Year Three Evaluation
Oregon Health & Science University
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A confidential report of findings prepared for the Northwest Commission on Colleges and Universities

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Introduction

The Oregon Health and Science University (OHSU) is Oregon’s only comprehensive public academic health center. As such, its mission differs significantly from those of most of the colleges and universities in the Northwest region. OHSU delivers 46 educational programs leading to degrees or certificates, operates teaching hospitals, and has a major focus on research. Academic programs are offered by four schools, Dentistry, Medicine, Nursing, and Pharmacy. Of its nearly 3,000 students, over 70% are graduate and professional students and 65% of the degrees OHSU awards are in the health professions. Of its $1.9 billion annual budget, about 68% is derived from patient services revenue, 21% from gifts, grants, and contracts, 3% from tuition and fees, and only 2% from state appropriations.

OHSU last submitted a Comprehensive Self-Study in March 2005. The subsequent evaluation report included ten recommendations. These were addressed in progress reports (April 2006, April 2008, and October 2009) and a focused interim report (October 2006). In March 2010 OHSU submitted a 5-year Interim Report to NWCCU. There were two recommendations following that report and a site visit: (1) Provide clear authority and responsibility to those accountable for ensuring that educational program planning is based on regular and continuous assessment of programs to meet the institution’s needs. (2) Ensure that all academic programs have student learning outcomes, assess achievement of the outcomes, and use the assessments to lead to program improvement. OHSU’s accreditation was reaffirmed by NWCCU in August 2010. In March 2011, OHSU submitted a Year One report, beginning a new cycle of reporting under the revised accreditation standards and process. There were two recommendations relative to that report: (1) The institution should articulate the acceptable threshold of extent of mission fulfillment for all identified indicators in the Standard One report. (2) OHSU should review and refine its indicators of achievement to ensure that the indicators are meaningful, direct measures of the objective. The Year Three report that is the subject of the current review and site visit was submitted only one year after the Year One report, as OHSU is following an accelerated schedule.

In 2010, the NWCCU evaluation noted a lack of permanent leadership in certain important positions. OHSU has filled several of those key positions recently, including Provost and Vice President for Academic Affairs (Dr. Jeanette Mladenovic); Chief Financial Officer (Mr. Lawrence Furnstahl); and Vice President and Chief Administrative Officer (Mr. Norwood Knight-Richardson). Two dean positions are currently filled on an interim basis, School of Dentistry and School of Nursing.

Assessment of the Self-Evaluation Report and Site Visit

The Oregon Health and Science University prepared a comprehensive and informative Year Three report. The self-evaluation process included broad participation and appropriate direction and oversight from the upper administration. In general, the individual chapters of the self-evaluation appropriately address the elements of the accreditation standards that are required in the Year Three report, related to institutional governance, resources, and capacity. All requests for additional information made by the NWCCU review team were promptly fulfilled.

The self-evaluation report content was verified by interviews with administrators and a range of faculty, staff and students. Discussions were also held with several members of Board of Directors regarding report content and other issues. Relevant institutional websites were examined.

The evaluation team thanks OHSU for facilitating our visit, particularly Dr. Nancy Goldschmidt, Dr. David Robinson, Ms. Sarah Kennedy, and Ms. Geri Lutes. Their help is greatly appreciated, particularly their
making sure that we didn’t get lost in our travel between meetings. We thank everyone that participated in preparing the documents that we were sent to review. We also appreciate the time that many OHSU faculty, staff, and students took to meet with us and talk about their work and experiences at the university.

Evaluation

Eligibility Requirements 2-21

As documented in the Year Three report (pp. 11 and 26-28) and confirmed during meetings with the Board of Directors and senior administrators during the site visit, Oregon Health and Science University meets all NWCCU eligibility requirements.

Standard 1. Mission, Core Themes, and Expectations

The mission statement of OHSU was approved by the Board of Directors in 2005. Faculty, staff, and administrators participating in meetings with the site review team were generally familiar with it, and agree that the mission statement is appropriate for the institution. The mission statement was consistently cited as the basis for the core themes and objectives chosen. In addition to the mission statement the Board of Directors approved six strategic goals, in December 2007. Many of these are manifest in the objectives developed in the course of defining mission fulfillment, illustrating that the institution has connected its major planning processes into the accreditation self-study.

OHSU has defined mission fulfillment in terms of objectives and indicators developed under the four core themes of Learning Environment, Interprofessional Education, Clinical and Translational Research, and Health System and Health Policy Leadership.

For the Learning Environment theme, three objectives have been established:

- Develop a student pipeline to meet the health needs of an increasingly diverse Oregon and nation.
- Provide a supportive learning and work environment for diverse students, faculty and staff.
- Insure rigorous and effective programs through better coordination of review processes (institution-wide, regional accreditation, specialized accreditation that certifies the quality of specific programs, institutional academic program review, and student/graduate student licensure and certification.)

For Interprofessional Education, there is one objective:

- Promote an institutional culture and infrastructure that enhances interprofessional health education.

For Clinical and Translational Research, the objectives are:

- Promote research career development to provide [a] “career ready” in biomedical science workforce.
- Maintain OHSU’s prominence as a research university.

For Health System and Health Policy Leadership, the objectives are:
• Ensure all OHSU students gain knowledge about population health policy.
• Bridge academic research health policy and community practice to improve public health.

Over the past decade, faculty and practitioners within each health profession have recognized the need to change the instruction and learning of students. Improving skills related to working effectively as a member or leader of an interdisciplinary team, effective interprofessional communication, cultural competency, and implementation of systems-based quality improvements is seen as very important. However, few educational institutions have made the major changes in curriculum and learning environment that are required. OHSU’s Interprofessional Education theme is an unusually large shift in the conventional approach to health professional education.

**Commendation 1:** OHSU is commended for a remarkably collaborative approach to planning and execution of its mission, as reflected in the interprofessional education core theme and the broad participation of faculty, staff, and students in planning of the Collaborative Life Sciences Building.

Recommendation 2 relative to the Year One report was, “OHSU should refine its indicators of achievement to ensure that the indicators are meaningful, direct measures of the objective.” Partly in response to that Recommendation and partly due to internal reassessment of the objectives and indicators, there has been a dramatic revision. Formerly there were about 16 objectives and 45 indicators; now there are only six objectives and 23 indicators. This is clearly an improvement and will be more manageable as the institution prepares the Year Five and Year Seven reports. The chosen objectives are more clearly aligned with the mission statement and the strategic goals approved by the Board of Directors in 2007, as well as to trends in specialized accreditation requirements.

**Compliment 1:** The institution has chosen to challenge itself by selecting important core themes and objectives that, in several instances, substantially exceed its current performance.

However, institutions need to define mission fulfillment with care, because performance falling below mission expectations (in the OHSU terminology used in its definition of mission fulfillment) on multiple indicators at the time of the Year Seven report could be problematic. Institutions have chosen to define mission fulfillment in several ways, but the commonest are (a) based on current, satisfactory performance of the institution itself, or (b) based on the range of performance of peer institutions. Definitions of mission fulfillment should consider the normal variation that may occur due to factors outside the institution’s control. Such variations shouldn’t lead to the conclusion that an institution is not fulfilling its mission.

Most of the indicators meet the requirement of being meaningful and direct measures of the objective. Some are more meaningful in the context of further explanations provided by OHSU administrators and faculty during the site visit. For example, indicators for Objective 1.1 (Develop a student pipeline to meet the health needs of an increasingly diverse Oregon and nation.) include percentage of the students completing degrees within 100% of program time, rather than an indicator that would seemingly be more directly relative to the objective, number of graduates. The explanation is that the number of admitted students is determined based on workforce needs and institutional capacity, so the % completion does relate directly to workforce needs. In the Year Five and Year Seven reports, additional explanation of some indicators will help reviewers understand their relationship with the defined objectives. A few of the indicators appear to need more definition in order to be useful. For example, 2.1.2, Proportion of identified interprofessional curricular activities, needs a definition of what types of
activities are included and, perhaps, some way of appropriately counting widely different kinds of activities, e.g., a one-day seminar vs. a semester long course.

Note that it’s still acceptable for OHSU to change indicators and thresholds at this point. If another indicator would be more meaningful, it’s best to change it now rather than to use something that would be less valid. The rationale for changing an indicator would need to be included in the next evaluation report submitted to NWCCU.

The main difficulty with the indicators is that some of them don’t yet have any mission fulfillment thresholds articulated. That issue was the basis of Recommendation 1 regarding the Year One report. Seven of the indicators don’t yet have threshold values. It’s understood that the recent changes in the indicators and the fact that some of them represent information that the institution has not collected in the past makes articulating mission fulfillment thresholds difficult. Nonetheless, this needs to be accomplished quickly so that the Year Five and Year Seven reports can be completed. Thresholds identified in the Year Three report can be changed if that seems necessary once more information is collected. Again the rationale for the change needs to be included in the next NWCCU report.

Recommendation 1: The institution should articulate the acceptable threshold or extent of mission fulfillment for all identified indicators. (Standards 1.A.2 and 1.B.2)

A second significant problem with one indicator and threshold (1.3.2) is that implementation of student learning outcomes assessment is not yet complete. Following the comprehensive self-study and evaluation in 2005, OHSU received a Recommendation to develop a regular, institution-wide educational assessment program. In 2006 they submitted a focused interim evaluation report, and the response to that report included a Recommendation to implement the recently designed educational assessment process. In 2010 OHSU submitted a 5-year interim report, and the response to that report included a Recommendation “Ensure that all academic programs have student learning outcomes, assess achievement of the outcomes, and use the assessments to lead to program improvement.”

The Year Three report does not require reporting of assessment data. However, discussions during the site visit revealed that, while the separately accredited professional programs have implemented student learning outcomes assessment, the certificate, Master’s and Ph.D. programs without separate accreditation have just finished the step of stating expected learning outcomes as required by Standard 2.C. 2. There are no assessment plans, no information collected, and no related program improvements as yet in many cases. Those interviewed mentioned that some programs have small enrollments and only a few graduates per year. Those programs need to be assessed as well, but perhaps the assessment could be approached in clusters or groups of related programs, using a shared assessment process on many elements.

It’s clear that there has been substantial recent effort to implement student learning outcomes assessment for all degree and certificate programs, but the effort is still incomplete. The stated threshold for indicator 1.3.2 is 65-80% of programs with full implementation. This is below expectations of NWCCU; assessment needs to be fully implemented for all programs.

Concern 1: The institution should fully implement student learning outcomes assessment for all degree and certificate programs. (Standards 4.A.3 and 4.B.2)
Summary of Compliments and Concerns for Standard 1.

Compliment 1: The institution has chosen to challenge itself by selecting important core themes and objectives that, in several instances, substantially exceed its current performance.

Concern 1: The institution should fully implement student learning outcomes assessment for all degree and certificate programs. (Standards 4.A.3 and 4.B.2)

Standard 2A. Governance

The institution has an active Faculty Senate. While this organization has existed for many years, since 2005 its participation and influence in university decision-making has increased. The current Provost has been particularly supportive of a substantial faculty role in the governance of the institution. Senate members have been involved in the development of the core themes and objectives, in planning for new facilities, in development of the academic program review process, and in revision of the Vision 2020 plan, particularly focusing on diversity initiatives. Senators report that they take their responsibilities in representing the faculty seriously, and there is a central website to communicate Senate activities to all faculty. Individual representatives also report back to their home units and solicit input on various issues.

Students reported that they felt that they have an appropriate voice on issues that concern them, through the All Hill Student Council and other avenues. They appreciated administration responsiveness to student concerns about rising tuition and fees and health insurance costs. The students want affordable tuition and fees, and also predictable rates of increase so that a student entering the program will know what his or her costs will be. They also would transparency about all costs including fees; while tuition information is provided to all incoming students, information on some fees is not, according to the students.

The Board of Directors has ten members, and of these only the university President is an employee of the institution. OHSU’s Board (as represented by three individuals) is active, involved, well-informed and passionate about the institution that they govern. They state that they have an active role in setting strategic directions for the institution, that they have a good working relationship with the institution’s upper administration, and that there is good communication between the Board and administration. The Board has evaluated its performance regularly since 2006 and finds that it is doing a good job in its role. The Board chair is delegated the responsibility of evaluating the OHSU President annually.

The OHSU president manages through a nine-member executive leadership group. These individuals, consisting of the provost and vice president for academic affairs, the executive vice president and director, hospitals and clinics, the chief financial officer, the chief administrative officer and vice president, the dean of the school of medicine, vice president for research, vice president and general counsel, the president of the OHSU foundation, and the chief of staff, adequately represent the major functional areas of the institution. The administrators of OHSU, including its president, are highly qualified for their positions by both training and experience. The Provost carries primary responsibility for assessment and effectiveness of academic programs and for institutional accreditation. She (and predecessors in the position, with the leadership of the executive vice provost) has established strong collaborations across the institution to develop and refine the core themes and objectives, define
thresholds of mission fulfillment, and begin centralizing the collection and reporting of the indicator data.

Academic policies are established and communicated both by the central administration and its advisory groups and by the schools. The Policy Advisory committee has responsibility for recommending policies and policy changes, which are approved by the executive leadership group and ultimately, the president. The policies are published in the OHSU policy manual, which is available to all faculty, staff, and students through an intranet. The Provost’s Office has recently established an Academic Policy Advisory Committee, which will develop institution-wide academic policies and set minimum academic standards. Each school publishes a student handbook that includes academic policies and procedures, and each also publishes other policy documents, such as a faculty handbook or a web-based compilation of policies. Student rights and responsibilities are explained in the student handbooks of each school and the expectation of academic honesty included in an institutional code of conduct. These policy documents appear to conform to normal practices of academic institutions in the United States, as well as the standards of health professional schools and their specialized accrediting bodies.

The OHSU Board of Directors establishes minimum admission standards at the undergraduate and graduate level. As is common, admission to the professional schools is highly competitive, and most OHSU programs have admission requirements that exceed the minimums, which are published in student handbooks and on admissions websites. Dismissal and appeal policies are also clearly articulated and readily available to students.

OHSU has the usual institutional policies on employee conduct, which are based upon Federal guidelines where applicable. In the context of its health care delivery and professional education programs, it also offers substantial ethics training and education programs. For example, the School of Medicine Undergraduate Medical Education program includes at least 36 hours devoted to ethics.

**Standard 2.B. Human Resources**

OHSU is the largest employer in Portland with more than 14,000 employees working in the university, healthcare, research, and central services (logistics, facilities, and general support of the infrastructure). This complex organization employs many individuals in multiple types of positions—faculty, management, union, and non-union positions. Human Resources staff members work across the many departments and executive areas to provide services and support.

OHSU employs an adequate number of qualified personnel to operate the many functions of the organization. Human Resources, in collaboration with other departments, put in place procedures and systems to track and standardize hiring processes. Job descriptions are reviewed by appropriate personnel and revised to accurately reflect duties, responsibilities, and qualifications for positions. Human Resources has implemented routine checks and alerts for updating job descriptions and essential qualifications. Human Resources oversees the process for background and criminal history checks.

Systems and expectations are in place for the annual evaluation of personnel. New supervisors are trained in providing performance evaluations. Unclassified staff evaluations are expected to be completed prior to staff contract renewals. Reminders are sent to supervisors regarding due dates. Classified staff annual reviews are to be completed annually in accordance with the employee’s date of
Academic departments and leaders oversee faculty evaluations. Different forms and criteria are utilized and associated with faculty promotion and tenure process.

Professional development opportunities are readily available for personnel. Human Resources facilitates orientation programs for new staff. Additionally, on-going training is offered. Human Resources is focused on developing OHSU leaders since they impact employees and the delivery of service to students and patients. New managers are provided support with orientation programs and leadership development programs. Efforts to expand leadership development and training are being proposed.

Human Resources collaborates with OHSU leaders and departments in the effort to increase the diversity of its employees. Human Resources staff are members of the Diversity Advisory Council, support other department diversity programs, and partner with the Center for Diversity and Inclusion to support university efforts associated with this core theme.

Faculty development programs are provided to enhance skills in teaching, research, program development, and grant procurement. Additionally, individual schools and academic programs provide development opportunities. OHSU is a vibrant teaching and research organization. Many opportunities exist that support the professional development of faculty.

OHSU employs a sufficient number of qualified faculty to achieve its educational objectives. Efforts are made to recruit high level experts in their respective fields. Academic programs are delivered at a high level with nationally and internationally recognized researchers and clinicians. Evidence of this talent includes the academic and research awards, grants received, and the highly selective nature of the admission of students. The hiring process for faculty is rigorous.

Faculty responsibilities and workloads are commensurate with OHSU's expectations. OHSU has policies that provide a foundation for faculty work. This provides a consistency regarding expectations. However, each school and program reviews expectations and is provided flexibility to address the educational goals of the unit.

OHSU faculty are evaluated on a regular basis. Department chairs or directors are responsible for the process and implementation. Policies and/or faculty handbooks in each of the schools or departments detail specific performance criteria and processes. Human Resources personnel collaborate with academic departments to assist.

**Standard 2.C. Education Resources**

OHSU programmatic offerings are consistent with its mission to educate healthcare professionals. The content and rigor of these programs are appropriate to each level offered: entry-level professional; graduate-level professional and graduate-level science and management; and leadership in the health sciences and the healthcare industry.

As an institution with a clear focus on first health professional and graduate degree offerings, OHSU does not offer general education coursework. Also, as would be expected for an institution of this type, several programs do not accept transfer students due to the nature and regimentation of curricula. For those programs that do allow transfer credit, OHSU has published transfer policies and has articulation agreements with specific partner institutions that allow for academic credit transfer. OHSU has full
authority and control regarding the transfer credits it does accept. OHSU does not offer academic credit for prior experiential learning, nor does it provide non-credit instruction.

OHSU offers one applied degree program at the associate level, the paramedic education program. The program, which leads to an Associate of Applied Science degree (A.A.S.) is offered jointly with the Oregon Institute of Technology, is fully accredited, has clearly defined learning outcomes, and is staffed with qualified teaching faculty. OHSU also offers post-baccalaureate and post-master’s level certificate programs. These certificate programs have defined student learning outcomes and are staffed with qualified teaching faculty.

OHSU’s graduate programs align with the institution’s mission, given that they are awarded in disciplines that are either health science related or health business management and leadership oriented or represent advancement beyond an entry-level professional degree. The graduate programs also support OHSU’s mission to “explore new basic, clinical and applied research frontiers” as well as the mission to “translate these discoveries...into application in the health and commercial sectors” (pp. 11-12, OHSU Self-Evaluation Report, March 1, 2012). Newly developed student learning outcomes in the graduate programs show progression towards proficiency or mastery in the area of study that would go beyond the expectations for learning outcomes in a baccalaureate level or entry-level professional degree program. OHSU’s graduate programs publish their admission and graduation requirements in a manner that is accessible to prospective and current students. Assessment of transfer credit into a graduate program is determined by policies delineated and enacted by graduate faculty in the school that houses the respective graduate program.

OHSU’s continuing education offerings are wholly managed within the university and are related to the health care education and life-long learning elements of its mission. Additionally, its continuing education programs are accredited through the appropriate practice-related accreditation agency which oversees the content, quality, delivery, and assessment of continuing education program offerings. These practice-related accreditation agencies also oversee the awarding of continuing education units per standards and norms adopted by these agencies.

All programs, including those that do not have specialized programmatic accreditation, have developed and published student learning outcomes (SLOs). The University Assessment Council has oversight not only to ensure that all programs have SLOs, but also to review proposed student learning outcome statements for each program. Student learning outcomes are reviewed by the University Assessment Council and scored according to a rubric that evaluates each outcome based on five criteria (focus, clarity, complexity and mastery, measurability, and alignment) as well as developmental level (awareness, developing, and proficient). All student learning outcomes must achieve the proficiency level (defined as a score of 80% within the rubric) in order to meet the university standard to be posted. Additionally, programs are required to submit information detailing when and where in the curriculum individual SLOs are assessed, methods by which individual SLOs are assessed, and how SLO assessments are scored.

Thus, the institution has gone beyond assuring that SLOs exist for each program to assuring that these SLOs are clearly communicated, are assessable and linked directly to assessments, and are at an appropriate level for students enrolled in health professions and graduate programs. Individual student achievement of SLOs is used to award academic credit and grades according to published standards for grading and progression within each program.
Commendation 2: OHSU is commended for setting standards of quality and rigor that the outcome statements from each program must achieve before they are institutionally accepted and published. (Standard 2.C.2)

Curriculum committees composed of faculty within each school and program have the responsibility to manage curricula to ensure appropriate breadth, depth, sequencing of courses and synthesis of learning. Admission and graduation requirements are clearly defined and published in the appropriate student handbooks and web pages.

At the institutional level, faculty representatives in the Faculty Senate have been actively engaged in the development of the review of all degree and certificate programs that was recently initiated. In this role, the Faculty Senate, in conjunction with the Executive Vice Provost’s office, has developed a centralized organizational structure and protocol for conducting institutional-level academic program reviews.

To that end, all programs have been tasked with developing assessment plans with annual program-level assessment reports. All assessment plans utilize a uniform template which links assessment directly to student learning outcomes. Each program will undergo institutional program assessment every five years according to a schedule set by the Provost’s office, and when assessment is fully implemented it should result in a process that ensures continuous quality improvement. Wide-ranging support for the institutional programmatic assessment process was articulated, along with the feeling that the assessment process would support and complement both specialty and regional accreditation processes. Additionally, the ability to apply this process to programs such as the Ph.D. programs, which had not been assessed in this manner before, was communicated as a strength.

Although all programs are required to submit an assessment plan, as of the writing of this report, not all programs had done so. Additionally, while many programs, particularly those with specialized accreditation, have collected and used assessment data, other programs have yet to set up the structure to collect, analyze and use assessment data for programmatic improvement. As such, programmatic assessment is not complete institution-wide and will need considerable effort and attention to bring all programs into alignment with the institutional standard.

Widespread buy-in by faculty and administration for all efforts surrounding assessment was observed. It is clear that assessment efforts, while supported by the Provost’s office, are truly faculty-driven and that faculty perceive the value in assessment and are committed to assessment and using assessment data to drive programmatic improvement.

Compliment 2: The multifaceted nature of programmatic assessment has created the framework for the creation of, nurturing of, and support for a true “culture of assessment”. This represents the first important step in assessment that will be moving toward data collection, analysis, and use of data for programmatic improvement institution-wide.

Standard 2D. Student Support Resources

Oregon Health Sciences University is a complex and focused organization engaged in preparing students for health professions and offering health care. As such, services to students for their success are focused on their learning and work in the health care industry.
The learning environments for OHSU students are appropriate for the academic programs offered. The classrooms, laboratories, resources centers (library, learning center, etc.), and clinical sites are of high quality and adequate for the educational programs offered. Regarding services for students, OHSU has developed programs assisting students with financial support, academic assistance, health and wellness, a welcoming environment for diverse populations, and appropriate accommodation for disabilities.

Of note, in recent years OHSU has intentionally focused on increasing the diversity of its organization, both students and employees. New organizational structures and partnerships were created, diversity initiatives adopted, and assessment efforts undertaken to assess the climate of the institution. One of OHSU’s core themes focuses on the learning environment with an emphasis on “...recruiting a more diverse and inclusive community....” (p. 15, OHSU Self-Evaluation Report, March 1, 2012). Objectives and indicators have been developed to assess these efforts. This work is in the early stages for OHSU even though some staff members have been working on these efforts for a period of time. Recently, OHSU hired a Chief Diversity Officer. It is significant to note that this person is also the Vice President and Chief Administrative Officer. Finances have been increased for the departments focused on this effort, annual diversity plans are required by most departments, a definition of diversity has been approved, outreach efforts to recruit students and employees are being implemented, and partnerships with area businesses and state agencies have been initiated. Some of the objectives and indicators are still being developed and the OHSU leadership acknowledges that this work is just getting off the ground. However, there seems to be a significant amount of energy focused on this effort.

Commendation 3: OHSU is commended for its commitment to increasing the diversity of the student population and its employees. Resources are earmarked, procedures developed (and continue to be developed), and staff hired and charged to tangibly address this goal. (Standards 2.B.4, 2.D.1, and 2.D.3)

Regarding student learning needs and academic assistance, OHSU has a fairly decentralized system. Most academic assistance programs offered to students are attached to specific academic programs. Because each academic program is specialized, the learning assistance programs are developed and provided by the specific school. Some general programs (e.g. study skills, time management) are offered to the student body.

OHSU takes adequate measures to assure for the safety of persons and property. OHSU’s Department of Public Safety provides emergency and preventative services throughout the day. DPS is in a transition and is moving to a police department model whereby officers will have increased authority and a closer working relationship with local law enforcement. OHSU reports crime statistics according to the U.S. Department of Education guidelines and maintains a website to inform the OHSU community about policies and safety information.

The recruitment and admission of students is implemented in accordance to OHSU’s vision statement to be a “national leader in health and science innovation.” The admitted student rate for most academic programs is very low. Each school sets the standard of admission for its programs. The Enrollment Management office assists with the schools’ respective admission processes by being the custodian of data filed in the Banner database. Orientation programs are facilitated by each school/program to address the acclimation needs of its students. Student handbooks are available to students providing necessary information regarding academic expectations, policies, and requirements for academic progress and completion.
Typical information found in a university catalog is accessible to students on the OHSU website. This includes: University mission and core themes, entrance requirements, policies and procedures, academic program and course information, learning outcomes and completion expectations, timelines, contact information for administrators and faculty, tuition, fees, and aid, and the academic calendar. Information is available to students regarding eligibility requirements for licensure and entry into occupations. Since OHSU is focused on the healthcare industry, significant efforts are made with publications and programs to assist students in the transition from the classroom to the clinic and other medical occupations. During the self-study, one academic program identified a problem with this standard and is in the process of correcting the shortfall.

The Enrollment Management staff assures for the secure storage of student records. Hard copy files are appropriately secure in fireproof cabinets. Electronic records are secure with appropriate permissions and precautions taken for confidentiality. Academic transcripts are digitally imaged. OHSU utilizes SCT Banner for data management and records for registration and financial aid processes. All records are backed up and a contract is in place for third party storage of archives. Staff are appropriately trained in FERPA and issues surrounding the confidentiality of records.

OHSU utilizes the Department of Education database for processing financial aid. OHSU awards $75 million in aid annually. Reports are made in accordance to federal regulations. Information is provided to students about eligibility for scholarships and grants. Debt management, repayment obligations, and financial planning programs and counseling are offered to students. This is basic information and is in compliance with what is required. The Enrollment Management leaders would like to offer additional information, especially related to OHSU graduates entering the healthcare field. The medical students receive additional information that is provided by their respective school. Expanding that program to other schools and graduates would be beneficial. Although the average debt incurred by OHSU graduates, especially in the graduate programs, is high, the default rate by OHSU graduates averages less than 1%.

One issue discussed at multiple meetings was the affordability of an OHSU education. This was mentioned by the academic leadership and the enrollment management team. An analysis was done to determine contributing factors to the rate of tuition and, in turn, the indebtedness of graduates. These efforts identified some factors and some schools offered additional scholarship funding.

Students reported that they are advised well in their respective academic programs. Some programs are very prescriptive in the curriculum, especially in the first and/or second year. Other academic programs allow students to explore and specialize. OHSU has an online tool, DegreeWorks, which enables students, staff and faculty to assist students in their completion of degree programs. Most academic programs have an administrative advisor who assists students. Evaluation of advising is evident in some academic programs. The student feedback indicates strengths and areas for improvement. The OHSU self-study identified the need to train more of the faculty advisors so that all of them are able to access information electronically, thus providing better advising.

Co-curricular activities are consistent with the institution’s mission. More than 50 student interest groups are officially recognized. A student center is available to students and the OHSU community for programming. Space and programs are available for recreation, fun, and commemorative gatherings. Educational activities (e.g. stress management programs, documentary films) are planned and implemented. Less formal places are available for students to hold group study sessions, play the piano, and relax. OHSU provides adequate support for these community activities.
Students are provided opportunities to give feedback and input about the operation of OHSU. Surveys (e.g. climate survey, LCME student survey, student council survey) have been administered and feedback considered. Additionally, students have a governance system that provides opportunity for input regarding OHSU operations, educational programs, and support. The All Hill Student Council meets regularly. Members of the university administration have been invited to council meetings to discuss pertinent academic and community issues. Minutes of council meetings are available on line. Students are invited to be active members of university governance processes (e.g., accreditation, fee structures).

OHSU does not operate housing for students. However, students were surveyed about the possible development of housing if demand is evident. Food services are provided through OHSU and offered around campus in 13 venues. OHSU is closing its bookstore as it is no longer economic to continue. Students will purchase books online. A vendor fair is held so that students may purchase medical supplies required for specific academic programs.

OHSU does not offer intercollegiate athletics, as is typical of institutions that focus on graduate and professional education.

Students accessing OHSU systems and online courses must register and use appropriate authorization with unique IDs and passwords. Adequate systems and security measures are in place to protect student privacy.

**Standard 2.E. Library and Information Resources**

The librarians and staff of the OHSU Library, the largest health sciences library in Oregon, are a valuable asset to the university, the clinicians, the students and the people of the state of Oregon. They are dedicated to providing information to improve the health and advance knowledge to the OHSU community. Their mission, vision and values are clearly outlined on the website, but it is in their daily operations that their care to the OHSU mission is demonstrated.

OHSU Library faculty and staff have put considerable energy and intellectual consideration into providing access to information resources that will support the mission and programs of the institution. Librarians add to the library collection continually and analyze the collection annually with a five year in-depth assessment. In addition to owned or subscribed materials, librarians work with faculty to identify the most trustworthy resources on health care topics available via the open web and create subject guides to assist the user in finding the best materials quickly. They proactively search out emerging health care issues that may be of interest to the community and locate resources to anticipate users’ information needs. Borrowing from the Orbis Cascade consortium or via interlibrary loan increases access for the users.

The library collection efforts are supported by OHSU administration, which has increased the library materials budget approximately 8% annually for the last several years. This is an important recognition of the role the library plays as information provider to the community. However, the cost of maintaining this level of support is noted as a challenge in the Office of the Executive Vice Provost (Appendix page 2.A.1.3). The library already has identified its core journals and organized payment for them in a way that will help to protect them should pricing changes adversely affect the library. Continued monitoring of publishing trends and promotion of open access initiatives by the institution will be important.
Planning in the library is informed by data gathered from professional literature, trends in health care librarianship, user feedback, demonstrated user need and administrative direction. Library faculty and staff have exhibited consistent and transparent openness to feedback and that receptivity is recognized and praised by the library users. Surveys, focus groups, interviews, conversations, e-mails, class outcomes and web forms are used as ways to gather information for consideration of potential improvements and needed directions. Position redefinition, new initiatives such as the popular 24/7 after hours study space, and the creation of the Ontology Development group are manifestations of this planning.

Library faculty and staff maintain a visible presence on campus, working to further the goals of the institution. They work collaboratively with others on campus, such as the Teaching Learning Center to further the aim of a seamless user experience. Current planning for the Learning Resources Center, which will occupy 4,000 square feet of the Collaborative Life Sciences building, is an example of collaborative planning. An emphasis on interprofessional education and the anticipated service needs for the users who will reside primarily in this building are informing decisions made about how the space will be used. The library director is heavily involved in working with the planning of this space, and in anticipating ways to insure service is appropriate to the users who inhabit it.

The OHSU Library goals focus on creating a user-centric experience and this naturally puts instruction and support for students, faculty, staff administrators and the public at the core of library service offerings. Librarians strive to reach the OHSU community at point of need. They meet with patrons at various parts of the campus by using a mobile library, they offer reference interactions in person, online via “Ask a librarian,” and electronically 24/7 through the online QuestionPoint service. Appointments with individuals who need research assistance provide the opportunity to emphasize lifelong information literacy skills. Implementation of Adobe Connect allows librarians to screen share and demonstrate search skills to distance learners and remote campuses. Library faculty assist the OHSU community by creating learning tools such as tutorials, subject guides, and working with assignment development and Sakai course pages. All new students are given an orientation to library services and feedback indicates this effort is appreciated and valued by the students. Librarians are planning for additional integration of information literacy with the literature searching and analysis component of interprofessional education.

Faculty indicate satisfaction with the integration of library and information resources in the learning process. In contrast, librarians suggest that more information literacy skills would assist students in their immediate and long term success as health care professionals.

**Concern 2: Improved communication between faculty and librarians concerning available information resources and needed student skills in accessing them will lead to improved effectiveness in reaching institutional goals. (Standard 2.C.6)**

Evidence indicates the institution regularly evaluates the quality, adequacy and use of the library and information resources and services. At times, the library itself is doing the assessment, such as participation in LibQUAL+, which measures users perceptions of satisfaction with a variety of elements of the library experience. In the case of OHSU, the data collected here were used to inform the user services team and to direct efforts towards areas of maximum impact. In other cases, the library is evaluated as a service. For instance, in the most recent OHSU medical student survey of 2011 (LCME), 83% of students indicate the library “meets my needs” with only 7% disagreeing.
In addition to predictable, programmatic analysis, assessments of individual services and particular aspects of the library take place regularly. Resultant findings are used to modify services and to gather data to determine the best course of action. The library acts on these kinds of assessments to provide more user-centric and supportive service.

Commendation 4: The OHSU library faculty and staff are commended for the high level of attention they place on soliciting user input, interpreting user needs and for the way in which those needs drive planning and the development of improved services. (Standards 2.E.2 and 2.E.4)

Standard 2.F. Financial Resources

Financial functions are centralized under the Chief Financial Officer (CFO), who has twenty-three years of career financial experience and one year with the university. The CFO reports directly to the President and has a staff of 400+. The CFO presents to the Board’s Finance Committee at least quarterly and to the full Board quarterly.

OHSU’s 2011 annual revenue was $1.9 billion, of which the University is $0.8 billion and the hospital is $1.1 billion. Its net income was $81 million, with cash flow of $140 million and net assets of $1.9 billion, which, in addition to a strong planning environment, indicates that the University has sufficient funding to achieve its programs, services, and twenty-year facilities plan.

Operating budget targets are given to each of the four mission areas; the hospital, the School of Medicine, research and other academic units. The senior financial officers of each mission unit work collaboratively with their leadership teams and other stakeholders to vet and prioritize spending requests. Once approved at the mission unit, the budgets are consolidated and approved by the executive leadership team and then by the Board of Directors.

Revenue budgets include realistic estimates of grants, donations, hospital revenue and auxiliary services. OHSU accepts between 10% and 15% of its applicants and consistently achieves close to 100% of its student body target. The student body count is 2,802 and will increase with the completion of the Collaborative Life Science Building in 2014.

Auxiliary services include parking, which covers its costs and its debt service, food service, which has a small subsidy, and the bookstore, which is subsidized, but will be discontinued based on the results of a student survey that prefers to have these monies directed elsewhere. Hospital revenue is conservatively grown off of prior year actuals.

The capital budget has input from the four mission units and technology and supports the school’s 10-Year Planning Model. The 10-Year Plan was developed from the University’s Strategic Plan, Vision 20/20, Twenty-Year Facilities Master Plan and their consultant’s recommendations. The capital budget approval process mirrors the approval process for the operating budget. Capital spending is primarily funded by operating cash flow, philanthropy and investment earnings. Funding for the new Collaborative Life Science Building, which will be completed in 2014 is also funded by an $85 million bond. Fitch and Standard and Poor’s rate OHSU’s bonds as A+.
Commendation 5: OHSU is commended for its culture that leads to regular updates and reviews of its ten-year capital plan and current actions to effect multi-year outcomes that support its learning, working and research environment. (Standards 2.F.5 and 2.G.3)

OHSU has a long-range planning outlook. The ten-year cash flow projections are conservatively built, updated regularly, and recognize future risks such as higher retirement charges, a loss of stimulus funding, and a higher than preferred maximum annual debt service coverage (3 versus a desired 1.4). OHSU has addressed these areas by taking action on a $100 million cost reduction plan that was developed in conjunction with two consultants (McKinsey and PWC). Most of the cost savings come from overhead synergies between mission units and there is no evidence that monies will be taken away from the learning experience. The long range plan ties into the twenty-year facilities plan and includes construction of three buildings over the next ten years. Planning also includes debt, which will have a slight reduction over the ten-year planning horizon. Planning is a collaborative exercise and outcomes are shared throughout the institution.

Commendation 6: OHSU is commended for resource planning and development that are realistic, unusually forward-looking and entrepreneurial, and designed to ensure the sustainability of the institution and its academic programs through major changes in the external environment. (Standards 2.F.1 and 2.F.2)

The annual external audit is prepared by PPMG. The most recent audit produced an unqualified opinion and there were no material weaknesses. The auditor was approved by the board and the audit report is presented to the OHSU Finance and Audit Committee prior to being given to the Board. Institutional practice is to bid out the external auditor services every seven years.

OHSU maintains an Internal Audit Department that reports directly to the OHSU General Counsel. The Internal Audit Department presents a report to the Board’s Finance Committee twice a year and to the full Board annually. In 2011, OHSU engaged the Institute of Internal Auditors to assess their Internal Audit program. This internal audit found no material weaknesses and the recommendations are under consideration.

The annual Title IV audit is also prepared by KPMG, which was also approved by the Board and a copy of the report is given to the board. There are no findings.

OHSU has two private nonprofit foundations, the Oregon Health & Science University Foundation (OHSU Foundation) and the Doernbecher Children’s Hospital Foundation (Doernbecher Foundation). Each foundation is overseen by a separate Board of Directors and the OHSU President is a member of each board. The foundations’ assets are managed internally by the Investment Committee, which meets quarterly and works with an outside consultant, Cambridge Associates. KPMG conducts an annual external audit and Grant Thornton conducts the internal audit. There are no audit findings.

The Interim President of the OHSU Foundation has been with OHSU for five years and reports to the Foundation Board Chair with a dotted line to the OHSU President. There is a national search for a permanent Foundation President. The two combined foundations have 110 full-time positions. Total gifts and pledges from 2007 through 2011 total $510 million with an FY12 goal of $91 million.

OHSU does not have a relationship with any fundraising organization that bears its name. However, ‘Friends of Doernbecher’ does grass roots fundraisers like car washes and auctions and this group’s
activities are overseen by the Foundation Board. OHSU has a fundraising code of ethics, which is approved annually by the board. The endowment’s assets were $686 million as of December 31, 2011 and include permanent funds of $423 million and current use funds of $263 million.

**Standard 2.G. Physical and Technological Infrastructure**

Facility planning is led by the Associate VP for Campus Development and Administration. The current incumbent has been in his current job for seven years and has thirteen years’ experience in facility management.

OHSU is located in downtown Portland just outside of the main downtown area. The university was founded in 1887 and has expanded to 387 acres and 130 buildings spread over four campuses. Over the next ten years, Marquam Hill will become primarily an in-patient care and research center, West Campus will remain a primate center, South Waterfront will become OHSU’s primary out-patient care center, and the Schnitzer Campus will be developed to be the primary academic and translational research center. Its first building, the Collaborative Life Sciences Building, will be occupied in 2014.

OHSU left the Oregon University System to become a public corporation in 1995. As such, OHSU “owned” land is distinguished by whether it belonged to the University prior to 1995 or post 1995. All land that pre-dates this change is technically owned by the State of Oregon and leased to OHSU for a nominal sum. OHSU has broad authority to develop and occupy this land, but cannot sell or transfer ownership. If OHSU wants to vacate any of this land it must be transferred back to the State. All land acquired by OHSU after 1995 is owned by the University and can be sold or transferred with approval by the OHSU Board and subject only to donor restrictions.

A Facility Condition Assessment was completed in 2009 and the deliverables are included in their Twenty-Year Facilities Master Plan that was completed in 2011. This assessment is consistent with OHSU’s mission, strategic plan and core themes.

All buildings have been built to or have been retrofitted to at least meet minimum ADA standards. Additional access needs are accommodated as they arise. The grounds are well maintained, clean, satisfactory in quantity, and provide a suitable work and learning environment. OHSU has sufficient equipment that is well maintained.

The university has a written Hazmat policy and the hazardous material programs are supported by web-based and live training. Hazmat compliance is the responsibility of the Director of Environmental Health and Radiation Safety. He has a Ph.D. in Organic Chemistry and has three FTE’s dedicated to managing the proper storage and disposal of waste. OHSU has received over one hundred regulatory visits over the past five years and has received no significant findings.

OHSU has twelve police officers and seven command center employees that are authorized to place suspects under arrest and to transfer citizens to a mental health facility when they become a danger to themselves or others. Safety committees are prevalent throughout the campus and organizationally report into one another. In addition, the student orientation includes safety awareness.

Technology functions are centralized under the Chief Information Officer (CIO) who has thirteen years of career Information Technology experience and fourteen years with the university. The CIO reports directly to the CFO and has a staff of 350. OHSU has seven technology based committees that meet
regularly and are tasked to propose and prioritize technology needs, including those needs from the annual technology infrastructure assessment. The final list is then vetted through the capital budget process.

OHSU’s classrooms and labs are adequately equipped with the appropriate technology and equipment to support their medical education outcomes. Computers are replaced on a four and five year rotating basis. Wireless internet is available in most campus buildings and on some areas of the grounds. The Technology Department maintains an equipment inventory. Some computers are accessible to the students twenty-four hours a day, and the students confirmed that OHSU provides more than adequate computers, software, and help desk support.

OHSU has invested in adequate and appropriate education and medical field software. Oracle and Cognos software are used for accounting, human resources, and reporting needs, Raiser’s Edge for fundraising and alumni relations, and Banner/ISIS and Degree Works for student information and enrollment management. Sakai is used for their online courses and web based training. Training and instruction for staff, administration and faculty is completed in conjunction with software upgrades.

However, OHSU’s website is not user friendly and is hard to navigate. Students complained that they could not find needed information. In addition, making changes to the web pages is difficult and is not timely. At least one major student organization has set up external sites to compensate. Senior leadership is aware of the current website’s shortcomings and have included website infrastructure as a high priority in the capital budget.

**Recommendation 2:** The institution should improve functionality of its website to increase user satisfaction. The institution should remove barriers to the timely addition and revision of its web page content. (Standards 2.G.5 and 2.G.6)

Software training is targeted to the specific audience via web based, classroom style, conference calls and one-on-one training and tutoring. These delivery methods are also used for faculty training, in addition to formal monthly training sessions. Initial student training occurs during orientation, with ongoing training being classroom based and help desk supported.

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**Summary of Compliments and Concerns for Standard 2**

Compliment 2: The multifaceted nature of programmatic assessment has created the framework for the creation of, nurturing of, and support for a true “culture of assessment”. This represents the first important step in assessment that will be moving toward data collection, analysis, and use of data for programmatic improvement institution-wide.

Concern 2: Improved communication between faculty and librarians concerning available information resources and needed student skills in accessing them will lead to improved effectiveness in reaching institutional goals. (Standard 2.C.6)
Conclusion

By the evidence presented in the Year Three report and during the site visit, Oregon Health and Science University has the resources and capacity to accomplish its mission. Through an inclusive process it has identified core themes and objectives appropriate to its mission and has taken initial steps in defining indicators and mission fulfillment. OHSU continues to improve in assessment of student learning outcomes and academic program review, although additional progress in those areas is needed. The institution has adapted to declining state appropriation revenue, continued to attract large amounts of gift revenue despite the difficult economic times, and continues to adjust to changes in health care reimbursement. OHSU engages in proactive financial and facilities planning, helping to ensure that it will have sufficient resources for the future.
Commendations and Recommendations Summary

Commendations

Commendation 1: OHSU is commended for a remarkably collaborative approach to planning and execution of its mission, as reflected in the interprofessional education core theme and the broad participation of faculty, staff, and students in planning of the Collaborative Life Sciences Building.

Commendation 2: OHSU is commended for setting standards of quality and rigor that the outcome statements from each program must achieve before they are institutionally accepted and published. (Standard 2.C.2)

Commendation 3: OHSU is commended for its commitment to increasing the diversity of the student population and its employees. Resources are earmarked, procedures developed (and continue to be developed), and staff hired and charged to tangibly address this goal. (Standards 2.B.4, 2.D.1, and 2.D.3)

Commendation 4: OHSU library faculty and staff are commended for the high level of attention they place on soliciting user input and interpreting user needs, and for the way in which those needs drive the development of improved services. (Standards 2.E.2 and 2.E.4)

Commendation 5: OHSU is commended for its culture that leads to regular updates and reviews of its ten-year capital plan and current actions to effect multi-year outcomes that support its learning, working, and research environment. (Standards 2.F.5 and 2.G.3)

Commendation 6: OHSU is commended for resource planning and development that are realistic, unusually forward-looking and entrepreneurial, and designed to ensure the sustainability of the institution and its academic programs through major changes in the external environment. (Standards 2.F.1 and 2.F.2)

Recommendations

Recommendation 1: The institution should articulate the acceptable threshold or extent of mission fulfillment for all identified indicators. (Standards 1.A.2 and 1.B.2)

Recommendation 2: The institution should improve functionality of its website to increase user satisfaction. The institution should remove barriers to the timely addition and revision of its web page content. (Standards 2.G.5 and 2.G.6)