the door to KPSAHS to join in coordination of the CSUS facility serving the Stockton community. (Attachment: CFR 1.5.05 BPPE Approval of Branch location; Attachment: CFR 1.5.06 CSUS/TPMG/KPSAHS MOU). Delivery of instruction from this additional physical site provides an opportunity for access to instructional programs that had not been available to an under-served community. Currently CSU, Stanislaus is experiencing enrollment growth that may require a change of physical location for KPSAHS program delivery, but WASC will be kept well apprised of any possible change before it happens.

Finally, classrooms and laboratory settings are equipped to reflect industry trends and standards, as recommended and in use by Kaiser Permanente and non-Kaiser clinical sites alike. (Attachment: CFR 1.5.07 Stockton Facility Detail).

CFR 1.5 Attachments

[Attachment: CFR 1.5.01 Policy on “Related Entities”](#)
[Attachment: CFR 1.5.02 Signature Statement of “Related Entity”](#)
[Attachment: CFR 1.5.03 Governing Board By-Laws](#)
[Attachment: CFR 1.5.04 Listing of Clinical Sites and Affiliates](#)
[Attachment: CFR 1.5.05 BPPE Approval of Branch location](#)
[Attachment: CFR 1.5.06 CSUS/TPMG/KPSAHS MOU](#)
[Attachment: CFR 1.5.07 Stockton Facility Detail](#)
[Attachment: CFR 1.5.08 TPMG Commitment of Support](#)

CFR 1.6

The institution truthfully represents its academic goals, programs, services, and costs to students and to the larger public. The institution demonstrates that its academic programs can be completed in a timely fashion. The institution treats students fairly and equitably through established policies and procedures addressing student conduct, grievances, human subjects in research, disability, and financial matters, including refunds and financial aid

Academic Goals, Programs, and Services

KPSAHS distinguishes between its degree and non-degree programs, and has clearly delineated its learning outcomes at the level of the institution (ILOs), and the academic degree programs (PLOs) and courses (CLOs). (Exhibit: KPSAHS Catalog and on website at www.kpsahs.org). To qualify for WASC Eligibility, the School initiated degree programs at the Bachelor of Science-completion level in three program subjects that are Core to the School – Sonography, Radiography, and Nuclear Medicine. Having already secured approval from the state regulatory agency, the Bureau for Private Postsecondary Education (BPPE), the School then worked to gain recognition of these programs with each of its programmatic accreditors.

In concert with these processes for recognition and validation of quality, Program Directors and instructional faculty through Faculty Committees and the Faculty Senate, developed, reviewed, and then approved learning outcomes at the level of the Institution, the Program, and Courses. Documentation of transparency and consistency with integration of Learning Outcomes (LOs) in all aspects of the School, include learning outcome expectations in the application for admission, the application process through orientation and frequently asked questions (FAQ’s), and in course syllabi. Student Orientation efforts have been expanded to ensure sufficient and appropriate information relating to program costs and to detail on financial assistance programs, as addressed with the Enrollment Agreement. KPSAHS does not provide access to Title IV funding, but data on assistance options, and comparability of the ratios between programs costs and income options “using California Bureau of Labor Management Statistics” following graduation/licensure has become a part of the information developed and shared. CFR 1.6.02 Student Orientation Assessment; CFR 1.6.03 Program Ratio/Income Data

Prior to enrolling degree candidates from the general population of students, initial enrollment in degree programs was made available as an option to students completing certificate programs in the same program subjects; this provided an opportunity to “pilot” the process by which student orientation to the enrollment option was presented, evaluation of transfer credit for upper division general education coursework could be effected, and a full range of “frequently asked questions” could be scripted to ensure students received full and comprehensive information on their enrollment options. The School was not concerned with the quantity of students; it wanted to establish the quality of operation. (Attachment: CFR 1.6.04 Degree Orientation Handout and FAQ’s).

KPSAHS will now begin the process of active recruiting to increase enrollment in the bachelor’s programs, always cognizant of the limitations dictated by access to clinical sites. With a positive response from the individual programmatic accreditors acknowledging the Bachelor of Science for core programs, and with more than a full year of piloting the degree programs to include Bachelor of Science graduation, the School has expanded its efforts to enroll degree students.

Initially there are three populations of students to whom program details and encouragement are provided, in addition to the being responsive to those seeking potential candidates seeking information on their own: 1) Current KPSAHS applicants and recent admits; 2) Field preceptors in clinical settings; and 3) KPSAHS alums of core programs.

The rationale for each pool of candidates is as follows:

Current KPSAHS Applicants or Recent Admits

KPSAHS attracts a very well-educated population. In a July 2011 study conducted prior to implementing the Bachelor of Science program, the school assessed students who were currently enrolled in the three core programs (Sonography, Radiography, and Nuclear Medicine) as candidates for the certificate programs. Of one hundred fifty students in the initial study, fifty of these students had completed upper coursework or had completed four-year degrees, or higher, at regionally accredited institutions; twenty-seven of these students had some coursework applicable to the upper division General Education requirements or Electives.

All students from this population enrolled in the School satisfying all of the very extensive admission and prerequisite admission requirements, making them extremely viable candidates.

Field Preceptors in Clinical Settings

Field preceptors in both Kaiser clinical settings and those in other parallel professional affiliations, are recognized in their Imaging fields of study by virtue of their education, licensure, and current certification. By program subject, these potential students are viable as program candidates based on their currency of expertise in the field of study, and their physical proximity to the School.

KPSAHS Alums

KPSAHS Alums in Core programs who have maintained licensure and certification are as equally viable as clinical preceptors; in addition, these individuals have a history with the School through completion of their earlier studies.

For each of the above identified populations, KPSAHS is initiating a specialized effort to encourage, inform, and educate these potential bachelor-candidates to the opportunity of completing a degree program. Expansion of the degree program enrollment is one issue to be addressed in the School-specific Strategic Plan under development.

Program Completion

One outside variable applicable to the Bachelor of Science option was that the School did not initially provide access to all required upper division GE courses. Prior to fall 2012, all upper division GE coursework was recognized through award of transfer credit. In late fall 2012, the first of these upper division GE courses, GE 801 Scientific Inquiry became available and taught at the School. By Fall 2013, the School had developed and is delivering three of the four courses required of bachelor-completion students, with recognition through transfer credit still an available option. The School expects the fourth course in Management/Leadership to be developed and offered in 2014.

Both the state regulatory agency (BPPE) and the program accreditors have expectations regarding timely program completion. The policy for Satisfactory Academic Progress (SAP) is assessed consistently throughout each program of enrollment to confirm students are making expected and required progress relative to course completion, attendance, and earned grades, and to complete programs in the prescribed time. This is a policy implemented and monitored through Student Services. (Attachment: CFR 1.6.05 Study on SAP)

The history of program completion based on certificate programs, is very positive, as recognized with program accreditation reports. The Bachelor of Science degree is expected to be completed within an 18-24 month period, with provision for one additional year for completion of upper division general education requirements. With the School making the upper division GE options available through an online modality, the SAP policy will be assessed for possible adjustment.

Policies and Procedures

The School has policies and procedures to address expectations for student conduct, grievances and refunds, and the School Catalog includes policies on student conduct, grievances, tuition refunds, the types of credits awarded and accepted, grading and appeal processes (Attachment: CFR 1.6.06 Catalog Policies). There have been no adverse findings against the School with respect to a violation of these policies. Examples of transfer credit awarded can also be confirmed with review of the KPSAHS transcript and through review of student files and the policy statement in the catalog. (Attachment: CFR 1.6.07 Sample Transcript).

CFR 1.6 Attachments

[Attachment: CFR 1.6.01 Programmatic accreditation recognition of the BS](#)

[Attachment: CFR 1.6.02 Student Orientation Assessment;](#)

[Attachment: CFR 1.6.03 Program Ratio/Income Data](#)

[Attachment: CFR 1.6.04 KPSAHS New Student Orientation Materials and FAQs](#)

[Attachment: CFR 1.6.05 Attachment on SAP](#)

[Attachment: CFR 1.6.06 KPSAHS Catalog Policy Statements](#)

[Attachment: CFR 1.6.07 KPSAHS Transcript](#)

[Exhibit 1 KPSAHS Catalog](#)

CFR 1.7

The institution exhibits integrity and transparency in its operations, as demonstrated by the adoption and implementation of appropriate policies and procedures, sound business practices, timely and fair responses to complaints and grievances, and regular evaluation of its performance in these areas. The institution's finances are regularly audited by qualified independent auditors.

See also CFR 3.4, 3.6, 3.7

KPSAHS has a commitment to implementation of appropriate policies, sound business practices, timely and fair responses to complaints and grievances, and regular evaluation of its performance in these areas. This commitment is evidenced by virtue of the facts that: 1) no regulatory agency or accrediting body has raised any question or concern about the integrity of its operation; 2) there have been no issues raised by faculty, staff, or students concerning any complaint, grievance, or performance evaluation.

The Permanente Medical Group, Inc. (TPMG) is the parent company for KPSAHS. TPMG has provided confirmation that the TPMG financial statements are audited annually (Attachment: CFR 1.7.01) Additionally, in WASC's Eligibility Action Letter dated April 27, 2012 under Criterion 19 – Financial Accountability, WASC acknowledged that it is outside of their jurisdiction to require and evaluate the financial status of TPMG. Instead, WASC will look at the School's financial information which includes the funding stream from TPMG, as was done with the Self Study for CPR.

CFR 1.7 Attachments

[Attachment 1.7.01 Fiscal Forecast Spreadsheet](#)

CFR 1.8

The institution is committed to honest and open communication with the Accrediting Commission; to undertaking the accreditation review process with seriousness and candor; to informing the Commission promptly of any matter that could materially affect the accreditation status of the institution; and to abiding by Commission policies and procedures, including all substantive change policies.

Related documents: Compliance Audit Policy, Degree Level Approval Policy, Honorary Degrees Policy, Maintenance of Accreditation Records Policy, Matters under Litigation Policy, Public Disclosure of Accreditation Documents and Commission Actions, Substantive Change Policy, Unannounced Visits Policy

KPSAHS submitted its Board-signed Stipulation Letter with the Application for Eligibility (Attachment: **CFR 1.8.01** KPSAHS Board Stipulation Letter) that includes the status and responsibilities for addressing Candidacy, committing to support and uphold expectations of the WASC accreditation standards, to inform the Commission promptly of any matter that could materially affect the accreditation status of the institution, and to abide by Commission policies and procedures, including all substantive change policies.

One approach to ensuring that the School maintains constant awareness of the requirements and expectations of WASC is the ongoing involvement of the Leadership Team and commitment of administration, staff, and faculty to support the involvement of the KPSAHS community at all levels, with WASC, with the following examples: 1) The School Accreditation Liaison Office is the School Director of Academic Affairs; 2) Leadership Team members and the School Medical Director, along with Program Directors have participated actively in WASC-directed conferences and workshop from 2011 forward; 3) Both the CEO and ALO/Director of Academic Affairs completed the 2012 Accreditation Leadership Academy (ALA); 4) The Director for Assessment/Institutional Research completed the ALA in 2014; 5) The School has active engagement with a WASC-knowledgeable consultant who serves in the role of Accreditation Coordinator; 6) The Letter of Intent actively addressed the Eligibility Review Panel (ERP) recommendations; 7) The KPSAHS community, to include the Board of Directors supported the Response and Actions identified with the WASC CPR Team Visit, Review, Report and Response, and 8) Both the TPMG community and the Board of Directors receive regular periodic updates on progress toward accreditation goals (Attachment: CFR 1.8.02)

CFR 1.8 Attachments

[Attachment: CFR 1.8.01 KPSAHS Board Stipulation Letter](#)

[Attachment: CFR 1.8.02 Example of Newsletter UPDATES on WASC](#)