Standard 4 Version 8 5-14-2014

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

The institution engages in sustained, evidence-based, and participatory self-reflection about how effectively it is accomplishing its purposes and achieving its educational objectives. The institution considers the changing environment of higher education in envisioning its future. These activities inform both institutional planning and systematic evaluations of educational effectiveness. The results of institutional inquiry, research, and data collection are used to establish priorities, to plan, and to improve quality and effectiveness.

Overview

KPSAHS is a school founded in thoughtful and purposeful creation and delivery of programs to benefit the fields of allied health care. From its inception, under auspices of the parent TPMG, both the school itself and the programs it offers have been developed in response to consideration of needs of the health care community. A hallmark of the planning process from which the school benefits, is the full integration of information on which decisions are made.

The changing environment of higher education coupled with the significant resources and data informing the development and need for qualified health-care providers was the impetus for the degree programs for the School. Assessment of workforce needs, integration of research, and access to sufficient and appropriately qualified administration, physician-directed faculty, and a Board comprised of leaders in the health care community are all components contributing to the ______for achieving educational outcomes.

TPMG provides many resources to assist in supporting both daily operations and long-term strategic planning for the School. One of these resources is a Workforce Forecast Model that projects future medical imaging needs by service area and by individual job group; this basic information assesses the need for future program expansion, and identifies employment opportunities in the fields of study. As one of the nation's largest integrated medical systems, Kaiser Permanente operates 37 hospitals and over six-hundred and eleven medical centers, employing almost 17,000 physicians and 173,000 employees in nine states and the District of Columbia; the alignment of the School with this major health care entity gives the School immediate awareness of strategic business imperatives.

At a macro-level, KPSAHS receives information on strategic planning and delivery methods from all of the local medical centers, and makes use of national level key information, benefiting from coordination with community leaders. All of these resources are tempered by the cautionary perspective of programmatic accreditation and all of these perspectives serve to move the School forward with critical data upon which decisions are based and priorities established.

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The institution employs a deliberate set of quality-assurance processes in both academic and non-academic areas, including new curriculum and program approval processes, periodic program review, assessment of student learning, and other forms of ongoing evaluation. These processes include: collecting, analyzing, and interpreting data; tracking learning results over time; using comparative data from external sources; and improving structures, services, processes, curricula, pedagogy, and learning results.

See also CFR 2.7, 2.10

Related documents: Distance Education and Technology-Mediated Instruction Policy, Program Review Resource Guide, Substantive Change Policy, Substantive Change Manual

Quality assurance has long been at the center of modification to the School program curricula, but it was previously directed by the program accreditors. The move to secure regional accreditation reinforced the awareness on the part of administration that the



responsibility for curriculum development, review, and assessment is now the responsibility of the School itself. This change of perspective comes about because the School had never before had institutional accreditation with focus and responsibility including the full scope of sustainability, leadership and management beyond the narrower bounds of program accreditation. The intent is to maintain program accreditation recognition for programs and to enhance those programs of study, but assessment efforts are now directed with a different sense of responsibility, and with proactive measures that clearly recognize and articulate the goals, purposes, and effects on student learning, consistent with projected student learning outcomes.

The School is fully-engaged in the implementation of quality-assurance processes, which involves recognition of all aspects of the functionality of the School, and validation of outcomes at all levels. Through active involvement of the Board of Director and the School Leadership Team, review and assessment of both curricular and co-curricular efforts are a primary focus, as is responsibility to the broader communities of higher education and allied health care.

To ensure sufficiency of resources and exposure to a variety of experiences, KPSAHS has developed an extensive supplemental network of clinical sites through a diverse range of hospital facilities in the region. Kaiser medical center-specific clinical sites are with a percentage of sites that are non-Kaiser locations. Working with a range of clinical sites and preceptors increases the diversity of student experiences, providing greater assurance of employment in the field.

Graduates are successful in gaining employment in hospital, clinical, and medical settings within the greater allied health network, in part, based on successful verification of clinical competency. Quality assurance, monitoring for successful implementation of learning outcomes, and the ongoing challenge to maintain currency in the field of study, has been the academic and instructional backbone of the KPSAHS operation.

A primary example of implementation and awareness of quality assurance was the School-initiated effort to assess two areas fundamental to validation of institutional and programmatic outcomes. The School commissioned a Focused Review conducted by professionals in the fields of Institutional Research and Program Review, and Assessment of both curricular and co-curricular efforts. This review was conducted in April 2014, prior to submittal of the WASC EER Report, to affirm the internal operation of assessment, effectiveness, and integration of best practices.

The School believed the current operations of review and assessment were credible and effective, but wanted to establish the ways in which data was collected, analyzed, interpreted, and how learning and outcomes on all levels could and would be tracked over time. With assessment of the current operations through the Focused Review, the School was able to make changes that enhanced the collection of data, the way it was aggregated/disaggregated, assimilated within the scope of recommended change for improvement, and addressed within the construct of the School-specific Strategic Plan, already in operation.

The School secured the services of two higher-education specialists, with the assignment of conducting a "Focused Review" on the subjects of Program Review/Assessment/Institutional Research (PRAIR) and Student Services for evaluation of both curricular and co-curricular efforts; these were the two areas in which the School determined they would best benefit from external expertise. The outside consultants both have academic credentials and higher education expertise in WASC-accredited institutions. (Attachment: CFR 4.1.01 Resumes of Focus Team Professionals)

The purpose of this focused review was to address evidence the institution engages in sustained, evidence-based, and participatory self-reflection about how effectively it is accomplishing its purposes and achieving its educational objectives. More specific than meeting WASC expectations, however, was to direct appropriate resources to meet internal expectations of what represents a stellar institution of higher education with regional accreditation, and programs of study and instruction in the fields of allied health.

Following the intensive two-day review, the Team provided a basic "roadmap" to establish and meet best practices. The Report ((Attachment: CFR 4.01 Recommendations and Implementation Plans – Focused Review) established timelines, benchmarks, and a transition path from current status to accomplishments proposed for the future.

Faculty-directed quality assurance of the academic programs is evidenced with a newly-proposed modification to the delivery of the degree programs. The Director of Academic Affairs in concert with Program Directors and the Faculty Senate, has proposed a



comprehensive and far-reaching modification of the KPSAHS Bachelor of Science programs to be given due-consideration by the Board of Directors. (Attachment CFR 4.1.03 Schematic of Degree Program Restructure and Delivery)

Impetus for the proposed change is multifaceted: 1) a desire to deliver courses in a different way to provide students with a stronger foundation as they transition into positions as entry level imaging professionals; 2) better alignment between student experiences and outcomes with stated institutional outcomes; 3) providing students an opportunity to synthesize knowledge learned in the program of enrollment into a final project; and 4) to leverage operational efficiencies that exist within the school instructional delivery options.

The ultimate benefit projected with the proposed modification is a value-added program of instruction at the degree level, with enhancements in courses, a more tightly structured component of upper division general education, and the opportunity for cross-fertilization between programs of similar natures. Changes are not substantive, rather the existing components of the program are assembled in a different form and order with the result being creation of a culture unique to the school of Kaiser Permanente. The opportunity is also deployed to allow for assessment of outcomes at all levels from the collective of the degree student population. Independent of subject matter, degree program candidates will now have courses in common, at the beginning, and at the end of the program.

At each step along the process of any proposed change is the sensitivity to not disadvantage currently enrolled students, to not compromise the integrity of outcomes so painstakingly forged, but to enhance all three core programs offered at the degree level.

Essential changes for the degree program integrate the following:

- Students from all core programs will take the following courses jointly: a) Patient Care; b) Introduction to Imaging; c) Medical Ethics; d) Scientific Inquiry; and e) Capstone. All of these courses currently exist with the exception of the Capstone course.
- Students from the Radiography and Nuclear Medicine programs will take the following courses jointly: a) Radiation Physics; b) Cross-Sectional Anatomy; c) Radiation Safety and Biology; and d) Computers in Medical Imaging. All of these courses currently exist.
- Medical Ethics and Scientific Inquiry have been taught as upper division general education courses, but are now being identified as subject-specific courses. As a result of moving these two courses from the General Education category into program-specific courses, the General Education Committee of the Faculty Senate will be identifying additional courses to serve as upper division GE coursework, most likely from options such as, Leadership, Management, Statistics, and Service.

The changes as proposed, if adopted, would be introduced in a way that does not create disruption, but it does require changes in the processes and timelines for admitting students, for registering and enrolling these students, and for close attention to the resources required in the form of faculty availability and access to clinical facilities. (Attachment: CFR 4.1.04 New Program or Major Revision Proposal – DRAFT)

To accomplish these changes without disruption of the current operation, the following next steps are anticipated:

- Program Directors (PDs) will contact program accreditors for any modification required under the accreditation standards and guidelines.
- PD's will hold mandatory workshops with all faculty, to include the Director of Assessment/IR and the Librarian, to review the proposed changes and assess what controls need to be put into place.
- Final details of the program as proposed, and all anticipated ancillary issues, will be submitted to the Curriculum Committee and the General Education Committee of the Faculty Senate for review and approval.
- Faculty Senate formal approval would be sought before early summer.
- Start date for the new construct delivery of the degree programs, when and if approved, is slated for Fall 2015. This date will allow time to conclude instruction in the current mode and form of the degree programs, restructure of the admissions process to allow all students to begin the program on a date in common, and ensure sufficient clinical placement options for all students as they conclude didactic instruction.

CFR 4.1 Attachments



Exhibit 2 Program Review Manual

Exhibit 4 Assessment Manual

Attachment: CFR 4.1.01 Resumes of Focus Team Professionals

Attachment: CFR 4.1.02 Recommendations and Implementation Plans – Focused Review

Attachment: CFR 4.1.03 Schematic of Degree Program Restructure and Delivery Attachment: CFR 4.1.04 New Program or Major Revision Proposal - DRAFT

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The institution has institutional research capacity consistent with its purposes and characteristics. Data are disseminated internally and externally in a timely manner, and analyzed, interpreted, and incorporated in institutional review, planning, and decision-making. Periodic reviews are conducted to ensure the effectiveness of the institutional research function and the suitability and usefulness of the data generated.

See also CFR 1.2, 2.10

To date, institutional research upon which the School depends has been provided through TPMG. TPMG has a Division of Research, the largest in the US outside of a university or governmental setting, which serves as a research resource for clinicians for the medical groups. This resource, especially in concert with the TPMG Strategic Planning, provides for improved medical practice at all levels, and access to institutional research that fuels the opportunity for increased attention to the educational programs that prepare future clinicians. This research has been in alignment with Workforce Planning, and with assessment of future health-care needs for the greater and expanded community of health care providers and health care recipients. With the advent of a School-specific Strategic Plan, identification of needs and access to comprehensive and applicable institutional research will be available both through the TPMG-affiliation and with KPSAHS-sourced data as well.

Kaiser Permanente School of Allied Health Sciences is now directing its efforts to align School-specific available data with the charge of assessing and validating student learning outcomes. Assessment of student learning outcomes and academic/student service functions is from the perspective of an institution of higher learning that offers degree programs in the fields of allied health, but with benefit of the TPMG world-view perspective.

Under charge of the programmatic accreditors, the school has been responsible for documentation of data relating to program enrollment, retention/attrition, graduation, licensure/certification, and employment in the field of study. The history of this data will also track key-performance indicators of degree-enrolled participants. To assist in this collection of data, the School has implemented CampusVue as the Student Information System (SIS), providing the benefit of accessing data that can be aggregated or disaggregated in monitoring outcomes.

Recommendations from the Focused Review encourages expanding the current resources of institutional research (IR) to allow for a concentration and focus on data specific to the school operation, and with integration of key performance indicators. This concentration also provides for making IR data readily available to all constituents of the school environment and enhancing the access to relevant data upon which decisions will be based. More immediate service and access to information will be provided with: a) a dedicated-individual able to recognize the needs of each department; b) creation of a report matrix to allow consistent timelines for response of required and on-going reports; c) a cross-reference validation to ensure the accuracy of information; and d) creation of a data entry protocol to ensure consistency of operation.

A related recommendation is to combine systems used to capture student-specific data (Campus Vue, KP Scholar, ParScore and Scantron) into a centralized data collection system; this will maximize the benefits of Campus Vue to allow for aggregated/disaggregated data for reporting purposes.



CFR 4.3

Leadership at all levels, including faculty, staff, and administration, is committed to improvement based on the results of inquiry, evidence, and evaluation. Assessment of teaching, learning, and the campus environment—in support of academic and co-curricular objectives—is undertaken, used for improvement, and incorporated into institutional planning processes.

See also CFR 2.2, 2.3, 2.4, 2.5, 2.6

TPMG owns its own Technology Group, which designs new ways to use health information technology to enhance patient care experience, assist physicians in their practice, and stimulate new approaches to care delivery; these resources also assist KPSAHS in determining future needs of the health-care community. This information, based on inquiry, evidence, and evaluation is coupled with the academic and administrative leadership of the School and Board of Directors.

Leadership at all levels of KPSAHS is committed to improvement of the institution. Overall direction of the School comes from the Board of Directors, with close ties to the parent organization of TPMG, bringing invaluable resources in the form of Workforce Planning and providing the committed fiscal support for the total School operation. This fully engaged Board of Directors brings both experiential and academic qualifications from health-care leadership roles of the larger world of higher education institutions, such as the Mayo Clinic, UC, Davis, and UC, San Francisco. The Board Chair is the Employment Program Manager for the City of Richmond, and former Manager of the Workforce Investment Act Program, a source for data around which TPMG built much of its Strategic Plan. This august Board provides leadership through review and direction based on data collected for inquiry, evaluation, and assessment of the current School operation.

The academic component upon which the School draws, is also professionally appropriate. Structurally, the Medical Director, Dr. Darryl Jones, has oversight of all curricular, academic, and instructional issues, with dotted line responsibility for the Director of Academic Affairs. The Director of Academic Affairs, ALO/CAO, has immediate hand-on oversight for instructional faculty to include the Program Directors (PD's) for core programs and the Director of Assessment and Institutional Research (DAIR), so a very professionally-oriented and academically-focused compact unit exists for the component of the School addressing curriculum development, review and instructional delivery.

What is not as visible is the large infrastructure of the academic component of the School comprised of the clinical settings, the preceptors, and the Assistant Medical Directors (AMDs) for each of the core programs. The clinical assignments for each degree program provides validation of all learning outcomes projected from the theory-directed didactic coursework. In these clinical settings, students demonstrate mastery of competencies; it is from this tightly-knit framework and the practical application of all theoretical components acquired in programs of enrollment, that outcomes are actually evidenced.

In addition to instructional faculty and preceptors, physicians from TPMG provide instruction in the classroom setting, sometimes co-instructing with members of the Assistant Medical Directors (AMD's). TPMG prides itself on training the next generation of physicians through its residency programs and strategic partnerships with medical schools across the country. That background of experience and commitment to teaching, coupled with the development and support of KPSAHS assures a strong pipeline of well-trained and educated health care professionals available as a critical resource. Physician-instructed courses provide students with ongoing access to medical professionals, reinforcing the teaching and learning environment of the School.

KPSAHS also benefits from the commitment TPMG has made to the campus environment with resources directed to Student Services and student success. A newly-funded position has been created to support the Student Services component of the school, with a search currently underway. Although Student Services is a recent addition to the leadership structure, development of cocurricular efforts related to Orientation and Student Satisfaction and Accomplishment are also well underway.

The focused review of the internal operations of program review and assessment provide the opportunity to build on accomplishments already realized through program accreditation. With significant input from faculty and program directors, learning outcomes at all levels have been identified and are being assessed. Rubrics designed to address proposed outcomes have been developed along with timelines for implementation of assessment efforts. (Attachment: Exhibit 2 – Program Review Handbook)

The unique nature of KPSAHS programs with curricula prescribed by program accreditors and on-site review with subject-specific experts provides the desired external review of the programs. Assessment of progress with the creation, implementation and assessment of the program review efforts themselves, subject to external reviewers from both program accreditors and professionals in the field allow the School, the students, and the academic community at large to benefit from recommendations from objective parties.

CFR 4.4

The institution, with significant faculty involvement, engages in ongoing inquiry into the processes of teaching and learning, and the conditions and practices that ensure that the standards of performance established by the institution are being achieved. The faculty and other educators take responsibility for evaluating the effectiveness of teaching and learning processes and uses the results for improvement of student learning and success. The findings from such inquiries are applied to the design and improvement of curricula, pedagogy, and assessment methodology.

See also CFR 2.2, 2.3, 2.4, 2.5, 2.6

Assessment is not new to KPSAHS; course and program assessment is fundamental to the program accreditation the School enjoys for all core programs, but the concept of assessment being initiated by faculty was not a part of the process before WASC. The culture of the School has long understood, appreciated, and applied assessment strategies, and for the most part these measures had been driven by the program accreditor expectations, with faculty and Academic Advisory Committees (AAC's) reporting out accomplishments from the quantitative perspective of retention, graduation, and licensure or certification pass rates.

A major change to this culture, with the move to secure WASC recognition, is that the administrative team and faculty of the School now direct assessment efforts through critical review of courses and programs, calculated involvement in identifying student learning outcomes appropriate at each level, aligning outcomes to each successive level of instruction, and validating those outcomes. This same process has applicability to co-curricular efforts. The qualitative assessment of student learning, with alignment of outcomes from the institution through programs and courses, and in concert with the mission of the School, is in full operation.

The paradigm shift to incorporate qualitative assessment with quantitative recognition, has created a new responsibility for the faculty/instructor/administrators. This shift has reinforced the investment of resources in bringing the faculty into settings where they have personal and professional involvement in the design of curricula, the design and practice of pedagogy, and in the improvement of evaluation means and methodology. Faculty and academic administration are now regular participants in assessment-directed workshops enhancing their skills in applying assessment tools and strategies. (Attachment: CFR 2.1.03 Faculty Professional Development)

CFR 4.4 Attachments

Exhibit 2 Program Review Manual Exhibit 4 Assessment Manual

CFR 4.5

Appropriate stakeholders, including alumni, employers, practitioners, students, and others designated by the institution, are regularly involved in the assessment and alignment of educational programs.

See also CFR 2.6, 2.7

The professional nature of the KPSAHS degree programs, all in allied health imaging, and of the School itself housed and "parented" within the construct of the Kaiser Permanente culture, has undergone a shift. The traditional Kaiser Permanente focus was on Performance and Strategy, Labor Management Partnerships, and Community Benefit; this historical perspective established the foundation of understanding, appreciation, and support for moving the School strategically forward.



With this rich underpinning, the School is now engaged in building a learning organization, supporting a culture of performance, and contributing to developing tomorrow's health care providers and leaders. The TPMG expectations translate perfectly to the future and focus of the Kaiser Permanente School of Allied Health Sciences.

Academic Advisory Committees, a fundamental component of the School program review and assessment of education effectiveness, are an excellent resource for engaging employers and practitioners in the assessment of educational effectiveness for the School programs. This "external stakeholder perspective" ensures the program curricula includes the theory and practical application required to result in the learning outcomes required for competency in the fields of study.

Program instructional faculty are qualified practitioners in the field through their certification and licensure, supported with appropriate continuing education and advanced degrees in higher education. Their background and professional experience direct the efforts to develop and support curricular activities, co-curricular support, and strategic planning with perspective and insight from the fields of study. Clinical preceptors, also a part of the KPSAHS-community for instruction and assessment, are qualified and employed professionals in the field, from whom students benefit on a daily basis.

KPSAHS also has the unique advantage of a degree-eligible student population comprised of many students who have already successfully completed prior educational programs. Students come to the School fueled by the knowledge they possess with the capacity to move forward in their newly selected field of study, confident in their ability to complete and succeed in their KPSAHS programs of enrollment.

Finally, the Board of Directors is comprised of experts in the allied health fields of study, and in workforce planning and strategic planning, who are themselves invested in regionally accredited institutions of higher learning. This body is responsible for the highest levels of decision-making and in establishing future School direction. The Board members understand the communities being served, the workforce and workplace needs upon with strategic decisions are founded, and the resources required at all levels to effect positive outcomes. (Attachment: CFR 4.5.01 KPSAHS Board of Directors Biographies)

Students have an opportunity to participate in regional professional societies, such as the Bay Area Society Echo (BASE), Sacramento Echo/Vascular Society (SEVS), and the American Society Echo (ASE). This provides them with interaction with professionals in the field, reinforcing future prospective roles in which they can engage.

CFR 4.5 Attachments

Attachment: CFR 4.05.01 KPSAHS Board of Directors Biographies

4.6 The institution periodically engages its multiple constituencies, including the governing board, faculty, staff, and others, in institutional reflection and planning processes that are based on the examination of data and evidence. These processes assess the institution's strategic position, articulate priorities, examine the alignment of its purposes, core functions, and resources, and define the future direction of the institution.

See also CFR 1.1, 3.4

Kaiser Permanente School of Allied Health Sciences is a degree-granting institution offering bachelor-level programs in fields of imaging in allied health studies, supported by one of the largest healthcare providers in the country. This background, perspective and mission, represent an awareness of the future of health care. Decisions made strategically by the institution are framed, in part, based on awareness of the needs of the population served by health care providers. The history of the greater Kaiser Permanente corporation, and the history of ethical responsible-data based decisions, is a basic foundation upon which the school was developed and operates.



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Within the context of the TPMG/KPSAHS environment, an additional benefit to the School is the wealth of research avenues that provide for full examination of the future needs in the field, through assessment of Workforce Planning, and setting priorities that align with future expectations for employment options and health care needs; this fundamental information allows the School to shepherd its resources responsibly.

The Kaiser Permanente School benefits from the "parent" relationship of TPMG. This relationship ensures KPSAHS access to an incredible array of clinical settings, in which student learning outcomes are acquired and refined. Administrative resources in the position of a Medical Director to whom the School reports, a well-qualified administrative team which includes Assistant Medical Directors who serve in advisory capacity to the three core programs of study, and a Board of Directors with practicing professionals in the fields of study, provide an array of enviable resources.

Academic Advisory Committees are a part of each of the three core programs, and include Assistant Medical Directors, department managers and clinical preceptors, as well as alum and employers. Meeting minutes confirm the review of academic programs. progress with admission actions, and outcomes that relate to retention and completion and certification/credentialing of program graduates.

Faculty direct all assessment activity and program review. Through effective faculty committees of Curriculum, Assessment, and General Education, faculty review and contribute to the creation and updating of learning outcomes, at the level of the institution, program, and course. Course reviews, and maintaining currency with programmatic accreditors, requires an ongoing commitment from faculty to confirm learning outcomes are appropriate, are measureable, and that they align at all levels. Using assessment tools of rubrics and curriculum mapping, faculty have become increasingly sophisticated in applying the tools to assess student learning outcomes, and to make modifications where appropriate.

All resources of KPSAHS, from the Board of Directors, through administration, faculty, and staff, are engaged in the institutional planning necessary to ensure strategic application of data in meeting the needs of the profession, of the health care industry, and to accomplish the outcome goals within the School setting. All activities that have qualified KPSAHS for regional accreditation recognition to this point are employed toward the goal of verifying student learning outcomes.

A review of accomplishments to date, coupled with the dedication of critical decision-making actions, to include:

- KPSAHS faculty engagement in enrolling and completing graduate-level degrees (Attachment: CFR 2.01.01 Faculty Qualifications);
- commitment to professional development functions to develop and assess learning outcomes at all levels (CFR 2.01.03 Faculty Professional Development Plans);
- underwriting of the necessary human resources; and
- formation of a Board of Directors that includes professionally relevant leaders in the programs of study

all point to the full support and endorsement of the TPMG/KPSAHS Strategic Plan and the School-specific plan being developed.

At a macro-level, KPSAHS administration keeps the Board of Directors informed about the focus and direction of learning outcomes, how those outcomes are represented within the Institutional Plan of operation, and with strategic planning proposed direction. Mindful of fiscal resources, decisions are made, priorities are established, and strategic direction occurs with full knowledge of the data upon which these decisions are based. As an example, using financial forecast data, the school projected a 15% increase in tuition costs to 2014. (Attachment: CFR 4.6.02 Financial Forecast to 2014)

A decision was made in late 2013 to research and initiate a Strategic Plan specific to the School. While the TPMG Strategic efforts are at the "macro" level, the School plan would address the more "micro view" needs of the School. A consulting group has been engaged to initiate focus groups to study student perceptions of "campus climate" as a precursor to securing data and formulating school-specific plans and priorities. (Attachment: CFR 4.6.01 KPSAHS- Specific Strategic Plan – Projected [Weiss Study])

The future Strategic Planning for the institution, while still relying on the TPMG Workforce Data, will include a component that is institution-specific. Proposed issues to address unique and specific to KPSAHS for 2014, include:

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- Marketing efforts to increase recruitment and enrollment in School degree-programs (See CFR 1.6);
- Implementation of formal plans for Program Review and Assessment;
- Support of faculty and staff professional development to address the "culture of assessment" (Attachment: CFR 2.8.02 Promotion of Scholarship and Creative Activity with Faculty Ranking);
- Budgeted staffing positions for 2014;
- Alignment between degree program development, delivery, and fiscal support;
- Development of upper division general education coursework delivered by KPSAHS.

Chronology for the School-specific strategic planning efforts are detailed below:

- April 23, 2014: Three Focus Groups: 1. First year students 2. Second year students 3. Employer/Imaging Directors
- May 8, 2014: Three Focus Groups: 1. Preceptors 2. Alumni 3. Faculty and Staff
- June 5, 2014: Two Focus Groups: 1. Physicians 2. Prospective Students
- July 18, 2014: School Planning Session I
- Board of Directors Planning Session Date TBD
- School Planning Session II Date TBD

CFR 4.6 Attachments

Attachment: CFR 4.6.01 KPSAHS- Specific Strategic Plan – Projected (Weiss Study)

Attachment: CFR 4.6.02 Financial Forecast to 2014

4.7 Within the context of its mission and structural and financial realities, the institution considers changes that are currently taking place and are anticipated to take place within the institution and higher education environment as part of its planning, new program development, and resource allocation.

See also CFR 1.1, 2.1, 3.4

Nothing better reflects the opportunity for Kaiser Permanente School of Allied Health Sciences to anticipate the future education needs of prospective students and the entire health care environment it is intended to serve, than words Dr. Robert Pearl, Executive Director and CEO of The Permanente Medical Group directed to the TPMG Board of Directors. "We need to ensure that we have an exceptional pipeline of physician leaders capable of leading change in the complex and changing health care environment we face. Through excellence in leadership development, we can not only make a positive difference in the lives of our patient and colleagues, but also define how health care in the 21st century should be delivered."

These words, from the head of the KPSAHS parent-affiliate that has provided ongoing support and endorsement of the School since its inception, coupled with the School mission (Attachment: CFR 1.1.01 Mission Statement) establish the reference upon which future direction of programs, anticipated outcomes, projected strategic planning, and fiscally-responsible decisions are framed.

The academic and experiential background of top school administration and faculty, and the vision upon which future resource decisions of human capital, fiscal and physical resources, and strategic planning efforts and direction, are based. Expansion of the Board of Directors, enhancing the already enviable body of professional experts in health care development and delivery, higher education experience, assessment of future workforce needs, and sound fiscal management, reinforces the experience upon which important decisions will be made.

The expertise of administration also figures significantly into the future of the School. Oversight of the School is under the direction of Dr. Darryl Jones, Medical Director and practicing physician, supported and reinforced by the Assistant Medical Directors (AMD's) that work in support of each of the three program subjects. This "physician-directed" oversight, maintains the integrity of efforts aligned with recognized needs in the service community, while reinforcing the professionally-directed programs of coursework.



Dr. Fitzgibbon, CEO for the School, has excellent academic credentials in both allied health and business, with earned degrees from regionally accredited institutions; he also brings an experiential background in fields of allied health both in the United States and internationally. Gregory Wheeler, ALO and School Director of Academic Affairs, has an appropriate academic background with completion of a master's degree in business and program certification in Imaging; his experiential background with KPSAHS is from 1994 through the present time, with increasingly responsible roles within the School.

Mary McDonald, a member of the KPSAHS administrative leadership team and full-time CFO has academic credentials in Health Care Management, a master's degree from St. Mary's College, and with background and experience in managing financial operations throughout the United States. She is well-qualified to meet expectations of her role for the School.

The School has also created a new administrative position, reporting directly to the CEO, providing academic credentials and expertise in the broader field of higher education. The purpose of this important addition to the School administrative and leadership structure is anticipatory of the future of the School and the role it will play in addressing higher education needs.

The framework established from which Kaiser Permanente School of Allied Health Resources will move forward its mission, goals and visions, speaks well to the recognition of our changing environment, the higher education world to which we are responsible, and the ability of this institution to achieve success.