KAISER PERMANENTE®
SCHOOL *of* ALLIED HEALTH SCIENCES

938 MARINA WAY SOUTH
RICHMOND, CA 94804
510-231-5000 / TOLL FREE: 1-888-299-0077
WWW.KPSAHS.ORG

STANDARD 3   Version 6   Updated   5-14-2014

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

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

CFR 3.1

The institution employs faculty and staff with substantial and continuing commitment to the institution. The faculty and staff are sufficient in number, professional qualification, and diversity and to achieve the institution's educational objectives, establish and oversee academic policies, and ensure the integrity and continuity of its academic and co-curricular programs wherever and however delivered.

See also CFR 2.1, 2.2b

Related documents: Collective Bargaining Policy, Diversity Policy

Kaiser Permanente School of Allied Health Sciences has created a team, qualified both academically and experientially, appropriate for the mission of the school. The academic programs are offered under the supervision of the Medical Director, Dr. Darryl Jones, and administered by the Director of Academic Affairs, with Program Directors, supported by Assistant Medical Directors, qualified and certified in their individual programs of study, and certified preceptors for all clinical assignments. Attachments: CFR 1.3.01 Administrator Resumes; CFR 3.1.02 Program Director Resumes; CFR 3.1.03 Program Director Job Descriptions; CFR 3.6.04 Medical Director Job Description and Resume.

TPMG physicians from the Kaiser Permanente facilities also provide instruction, reinforcing the medical facility-school linkage. This professional component brings additional credibility to the academic community, introducing real-life experiences and current practices in the fields of Imaging.

Program Directors and instructional faculty at the School are full-time, involved in qualifying the School for WASC accreditation through their participation in WASC conferences, workshops, investment in School Faculty Committees, Faculty Senate, and participation in WASC workshops on assessment.

All instructors are responsible to the development of curricula, program assessment and review, and documentation of learning outcomes at all levels. As confirmed with the WASC Data Summary Profile, the instructional faculty also mirror the student population served, with diversity in the areas of ethnic background, and culture. (Attachment: CFR 3.1.06 WASC Summary Data – Faculty)

Since the inception of KPSAHS plans to qualify for WASC accreditation, there has been significant progress and interest on the part of Program Directors and faculty to acquire higher level credentials in higher education. Specifically, the Academic Dean, Director of Institutional Research/Program and the Program Director in Radiography have all completed master's level degrees in the past year, and the Director of IRPR completed the WASC ALA.

Although not employed directly by the School, clinical preceptors are key resources in preparing the student to meet expected Course, Program and Institutional Outcomes. Clinical preceptors are supervisors at the clinical sites that monitor student direct-application of learning in the clinical environment. Preceptors from both Kaiser and non-Kaiser facilities, oversee and review student

progress in coursework that addresses the laboratory and clinical aspects of the program. Preceptors monitor student time, progress, accomplishments in completing required components of the program, and "sign off" when the student has accomplished goals set and required by each program; they are important colleagues in confirming acquisition of competencies by program. (Attachment: CFR 3.1.05 Preceptor Role/Responsibilities; Attachment CFR 3.1.08 Clinical Sites)

All educational programs are qualified for outcomes through program accreditation, which includes stringent requirements for Program Directors, instructional staff and preceptors. Administrative leadership is appropriately qualified by both academic and experiential background, and the school has a positive history of retention and sustainability of personnel.

Kaiser Permanente has an additional facility in Stockton, California, recognized by the California regulatory agency, the Bureau for Private Postsecondary Education (BPPE), as a "branch facility"; the WASC-recognized term most applicable is "Regional Center". This Center operates with all policies, protocols, and resources, in the form of administrative, faculty, staff support, fiscal commitment, physical and equipment facilities sufficient to offer degree program instruction for the Bachelor of Science degree.

The School statement of mission, Institutional Learning Outcomes (ILOs), Program and Course Outcomes (PLOs and CLOs), and assessment mechanisms in place at the main campus, are applicable to this Regional Center as well. Programmatic accreditation recognition for all core programs applies to this facility as well. Attachment CFR 3.1.09 Summary of KPSAHS Activity in Stockton, California details operation at that physical site, to include: inventory of physical space and equipment; profile of programs offered and students enrolled; calendar of class locations; instructor schedules and assignments; documentation of administrative and student services assignments for this site; and an assessment of the "Cost of Doing Business" for this physical location, and the budget required for operation.

CFR 3.1 Attachments

Attachment: CFR 3.1.01 KPSAHS Administrator Resumes
Attachment: CFR 3.1.02 KPSAHS Program Director Resumes
Attachment: CFR 3.1.03 KPSAHS PD Job Descriptions
Attachment: CFR 3.1.04 Preceptor Role/Responsibilities
Attachment: CFR 3.1.06 WASC Summary Data - Faculty
Attachment: CFR 3.1.08 Clinical Sites
Attachment: CFE 3.1.09 Stockton Facilities
Attachment: CFR 3.1.10 Administrator Job Descriptions

CFR 3.2

Faculty and staff recruitment, ==hiring==, orientation, workload, incentives, and evaluation practices are aligned with institutional purposes and educational objectives. Evaluation ==is consistent with best practices in performance appraisal, including multisource feedback== and appropriate peer review. ==Faculty evaluation processes are systematic and are used to improve teaching and learning.==

See also CFR 1.7, 4.3, 4.4

All educational programs in the School are allied health-related, and all Program Directors and instructional faculty are qualified in their disciplines, as well as being licensed and/or certified as professionals in the field.

In addition to being fully qualified, the retention of these instructors, and the continuity of operation, speaks to the integrity and consistency of the instructional efforts. An important aspect of the internal evaluation process related to stakeholders is provided with Academic Advisory Committees comprised for each program of study of the Program Director, Medical Advisors assigned to each subject, instructional faculty, students, alumni and clinical preceptors. This Committee provides important perspective of the individual programs, with update and modifications in the field of study, and contributes to knowledge and awareness of changes in

KAISER PERMANENTE®
SCHOOL *of* **ALLIED HEALTH SCIENCES**

938 MARINA WAY SOUTH
RICHMOND, CA 94804
510-231-5000 / TOLL FREE: 1-888-299-0077
WWW.KPSAHS.ORG

the field to include new medical breakthroughs and new techniques and equipment. (Attachment: CFR 3.2.01 Advisory Committee Composition – by Program).

Administration/Faculty/Staff Retention and Continuity Evaluations are conducted annually on all administration, faculty, and staff to ensure there is consistency of operation and that job descriptions and expectations are aligned. Where applicable, such as with faculty/instructors, this evaluation also includes input from students. Attachment: CFR 3.2.02 Job Performance Evaluation Document. And the Faculty Handbook outlines processes for recruitment, orientation, workload, and evaluation at all levels. It also confirms the annual review of ILOs, PLOs, and CLOs by Program Directors in concert with their instructional faculty and with recommendations forwarded to the Faculty Senate. Exhibit 3: KPSAHS Faculty Handbook

CFR 3.2 Attachments
> **Attachment: CFR 3.2.01 Advisory Committee Composition – by Program).**
> **Attachment: CFR 3.2.02 Job Performance Evaluation Document**
> **Attachment: CFR 3.2.03 Advisory Committee Composition – by Program).**
> **Attachment: CFR 3.2XXX KPSAHS Management Evaluation Form**
> **Exhibit 3 KPSAHS Faculty Handbook**

CFR 3.3

The institution maintains appropriate and sufficiently supported faculty and staff development activities designed to improve teaching, learning, and assessment of learning outcomes.

See also CFR 2.1, 2.2b, 4.4

The importance of faculty currency in the field of study is reinforced with the Faculty Professional Development Plan, monitored by the Director of Academic Affairs reviewed on an annual basis, and the with Orientation provided all instructors new to the School. As recommended by the WASC Team with CPR Review, this Plan has been updated to include recognition for scholarly activity in the form of research and creative efforts.

Finally, faculty participation in Committees relevant to learning consistent with institutional and program objectives provides the opportunity for faculty deliberation on issues prior to forwarding recommendations to the Faculty Senate. Training and support for faculty members' teaching by means of technology-mediated instruction is facilitated through services of the Director of Education and Training. One more recent example of faculty-involved professional development and training involved application of the plagiarism software to address academic integrity and stressing the importance of students using quality resources and being ethically responsible. Attachment: CFR 3.3.01 Resume Director of Education and Training; Attachment: CFR 3.3.02 Job Description of Director of Training; Attachment: CFR 3.3.03Training Examples.

CFR 3.3 Attachments
> **Attachment: CFR 3.3.01 Resume, Director of Training**
> **Attachment: CFR 3.3.02 Job Description of Director of Training**
> **Attachment: CFR 3.3,03 Training Examples**

KAISER PERMANENTE®
SCHOOL *of* **ALLIED HEALTH SCIENCES**

938 MARINA WAY SOUTH
RICHMOND, CA 94804
510-231-5000 / TOLL FREE: 1-888-299-0077
WWW.KPSAHS.ORG

CFR 3.4

==The institution is financially stable and has== unqualified independent financial audits and resources sufficient to ensure long-term viability. Resource ==planning and development include realistic budgeting, enrollment management, and diversification of revenue sources. Resource planning is integrated with all other institutional planning. Resources are aligned with educational purposes and objectives.==

See also CFR 1.1, 1.2, 2.10, 4.6, 4.7

KPSAHS is recognized under the policy of a "Related Entity" in its relationship with The Permanente Medical Group (TPMG). Although the school is state-recognized as a for-profit institution, in reality it has never offered educational programs for the purpose of making a profit. Under the stewardship of TPMG, the primary intent of the school is to fulfill its mission which includes providing affordable instruction in allied-health programs. This is accomplished through the process of Institutional and Strategic Planning, with TPMG support and endorsement of the school operation and school programs. Historically, TPMG has funded operation of the School, and has committed to doing so through the process required to qualify for WASC accreditation. TPMG has appropriate and independently affirmed financial statements confirmed as appropriate for WASC accreditation, and has committed to ongoing support of the school operation. Attachment: CFR 3.4.01 KPSAHS Financial Plan and Budgeting Process.

Consistent with expectations with the 2013 WASC Handbook, and with significant Board-involvement, the School is in the process of developing an Institutional and Strategic Plan that is School-specific, rather than TPMG, directed. Attachment: CFR 4.6.01 KPSAHS – School-specific Strategic Plan.

CFR 3.4 Attachments

Attachment: CFR 3.4.01 KPSAHS Financial Plan and Budgeting Process

CFR 3.5

The institution provides access to information and ==technology== resources sufficient in scope, quality, currency, and kind ==at physical sites and online, as appropriate, to support its academic offerings and the research and scholarship of its faculty, staff, and students.== These information resources, services, and facilities are consistent with the ==institution's educational objectives and are aligned with student learning outcomes.==

See also CFR 1.2, 2.1, 2.2

Related documents: Distance Education and Technology-Mediated Instruction Policy

Kaiser Permanente School of Allied Health Sciences has incredibly comprehensive and relevant resources available to students enrolled in degree programs at the School, with access to sophisticated and timely journals and research that specifically relates to programs of study.

The role of the librarian is important to confirming alignment between the school's educational objectives and alignment with student learning outcomes. Librarian Lyn Fischback works in concert with the Director of Assessment and Institutional Research (DAIR) in assessing alignment between outcomes at the level of course, program, and institution. She is also a key component in assessing core competencies through assessment efforts in faculty-directed workshops. Attachment: CFR 3.5.01 Librarian Job Description
Attachment: CFR 3.5.02 Librarian Resume of Qualifications

The library at KPSAHS is one branch of 36 kpLibraries within the Kaiser Permanente organization. Each is staffed by a professional librarian. The entire collection is made up of over 100,000 books, media, and e-books, 2,500 print journals, and over 1,800 electronic journals located at the various branches or online through the KP Clinical Library.

Coordination takes place between the Librarian and the Program Director when specific course outlines and syllabi identify research needs and or the benefit of information literacy detail.

Finally, as a part of the Outcomes Assessment of co-curricular efforts, the School examines how the library supports the various programs and courses and evaluates how to integrate future use of library resources with program curriculum. The intent is to increase and document information literacy as a learning objective in particular courses, and to increase information literacy skills among students. Attachment: CFR 3.5.03 Plan for Collection Development

The primary campus site in Richmond has a computer lab that contains 22 computers on the Kaiser intranet and is primarily for classroom use. All computers are maintained by Kaiser Permanente's IT department. All computers have basic internet capabilities and the Microsoft Office Suite. The library at KPSAHS maintains 10 computers specifically for student use in the library setting.

The information resources also extend beyond those of the library. KPSAHS is fortunate to have access to a Learning Management System (LMS), KPScholar, developed by the Director of Training as an amalgamation two open source software pieces: *Moodle* and *Drupal.*

The integration of these two systems, actually a Learning Content Management System (LCMS), allows faculty, students, healthcare practitioners and community groups of share academic or project materials, and facilitates distance or hybrid learning environments. In summary, the merged software facilitate: technology enhanced instruction; hybrid instruction; and asynchronous learning. While this system has been in place and used for some time, KPSAHS specifically now also supports academic requirements for students enrolled in the degree programs.

The GE curricula was created by School faculty, consistent with the School's educational objectives, and aligned with student learning outcomes. Instructional delivery, via KPScholar, allows degree students to maintain the rigorous schedule for completion of program-specific courses, while completing upper division GE requirements, in an asynchronous and online modality. Students who have completed all subject-specific courses have the flexibility of the KPScholar for delivery of the GE coursework while off-site.

CFR 3.5 Attachments
Attachment: CFR 3.5.01 Librarian Job Description
Attachment: CFR 3.5.02 Librarian Resume of Qualifications
Attachment: CFR 3.5.03 Plan for Collection Development

CFR 3.6

The institution's leadership, at all levels, is characterized by integrity, high performance, appropriate responsibility, and accountability.

The School benefits from the Medical Director oversight and direction of Dr. Darryl Jones. Dr. Jones is a professional medically-qualified clinician, who provides administrative and directional oversight for the allied health fields of study for the School. He also is a member of the KPSAHS Board of Directors.

The Permanente Medical Group (TPMG) is the corporate-affiliate of the larger Kaiser Permanente operation that is "physician-based" and operated; it was in the context of this physician-based segment of Kaiser Permanente that the School was founded. At the inception of the school, TPMG mandated that oversight and responsibility for the school be "physician-directed" in keeping with its charge. Discharge of this responsibility historically is reflected in the role and relationship between the KPSAHS Medical Director, Dr. Jones, who functions analogous to a "Chancellor" role in a more traditional setting, aligned with the more administrative arm of the school. (Attachment: CFR 3.6.04 Medical Director Bio and Job Description).

Dr. Jones, a clinician in his own right, has direct responsibility for the Assistant Medical Directors of the School, each of whom is a clinically-qualified physician. These Assistant Medical Directors work in a collegial capacity with the Program Directors of the three core degree programs (Sonography, Radiography, and Nuclear Medicine).

The benefit to the School of this physician-led curricula and instruction oversight is the availability of medical expertise ensuring the programs offered and delivered are aligned with the needs of the medical community, that the programs are eligible for and maintain program accreditation, and that clinical oversight and access to the necessary clinical resources of the School programs are appropriate and available.

Discharge of responsibilities by the Assistant Medical Directors (AMD's) is evidenced by the ongoing relationship the school maintains with its programmatic accreditors, validation of appropriate curricula and learning outcomes, and the role of the AMD's in contributing to the recommendation and selection of program candidates through the admission process. These AMD's are also the "physicians-in-charge" for change or modification to the programs they represent. (Attachment: CFR 3.6.05Assistant Medical Director Job Description).

At the more administrative level, KPSAHS has an excellent leadership team. The School added additional critical positions to the Leadership Team: the Associate Director of Finance, the Student Services Administrator, and one position within Academic Affairs, the Director of Assessment and Institutional Research. Recently the School filled a Senior Financial Analyst role reporting to the Associate Director of Finance. (Attachment: CFR 3.6.01 KPSAHS Organization Chart; Attachment 3.6.02 Updated Organization Chart; Attachment: CFR 3.6.08 Director of Assessment- Institutional Research Job Description; Attachment: CFR 3.6.09 Bert Christensen, Director of Assessment and Institutional Research – Resume; Attachment: CFR 3.6.10 Job Description – Senior Financial Analyst

The Leadership Team has appropriate academic and experiential backgrounds, Both the CEO (Regional Administrator) and CAO (Director of Academic Affairs) are graduates of the 2012 WASC Academic Leadership Academy (ALA), and the Director for Program Review and Assessment graduated from the Academic in January 2014. All members of administration and faculty have participated in WASC-related Conferences and Workshops to support development of the WASC Self Study.

The CEO, James Fitzgibbon, and CFO, Mary McDonald, have liaison responsibility to TPMG. This ongoing communication with the larger corporate entity is instrumental in establishing and maintaining the linkage for purposes of Institutional and Strategic Planning, as well as securing commitments of resources that support and enrich the School (Attachment CFR 3.1.01 Administrator Resumes; Attachment CFR 3.1.10 Administrator Job Descriptions).

Because the School operates under provision of the WASC "Related Entity" Policy, the CEO's job performance evaluation occurs jointly with both TPMG and the KPSAHS Board of Directors. The extensive performance review addresses goal setting, measures of accountability, and effective communications. The Performance Review is conducted initially by TPMG, and then forwarded to the Board of Directors. Each entity, TPMG and the Board, has dual-responsibility in the review process, with the BOD retaining the authority to recommend reassignment for the individual in that position. (Attachment: CFR 3.6.07 Recent CEO Performance Review).

The KPSAHS Board of Directors comes from a range of academic and experiential backgrounds that complement the School Mission and Learning Outcomes at all levels. This Board was established in direct response to the School decision to qualify for WASC accreditation, and the School has taken great care to establish a primary Board sensitive to and appreciative of, the needs of the general community, the student population, and the programs of study (Attachment: CFR 4.5.01 Board of Directors Bios). While the Leadership Team has responsibility for review and evaluation of all positions within its individual components of responsibility, the majority-independent Board of Directors reviews and evaluates the performance of the CEO, with the authority to hire and replace this individual. (Attachment CFR 3.6.06 Job Performance Evaluation Policy and Documents for the CEO).

The school takes great pride in having no history whatever of adverse actions relative to the state regulatory agency, BPPE, or programmatic accreditors in the discharge of responsibility to the school.

CFR 3.6 Attachments

Attachment: CFR 3.6.01 KPSAHS Organization Chart
Attachment: CFR 3.6.02 KPSAHS Updated Organization Chart
Attachment: CFR 3.6.04 KPSAHS Medical Director Bio and Job Description
Attachment: CFR 3.6 .05Assistant Medical Director Job Description
Attachment: CFR 3.6.06 Job Performance Policy and Process for the CEO
Attachment: CFR 3.6.07Recent Review for the CEO
Attachment: CFR 3.6.08 Director of Assessment and Institutional Research Job Description
Attachment: CFR 3.6.09 Bert Christensen, DAIR – Resume
Attachment: CFR 3.6.10 Job Description – Senior Financial Analyst

CFR 3.7

The institution's organizational structures and decision-making processes are clear and consistent with its purposes, support effective decision making, and place priority on sustaining ==institutional capacity== and ==educational effectiveness.==

 The School's organizational structures and decision-making processes confirming the structures and processes are clear, consistent with its purposes, support effective decision making, and place priority on sustaining effective academic programs were presented with Attachment: CFR 3.6.02 Updated Organizational Chart.

The Faculty Senate serves as the initial "decision-maker" relative to issues related to Academic Affairs, and recommendations for curricular modification and changes with instructional delivery. Recommendations and proposals from Faculty Senate are vetted through School leadership, and to the Board for support, ratification, or consideration.

The Leadership Team reviews all policies and procedures, moving forward to the Board of Directors those policy and implementation procedures that require Board ratification.

CFR 3.8

The institution has a full-time chief executive officer and a chief financial officer whose primary or full-time responsibilities are to the institution. In addition, the institution has a sufficient number of other qualified administrators to provide effective educational leadership and management.

The CEO (Regional School Administrator) for KPSAHS focuses exclusively on leading and managing the School. The CEO directs the Leadership Team consisting of the Director of Academic Affairs (CAO and ALO), the full-time Associate Director of Finance (CFO) and the Student Services Director. These administrators each lead a staff focused on supporting the School Mission.

The School has an excellent history of retention of primary administrators, contributing to the consistency of operation. In addition, one responsibility of the newly-establish the Board of Directors is the review and applicability of the organizational chart and the appropriateness of the Leadership Team to accomplish the School proposed outcomes.

CFR 3.9

The institution has an independent governing board or similar authority that, consistent with its legal and fiduciary authority, exercises appropriate oversight over institutional integrity, policies, and ongoing operations, including hiring and evaluating the chief executive officer.

See also CFR 1.5, 1.6, 1.7

Related documents: Independent Governing Board Policy, Related Entities Policy, Institutions within a System Policy

KAISER PERMANENTE®
SCHOOL of ALLIED HEALTH SCIENCES

938 MARINA WAY SOUTH
RICHMOND, CA 94804
510-231-5000 / TOLL FREE: 1-888-299-0077
WWW.KPSAHS.ORG

The Board of Directors for KPSAHS acts as the independent governing board representing the breadth and depth of experience required for an institution of higher learning (Attachment: CFR 3.9.01for Conflict of Interest Policy; Exhibit: Board of Directors Manual). The Board of Directors membership list and biographic profiles are provided in Attachment: CFR 4.5.01 The School is moving forward with this independent Board, with the Nominating Committee implementing the policy and process for adding additional independent Board members, to provide more diversity with Committee participation and to enhance the expertise available to the School. The most recent addition to the Board was appointed to the Board, officially installed as a Board member at the February 2014 meeting. Efforts are currently underway to identify an additional member with a history in administration and policy development in higher education.

The Board of Directors also works in concert with TPMG in assessing the financial needs and resources available to the School as it continues its path toward regional accreditation. (Exhibit – Board of Directors Manual).

The TPMG Strategic Plan forms the foundation for all institutional planning. This Plan was originally implemented in 2009, and is reviewed and modified annually; this plan is being supplemented in 2014. The School is currently working with outside consultants to propose, in concert with identified focus groups, the process that will evolve into a School-specific Strategic Plan. Already identified issues for consideration with this Plan, include: a) increased marketing efforts to expand the base of Bachelor-of-Science candidates; and b) potential modification to the curriculum-delivery and curricula of the School Core programs.

The Financial Plan was established in concert with the Workforce Strategic Plan and is modified as required. The Board formally meets four times a year, and has agenda items for review to ensure ongoing awareness of progress toward the Plan as proposed (Attachments: CFR 3.9.02 Historical Board Meeting Minutes; Attachment: CFR 3.9.03 Board Meeting Minutes of Independent and Newly-Established Board.

Board training and self-review is a high priority. Present orientation to the Board role includes detail on strategic planning, financial updates, personnel staffing, Assessment Strategies; School Performance Outcomes, and changes and trends in higher education. Board members are also invited to participate in the WASC-conducted workshop for School Presidents and Board Trustees. In the future, the Board will give consideration to a possible off-site for orientation, training, and self-review.

The Board of Directors conducts an annual evaluation of the Chief Executive Officer (Attachment: CFR 3.6.06 CEO Evaluation Policy and Process) in concert with the Job Performance Evaluation Process established and in place with TPMG. The first annual review by the Board of Directors occurred in December 2013, and will follow with a comprehensive review within the next three years

CFR 3.9 Attachments

Attachment: CFR 3.9.01 for Conflict of Interest Policy
Attachment: CFR 3.9.02 KPSAHS Board Meeting Minutes – Historical
Attachment: CFR 3.9.03 KPSAHS Board Meeting Minutes – Present Board
Attachment: CFR 3.9.04 Board Meeting Agendas Examples
Exhibit ___: Board of Directors Manual

CFR 3.10

The institution's faculty exercises effective academic leadership and acts consistently to ensure that both academic quality and the institution's educational purposes and character are sustained.

See also CFR 2.1, 2.4, 2.5, 4.3, 4.4

Related documents: Collective Bargaining Policy, Diversity Policy

School instructional faculty, through Program Directors, the Director of Academic Affairs, and the Faculty Senate, clearly confirm the history of academic leadership representing the School. Attachment: CFR 3.10.01 Faculty Senate By-Laws. The Committee-structure in place with the Faculty Senate, elicits faculty-directed input relative to committees for: Curricula; General Education, Assessment.

Responsibility for development and review of curriculum, program review and assessment of course and program learning outcomes aligned with Institutional Outcomes is a recognized responsibility of the faculty. The Director of Institutional Effectiveness (Program Review and Assessment), has participated in WASC-related workshops, the most recent being the Student Success Workshop in January 2014, followed by administration and program Director participation in the 2014 WASC April 2014 Conference.

The Program Review Handbook and Assessment Manual have been updated, to reflect the integration and benefit of being able to develop the review/assessment model beyond the accomplishments sustained with program accreditation. The history of each of these program accreditors in validating acquisition of competencies further confirmed through subject certification and licensure also speaks to quality and relevancy of the educational programs, further attestation of sustainability. Attachment CFR 3.10.02 – Program Accreditation Chart and Summary

CFR 3.10 Attachments

Attachment: CFR 3.10.01 KPSAHS Faculty Senate By-Laws
Attachment: CFR 3.10.02 Program Accreditation Chart and Summary