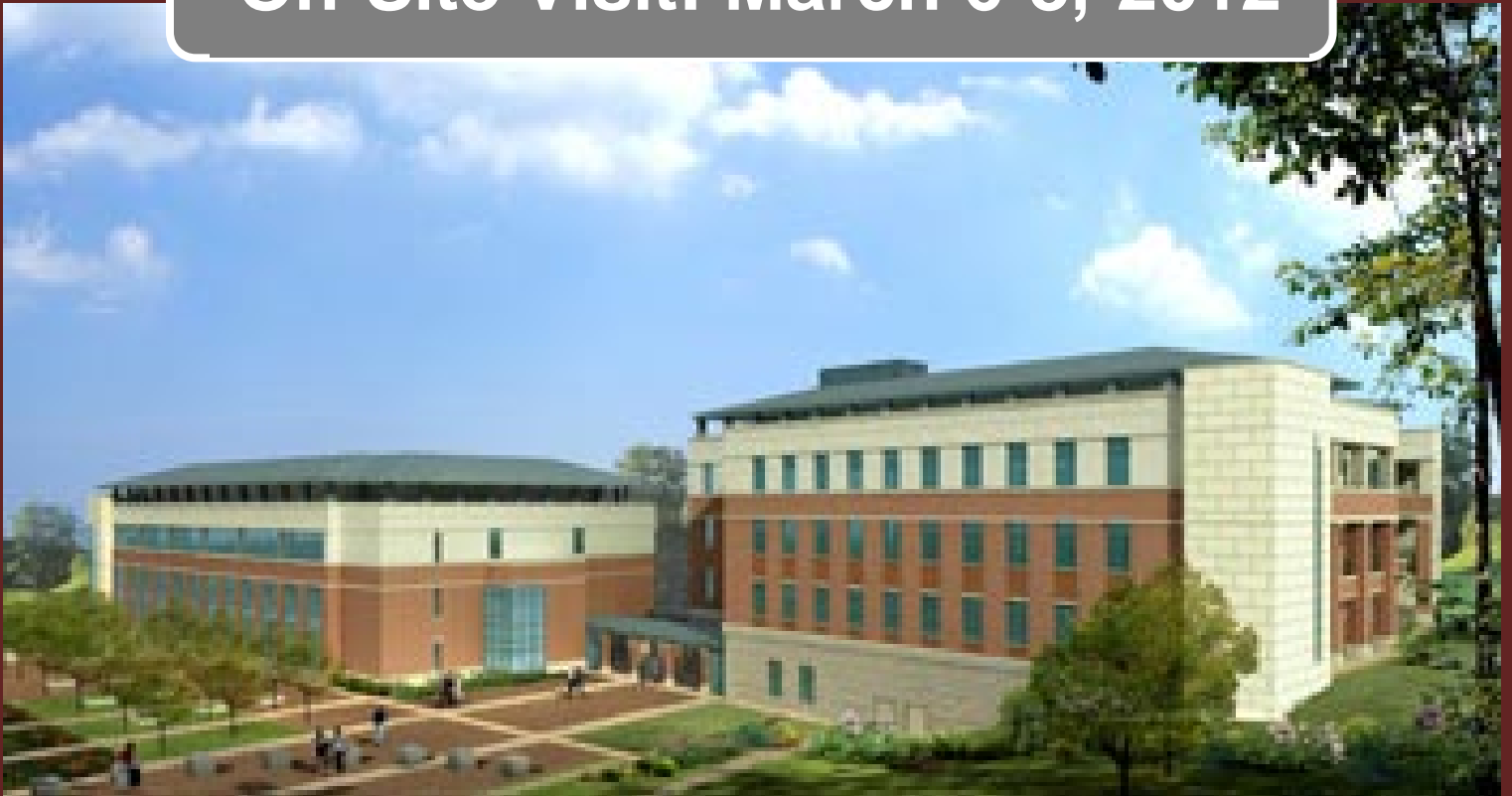


Texas A&M Health Science Center

Focused Report

On-Site Visit: March 6-8, 2012



Southern Association for Colleges and Schools
Reaffirmation of Accreditation



TEXAS A&M
HEALTH SCIENCE CENTER

Introduction

The Texas A&M Health Science Center is unique in that its six academic units are housed at campuses located in eight different cities across Texas. The academic units include the Baylor College of Dentistry, the College of Medicine, the College of Nursing, the Rangel College of Pharmacy, the School of Graduate Studies, and the School of Rural Public Health. Texas A&M Health Science Center locations include Bryan, College Station, Dallas, Houston, Kingsville, McAllen, Round Rock, and Temple. In addition, the institution has multiple research/service centers and offers distance education programs to online students.

The following online presentation has been prepared to help orient the on-site review team to the Health Science Center's multi-campus structure (press the arrow at the bottom of the screen).

<http://www.tamhsc.edu/about/accreditation/sacs/orientation.html>

The table below lists the academic programs by campus:

Academic Programs by Campus

| | Baylor College of Dentistry | College of Medicine | College of Nursing | Rangel College of Pharmacy | School of Graduate Studies | School of Rural Public Health |
|------------------------|-----------------------------|---------------------|--------------------|----------------------------|----------------------------|--------------------------------|
| Bryan | | MD | BSN | | MS, PhD | |
| College Station | | MD | | | MS, PhD | MPH, MHA MSPH, PhD, DrPH |
| Dallas | BS, MS, DDS | MD | | | MS, PhD | |
| Houston | | | | | MS, PhD | |
| Kingsville | | | | PharmD | | |
| McAllen | | | | | | MPH |
| Round Rock | | MD | BSN | | | |
| Temple | | MD | | | MS, PhD | MPH |

Contents

This Focused Report addresses items from the original Compliance Report that were considered to be non-compliant in the following areas:

| |
|--|
| Core Requirement 2.11.1 – Financial Resources |
| Comprehensive Standard 3.2.3 – Board Conflict of Interest |
| Comprehensive Standard 3.3.1.2 – Administrative Support Services |
| Comprehensive Standard 3.3.1.4 – Research within the Institutional Mission |
| Comprehensive Standard 3.3.1.4 – Service within the Institutional Mission |
| Comprehensive Standard 3.5.1 – General Education |
| Comprehensive Standard 3.7.1 – Faculty Competence |
| Federal Requirement 4.1 – Student Achievement |

For each of these areas the observations from the off-site review team are included, followed by the response from the Texas A&M Health Science Center. In addition, responses to the two newest federal requirements (below) are included as well.

| |
|---|
| Federal Requirement 4.8 – Distance Education |
| Federal Requirement 4.9 – Definition of Credit Hour |

The Focused Report and the supporting documentation can be viewed online at <http://www.tamhsc.edu/about/accreditation/sacs/index.html>

Core Requirement 2.11.1

Financial Resources

The institution has a sound financial base and demonstrated financial stability to support the mission of the institution and the scope of its programs and services.

The member institution provides the following financial statements: (1) an institutional audit (or Standard Review Report issued in accordance with Statements on Standards for Accounting and Review Services issued by the AICPA for those institutions audited as part of a systemwide or statewide audit) and written institutional management letter for the most recent fiscal year prepared by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or Standard Review Report) guide; (2) a statement of financial position of unrestricted net assets, exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year; and (3) an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board.

Audit requirements for applicant institutions may be found in the Commission policy entitled "Accreditation Procedures for Applicant Institutions. (Financial Resources)"

Findings of the Off-Site Review Committee:

Non-Compliant

While the institution has indicated compliance, its current year externally reviewed financial information will not be available until early next year. Of importance in this financial review would be an institutional management letter. They did include prior year information.

From the institution's prior year statements, it appears that overall the numbers presented in the balance sheet, statement of revenues, expenses and changes in net assets do demonstrate a sound financial base and stability. This includes significant increases in net assets from FY09 to FY10. This is primarily due to increases in State contributions for expansion as well as overall capital contributions. This is true even when considering such recent accounting changes such as the Other Post Employment Benefits.

Also, the institution presented a well thought out budgeting process based on solid fiscal procedures and aligned with its mission, master plan, strategic plan, and overall guidelines. This included a final budget approved by its governing board.

Response and Actions Taken:

The Health Science Center is both a member of the Texas A&M University System and a separate agency under the State of Texas. In accordance with the *Statements on Standards for Accounting and Review Services* issued by the American Institute of Certified Public Accountants, the State Auditor's Office conducted a review of the Health Science Center annual financial report for FY 2011. The annual financial report is a state-required report submitted through the Texas A&M University System to the State Comptroller's Office. Based on its review of the report, the State Auditor's Office prepared a Standard Review Report and an institutional management letter. The Health Science Center annual financial report for FY 2011 was completed and submitted to the state November 21, 2011, and the State Auditor's Office has provided its report and management letter as of January 20, 2012.

The original unaudited financial documents for FY2011 are provided here for review, including a [Statement of Changes in Net Assets](#) between FY2010 and FY2011. The [Texas State Auditor's Financial Review](#) regarding the Health Science Center FY2011 annual financial report is also attached, which includes a management letter on page 30.

Supporting Documentation and Evidence:

- FY2011 Annual Financial Report
 - [Unaudited Letter](#)
 - [Texas A&M University System Combined Report](#)
 - [Health Science Center Report](#)
- [FY2012 Board Approved Budget](#)
- [FY2012 Board Approval of Budget](#)
- [Statement of Changes in Net Assets](#)
- [Texas State Auditor's Financial Review](#) (Management Letter is on page 30)

Comprehensive Standard 3.2.3

Board Conflict of Interest

The governing board has a policy addressing conflict of interest for its members. (Board conflict of interest)

Findings of the Off-Site Review Committee:

Non-Compliant

There is a Conflict of Interest standard in TEC §572.051 and also a component in the Texas A&M University System Policy (System Policy 7.01) that applies to the BOR and Texas A&M University System Employees. Each year all members of the BOR and some System employees must file Annual Financial Disclosure Reports (System Policy 7.03) to insure that the System enters into no agreement in which a member of the BOR or a System employee has a direct or an indirect interest. However, no evidence has been provided that the policy is being regularly implemented.

Response and Actions Taken:

The conflict of interest restrictions for Board of Regents members are regularly implemented and enforced in compliance with [Texas Government Code §572.051](#). This state law has been integrated into [System Policy 7.01](#) and [System Policy 7.03](#), which are published and easily accessible on the Texas A&M System Policies website. The Texas Ethics Commission is the office responsible for enforcing filing requirements of the annual financial disclosure forms. Copies of the actual financial disclosure forms filed by three recently appointed Board members are provided in the supporting document section below as evidence of compliance. A [memo](#) from the Board of Regents office also verifies that top administrators from each System member institution have filed the required [personal financial disclosure forms](#) for FY2011.

Implementation of the conflict of interest policy can be seen in actions taken by the Texas A&M System after a new Board member had been sworn in, then later became a partner in a law firm that had an existing contract with the System. The System's General Counsel submitted a [letter](#) to the Texas Attorney General explaining the potential conflict of interest, and requested advice on how to proceed. The Texas Attorney General's [opinion number GA-0351](#) was issued in response. The Attorney General's ruling stated that the existing contract would need to be honored; however, the System would not be allowed to enter into another contract with the law firm while the regent remained a partner in the firm. The Regent's conflict of interest also prevented the Board from exercising its contractual right to extend the contract for an additional twelve-month period. Other examples of the policy being applied can be seen in the minutes of Board meetings ([February 2006](#) and [July 2008](#)) in which Board members have recused themselves from voting on a particular topic that was considered to be a conflict of interest.

The issue of conflict of interest among Board members at all universities in Texas is also being addressed at the statewide level by the Joint Oversight Committee on Higher Education Governance, Excellence, and Transparency. This bipartisan Committee of the Texas Legislature is charged with examining:

- the governing structure and organization of the state's universities, health-related institutions of higher education, and university systems;
- the manner in which the governing boards and administrators of those institutions develop and implement major policy decisions, including the impartiality and adequacy of their processes;
- measures to identify and encourage those governing boards and administrators to follow best practices in policy development and implementation; and
- any other matter relating to excellence, transparency, accountability, or efficiency in the governance or administration of the state's universities, health-related institutions of higher education, and university systems.

The legislative committee is currently meeting monthly to hear testimony from university presidents, chancellors, and other representatives. The committee will make a report of its findings and recommendations to the speaker and lieutenant governor in advance of each regular session of the legislature. It will issue its initial report by January 7, 2013. Information about the committee members, agendas, and activities can be viewed on the committee website:

<http://heget.posterous.com/>

Supporting Documentation and Evidence:

- [Annual Financial Disclosure Form for System Employees](#) (sample form)
- Annual Financial Disclosure Forms File by Board of Regents Members:
 - [Elaine Mendoza](#) (Regent)
 - [Judy Morgan](#) (Regent)
 - [Cliff Thomas](#) (Regent)
- [Attorney General Opinion No. GA-0351](#) (regarding conflict of interest)
- Board of Regents Meeting Minutes ([February 2006](#) and [July 2008](#))
- Joint Oversight Committee on Higher Education Governance, Excellence, and Transparency Website: <http://heget.posterous.com/>
- [Letter to Attorney General from System General Counsel](#) (requesting an opinion)
- [Memo Regarding Top Administrator Filings](#) (list of members who filed disclosure forms)
- [System Policy 7.01 Ethics](#)
- [System Policy 7.03 Conflicts of Interest, Dual Office Holding and Political Activities](#)
- [Texas Government Code §572.051](#) (standards of conduct, ethics for state agencies)

Comprehensive Standard 3.3.1.2 Administrative Support Services

The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas: (Institutional effectiveness)

3.3.1.2 administrative support services

Findings of Off-Site Review Committee:

Not Compliant

While the Committee notes that the University has provided evidence of identifying expected outcomes, “closing the loop” on assessment, and using the results for improvement for most of its administrative support services, it cannot determine that evidence provided represents all administrative support services.

Texas A&M University System Health Science Center identifies expected outcomes and assesses the extent to which it achieves these outcomes for administrative support in Academic Affairs, President’s Office, and Institutional Advancement. These areas provide two years of data that show some improvement based on the analysis of assessment results. The Office of Finance and Administration was delayed in its participation in the TracDat implementation, therefore data is only provided for FY11. While the Office of Finance and Administration identifies expected outcomes, and assesses the extent to which it achieves the outcomes, the committee could not determine that the institution is “closing the loop” on assessment, and using the results for improvement in Finance and Administration.

Response and Actions Taken:

3.3.1.2 Administrative Support Services

Each administrative unit within the Health Science Center identifies its core responsibilities or functions; then determines its desired outcomes based on the performance of those functions. At the end of the year, performance results are recorded in a centralized database (TracDat); then these results are analyzed to determine any follow-up actions that should be taken to make improvements for the next year.

The division of Finance and Administration fully participates in this ongoing assessment process but did not begin recording its results into the TracDat system until FY2011. Due to budget cuts and reorganization, the person originally assigned responsibility for the data entry function was terminated during FY2010, so this division was delayed in converting its existing assessment data into the TracDat format. Therefore, the original Standard 3.3.1 narrative response only

included Finance and Administration assessment reports for FY2011. Two additional individuals from Finance and Administration have been trained in use of the TracDat system, so the data entry has been completed. Members of the Finance and Administration leadership team have also received additional instruction regarding the strategic planning process and “closing the loop.” Updated assessment reports for both FY2010 and FY2011 are included in Table 3.3.1 - A below.

Table 3.3.1 - A Annual Assessment Reports for Finance and Administration Units

| Unit/Department | Detailed Assessment Reports | |
|---|------------------------------------|-----------------------------|
| Finance & Administration | | |
| Budgets and Accounting | FY10 Report | FY11 Report |
| Contract Administration | FY10 Report | FY11 Report |
| Environmental Health & Safety Management | FY10 Report | FY11 Report |
| Facilities | FY10 Report | FY11 Report |
| HUB & Procurement Services | FY10 Report | FY11 Report |
| Payroll & Human Resources | FY10 Report | FY11 Report |
| Risk Management | FY10 Report | FY11 Report |
| Information Technology | FY10 Report | FY11 Report |
| Vice President for Finance & Administration | FY10 Report | FY11 Report |
| | | |

Improvements to Administrative Support Services

A number of improvements in Finance and Administration operations have been made as a result of establishing desired outcomes, assessing performance, and implementing action plans. This division has been practicing continuous improvement for years; however recent efforts have been made to improve the process of *recording* evidence of actions taken to “close the loop.” Below are a few examples of documented improvements:

- Information Technology** In accordance with its annual [assessment plan](#) the Office of Information Technology distributed a satisfaction survey to all Health Science Center faculty, students, and staff in spring 2010. [Analysis of survey responses](#) indicated a need for several items, including additional training opportunities for the content management system software and an increase in desktop support. Survey responses also indicated a high level of dissatisfaction with information technology services in general. In response, the Health Science Center contracted with the Gartner Group to conduct a detailed review of the entire Office of Information Technology operations. The [results of this review](#) were evaluated by the Executive Committee and have been used to initiate multiple organizational changes. These changes included a restructuring of the division, reassignment of personnel to the division of Finance and Administration, and elimination of the IT vice president position. The Information Technology [strategic plan](#) has been completely rewritten for FY2012 to better align with the Health Science Center priorities. Hardware and software infrastructure has been assessed, and efforts are underway to develop an improved customer service approach at all locations.
- HUB Purchasing Program** The Health Science Center is required to report, among other things, its expenditures on Historically Underutilized Businesses (HUB) each year in the state of Texas Accountability Report. This online, interactive report allows the Health Science Center to benchmark its performance against other health-related

institutions (see sample [HUB Comparisons for 2010](#)). Based on analysis of contracting and procurement data showing the Health Science Center's poor ranking in state-wide comparisons, the Procurement Services Office took steps to change its purchasing procedures regarding the use of HUBs. An institution-wide effort was made to increase awareness of the availability of HUB vendors, and to encourage their use among all faculty and staff who make purchasing decisions. These efforts resulted in the Health Science Center improving from being last place in 2003, to being ranked as first place in 2010 with the largest percentage of purchases made through HUBs when compared to all the other health-related institutions in Texas ([HUB Rankings](#)). [Reports for FY2011](#) indicate that, although overall institutional expenditures have decreased as a result of budget cuts, the Health Science Center continues to maintain its success in directing a sizable percentage (25.9 %) of its purchases to HUB vendors.

- **Environmental Health and Safety** Construction of the new Bryan campus in FY2010 created a need for a focused quality assessment and quality control process for Health Science Center facilities. After a review of state and federal safety requirements, the Environmental and Safety Office tried to determine how best to perform timely safety inspections. In response, a Fire and Life Safety Specialist position was created (as evidenced in the Environmental Health & Safety [2010 Assessment Report](#) and [2011 Assessment Report](#)) and the individual who filled this position has implemented a system using iForm Builder for iPad to complete safety inspections. The system allows on-site inspection data input and digital photographs, which can then be downloaded, and compiled into various reports. This process has greatly reduced the man hours required for the inspection and reporting process. The program, and associated forms created by the Health Science Center, has already been expanded to Prairie View A&M University and the Texas A&M University System has requested a demonstration.
- **Accounts Payable** Since its inception in 1999, the Health Science Center has experienced a tremendous amount of growth in all areas of its operation. Its expenditures have increased from \$33 million in 1999 to a total of over \$194 million in 2011. In 1999, the Accounts Payable office had 3 employees who processed approximately 20,000 expense vouchers. By 2010 the office had 5 employees who processed 55,097 vouchers, while maintaining an average of 2.5 days processing time each. In an effort to streamline the accounts payable process and to reduce turnaround time, the Health Science Center implemented the LaserFiche software which allows for electronic document processing. By the end of FY2010, the Accounts Payable office achieved a successful transition to electronic document processing using the LaserFiche work flow process for vendor payments. The process was so successful that it has now been expanded to include employee travel reimbursements as well.
- **Contract Administration** As the Health Science Center operations have grown, so have the number of contracts that must be reviewed each month. The contract review process was expensive due to the cost of frequent overnight delivery packages between the Contract Administration Office in College Station and the other Health Science Center campuses across the state. It was also time consuming due to lag times between each step in the review cycle. The Contract Administration Office improved the efficiency of the

review process and positively impacted operating costs by creation of a contract workflow process using Laserfiche, a document management software (as documented in the [2010 Assessment Report](#) and the [2011 Assessment Report](#)). The contract workflow in Laserfiche has increased operational efficiency by eliminating many of the outdated, manual steps in the original contract review process. Through a set of pre-defined automated business rules, the workflow process monitors, tracks, routes, and reroutes any step in the contract lifecycle management process. This process allows multiple internal departments to review contracts simultaneously, thereby reducing the average cycle time and eliminating the need for multiple paper copies. This has also reduced overnight delivery fees by 90%, a savings of up to \$1000 per month. The average cycle time for a contract has also been optimized; allowing for the review, negotiation, and execution of renewal/template contracts in as little as 3 to 5 days, with more complex contracts finalized in an average of 15 to 30 days.

- **Overnight Mail Delivery Charges** As a result of the previously described improvements in the Accounts Payable and Contracts Administration areas, the Division of Finance and Administration has seen a drastic reduction in overnight mail delivery charges since FY2008. In FY2008, prior to the implementation of workflows in LaserFiche, the Division of Finance and Administration spent \$5,782 in overnight charges. Charges for FY2009 and FY2010 were approximately \$1,700 and, with the implementation of work flow for travel reimbursements in FY2011, overnight charges fell to \$969. Therefore, the Division of Finance and Administration was able to see an 82.23% reduction in overnight deliver charges from FY2008 until FY2011.
- **Employee Training** The Health Science Center has continued to expand the number and diversity of employees across its various locations, which has created a logistical problem for addressing the variety of training needs of such a diverse workforce. The offices of Environmental Health & Safety and Human Resources assessed employee training needs based on position descriptions, federal requirements, and employee performance evaluations. As a result, 24 new online training courses have been created (as documented in the Human Resources [2011 Assessment Report](#)) and can be assigned on an “as needed” basis to employees to include courses on Environmental Health and Safety, Blood-borne Pathogen training for health care and non-health care workers, Laboratory Safety, Workplace Safety, Workplace Violence, and Ergonomic Task Analysis (see complete [List of Training Courses](#) for details). This additional training is a valuable tool to ensure that all employees receive training appropriate for their position as well as ensuring compliance with State of Texas requirements

Supporting Documentation:

- [Analysis of Information Technology Satisfaction Survey](#)
- [Excerpt from FY2010 Information Technology Assessment Plan](#)
- [HUB Expenditure Comparisons for 2010](#)
- [HUB Expenditure Report for FY2011](#)
- [HUB Rankings](#)
- [List of New Training Courses](#)

- [Office of Information Technology Updated Strategic Plan for FY2012](#)
- [Results of Gartner Group Review of Information Technology Operations](#)

Comprehensive Standard 3.3.1.4 Research within the Institutional Mission

The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas: (Institutional effectiveness)

3.3.1.4 research within its mission, if appropriate

Findings of the Off-Site Review Committee:

Not Compliant

The Committee was unable to verify that TAMUS-HSC identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results for research within the context of its educational mission. TAMUS-HSC provides somewhat of an overview of how research is assessed at the institution; however the Committee could not find any assessment of their research enterprise, particularly within the context of the institution's mission.

Response and Actions Taken:

3.3.1.4 Research

Research is central to the mission of the Texas A&M Health Science Center and is included as the second goal of the institutional [strategic plan](#). In addition, each college has strategic priorities related to research and scholarship (see comprehensive list of [program outcomes related to research](#) beginning on page 7). All of the units within the Health Science Center systematically assess their outcomes associated with research; particularly as they relate to the educational mission. These activities are documented in the centralized TracDat data management system with performance targets, results, and actions taken because of the results. The assessment data can be seen in a sample [comprehensive report](#) from TracDat that displays all activities across the entire institution that were related to the institutional goal of research. This information was also imbedded within individual academic unit assessment reports and administrative support unit assessment reports listed in Table 3.3.1- A and Table 3.3.1 - C of the original narrative response.

A large part of the research function is decentralized and occurs at the college level. However, the Health Science Center also has administrative structures in place to assess various aspects of the research enterprise from an institutional level. For example, the Division of Research and Graduate Studies provides leadership to all parts of the Health Science Center in order to facilitate development of new knowledge in the biomedical, public health, and clinical sciences, as well as to train the next generation of basic and clinical scientists. The Office of Research

promotes research and training opportunities and provides effective administrative oversight for sponsored projects, research compliance, and technology transfer. The office also provides support for interdisciplinary research and training programs. All of these research administration functions are described in Health Science Center [Policy 15.01.01.Z1.01](#). The Office of Research sets desired outcomes for the research enterprise, then assesses performance, records the results, and analyzes the results data to make improvements. These activities are recorded in the TracDat data management system and are used to produce annual assessment reports as provided in Table 3.3.1 – A below.

Table 3.3.1 - A Annual Assessment Reports Division of Research and Graduate Studies

| Unit/Department | Detailed Assessment Reports | |
|-----------------------------|-----------------------------|-----------------------------|
| Research | | |
| Research Administration | FY10 Report | FY11 Report |
| Research Compliance | FY10 Report | FY11 Report |
| Vice President for Research | FY10 Report | FY11 Report |

The Office of Research carefully analyzes trends in research productivity and expenditures in order to optimize the effectiveness of the overall research enterprise. The Office of Research also works closely with faculty throughout the Health Science Center, as well as with major collaborating institutions, to facilitate development of innovative research programs. These activities are supported by the efforts of the following standing faculty committees:

- The [Research Advisory Council](#) is comprised of the associate dean/director of research and one additional faculty researcher recommended by the dean at each of the academic units and major research centers of the Health Science Center. The Research Advisory Council is advisory to the Vice President for Research on all research matters. The Council meets monthly ([meeting minutes](#) and [outcomes chart](#)).
- Two [Research Facilities Advisory Committees](#) are comprised of faculty stakeholders at the Bryan/College Station and Houston campuses. The purpose of these committees at each location is to make recommendations for use of research space and development of core facilities ([meeting minutes](#)).
- The Technology and Commercialization Advisory Committee deals with all matters relating to intellectual property and commercialization policies and procedures, as well as review of technologies proposed for support by the Health Science Center as described in Health Science Center Policy 17.02.01.Z1.01. ([meeting minutes](#)).
- The [Cancer Research Council](#) was developed to inform faculty of cancer research opportunities, especially those funded by the Cancer Prevention and Research Institute of Texas ([meeting minutes](#)).

The research enterprise of the Health Science Center has grown significantly since the institution was created in 1999. This is due to both the ongoing success of the established faculty and research programs that were originally part of the Health Science Center, and to the significant growth of new research programs. For example the Rangel College of Pharmacy, added in 2006, is now beginning to realize significant advances in research. The College of Nursing, which opened in 2008, is actively searching for a director of research in order to advance its programs.

One of the principal outcome measures related to research involves tracking and analysis of annual research expenditures. Reports of annual research expenditures are provided by the Office of Research and are reviewed in detail with the associate deans for research at each college, who are asked to account for any changes (positive or negative) from previous years. This information is discussed with all of the deans and other senior administrators, and is used as the basis for discussions about challenges and strategic planning priorities with respect to the research goal.

In FY2000, the Health Science Center had total external research expenditures (direct plus indirect) of \$17.8 million. By FY2006 this amount had increased by almost three-fold to \$51.4 million. After FY2006 the annual increase in research expenditures leveled off somewhat in proportion to changes in federal grant funding and because of a loss of several key researchers. In response, a concerted institution-wide effort was made to hire faculty in targeted research areas and to provide additional assistance to faculty in submitting grant proposals. As a result, research expenditures increased by 11% in FY2010 to \$57.2 million (see [research expenditures data](#) for additional details).

Using Results to Make Improvements

The Health Science Center continues to gain significant momentum in fulfilling the research goal as related to the institutional mission. The following examples are specific improvements that have been made based on assessment and strategic planning results.

- Analysis of research expenditure trends and federal research funding data indicated that many grant proposals were not being funded because of minor deficiencies. The Office of Research decided to focus awards of internal funds for faculty “seed grants” on those proposals that had already been peer reviewed, but not accepted, in order to increase the chance of leveraging funding by external agencies. Using this approach, the Health Science Center saw a gain of \$10.3 million in external research funding from an initial investment of \$926,015 in internal research awards from 2005 to 2010 (Research Development and Enhancement Awards Program [description](#) and [awards data](#)).
- In response to the creation of the Cancer Prevention and Research Institute of Texas, the Cancer Research Council was established jointly with Texas A&M University to facilitate applications for cancer-related research grants. As a result, the Health Science Center has received almost \$6 million in funding for cancer research programs since 2009, and now has the distinction of receiving the most funding for cancer prevention research among all academic institutions and hospitals in the state of Texas ([cancer research grants submitted and funded](#)).
- The Institute of Biosciences and Technology, a premier research institute within the Health Science Center, completed a comprehensive review of its research direction and focus. The process began with a detailed self-study in 2006. An external review, followed by a period of strategic planning, culminated in the recruitment of a world-class researcher in environmental health and cancer as the new Institute director ([Review of Institute of Biosciences and Technology](#)). Also as a result of the review, the Health Science Center is now developing a state-of-the-art imaging facility for

biopharmaceutical production at the Institute of Biosciences and Technology, in collaboration with partners such as Baylor College of Medicine and University of Texas Health Science Center in Houston ([Imaging Facility Proposal](#)).

- As a result of an [internal self-study](#) in 2007, the Rangel College of Pharmacy identified the need for an animal research facility (vivarium) and worked with the Vice President for Research to develop a plan for addressing this need. In 2008, the Health Science Center received Board of Regents approval to use approximately \$2.65 million of System financed revenue towards the construction of a state-of-the-art modular vivarium building as part of the College of Pharmacy core research facilities. This facility opened in spring 2010 and is essential for advancement of research capacity by pharmacy faculty.
- In 2005 the College of Medicine senior leadership identified clinical and translational research as an underdeveloped area in the college. An interdisciplinary faculty group received an NIH-CTSA Strategic Planning Grant proposal (P20) in 2006. Following a year-long planning process, an external clinician researcher was recruited to lead the proposal development and serve as the principal investigator. While not yet funded, development of the revised CTSA proposals has served to refine the vision of what is needed to support programs of clinical and translational research. As a result, the School of Graduate Studies is developing an interdisciplinary educational program in translational research, and a new Center for Biomedical Informatics is being implemented while external funding support continues to be sought.
- Research [Leadership retreats](#) and a comprehensive [Faculty Senate review](#), which included a faculty task force, a survey, and focus groups, addressed barriers to successful research. Information from these events resulted in a re-organization of the Office of Research and recruitment of a full-time Director of Research Compliance ([research compliance task force](#)). The Office of Research and the Office of Research Compliance have provided leadership in establishment of collaborative task forces to address emerging issues in all areas of research compliance, such as export control, responsible conduct of research, and conflict of interest, for the Health Science Center and the Texas A&M University System as a whole.
- The Office of Research established an Office of Technology Innovation to educate faculty about the broad area of intellectual properties; to facilitate appropriate approaches to translation of intellectual properties into commercialization initiatives; and to make recommendations to faculty and administrators regarding the potential of specific disclosures. These efforts have paid off. Between 2006 and 2011, Health Science Center faculty members were able to achieve the following milestones: 161 disclosures of intellectual property; 27 patents; 22 licensing agreements; and formation of 5 start-up companies. These outputs are tracked annually and are used to continually improve technology innovation in the research enterprise.

Supporting Documentation:

- [Cancer Research Council](#) members

- [Cancer research grants submitted and funded](#)
- [Comprehensive Report of All Activities Related to Research](#)
- [Excerpt from 2007 College of Pharmacy Self-Study](#)
- [Faculty Senate review of research issues](#)
- [Health Science Center Strategic Plan 2011-2015](#)
- [HSC Policy 15.01.01.Z1.01 *Research Administration*](#)
- [HSC Policy 17.02.01.Z1.01 *Management of Technology Commercialization Through Patents and Licensure of Intellectual Properties*](#)
- [Memo establishing Research Facilities Advisory Committee](#)
- [Minutes from Research Advisory Council meetings](#)
- [Minutes of the Cancer Research Council meetings](#)
- [Minutes of the Research Facilities Advisory Committee meeting](#)
- [Minutes of the Technology Commercialization Advisory Committee](#)
- [Outcomes chart for Research Advisory Council](#)
- [Proposal for Live Cell Imaging Program](#)
- [Research compliance task force](#)
- [Research Development and Enhancement Awards](#) (grant awards data)
- [Research Development and Enhancement Program](#) (program description)
- [Research Expenditures Data](#)
- [Research Leadership Retreats](#)
- [Review of Institute of Biosciences and Technology](#)
- [Unit Outcomes Related to Institutional Goals](#)

Comprehensive Standard 3.3.1.5 Community/Public Service within the Institutional Mission

The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas: (Institutional effectiveness)

3.3.1.5 community/public service within its mission, if appropriate

Findings of Off-Site Review Committee:

Not Compliant

The Committee was unable to verify that Texas A&M University System Health Center identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results for community/public service within the context of its educational mission. Overall, it seems that the institution based their arguments around institution-wide planning and goal setting rather than a systematic program-level assessment process. The institution references several strategic plans, and only provides an assessment report for one program for one year (CBHEC Assessment Report 2011).

Response and Actions Taken:

3.3.1.5 Community/Public Service

Community outreach and public service is an integral part of the Health Science Center mission as evidenced by the institutional mission statement:

“In all we do, we dedicate the full measure of our resources and abilities to advancing the knowledge and technologies of our professions, and to bringing Texans the **finest in health education, promotion, and care**. Because of our work, people’s lives are changed across our state, around the nation, and throughout the world.”

Community outreach and public service activities are assessed at both the institutional and program level. For example, Goal 3 of the Health Science Center [strategic plan](#) calls for “excellence in service” and has a related outcome (Outcome 3.1) of “providing community-based education and/or screening programs that target underserved populations.” Also under Goal 3 are two additional outreach/service related outcomes: Outcome 3.2 on collaborative partnerships, and Outcome 3.3 on clinical care. The annual strategic plan assessment reports

([FY2010 report](#) and [FY2011 report](#)) provide evidence of institutional level service activities, assessment results, and actions taken to make improvements as related to Goal 3.

At the program level, each college also has activities related to community outreach or service (see comprehensive list of [program outcomes related to service](#) beginning on page 11). All of these units within the Health Science Center systematically assess their outcomes related to community and public service; particularly as they relate to the institutional mission. These activities are documented in the centralized TracDat data management system with performance targets, results, and actions taken because of the results. The assessment data can be seen in an excerpt of a [comprehensive report](#) from TracDat that displays all activities across the entire institution that were related to the institutional goal of service. This information was also imbedded within individual academic unit assessment reports and administrative support unit assessment reports listed in Table 3.3.1- A and Table 3.3.1- C of the original narrative response.

As further evidence, several specific examples of how assessment results have been used to make improvements in service-related programs are described below:

- **Medication Assistance Program** The Medication Assistance Program, a program within the Health Science Center’s Coastal Bend Health Education Center, serves communities by providing low-income residents with assistance in applying for free or low-cost prescription medications from pharmaceutical companies. The program was originally created to serve clients within Nueces County. But, based on growing demand, staff members recognized a need to expand the program and began partnering with health departments across the Coastal Bend region to serve clients in additional counties. By FY2006 the program had expanded to 6 counties, serving a total of 416 clients and producing savings of over \$338,048. In Fiscal Year 2011, the program surpassed its performance targets (in both the institutional and Center strategic plans) by serving a total of 864 clients, processing a total of 3873 applications for medications, and producing savings of \$2,005,595—indicating the program’s continued success (CBHEC Assessment Report [2010](#) and [2011](#)).
- **Dental Clinic** The Baylor College of Dentistry operates a clinic that provides discounted or no-cost dental services to indigent and “working poor” clients. Services are provided by third and fourth year dental students under the supervision of dental faculty members. Assessment data related to patient records and treatment transactions are collected through the “axIUM” clinical management software. Also included in this system are patient satisfaction data collected through the annual patient satisfaction survey. The annual performance target in the College strategic plan is to have at least 90 percent of all adult patients express satisfaction with the level of care they have received from the clinic. In the [2009 academic year](#), survey results indicated that this target was not met because 30 percent of respondents felt they “did not receive enough information at the first appointment.” In response to these results, a new welcome letter was created for all patients to receive at the initial treatment appointment. This letter provided more comprehensive information about the clinic and improved the patient orientation process. During the following year, the [2010 satisfaction survey results](#) indicated that 98 percent

of the patients were “very satisfied” with the level of service they had received, and [FY2011 assessment results](#) showed patient satisfaction remained high in this area.

- **Brazos Valley Health Partnership** The Center for Community Health Development, within the School of Rural Public Health, conducts [multiple service projects](#) including extensive [community health assessments](#) of the seven-county Brazos Valley region of Texas every four years. These health assessments allow faculty researchers to identify community health needs, services available, and the disparity between the two. Early assessment data in 2002 revealed a lack of leadership and a need for collaboration among the various health service providers within the region. As a result, the Center created the Brazos Valley Health Partnership in 2003, which became a non-profit organization in 2009. The Brazos Valley Health Partnership was established to help the approximately 30 local health and social services organizations address regional health needs in a more unified, consistent manner. Through the Brazos Valley Health Partnership, the Center has been able to:
 - Secure \$2.1 million grant to develop five rural health centers
 - Organize four county health resource commissions
 - Create rural volunteer transportation program that provided 23,000 rides to date
 - Launch locally subsidized health coverage product for area small businesses
 - Establish mental health counseling service via telehealth
 - Develop a formal process for community engagement in research
 - Create “Return on Community Investment” tool to evaluate community and organizational efforts

The Center also provides technical assistance to community organizations and health care providers in the areas of grant writing, organizational development, strategic planning, training, and health fair event planning. For more detailed information on results of these service activities, see the Center’s [Outreach and Service Summary](#).

- **Service Learning Opportunities** When the Rangel College of Pharmacy was created in 2008, community leaders who were key stakeholders from the South Texas region were recruited to form an initial advisory group. This community group provided valuable input on the service needs of the surrounding area and the information was used to identify service learning activities for faculty and students. As a result, the Rangel College of Pharmacy collaborated with local pharmacists and regional partners to provide community outreach activities for approximately 300 recipients in [FY2010](#) and over 400 recipients in [FY2011](#). In addition, the College of Pharmacy received funding from the Coastal Bend Diabetes Initiative for a Texas Obesity Prevention Program aimed at preventing diabetes in local school children through nutritional education, exercise, and mentoring. Pharmacy students administered the program, which was assessed at the mid-point ([interim assessment report 2010](#)) and at the program’s conclusion ([final assessment report 2011](#)). Based on the program’s successful outcomes, the plan for 2012 is to expand it by partnering with local Boys and Girls Clubs.

- Health Data Integration Project** The purpose of the [Health Data Integration Project](#), an effort of the Health Science Center’s [Rural and Community Health Institute](#), is to help rural hospitals collect and analyze patient data in order to make evidence-based improvements and to comply with federal reporting requirements. This service project originally began as a grant-funded effort in 2004 to address the fact that Texas was ranked 49th in the United States with regard to use of hospital data to make improvements in quality and patient safety. After the grant ended in 2007, the Institute continued to offer its services and partnered with QuadraMed, a healthcare information technology company, to enhance data management and reporting capabilities for rural hospitals (see [sample reports](#)). Quarterly [quality improvement webinars](#) with the 19 participating hospitals are used to assess the Project’s successes and to target future needs. The program is also assessed by reviewing the patient outcome scores for core hospital measures, as reported to the Centers for Medicare & Medicaid Services. Sample data from four participating hospitals are provided in Table 3.3.1 – A below. These data provide useful information for hospitals and enable them to make targeted improvements in areas such as physician documentation methods, drug regimens, billing procedures, etc.

Table 3.3.1- A 2011 Patient Outcomes for Sample HDI Hospitals

| | Connally | El Campo | Palo Pinto | Mitchell | State-wide Average |
|--|----------|----------|------------|----------|--------------------|
| Death Rate for Heart Failure Patients | 10.8% | 9.9% | 10.5% | 11.6% | 11.3% |
| Rate of Readmission for Heart Failure Patients | 22.9% | 26.2% | 24% | 23.9% | 24.8% |
| Death Rate for Pneumonia Patients | 12.2% | 9.2% | 10.6% | 12.2% | 11.9% |
| Rate of Readmission for Pneumonia Patients | 17.2% | 17.6% | 18.8% | 18.1% | 18.4% |

- Interdisciplinary Service Trips** In June 2010, the Health Science Center organized an interdisciplinary service trip to the village of Quesimpuco, Bolivia. A small group of 10 students and faculty from the College of Nursing and College of Medicine provided much-needed health care services to the indigenous population in the remote community. After students returned to the United States, they were required to share presentations with their peers regarding their experiences. Feedback from participants was used to make improvements for a second trip to Bolivia in June 2011 ([FY2011 Assessment Report](#)). This time a larger group of 24 faculty and students traveled, and all six Health Science Center colleges/schools were represented. Approximately 400 indigenous Quechua Indians received medical and dental care services. As in the previous year, students returned home and shared what they had learned from the experience by giving presentations to their peers. Information from the 2011 trip has been used to draft a [proposal](#) for a more formalized, year-round global service learning program to be

conducted throughout the FY2013 academic year. The Health Science Center is now partnering with an [outside service](#) to arrange the travel logistics, and the Associate Vice President for Academic Affairs is working with the colleges to create student learning outcomes and assessment methods for the program. In addition, a new \$4 per semester credit hour international education fee is scheduled to be presented to the Board of Regents in May 2012 for approval. This fee will be used to provide scholarship funds to students who need help with travel expenses.

Supporting Documentation and Evidence:

- [Brazos Valley Community Health Assessment FY2010](#) (executive summary of report)
- Center for Community Health Development [outreach and service results](#)
- Center for Community Health Development [sample service projects](#)
- Coastal Bend Health Education Center [FY2010 assessment report](#)
- Coastal Bend Health Education Center [FY2011 assessment report](#)
- College of Pharmacy Service/Outreach [Assessment Report for FY2010](#)
- College of Pharmacy Service/Outreach [Assessment Report for FY2011](#)
- [Community Outreach Assessment Report FY2011](#)
- [Comprehensive Report](#) showing all service-related activities during FY2011
- Dental Clinic [Assessment Report FY2009](#)
- Dental Clinic [Assessment Report FY2010](#)
- Dental Clinic [Assessment Report FY2011](#)
- Health Data Integration [Project Brochure](#)
- Health Data Integration Project [Sample Quality Improvement Webinar](#)
- Health Data Integration Project [Sample Reports](#)
- Health Science Center [Strategic Plan 2011-2015](#)
- Institutional Strategic Plan [Assessment Report FY2010](#)
- Institutional Strategic Plan [Assessment Report FY2011](#)
- [International Service Learning Program Presentation](#) (powerpoint)
- [Program Outcomes](#) related to institutional goals (service begins on page 10)
- [Proposal for Health Science Center Service Learning Program](#)
- [Rural and Community Health Institute Website](#)
- [TOPP Interim Assessment Report 2010](#)
- [TOPP Final Assessment Report 2011](#)

Core Requirement 3.5.1

College-level competencies

The institution identifies college-level general education competencies and the extent to which students have attained them. (General education competencies)

Finding of Off-Site Review Committee:

Not Compliant

The Committee cannot ascertain that the Texas A&M University System Health Science Center documents the extent to which its graduates attain general education competencies that are specified by Texas state law and by guidelines of the THECB.

Response and Actions Taken:

General Education Competencies in the Core Curriculum

The Health Science Center has two undergraduate programs: the Bachelor of Science in Nursing and the Bachelor of Science in Dental Hygiene, both of which are upper-level entry only. Because the Health Science Center does not offer lower-division courses for undergraduates, students who enter the baccalaureate degree programs in the College of Nursing and School of Dental Hygiene must complete general education courses at other regionally accredited colleges or universities; then transfer these courses to Health Science Center. Program-specific prerequisites for the undergraduate programs are stated in the Health Science Center [core curriculum](#), which is published in the Course Catalog and conforms to state law ([Texas Education Code, §61.822](#)) and Texas Higher Education Coordinating Board guidelines ([Title 19 Texas Administrative Code, §4.28](#)).

According to [Title 19 Texas Administrative Code, §4.30](#) the Health Science Center is required to evaluate its core curriculum at least every ten years; the most recent [review](#) was completed in spring 2011. The 2011 [Core Curriculum Report](#) includes a table ([Report Appendix A](#)) that compares the Health Science Center core curriculum with the statewide core curriculum, and lists acceptable transfer courses that conform to the state's standardized course numbering system. [Appendix B](#) of the report contains a chart that has student learning outcomes for each of the eight general education competency areas, and lists how these are addressed throughout the Health Science Center's upper-level curriculum (there is one column for nursing and one for dental hygiene). The final section of the [report](#) (beginning on page 21) describes how evaluation results obtained during exit assessments are used to make improvements to the core curriculum.

Achievement of the general education competencies in the core curriculum is initially assessed through the admissions process. When students are accepted into an undergraduate degree

program at the Health Science Center, and their transcript from another Texas public college or university indicates that they have successfully completed that institution's core curriculum, no additional core curriculum course work is required. A grade of "C" or better reflects at least the minimum requirement for success in the general education subject area. The Health Science Center also accepts transfer credit from private or out-of-state academic institutions for successfully completed course work that satisfies the core curriculum requirements and meets the criteria of the Health Science Center's [Transfer Credit Guidelines and Procedures](#). Transfer policies vary by academic program. In both Dental Hygiene and the College of Nursing transfer credit is determined by the Office of the Registrar on a course-by-course basis from official transcripts submitted in the competitive admissions process. Course content is determined by catalog course description or course syllabus. In the College of Nursing these decisions are made by the Admission and Progression Committee. For more information on the Health Science Center transfer policies, refer to Comprehensive Standard 3.4.4.

In 2003, the [Texas Success Initiative](#) was instituted to ensure that students enrolled in Texas public colleges and universities possess the necessary general academic skills to perform effectively in college. As transfer students, applicants to the Health Science Center undergraduate programs must submit qualifying scores on tests acceptable to the Texas Higher Education Coordinating Board if they were so required when entering their undergraduate institutions. Established cutoff scores on the SAT, ACT or TAKS tests qualify students for exemption. Verification of these scores must be submitted in place of scores on qualifying tests mentioned earlier. Alternative test scores accepted by the Coordinating Board may be provided as proof of compliance with academic skills regulations.

Transfer credits are only accepted from accredited colleges or universities. Students entering the Bachelor of Science in Nursing (BSN) program must also submit scores from the Elsevier Health Education Systems, Inc. (HESI) A2 exam with their admission application. The College of Nursing requires applicants to complete the following six components of the HESI A2: math, reading comprehension, vocabulary and general knowledge, grammar, anatomy and physiology, and critical thinking. A minimum score of 75% must be obtained in each component in order to be considered for admission.

Both the Nursing and Dental Hygiene programs also assess mastery of the required general education competencies by requiring students to demonstrate knowledge and skills in the eight competency areas prior to graduation. These assessments are integrated throughout formal coursework and practicum experiences, as described in the following section.

Assessing General Education College-Level Competencies

Written Communication – Nursing students are required to produce coherent, well developed communications using standard written English. An example of this type of assignment is in Nursing Dynamics where they must produce a paper including a literature synthesis and summary about a nursing leader. The paper is evaluated using a [rubric](#) by the faculty for grading grammar, logical flow, ability to paraphrase, and use of APA formatting and citations. Students are evaluated throughout the curriculum in other writing assignments as well as in their written 'progress notes' for spelling, grammar and sentence structure.

Dental hygiene students are required to write a reflection paper regarding a professional meeting during their first year. This paper is graded on grammar, spelling, and clarity. Students develop a Table Clinic Presentation in the fall semester of their senior year which they present in the spring semester before graduation. The development of this table clinic involves searching the literature and critiquing pertinent articles that support the topic. A narrative is written as well as an abstract of the table clinic topic. Also in the spring semester, students delve deeper into the topic by searching the literature to support a research proposal. A written report which includes abstract, hypothesis, review of the literature, and references is completed before graduation. There is also a research portion of the Senior Exit exam which involves the students reading an article and writing a critique. Students also assess, plan, and implement a community health project on which they write a self-assessment paper. A paper researching the pros or cons of community water fluoridation is also submitted for this course. [Written papers](#) are evaluated and graded on grammar, logical development of thought, important findings critically examined and appropriately cited, ability to paraphrase, ability to cite appropriately, and formatting. Students are evaluated throughout the two-year curriculum for spelling, grammar and sentence structure of their written ‘progress notes’ in electronic patient charts.

Reading with Comprehension— In addition to the HESI A2 entrance exam, the entire Nursing curriculum requires that students demonstrate the ability to read, interpret, and apply information from nursing textbooks and professional journals. This is essential in class case studies and on examinations throughout the program. Students are expected to incorporate evidence based literature in their practice.

In order to complete the written assignments noted above, an understanding of the literature by the students’ ability to read and interpret findings must be demonstrated. Student assignments throughout the Dental Hygiene curriculum demonstrate reading comprehension--from performing on written examinations to interpreting the medicines a patient is taking and their influence on patient care. Instructors use [patient case scenarios](#) in their exams which require the students to read about the patient, their health and social history, and to interpret findings based on those histories.

Oral Communications—Nursing program curricula require students to deliver information in an effective manner in classroom presentations, interpersonal communication, patient teaching programs, and clinical practicum experiences. In all practicum experiences, students are required to report to nurses, physicians, and other health care providers, as well as the patient, regarding patient status and changes. A [clinical evaluation tool](#) has been established by faculty to assess the efficacy of this communication. In Community Health Nursing, all students participate in a teaching program called “A Matter of Balance” in which students teach community groups about preventing falls, especially among the older population. These presentations are evaluated with a [graded rubric](#).

The Dental Hygiene program requires the oral delivery of the Table Clinic presentation to various audiences, including judges for awards using [set criteria](#). Students also orally present community projects to different audiences and a [patient case](#) to their peers. Students are evaluated and graded over the two-year program on their oral communications with patients using set criteria in the clinical standards which include using proper tone and language. They

are also required to provide verbal summaries to faculty of patient conditions at each appointment.

Mathematics and Numerical Data— In addition to the score in math on the entrance exam, nursing students must demonstrate the ability to calculate medication dosages in every clinical course. Students are given [calculation examinations](#) at the beginning of each semester, and they must have their calculations checked by a registered nurse before administering any medication. Beginning in the first semester in Nursing Fundamentals, as well as throughout the program, students demonstrate the ability to use appropriate mathematical skills to take measurements, record, analyze, and communicate quantitative data as it pertains to patient findings. In Community Health Nursing, students also demonstrate mathematical competence by evaluating demographic and epidemiologic characteristics of a community which enables them to analyze changes in the health of a community. [Math scores](#) are provided by standardized HESI final examinations in each course.

Successful completion of the Dental Hygiene curriculum ensures that students have the ability to use appropriate mathematical skills to take measurements, record, analyze, and communicate quantitative data as it pertains to patient findings and dosages. Students demonstrate mathematical competence by evaluating demographic and epidemiologic characteristics of a community, using and evaluating data obtained from dental indices, and using the data to [analyze changes in the health of a community](#) and of the patients they see. Students are also evaluated on knowledge of basic statistics as it is applied to epidemiologic, laboratory, and clinical research.

Natural Sciences—Nursing students must have an adequate foundation in biological and other natural sciences in order to successfully complete the nursing curriculum. Specifically, students are required to demonstrate competence in natural sciences in meeting the requirements for Nursing Pathophysiology and for Nursing Health Assessment. As students develop concept maps regarding their clinical patients throughout the program, they utilize biology, pathophysiology, chemistry, microbiology, genetics, and nutrition concepts. Concept maps are evaluated by [rubrics](#) developed by the nursing faculty.

Successful completion of the higher-level science coursework required in the Dental Hygiene curriculum ensures that students possess an adequate foundation in biological and other natural sciences. Biomedical sciences courses include biochemistry, microbiology, histology, embryology, physiology, human anatomy, neuroscience, microbiology, and immunology. Prerequisite courses in biology, chemistry, and nutrition prepare the students for these subjects. The dental hygiene curriculum requires students to apply concepts from the natural sciences to the clinical practice of dental hygiene. For example, each semester the faculty evaluate students' demonstration of the dental hygiene process of care in meeting the health care needs of their patients. Based on their clinical interaction with patients, students [must demonstrate competence](#) in the natural sciences as they evaluate medical histories/systems review, vital signs, and medicines the patients are prescribed. The application of anatomy is also evaluated when students assess normal and pathological findings from intra oral/extra oral patient examinations and radiographs.

Social and Behavioral Sciences—Students must have an adequate foundation in social and behavioral sciences in order to successfully complete the nursing curriculum. Specifically,

Nursing of Childrearing Families requires students to apply concepts of child development to the care of hospitalized children. This is assessed through [clinical worksheets](#) that are evaluated by the faculty and by [growth and development scores](#) on the standardized HESI final examination. In the Healthy Aging course, students are expected to apply concepts of older adult development in their class papers and projects which are evaluated by rubrics developed by the faculty.

In the Dental Hygiene program, student-patient care experiences require an adequate foundation in psychological and social sciences. Program curriculum requires that students demonstrate the application of knowledge in these sciences. One example is the requirement in the Health Education and Behavioral Science course of applying social and behavioral theory to the health promotion behaviors of individuals in a health promotion project using role playing. Students demonstrate the steps involved in changing a behavior. Student experiences in providing educational services to patients are evaluated in clinic. Faculty use the standards of care to [evaluate students](#) during these patient interactions.

Critical Thinking— Students apply critical thinking skills throughout the Nursing curriculum. In addition to the entrance exam measurement of critical thinking abilities, each course has a final HESI exam which measures critical thinking as it applies to the specific course content, and students must successfully complete an exit HESI which also measures [critical thinking competencies](#).

Students apply critical thinking in the Dental Hygiene process of care throughout the two-year program as they assess, plan, treat, and evaluate patient care. This process is evaluated by the faculty at every clinical session. Students' competency in critical thinking also is tested in the development of the Table Clinic, research proposal, patient case development and presentation, and through the analysis of patient cases in written examinations. Students also demonstrate critical thinking as they assess a community, identify a problem, and intervene to solve that problem on a community level. Students take a [Senior Exit exam](#) that evaluates the students' ability to critically evaluate patients and document patient conditions.

Computer Literacy— Computer skills are required throughout the Nursing curriculum. All students are required to have a laptop computer upon entering the program. In Nursing Informatics, students must complete HIPPA training on the computer system. Students use electronic health records in all clinical courses and simulation laboratories. Coursework requirements including case studies, concept maps, and formal papers necessitate the use of electronic technology. Patient summaries and other course requirements are submitted electronically. Student teaching projects, such as in Nursing of Childbearing Families or Evidenced Bases Practice presentations, require the use of Power Point or similar programs. Faculty/student communications are often posted on the course management system Blackboard which requires a level of computer literacy to access.

Computer Science is a prerequisite course for the Dental Hygiene program. Computer skills are demonstrated by students at every clinical session by use of the electronic patient record. Students demonstrate, through formal coursework requirements, proficiency in the use of electronic technology for acquiring and communicating information. Students are required to submit papers, upload presentations, and search the scientific literature using computer

technology/databases. Students are required to develop and present a patient case and a community health project using Power Point.

Supporting Documentation and Evidence:

- [Clinical Worksheet](#) for Nursing Care
- [Community Project Evaluation](#)
- [Concept Map and Rubric](#)
- [Core Curriculum Report](#) (spring 2011)
 - [Appendix A](#)
 - [Appendix B](#)
- [Dental Hygiene Case Evaluation](#)
- [Dental Nutrition Reflection Paper](#) (rubric)
- [Dynamics of Nursing Paper](#) (rubric)
- [Faculty Observation of Nutritional Counseling](#) (rubric)
- [Fluoride Debate Paper](#) (rubric)
- [Health Science Center Core Curriculum](#)
- [HESI Critical Thinking Scores](#)
- [HESI Growth and Development Scores](#)
- [HESI Math Scores](#)
- [Matter of Balance Grading Rubric](#)
- [Nursing Clinical Evaluation Tool](#)
- [Patient Case Scenario Exam Results](#)
- [Sample Math Calculation Exam](#)
- [Senior Exit Exam Results](#)
- [Table Clinic Evaluation Criteria](#)
- [Texas Education Code, §61.822](#)
- [Texas Success Initiative](#)
- [Title 19 Texas Administrative Code, §4.28](#)
- [Title 19 Texas Administrative Code, §4.30](#)
- [Transfer Credit Guidelines and Procedures](#)

Comprehensive Standard 3.7.1

Faculty Competence

The institution employs competent faculty members qualified to accomplish the mission and goals of the institution. When determining acceptable qualifications of its faculty, an institution gives primary consideration to the highest earned degree in the discipline in accordance with the guidelines listed below. The institution also considers competence, effectiveness, and capacity, including, as appropriate, undergraduate and graduate degrees, related work experiences in the field, professional licensure and certifications, honors and awards, continuous documented excellence in teaching, or other demonstrated competencies and achievements that contribute to effective teaching and student learning outcomes. For all cases, the institution is responsible for justifying and documenting the qualifications of its faculty. (Faculty competence)

Judgment of Compliance:

Not Compliant

The Committee is unable to determine from documentation and analysis in the Compliance Certification that the institution in all cases employs competent faculty members qualified to accomplish the mission and goals of the institution. While all programs have successfully undergone specialized accreditation review and no findings pertaining to faculty have ensued, the Committee nevertheless is unable to determine from documentation provided that faculty teaching some courses have appropriate qualifications.

In its analysis, the institution (a) describes institutional mission and faculty responsibility, (b) defines *principal faculty*, those contributing 50% time or more to “academic areas of research, education, or professional service” and describes the types of appointments they hold (tenure track or non-tenure track), (c) defines *non-principal faculty*, those contributing less than 50% time to those areas through part-time or voluntary participation, (d) describe the process for determining, documenting, and justifying faculty qualifications, and (e) specifically addresses how the institution’s practices assure adherence to SACS faculty credential guidelines.

The Committee’s review of the *Roster* provided in light of the SACSCOC guideline on *Faculty Credentials* identified as issues to be addressed or clarified (a) its inability to ascertain from information provided the relevance of some academic credentials to courses being taught, (b) its inability to ascertain in some instances how credentials seemingly remote from the subject taught or related work experience in the field represent qualifications that should be assessed in determining competence, (c) its inability to determine that specified faculty had 18 hours of graduate courses in the discipline, and (d) its inability to determine that CVs have been provided for all faculty. See *Request for Justifying and Documenting Qualifications for Faculty*.

For each of the faculty members listed below, the committee either found the academic qualification of the faculty member to be inadequate and/or the institution did not adequately justify and document the faculty member’s other qualifications to teach the identified course(s). For each case, the committee checked the column appropriate to its findings and provided additional comments if needed to clarify the concern.

The institution is requested to submit additional justification and documentation on the qualifications of each of the faculty member listed. When responding, the institution should use the Commission’s “Faculty Roster Form: Qualifications of Full-Time and Part-Time Faculty” and its “Instructions for Reporting the Qualifications of Full-Time and Part-Time Faculty,” which can be accessed under the Institutional Resources tab of the Commission website: www.sacscoc.org. Read the instructions carefully and pay close attention to the section “Providing Information that Establishes Qualifications.” The completed form, or similar document, should be included as part of the institution’s formal response to the Commission.

| Name of Faculty Member | Course(s) in Question | Inadequate Academic Qualifications | Insufficient Justification of Other Qualifications | Comments (if needed) |
|--|---|---|---|--------------------------------|
| Bremick, Mark (College of Pharmacy) | Graduate level Recitation, Ind Study, Recitation, Rounds, and Psychiatric Addiction | X | X | BS in Pharmacy |
| James Alexander (School of Rural Public Health) | PHPM 605, 606, &684 | | X | Ph.D. in Psychology |
| Thomas McDonald (School of Rural Public Health) | PHEO 650 | | X | Ph.D. in Oceanography |
| Bokelman, Annamarie (School of Rural Public Health) | Graduate level Principles Env/Occ Health | X | | MS in Toxicology |
| Hinton, Robert (College of Dentistry) | Undergraduate level Occlusion, Gross Anatomy | X | X | PhD in Anthropology |
| Schneiderman, Emet (College of Dentistry) | Graduate Principles of Scientific Writing; Undergraduate Gross Anatomy | X | X | PhD in Anthropology |
| Muzzin, Kathleen | Graduate Special Care Patient | X | | MS in Dental Hygiene |

| | | | | |
|---|--|---|--|--|
| (College of Dentistry) | Seminar; Didactic Teaching Strategies | | | |
| Verma, Suzanne (College of Dentistry) | Graduate level Maxiofacial Pros Concepts | X | | Master of Associate Medical Sciences |
| Bartlett, Leeana, (College of Dentistry) | DDDS 098 and 099 and 8004 | X | | MS in Education, needs description of 18 hours of graduate courses in the discipline |

Response and Actions Taken:

The Health Science Center is committed to the recruitment of faculty who not only educate students to be technically proficient in their chosen disciplines, but who can also communicate the thought processes and critical thinking skills necessary to be successful. All credentials of faculty applicants are carefully screened by search committees, individual college administrators, and the Vice President for Academic Affairs. The appointment process at the Health Science Center requires that all new hires provide original degree transcripts to verify their training. Those transcripts are issued to administrators in each of the schools and not directly to the faculty applicant. Each school maintains updated copies of faculty curriculum vitae, official transcripts of highest degree earned, and any certifications of training that verify their discipline credentials. Additionally, evidence of advanced training, completion of residencies, board certification, licensure, and honors and awards also are required as evidence of competency. Foreign transcripts are evaluated for equivalency by outside agencies using institution-approved vendors. These required documents are housed in each of the colleges and were provided in the original faculty roster.

The off-site committee requested additional justification and documentation for nine faculty members. For each of the faculty members indicated, the Health Science Center has provided additional information regarding qualifications to teach the applicable courses. Click on the name of each college or school to view the updated Faculty Roster Forms.

[Baylor College of Dentistry](#)

[Rangel College of Pharmacy](#)

[School of Rural Public Health](#)

Supporting Documentation and Evidence:

Additional supporting documentation for each faculty member can be found in the faculty rosters, located on the Health Science Center website at:

<http://www.tamhsc.edu/about/accreditation/sacs/rosters/index.html>

(Individual transcripts and curriculum vitae files for each of these faculty members have also been included in the flash drive of information sent to on-site reviewers.)

Federal Requirement 4.1

Student Achievement

The institution evaluates success with respect to student achievement consistent with its mission. Criteria may include: enrollment data; retention, graduation, course completion, and job placement rates; state licensing examinations; student portfolios; or other means of demonstrating achievement of goals. (Student achievement)

Findings of Off-Site Review Committee:

Not Compliant

The Committee was able to verify that Texas A&M University System Health Science Center evaluates success with respect to student achievement using course and program completion and state licensure exams for all programs. It is unclear however if the College of Dentistry, Dental Hygiene, and College of Pharmacy evaluate student success using job placement rates.

Four years of data were provided for the College of Dentistry, College of Medicine, College of Pharmacy, College of Nursing, School of Rural Public Health, School of Dental Hygiene, and School of Graduate Studies. These data show successful completion of courses at TAMUS-HSC.

Dental Hygiene, Dentistry, Nursing, Pharmacy, and Medicine students must acquire a state or national license in order to practice their profession. Five years of data were provided for Medicine, Dentistry, and Dental Hygiene. Pharmacy and Nursing were implemented in 2009, therefore only data for 2010 are provided. Pass rates are 85% or higher for all programs. A detailed discussion of student success on licensure exams is provided for all programs that require licensure.

All students in the College of Medicine are placed in a residency program or post-graduate research experience either through the National Residency Matching Program match, military match, early matches, or during the scramble. In addition, 61 percent of residency completers were practicing in Texas during FY2010. College of Dentistry does not have any job placement data. Instead they provide data that shows students accepted to advanced educational programs. Dental Hygiene graduates complete a survey regarding licensure status, admission to further academic/clinical training, or employment. According to the data provided, all students received a license to practice and/or were accepted into an advanced educational program. It is not clear how many students are practicing. The College of Nursing graduated its first class in December 2009. All graduates (100%) were employed in nursing as of 6 months after graduation.

The College of Pharmacy graduated its first class in spring 2010 (74 students). Six percent of the inaugural class is enrolled in a residency program and 5% are practicing pharmacy out of state. There is no mention of job placement rates for the remainder of the class. The School of Rural Public Health provides data from the Alumni Survey. These data indicate that approximately 84

percent of Rural Public Health graduates are currently employed and an additional 12 percent are enrolled in an advanced or professional degree program. Approximately 80 percent of these graduates are employed in the state of Texas. A total of 85 percent of graduates reported working directly in a public health or health-related organization; with 35 percent employed with a local, state, or federal agency, and 33 percent employed with a hospital or health-care provider. The most recent alumni survey of Master of Science of Public Health (MSPH) and PhD graduates in Health Services Research indicated that 63 percent of these graduates were employed in government agencies, and 27 percent were employed in academia. The School of Graduate Studies provides job placement data for five years for Graduates of Biomedical Science Program.

Response and Actions Taken:

Academic excellence is a central focus of the Texas A&M Health Science Center’s mission statement which expresses an institutional commitment to “advancing the knowledge and technologies of our professions, and to bringing Texans the finest in health education, promotion and care.” Excellence in academics is also the first goal identified in the [institutional strategic plan](#). The standard measures of academic success that are most relevant to the Health Science Center’s mission and strategic goals include program completion rates and performance on professional licensure examinations. The nationwide shortage of health care professionals virtually ensures that a successful graduate from a health professions program who passes the relevant licensure examination will be able to obtain employment in the given field. Thus, while job placement rates are tracked for Health Science Center graduates they are not used as a primary measure of academic success.

Program Completion

Curricula in the health sciences tend to be sequential in nature, so that successful completion of a given course is required before a student can progress to the next course in a program series. For this reason, program completion (i.e., graduation) reflects successful course completion at the Health Science Center. Data compiled from 2007 to 2010 show an overall trend of high graduation and retention rates in all Health Science Center programs. Table 4.1 –A provides the cumulative retention/graduation rates as of spring 2011 for the previous four cohorts, according to college. These rates represent the total percent of students who remained enrolled in, or graduated from, their chosen degree program each year. For example, as of spring 2011, 100 percent of the students in the College of Pharmacy who matriculated in 2007 had remained enrolled in the program; therefore, 100% of the inaugural 2007 cohort also graduated.

Table 4.1 – A Cumulative Retention and Graduation Rates by College or School

| College or School | FY 2007 | FY 2008 | FY 2009 | FY 2010 |
|--------------------------------------|------------|------------|------------|------------|
| College of Dentistry | 89% | 100% | 99% | 95% |
| College of Medicine | 93% | 95% | 94% | 96% |
| *College of Nursing | NA | NA | NA | 88% |
| College of Pharmacy | 100% | 99% | 99% | 99% |
| School of Dental Hygiene | 100% | 100% | 100% | 100% |
| School of Graduate Studies | 85% | 94% | 92% | 97% |
| School of Rural Public Health | 88% | 84% | 77% | 85% |
| Health Science Center Overall | 93% | 95% | 94% | 94% |

*The College of Nursing did not enroll its first cohort of students until FY2009.

Licensure Examinations

Most graduates from the Health Science Center's professional programs must acquire a state or national license in order to practice their professions. Table 4.1 - B below reflects the uniformly high pass rate that Health Science Center graduates have attained over the past five years when attempting to pass licensing exams on the first try.

Table 4.1 – B First-Time Pass Rates on Licensure Exams, 2006-2010

| Program | FY 2006 | FY 2007 | FY 2008 | FY 2009 | FY 2010 |
|-----------------------|----------------|----------------|----------------|----------------|----------------|
| Dental Hygiene | 96% | 93% | 100% | 97% | 90% |
| Dentistry | 96% | 97% | 96% | 94% | 85% |
| Medicine | 96% | 92% | 98% | 97% | 98% |
| *Nursing | n/a | n/a | n/a | n/a | 97% |
| *Pharmacy | n/a | n/a | n/a | n/a | 93% |

*These are new programs and did not have graduates until FY 2010.

Job Placement Rates

The nationwide shortage of health care professionals ensures that almost every Health Science Center graduate in the health sciences obtains employment following graduation. Below is specific information, by college or school, indicating graduates' success in finding employment after leaving the Health Science Center.

College of Medicine

All 76 graduating seniors have been placed in a residency program or post-graduate research experience either through the National Residency Matching Program match, military match, early matches, or during the scramble. Initial match rates in the national program match have averaged 95 percent for the past 5 consecutive years. In addition, 61 percent of residency completers were practicing in Texas as of fall 2010.

Baylor College of Dentistry

The Baylor College of Dentistry tracks job placement for graduates through the Five-Year Alumni Survey which is administered biennially to classes that graduated during the previous five years. Over the survey's 20-year history, response rates have typically ranged between 60 and 70 percent. The most recent survey results indicated that 100 percent of the 84 FY2010 College of Dentistry graduates have reported gaining employment after graduation, with only one survey respondent indicating working in an area outside of dentistry.

School of Dental Hygiene

In the fall semester immediately following graduation, each dental hygiene student completes a survey regarding licensure status, admission to further academic/clinical training, or employment. In both fall 2008 and fall 2009, 100 percent of the 60 graduates (30 per year) were employed within two months after graduation. As of fall 2010, 100 percent of the 28 graduates reported attainment of a license to practice dental hygiene. Of these 28 graduates, 27 reported finding employment in Texas and one graduate was employed out-of-state.

College of Nursing

The College of Nursing graduated its first class in December 2009. Of the 39 graduates, 38 (97 percent) passed their licensure exam on the first try, and 100 percent were employed in nursing as of 6 months after graduation (spring 2010).

Rangel College of Pharmacy

As of November 2010, 69 of the 74 members (93 percent) in the spring 2010 inaugural class passed the North American Pharmacy Licensure Examination (NAPLEX) on the first try. In addition, 65 of the 69 members (94 percent) who passed the NAPLEX were licensed in the state of Texas. Five members (5 out of 69, or 7 percent) of the inaugural class who passed the NAPLEX entered first-year pharmacy residency programs; and four members (4 out of 69, or 6 percent) of the inaugural class who passed the NAPLEX began practicing pharmacy out-of-state. A total of 74 (100 percent) graduates from the inaugural class were fully licensed as pharmacists and employed one year after graduation.

School of Rural Public Health

Data from the FY2010 survey of alumni (which also included recent graduates) indicate that approximately 84 percent of the 148 Rural Public Health graduates are currently employed (including fellowships), and an additional 12 percent are enrolled in an advanced or professional degree program. Approximately 80 percent of these graduates are employed in the state of Texas. A total of 85 percent of graduates reported working directly in a public health or health-related organization; with 35 percent employed with a local, state, or federal agency, and 33 percent employed with a hospital or health-care provider. The most recent alumni survey of Master of Science of Public Health (MSPH) and PhD graduates in Health Services Research indicated that 63 percent of these graduates were employed in government agencies, and 27 percent were employed in academia.

School of Graduate Studies

For graduates who received a doctoral degree through the Graduate Program in Biomedical Science between 2005 and 2010, Table 4.1 – D summarizes their current areas of employment. The table is divided according to the location of the School of Graduate Studies through which the students matriculated. In addition, the table includes the employment totals for the Graduate Program in Biomedical Sciences as a whole.

Table 4.1 – A Employment Information for Graduates of Biomedical Science Program*

| | Academia | Post-Doctoral/ Residency | Industry/ Professional | Government |
|---|------------|-----------------------------|---------------------------|------------|
| Bryan/College Station/Temple | 26% | 51% | 18% | 5% |
| Dallas | 46.5% | 7% | 46.5% | 0% |
| Houston | 0% | 84% | 16% | 0% |
| Totals for Graduates of Program in Biomedical Sciences | 17% | 60% | 20% | 3% |

*for the past 5 years

Student Enrollment and Degrees Awarded

Since its inception the Health Science Center has steadily increased its enrollment, growing from a total of 882 students in 1999 to 2122 students in 2011. At the same time, the proportion of under-represented minority students enrolled has grown from 11.6 percent in 1999 to 22.4 percent in 2011 (see [Enrollment by Ethnicity](#) for additional details). Consequently, the number of [degrees awarded](#) has also increased from 242 in 1999 to 538 as of fall 2011. While these are not necessarily direct measures of student achievement, they are indicators of institutional success and academic program growth.

Supporting Documentation and Evidence:

- [Degrees Awarded by Program 1999 - 2011](#)
- [Enrollment by Ethnicity 1999 -2011](#)
- [Health Science Center 2011 -2015 Strategic Plan](#)

Federal Requirement 4.8

Distance Education (New)

An institution that offers distance or correspondence education

- 4.8.1 *demonstrates that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit by verifying the identity of a student who participates in class or coursework by using, at the option of the institution, methods such as (a) a secure login and pass code, (b) proctored examinations, or (c) new or other technologies and practices that are effective in verifying student identification.*
- 4.8.2 *has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs*
- 4.8.3 *has a written procedure distributed at the time of registration or enrollment that notifies students of any projected additional student charges associated with verification of student identity.*

Judgment of Compliance:

In compliance

Rationale for Judgment of Compliance:

Executive Summary

The Texas A&M Health Science Center has procedures in place to verify identification and to protect the privacy of students who participate in distance learning activities. Students are informed of any additional charges associated with distance learning courses at the time of registration.

Institutional Response

4.8.1 The Texas A&M Health Science Center has programs involving distance learning technology in four of its academic units: the College of Medicine, the College of Nursing, the School of Graduate Studies, and the School of Rural Public Health. Each of these units has procedures in place to verify the identity of students participating in distance learning courses.

Blackboard

Blackboard is a powerful web-based Learning Management System used by the Health Science Center for distance education activities. Blackboard is designed to allow students and faculty to participate in classes delivered online, or to use online materials and activities to complement face-to-face instruction. Blackboard allows instructors to create a virtual classroom environment

that is available around the clock. Instructors use Blackboard to post course materials such as syllabi, lecture notes, handouts, and streaming video and audio files; to send announcements; to email students in their course; to collect assignments; to facilitate student collaboration and discussion using discussion boards; to deliver secure online examinations; and to securely post grades. Blackboard has been synced with Banner, the student information system currently being used by the Health Science Center. This ensures that enrollment and course information in Blackboard are always synchronized and up-to-date. Users of both the Blackboard and Banner systems access them through a secure portal by using a personal login ID and unique password.

Examples of Compliance

Four of the colleges and schools at the Health Science Center use distance education platforms to deliver instruction. All of these colleges/schools verify the identities of students who participate in distance learning activities.

College of Medicine

The College of Medicine uses videoconferencing technology to broadcast lectures for first and second year medical students. Students physically attend a class location in either Temple or Bryan/College Station. The lecture is conducted live in one location and transmitted simultaneously to the other location, depending on where the professor is teaching. Although the College of Medicine participates in distance education, the classes and test sessions always have an on-site faculty member present. The on-site faculty member and support staff personnel verify the identity of each student and participate in the class presentations, even though the class presentation may originate from another site. Testing is done online through the Blackboard system, which requires a secure login and password. All testing is proctored, so students are known to the proctors and are identified at the time of testing.

College of Nursing

Currently, the College of Nursing offers the RN to BSN program online. Prior to the beginning of this program, students are required to complete a two-day orientation on campus. This provides faculty with an opportunity to get to know the students in person before interacting with them in the online environment. Students in this program use the learning management system Blackboard as the main method of accessing course content and communicating with the professor. To access the Blackboard page, each student must login with both a user ID and unique password. Courses often include webinars that require the student to receive a personal email invitation with a link to access the meeting. Since faculty have previously met the students in person, they are able to recognize their voices on the webinar. Assignments are submitted to the professor via Blackboard or as an email attachment sent directly to the professor. This email contains the student's return email address as an identifier. Mastery level quizzes that can be attempted a maximum of three times are completed by students in the Blackboard system. Each quiz report identifies who took the quiz and when. No proctored examinations are offered in the RN to BSN program at this time.

School of Graduate Studies

The School of Graduate Studies offers distance education courses that involve live video transmission of a single class session between multiple locations. The graduate courses are generally team taught with faculty present at each of the various locations, and involve "real time" interaction between sites. Since graduate courses usually have fewer than 10 students

registered and are discussion based, using distance learning technology allows students to participate in these discussions and interact with a greater number of peers at multiple locations. Where appropriate, course materials may be distributed through the Blackboard learning management system. To obtain these materials, students must access the online portal using the secure login system. Exams are distributed at each location by an on-site proctor who verifies the identity of the student.

School of Rural Public Health

The School of Rural Public Health offers several courses in an online or blended format. It is the policy of the School to verify the identity of all students who are enrolled in these courses through the use of a secure login and pass code. Students access online courses offered through Blackboard via a secure portal where they must enter a unique user name and password. The passwords must be changed regularly. Students using Adobe Connect Pro, access the course through a link embedded within Blackboard. The design and instructional approach of these courses provides for various measures of students' learning achievements. All assignments and projects are downloaded and uploaded through the course site. In addition, all exams and quizzes are taken through the Blackboard learning management system. The School is continually monitoring technological improvements in order to identify more effective methods for verifying student identity.

4.8.2 The Health Science Center abides by the Family Education Rights and Privacy Act (FERPA) in protecting the confidentiality of student records. Written information about this act, and the Health Science Center's process for complying with its provisions, is published on the institutional website and is publicly available to all students ([FERPA website](#)). Students are notified of their FERPA rights during orientation ([Student Privacy Form](#)) and reminded annually thereafter through the student handbooks, the Course Catalog, the Office of the Registrar web site, and an annual notification to each student via his or her official Health Science Center e-mail address. If a student believes that the Health Science Center has failed to comply with the requirements of FERPA, the student has the right to file a complaint of the alleged violation with the U.S. Department of Education. To ensure that faculty and staff understand and carry out the commitments to confidentiality, integrity, and security of student academic records, the Health Science Center requires annual FERPA training as part of its standard employee training package.

The Health Science Center utilizes Banner as the university-wide student information management system to store and manage electronic student information. In addition, the Health Science Center has multiple processes and procedures in place to ensure protection of security, confidentiality, and integrity of its student records as outlined in Comprehensive Standard 3.9.2.

4.8.3 Students are informed in advance of any additional charges associated with distance learning courses at the time of registration. All tuition and fee schedules are publicly available on the Health Science Center [website](#), and an online "tuition calculator" is available as well to help students estimate the cost of registration. Table 4.8 – A below shows applicable fees related to distance education and provides sample documentation from the website that notifies students of the additional expense.

Table 4.8 – A Distanced Education Fees by College or School

| College or School | Distance Education Fees | Written Notification |
|-------------------------------|---|--|
| College of Medicine | None | Required Fees |
| College of Nursing | \$240 first semester, \$480 second and third semester | Required Fees |
| School of Graduate Studies | None | Required Fees |
| School of Rural Public Health | \$200 per semester | Required Fees, Incidental Fees |

Supporting Documentation and Evidence:

- [FERPA website](#)
- [Student Privacy Form](#)
- [Tuition and Fees Website](#)

Required Fees for Programs Involving Distance Education:

- [College of Medicine](#)
- [College of Nursing](#)
- [School of Graduate Studies](#)
- [School of Rural Public Health Distance Education Fee](#) (scroll down to see the SRPH listing)

Federal Requirement 4.9

Definition of Credit Hours (New)

The institution has policies and procedures for determining the credit hours awarded for courses and programs that conform to commonly accepted practice in higher education and Commission policy. (Definition of Credit Hours)

Judgment of Compliance:

In compliance

Rationale for Judgment of Compliance:

Executive Summary

The Texas A&M Health Science Center has policies and procedures that conform to accepted practices for determining the amount and level of credit awarded for courses, regardless of format or mode of delivery. The institution is also in the final stages of approving a written policy that addresses the definition of a credit hour.

Means of Calculating the Amount of Credit

The Health Science Center academic components determine the amount of credit awarded for undergraduate and graduate courses based on the unit of the semester credit hour, in accordance with Coordinating Board rules ([Title 19 Texas Administrative Code, §4.6](#)). The semester is defined as containing 15 weeks of instruction plus one week for final examinations. Thus, assuming a lecture format, the traditional 3 semester-credit-hour course contains 45 to 48 contact hours depending on whether or not there is a final exam. Courses taught in shortened timeframes are expected to have the same number of contact hours as courses taught in a normal semester. Courses taught in a non-traditional manner, such as online, may be offered even if they do not meet contact hour requirements if 1) the course has been reviewed and approved through a formal institutional faculty review process, and 2) it has been determined that the course has equivalent learning outcomes to a traditionally delivered course.

The process is slightly different for the professional degree programs. For example, the College of Medicine determines the amount of credit awarded for courses in accordance with the accreditation standards of the Liaison Committee on Medical Education (LCME), which is the accrediting body for medical education programs in the United States and Canada. The LCME defines program length and academic credit in terms of weeks of instruction, rather than semester hours, requiring a minimum of 130 weeks of instruction for educational programs leading to the Doctor of Medicine degree ([Functions and Structure of a Medical School, Part II.B.1](#)). For a more detailed description of how the College of Medicine determines unit equivalency to semester credit hours, please see Core Requirement 2.7.1.

The Health Science Center is in the final stages of approving a single written policy ([Internal Policy Draft](#)) that defines credit hours for *all* of the academic programs. This policy has been reviewed by the Academic Affairs Advisory Council, and is scheduled to be reviewed by the Health Science Center Executive Committee. The final version of this policy will be available for the on-site SACS review.

Determining Amount and Level of Credit

Each academic component is responsible for establishing a formal faculty review process to ensure that the amount and level of credit awarded for the component's undergraduate and graduate courses is compatible with sound academic practice in the given field. As part of the review process, faculty ensure that all distance education courses have learning outcomes that are equivalent to the outcomes for the same or similar courses delivered through traditional formats. Where appropriate, the components base their review policies and processes on the standards of discipline-specific professional organizations, as indicated in the following summary of the components' review processes.

College of Nursing

Students applying to the College of Nursing must complete selected course work as a condition of acceptance. The Texas Higher Education Coordinating Board requires that every student pursuing a baccalaureate degree program complete a core curriculum consisting of 42 credit hours that includes content from both [Chart I and Chart II](#) of Texas Administrative Code §4.28. The [Health Science Center core curriculum](#) assures that all undergraduate programs provide an appropriate breadth of knowledge in these required areas. If the student has already completed a core curriculum from another Texas public institution in a previous degree program, they are not required to complete the Health Science Center core curriculum.

There are three different tracks for the baccalaureate-level nursing program. The standard generic B.S.N. requires 58 hours of [prerequisite course work](#) to be completed prior to entry. The accelerated (second degree) track is for individuals who have already earned a bachelor's degree in another field and requires 25 hours of [prerequisite coursework](#). The third option is an R.N.-to-B.S.N. program for registered nurses who hold associate degrees and requires completion of 25 credit hours of [prerequisite course work](#) plus any outstanding Health Science Center core curriculum courses. The College of Nursing uses established practices for awarding credit as specified by the State of Texas Higher Education Coordinating Board ([Title 19 Texas Administrative Code §4.6](#)) for all three degree program tracks.

If a student successfully completes the [Nursing Field of Study Curriculum](#) developed by the Texas Higher Education Coordinating Board, that block of courses may be transferred to an institution and must be substituted for that institution's lower division requirements for the nursing degree program, and the student shall receive full academic credit toward the nursing degree program for the block of courses transferred. A student who transfers from one institution of higher education to another without completing the Nursing Field of Study Curriculum of a sending institution shall receive academic credit from the receiving institution for each of the courses that the student has successfully completed in the Nursing Field of Study Curriculum of the sending institution. Following receipt of credit for these courses, the student may be required

to satisfy further course requirements in the Nursing Field of Study Curriculum of the receiving institution.

College of Medicine

The amount and level of credit awarded for courses for the Doctor of Medicine degree by the College of Medicine is determined by the college's Office of Academic Affairs, in conjunction with the Registrar. The Registrar uses established practices for awarding credit as specified by the State of Texas Higher Education Coordinating Board ([Title 19 Texas Administrative Code §4.6](#)).

The College operates on an academic year calendar rather than a semester calendar (see [Curricular Model](#)). The first and second years of study are dedicated to basic science instruction while the third and fourth years are clinical experiences. The College of Medicine has collaborated with the Office of the Registrar to translate contact hours to credit hours for coursework. This collaboration has resulted in the development of a method for converting contact hours to credit hour assignments ([Conversion of Contact Hours to SCHs](#)). This system is based on communication between the College of Medicine and the Health Science Center administration, the experiences of other medical schools, and standards set by the Coordinating Board.

Credit hours for Years 1 and 2 are determined by contact hours. The Coordinating Board awards 3 hours of credit for a semester course of 48 hours (i.e. one hour per 16 contact hours). Thus, the Registrar takes courses for years 1 and 2, determines the total contact hours, and divides by 16 to determine the total credit hours per course. Credits for Year 3 have been determined after benchmarking against other medical schools ([Conversion of Contact Hours to SCHs](#)). Year 4 credits are based on Year 3 credits, and are awarded at a rate of 1.25 hours per week of clinical instruction. Although the College of Medicine does award semester credit hours for courses, doing so is not completely relevant to the college's accreditation by The Liaison Committee on Medical Education. This accrediting body requires a minimum of 130 weeks of instruction (see [Functions and Structure of a Medical School](#)). The College of Medicine currently has 163 weeks of instruction for the entire 4-year curriculum.

College of Pharmacy

Standard methods are used to assign credit for courses within the College, depending on whether the course is a didactic classroom course, laboratory, or clinical experience as explained below. The number of student contact hours with faculty is normally used to assign credit but, in special cases, the number of hours in a more independent laboratory setting is used. The credit hours assigned to each course are noted in the [College of Pharmacy Curriculum](#).

The full semester length is 15 weeks for the P1 to P3 years, in accordance with [Title 19 Texas Administrative Code §4.6](#). Most courses within the PharmD curriculum ([Pharmacy course descriptions](#)) are didactic classroom courses which meet for the entire semester, although some courses are presented in a concentrated and proportional fashion for a portion of the semester. A 1 semester credit hour didactic course is defined as one which has a minimum of 15 class periods of 50 minutes; thus, for example, a typical 3 credit course would have a minimum of 45 classes of 50 minutes each. A seminar course requires two 50 minute periods for 15 weeks to be

considered a 1 credit course. A laboratory course requires three 50 minute periods for 15 weeks to be considered a 1 credit course. An experiential course in any of the four years of the program requires 40 hours of work (for example a 40 hour work-week in a pharmacy) to be considered a 1 credit course, which corresponds well with the requirements for a laboratory course. Some courses are hybrid in that they include, for example, both didactic lecture and laboratory components. The College's practices for awarding credit in the PharmD program conform to the [Guidelines on Curriculum](#), published by the Accreditation Council for Pharmacy Education which is the accrediting body for colleges of pharmacy.

School of Rural Public Health

In developing policies related to the amount and level of credit awarded, the School of Rural Public Health follows the requirements of the Texas Higher Education Coordinating Board ([Title 19 Texas Administrative Code §4.6](#)) concerning the minimum length of courses and limitations on the amount of credit that a student may earn in a given time period. According to these rules, a traditional 3 semester credit hour course contains 15 weeks of instruction (45 contact hours) plus a week for final examinations. Courses taught in shortened semesters are expected to have the same number of contact hours as courses taught in a normal semester. Courses taught in a non-traditional manner, such as over the Internet, may be offered even if they do not meet contact hour requirements as long as the course has been reviewed and approved through a formal faculty review process and it has been determined that the course has equivalent learning outcomes to a traditionally delivered course.

The number of credits assigned to each course is identified in the course descriptions available on the School of Rural Public Health website ([Course Descriptions by Department](#)) and in the Health Science Center [Course Catalog](#) (beginning on page 517). Courses taught in a non-traditional manner, such as online, may be offered even if they do not meet contact hour requirements if the course has been reviewed and approved through a formal institutional faculty review process and it has been determined that the course has equivalent learning outcomes to a traditionally delivered course.

Baylor College of Dentistry

The Baylor College of Dentistry conforms to the awarding of course credit as described in the [Title 19 Texas Administrative Code §4.6](#). Specifically, traditionally-delivered courses contain 15 weeks of instruction (15 contact hours) per each semester hour of credit awarded and also include a week for final examinations. Courses given during the shortened six-week summer term are expected to have the same number of contact hours and the same time requirement for out-of-class learning as courses taught in a 16-week fall and spring semesters. If a course is laboratory-based or clinic-based, a pro rata calculation for semester-hour credit is utilized. For example, the number of contact hours necessary for one semester hour of credit in a laboratory-based course is multiplied by a factor of two and for a clinic-based course by three. Thus a minimum of 15 contact lecture, 30 contact laboratory and 45 contact clinic hours equate to 1 semester hour of credit each.

The oversight of the curriculum, its courses, and credit awarded involves the Office of Academic Affairs, the Director of Curriculum, the Dental Curriculum Committee, the chairs of the academic departments, and the Directors of specific courses. Each new or revised course must

begin with a [Curriculum Action Form](#) written by the course director that must be reviewed and approved by the department chair, the Dental Curriculum Committee, the Associate Dean for Academic Affairs, and the Administrative Council. Courses within each of the four years of the [DDS curriculum](#) are reviewed on a rotating cycle for appropriateness of content, sequence, placement, and credit.

School of Graduate Studies

The School of Graduate Studies procedures for determining the awarding of course credit conform to guidelines provided in [Title 19 Texas Administrative Code §4.6](#). Basically, 1 semester hour of credit is awarded for courses delivered at 1 hour per week for 15 weeks of instruction, plus 1 week for a final exam (a total of 15 contact hours). For laboratory courses, the number of contact hours necessary for one hour of credit is multiplied by a factor of two. Courses offered during the summer, or other shorted semesters, require the same number of contact hours.

The institution-wide Academic Affairs Advisory Council recently clarified these requirements for awarding credit for various types of classes and curriculum. New courses are now initiated with the submission of the [Curriculum Action Form](#) that is submitted by the course director to the associate dean for the appropriate campus location. The Curriculum Action Form is reviewed by the graduate committee at each site, and then forwarded to the Office of the Dean of the School of Graduate Studies for review and final approval by the Graduate Program Council (as described on [page 3 of the School Bylaws](#)). The Graduate Program Council is composed of the associate deans from each of the campus locations, faculty representatives from each campus location, the Vice President for Academic Affairs, the Dean of the Graduate School, and the Executive Associate Dean of the Graduate School. The Registrar for the Health Science Center and the Associate Vice President for Student Affairs serve as advisors to this committee.

Supporting Documentation and Evidence:

- [Accelerated BSN prerequisite coursework](#)
- [Accreditation Council for Pharmacy Education Guidelines on Curriculum](#)
- [College of Medicine Curricular Model](#)
- [College of Pharmacy Curriculum](#)
- [Conversion of Contact Hours to SCHs](#) (College of Medicine)
- [Curriculum Action Form](#)
- [DDS curriculum](#)
- [Functions and Structure of a Medical School, Part II.B.1](#)
- [Generic BSN prerequisite course work](#)
- [Graduate Program Council](#) (described on page 3 of the bylaws)
- [Health Science Center core curriculum](#)
- [Nursing Field of Study Curriculum](#)
- [Pharmacy Course Descriptions](#) (webpage)
- [RN to BSN prerequisite course work](#)
- [School of Rural Public Health Course Descriptions by Department](#)
- Title 19 Texas Administrative Code §4.28 [Chart I and Chart II](#)
- [Title 19 Texas Administrative Code, §4.6](#)