

# REPORT OF THE WSCUC TEAM

For Reaffirmation of Accreditation

Cedars-Sinai Medical Center

April 11-14, 2023

## Team Roster

Barbara Sawrey, Chair  
Distinguished Professor Emerita,  
Chemistry & Biochemistry  
University of California, San Diego  
WSCUC Commissioner

Susan Albertine, Assistant Chair  
Vice President (retired)  
American Association of Colleges & Universities

Gilbert Newman, Vice President for Academic Affairs  
The Wright Institute

Gail Orum-Alexander, Associate Dean of Academic Affairs  
Keck Graduate Institute of Applied Life Sciences

Sarah Sweitzer, Provost and CEO  
Touro University California

Mark Goor, WSCUC Staff Liaison  
Vice President, WASC Senior College and University Commission

The team evaluated the institution under the 2013 Standards of Accreditation and prepared this report containing its collective evaluation for consideration and action by the institution and by the WASC Senior College and University Commission (WSCUC). 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. This report and the Commission letter are made available to the public by publication on the WSCUC website.

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## Section I – Overview and Context

### Component 1

#### A. Description of Institution and Accreditation History; Response to Previous Commission Actions

Cedars-Sinai Medical Center (CSMC) is a non-profit academic healthcare organization founded in 1902. It is located in Los Angeles and serves the healthcare needs of the LA community and beyond. The Center also serves as an important research locus for biomedical innovation and technology. In 2006 the CSMC Board of Directors voted to establish the Graduate Program in Biomedical Sciences and Translational Medicine, in response to interest from students and academic researchers. In 2008 a PhD was opened and subsequently accredited by WSCUC in 2012. An MS degree in Biomedical Sciences and Translational Medicine (BSTM) was added in 2014 via WSCUC Structural Change.

Two additional MS degrees were added later – Master’s in Magnetic Resonance in Medicine (MSMRM) in 2016, and Master’s in Health Delivery Science (MHDS) in 2017. Both these MS degrees enrolled their first students in Fall 2017. In 2019 the program home to all the degrees was renamed Graduate School of Biomedical Sciences (GSBS), the name and acronym by which it is now called.

The PhD program has a current enrollment of approximately 50 students, MSMRM has fewer than 5, and the MHDS has approximately 20 students. There are approximately 150 faculty associated with the programs, teaching and mentoring students in the research laboratories.

The GSBS received accreditation in 2012 and was reaffirmed in 2017 for six years. A mid-cycle review and interim report were done in 2020. The findings of the Interim Report Committee identified the following items for further attention: 1) Develop benchmarks for the Strategic Plan to measure the progress and impact of initiatives related to student success and impact on the community; 2) Broaden the metrics used to measure student success beyond post-graduation placements. Collect and analyze data from program learning outcomes during key program points that can be used to document, understand, and improve the program and student success; 3) As GRE [sic] looks to fill the key leadership position of Associate Dean [now called Vice Dean], it is imperative that GRE empower this new leader with the authority and accountability to represent the GRE in the larger CSMC planning and resource allocation deliberations; 4) Improve understanding of the impact of diversity efforts by developing metrics, collecting data, and analyzing the impact of various diversity initiatives on the culture of the program to support student inclusion and success.

All the items mentioned by the Interim Report committee are being addressed, although incompletely. This current report identifies where progress has been made and where more attention is needed.

#### B. Description of Team’s Review Process

On December 13-14, 2022, the review team met via Zoom for the Offsite Review of the GSBS. The team confirmed their schedule and assignments for the accreditation visit (AV), identified preliminary areas of commendation, and specified seven areas of inquiry for the AV. The team shared its preliminary commendations and lines of inquiry with the senior management team of the GSBS in a Zoom conference call segment of the Offsite Review.

The accreditation visit was held in person on April 11-14, 2023, in West Hollywood at offices of the CSMC. The team met in executive session the evening of April 11. The following two days, April 12 and 13, the team met with the President/CEO, academic leadership, faculty, staff, and students. The standard exit meeting was presented on April 14. Given the nature of CSMC's Board of Directors, the team did not meet with any of the board members but did have access to several of the recent quarterly education updates presented to them.

Team members reviewed the many documents provided for Offsite Review, as well as the numerous documents sent in response to the lines of inquiry. The assistant chair of the team monitored the confidential email account regularly during the three-day visit.

### **C. Institution's Reaccreditation Report and Update: Quality and Rigor of the Report and Supporting Evidence**

The institution prepared and presented a well-written report and was responsive to former recommendations of the Commission, as well as to the present team's lines of inquiry. Everyone with whom the team met was forthright in detailing successes, challenges, and opportunities. The meetings helped the team to better understand the complicated nature of the structure and interactions of the GSBS within the larger CSMC. Although there was a small number of people involved in the actual report writing, it was widely available for input, reading, and commentary. The institution's report addressed the required components, and the AV allowed the team to fill in gaps in understanding. Since the institution is not a traditional university, many activities are handled differently and referred to in non-academic ways. The meetings were crucial in allowing for clear communication between the team and the institution.

## **Section II – Evaluation of Institutional Essays**

### **Component 2: Compliance: Review under WSCUC Standards and Compliance with Federal Requirements**

#### **Standard 1: Defining Institutional Purposes and Ensuring Educational Objectives**

##### *Institutional Purposes (CFRs 1.1, 1.2).*

Part of CSMC's mission is to "Advance the frontiers of medicine and science through a major ongoing commitment to biomedical research and medical education."

The Graduate School in Biomedical Science furthers this mission by striving to:

*Educate research students in a spirit of self-learning, creativity, and independence, so as to optimize their opportunities and success in their chosen career pathway.*

*Provide an understanding of the relevance of basic biomedical science to human disease through an exploration of the foundations of translational and clinical research and through interaction with physician-scientists.*

*Instill the ability to communicate scientific information accurately and effectively to professional and non-professional audiences, in both verbal and written formats.*

The mission of the graduate school programs is well aligned with the mission of the CSMC. The objectives of the PhD and MS programs are clear, and all course syllabi include learning objectives. Indicators of progress in the PhD are standard for such a degree and are regularly monitored by the

research advisor, dissertation committee, and the PhD Oversight Committee. An Individual Development Plan (IDP) serves as a touchstone for students to stay on track and in communication with their advisor.

The PhD program has excellent retention rates (90% overall and 100% for URM), though the numbers are still rather small. It appears that the students apply to the program and are selected based on a match of expectations. There are annual evaluations and milestones along the way. Students graduate in an average time significantly less than the national average for biomedical science. The MS programs operate on a cohort model, and each takes 20 months. There is an emphasis on didactic courses, and a capstone/thesis required at the end. Every student is assigned a faculty advisor, and the final oral and written project is graded by the instructional faculty.

*Integrity and Transparency (CFRs 1.3-1.8).*

Since the GSBS sits within the much larger business structure of CSMC, some of the usual academic policies are still being developed. For instance, a new Academic Freedom policy has recently been put in place. The school has been responsive once an issue or gap is identified.

Diversity is an important consideration at the GSBS, and there is an Associate Dean for Faculty Development and Diversity. There is unconscious bias training required of all employees (which includes students), but it isn't clear that specific training for faculty search committees or the Admissions Committees is in place. This is now common practice in most institutions of higher education and would benefit GSBS. Students, in particular, mentioned that diversity, equity, and inclusion needed more attention among the faculty and throughout leadership.

The GSBS has the support and commitment of the CSMC and appears to have free rein over their academic programs, including curricula and requirements. However, since students are considered as employees by the CSMC, not all policies map well from the business side onto the academic side. For instance, student complaints are often different from employee complaints. When a student complaint arises, all attempts are made to resolve it informally, at the lowest level possible. If that doesn't work, it will be handled at the next higher level. Students don't know the best way to proceed and to whom they should talk. There is no hot line. While students report that the Associate Director of the graduate school always points students in the right direction when they get to her, they should have access to clearly written policy and procedures.

Students in all the graduate programs claim they have been dealt with fairly and comment favorably on the commitment of the faculty to education, even though few receive more than 5% of their FTE for their educational involvement. GSBS is fortunate to have the dedication of a large number of faculty who work with the students.

The institution has been open and forthright in all communications with WSCUC.

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with the Standard.

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

*Teaching and Learning (CFRs 2.1-2.7).*

CSMC offers four academic degree programs: Master of Health Delivery Science (MHDS), Master of Science in Magnetic Resonance in Imaging (MSMRM), Master of Biomedical Science, and PhD in Biomedical and Translational Science. The Master of Biomedical Science is employed only for students in the PhD track who are unable to complete the PhD degree requirements. Admission requirements are clearly defined and posted on the website and are appropriate for the degree levels being awarded. Similarly, graduation requirements are clearly defined by the programs, and there have been improvements in how this information is communicated with students throughout the program learning experience. The academic degree programs have content and standards that align with the strengths and expertise of the numerous well-funded scientist and clinician-scientist faculty employed at CSMC (CFRs 2.1, 2.2).

All programs have stated student learning outcomes that are reflected in the curriculum, policies, and advising. While progress has been made in comprehensive assessment of student learning outcomes, there does not appear to be shared implementation of a rigorous assessment of student learning outcomes across the programs. There is also work remaining to align course learning outcomes to program learning outcomes with consistency across all programs, with specifics provided below under Component 6 (CFRs 2.3, 2.6). Curriculum development appears to be a collaborative effort of the faculty leadership of the programs (CFR 2.4).

There is evidence of strong student engagement in learning, with students' being actively solicited for feedback that is used for continuous quality improvement. All programs have a capstone/research component with a strong culture of student-faculty project collaboration (CFR 2.5). Student retention, graduation rates, time to degree, and post-graduation employment outcomes are commendable (CFR 2.7).

#### Scholarship and Creative Activity (CFRs 2.8-2.9).

Support for these academic programs percolates throughout the organization from the president down through every clinical department with development of strong core facilities to support the research enterprise. CS faculty are nationally and internationally recognized leaders in their fields. Faculty research projects are well funded by NIH and other grant funding sources. Collectively, the faculty at CS have the capacity and expectation to provide research and capstone opportunities for every admitted student (CFR 2.8). Faculty evaluations occur within their specific assigned unit with clear expectations for research and scholarship productivity. Faculty with teaching commitments are provided different percentage FTE for that engagement in the graduate programs. Consistency in faculty evaluation and promotion occurs through standardized forms and guidelines used across all academic units and through a cross campus faculty promotion committee (CRF 2.9).

#### Student Learning and Success (CFRs 2.10-2.14).

The students shared that they felt engaged by the CS academic leadership and that they experienced changes in response to their input. Given the relative newness of the programs and the small number of students, aggregated student achievement, satisfaction, campus climate, and timely progression have been tracked but drawing conclusions from disaggregation relative to diversity and inclusion remains to be determined (CRF 2.10). Students and program leadership report regular opportunities for students to provide continuous quality improvement feedback through end of course evaluations, student representatives, and at multiple points during the trimester (CFR

2.10). Co-curricular activities are available for students, but it is not clear how they are assessed (CFR 2.11).

Faculty and program leadership are responsible for providing complete program information and student mentoring. Students report a high level of satisfaction with mentoring that they receive from their respective programs. Students report understanding where to find programmatic policies and procedures and how to reach out for assistance (CFR 2.14). Students report rapid student support responses and assistance when needed. However, student services appear to be delivered at an individual student level and not according to a structured and comprehensive university framework. While this is manageable with a small number (around 100) graduate students, a more sustainable structure will be needed if these programs grow substantially or if new programs are introduced. Of importance, a student disabilities process for accommodations appears to be missing, outside of referral to HR for employee accommodations. There is a need to develop an accommodations procedure that is independent of program leadership—to avoid the inherent power dynamic between student and leadership. This procedure should also be separate from HR, which oversees employee accommodations but does not handle accommodations that are related to the learning needs of students. Attention should be given to ensure that requesting academic accommodations or accommodations for seen or unseen disabilities is de-stigmatized and normalized. Best practice in higher education is to provide information to students on how to request academic accommodations at orientation. This information should be included in all course syllabi. Student accommodation processes and procedures are key equity practices in higher education programs (CFR 2.13). Because students do not transfer into these programs, there is no need for a transfer policy for student learning and success (CFR 2.14).

The team's finding, which is subject to Commission review, is that irrespective of recognized areas for improvement, the institution has provided sufficient evidence to determine compliance with the Standard.

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

#### *Faculty and Staff (CFR 3.1-3.3).*

Although the CSMC has thousands of funded researchers, assigned Faculty FTE is very low for the size of the programs. Most faculty involved in the GSBS are given a fractional FTE (5%-50%), depending on their role. A faculty oversight committee composed of lab mentors oversees curricular matters in the PhD program. The master's program faculty have meetings and have leadership roles, although the structure governing curricular decisions is not as clear.

While students and the programs in general are subject to careful evaluation and assessment, faculty evaluation depends on evaluation forms and submission of an annual performance form. Faculty development programs are informal within each degree program. Faculty hiring practices have not yielded a faculty representative of the diverse community of Los Angeles. The CSMC has established an Office of Diversity and Inclusion and plans to reorganize the office and to create closer ties to GSBS.

CSMC draws from a distinguished pool of clinical, scientist, and research faculty. There are ample faculty to teach classes and mentor students. Faculty are less evident in administrative or program leadership roles. Though staff are referred to numerous times in policy and practice, the extent to which staff development is available is not clear.

*Fiscal, Physical, and Information Resources (CFR 3.4-3.5).*

The program is generously funded by CSMC. Tuition is drawn in the master's programs (and returned to the programs to offset costs), grants are sought (although it is not possible to tell the extent to which grant monies are impacting the programs), and philanthropic contributions may also play a part in how the academic enterprise at CSMC is funded. The strategic plan calls for the development of student loan availability and efforts to increase in grant revenues. PhD students are funded with a \$41K annual stipend, more than half of which is funded directly from the lab rotation in which the student is assigned. A new administrative position (Vice Dean) has remained unfilled. This is a position that is expected to negotiate GSBS resources and allocations coming from CSMC. Financials and budgets are not complete in some instances and there appears to be a strong (perhaps too strong) reliance on the current commitment by CSMC to the GSBS.

Facilities, services, and information technology resources compose a very strong aspect of the GSBS. CSMC provides state of the art technology and repeatedly restates a commitment to maintaining the most up to date technology. The CSMC also offers training for the use of technology.

*Organizational Structures and Decision-Making Processes (3.6-3.10).*

There does not appear to be any question of the integrity and capacities of institutional leadership. The institution has demonstrated a consistent interest in examining the GSBS from the standpoint of trying to grow the programs and to address the issues that have been revealed to need attention. The GSBS has exhibited responsiveness to some program issues that warranted improvement. There are also systematic, and regular reviews designed to assess and improve programmatic performance and educational quality.

CSMC has employed a consulting firm, which among other tasks is charged with creating an administrative and financial structure. The GSBS recognizes that it is lacking an academic associate dean for education currently and is expecting to conclude a search to fill this position soon.

It is not clear how the CSMC governing board recognizes its duties and responsibilities to the academic enterprise. Audit information was not provided that would identify the institution's attention to the financial aspects of the creditable entities. The consulting firm hired to help in the school's development has among its many tasks a question to answer about whether the school should establish a governing board.

Faculty have been effective in providing leadership and guidance to the school's development and operations. The faculty have continuously contributed to the oversight and improvement processes and thus far have been effective in the education their students.

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with the Standard.

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

The GSBS uses an array of qualitative and quantitative measures to support quality assurance. These include for each program under review: 1) comprehensive self-studies, 2) external review, 3) matrix assessment plans, 4) benchmarking to similar programs, 5) a Graduate Research Education (GRE) Final Action and Improvement Plan, 6) strategic planning, 7) satisfaction surveys, 8) student feedback meeting minutes, and 9) SWOT analyses (CFR 4.1).

The school annually considers retention, attrition, graduation, and time to completion rates. Grades, lab rotation reviews, qualifying exams, individual student goals (via the IDP for PhD students and advisement meetings for master's students), committee reports concerning student progress, professional activity of students, and research productivity, are all monitored in a systematic and ongoing manner. To varying degrees leadership meetings in each program consider the data arising from these sources and determine needed program modifications (CFR 4.2).

Leadership in each program review data derived from various sources and determine program change and improvements. Currently, a key leadership role with a focus on academic programs remains to be filled (Vice Dean). This is a critical role in representing the school to the larger CSMC administration for planning and resource allocation (CFR 4.3).

Faculty take responsibility for the standards of scholarship, mentoring, and course instruction. Some courses are taught by a single director and other courses are completely team taught. Faculty are invested in student success and have devised many instruments and measures to produce data needed for curricular, pedagogical, and programmatic improvements. (CFR 4.4).

Students, faculty, and administration each play a role in program assessment. In addition, the school engages with external reviewers every 4 years to improve programs. It is not clear how the school aligns the graduate programs under review. The GSBS recognizes that assessment at the school is geared towards individual programs (Institutional Report, p. 53) (CFR 4.5).

The GSBS has engaged in internal and external review processes, benchmarking, and the pursuit of philanthropic contributions in consideration of strategic planning and growth. In addition, the school has contracted with a consulting firm to help direct a path toward better structure and growth in the coming years. The school appears to involve members of each of its constituencies in consideration of this review and planning process (CFR 4.6).

The GSBS engages in strategic planning, SWOT analyses, and ongoing program review. Faculty practice in the areas in which they teach, are active in their professions, and thus, are able to stay abreast of trends and changes in the professional landscape. It is part of the institution's vision to meet future community needs. The program recognizes the potential of the school to grow, develop new programs, and maintain and achieve further recognition as a leader in the biomedical sciences, magnetic resonance imaging, and health delivery sciences. Benchmarking against other competitive programs, maintaining cutting edge technology, and efforts to hire personnel that can further the GSBS aims are among other indications that the school has an appropriate future orientation (CFR 4.7).

The team's finding, which is subject to Commission review, is that the institution has provided sufficient evidence to determine compliance with Standard 4.

Final determination of compliance with the Standards rests with the Commission.

### **Component 3: Degree Programs: Meaning, Quality and Integrity of the Degrees**

The institution's report narrative on the meaning, quality, and integrity of its degrees defines what it means for a graduate to earn a PhD or Master's degree from the institution. These programs are in alignment with the CSMC mission, vision, and values, with academic education being a core fourth pillar of the organization. Specifically, these programs align with the CSMC commitment to leadership and excellence in delivering quality healthcare service and expanding the horizons of medical knowledge through biomedical research. The student expectation for learning gained from the educational pathway and the length of time for each program are clearly stated for each of the programs, with an overall goal to "think critically, communicate effectively, and to contribute something meaningful and quality to healthcare." Faculty are aligned with the various graduate programs based on their expertise and their passion to train graduate students in the different programs. The graduate programs articulate program learning outcomes that are founded in core competencies that are appropriate for graduate students in PhD and Master's programs in translational biomedical sciences and health care (CFR 2.2).

The institution emphasizes the critical importance of training graduates for work in translational biomedical sciences or to create positive change in health care delivery systems. To varying degrees the programs use assessment processes to evaluate and ensure degree meaning, quality, and integrity (CFR 2.6). All programs use small cohort models with strong foundations in student-mentored research/capstone projects. All programs demonstrate high student retention and completion rates (CFR 2.7). All programs demonstrate a strong commitment to engaging students in the educational improvement process and educating students as peers in translational biomedical science research or health care delivery sciences (CFR 2.5).

A core strength in all graduate programs is the mentorship between faculty and student in capstone and thesis requirements for graduation. Faculty that serve in the graduate programs include both basic scientists and clinician researchers who are nationally and internationally recognized as experts in their fields (CFR 2.8). Expertise and innovation are brought forward into all the graduate programs, and visiting team meetings with students highlighted the "forward thinking and future planning" nature of these programs. The PhD program prepares graduates for careers as independent researchers in academia or industry. The MHDS program prepares graduates for successful careers in emerging health fields such as digital health science, health delivery, mobile health, health technology assessment, data analytics, and healthcare improvement. The MSMRM program prepares graduates with training in MR technical development, artificial intelligence and deep learning, and MR research methodologies (CFR 2.1).

Program Review occurs every 4 years, with the most recent occurring in 2019. The process includes a self-study with the use of an external committee. The self-study includes qualitative and quantitative analysis of program outcomes, program strengths and weaknesses, effectiveness of the program,

review of current and future issues, and program priorities. The Program Review is used to revise curriculum, to determine resource allocation, to modify faculty assignments, and to identify external funding opportunities (CFR 2.7). Manatt Business Consulting has been employed to facilitate development of a 10-year strategic plan for the Graduate School. Based on the site visit findings, graduate school leadership and program leadership could benefit from increased transparency and collaboration as it pertains to the engagement of Manatt Business Consulting, strategic planning, growth in current program, and new program planning and implementation. The nine activities that Manatt Business Consulting is engaged in are nevertheless critical areas of understanding for sustainability and growth in the Graduate School (CFR 4.3).

#### **Component 4: Educational Quality: Student Learning, Core Competencies, and Standards of Performance at Graduation**

The PhD, MHDS, and MSMRM programs have established methods to assess student learning and achievement of core competencies. The leadership committees of each program analyze course outcomes, modify courses based on student feedback, and plan future directions for their respective curriculums. The programs have identified core competencies, although some are clearer than others, and have established standards of performance at graduation.

##### PhD in Biomedical and Translational Sciences

The PhD Oversight Committee assesses student learning in the first-year didactic courses through formative and summative assessments. These courses are designed to provide foundational knowledge in basic sciences, biostatistics, and bioinformatics. Formative and summative assessments include journal club, research in progress presentations, and exams (CFRs 2.1, 2.3).

Lab rotations prepare students for independent research. Mentors, respective principal investigators, and the PhD oversight committee evaluate each student based on the learning objectives at the end of each trimester. Students whose cumulative grade point average falls below 3.0 receive an academic improvement plan (CFRs 2.8, 2.9).

Students are eligible to sit for the qualifying exam at the beginning of the second year if they demonstrate satisfactory academic progress and pass all first-year courses. Students must pass the qualifying exam to advance toward PhD candidacy through dissertation research. Students must develop projects that yield publishable data and satisfy key learning outcomes at the level of excellent or outstanding. Finally, the student must submit the thesis and pass the oral dissertation defense for degree conferral (CFRs 2.5, 2.6, 2.8).

The PhD oversight committee along with faculty mentors and lab directors meet to identify any student achievement gaps. Although there are program goals, program student learning outcomes are unclear. The course syllabi outline the course objectives that identify expectations for student learning. The lab rotation syllabus and agreement form provide transparency in student outcomes for more objective grading. Students indicated that the opportunities in translational research attracted them to the program and that the program provides access, teaching, and laboratory experiences with faculty who are experts in their respective fields (CFRs 2.3, 2.4, 3.10).

The PhD oversight committee meets to review and evaluate student progress in didactic courses, lab rotations, qualifying exam, and dissertation defense key indicators. The oversight committee annually reviews admissions data, time to degree/graduation data, qualifying exam data, lab rotation outcomes, core curriculum performance, and retention/attrition data. The program will conduct program review in 2023, but the review had not been conducted at the time of the WSCUC site visit (CFRs 2.7, 4.3, 4.4, 4.5).

#### Master's in Health Delivery Science (MHDS)

The MHDS program is a hybrid program that focuses on applied health science. This program consists of three main components, didactic courses, fieldwork courses, and the capstone, which is a major component. This hybrid program combines remote learning, interactive video conferences, and in-person residential sessions at the beginning or end of each term. The program employs the use of technology (e.g., Moodle, Zoom) two to three nights per week to facilitate student learning and engagement (CFR 2.1).

The MHDS program assesses students based on program learning outcomes in alignment with course learning objectives. Students must meet core competencies and satisfy program learning outcomes through didactic courses, fieldwork courses, and presentations. The program identified five program objectives which students satisfy through participating and performing in didactic courses, peer mentoring, software labs, and capstone presentations. Program faculty meet quarterly to assess educational quality and achievement of curricular student learning outcomes. Program leadership meets weekly to review outcomes, student feedback, and student progress. As a result of student feedback, the program added a health equity course, as well as content in qualitative research. Students complete an end of term survey to provide feedback for evaluation (CFRs 2.3, 2.4, 2.9, 2.11, 3.10, 4.3).

The MHDS program requires capstone course written and oral assignments, group projects, reflective written essays, exams, student feedback, and participation in technology lab sessions as items that are assessed for student learning. The program faculty assesses student feedback from monthly meetings and exit interviews for graduates and students who withdraw from the program. Students must complete the capstone assignment with related presentations prior to graduation (CFRs 2.4, 2.6, 4.1, 4.3).

#### Master of Science in Magnetic Resonance in Medicine (MSMRM)

The MSMRM program's small size allows faculty to provide individualized attention to students in assessing achievement of core competencies and student learning outcomes. The program faculty use Google Classroom to facilitate teaching and learning in this hybrid program, which offers didactic and research components, with a final thesis project prior to graduation (CFRs 2.1, 2.2, 2.6).

The program leadership meets regularly with faculty to review student progress and achievement of student outcomes. Due to the utilization of many guest lecturers, the course coordinators provide oversight to ensure proper course administration. Course learning objectives are aligned with program outcomes, which the faculty review at the end of each term with input from the faculty mentors. The faculty are concerned that students can develop the required critical thinking skills to conduct magnetic resonance studies needed for employment. Content areas include technical

writing, applied statistics, artificial intelligence, lab rotations, journal club, and phantom scans (CFRs 2.3, 2.4, 2.5, 2.8).

Faculty evaluate student outcomes based on assignments, exams, rotations, and clinical applications. Assessment of student outcome achievement occurs after each course. The faculty conduct an overall assessment of student outcomes at the end of the first year of the program, prior to students' starting their thesis research. Students must complete their thesis before graduating (CFRs 2.6, 2.7, 2.9, 4.1, 4.3).

### **Component 5: Student Success: Student Learning, Retention, and Graduation**

The GSBS aligns student success with the CSMC's mission and values. The CSMC is committed to patient care, education, research, and service to the community and plans to grow its educational enterprises to achieve these outcomes. Success for students in these four areas is integral to the plan. The CSMC strives further to distinguish itself as an innovative, high quality, nationally recognized healthcare leader, moving biomedical and translational sciences forward through research and education. The CSMC aims to achieve this outcome by providing highly esteemed faculty and staff, establishing itself as a model in the wider community, and maintaining cutting-edge facilities and technology.

Students attend a week-long orientation covering CSMC policies and procedures. Students also elect representatives to the Graduate Student Association (GSA). Students are encouraged to participate in the Association for Women in Science (AWIS), the Annual Graduate Student Symposium, clubs, graduate student/faculty retreats, as well as other CSMC events.

Students in the PhD Program demonstrate success by achieving mastery in their field of study and competency in the design, analysis, and communication of research, and by producing a scholarly dissertation ready for journal submission. These students are supported and monitored by a small group of 5-6 qualified faculty who represent the student's dissertation committee. Students in collaboration with their mentors complete the Individual Development Plan (IDP, Attachment 5-1), resulting in an assignment to one of many research labs. The IDP outlines the student's dissertation topic, rotations, learning outcomes, scholarly and professional development achievements, and plans for the following academic year and overall career objectives. The IDP is reviewed by mentors to ensure the student is on course to succeed. The student must meet with their committee no less than annually and more often if progress is not satisfactory. The PhD Oversight Committee monitors each student's progress and provides additional evaluation. The Dissertation Proposal/Qualifying Exam Evaluation Form (attachment 6-7, QE Evaluation) provides an additional mechanism for grading the PhD student's research efforts. The Laboratory Rotation Syllabus provides goals, learning objectives, and a grading rubric. The Laboratory Rotation Evaluation and a separate Presentation Evaluation are also employed. The PhD curriculum map provides an overview of expectations for student learning. Students who cannot complete the PhD may earn the Master's in Biomedical Translational Sciences.

Students in the Master's programs achieve mastery as evidenced by successful completion of didactic courses (C+ or better) and the accomplishment of a satisfactory capstone/thesis. In addition to course grades, the programs utilize peer assessments, team-based assessments, and curriculum mapping to support student success. Students are provided with faculty who teach and practice within their areas of instruction. Thus, there is an inherent element of role modeling by the faculty and currency in the subject matter. In addition, each student has an advisor available to help address academic and/or personal matters. Many students continue to work at jobs during their enrollment or have not been a student for a long time. The advisor can assist in developing a path that supports their success.

The Master's in Magnetic Resonance in Medicine (MSMRM) Assessment Plan (attachment 6-12) clearly outlines the program objectives and the criteria for a student's successful achievement. These include the demonstration of knowledge of MRI concepts and applications, skills with using scanners, facility in communicating the scientific language of magnetic resonance imaging, safety and ethical issues, MRI research skills (through the completion of a thesis), and expertise in the biomedical interpretation/analysis of scans.

The MSMRM Self Study (attachment 4-7) indicates that student success and student feedback influence curricular and program improvements. One example of improvements driven by feedback was demonstrated when the program reduced the number of required credit hours from 72 to 65 by eliminating content overlap identified by students. The MSMRM Program Coordinator as well as the Associate Director of MSMRM are able to assist each student with academic needs such as tutoring, supplemental instruction, and academic advising.

The MHDS curriculum map (attachment 6-2) outlines program objectives (data analytics, health informatics, healthcare financing, and performance measurement and improvement) and detailed elements of knowledge and skills needed to achieve success as a student. The program offers a series of courses yielding grades and a capstone project that is carefully monitored and evaluated. Most students hold full-time jobs. However, student success is supported by a hybrid learning format, tutoring services, affordable tuition, a tuition assistance program providing \$5,280 to each CSMC employed student, a Work and Life Matters program that provides personal consultation, Academic Human Resources (AHR) support, information and technological resources, and state of the art facilities.

The 2019 MHDS Self Study (attachment 6-15) provided information about a satisfaction survey completed by each graduate (attachment 5-2). The instrument is well constructed and the graduates provided ample information. Survey results indicated a high degree of satisfaction with the program delivery and the learning outcomes. The program leadership discussed how they respond to the feedback and implement program improvements and modifications. The school has provided good examples of programmatic improvements including the addition of classes added to the MHDS capstone course.

Student time to degree is very good as is the retention rate of the various programs. School leadership reports that disaggregated data has not yielded useful information due to the small cohort sizes. Data regarding graduates of each of the three programs indicate 93% of PhD students have graduated, 87% of MHDS, and 92% of MSMRM. There is no disaggregated data or information on those who did not graduate.

In terms of potential improvements, the school might begin with student services, which are diffusely organized. Students say that if they ask, they will be told whom to see for one or another service. However, it might be better for the school to provide a document or web page clarifying the availability of student services. Students could be more readily aware of available services as well as not having to ask when and if a matter is confidential. Students report that some of the onboarding is complicated because students are subject to the same bureaucratic processes as an employee. Students complained that these processes had to be repeated at times. They stated that they found their learning impeded and their time wasted by these demands. In addition, as making use of student feedback is something the school is doing well, it might be worthwhile to provide more documentation about the process of soliciting, receiving, and applying student input and feedback.

### **Component 6: Quality Assurance and Improvement: Program Review, Assessment, Use of Data and Evidence**

The institution demonstrates a solid commitment to course and program improvement as evident in the use of student feedback and changes made to courses and programs responding to that feedback. However, there are large differences among the three graduate programs in the rigor of program review, assessment of student learning outcomes, and the use of assessment data to feed back into continuous quality improvement. Collaboration among the programs could strengthen assessment strategies in all degree pathways.

The institution is using results of program review to inform decision-making and to improve instruction and student outcomes. This work emphasizes input measures (from admissions) and output and evaluative measures like grades, retention, and graduation rates. However, key recommendations from the 2019 program review concerning assessment of student learning remain to be addressed.

The 2019 External Review committee identified the need for a leadership position with “vested interest in education” to integrate support and oversight across programs. As of April 2023, a search for a Vice Dean for Health Science Education is nearing conclusion. That review also advised the PhD program to define translational sciences and to identify core curriculum, such as a course in translational sciences and cross-discipline learning opportunities, to distinguish it in the marketplace. Currently, the GRE Governance committee is using the strategic planning process to address cross-program collaboration and learning opportunities for students and faculty.

The institution self-identifies the need to monitor assessment plans as they relate to student learning with continued improvement since the 2019 program review. The PhD curriculum has restructured to help students meet learning objectives. Improvements in lab rotations and evaluation tools for lab performance have been implemented but these practices remain grade and scale based, asking faculty to check boxes on a scale from excellent to poor for briefly described performances such as time management and attention to relevant variables. More robust assessment practices such as those that explicitly document learning in biomedical and translational sciences should be considered.

The MHDS and MSMRM programs have made structural and curricular changes since the 2019 External Review. Assessment in the capstone is now robust, using learning outcomes and rubrics.

The MSMRM program introduced the study of Artificial Intelligence into the curriculum and developed a robust scoring rubric for assessment of the thesis. These rubrics could be translatable across graduate programs.

Strategic planning for the next ten years is relying on advice from Manatt Business Consulting which does not appear to have expertise in assessment of student learning. Additional expertise may be needed to enable the school to continue to improve assessment and use of data and evidence.

Elements of assessment frameworks and cycles are in place and functioning, with the programs using assessment results to improve instruction and student learning. However, decentralization of assessment within program silos may be hindering the development of direct assessment of student learning. Each program has independently developed curriculum maps and assessment plans. In the MSMRM and PhD programs, the maps are not well connected to articulated student learning outcomes.

The PhD and MSMRM programs map their student learning outcomes without reference to intended student performance at the degree level. In the doctoral program there are four larger categories of outcomes (each with sub-outcomes). These outcomes appear on the PhD Curriculum Map and the PhD Assessment Plan. There is also a set of five learning objectives for lab rotations, but there is no crosswalk to course or program outcomes. In the institutional report, however, the PhD outcomes listed on page 19 are different from the outcomes given on the Curriculum Map and the Assessment Plan. PhD faculty agree that it is not clear what the targeted outcomes are. There is a continued need for program faculty to define high-level student learning outcomes that include clear objective criteria for performance that go beyond “peer review” and “knowing when you see it” subjective processes.

The PhD and MSMRM program assessment plans and curriculum maps include learning objectives mapped onto courses, indicating where a given outcome is introduced, reinforced, and mastered. However, these plans and maps do not articulate performance at the degree level. For example, one PhD learning objective is this: “Demonstrate the ability to collate, summarize and write-up experimental results.” Without any performance-level descriptor, this example is a learning objective that can be found at the secondary and college levels. On the PhD map, the courses where this objective is introduced are merely listed, with no indication of the level of expected performance at the doctoral level. While the assessment plans lists tools and benchmarks with timing and responsibilities, there is no clear articulation of what students are expected to know and do.

In contrast, the MHDS curriculum map works with five program outcomes, which are listed on the curriculum map and the program assessment plan. The program uses Moodle to collect quantitative and qualitative data useful for assessing student performance beyond grades alone. The MHDS adds performance criteria to indicate what students should know and do. It maps course objectives onto program objectives—not simply onto courses. For example, in HDS200A, Health Analytics, a student is expected to demonstrate proficiency in presenting health analytic data in slide decks and oral presentations. This objective is mapped onto a specific performance descriptor: In this course, students are introduced to ways of using quantitative and qualitative research methods and data to evaluate the effectiveness and economic impact of healthcare interventions. This program could offer models useful to the other two programs. Assessment experience and expertise is available among faculty in both master’s programs.

At the level of the school, the annual review of each curriculum uses grading metrics and student evaluations rather than assessed outcomes. The curriculum maps and assessment plans do not appear to be generating direct evidence of learning. The institutional report notes that assessment focuses on student data in the Empower Student Learning System. The Empower Student Learning System only appears to be the system of record for student grades, which suggests that faculty assessment of student work is primarily grade-based.

The PhD Assessment Plan describes an Individual Development Plan (IDP) and the Qualifying Examination. The IDP invites students to be active participants in their own learning—a robust assessment goal. The Qualifying Exam and the Dissertation Grading Rubric rates student performance on a set of activities on numeric (1-5) or poor-outstanding scales; however, performance level criteria are absent from the scales. It is unclear if the rubrics are mapped to program and course outcomes or to the QE. The program has many pieces of assessment, but these pieces need to be assembled, especially with reference to student learning.

The MHDS and MSMRM programs have curricula that culminate in a capstone with written and oral components, with robust rubrics for assessment. The use of Learning Management Systems (Moodle or Google Classroom) allows these programs to collect grades, student evaluations, and a variety of student artifacts useful for assessment. The assessment strategies could be shared across programs.

The programs are using data to make decisions. However, that data tends to be viewed as output rather than as evidence of outcomes that can yield knowledge. The reliance on grades, student course evaluations, first-author publications, and job placement do not represent robust assessment strategies. There is a need for the programs to use assessment data to draw conclusions that will shape future actions, and to implement a cycle of assessment to drive continuous quality improvement. For example, analysis of grades appears to guide curricular reform in the first year of the PhD. It is unclear what assessment data is collected and used for program improvement after the first year. Disaggregated data from qualifying exam results, broken out by gender and ethnicity, is presented but conclusions are not offered. The same is true of data on student diversity.

In the three assessment plans, there is some information about committee or core faculty participation in discussions of student learning. It is unclear how program faculty and committees are using data and evidence to reach new discoveries—especially pertinent to growth in rapidly evolving fields.

### **Component 7: Sustainability: Financial Viability, Preparing for the Changing Higher Education Environment**

The GSBS funding is principally derived from the Medical Center. CSMC is thought of as fully committed to the educational enterprise. Increase in support to the GSBS has risen from \$2.7M in 2019 to more than \$4M in 2023. CSMC is stable and depends largely on clinical revenues, grant funds, and donor contributions. The Institutional Report indicates that the GSBS represents less than 1% of the total CSMC academic budget of \$700M. CSMC considers the GSBS programs as separate cost centers of the medical center. The Director of Academic Finance produces a budget for each program based on the input derived from a collaboration with each program director. The Vice Dean and the Associate Director of the GSBS also contribute to budgeting. Budgeting is largely dependent

upon the size of the student body. Faculty/student ratio is not factored into budgeting decisions. Each budget primarily represents the costs for program administration salaries, marketing, recruiting, and supplies. Tuition fees are collected in the master's programs but are kept by each program. CSMC contracts provide some percentage of employee time for faculty and/or administrative responsibilities of the graduate school.

CSMC is financially stable and has functioned without a deficit, and the graduate programs fall within the four pillars of the CSMC mission. There is support for the graduate programs from the President and the Board.

Each PhD program student receives an annual stipend of \$41,000 for the first 5 years of the program (beginning in the second year, \$23,640 of which is contributed from the lab where the student's mentor is located). The program director stated that he thought that the stipend was too low and should be increased. Student training grants also help to contribute to the annual program budget. The PhD program FY 2023 budget includes 8 individual faculty members who comprise an FTE of 2.8 and a total expense of \$521,110 (not including benefits).

The master's programs assess students for tuition based on credit hours. The MHDS program supports 5 faculty with an FTE of 1.02 and a total expense of \$156,569 for FY 2023. The MSMRM program budget is incomplete. Tuition for the MSMRM is \$17,400 for the whole program (originally \$600 a credit unit, tuition was drastically reduced starting in 2019-2020 to \$75 per unit to enhance recruitment). Each of the MSMRM faculty also have received NIH funding for their research.

Full costs of the graduate programs do not appear to be allocated in a graduate program budget but are shared institutional costs. There are no concerns regarding institutional support for the ongoing needs of the graduate programs. All program educational activities benefit from other CSMC faculty contributing small amounts of time to the graduate school. In addition, the CSMC promotes state of the art technology to support its clinical and educational efforts. Financial aid personnel help students understand how the program is affordable, the scholarships and financing that is available (though few students borrow money). The financial aid personnel are also currently in the process of looking at determining the school's Title IV eligibility.

There were no financials provided for FY 2021-2022. Consideration might be given to assessing the contributions of faculty and other resources (space, technology, etc.) that financially benefit or enrich the graduate program. Some of the questions raised by this review regard the budgeting process, which seems somewhat simplistic. In addition, cost considerations are often skipped or overlooked in the financial reports (i.e., salary benefits, the cost of lab mentors, costs for adjunct faculty, facilities usage, student services furnished by the CSMC, etc.). Thus, the real costs of the program are probably far greater than are currently being estimated.

Though the programs under review are not at all dependent on donor contributions, the CSMC and the graduate program leadership are seeking and have already had success in securing philanthropic support for future educational programs. The CSMC wants to support efforts to increase grant awards and research, the development of new clinical and education programs, and the establishment of a Health Sciences center for expanded educational programs. Growth of the school will require stronger infrastructure. Currently the school includes roughly 100 students and could not be larger with the current level of staffing. The Institution has the faculty and many other resources

needed to grow the program. The school would like to expand the PhD program in areas where CSMC has significant expertise and Federal funding and can also foresee a set of programs to educate and train a variety of allied health technicians. In the last 7 years NIH funding for CSMC research has quadrupled. The school acknowledges that there are growing pains that come with such rapid growth. Though little is said regarding the education programs, the [2022 Report to the Community](#) is an inspiring and rich document potentially useful in generating philanthropic support for the graduate program.

Though there is widespread agreement that the CSMC is fully committed to the graduate program, there are no formal documents presented certifying this commitment and ensuring that students would be supported through their completion of the program. In addition, students need to ask to be informed of whom to contact for particular services. Student services seem diffusely organized and might benefit from a webpage unifying information that could be made readily and discreetly available for students to access the desired services. The Graduate Student Association and some events aimed at providing socialization experiences for students and faculty have been funded by the programs.

Throughout this review various constituencies agreed that they would like to see CSMC invest more in marketing and admissions. Faculty, students, and administrators are proud of the school's success in the short time it has existed and believe that the graduate programs are a very valuable resource that many prospective students would value knowing about.

#### **Component 8: Optional Essay on Institutional Specific Themes**

- Not applicable

#### **Component 9: Reflection and Plans for Improvement**

CSMC recognizes that the quality of its academic programs in biomedical and translational sciences is a pillar essential to the entire operation. To emphasize the quality of education is to get to the heart of what the GSBS plans to do going forward. This is a commitment made to advancement across highly competitive and socially valuable integrative fields. Leaders of both GSBS and CSMC have committed themselves specifically to improve the quality of their programs by developing robust academic leadership, advancing their work on diversity, equity, and inclusion, and moving forward with assessment of student learning outcomes. The team was impressed by the interest and willingness to learn that faculty and administrators expressed in all dimensions of the reaccreditation review. Faculty and administrators recognize that they are doing many things well—and student testimonials bear out this observation. At the same time, reflecting on the need for work ahead, GSBS and CSMC convey a genuine recognition that they must continue their work to improve the overall quality of students' educational experience.

### Section III – Other Topics (such as Substantive Change)

Not applicable

### Section IV – Findings, Commendations, and Recommendations

#### Commendations.

The Cedars-Sinai Medical Center Graduate School of Biomedical Sciences is to be commended for:

- A culture in which students build connections with faculty, staff, and fellow students, and feel welcomed as peers
- Faculty and program leadership that engages students in shaping courses, curriculum, and the students' educational experience
- Innovative faculty and leadership focused on strategic long-term growth in academic programs
- PhD program that strongly emphasizes translational science; Master's programs that educate graduates who are competent and competitive to be employed in a changing healthcare environment
- Individualized attention and mentoring given to students by faculty and staff

#### Recommendations.

The team recommends that the Graduate School:

- Appoint a school-level external advisory board to provide perspective, input, and guidance. (CFRs 3.9, 4.7)
- Devote further attention to creating a culture of diversity, equity, inclusion, and belonging throughout all operations and functions of the school. (CFR 1.4)
- Develop a cohesive formalized approach to student support services. (CFR 2.13)
- Invest in development and refinement of assessment of student learning. (CFR 2.3, 2.6, 4.4)
- Enhance enrollment management through focused marketing, outreach, and website presence for all programs. (CFR 3.4)

### Appendices

The report includes the following appendices:

#### A. Federal Compliance Forms

1. Credit Hour and Program Length Review Form

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the Comments sections as appropriate.)
	Is this policy easily accessible? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Policy on credit hour	<p>If so, where is the policy located?  On the website in the Graduate School of Biomedical Science Policy Handbook (page 16)</p> <p>Comments: Easily accessible to the public</p>
Process(es)/ periodic review of credit hour	<p>Does the institution have a procedure for periodic review of credit hour assignments to ensure that they are accurate and reliable (for example, through program review, new course approval process, periodic audits)?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If so, does the institution adhere to this procedure? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments: PhD program reviews during program review (every 4 years). The Master's programs review credit hours annually.</p>
Schedule of on-ground courses showing when they meet	<p>Does this schedule show that on-ground courses meet for the prescribed number of hours?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments:</p>
Sample syllabi or equivalent for online and hybrid courses <i>Please review at least 1 - 2 from each degree level.</i>	<p>How many syllabi were reviewed? 2</p> <p>What kind of courses (online or hybrid or both)? Hybrid</p> <p>What degree level(s)? <input type="checkbox"/> AA/AS <input type="checkbox"/> BA/BS <input checked="" type="checkbox"/> MA <input checked="" type="checkbox"/> Doctoral</p> <p>What discipline(s)? HDS, PhD</p> <p>Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments: HDS courses include a once a trimester 2 day in person intensive. This in-person learning is in addition to the weekly direct contact hours for each course credit hour.</p>
Sample syllabi or equivalent for other kinds of courses that do not meet for the prescribed hours (e.g., internships, labs, clinical, independent study, accelerated) <i>Please review at least 1 - 2 from each degree level.</i>	<p>How many syllabi were reviewed? 1</p> <p>What kinds of courses? Tutorials</p> <p>What degree level(s)? <input type="checkbox"/> AA/AS <input type="checkbox"/> BA/BS <input type="checkbox"/> MA <input checked="" type="checkbox"/> Doctoral</p> <p>What discipline(s)? Biomedical Sciences</p> <p>Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments:  Laboratory rotations are 4 credit courses and students are expected to spend significant hours each week in the lab doing research.</p>
Sample program information (catalog,	<p>How many programs were reviewed? 1</p> <p>What kinds of programs were reviewed? PhD</p>

[Type here]

website, or other program materials)	What degree level(s)? <input type="checkbox"/> AA/AS <input type="checkbox"/> BA/BS <input checked="" type="checkbox"/> MA <input checked="" type="checkbox"/> Doctoral
	What discipline(s)? Biomedical Sciences, MHDS, MSMRM
	Does this material show that the programs offered at the institution are of a generally acceptable length? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	Comments: The master's programs are 18-20 months as detailed on the website. The PhD is 4-6 years.

Review Completed By: Sarah Sweitzer

April 16, 2022

## 2. Marketing and Recruitment Review Form

Under federal regulation\*, WSCUC is required to demonstrate that it monitors the institution's recruiting and admissions practices.

Material Reviewed	Questions and Comments: Please enter findings and recommendations in the comment section of this table as appropriate.
**Federal regulations	<p>Does the institution follow federal regulations on recruiting students? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments: All programs select students as an Admission Committee focusing on undergraduate transcripts, letters of recommendation as well as personal statement and CV/resume.</p>
Degree completion and cost	<p>Does the institution provide information about the typical length of time to degree? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Does the institution provide information about the overall cost of the degree? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Comments: The MS degree programs are lock-step and the curriculum is provided with length of time. The PhD program is varied by provides time to degree statistics.</p>
Careers and employment	<p>Does the institution provide information about the kinds of jobs for which its graduates are qualified, as applicable? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Does the institution provide information about the employment of its graduates, as applicable? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>
	<p>Comments: Each program is featured on the CSMC website, although some information is challenging to find. Programs have policies and procedures for admissions, and are supported through the admissions team, registrar, and financial aid staff. Each program mentioned the need for improved marketing for recruitment. Strategic planning will be employed to inform expanded marketing and student recruitment efforts, benefitting all programs.</p>

\*§602.16(a)(1)(vii)

\*\*Section 487 (a)(20) of the Higher Education Act (HEA) prohibits Title IV eligible institutions from providing incentive compensation to employees or third party entities for their success in securing student enrollments. Incentive compensation includes commissions, bonus payments, merit salary adjustments, and promotion decisions based solely on success in enrolling students. These regulations do not apply to the recruitment of international students residing in foreign countries who are not eligible to receive Federal financial aid.

Review Completed By: Gail Orum  
Date: 4/21/2023

### 3. Student Complaints Review Form

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)
Policy on student complaints	Does the institution have a policy or formal procedure for student complaints? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	If so, is the policy or procedure easily accessible? If so, where? CSMC's Grievance Policy is available on the website through a policy handbook download. The Grievance section is 6.10.8 (page 36-37).
	Comments: Student complaints are handled through Academic Human Resources, and policies about this process are not included in the Policy Handbook on the website. It may be important to include this publicly.
Process(es)/ procedure	Does the institution have a procedure for addressing student complaints? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If so, please describe briefly: Students may address complaints to faculty, staff, and any administrator. These are then highlighted to the GRE manager, who will alert AHR. Based on the complaint, AHR may then complete an investigation on the student's behalf. The policy directs the student to the person who can receive the complaint. However, the policy does not provide sufficient detail about the procedure for reviewing, replying to, and resolving the complaint. In addition, there is no indication of where student complaint records are maintained.
	If so, does the institution adhere to this procedure? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	Comments: The Institutional Report explains that complaints "are usually channeled through the Manager of Graduate Research Education (GRE) to an assigned AHR Business Partner." However, the report suggests that these reports sometimes bypass the GRE Manager. None of this information found in the Institutional Report is reflected in the actual policy statement.

Records	Does the institution maintain records of student complaints? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If so, where? Web-based software - ServiceNow
	Does the institution have an effective way of tracking and monitoring student complaints over time? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If so, please describe briefly: These records are maintained by Academic Human Resources in their database and are available on a case by case basis.
	Comments: This may need to be revisited to ensure they are kept confidential but are able to be tracked effectively. What are the procedures for reviewing, replying to, and resolving student complaints? How are complaints maintained and stored? How do the programs make use of complaints in consideration of program improvement?

\*§602-16(1)(1)(ix)

See also WASC Senior College and University Commission’s Complaints and Third Party Comment Policy.

Review Completed By: Gilbert Newman

Date: 4/14/2023

#### 4. Transfer Credit Review

Cedars Sinai does not offer transfer credit for any course for any of the programs under review in the GSBS. There are no plans to change this policy.

#### **B. Off-Campus Locations Review**

Not applicable

#### **C. Distance Education Review**

The online/hybrid Master’s in Health Delivery Science of CSMC GSBS was approved via Substantive Change by WSCUC. In this 20-month program, students are members of a cohort and are on campus (“residential”) five times. The first residential period is at the start of the program, where students meet one another and the faculty. Though many students are local to Southern California, others come from across the U.S. All are current professionals, most already in some aspect of medicine, who are looking to earn their MS while continuing to work. In-person classes are offered at the beginning or end of each trimester, with the remaining instruction handled online. Moodle is the learning platform, and secure

logins are made through the Student Information System (Empower). Zoom is used for course interactions, and exams may either be open-book, or proctored via Zoom camera. The Enterprise Information System Helpdesk is available 24/7 for students who may need assistance.

Faculty who are active in the program, teaching and/or mentoring students, meet regularly and are themselves mentored by the program director and associate director. Each course is also reviewed each time it is taught, and students feel free to provide suggestions for improvement. The review team met with the entire Spring 2023 graduating class of MHDS and learned that the distance education system, combined with the five residential periods, made for a strong, cohesive cohort, who had only praise for the faculty and the program.