REPORT OF THE WSCUC VISITING TEAM
SEEKING ACCREDITATION VISIT 2

For Institutions Seeking Initial Accreditation

To California Institute of Human Sciences

March 4-6, 2020

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The team evaluated the institution under the WSCUC Standards of Accreditation and prepared this report containing its collective judgment for consideration and action by the institution and by the WASC Senior College and University Commission. The formal action concerning the institution’s status is taken by the Commission and is described in a letter from the Commission to the institution. Once an institution achieves either candidacy or initial accreditation, the team report and Commission Action Letter associated with the review that resulted in the granting of either candidacy or initial accreditation and the team reports and Commission Action Letters of any subsequent reviews will be made available to the public by publication on the WSCUC website.
TABLE OF CONTENTS

SECTION I. OVERVIEW AND CONTEXT
A. Description of the Institution and Visit.......................................................... 3
B. The Institution’s Seeking Accreditation Visit 2 Report: .................................. 5
C. Response to Issues Raised in Past Commission Letters ............................... 6

SECTION II. EVALUATION OF INSTITUTIONAL COMPLIANCE SEEKING ACCREDITATION VISIT........................................................................... 21

SECTION III. COMMENDATIONS ........................................................................ 47
SEEKING ACCREDITATION VISIT 2
TEAM REPORT SECTION I – OVERVIEW AND CONTEXT

A. Description of Institution and Visit

The institution, California Institute for Human Science (CIHS), is a small non-profit institution that offers one undergraduate, three masters, and three doctoral degree programs aligned with the teachings of the Institution’s founder, Hiroshi Motoyama. Since its founding in 1992, the school has expanded on its vision to create a school in which students could explore the integration of scientific principles and spirituality. CIHS offers Bachelors, Masters, and Ph.D. degree programs in Psychology (California Licensure track or Integral), Integral Studies, Integral Health (including Life Physics specialization), and Comparative Religion & Philosophy (including Yoga Studies Specialization) through onsite, online, and hybrid instruction methods to facilitate degree completion and educational engagement. CIHS is located on a leased campus with ample classrooms and public spaces and enjoys a unique relationship with a Japanese Foundation that provides for generous leasing terms, ongoing financial support, and a passive income stream from additional properties on the CIHS campus.

With the passing of the founder in 2015, and in support of creating an engaged and independent governing board, CIHS has undertaken to continue to advance its mission, which consists of eight principles:

• To Promote a Society which Enhances the Integration of Science and Religion
• To Understand Human Existence from the Total Perspective of Body, Mind and Spirit
• To Establish Guiding Principles for the Citizens of the Global Society
• To Establish Energy Medicine, which will Prevent Diseases and Promote Health
• To Elucidate the Mechanism of the Correlation Between Mind and Body, and to Actualize Mental Control over Body and Matter with a Resulting Better Life
• To Systematize Scientific and Objective Meditational Practices, which will Promote Spiritual Growth
• To Establish a Society which Satisfies both the Individuality (Freedom and Rights) and Sociality (Morality and Coexistence) of Human Existence
• To Establish a Creative Science which Researches the Mind and Soul as well as Matter.

CIHS currently operates under the oversight of the Bureau for Private Postsecondary Education (BPPE). The Eligibility Review Committee (ERC) acted to grant eligibility to CIHS and outlined recommendations for further attention in its letter of November 16, 2016. Since that time, the institution hosted an SAV1 visit in May 2018 and achieved Candidacy for initial WASC accreditation on July 20, 2018.

Since the time of the last site visit, CIHS has experienced a major leadership change: Dr. Hope Umanksy, the former CEO, has left the institution and Dr. Thomas Brophy has assumed the title and responsibilities. In addition, the institution has added staff to expand its academic and operational capacity, including a full time chief financial officer, a half-time Dean of Academic Affairs, a half-time Dean of Admissions and Enrollment Planning, a half-time Director of Continuing Education, a part-time Director of Assessment and Institutional Research, a part-time Dean for Student Life (also Acting
Psychology Program Director), a part-time Director of Joint Yoga Therapy Masters Program, and a part-time Comparative Religion and Philosophy Program Director.

The SAV2 visit was conducted on March 5-6 on site in Encinitas and included in-person interviews with the Board of Trustees, administration, faculty, staff, students, donors, and alumni.

B. The Institution’s Seeking Accreditation Visit 2 Report: Quality and Rigor of the Review and Report

The visiting team found the Seeking Accreditation Visit 2 Report to be consistent with addressing the CFRs referenced in the Commission action letter. CIHS made efforts to address each of the CFRs outlined by the WSCUC visiting team in the July 20, 2018 Commission action letter, which found CIHS to have met all of the WSCUC Standards “at a level sufficient to grant Candidacy.” Section 3 of the institution’s Seeking Accreditation Institutional Report outlined steps taken to address these issues since the last visit. The visiting team notes that the institution submitted a progress report to the WSCUC Vice President Richard Osborn in March of 2019.

The team found the SAV2 report to include descriptions of actions taken by the institution to address areas requiring attention noted in the Commission Action Letter (CAL). Some plans and actions identified were underway but not yet completed, but overall the team found that the institution was moving quickly to address the issues outlined in the CAL. CIHS addressed the required elements of the report, including a response to each identified CFR.
Issues with compliance that were identified by the team and shared with the institution were received by CIHS board members and administration with acceptance and a verbal commitment to engage and improve the alignment of institutional practices with the standards and regional best practices.

The visiting team found faculty, staff, students, alumni, and board members to be fully engaged in the work of accreditation. Furthermore, all constituencies demonstrated a strong commitment to the institution and its mission and values, as well as a budding commitment to embracing the WSCUC standards and to building a culture of institutional improvement. In fact, the CIHS team worked overnight to compile a status update for the team of the institution’s assessment progress.

C. Response to Issues Raised in Past Commission Letters

The Western Association of Schools and Colleges Senior College and University Commission (WSCUC) acted to grant Candidacy to CIHS and outlined the following commendations, as well as recommendations for further attention in its letter of July 20, 2018

The Commission commended CIHS in particular for the following:

1. The engagement of the institution with the WSCUC process and the expressed commitment of the administration, board, faculty, and students to continue to engage in the institutional journey toward accreditation.

2. The demonstrated commitment of the institution to the principles of
independent governance and the establishment of a qualified and engaged 
board of trustees.

3. The enthusiasm exhibited over institutional efforts to build research 
capabilities to fulfill its mission.

4. The strong institutional engagement demonstrated for defining the meaning, 
quality, and integrity of the degrees granted by the institution which will help 
serve as a guide in furthering the accreditation process and in decision-making.

The Commission required the institution to respond to the issues identified 
in the related CFRs below and the language from the Commission action 
letter is cited for each CFR. The team’s general findings regarding the 
institution’s responsiveness to these issues will be outlined in this section of 
the report with more depth provided in the next section, particularly for 
CFRs needing further attention.

**CFR 1.2. Develop and deploy standards for student achievement articulated in 
measurable terms and assessment of learning outcomes; better align these 
standards throughout course materials and program descriptions; and measure 
and assess at the course, program, and institutional level for appropriate and 
intentional communication to students and the public.**

In response to the CAL, CIHS purchased a student information system 
(Populi) and is in the process of inputting historical student enrollment data, 
which the institution believes will be completed in spring 2020. CIHS reports 
that the system will give stakeholders more transparent data, including 
disaggregated data related to graduation, retention, and course-level student
performance. These efforts to expand the use of data and to align student achievement with learning have the potential to support the ongoing institutional efforts at the programmatic level, in planning, and in appropriate communications to students and the public.

**CFR 1.4.** *Implement the approved diversity policy and diversity efforts to achieve the stated goals of a more diverse student body, faculty, and board of trustees.*

Since SAV1, the CIHS Board of Trustees created and appointed members to a Committee on Diversity, and the Chair of the Committee conducted a diversity education presentation for the Board. The institution continues to take steps in its hiring practices to promote the diversification of its faculty, and CIHS reflects that its student body is generally more diverse than the Encinitas community which it serves. CIHS Board of Trustee members, faculty, staff, and administration recognize that diversity and inclusion are a continued opportunity area for growth and reflection.

**CFR 1.7.** *Increase documentation and operationalization of policies and procedures, particularly around student grievances.*

In response to the Commission action letter, CIHS appointed a Dean of Student Life to serve the needs of students and to develop grievance processes. The Dean worked with student leaders to create a Student Advisory Senate (SAS) which drafted bylaws that formalized student leadership and advisory functions.
In addition, CIHS’s new student information system (Populi), currently tracks student grievances, which were reviewed by the team at the time of the visit, and deemed to be processed according to published policies.

**CFRs 2.1 and 2.3.** *Develop appropriate program and course learning outcomes that are expressed in measurable terms, define and clearly describe performance levels for student achievement of program learning outcomes, and link course-level to program-level learning outcomes.*

Degrees awarded by CIHS are clearly defined in terms of entry-level requirements and requirements for graduation. The institution’s educational goals are well understood throughout the institution. However, the expectations for student achievement of PLOs have not been universally identified, and the mapping of course-to program-level learning outcomes is in progress. Further, some PLOs do not have corresponding assessment rubrics that describe performance levels. (Please refer to Section 2 for additional detailed information regarding CFR 2.3.)

**CFRs 2.2, CFRs 2.2a, and 2.2b.** *Develop and implement both a long range plan and well-developed rubrics for the assessment of program learning outcomes, and clearly articulate admissions and graduate degree requirements.*

Since the time of the last visit, CIHS has established a long-range plan for assessing student learning, but is still in the initial stages of implementing the plan, including creating the tools to do so. To date, CIHS has revised PLOs, created some assessment rubrics, and begun the process of assessing student learning at the program level. (Please refer to Section 2 for additional detailed information regarding CFR 2.2.)
CFR 2.4. Develop a faculty-driven process for establishing appropriate standards for student performance.

CIHS has recently created a Faculty Senate, and plans are in place for the development of assessment rubrics. Program Directors are actively involved in planning for and driving the assessment process, and faculty are now charged with syllabus review. However, greater faculty involvement in assessment is needed, such as creating appropriate summative assignments and assessments for each PLO, assessing student learning, and setting and reviewing appropriate standards for performance. (Please refer to Section 2 for additional detailed information regarding CFR 2.4.)

CFR 2.5. Develop formalized summative assessment processes which include the direct assessment of student learning outcomes and ensure timely and appropriate interactions with and formative assessment for students taking courses online.

CIHS is developing its formalized summative assessment processes, which now include the direct as well as indirect assessment of student learning. CIHS’s academic programs actively involve students in their learning, as well as consider students’ prior knowledge of the subject matter. Students report that faculty provide opportunities for students to practice and apply what they have learned, and are increasingly providing them with ongoing feedback about their performance and the ways in which it can be improved. The institution is encouraged to further develop and formalize expectations and processes for timely and appropriate interactions with and formative assessment for students taking courses online.
**CFR 2.6.** Map the development of program learning outcomes across the curriculum, assess student learning at or near graduation in order to establish that graduates achieve the expected student learning outcomes, and compile and analyze data on graduates’ achievement of learning outcomes.

CIHS has made substantial progress in terms of creating an assessment framework and initiating its assessment of the student learning process. The institution has yet to build on the foundation it has started by assessing all PLOs to determine whether students meet expectations for student learning at or near graduation. Additionally, the institution has yet to compile and analyze graduate student learning and achievement data and use those results to make improvements in teaching and learning.

(Please refer to Section 2 for additional information regarding CFR 2.6.)

**CFR 2.7.** Develop a comprehensive and systematic program review process that includes the assessment of student achievement of program learning outcomes, retention, and graduation rates, board pass rates and licensure, and an external review component.

While CIHS has made substantial progress in terms of articulating PLOs and starting to assess them (having completed the assessment of several PLOs prior to the visit), the institution has not yet fully developed its assessment and program review processes. The institution has scheduled and initiated its program review process, and reports that it will acquire program review data pertaining to student success as well as program effectiveness and viability in the months ahead. These data can then be disaggregated in meaningful ways to help the institution make informed decisions that promote student success. (Please
refer to Section 2 for additional information regarding CFR 2.7.)

**CFR 2.8.** *Identify expectations for faculty research and scholarly activity and demonstrate commitment to and provisions for support for these activities.*

**CFR 2.9.** *Clearly define expectations for and linkages among scholarship, student learning, and service within the faculty evaluation process and procedures.*

CIHS faculty are highly accomplished and many are prolific researchers, having published numerous books and scholarly journal articles. CIHS has recently enhanced its institutional commitment to scholarship by providing dedicated funding for faculty research and by revising its faculty evaluation process to include the expectation for faculty scholarship. Actions identified by the institution include the articulation of expectations regarding faculty research as well as expectations for research into teaching and learning. Student and faculty collaborative research projects are also currently underway.

CIHS has established and is using a three-pronged system for faculty assessment: student evaluations of courses/instruction, Dean’s evaluations from class visits (set out on a protocol), and faculty self-evaluations (set out on a form that uses Boyer’s 4 categories of “Scholarship” – Discovery, Integration, Application, Teaching). In addition, faculty scholarship is assessed on a “Faculty Scholarship Assessment Form.” Faculty submit a “Professional Development Form” that lists their involvement in professional activities so that the institution can begin to collect data regarding professional activities and faculty scholarship.
CFR 2.10. Collect and analyze both aggregated and disaggregated data related to student satisfaction and achievement in order to identify needs and make improvements in student support and achievement.

CFR 2.13. Develop and implement a process for assessing the quality of student support services and identifying students’ learning support needs and use these assessment results to improve and enhance student support.

Since the time of the last visit, CIHS has hired a part-time Director of Institutional Research and Assessment and has created an Institutional Effectiveness Committee. The institution administers course evaluations and other types of curricular and teaching assessments but has not yet compiled and disaggregated all relevant student achievement data in order to make informed decisions regarding differing academic support needs within student populations. (Please refer to Section 2 for additional information regarding CFRs 2.10 and 2.13.)

CFR 2.11. Develop and assess learning outcomes for the co-curriculum.

CFR 2.13. Develop and implement a process for assessing the quality of student support services and identifying students’ learning support needs and use these assessment results to improve and enhance student support.

The institution has developed a process for determining student satisfaction with student services and co-curricular programs provided by the institution in order to make improvements in support and student achievement. Students report that services are satisfactory, and while not extensive, they seem appropriate for the needs of the small student body. While the institution has a strong program for continuing education and
providing seminar opportunities for students, the institution is still in the process of developing Co-Curricular Learning Outcomes. As student enrollment grows, the institution is encouraged to build additional infrastructure into its service areas, as needed, to meet the support needs of students.

**CFR 2.12.** Formalize the academic advising process to ensure that all students receive advising and understand the requirements of and performance standards for their academic programs.

Since the time of the last visit, the institution has formalized its academic advising process. There are now procedures in place with the goal of ensure that students receive appropriate academic advising, and the process is undergoing additional development to articulate expectations and capture progress.

**CFR 3.1.** Expand efforts to attract and retain high-quality faculty with a diverse and qualified academic background.

Since the time of the last visit, CIHS has significantly expanded its faculty, attracting several national thought-leaders within the disciplines advanced by the institution. At the time of SAV1, five (5) out of fourteen (14) Lead Faculty had terminal degrees that were not from CIHS. At the time of the current visit, two (2) out of thirteen (13) Lead Faculty had their terminal degrees from CIHS, and a number of new faculty had been added with educational, clinical, and research experience reflective of an institution with a doctoral culture.

**CFR 3.2.** Develop and implement faculty and staff policies, practices, and evaluation procedures to ensure the achievement of institutional mission.
Since the time of the last visit, the institution has updated its CIHS policy documents, including the Employee Handbook and Faculty Handbook, to more clearly delineate roles and responsibilities throughout the institution. An Institutional Effectiveness Committee (IEC) is developing an Institutional Effectiveness Plan that the institution believes will integrate and evaluate the implementation of faculty and staff policies and practices. In addition, CIHS formed a Faculty Senate to increase the role of faculty in governance and faculty evaluation procedures.

**CFR 3.3. Develop, implement, and assess a formal faculty and staff development program.**

Since the time of the previous visit, CIHS has established a Professional Development Sub-Committee of the Institutional Effectiveness Committee and has allocated funds to support the professional development of faculty. The professional development fund will be managed by the Professional Development Sub-Committee, which will solicit and review applications from faculty and staff, and then make decisions about allocating appropriate funds.

CIHS further shared that the Professional Development Sub-Committee will develop, implement, and assess a Professional Development Plan to be initiated in winter 2020, and deans and program leads have begun to undertake efforts to engage faculty in regular exploration of how to integrate their own professional development into their work with students.

**CFR 3.4. Continue efforts to fund ongoing operations through sound**
enrollment management and fundraising activities.

Since the time of the last visit, CIHS appointed a full-time CFO to monitor financial activities and integrate operations with enrollment management and fundraising activities. Thanks to donations from Board of Trustee members and donors, expansion of the existing gift-lease for an additional 28 years, revenue from subleased space, and additional auxiliary revenue, CIHS has maintained continuous operations and solid financial footing.

CFR 3.5. Expand resources around information technology and learning and assess these activities in support of student learning and student achievement.

Since the time of the last visit, CIHS has expanded its technological resources by acquiring Populi, its first student information system, to replace its internal data storage and retrieval processes. Populi is a cloud-based system to support student enrollment, complaints, record-keeping, and communication that the institution believes will support greater integration between learning and achievement. In addition, CIHS expanded its use of Moodle to support online curriculum delivery and the collection of student work in alignment with feedback from faculty and students.

CFR 3.7. Assess the planned implementation of more formal structures around decision-making and processes to support educational effectiveness.

In response to the Commission action letter, CIHS created an Institutional Effectiveness Committee (IEC) charged with formalizing and assessing the institution’s
decisions-making processes and to implement an Institutional Effectiveness Plan. The IEC is intended to develop and implement change and improvement regarding educational programs and activities, and it consults with the Academic Committee of the Board.

**CFR 3.8. Continue to develop expertise around financial reporting and the alignment of budgets with educational outcomes.**

Since the time of the last visit, a permanent full-time CFO was appointed, and the institution shares that quarterly financial assessment and budget revision processes have been automated and placed in an analytical financial planning map. The Board of Trustee’s Finance Committee continues to review the budget and makes recommendations to the full Board of Trustees for approval, but there is not widespread understanding of the budget’s relationship to assessment findings or its relationship with educational outcomes.

**CFR 3.10. Continue efforts to create greater engagement with faculty in decision-making.**

The creation of a Faculty Senate has expanded the faculty’s potential role in decision-making, and administrators and board members shared their continued desire to include stakeholders in ongoing decision-making. Faculty have been appointed to serve on the newly created Academic Policy and Curriculum Sub-Committee of the Institutional Effectiveness Committee, and there is institutional commitment toward continuing to support and expand these engagement efforts.
**CFR 4.1.** *Develop and implement a process for academic and institutional quality assurance to include periodic program review and assessment of student learning, and a process for new program development.*

CIHS has developed, adopted, and begun implementation of a process for quality assurance and academic program review. The institution is still in the initial stages of implementation, having hired a Dean of Academic Affairs and Director of Institutional Research and Assessment, chartered a Faculty Senate and Student Advisory Senate, and created an Institutional Effectiveness Committee to support the implementation. However, the existing pilot processes do not appear to include comprehensive self-studies for each program within a reasonable amount of time. Although annual reports are mentioned in the program review manual, there is no evidence that they are being conducted and used for ongoing planning and resource allocation. (Additional details are provided under CFR 4.1 addressed in Section II.)

**CFR 4.2.** *Establish a position responsible for the function of collecting, organizing, and presenting institutional research for the purpose of planning and decision making.*

The institution has hired a Director of Research and Assessment, who has begun the migration from a manual registrar function to an electronic student information system (Populi). Progress has been made on loading records into the system. At this point, the institution is not yet capable of providing student success reports consistent with industry standards for retention, time to completion, satisfactory academic progress, and graduation. When available, these data will be reported to the IEC. (Additional
details are provided under CFR 4.2 addressed in Section II.)

**CFR 4.3.** Collect and analyze data reflecting the systematic assessment of teaching and learning, and the campus environment, and use the data to support improvements.

The institution began implementing a systematic assessment of institutional effectiveness in August 2019 and is currently piloting the process. Initial data for some programs are available, however, the cycle of assessment for no single program has yet been completed to allow the feedback loop to close by using data to support decision making around programmatic or support service improvements. Co-curricular activities have only recently been identified and measures are being developed to assess their effectiveness. There remains a strong reliance on student course evaluations and grades as evidence of program and institutional effectiveness. (Additional details are provided under CFR 4.3 addressed in Section II.)

**CFR 4.4.** Develop support for faculty inquiry and training around the scholarship of teaching and learning, with an emphasis on assessment of student learning, pedagogy, and curriculum development.

The institution raised a one-time gift of $5000 as a professional development fund to support faculty research and presentations during the 2019 – 2020 academic year. The Faculty Senate is actively engaged in the assessment of the effectiveness of teaching and learning, and there is now a system for faculty observation, both by the Dean of Academic Affairs and a peer, which includes feedback to the faculty member being observed. (Additional details are provided under CFR 4.4 addressed in Section II.)

**CFR 4.5.** Formally include appropriate stakeholders such as board members, staff,
faculty, students, and community members in the process of assessment of institutional effectiveness.

Within the written Institutional Progress Report, the response to this recommendation included an overview of the public continuing education presentations and the initiation of the process of board self evaluation. From the site visit, the team has assessed progress based on interviews and evidence provided elsewhere in the report.

Although the recently implemented program review process involving the IEC, the Faculty Senate, the Student Advisory Senate, and stakeholders offers input from multiple stakeholders, the institution has not yet completed a complete cycle of quality assurance review, with a pilot program in progress that has some initial data. (Additional details are provided under CFR 4.5 addressed in Section II.)

CFR 4.6. Include multiple stakeholders in the development of strategic plans based on data and evidence.

The institution has adopted a formal program review process and began its implementation in August 2019. The formal process of using the data to inform strategic planning is intended but has not yet happened.

CFR 4.7. Develop support for methodically evaluating the trends and changes in higher education and consider these factors when developing new programming and allocating resources.

CIHS has engaged a consultant as the advisor for strategic growth to support the development of a strategic growth plan who is extensively experienced with regional accreditation processes and evaluations and higher education leadership. The President and the Dean of Academic Affairs meet regularly with this advisor for the purpose of
tracking and implementing important new trends in higher education.

CIHS has sent representatives of the institution to the WSCUC Academic Resource Conference (ARC). The team finds this to be an indicator that the institution values professional associations and external experts as important sources of information for the formulation of long-term strategic plans. Additionally, the Director of Institutional Research and Assessment has as part of his role to methodically track trends and changes in higher education. Through the IEC, he reports his findings and facilitates factoring these trends and changes into CIHS programming initiatives.

The Dean of Academic Affairs, with the Director of Continuing Education, tracks trends and changes in the field by direct experience from feedback out of community events and continuing education programs, and considers that in CIHS programmatic action via the IEC.

SECTION II – EVALUATION OF INSTITUTIONAL COMPLIANCE SEEKING ACCREDITATION VISIT

General Statement

Following SAV1, the WSCUC Commission granted Candidacy finding all four Standards at a Candidacy level. Based on team findings, the Commission identified CFRs within the Standards requiring further attention to achieve Initial Accreditation (IA), recognizing that the Commission makes a holistic determination for an entire Standard. Not all CFRs need to be at an IA level of sufficiency to find a Standard at a sufficient level for IA. If the institution is found to be at an IA level, recommendations
will be made. If the institution is continuing Candidacy for another visit, Standards still at a Candidacy level will have CFRs identified in the CAL needing further work. Standards found to be at an IA level will not have recommendations but the team may make improvement suggestions that will only appear in the team report and not the CAL.

As will be noted below, the team finds CIHS to be at an Initial Accreditation level for Standards 1 and 3, subject to the Commission’s finding. The team has identified improvement suggestions for certain CFRs for Standards 1 and 3 which are not required but the institution is strongly encouraged to consider them. The team found Standards 2 and 4 still at a Candidacy level with CFRs identified as needing further work which will become part of the CAL and will be required.

**Standard 1: Defining Institutional Purposes & Ensuring Educational Objectives**

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

In reviewing CIHS’s compliance with this standard, the team looked for evidence of sustained, informed, and participatory self-reflection about how CIHS accomplishes its mission and purpose while fulfilling its educational objectives. The team was particularly
focused on the formal structures and procedures to support the achievement of the institution’s mission, as well as the critical requirements of integrity, transparency, and autonomies as it reviewed CIHS’s written self-reflections and in the conversations with the CIHS Board of Trustees, administrators, faculty, staff, and students.

**CFR 1.2.** Develop and deploy standards for student achievement articulated in measurable terms and assessment of learning outcomes; better align these standards throughout course materials and program descriptions; and measure and assess at the course, program, and institutional level for appropriate and intentional communication to students and the public.

Since the time of the last visit, the institution has refined its Institutional Learning Outcomes and Program Learning Outcomes and is in the process of creating assessment tools. CIHS has also developed an Institutional Effectiveness Plan and has initiated the assessment process, having assessed several PLOs before the SAV2 visit.

CIHS has yet to complete identification and measurement of indicators of student achievement at the institution, course, and program levels. Additionally, the institution will need to ensure accurate measurement and disaggregation of its retention and graduation rates and make student learning evidence public.

**Summary for Standard 1**

The team found the faculty, staff, administration, and board of trustees well-acquainted with the educational mission, and, while additional work will be required to
build systems for assessment and educational achievement, there has been significant progress around creating formal structures and procedures to support the achievement of the institution’s mission.

The team found that CIHS meets the requirements of Standard 1 at a level sufficient for Initial Accreditation, understanding that only the Commission is authorized to make the final determination as to whether or not an institution is in compliance with the Standards. The team makes the following suggestions for improvement of CFR 1.2.

**CFR 1.2** The institution has refined its Institutional Learning Outcomes and Program Learning Outcomes and is in the process of creating assessment tools.

CIHS has yet to complete identification and measurement of indicators of student achievement at the institution, course, and program levels. Additionally, the institution will need to ensure accurate measurement and disaggregation of its retention and graduation rates and make student learning evidence public in compliance with WSCUC Standards.

**Standard 2: Achieving Educational Objectives Through Core Functions**

The institution achieves its purposes and attains its educational objectives at the institutional and program level through the core functions of teaching and learning, scholarship and creative activity, and support for student learning and success. The institution demonstrates that these core functions are performed effectively by evaluating valid and reliable evidence of learning and by supporting the success of every student.
In reviewing CIHS’s compliance with this standard, the team looked for evidence of sustained, informed, and participatory self-reflection about how effectively CIHS accomplishes its institutional purposes and achieves its educational objectives. Further, the team looked at evidence of compliance with the standard and also for evidence that institutional learning and educational effectiveness guide assessment processes and planning for quality assurance. The team reviewed evidence of the assessment activities and results to date and discussed processes in place as well as those that are planned for the future.

**Teaching and Learning**

**CFR 2.2. Develop and implement both a long range plan and well-developed rubrics for the assessment of program learning outcomes, and clearly articulate admissions and graduate degree requirements.**

Since the time of the last visit, CIHS has clearly articulated its admissions and graduate degree requirements. With the hiring of an Director of Institutional Research and Assessment, CIHS has created and started to implement a new institutional effectiveness plan. The institution is engaged in the initial stages of assessment; some assignment-specific assessment rubrics have been created, and the assessment of student learning outcomes is underway. While some faculty are using rubrics to assess student performance on course assignments (e.g., papers, presentations), the creation of PLO rubrics geared to assess students’ achievement of the PLOs is slated for spring and summer 2020. Expectations for student performance have yet to be established.
While the institution has made progress in terms of implementing assessment plans since the last visit, CIHS has yet to define the meaning of each of its degree levels offered and to develop processes to ensure the quality and integrity of degrees.

**CFR 2.3.** *Develop appropriate program and course learning outcomes that are expressed in measurable terms, define and clearly describe performance levels for student achievement of program learning outcomes, and link course-level to program-level learning outcomes.*

CIHS has worked to clarify and refine its Program Learning Outcomes (PLOs) and Institutional Learning Outcomes (ILOs) over the past four months. The Course Learning Outcomes (CLOs) are currently being reviewed with plans to strengthen them further by the faculty, the Program Directors, and the Dean of Academic Affairs in the spring and summer of 2020; some CLOs require further revision to make them clearer and more measurable. To assist in improvements in the quality of the CLOs, a new Syllabus Template has been created that prompts faculty to utilize Bloom’s taxonomy. PLOs are slated to be reviewed by the faculty of each program, and faculty will identify on syllabi the summative assessment that is inked to each PLO. ILOs will be reviewed annually by all constituencies.

The institution is currently mapping all remaining courses in all programs to the appropriate PLOs in order to plan for the purposeful development of PLO mastery over time across the program’s curriculum. Many of the curriculum mappings have been
completed and have allowed the institution to identify gaps and make improvements. Academic leadership asserts that, once all mappings are complete and goals have been established for student learning, additional assessments will be conducted according to the Institutional Effectiveness Plan. The team encourages the institution to include direct and indirect measures in such a way as to allow disaggregation of the data to demonstrate student achievement, programmatic effectiveness, and institutional effectiveness.

**CFR 2.4. Develop a faculty-driven process for establishing appropriate standards for student performance.**

The team found that the role of faculty in developing substantive learning outcomes was discussed in the fall of 2019, and the Faculty Senate bylaws provide evidence of the newly developing assessment culture. CIHS faculty are currently finalizing CLOs for all courses and are in the process of linking CLOs to PLOs. The Faculty Senate has been charged with the reviewing appropriate standards for performance (although they have not yet reviewed PLO assessment results).

In addition to what is contained currently in the bylaws, the expectation that faculty will provide curricular oversight will need to be addressed, in terms of ensuring appropriate mapping and alignment of learning outcomes, identification of appropriate formative and summative assessments, the creation of signature assignments to assess PLOs, the creation of PLO assessment rubrics for us in assessing student artifacts from summative “signature” assignments (theses, dissertations, projects, papers, etc.).
appropriate credit hours for courses, etc. Additionally, faculty’s role is expected to include establishing performance levels and published expectations for student learning, satisfactory academic performance, and admissions standards.

**CFR 2.6.** *Map the development of program learning outcomes across the curriculum, assess student learning at or near graduation in order to establish that graduates achieve the expected student learning outcomes, and compile and analyze data on graduates’ achievement of learning outcomes.*

While the institution has created a framework for the assessment of student learning, CIHS has yet to map the development of PLOs across the curriculum and develop all rubrics appropriate for assessing PLO achievement at or near graduation. In order to do this, careful planning and faculty oversight of curriculum will need to occur to ensure that all learning outcomes are aligned and that meaningful summative (“signature”) assignments and assessments are created. Further, faculty must establish standards for PLO achievement in order to determine the extent to which graduates meet these expectations.

Once PLOs have been measured in a focused, timely fashion in order to obtain baseline data, CIHS will be able to compile and analyze graduate student learning and achievement data and use those results to make improvements in teaching and learning.

**CFR 2.7.** *Develop a comprehensive and systematic program review process that includes the assessment of student achievement of program learning outcomes,*
retention, and graduation rates, board pass rates and licensure, and an external review component.

While the assessment process has not yet been contextualized for faculty as being part of the comprehensive academic program review process, the new Director of Institutional Research and Assessment and the Dean of Academic Affairs have outlined a comprehensive process and are currently beginning implementation. A schedule for the program review for all three programs has been established, and the program review for the psychology program was underway at the time of the visit. The self-study was almost completed, and plans for an external review were set.

It will be important for CIHS, as the university undergoes program review, to engage faculty, students the entire learning community around the use of data to improve the quality of programming and student outcomes. It will also be important to review institutionally established timelines for assessing all PLOs and adjust them in light of the expectation that institutions complete full program reviews prior to accreditation. (Please refer to Standard 4 for additional information about program review.)

Student Learning and Success

CFR 2.10. Collect and analyze both aggregated and disaggregated data related to student satisfaction and achievement in order to identify needs and make improvements in student support and achievement.

CIHS regularly conducts course-level assessments such as course evaluations, peer classroom review, and faculty self-evaluation. The institution has further appointed
a Director of Institutional Research and Assessment and created an Institutional Effectiveness Committee and an Institutional Effectiveness Plan. However, the institution has yet to collect and analyze both aggregated and disaggregated data related to student achievement.

**Summary for Standard Two**

The visiting team finds that CIHS is in the process of developing an appropriately comprehensive process for the assessment of educational objectives and student learning and is currently in the early stages of development and implementation. The team further notes that the institution has made significant progress in the development of its assessment infrastructure and in plans to assess the core functions of teaching and learning and the evaluation of student achievement since the last visit.

In response to recommendations in the last team report, CIHS has built its infrastructure to include the hiring of a Director of Institutional Research and Assessment, the purchase of a Student Information System, and the development of initial curriculum maps and assessment plans. Additionally, CIHS has begun to assess student learning at the program level.

The institution is encouraged to continue to refine the curriculum maps to show the introduction, development, and mastery of the PLOs across the curriculum; to identify appropriate summative assignments and assessments for all programs, and to develop appropriately comprehensive and focused rubrics for use in assessing student learning. It is anticipated that the institution’s voiced commitment to implementing assessment plans
and building out its assessment infrastructure will generate the cultivation of a culture of continuous quality improvement, allowing CIHS to make data-informed decisions impacting teaching and learning.

The WSCUC team finds that CIHS meets Standard 2 at a level sufficient for Candidacy, understanding that only the Commission is authorized to make the final determination as to whether or not an institution is in compliance with the WSCUC Standards.

The Commission finds that CIHS has demonstrated continued evidence of compliance with Standard 2 at a level sufficient for Candidacy. The following CFRs have been determined to be at a level sufficient for Initial Accreditation: CFRs 2.1, 2.2a, 2.2b, 2.5, 2.8, 2.9, 2.11, 2.13, and 2.14.

The team found the following CFRs sufficient for Candidacy but needing more development for Initial Accreditation and recommends the following: CFRs 2.2, 2.3, 2.4, 2.6, 2.7, and 2.10.

**CFRs 2.2, 2.3, and 2.4** Develop a faculty-driven process for establishing appropriate standards for student performance and curriculum development and oversight to include establishment of appropriate summative assignments, creation of well-developed rubrics, and alignment of course- and program-level learning outcomes.

**CFR 2.6** Assess student learning at or near graduation in order to establish the extent to which graduates achieve the expected student learning outcomes at expected levels of
proficiency.

**CFR 2.7:** Fully implement the program review process and have completed the program review process by the time of the next accreditation visit. Ensure that program review includes the assessment of student achievement of all program learning outcomes for that program as well as retention, graduation rates, board pass rates and licensure, and an external review component.

**CFR 2.10** Collect and analyze both aggregated and disaggregated data related to student achievement in order to determine the extent to which students are successful and programs are meeting student support needs.

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

**CFR 3.2.** *Faculty and staff recruitment, hiring, orientation, workload, incentives, and evaluation practices are aligned with institutional purposes and educational objectives. Evaluation is consistent with best practices in performance appraisal, including multisource feedback and appropriate peer review. Faculty evaluation processes are systematic and are used to improve teaching and learning.*

While the faculty reported appropriate on-boarding on an ad hoc basis by administrators, there remains significant need for formal policies and handbooks that address faculty and staff recruitment, hiring, orientation, workload, incentives, and evaluation practices. The institution’s historic practice in evaluating faculty is to review students’ reflections from final course evaluations but the recently hired Dean of
Academic Affairs has instituted practices to meet the formalized and systematic requirements of CFR 3.2 to include direct observation and other direct assessment methods to provide deep engagement in the evaluation process. The institution noted that it further understood that more formalized processes around recruitment, hiring, orientation, workload, incentives, and evaluation were needed to evolve into a more formal institution aligned with WSCUC standards and has undertaken these efforts by engaging the board and faculty – and developing the beginning of formalized governance bodies to advance those discussions.

**Fiscal, Physical, & Informational Resources**

**CFR 3.4. The institution is financially stable and has unqualified independent financial audits and resources sufficient to ensure long-term viability.** Resource planning and development include realistic budgeting, enrollment management, and diversification of revenue sources. Resource planning is integrated with all other institutional planning. Resources are aligned with educational purposes and objectives.

In reviewing CIHS’s audited financial statements, cash reserves, and operational budget, the team found an ongoing and pervasive commitment to balanced budgets and transparent financial reporting. While the institution lacks a traditional endowment, its lease agreement and outside funding support operations and ongoing growth activities. CIHS is not charged a lease for the property and can lease major parts of the facility for additional income. The board expressed enthusiasm for moving from a “financially fragile” institution to a self-sustaining and thriving institution through its efforts around
enrollment growth and fundraising.

The institution participates in an annual budget process and quarterly reviews of the budget to adjust to changing conditions, and has maintained a positive cash balance without the need for short-term or long-term lending. The institution has created enrollment projections which project modest growth over the next four years and have aligned that growth with increases in key staff and services.

The team found that while the process of budget allocation and approval was timely, CIHS lacks a formal structure that systematically involves stakeholders and aligns ongoing needs around educational objectives. As the institution formalizes its student achievement and assessment efforts, the team supports the board of trustees’ expressed desire to align resource allocations to the achievement of programs and academic activities.

Finally, the institution has projected significant annual fundraising goals to support operations and has retained the assistance of an outside consultant to support that work. CIHS continues to receive significant realized and pledged gifts, and these commendable efforts help to ensure that CIHS is able to continue to achieve its educational mission. The team recognizes the generosity of its Board of Trustees as well as the historic and ongoing support of Tamamitsu Jinja, a Japanese non-profit founded to support the Shinto teachings of its founder, Dr. Motoyama, which is currently headed by Dr. Motoyama’s second son, and CIHS board of trustees members.
Organization Structures and Decision-Making Processes

CFR 3.7. The institution’s organizational structures and decision-making processes are clear and consistent with its purposes, support effective decision making, and place priority on sustaining institutional capacity and educational effectiveness.

As stated above, greater attention has been placed in creating lines of authority, and continued improvement is encouraged to reduce any confusion around roles and or accountability. The members of the administrative team have generally worked with one another for many years, and the consistency in personnel has led to what appeared to be smooth operations for existing functions. As the campus grows, and as systems are created to advance the institution’s mission, more organized and formalized structures will be required to support decision making and ensure that key stakeholders are engaged in the decisions that will sustain institutional capacity and assure educational effectiveness.

Summary for Standard Three

The team found the institution to have developed a plan for financial stability and growth, in addition to a history of annual positive net assets from operations. In addition, the institution has created formalized structures, revised its bylaws, and established an independent board of trustees to comply with WSCUC standards. While additional work is required to build institutional capacity supporting growth and build an academic community supportive of the institutional research goals,
CIHS has made key improvements since the time of its eligibility review.

Additional progress has been made in hiring and retaining of qualified faculty to support graduate education and research, the creation of a faculty development program, the formation of a Faculty Senate, and the creation of more formalized structures to support the oversight of financial, operational, and assessment activities.

In conclusion, the team found that CIHS meets Standard 3 at a level sufficient for Initial Accreditation, understanding that only the Commission is authorized to make the final determination as to whether or not an institution is in compliance with the Standards.

The team identified some improvement suggestions for several CFRs as CIHS continues to develop.

CFR 3.2. Formalize the process of faculty evaluation and align resource allocation with the outcomes of programmatic activities.

CFR 3.4. Integrate and align resource planning with educational purposes and objectives.

CFR 3.7 Develop structures and decision-making processes that involve stakeholders and reflect a commitment to sustained institutional capacity and educational effectiveness.

**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.

In reviewing CIHS’s compliance with this standard, the team looked for a set of comprehensive processes that provide for the systematic collection and analysis of assessment of data indicating students’ progressive mastery of learning outcomes across the programs’ curricula and the effective performance of the organization on key indicators. The team reviewed evidence of the portions thereof that have been implemented to date as well as the plans for those that remain to be further developed and put into practice.

Quality Assurance Processes

CFR 4.1. 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.

In the period since the last report, the institution has engaged a consultant to develop and implement a process for academic and institutional quality assurance. The institution has adopted a program review process recommended by an external consultant in modified form to scale it to the appropriate complexity for the size of the institution; however, greater faculty engagement is needed. The process outlines the requirements for establishing and measuring learning outcomes and student success metrics, collecting and analyzing data, and using the data for the purposes of quality assurance.

To support the program review process, the institution has hired an experienced, qualified professional to be the Director of Institutional Research and Assessment who has formed an Institutional Effectiveness Committee comprised of staff and faculty for the purpose of overseeing the quality assurance process. The institution has also hired an experienced Dean of Academic Affairs and initialized implementation of the program review process in August 2019. The team encourages the institution to simplify the process and clarify responsibilities for each part of the process by position so that accountability is established—particularly, who is responsible for presenting the results of the self-study and who is responsible for taking action and making changes, especially at the academic program level, to enact quality assurance plans.

At the time of the last visit, the institution had in place culminating experiences for each degree program such as a capstone, thesis, comprehensive examination or dissertation. In collaboration with the Faculty Senate, the Dean of Academic Affairs has
begun the process, program by program, of evaluating these assignments based on program learning outcomes and developing appropriate rubrics to be used in rating the quality of the work. In the case of their pilot program, they have begun to aggregate the data to find patterns in student achievement that can indicate strengths or opportunities in the program curriculum. The team notes that this step was recommended in the last report, and commends the institution for the progress it has made toward implementation of the process.

The Dean of Academic Affairs and the Director of Institutional Research and Assessment derived a set of Institutional Learning Outcomes (ILOs) from the mission of the institution, and then program by program, reviewed various curriculum documents, and drafted a set of Program Learning Outcomes (PLOs) for each degree program. These PLOs were aligned with the ILOs and reviewed by the program directors and their faculty members, who suggested revisions and additions to the PLOs. The faculty has begun the systematic process of aligning Course Learning Outcomes for each course with the PLOs of the degree program; currently, PLOs are not consistently or systematically incorporated into all syllabi. A similar process has been initiated for creating curriculum maps and assessment plans for each degree program, which are at various stages of completion. The faculty are beginning to develop PLO rubrics. The team observed that the faculty are at various levels of engagement, comprehension, and development of the use of rubrics for program review and the assessment of student learning. They do appear to be conversant in the language of assessment, engaged in the implementation of
the process, and beginning to take ownership of both the curriculum and the quality assurance process. So far, one program has collected data on three PLOs as of the date of the team visit. The institution is encouraged to accelerate its program review timeline so that each program will be reviewed in a reasonable amount of time to keep programs current and implement needed changes in a timely fashion. The institution is encouraged to implement all planned items in the school’s program review manual (e.g., the use of annual reports) or modify the handbook such that it reflects the institution’s practices and plans.

The institution does not yet have a process for new program development.

**CFR 4.2.** 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.

The Director of Institutional Research and Assessment has also adopted the use of a student information system (Populi), and the institution is in the process of backloading student records. The assessment plan has set goals for retention and time to completion, however, at the time of the site visit, it was not yet at a stage in the conversion of student records from handwritten or spreadsheet form to Populi to be able to report either aggregated or disaggregated statistics on student retention or satisfactory academic progress. Initial statistics on graduation rates have been generated, though time to
completion has not. The institution has also hired a Dean of Admissions and Enrollment Planning who is responsible for the day to day operations around tracking these data. A process that remains to be developed is that by which the learning community and all stakeholders will be engaged in making meaning of the data for the purpose of quality improvement at the program or institutional level.

**Institutional Learning and Improvement**

**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.

The team found that the leadership and faculty of CIHS have continued to demonstrate a strong commitment to continuous improvement. The creation of the Institutional Effectiveness Committee [IEC] (comprised of senior leadership, a representative from student life, a representative from outcomes assessment/research and at least one faculty member) and the engagement of the Faculty Senate in a formal process of quality assurance has placed the responsibility for academic program review in the hands of faculty within the context of the larger organization. The administrative team are fully engaged in the implementation of the new process. The team would encourage the IEC to further refine the process to clarify how the community will engage in meaningful discussion around the self-studies that will emerge from the process, and
how the institution will hold faculty and staff accountable for using the data to make improvements as well as for evaluating the effectiveness of the actions taken in response to the data. The team would recommend linking this process to the budget process to ensure that the two processes are coordinated to ensure that program resource needs are included in institutional planning.

The institution has appointed a Director Institutional Research and Assessment who has begun collecting data from students and alumni to evaluate how the institution is meeting the needs of students. The Dean of Student Life has helped student leaders organize a Student Advisory Senate [SAS] which meets regularly. There is a faculty advisor for the SAS. The SAS participated in preparation for the site visit, for example engaging in the revision of the grievance procedure. However, there remains a strong reliance on student course evaluations and grades as evidence of student learning outcomes and the effectiveness of instructional methods.

The Dean of Academic Affairs has begun a systematic review of teaching methods and classroom observation that will advise the development of faculty pedagogy. This is augmented by a peer review process that supports faculty teaching skill development.

**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.

Since the last visit, the institution raised a one-time gift of $5000 as a professional development fund to support faculty research and presentations at scholarly conferences targeted at supporting the scholarship of teaching and learning with an emphasis on assessment. There is a stated intention that faculty meetings will include a portion of the meeting for serious consideration of teaching and learning, and how to assess and improve both, based on the Boyer Model. The Faculty Senate is building an internal website focused on the use of and development of assessment resources.

The Faculty Senate is actively engaged in the assessment of the effectiveness of teaching and learning, and there is now a system for faculty observation, both by the Dean of Academic Affairs and a peer, which includes feedback to the faculty member being observed.

The team encourages the institution to create long-term systemic support for the scholarship of teaching and learning and a formal process for closing the feedback loop that demonstrates improvement in the effectiveness of teaching practices and curriculum development strategies employed by the faculty.

**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.
Within the written Institutional Progress Report, the response to this recommendation included an overview of the public continuing education presentations and the initiation of the process of board self-evaluation. The team did not see CFR 4.5 itself addressed in this response. From the site visit, the team has assessed progress based on interviews and evidence provided elsewhere in the report.

The institution has formed Faculty Senate and a Student Advisory Senate and engaged both in the process of program review. In addition, CIHS has developed an Institutional Effectiveness Committee (IEC, which meets quarterly with the President as Chair) consisting of Board Chair, Board Vice Chair, Dean of Academic Affairs, CFO, Director of Institutional Research and Assessment, Director of Admissions, Dean of Student Life, Chair of Faculty Senate, a Lead Faculty, President of the Student Advisory Senate, and student Senate leaders. Within the current program review process, the cycle of improvement has not yet been completed for any one program, so many steps in the process are still to be clarified and an evaluation of the impact has yet to be seen.

**CFR 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.**

The institution has adopted a formal program review process and began its
implementation in August 2019. The team recognizes the work that has gone into the
development and initiation of the process and considers it a strong first step with the
intention of engaging multiple constituencies over time. However, without having an
entire review cycle to assess, the institution cannot provide sufficient evidence of
substantial compliance with this CFR.

The team finds that CIHS has developed an appropriately comprehensive process
for the assessment of institutional effectiveness and is in the early stages of
implementation. The team notes that the institution has made great strides in the
development of the infrastructure for data collection in the assessment of student
learning, the evaluation of student achievement, the need for and effectiveness of co-
curricular activities, campus climate, and the effectiveness of student services in
supporting the success of students.

The team notes that in response to recommendations in the last report, the
institution has developed initial curriculum maps and assessment plans, and while data
collection has begun there is a need to continue to refine the curriculum maps to show the
introduction, development, and mastery of the PLOs across the curriculum, to implement
formative assessments, to specify summative assessments for all programs, and to fully
develop rubrics for evaluating these assessments. At that point, student learning
assessment data will become useful. The institution has begun the work of building
institutional research capabilities with the appointment of a Director of Institutional
Research and Assessment and the purchase and adoption of a student information system.
The institution will then need to add the data that will be collected and presented to the quality assurance process and train the IEC and the Faculty Senate on how to use the data to drive continuous quality improvement and close the loop, thereby creating a culture of evidence.

The WSCUC team finds that CIHS meets Standard 4 at a continued level sufficient for Candidacy, understanding that only the Commission is authorized to make the final determination as to whether or not an institution is in compliance with the WSCUC Standards.

The team found the following CFRs sufficient for Candidacy but needing more development for Initial Accreditation and recommends the following:

**CFR 4.1.** Complete the implementation of the established process for academic and institutional quality assurance to include use of data to improve student outcomes. Establish a process for new program development.

**CFR 4.2.** Complete the migration of manual records to Populi and develop reports that track satisfactory academic progress, student retention, time to completion, and graduation (both in aggregated and disaggregated formats by student demographics) and integrate them into the quality assurance process.

**CFR 4.3.** Collect and analyze data reflecting the systematic assessment of teaching and learning, and the campus environment, and integrate this into the quality assurance process.

**CFR 4.4.** Further develop the support for faculty inquiry and training around the
scholarship of teaching and learning, with an emphasis on assessment of student learning, pedagogy, and curriculum development.

**CFR 4.5.** Ensure that the process of assessment of institutional effectiveness formally includes appropriate stakeholders such as board members, staff, faculty, students, and community members.

**CFR 4.6.** Include multiple stakeholders in the development of strategic plans based on data and evidence.

**SECTION III. COMMENDATIONS**

The WSCUC visiting team recognizes CIHS as a learning community built on shared values and the pursuit of integrating scientific principles and spirituality to improve health and wellness. The team found that the goals, values, and guiding principles of the institution are widely understood by the community, reflected in academic practices and co-curricular offerings, and key to decision-making by the board of trustees and administrators. Further, the team found faculty, staff, students, and board members to be engaged in the work of accreditation—reflecting a profound commitment to the institution and its mission and vision.

Finally, the team acknowledges the important work of CIHS’s founder, Hiroshi Motoyama; the continued support of his son, Kazuhiro Motoyama; and the generous contributions of Tamamitsu Jinja in the evolution of the institution.
Commendations

The team wishes to commend the California Institute for Human Science in the following areas:

1. Strong and widely shared sense of identity and institutional purpose around the principles of body, mind, and spirit.

2. Expanded allocation of resources to support fulfillment of its mission, particularly the additional personnel to support academic quality, institutional research, and assessment.

3. Establishment of a Faculty Senate and Student Senate and the ongoing institutional commitment to the principles of shared governance.

4. Founder’s commitment, and the continued commitment and support of his son, and the generous contributions of Tamamitsu Jinja to support the evolution of the institution.

5. Successful fundraising efforts, particularly the engagement and support of the board.

6. Financial management and the institution’s ability to operate without debt, and with a small but growing financial reserve.