Recommendation to Remove Stipulations for
California State Polytechnic University, Humboldt
January 2024

Overview of this Report

This agenda item provides information on the actions taken by California State Polytechnic University, Humboldt (Cal Poly Humboldt) to address stipulations resulting from their November 2022 site visit. Following its decision of *Accreditation with Stipulations* at the January 2023 meeting, the Committee on Accreditation (COA) directed Cal Poly, Humboldt to provide a six-month update to staff and a seventh-year report documenting the progress made toward addressing stipulations in the report. A summary of the Information provided by the institution is included in this report related to how Cal Poly, Humboldt has addressed the requirements of each stipulation. The full report with additional links can be accessed here.

Staff Recommendation

It is the staff's recommendation that the Committee on Accreditation remove the stipulations in Common Standards 3 and 4 and change the accreditation status from **Accreditation with Stipulations** to **Accreditation.**

Background

An accreditation site visit took place November 13-16, 2022. Following discussion and deliberation of the report and its recommendations at their January 2023 meeting, the COA determined that the institution be granted *Accreditation with Stipulations*. Those stipulations are listed below.

Within one year of this action, the institution must submit written documentation to the Commission consultant documenting the following:

1. evidence the unit is ensuring all programs:
    a. have selection processes and criteria that result in the selection of site-based supervisors who provide effective and knowledgeable support for candidates.
    b. evaluate and recognize site-based supervisors in a systematic manner.
    c. are engaged in effective evaluation of fieldwork and clinical practice.
2. comprehensive continuous improvement processes at both the program and unit level that include assessment of evidence from multiple sources as well as systematic data collection and analysis which result in actionable steps to improve program and unit effectiveness. Areas for assessment of effectiveness should include, but not be limited to, fieldwork and clinical practice, as well as support services for candidates.
3. Provide a 6-month progress report and the one year out report to the Committee on Accreditation documenting steps taken to address stipulations.

The 6-month report was presented and accepted to the COA at the June 2023 meeting. In August 2023 the Cal Poly Humboldt Unit Assessment Committee (composed of the department chairs, program leaders, and, where applicable, programs coordinators for each of the programs that make up the accredited unit) met to develop a work plan to continue refining

procedures and protocols (as identified in the six month report) regarding both standards to fully address the stipulations. Below is a table summarizing the actions taken by Cal Poly Humboldt to address the stipulations. The links included in the table provide much greater detail about the actions and plans moving forward.

Additional Steps Taken by California State Polytechnic University, Humboldt to Address Stipulations

Common Standard 3	
Evidence the unit is ensuring all programs: a. have selection processes and criteria that result in the selection of site-based supervisors who provide effective and knowledgeable support for candidates. b. evaluate and recognize site-based supervisors in a systematic manner. c. are engaged in effective evaluation of fieldwork and clinical practice.	a. Programs reviewed and revised procedures to prepare and support site-based supervisors. Some programs use a CANVAS course for training and others require attendance at meetings to review and discuss their responsibilities. Further information related to the individual programs addressing this stipulation can be found here in "Part 2" of each program's link. All programs now document their procedures to select, prepare, and support site-based supervisors, documented in meeting minutes and the use of resources to support them. The identified issue of inconsistent support by university supervisors has also been addressed through ongoing meetings and group norming of expectations. b. All programs reviewed their procedures to evaluate site-based supervisors and a recognition event will be held in May 2024. A specific assessment of site-based supervisors' effectiveness has been operationalized to evaluate their ability to mentor candidates. Further information related to the individual programs addressing this stipulation can be found here in "Part 3" of each program's link. c. The unit has developed a plan to help individual programs evaluate fieldwork and clinical practice. Previously, there was not a consistent method to review placements across the unit. In response, an updated placement setting assessment form has been developed to be used across all programs for fall 2023. The unit will review data from this survey to assess the quality of placements and make subsequent decisions regarding maintaining sites and mentors and identify areas of improvement within existing sites at the next Unit Assessment Committee meeting on February 8th. Further information related to the individual programs addressing this stipulation can be found here in "Part 4" of each program's link.

Common Standard 4	
Comprehensive continuous improvement processes at both the program and unit level that include assessment of evidence from multiple sources as well as systematic data collection and analysis which result in actionable steps to improve program and unit effectiveness. Areas for assessment of effectiveness should include, but not be limited to, fieldwork and clinical practice, as well as support services for candidates.	1. The unit established a common annual reporting template for all programs that includes specific sections like program changes, admissions and enrollment data, clinical practice observation data, completer survey data, and support services data. 2. Based on these reports from 2021-22 and 2022-23 academic years, programs have examined all data sources in establishing their continuous improvement plans. Program reports are evaluated by the unit yearly to analyze consistent themes for improvement across the unit. 3. Since access to multiple data points was not easily available, the university is assisting programs in accessing data relevant to the effectiveness of credential programs. The Institutional Research Office is creating a dashboard for each program to access data such as enrollment and completion rates. The Registrar's Office is creating credential program audit reports that assist staff in checking a candidate's progress towards earning the credential. Currently, programs have to examine each individual student record to determine course progression. Additionally, a Student Placements and Community Engagement Specialist has been hired by the dean to assist with this work and ensure that these action steps continue on in future years at the unit and program level. Further information related to addressing this stipulation can be found here on beginning on p. 4.