UNIVERSITY OF PUERTO RICO
MEDICAL SCIENCES CAMPUS

Self-Study Report required by the
Middle States Commission on Higher Education for Re-Accreditation
2020-2021

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Due September 24, 2021

Accreditation Actions

- November 19, 2020: To acknowledge receipt of the supplemental information report requested by the Commission action of May 14, 2020. The next evaluation visit is scheduled for 2021-2022.
I. Letter from the Chancellor

September 24, 2021

Site Visit Re-accreditation Team
Middle State Commission of Higher Education

Dear team members:

Under the theme, Accreditation: The Future of Innovation in Time of Crisis, the Medical Sciences Campus of the University of Puerto Rico proudly presents the final Self-Study 2020-2021 Report for the re-accreditation of the main institution of higher education of health sciences in Puerto Rico. This participatory process allowed the MSC Community to examine itself exhaustively and objectively to identify its strengths, challenges and recognize those areas in which it can improve. The MSC understand it has presented evidence and documentation to meet all the Standards, Policies, Procedures, and Requirements of Affiliation of MSCHE and federal compliance regulations.

The Medical Sciences Campus of the University of Puerto Rico would like to express our gratitude for all recommendations to the Self Study Report by Dr. Pedro Uribe Jackson, Team Chair. Our deepest appreciation to Dr. Idna Corbett, Vice President of Field Relations for her continuous support as our Liaison Officer. We strongly reaffirm Accreditation – the Future of Innovation in Time of Crisis.

Cordially,

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IV. Executive Summary

The University of Puerto Rico Medical Sciences Campus (MSC) submits the 2020-2021 Self-Study Report to the Middle States Commission on Higher Education (MSCHE), which is required for the reaccreditation of the campus. Upon completion of the comprehensive participatory process described in the 2019 Self-Study Design, the campus community reaffirms that the institution complies with the seven standards for accreditation and the fifteen requirements of affiliation. The MSC is confident that the current financial scenario is leveraged by the implementation of academic and administrative efficiency measures that makes it possible to continue to carry out its mission and goals while sustaining the excellence of its academic offerings.

Similar to other public (and private) higher education institutions in the United States, the University of Puerto Rico is experiencing financial challenges that extends beyond the impact of natural disasters (2017) and the COVID-19 pandemic (March 2020 to date). To meet these challenges, the MSC has drawn on its single most powerful cohesive force, which is the members of the university community sense of mission and vision, coupled with the commitment to fulfill the stated institutional goals. The MSC is committed to engage in assessment processes that leads the institution towards continuous quality improvement, institutional effectiveness, and effective management of student learning. The campus is accomplishing this.

Standard I. Mission and Goals demonstrates that the institution’s mission statement provides a framework for prioritized budgeting and planning, and ongoing self-evaluation. The plan’s goals are clearly stated and trace a roadmap for achievement of the mission. The mission and goals are still relevant, as demonstrated by the ongoing pursue of academic excellence, increased research and technology, and self-sustainability.

Standard II. Ethics and Integrity evidence that all the operations of the MSC are guided by ethics and integrity. The MSC is faithful to its mission and gives priority to a diverse and respectful campus climate. The policies and procedures provide for fair and impartial practices where conflicts of interest are not accepted. There is a clearly defined due process to handle misconduct and conflict. The institution meets all local and federal regulations.

Standard III. Design and Delivery of the Student Learning Experience describes the numerous and diverse academic offerings of the MSC, which are congruent and aligned with the institutional mission, and characterized by academic rigor and coherence and with higher education expectations. Almost all the schools of the campus, as well as the academic programs, that can be subjected to accreditation are so accredited by the corresponding professional agencies. The faculty is well-qualified, multidisciplinary, with strong teaching competencies and lines of research and are fully committed to the students and the health of the community they serve. In support of the many student learning opportunities, the institution takes pride on its robust technology and information systems infrastructure, a network of collaborations with community-based organizations and MSC clinical services, and numerous research and training projects.

Standard IV. Support of the Student Experience affirms that the MSC always admits only the most qualified students, has a rigorous admissions process, which is consistent with the institution’s mission and vision. The MSC offers administrative and academic support to students from the application process, through the years of study, until graduation. There are multiple support services for at risk students including tutoring, academic counseling, mentoring, and personal counseling. In addition, the wellbeing of the students is a priority as demonstrated by the structured activities that complement their academic experience.
Standard V. Educational Effectiveness Assessment demonstrates that the MSC has degree and program goals that are aligned with the MSC competency domains, relevant educational experiences, and the institutional mission. The campus implemented a system of organized systematic assessment processes and continues to promote and strengthen a culture in which institutional and student learning are assessed campus wide and at the individual schools. To do so, the institution has developed an assessment culture, with plans that have led to a full cycle of findings that have been and continue to be used to standardize decision-making processes. Programs use assessment results to improve and modify the curricula and the students’ learning experiences. Students express satisfaction with the knowledge, skills, and values acquired on campus, which is ultimately one of the institution’s goals. Continuous monitoring of outcomes is a priority to assure that all the programs stay focused on the implementation, evaluation, and success indicators of their plans. Assessment has truly become an integral part of the institutional culture.

Standard VI. Planning, Resources, and Institutional Improvement reinforces that, the MCS has a financial base that is adequate to support the institutional purpose and programs and ensure financial stability. The planning processes and resources are aligned and have demonstrated to be sufficient to execute and support the institutional goals, objectives, and strategies while also allowing the campus to respond to opportunities and challenges, such as, the COVID-19 Pandemic. To adjust to both the reduction of local government funds allocated to the UPR system and the critical financial scenario that the island is experiencing, the MSC has implemented various cost containment measures and increasing external funding sources. This is one of the key institutional priorities. The MSC continues to be successful and competitive in securing external funding, both through grant awards and increase number of clinical services sites where faculty provides services, along with new sales of services, such as, online non-degree granting academic programs, which together account for 70% of the institution’s total budget for FY 2021, allowing the institution to secure its operations and become less dependent on state funds (30% allocation). The campus community is aware that the financial crisis of Puerto Rico is not over, and that financial efficiency must be sustained. This standard also discusses the compensation for professional services, strategies for obtaining additional grant funding, and possible mid- and long-term measures to help offset any future budget reductions. An example of alignment of planning and budgeting is the enhanced information services and technology infrastructures, both of which are up-to-date and adequately support the academic and administrative operations as well as distance education.

Standard VII. Governance, Leadership, and Administration summarizes the UPR system and the campus infrastructure. Faculty and students participate at all levels of decision-making bodies (department, school, campus, University Board, Board of Trustees). The UPR and MSC system of governance effectively and ethically serves its constituents, and works to fulfill its mission, vision, and strategic goals.
V. Institutional Overview

Self-Study Theme: Accreditation: the future of innovation in time of crisis

The MSC is part of the University of Puerto Rico (UPR) system, a multi-campus, state-supported institution of higher education that is licensed by the Puerto Rico Education Council (Certification CEPR 2018-4641). A 13 members Board of Governors oversees the system and ultimately approves bylaws and has fiduciary responsibilities. It is composed of two students (elected), two faculty members (elected) who represent the university community, eight citizens from the community (appointed by the governor), and the Secretary of Education of Puerto Rico as an ex officio member. A representative of the Financial Advisory Authority and Fiscal Agency, known as FAFAA is also present at the meetings. The FAFAA is involved in the process of government debt restructuring and economic development mandated by the Puerto Rico Oversight, Management, and Economic Stability Act (PROMESA) enacted by the U.S. Congress in 2016. The Past President of the University of Puerto Rico, Dr. Jorge Haddock, assumed his position on September 4, 2018 (Certification 001, UPR Board of Governors, 2018-2019). On July 31st, President Haddock stepped down and the Board of Governors appointed Dr. Mayra Olavarría as Interim President of the UPR. Dr. Olavarría had previously served as Secretary of UPR Board of Governors and is also a Professor of the Department of Psychiatry of the School of Medicine at the Medical Sciences Campus. On August 2021, the Governor of Puerto Rico appointed new members to the UPR Board of Governors which were ratified by the Senate of Puerto Rico, as well as, through Certification 015, 2021-2022, of the UPR Board of Governors. Dr. Mayda Velasco was elected president, CPA Ricardo Dalmau Santana as vice president, and Dr. Margarita Villamil Torres (faculty representative), as secretary of the UPR Board of Governors. Dr. Olavarría will serve as Interim President while a formal search process is conducted, following UPR Bylaws, until a new president is appointed.

The president is the chief executive officer of the UPR system and is appointed by the UPR Board of Governors for an indefinite term. This university official presides over the University Board, which is composed of the chancellors of the UPR system’s 11 campuses, faculty, and student representatives from each campus’s, the UPR vice president of academic affairs, and the directors of the Central Administration’s Finance, Planning and Development, and Budget offices. The University Board serves as an advisory body to the president of the university. Law 1 of 1966 and the UPR General Bylaws, as amended, defines the structure of the university system and its units.

There are six basic decision-making levels at the University, i.e., department, school, campus, presidency, University Board, and UPR Board of Governors, with several bodies intervening at each level depending on the matters to be addressed. For example, within the MSC, at the school level, discussions of and decision-making related to academic issues are the purview of the associate dean for academic affairs, the faculty, the curriculum committee, and the corresponding program. The creation of new academic programs begins at the program level and move progressively to and through the school level, the MSC Deanship of Academic Affairs, the MSC Academic Senate (SA, using its initials in Spanish), the MSC Budget Office, the MSC Chancellor and Administrative Board, and the UPR Vice Presidency of Academic Affairs and Board of Governors, ending, finally, at the local state licensing agency (CES).

With the Congress approval of PROMESA law, in 2016, the island entered a challenging debt-restructuring and economic development process. A Financial Oversight and Management Board for Puerto Rico (FOMBPR) was created and is responsible of overseeing the financial management of all the Puerto Rico Government agencies. The University of Puerto Rico, as a state-supported higher education institution is among the agencies under the oversight and financial scrutiny of the FOMBPR. The MSC has secured additional funding (sales of services, donations, continuing education [CE], intramural clinical services, among others) to continue to fulfill its mission and to support Puerto Rico’s healthcare delivery system. Some of the strategies to respond to both the island’s new reality and a new generation of students include
the online academic (non-degree granting) programs, the use of technology to increase efficiency, and the transformation of the educational offerings based on assessment results. The chancellor appointed a multidisciplinary finance committee to monitor accountability as a cost-effective measure to ensure compliance with federal regulations and requirements. The newly developed Deanship of Research facilitates the access to additional external funds, providing more resources to basic and clinical investigators.

The MSC administrative deanships which respond directly to the Chancellor are the Deanship of Academic Affairs, Deanship of Administration, Deanship of Student Affairs, and the Deanship of Research. The six professional schools that are part of the MSC are the School of Medicine, School of Dental Medicine, Graduate School of Public Health, School of Pharmacy, School of Nursing, and School of Health Professions. The UPR Board of Governors designated Dr. Segundo Rodriguez-Quilichini as the interim chancellor on July 20, 2017; he was installed as chancellor on July 1, 2019. Effective May 7, 2021, Dr. Rodriguez-Quilichini presented his resignation as chancellor. UPR’s president, Dr. Jorge Haddock, appointed Dr. Wanda T. Maldonado, the previous School of Pharmacy Dean, as interim chancellor, effective May 8, 2021.

The following agencies currently accredit the MSC professional schools and programs and hospital-based residency programs: the Liaison Committee on Medical Education (LCME), the Accreditation Council for Graduate Medical Education (ACGME), the Commission on Dental Accreditation of the American Dental Association (CODA-ADA), the Council on Education for Public Health (CEPH), the Accreditation Council for Pharmacy Education (ACPE), the Council on Accreditation on Nurse Anesthesia Education Programs (COA), and the Commission on Collegiate Nursing Education (CCNE). Most of the programs in the School of Health Professions hold profession-specific accreditations granted by the following agencies: the International Council of Accreditation (ICA), the Commission on Dental Accreditation of the American Dental Association (CODA-ADA), the Joint Review Committee on Education in Radiologic Technology (JRCERT), Committee on Veterinary Technician Education Activities (CVTEA) of the American Veterinary Medical Association (AVMA), the Commission on Accreditation in Physical Therapy Education (CAPTE), Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language Hearing Association (ASHA), Accreditation Council for Education in Nutrition and Dietetics (ACEND), the Joint Review Committee on Educational Programs in Nuclear Medicine Technology (JRCNMT), the National Accrediting Agency for Clinical Laboratory Sciences (NAAACLS), the Accreditation Council for Occupational Therapy Education of the American Occupational Therapy Association (ACOTE-AOTA), the Cytotechnologist Programs Review Committee of the Commission on Accreditation of Allied Health Education Programs of the American Society of Clinical Pathology (CPRC-CAAHEP-ASCP) and the Commission on Accreditation of Health Informatics and Information Management Education (CAHIIM).

The accreditation of all the programs susceptible to accreditation guarantee institutional compliance with professional standards and keep the MSC programs attuned to new knowledge development and emerging trends in their respective fields. The MSCHE accreditation process offers the institution an opportunity to examine areas and issues shared by programs and units that contribute to the full execution of the campus’ mission and common goals. All the schools and academic and residency programs subjected to accreditation are accredited as of July 26, 2021.

The MSC offers 65 academic programs. Among them, first professional doctorates in medicine, dental medicine, pharmacy, public health, nursing, audiology, and physical therapy; doctor of philosophy degrees in the biomedical sciences and pharmaceutical sciences; postdoctoral master’s degrees in clinical research and dental specialties; and 38 postdoctoral certificates in medical specialties (hospital-based residency programs). The practicing physicians in training on these hospital-based residency programs and their attendings are essential to provide medical and dental specialized services at the Department of Health
facilities. Students can also seek a master’s degree with a specialty in the fields of biomedical sciences, nursing, public health, pharmacy, and allied health professions, and post-doctoral master’s degrees in the field of dentistry’s specialties recognized by the ADA. In addition, the campus awards bachelor’s degrees in nursing and the health professions, as well as a few post-bachelor’s certificates and associate degrees in health professions. As examples of a recently implemented major curricular changes are the newly available DrPh. As per the CEPH requirements, competency models and foundational knowledge were reviewed at the Graduate School of Public Health; the review was initiated in December 2018 and completed in May 2019. The School of Pharmacy recently had approved the Doctor of Philosophy (PhD) in pharmaceutical sciences, admitting its first cohort to start in August 2021. From the 38 residency and fellowship programs of the School of Medicine, many are unique to Puerto Rico. These include the following programs: Internal Medicine-Pediatrics, Pediatric Intensive Care, Neonatal-Perinatal Intensive Care, Orthopedic Surgery, ENT, Ophthalmology, Child Psychiatry, Anesthesiology, Urology, Allergy Immunology, Dermatology, Geriatrics Medicine (Internal Medicine), Geriatric Medicine (Family Medicine), Rheumatology, Neurology, Neuromuscular (Neurology), Child Neurology, Nuclear Medicine, Pathology, Forensic Pathology, Sports Medicine (PMR), and Radiology.

The campus is the largest health sciences center in Puerto Rico located within the perimeter of the Puerto Rico Medical Center and has close ties to the community through an extensive network of public and private practice sites. The institution operates the University of Puerto Rico Hospital in Carolina, which is a corporative development of the UPR, and has numerous teaching and practice arrangements with hospitals at the Puerto Rico Medical Center and the nearby VA Caribbean Healthcare System, among others. The School of Dental Medicine operates its main practice site on school premises and sponsors several community-based service projects (in which students participate) in-underprivileged communities. The School of Medicine’s faculty work as attending physicians at the Medical Center and at the UPR Clinic nearby. The School has more than 75 affiliation agreements with private offices, clinics, and hospitals around the Island. The School of Pharmacy, Graduate School of Public Health, School of Nursing, and School of Health Professions also have extensive networks of sites that guarantee the quality of the students’ practice experiences and community outreach. Over the years, these arrangements have gained the campus prestige in the community and have strengthened its ties with many practicing professionals who serve as preceptors and mentors for the academic programs on an ad-honorem (voluntary) basis.

Besides teaching and service, the campus is also engaged in numerous research projects, many funded by federal agencies. The main federal sponsor is the National Institutes of Health and its subdivisions. The Campus also has projects funded by the National Science Foundation (NSF) and the Centers for Disease Control and Prevention (CDC), among others. Over the past 10 years, this activity has continued to grow, fueled in part by seed money and infrastructure-building programs such as the Minority Biomedical Research Support (MBRS) program, the Research Centers in Minority Institutions (RCMI) program, and the MD Anderson Cancer Center (MDACC).

As of academic year (AY) 2020-2021, the MSC had 2,665 students, 447 residents, 981 faculty members, and 1,141 non-faculty staff. Most of the faculty members have a doctoral degree. There are two entry processes for admission to the MSC: The first is known as internal or in-transfer admission, which applies to students requesting admission to one of the undergraduate programs, from another UPR campus as the MSC does not admit students directly from high school. The second entry process is by direct admission for a Master’s, Doctorate, or professional degree. The majority of admitted graduate students come from the different units of the UPR system ensuring diversity within our student body. On June 4, 2021, the MSC of the University of Puerto Rico graduated 739 new health professionals during its fifty-fifth commencement exercises. In June 2019, the MSC graduated the first specialists with a combined degree in internal medicine and pediatrics. The academic year 2021-2022 started on August 2, 2021, as published in the approved academic calendar.
Within the UPR System, the MSC Campus is a specialized science-based institution with strong service and research productivity which has made it a sustainable institution in times of financial crisis. The institution serves two of the basic needs of the Puerto Rican population, education, and health care services, making it an essential academic institution for Puerto Rico. During the pandemic, the MSC has proven itself able to achieve academic transformation and bring about innovation, primarily through virtual education. The upcoming academic year, 2021-2022, uses a hybrid modality due to the varying natures of the academic program offerings.
VI. Institutional Priorities

The MSC Executive Committee identified three main priorities to be addressed in the self-study for reaccreditation. The institutional priorities discussed in that process of identification were financial sustainability, research development, and assessment. These priorities were thoroughly discussed as part of the strategic planning process of the UPR system; included in this discussion of the MSC Strategic Plan were the members of the Academic Senate and of the Administrative Board, as well as representatives of the six schools.

Priority 1. Financial sustainability. This focuses on increasing the collection of external funds and making a proactive and systematic evaluation of the institution’s regulations and internal administrative processes. The use of technology to support all institutional processes and endeavors will provide timely information for administrative and financial decision making, thus leading to compliance and accountability. Other efforts to diversify external funding will include expanding local and international networks and alliances with different sectors to strengthen the institution in its three main components of teaching, research, and service. This priority area is highlighted in the strategic plan in Pillar IV: Fiscal Strengthening and Sustainability, Effectiveness in Administrative Management.

Priority 2. Research development. Research provides the foundation for educational experiences and the training of students to the research field. Research continues to be a priority for the MSC. As stated in the institution’s mission, the MSC aims to strengthen patient care services through the knowledge and innovation generated by research activity. As described in the MSC Strategic Plan, 2017-2022, one of the goals is to increase faculty and student participation in collaborative research projects. Courses and projects that contribute to the development of professionals will, in time, improve the health of patients and other members of the community. The establishment of a Deanship of Research facilitates this collaboration. Furthermore, the new deanship provides a stable and necessary structure for the development of successful proposals that will secure additional funding for the institution. This priority area is highlighted in the strategic plan in Pillar II: Research and Innovation Management and Pillar IV: Fiscal Strengthening and Sustainability, Effectiveness in Administrative Management.

Priority 3. Assessment culture and educational effectiveness. Strengthening the assessment culture at the MSC will guarantee the implementation of a systematic process in which the collection of both quantitative and qualitative data on institutional behavior and student learning will measure how the institutional mission, vision, and values are being fulfilled. From a reflective, analytical, and evidence-based perspective, the academic curricula will be kept up to date and redesigned so that students will graduate with the necessary competencies to meet the health needs of the population they will be serving. Equally important is faculty training in the development of the best teaching–learning strategies and formative/summative assessment methods. This training will allow the faculty to identify useful and timely information about the learning of their students so that assessment results can be used to improve the institution’s educational effectiveness. This priority area is highlighted in the strategic plan in Pillar I: Academic Quality and Innovation.
The institutional self-study priorities are defined and illustrated below in Figure 1

**Figure 1. MSC Institutional Priorities**
VII. Institutional Outcomes

The MSC seeks to attain one main overarching goal and certain specific, intended outcomes through its self-study process:

**MSC Self-Study’s General Goal**

Gain a thorough understanding of the institutional policies, trends, achievements, strengths, and weaknesses of the MSC. Doing so will promote accountability and determine the levels of excellence of the institution’s academic programs by the time of the MSCHE reaccreditation site visit in the fall of 2021.

**Intended Outcomes for the MSC Self-Study Process**

a. Maintain compliance with the MSCHE Standards for Accreditation and Requirements of Affiliations as leaders in the health sciences professions in Puerto Rico, despite the current economic crisis.

b. Demonstrate how the institution currently meets the MSCHE’s Standards for Accreditation and Requirements of Affiliation.

c. Focus on continuous improvement in the attainment of the institution’s mission and its institutional priorities.

d. Promote the use of assessment results at the MSC for multiple decision-making processes and ensure that, in this time of crisis, the resources intended to safeguard educational effectiveness are adequate to the task.

e. Demonstrate how cost-effective academic–administrative strategies have promoted the appropriate use of financial and human resources, enabling the institution to continue producing excellent health professionals for the overall benefit of Puerto Rico.

f. Validate research efforts that facilitate the faculties’ success in writing proposals (competitive grants) and provide educational experiences for the students.

g. Engage the institutional community in an inclusive and transparent self-appraisal process that actively and deliberately seeks to involve members from all areas of the institutional community.
VIII. STANDARD I: Mission and Goals

The institution’s mission defines its purpose within the context of higher education, the students it serves, and what it intends to accomplish. The institution has stated goals are clearly linked to its mission and specify how the institution fulfills its mission.

Criteria 1.1 (Requirements of Affiliation 7 and 10)

Clearly defined mission and goals that:

a. are developed through appropriate collaborative participation by all who facilitate or are otherwise responsible for institutional development and improvement; (Requirements of Affiliation 7 and 10)

The Medical Sciences Campus of the University of Puerto Rico has a clear mission and vision statement readily found at the MSC website.

Mission: Prepare health professionals by offering professional, undergraduate, graduate, post-graduate, and continuing education academic programs to improve the health of those residing in Puerto Rico and abroad and strengthen patient care services through knowledge and innovation generated by the research activity.

Vision: A state-of-the-art academic institution of internationally recognized for its teaching, research, and service in the healthcare field.

These mission and vision statements, along with the aligned strategic areas (Pillars) and outcome-based goals, guide the institutions’ programs and all institutional planning and decision-making processes. They are the backbone of the Strategic Plan 2017-2022. This plan was developed through a comprehensive review process which was highly participatory and included members of the different constituents: faculty, non-teaching staff, students, deans of schools and support units, Academic Senate, and Administrative Board. To identify the priorities of the institution, a survey was administered to a representative sample of each of these sectors. The survey responses served as a guide for the development of the new strategic areas (called Pillars in the plan) and associated goals. A representative committee of these sectors, along with all responsible for institutional development and improvement at the MSC and its six schools, participated in a retreat to revise the vision, mission, values, and develop the new strategic areas and goals. Dr. María de los Ángeles Ortiz, a Strategic Planning Consultant and Professor of UPR-Rio Piedras Campus, guided these workshops and discussions.

The MSC Strategic Plan 2017-2022 was approved by the Academic Senate on June 19, 2017 (S1C1.1 MSC Strategic Plan 2017-2022). The plan serves as a roadmap to facilitate the development and improvement of the campus and achieve its mission and goals. The strategic plan, which is aligned to the University of Puerto Rico Strategic Plan 2017-2022 (S1C1.1 UPR Strategic Plan 2017-2022), guides the development of the administrative units and academic operations, and provides a framework for ongoing interval evaluations.

The MSC Strategic areas (labeled as “pillars”) aligned to the UPR Strategic areas are as follows:

- Pillar 1: Academic Quality and Innovation aligned to Education Environment and Technological Culture.
- Pillar 2: Research and Innovation Management aligned to Research and Creation.
- Pillar 3: Physical and Technological Infrastructure aligned to Technological Culture and Sustainable Management.
Pillar 4: Strengthening and Fiscal Sustainability aligned to Efficiency in Administrative Management.

b. **address external as well as internal contexts and constituencies;**

The strategic planning process that resulted in the current strategic plan took into consideration external as well as internal contexts and constituencies when developing the goals. For example, the need for increased use of technology in higher education (external context) is part of Pillar 1, which has as one of the objectives to enhance our hybrid and online course and program offering and forms the basis of all the goals and objectives of Pillar 3 Physical and Technological Infrastructure. To this end, the MSC has launched a process of technological transformation which began by integrating Blackboard services to its cloud version. Blackboard Ultra became the official platform for all online components of courses and Blackboard Collaborate the official mechanism for videoconferencing within courses. More than 700 faculty members have been trained in the use of Blackboard Ultra and Blackboard Collaborative. To further meet this strategic area when the COVID-19 Pandemic arrived, the MSC developed the RCM Online Division which has the mission to manage all services regarding distance learning courses including faculty development and continuing education; educate and support faculty and academic programs in the creation of online courses, certificates, reviews, and distance learning programs; collaborate in the production of digital materials, videos, and multimedia among others. RCM Online is responsible for the administration of Blackboard Ultra/Collaborative, RCM Online Education, Quality Matters, Respondus Lockdown, Monitor, and Live Proctoring, and the RCM Online Website (https://rcmonline.education/). Since its inception, faculty has been trained in multiple topics including virtual conferencing using different modalities, how to use develop tests and rubrics for online courses, instructional design for online learning, how to prepare course content, learning strategies for online teaching, among others. Attendance for each activity varied from 95 to 100 faculty members per training.

One example of the internal contexts that was identified as important by faculty and students was the need to enhance the MSC research endeavor which makes up Pillar 2 of the Strategic Plan and Institutional Priority 2 of the Self Study. To this end, the MSC created a Deanship of Research in 2018 and appointed an Interim Dean. The Deanship of Research supports research development, administration, and compliance. To support and promote the continuous submission of new proposals to obtain external funding, the Deanship established a Pilot Project Program to provide funding to meritorious research projects from new investigators, to gather preliminary data. The Deanship has also updated and developed a new standard operating procedure (SOP) pertaining to financial management, human resources, and compliance to facilitate project management and ensure compliance with changing applicable regulations. The MSC is the leading institution conducting biomedical research in Puerto Rico. MSC investigators have developed interdisciplinary and transdisciplinary research initiatives and projects in basic science, clinical, translational, and epidemiological research.

Since 2017, some of the MSC's achievements related to this Pillar include: renewal of the MD Anderson Cancer Center Partnership for Excellence grant to strengthen research on this disease and its treatments in Puerto Rico. This grant consists of $13 million for a period of 5 years. This agreement contributes to the development of community outreach initiatives, education, and other interventions aimed at reducing the incidence of this disease among Puerto Ricans and Latino groups in Texas and other states. The Institute of Neurobiology has five (5) independent investigators with three R01 and two R21 projects approved for young and/new investigators though three COBRE Program, currently in its second funding cycle from National Institute of General Medical Sciences. The Integrated UPR Clinical Trials Unit (IUPR-CTU) has conducted numerous studies for treatments for over 2 decades in pediatric and adult populations. Notably, an HIV vaccine is currently studied among Men who has Sex with Men and Trans populations, as well as long active prevention drugs protocols are also studied for the same at-risk groups. Since 2016, Investigators at the MSC have received $2.2M in funding from the National Institute on Drug Addiction and National
Institutes on Alcohol Abuse and Alcoholism for basic, population and translational sciences projects to study alcohol abuse and tolerance and drug use studies. Investigators from the School of Medicine, School of Public Health and School of Pharmacy are leading research initiatives in this cluster. The MSC researchers have received funding from NIH, HHS, HRSA, the UPR and the Puerto Rico Science, Technology and Research Trust to perform research related to CoVID-19. To date, the MSC has received over $10M in funding. For more examples of achievement refer to S1C1.1b- Self-Study Research.

As the MSC’s mission includes improving healthcare, external forces consider healthcare systems thus, the MSC maintains numerous educational and practice agreements with institutions inside and outside of Puerto Rico. Examples include the Río Piedras Medical Center, Auxilio Mutuo Hospital, Veterans Administration Hospital, Manatí Medical Center, HIMMA Hospitals, Health System of New York University, Langone, and Institute for Sustainable Solutions of Portland State University, among many others.

c. are approved and supported by the governing body; (Requirement of Affiliation 7)

The MSC Academic Senate is the official deliberate forum of the academic community and advises the Chancellor in academic matters. The Academic Senate approves the required documents to guide decisions and implement changes in academic programs and processes. The functions and responsibilities have been established in the University of Puerto Rico Law and in the Article 21 and 22 of its own rules (https://senadoacademico.rcm.upr.edu). As stated above, the MSC Strategic Plan 2017-2022 was approved by the Academic Senate.

The governing bodies that support the mission and goals include the Academic Senate, the Deanship of Research, and the Deanship of Academic Affairs. The Academic Senate evaluates, approves, and support all academic programs within the MSC. The Deanship of Research supports all research endeavor at the MSC. The Deanship of Academic Affairs is charged with the responsibility of overseeing academic processes that pertains to all schools, such as development of new academic programs, curricular revisions, continuing education, faculty development, accreditation, and coordination of interdisciplinary activities. Also, it has research infrastructure development programs and behavioral and clinical research projects that are federally funded and involve more than one school or cut across disciplines such as the Institute of Neurobiology, the Behavioral Sciences Research Institute, Research Centers in Minority Institutions, and the Minority Biomedical Research Support Program - Research Initiative for Scientific Enhancement among others (https://daa.rcm.upr.edu).

d. guide faculty, administration, staff, and governing structures in making decisions related to planning, resource allocation, program and curricular development, and the definition of institutional and educational outcomes;

The mission, strategic areas, and goals of the strategic plan guide the MSC constituents and governing structures in planning, allocating resources, developing programs and curricula, and continuously assessing the defined institutional and educational outcomes. The MSC Strategic Plan 2017-2022 served as the basis for the development of the MSC Institutional Assessment Strategic Plan’s Operational Plan (S1C1.1- Institutional Assessment Strategic Plan Operational Plan) and for the development of the MSC Institutional Plan for Learning Assessment. (S1C1.1- MSC Institutional Plan for Learning Assessment). These plans have specific outcome measures related to the Strategic Plan’s goals that are directed towards a culture of assessment and academics. Outcomes of both plans are evaluated by the MSC Institutional Assessment Committee which submit a copy of these results to the Dean for Academic Affairs and Chancellor who discusses outcomes at the appropriate forums and plan accordingly. Concomitantly, the assessment committees at each of the schools monitor and discuss assessment indicators to implement the corresponding actions (1C1.1- Report of the MSC Institutional Assessment Strategic Plan’s Operational Plan; S1C1.1- Report of the MSC Institutional Plan for Learning Assessment 2021).
All the schools’ strategic plans are aligned to the MSC Strategic Plan. Thus, the MSC Pillars and Goals guide all constituents within all schools to plan and assess outcomes and provide priority and allocate funds to specified strategic areas (Pillars). The outcomes report of the school’s strategic plans demonstrates the progress achieved in the establishment of priorities, planning, assessment, and curricular changes (S1C1.1 MSC Schools’ Executive Summaries). These issues are discussed in the strategic planning committees of the schools to monitor the accomplishment of institutional and schools’ goals. As will be explained in answer to area g, the institution continuously evaluates the attainment of the goals of the strategic plan and depending on outcomes, plans accordingly thus assessing institutional effectiveness.

e. include support of scholarly inquiry and creative activity, at all levels and of the type appropriate to the institution;

Pillar 2 of the MSC Strategic Plan supports scholarly inquiry and creative activity through three strategic goals focused on the establishment of the Deanship of Research and research performance indicators. The new deanship has facilitated the training of researchers and their staff, and the development of new research projects as already explained. Another important creative activity included in the plan in Pillar 1 is the development and implementation of curricular and extracurricular experiences that incorporate the interprofessional component in academic programs. Students have benefitted from enhanced learning experiences in their academic programs and have attained knowledge and skills that are important in residency training and future practice of health professions. These learning experiences include lectures, small-groups seminars, workshops, team-based and problem-based learning. For example, the schools of Medicine, Nursing, and Pharmacy have instituted a longitudinal Interprofessional Education Curriculum that spans the 4 years of training and has consistently been evaluated as excellent by the students. Recently, students from the School of Dental Medicine are also participating in the curricular activities. During the COVID-19 Pandemic the MSC implemented vaccination clinics and faculty and students from the six schools collaborated to vaccinate hundreds of patients, which denotes close collaborations between students and faculty from our programs.

f. are publicized and widely known by the institution’s internal stakeholders;

The MSC Strategic Plan 2017-2022, was shared with the university community by the Chancellor once it was approved in July 2017, through the institutional e-mail system. Also, the mission and strategic plan are included in the web page of the institution and in the MSC Catalog (S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021). The MSC Catalog also includes each of the six schools’ mission and vision statements. Distribution, both within and outside of the institution, has been accomplished through various means, including the MSC website, catalogs, annual reports, minutes of institutional committees, and faculty meetings, among others. The mission is often displayed on posters in visible areas on campus.

The MSC Academic Senate, the Administrative Board, and the strategic planning committees of the schools discuss issues related to the strategic plan during regular meetings that facilitate and provide support to implement activities and achieve strategic goals. The Chancellor discusses monthly in the Academic Senate an outcomes report related to institutional priority issues and level of progress. The mission and strategic planning is also discussed during the schools and programs’ accreditation processes. All these sources of information contribute to evidence the accomplishment of the strategic and institutional assessment plans.

g. are periodically evaluated;

The vision, mission, values, and strategic goals are revised comprehensively every 4 years. In an ongoing basis the MSC engages in assessment processes that regularly inform quality improvement by evaluating the outcomes of outcome measures defined in the plan for each goal and the results of student achievement
of educational goals, student learning, academic and institutional assessments. For example, as already stated, the Chancellor of the MSC provides interim reports on the outcomes of the strategic areas to the Academic Senate and the Administrative Board and these groups plan accordingly and re-evaluate outcomes in a timely manner (S1C1.1- Examples of Chancellor Presentations and Certifications of the Academic Senate).

Annual evaluation of the strategic plan’s outcomes is done through the Institutional Assessment Committee which evaluates institutional effectiveness and submits reports. In addition to the assessment reports already mentioned, other reports submitted by this committee include the Evaluation Outcomes Report of the first year 2017-2018 of the MSC Strategic Plan 2017-2022 which evidenced that mission and goals guide the faculty, administration, staff, and governing structures in making decisions in priorities areas such as: curricular development, program assessment, research, distance education, and student services (S1C1.1 – Strategic Plan Report 2017-2018). Also, the 2018-2019 Achievements Report of MSC (S1C1.1 – Strategic Plan Achievements Report 2018-2019) and the Institutional Effectiveness Report 2019-2020 demonstrated the accomplishment of mission and institutional goals (S1C1.1 – Institutional Effectiveness Report 2019-2020). The MSC Strategic Plan 2017-2022 Executive Summary 2021 (S1C1.1- MSC Strategic Plan Executive Summary 2021) contains a summary of the plan’s achievements up to date. The Summary is in draft form now and in the process of completing the outcomes assessment. Outcomes of strategic planning are discussed at the MSC Administrative Board where all deans are present and can make improvement plans accordingly.

Finally, the six schools continuously evaluate the outcomes of their strategic plans and plan accordingly thus integrating goals for academic and institutional effectiveness and improvement, student achievement of education goals, student learning, and the results of academic and institutional assessment as part of the MSC institutional planning.

CRITERIA 1.2 (Requirement of Affiliation 7)
Institutional goals that are realistic, appropriate to higher education, and consistent with mission.

The four Pillar of the strategic plan were defined based on the MSC mission. The aligned goals provide a roadmap to guide the MSC to achieve its mission as evidence in example S1C1.2 - Alignment MSC Mission, Goals and Achievements 2018-2019. MSC achievements demonstrate that institutional goals are realistic at local and national levels. Expectations for each goal are reflective of our mission, human, financial, and physical resources. For example, one of the goals of Pillar 2 is to improve the MSC impact in Puerto Rico through community outreach and leadership. Outcomes at this moment demonstrate that faculty, students, and alumni have been recognized for their leadership and performance. Several MSC initiatives impact patient care services and research activity at international level. One important example is MBQ Pharma, Inc. - the first biopharmaceutics industry in Puerto Rico that was created by MSC scientists with the goal to bring to market an effective anti-cancer drug that inhibits metastasis in many types of cancers. The company was founded as a UPR spin-off to develop an antimetastatic drug based on the research activities performed by four MSC faculty members.

Another evidence is the creation of the Puerto Rico Public Health Trust, which works in partnership with the public and private sectors to identify and implement evidence-based solutions that impact public health and is directed by a MSC’s faculty member. The trust has been playing an active role in the development of strategies aimed at preventing and protecting against COVID19. The MSC and the American Red Cross established an alliance to carry out community health projects aimed at providing behavioral health wellness activities and disease prevention in eleven municipalities on the island severely affected by Hurricane Maria. Residents, students, and professionals of the Campus participate in this alliance. These achievements constitute key examples that demonstrate the fulfillment of the institutional mission through the three main activities: teaching, research, and service. Likewise, they demonstrate the viability of
compliance with the established goals that respond to the following pillars or goals of the strategic plan and institutional assessment: academic quality and innovation; research and innovation management; physical and technological infrastructure and strengthening fiscal sustainability.

MSC goals are appropriate to higher education which entails dedication to students, disseminating knowledge, studying values, and advancing the society it serves. The institution evidence high satisfaction level with MSC services in student surveys (S1C1.2- Student Survey) and obtains 100% or above the national level passing rates in specialty boards and licensing examinations. These outcomes sustain that the MSC fulfills the mission and vision to prepare health professionals through high quality education, research, and excellence in service activities. (S1C1.2 - Institutional Effectiveness Report 2019-2020).

CRITERIA 1.3 (Requirement of Affiliation 10)
Goals that focus on student learning, related outcomes, and on institutional improvement; are supported by administrative, educational, and student support programs and services; and are consistent with institutional mission.

The goals of the MSC Strategic Plan 2017-2022 are focused on the student learning experience and the full range of services offered by the institution to ensure that the institution succeeds in educating students consistent with its mission. For example, Goal 1 included under the Pillar 1: Academic Quality and Innovation is to foster an innovative environment based on a learning model that responds to the evolution of the disciplines and the labor market. One of the strategic objectives within this goal is to design educational proposals and policies for hybrid or fully online. The MSC requested and was granted the MSCHF approval to provide distance education and, as of this moment, there are two fully online certificates. This has been supported by the RCM Online Division. The multiple strategic goals focus on the evaluation of the academic programs which respond to the needs of the health professions. Some indicators established to evidence the accomplishment of these goals are retention and graduation rates, percent of licensure examination pass rate, percent of alumni working in their disciplines in the six months after graduation. These indicators corresponding to the assessment of academic programs are included in the MSC Institutional Plan for Learning Assessment (S1C1.1- MSC Institutional Plan for Learning Assessment). The data collected from the schools demonstrate excellence in the preparation of the health professionals.

Each school assesses program effectiveness and expected student learning outcomes based on accreditation standards and professional competencies. All schools have their internal assessment systems, and services to support the continuous improvement of student learning outcomes and academic programs. Some assessment mechanisms to support student learning outcomes include Curriculum and Evaluation Offices, Curriculum Committees, Committees for the Assessment of Programs Effectiveness, Academic and Professional Counseling Services, mentoring programs, and student academic support activities (tutoring, workshops, wellness activities, among others).

CRITERIA 1.4 (Requirement of Affiliation 10)
Periodic assessment of mission and goals to ensure they are relevant and achievable.

As can be evidenced in Criteria 1.1g the MSC uses assessment results for improvement and there is evidence that the institution’s mission is still relevant and is being achieved (S1C1.1 MSC Schools’ Executive Summaries; S1C1.1- MSC Strategic Plan Executive Summary 2021). Assessment results evidenced in the different reports already referenced indicate that the Strategic Plan Pillars and goals are also still relevant and serve as a roadmap to achieve the mission. Important sources of evidence of periodic assessment of the mission and goals, in addition to the ones previously mentioned, are also found in the Schools and Programs Self-Study reports for reaccreditation, progress reports, annual institutional and program updates required for professional accreditations, and accrediting agencies evaluations. In the history of the MSC, there has
never been a finding of non-compliance with the mission and goals standards.

Conclusion:

The standard was met.

1. The MSC fully accomplishes its mission as a health sciences campus that is serving the people of Puerto Rico and has consistently been a key player for both the healthcare delivery system and the public health system on the island.
2. All the institutional and strategic goals are in alignment with the mission and vision, are developed with the participation of diverse constituents of the academic community and serve as blueprints for further institutional development.
3. The MSC complies with all local, national, and federal applicable laws and regulations as well as with the institutional policies of the UPR system.
4. The members of the Institutional Assessment Committee are knowledgeable about and have experience in both data collection and planning and assessment processes.
5. The MSC Strategic Plan supports scholarly inquiry and creative activity through three strategic goals that are focused on the establishment of the Deanship of Research and the increase of research performance indicators.
6. The evaluation of the MSC Strategic Plan have demonstrated that the institutional goals are realistic, appropriate to higher education, and aligned with the mission.
7. Each of the six schools has its own plan for assessing program effectiveness and expected student learning outcomes, which are in line with accreditation standards and professional competencies.

Recommendations and/or Areas of Improvement

1. Strengthen the systematic collection of data and review of the MSC Strategic Plan through the development of a formal Strategic Planning Committee that can both, evaluate assessment results and plan accordingly aligned to allocation or resources.
2. Better dissemination of the achievements and strategic plan evaluation results to the campus community at large through the publication of yearly strategic plan status reports.
IX. STANDARD II: Ethics and Integrity

Ethics and integrity are central, indispensable, and defining hallmarks of effective higher education institutions. In all activities, whether internal or external, an institution must be faithful to its mission, honor its contracts and commitments, adhere to its policies, and represent itself truthfully.

The Medical Sciences Campus of the University of Puerto Rico (MSC) expects the highest standards of ethics and integrity from all its constituents and in all activities. The MSC is committed to a respectful campus climate, fair and impartial practices, and compliance with all applicable federal, state, and accreditation policies.

CRITERIA 2.1
A commitment to academic freedom, intellectual freedom, freedom of expression, and respect for intellectual property rights;

The MSC has a commitment to academic freedom, intellectual freedom, freedom of expression, and respect for intellectual property rights.

Academic freedom principles are established and protected by the University of Puerto Rico and clearly stated at official policies such as the UPR General Bylaws Chapter 1, Article 11, Sections 11.1 to 11.4 (S2C2.1-UPR General Bylaws) and the MSC Faculty Manual p.47 (S2C2.1 - Faculty Manual Rev2021). At the UPR, academic freedom is defined as the right of any faculty member to teach with objectivity and honesty his/her discipline of expertise, with no other restrictions than those imposed by the moral and intellectual responsibility to cover all the essential elements of the course subject, as approved by the corresponding authorities, with respect for dissenting opinions, and with educational methods consonant with ethics in teaching and the search for truth. The policy also states academic freedom should not supersede the students’ rights to be taught the core content of the course and to be presented with different points of view within a climate of respect for students’ differing views and opinions and maintaining their freedom of expression. At the MSC, the policy concerning academic freedom was further expanded and approved by the Academic Senate on April 28, 1998 (S2C2.1-MSC AS# 38, 1997-1998).

The UPR policy related to intellectual freedom and respect for intellectual rights is stated by the Puerto Rico Department of Education Council on Higher Education (now Board of Postsecondary Institutions) through Certification #93-140 about Intellectual Rights (S2C2.1- #93-140 CES). The purpose of this certification is to protect, recognize and disseminate the intellectual property rights and responsibilities of members of the academic community and of the University of Puerto Rico itself. A summary of the policy is included in the MSC Faculty Manual p. 114 (S2C2.1 - Faculty Manual Rev2021). To sustain its commitment to intellectual freedom and intellectual rights, the UPR has an Office of Intellectual Property (https://www.upr.edu/vicepresidencias/vicepresidencia-de-investigacion-y-tecnologia/office-of-intelectual-property/#1524584659274-96d63ac8-aacd ) and within the documents tab, there are multiple policies that evidence commitment with intellectual freedom and respect for property rights. Examples include the Circular 95-01 (S2C2.1-Circular 95-01) which guides the university community about current legislation and instances in which federal copyright law makes exceptions for the exclusive right to reproduce works and Certification 66 2016-2017 Policy on Trademarks of the University of Puerto Rico (S2C2.1 – #66 JG 2016-2017: Policy on Trademarks) which establishes the norms related to the registration, use and licensing of trademarks, logos and names that are associated with the University of Puerto Rico, or any of its units or divisions. The S2C2.1- #34 2018-2019: Policy on Patents, Inventions and Commercialization of the UPR provides the authority to solicit, evaluate and market inventions of faculty, staff, students, and others who are employed or hired to work at the University of Puerto Rico. To guarantee ethics and integrity in research, the UPR Board of Trustees approved the Policy and Procedures for Responding to Allegations of Possible Research Misconduct of the University of Puerto Rico.
Rico (S2C2.1- UPR BoG # 45 (2006-07). This policy provides a process to respect intellectual property rights and intellectual freedom. The policy is also summarized on p. 115 of the MSC Faculty Manual. In addition, the UPR has an Office of Research Compliance and Integrity (https://www.upr.edu/vicepresidencias/vicepresidencia-de-investigacion-y-tecnologia/office-for-research-compliance-and-integrity/) which has the to assist the research and creative community in achieving and maintaining ethical principles of high rigor, as well as ensuring full compliance with federal, state, and institutional regulations through the promulgation of a culture of excellence and responsibility in research (S2C2.1- BoG #59 2012-2013).

To this same end, the MSC Administrative Board approved the creation of the Center of Research Compliance and Development (CRECED) (S2C2.1 - CRECED #167 JA-RCM). The goal of the center is to administer and support the development of research and compliance activities at the MSC, in accordance with institutional, local, and federal regulations and in coordination with the Office of the Vice President for Research and Technology and the Compliance Office of the UPR Central Administration. The Center became the Deanship of Research., while the Regulatory Committees including the Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), Institutional Biosafety Committee (IBC), and the Radiation Safety Committee (RSC) are Under the Chancellors office. A Research Integrity Officer is also included under the Chancellor’s office, among many other resources that evidence the MSC commitment to ethics and integrity in research (https://research.rcm.upr.edu/policies-and-proceduresf). The regulatory committees’ policies and procedures guarantee compliance with the rules and regulations of ethics in research (committees.rcm.upr.edu).

Finally, freedom of expression is guaranteed by the UPR Bylaws, Article 32, Section 32.1 (S2C2.1- UPR General Bylaws) and summarized on p.47 of the MSC Faculty Manual (S2C2.1 - Faculty Manual Rev2021). Freedom of expression is also stated in UPR General Student Bylaws, Article 2.7 and repeated in the MSC General Student Bylaws, Article 2.7 (S2C2.1 - UPR General Student Bylaws; S2C2.1- MSC General Student Bylaws). The UPR General Bylaws, MSC Faculty Manual, MSC General Student Bylaws, and UPR General Student Bylaws are readily available at the MSC website. New faculty and students get a copy at orientation workshops.

CRITERIA 2.2
A climate that fosters respect among students, faculty, staff, and administration from a range of diverse backgrounds, ideas, and perspectives;

The University of Puerto Rico, Medical Sciences Campus is committed to foster a culture of respect among its constituents. Institutional values are fully described in the MSC Catalog (S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021), in p.10 of the MSC Faculty Manual (S2C2.1 - Faculty Manual Rev2021), and in p.8 of the MSC Student Manual (S2C2.2- MSC Student Manual 2019-2020). These are as follows:

- Excellence at the core of academic life and university endeavors.
- Integrity in university activities and processes.
- Respect for the search for truth, justice, freedom, equality, and human dignity.
- Commitment to ethical, humanistic, and professional principles.
- Honesty and respect in communication.
- Creativity and innovation in generating ideas, developing new knowledge, searching for solutions, and making decisions.
- Professionalism characterized by inter-professional collaboration, flexibility, and acceptance of diversity.
- Continuing education and independent learning fostering reflective, creative, and critical thinking.
Leadership and social responsibility in addressing the health problems of the population of Puerto Rico.

- Comprehensive development of the physical, mental, social, and spiritual health of human beings.
- Sensitivity and commitment to the needs of the community.

The UPR and the MSC have core policies and processes that state our commitment to a safe and diverse campus climate. The UPR University Coexistence Policy (S2C2.2 UPR Coexistence Policy) clearly states the importance of a safe coexistence within the university and includes guaranteed freedom of expression, the commitment to dialogue instead of confrontation, respect for diverse ideas, and a culture of peace. The UPR (S2C2.2 - BoG #58 2004-2005) and the MSC have antidiscrimination policies that require respect to diversity. The MSC complies with Title IX regulations (S2C2.2-Title IX regulations) (https://rcm2.rcm.upr.edu/title-ix/) established under the Education Amendments of 1972, to protect people from sex-based discrimination in education programs or activities that receive Federal funding. Title IX states that: No person in the United States shall, based on sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance. The Office of Title IX provides educational activities to the academic community related to sex-based discrimination (https://rcm2.rcm.upr.edu/title-ix/f). The MSC policy (S2C2.2- RCM No Discrimination TIX) states that the Medical Sciences Campus of the University of Puerto Rico does not discriminate in its academic offerings because of sex, race, color, age, national origin, political or religious ideas, gender, sexual orientation, ethnic origin or because of being a victim or be perceived as a victim of domestic violence, sexual assault, or stalking. This policy complies with federal statutes under Title IX, as amended. It also states that it is the duty of every member of the university community to notify any discrimination or complaint event before the Office of the Title IX Coordinator, telephone 787-758-2525, ext. 1368 or 1360.

The MSC Professors Duties, Responsibilities, and Rights Policy describes how the professors must relate with students and their rights (S2C2.2- Faculty Duties, Responsibilities, and Rights 2010-2011). Concomitantly, the Students’ Duties, Responsibilities, and Rights Policy (S2C2.2-Students Duties, Responsibilities, and Rights) states that students’ conduct will be based on ethical principles and honesty and that they will observe a conduct of integrity, mutual respect, and serene dialogue in their relations with other members of the campus community. In addition, students’ relationship with the professors will be based in mutual respect, promoting a creative dialogue, and freedom of expression.

There are multiple other policies, process, and support offices that foster respect among students, faculty, staff, and administration from a range of diverse backgrounds, ideas, and perspectives. Examples include the UPR Bylaws (S2C2.1- UPR General Bylaws) which define the expected behaviors of its constituents. Section 35.1.1, Personnel Relationships Goals establishes that mutual personnel relationships must be developed in a climate that fosters respect, harmony, and fraternity. Minorities and special populations are particularly protected, for example, in the S2C2.2 – Pregnant Womens’ Rights President’s Letter 2015, the UPR recognizes the rights that pregnant students should have, including if there are complications during pregnancy. The MSC has an Office for Students with Disabilities (https://de.rcm.upr.edu/osei) which promotes the wellness of students with disabilities, facilitates their inclusion in the university life, contributes to the achievement of their academic goals, and protect their rights. The MSC Policy for Reasonable Modifications and Academic Services (S2C2.2-BoG #133 2015-2016 Reasonable Accommodation and Academic Support) ensures the rights of students with disabilities enrolled in the MSC are upheld and they are provided with the accommodations and services they need to be successful.

The MSC fosters the only initiative in Puerto Rico and Latin America that addresses ethics and bioethics from diverse dimensions and contexts, founded in 1995; Instituto de Bioética Eugenio Maria de Hostos. The Institute is dedicated to promoting and developing capacity building efforts, research, and technical assistance to create a culture of moral sensitivity, ethical reflection, and responsible action in the field of
life sciences and health professions, thus promoting the fundamental values necessary for just and peaceful coexistence in a pluralistic, inclusive, and democratic society, within the framework of global responsibility. The Institute has trained US and PR university professors with the sponsorship of the National Endowment for the Humanities and the Pan-American Health Organization (PAHO). With the collaboration with the Graduate School of Public Health, MSC, and PAHO, the Institute operating under the Deanship of Academic Affairs, developed and offers the only Certificate of Professional Studies in Bioethics in Puerto Rico. The initiative has contributed to develop, cultivate and strength a culture of ethics and bioethics among local and international sectors, including 71 graduates from the certificate, more than 600 affiliates and collaborators, representing various disciplines and universities (79.5% university professors, that guarantee continuity, multiplier effect), two publications with dozens of case studies compilations and, one to be publish during summer 2021.

The MSC, in an effort to increase diversity and inclusion, has been working towards more inclusion of transgender population. The Administrative Board in compliance with a request from the Academic Senate implemented an action plan and at this moment, each of the six schools is working to identify non-gender sanitary units. In addition, schools are working through different mechanisms to enhance diversity. For example, the School of Medicine has a Diversity and Inclusion Policy, a Diversity and Inclusion Officer, and a Diversity and Inclusion Committee. Their work plan has resulted in increased curricular and faculty development activities that promote a climate of respect for all. The School of Public Health has diversity, equity, and inclusion as part of their mission and values and strategic plan including core required courses that teach diversity and cultural competency. The School of Dental Medicine approved a Diversity, Equity, and Inclusion Policy, and is in the process of implementing it. The School of Pharmacy has courses directed towards health disparities, cultural competency, diversity, and equity. The School of Health Professions has different initiatives based on the different programs’ accreditation requirements including required courses. Finally, the School of Nursing developed an elective on health disparities and diversity and in June 2021 approved a Committee on Diversity, Equity, and Inclusion with the purpose of increasing these topics throughout their curricula.

The Chancellor appointed a Diversity, Equity, and Inclusion Ad Hoc Committee on August 2021 with the purpose of all schools developing a diversity, equity, and inclusion policy that complies with accreditation requirements and national standards and recommendations.

To support the diversity of not just the MSC, but of Puerto Rico, the MCS has a series of initiatives. Students developed Recinto Pa’ La Calle initiative which is a community service project that address homeless people living near the Medical Science campus. The initiative serves a diverse population in need of company, medical services, orientation, and food, among others. Work with this service project was placed on hold due to the COVID-19 Pandemic. Another initiative developed by the General Student Council, School’s Student Councils, Counselors and Faculty, was the Recinto de Ciencias Médicas Llega a Ti. These were Health Fairs implemented after Hurricane Maria with the purpose of serving the Puerto Rican population in need of diverse medical services in their communities, including medicine, dental medicine, pharmacy, nursing, physical therapy, among others.

Finally, the MSC is committed to ensure that, as a postsecondary institution, it is in full compliance with the Cleary Act (S2C2.2-Crime Awareness and Campus Security Act of 1990). MSC security and safety is an important feature to guarantee the best environment for postsecondary education. For this reason, the Institution has adopted action supported by Cleary Act, to assist schools in providing students, faculty, and staff a safe environment in which to learn and to keep students, parents, and employees well informed about campus security, key contacts, and procedures to report crimes or emergency or security concerns or actions, among other concerns. To meet these goals, the MSC publishes periodic security reports, crimes alert announcements, and offers programs to prevent dating violence, domestic violence, sexual assault,
and stalking, as well as procedures for institutional disciplinary action in cases of alleged dating violence, domestic violence, sexual assault, and stalking.

To support a secure and safe educational and work environment the MSC has adopted a transport service called, *Ruta Segura* (Safe Route). The service has been operating since, 2017, under the Campus Security Office, in charge of enforcing the Jeanne Cleary Act. *Ruta Segura* provides transportation services for students and employees, during high demand hours from various locations on the campus to neighborhoods. This service was placed on hold due to the COVID-19 Pandemic.

**CRITERIA 2.3**

A grievance policy that is documented and disseminated to address complaints or grievances raised by students, faculty, or staff. The institution’s policies and procedures are fair and impartial, and assure that grievances are addressed promptly, appropriately, and equitably;

The MSC embraces its responsibility to ensure a safe environment free of discrimination and other violations through the adoption and dissemination of grievance and complains procedures, policies, and protocols. Every mechanism ensures students, faculty, and staff that their grievances and complaints are addressed promptly, appropriately, and equitably. Members of the campus community may file complaints at their school or unit level and appeal to higher university authorities (department heads, deans, chancellors, President, University Board, and Board of Governors). The Law of Uniform Administrative Processes (*S2C2.3- Uniform Administrative Law of the Government of PR*) state the formal and informal grievance procedures of all constituents of governmental institutions including the UPR. The UPR Bylaws (*S2C2.1- UPR General Bylaws*) summarize the grievance process for faculty and non-faculty staff in Article 35, Section 35.1.2. Disciplinary procedures and actions are stated in Article 35 of the UPR Bylaws. In Section 35.1.3, it is established that the fundamental purpose of the disciplinary processes is corrective, in harmony with the best institutional interests. The UPR recently approved, on June 28, 2021, the Regulations for Disciplinary Procedures of UPR Employees, which is based on the UPR General Bylaws (*S2C2.3- Regulations for Disciplinary Procedures of UPR Employees*) of The UPR also has a single appeal process for students, faculty, and non-faculty staff (*S2C2.3- Appeals Processes UPR*) which specifies the levels of authority and timeframe that should be observed in cases of appeal.

In addition to these policies and laws, there are other procedures for students and faculty at the MSC that comply with the above-mentioned laws and policies and provide a streamlined process. The UPR General Students Bylaws (*S2C2.1 - UPR General Student Bylaws*) in Article 2.36 Violation to Policies Related to Student Rights and Responsibilities, refers that any student who understands their rights have been affected or violated can present a grievance to the competent authority within their institutional unit. The process to address students’ grievances is described in Certification #147, 2015-2016 of the MSC Administrative Board (*S2C2.3- Student Grievance Process MSC*). It includes the application to formally submit a complaint, personnel responsible for its implementation, timeline, and appeal processes. The MSC General Student Bylaws contain all the policies related to student rights and responsibilities (from the UPR General Student Bylaws) and includes the MSC grievance process (*S2C2.1- MSC General Student Bylaws*). During this process, the student may request assistance from the Student Ombudsperson (*S2C2.1 - UPR General Student Bylaws*). The Student Ombudsperson has the responsibility to advise students about their rights and responsibilities, contribute to the solution of conflicts with other members of the university community, offer workshops and lectures related to university life, disseminate university policies and processes, and refer students to other services when needed. The Student Ombudsperson services may be requested online at [https://procestudiantil.rcm.upr.edu/servicios](https://procestudiantil.rcm.upr.edu/servicios). Students are oriented to these processes during their programs’ orientation sessions.

During the 2019-2020 academic year, the Students Ombudsperson served 65 complaints, some of them submitted by more than one student. Sixty nine percent (69%) of the situations presented were in the
academic area, specifically in elements questions with the syllabus, course evaluation, evaluation of course grades, and administrative withdrawals.; 21% were related to questions with institutional policies; 10% were related to reasonable modification. Ninety five percent (95%) were resolved in the same academic year (S2C2.3- Students Ombudsperson Complaints Report).

For the faculty, the MSC has a Faculty Ombudsperson Office (https://procclaustrial.rcm.upr.edu/f) which was created under S2C2.3- Academic Senate Certification 43 1999-00. The office has the responsibility to look for efficient solutions presented for consideration; corroborate information; counsel and refer faculty, complement the established mechanisms to solve controversies; follow up issues presented to make sure they are resolved; and advise about the office services. Complaints and grievance reports are presented to the MSC governance officials and academic senate every year. The following table summarizes the Faculty Ombudsperson Inquires and Complaints Annual Reports for years 2017-2020. Data obtained evidence that 100% of information and orientation services were provided by the Faculty Ombudsperson. Differences between students and professors were solved in collaboration with the Student Ombudsperson. Cases regarding other categories were solved through mediation methods, referrals and discussions at department heads, deans, among other management personnel.

Figure 2- Faculty Ombudsperson Inquires and Complaints Annual Reports for years 2017-2020

As stated in the UPR General Bylaws and the Regulations for Disciplinary Procedures of UPR Employees, Staff grievances and complaints process in the MSC also follow the Law of Uniform Administrative Processes. If the grievance is related to a peer staff member, then it is directed towards the staff supervisor, administrator, or director of the program and / or department which refers it to the Human Capital Management Department. Once the referral for disciplinary action is received, the director of the Human Capital Management Department, who attends to matters regarding labor relations, proceeds to analyze the information provided and proceeds to carry out an investigation on the facts and proceeds to present a report that includes the violations committed by the employee and sends the results of the investigation to the Office of Legal Advisors so that due process of law can be carried out.

Anyone in the academic community can submit a sexual harassment grievance through the Title IX Office. The TIX office responsibility is to initiate the informal investigation process upon receiving a complaint. Also, to establish the processes for submitting, investigating, and adjudicating complaints for alleged acts of sexual harassment and/or retaliation carried out by members of the university or visitors against students, employees, contractors, or people who come to the University of Puerto Rico to receive services or information. The grievance procedure is published at the web page of the MSC, in posters across the
campus, and sent by emails upon request. Also, the grievance procedure is discussed in the continuous training program to the MSC community and contained within the MSC Student Manual and MSC Faculty Manual.

The Title IX Office uses sexual harassment policies (S2C2.3- UPR Sexual Harassment Policy) and the protocol to prevent and manage sexual violence acts at the UPR (S2C2.3-Sexual Violence Protocol) as guidelines for the investigation process regarding situations of sexual misconduct and other manifestations of sex discrimination. The students can submit a sex discrimination complaint through the Office of Student Ombudsperson, the Dean of Students, professors, or faculty of the school. Employees through their supervisor, Office Director, or Human Resources Director. Visitors can submit a complaint at the Campus Security Office. Nevertheless, in all cases, the submission of a complaint can be done directly to the Title IX Office. For years 2017 to 2021 complaints report categories and resolutions are described in Table 1: Title IX- Report of in campus complaints Medical Sciences Campus, 2017-2021.

Table 1: Title IX- Report of in campus complaints Medical Sciences Campus, 2017-2021.

<table>
<thead>
<tr>
<th>Complaints period¹</th>
<th>COMPLAINT CATEGORY</th>
<th>Resolutions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sexual Harassment</td>
<td>Domestic Violence</td>
</tr>
<tr>
<td>2017</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>• Supportive measures</td>
<td>• Security plans</td>
</tr>
<tr>
<td>2018</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>• Supportive measures</td>
<td>• Security plans</td>
</tr>
<tr>
<td>2019</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>• Supportive measures,</td>
<td>• Security plans</td>
</tr>
<tr>
<td>2020</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2021</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>16</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Grand Total: 23</td>
<td></td>
</tr>
</tbody>
</table>

¹ Jurisdiction on complaints reported to the TITLE IX was taken into consideration in this report.
CRITERIA 2.4 (Requirement of Affiliation 13)

The avoidance of conflict of interest or the appearance of such conflict in all activities and among all constituents;

The University of Puerto Rico Board of Governors, administrators, staff, and faculty must all abide by the ethical code established by the Law on Government Ethics 2011 (S2C2.3-Law of Government Ethics). This law defines conflicts of interest specifically focusing on the government officers. It establishes that all public employees, including state university personnel and faculty, must demonstrate ethical principles, as stated in the law, in the fulfillment of their duties. The law also applies to partnerships, businesses, real estate acquisitions, and legal cases involving the institution. The law specifies that governmental employees may have no employment, family, ownership, or other personal financial interest in the institution. The law specifies requirements such as 20 hours of continuing education in ethics and sanctions to those found in non-compliance. MSC employees abide by this law and are subject to the scrutiny and oversight of the MSC Institutional Ethics Committee, which is mandated by this law for every governmental agency, as a primary strategy for compliance.

The UPR and MSC also abide by specific policies and rules applicable to situations involving research, education, and service activities, particularly those pertaining to bids and purchasing processes. (BoG #20 2003-2004; Council on Higher Education #130 1988-89; and BoG #30 2008-2009). For Board of Governors members, the Rules and Regulations of the Board of Governors stipulate conflicts of interest policies (S2C2.4-BoardofGov Bylaws) and the Board has a recusal statement document (S2C2.4-BoardofGov Recusal). The Board of Governors must adhere to this conflict-of-interest policy which assures that those interests are disclosed and that they do not interfere with the impartiality of the members or outweigh the greater duty to secure and ensure the academic and fiscal integrity of the UPR. The President of the UPR nor the Governor of PR can serve as a Board member.

The Board of Governors approved the Policy on Conflicts of Interests and Disclosure of Financial Interests in Research and Other Sponsored Programs (S2C2.4-BoG #63 2007-2008). The UPR and the MSC has specific policies and procedures focused on prevention and management of conflicts of interest related to profit ventures that are developed by the institution (S2C2.4- BoG #123 1996-1997 and S2C2.4- BoG #124 1996-1997).

To support the avoidance or appearance of conflict of interest among Suppliers and Contractors (other than institutional employees), the University of Puerto Rico Medical Sciences Campus, adopts, implements, and enforces compliance with laws, regulations, guides, and certifications, formularies. For Suppliers and Contractors policies related to laws and regulations applicable can be found at: https://rcm2.rcm.upr.edu/ethics-on-campus/.

CRITERIA 2.5

Fair and impartial practices in the hiring, evaluation, promotion, discipline, and separation of employees;

The UPR Bylaws (S2C2.1 - UPR General Bylaws) stipulate the policies and procedures related to hiring, evaluation, promotion, discipline, and separation of employees in Chapter 5, Articles 29-31 and 35-36, and all of Chapters 6, 7, and 8. The MSC Faculty Manual (S2C2.1 - Faculty Manual Rev2021) also contains this information and adds information related to a fair evaluation on p. 48. Also, the UPR Board of Governors approved a process to improve recruitment, retention, and evaluation (S2C2.5- Recruitment, Retention and Evaluation). Institutional policies and procedures have facilitated the successful recruitment, retention, and development of a qualified, productive faculty.
Recruitment, Promotion, and Tenure Policies

The official recruitment process is initiated at the school level by the Dean or Department Director, who publishes a job posting in the appropriate local and national printed or electronic media. The Department Personnel Committee receives and verifies that the candidate is qualified for the available position, conducts interviews, and prepares a report with recommendations to the Department Director, based on the candidates’ experience and credentials. The Director reviews the Committee’s report and submits his/her recommendations to the Dean, who forwards all pertinent documents to the School’s Personnel Committee for its review. According to the UPR General Bylaws, the Department and School Personnel Committees have an advisory role to the Dean, who may accept or reject their recommendations. The Dean recommends candidates for appointment to the Chancellor and the Administrative Board, who have final authority over the appointment. The MSC grants the academic ranks of Instructor, Assistant Professor, Associate Professor, and Professor, the equivalent levels for the rank of Researcher, as well as four levels (I-IV) for the ranks of Librarian, Counselor, Social Worker, and Psychologist.

Rules pertaining to promotion and tenure are stated in Articles 46 and 47 of the UPR Bylaws. To be considered for promotion or tenure, faculty must hold a full-time, tenure-track appointment and have served at least five consecutive years at the institution. Conditional tenure may also be granted to faculty with special appointments who are paid with stable external funds. Evaluation for promotion and tenure policies at the MSC are stipulated at the MSC Faculty Evaluation Instructions (S2C2.5-MSC Faculty Evaluation Instructions 2016) and explained below.

Salary, Fringe Benefits, and Retention Incentives

Salaries are determined by rank, highest academic degree, and years of service at the institution. In general, retention of faculty is not a problem at the MSC. Difficult recruitment and significant turnover only occur within some specialties subject to highly aggressive and competitive recruitment by the non-teaching private sector or mainland institutions. The low turnover is because the University is the largest and most resourceful academic higher education institution in the island, making it the most attractive higher education employer locally. It offers considerable opportunities for professional development and an attractive package of incentives and fringe benefits, by local standards. Salary, benefits, and incentives include periodic salary increases for cost-of-living and years of service; salary increase for completion of a higher academic degree; and research incentives. Additional benefits include Christmas and faculty development annual bonuses; sabbatical and other leaves of absence with and without pay and/or financial aid; release time for formal studies during regular work hours; payment of travel expenses for study and other professional development (limited funding due to financial constraints); health insurance for employee and family; and a retirement plan, which was amended to increase the maximum salary subject to withholding contributions, therefore increasing future pension payments.

Leaves of absence for study may be granted with or without financial aid, for a period of up to three years. Upon completion faculty member must serve the institution for at least one year for each year of leave awarded. In addition to sabbatical and other leaves of absence for study or extraordinary circumstances, leaves with or without pay may also be granted for: participation in political processes, jury duty, service in the United States Armed Forces, participation in some sports events (when representing Puerto Rico or the United States), and service at other UPR units.

In the spirit of maintaining the highest standards of merit evaluation system for faculty promotion procedures and evaluation criteria’s updates, the MSC Administrative Board has made updates to the Guidelines for Promotion and Tenure (S2C2.5-MSC Faculty Evaluation Instructions 2016). Examples of efforts made to update and enhance procedures are:
• **S2C2.5- MSC Adm Board # 56, 2017-2018**: Establishes the minimum criteria of weighted punctuation for the consideration of promotion in academic rank, established in the provisions of the UPR General Bylaws, Article 41 and 45.

• **S2C2.5- MSC Adm Board #16, 2018-2019**: Establishes the minimum score criterion weighted for the rank-up consideration for each rank set in the provisions of the General Regulations of the University of Puerto Rico.

Articles 70 through 78 of the UPR General Bylaws address recruitment of nonteaching personnel. The Office of Recruitment and Selection, in the Department of Human Capital Management, is responsible for identifying suitable candidates for available nonteaching positions. The office reviews the files of potential candidates and verifies education, experience, and other qualifications. During the period under study, the Recruitment Office did not receive any negative audit reports.

**Faculty Evaluation procedures for Promotions**

The UPR Bylaws in Chapter VII, Article 47, Sections 47.1 to 47.8 (*S2C2.1 - UPR General Bylaws*) establishes that the MSC, as an institutional unit, its Administrative Board and at the proposal of the Chancellor, will evaluate the cases of possible promotions of the faculty and will grant or deny requests for promotion in rank. Each department will have a committee, who will submit the original evaluation documents to their respective deans through the department director. To maintain a full and ethical process of evaluation of teaching personnel, the Bylaws establish that the evaluations will be the responsibilities of personnel committees, department, and faculty, in accordance with the standards established by the institutional units and approved by the Administrative Board, which must be consistent with the Regulations. Among the worksheets to evaluate teaching staff are criteria regarding: General Teaching, Clinical Service, Research, Specialized Teaching, Special Service, Academic Administrators, Counseling Teaching Personnel and Library Teacher.

The Faculty Evaluation Manual (*S2C2.5- MSC Faculty Evaluation Instructions 2016*) describes the general process for the evaluation of the faculty. At the beginning of each academic year, the department chair sends the list of each candidate who can request promotion in rank or tenure, to the personnel committee of his/her department. Then, the department chair will send a letter to the faculty requesting promotion in rank or tenure. The faculty supervisor, with the consent of the department chair, will agree with the candidate (faculty member), the relative percentages, and weights of the components to be evaluated according to their work program. The professor (candidate) must provide evidence and documentation of the work carried out, so that the Personnel Committee can evaluate said work, using the corresponding templates, according to the correlative percentages agreed between the doctor and his supervisor.

Regarding fair and impartial practices, UPR General Bylaws, in Chapter V, establishes that “in order to promote excellence, all the processes of recruitment, selection, promotion, retention and separation of university personnel, will be based essentially on their relative abilities of the applicants, calibrated in objective demonstrations, free from prejudice and discrimination based on race, color, sex, birth, age, physical or mental disabilities, origin or condition social or political or religious ideas.”. In article 27, the UPR guarantees the continuity of the rights acquired by university personnel, within the applicable legal framework. On the other hand, in its Article 28 (section 28.2.1), regarding the administrative staff hiring, supervision, evaluation and promotion, is a direct responsibility and function of the Central Administration and its Human Resources Office. They also provide advice and technical assistance to the human resources offices of each campus and institutional units (article 28.2.2.4)

**Non- teaching staff evaluation procedures for Promotions**

UPR Bylaws Articles 70 through 78 (*S2C2.1 - UPR General Bylaws*) address recruitment of nonteaching personnel (staff). The Office of Recruitment and Selection, in the Department of Human Capital
Management is responsible for identifying suitable candidates for available staff positions. The office reviews the files of potential candidates and verifies education, experience, and other qualifications guided by the Performance Evaluation Form for Non-Teaching Personnel. Regarding the evaluation of the performance of non-teaching staff personnel, the Medical Sciences Campus uses the job classification plan, as a formal mechanism to promote personnel by granting steps for merit, promotion, and reclassification, which are described below:

Job Classification Plan: Systematic grouping of job classes and series of classes according to their duties, responsibilities and/or authority. It establishes the rules and procedures necessary to conduct personnel in harmony with the current Remuneration Plan and the applicable regulations. (S2C2.5- MSC Differential Plan 2004).

Job Reclassification: Reclassification to a higher, equal, or lower category. A reclassification is granted, when, because of changes in the organization of an institutional unit, the integration of new programs or the elimination of existing programs or for any other reason, it is found that the duties of a position may have varied or changed substantially and permanently.

Intermediate Levels and/or Steps by Merit or Levels and/or Steps by Merit: Steps by merit belong to the Compensation Plan and are also granted to active non-teaching staff with a permanent status or special appointment, who occupy positions in the classes of the Classification Plan. Currently, they are under revision and pending for the approval of the current president of the UPR, according to guideline R-1819-20.

Promotions: Are approved through meetings and certifications issued by the Administrative Board of the units and evaluated by their peers.

Disciplinary Actions and separation
As stated above, Article 35 of the UPR General Bylaws and the Regulations for Disciplinary Procedures of UPR Employees describes employees’ conduct subjected to disciplinary actions, due process, and applicable disciplinary actions, including suspension and separation.

CRITERIA 2.6
Honesty and truthfulness in public relations announcements, advertisements, recruiting and admissions materials and practices, as well as in internal communications;

The MSC is committed to transparency and effective communication with the university community. To achieve this goal, the Institution adopted the S2C2.6-Clear Communication approach of the National Institute of Health, Office of Communications and Public Liaison. The approach proposes information dissemination of initiatives in a transparent, compelling, inclusive, and accessible way to diverse audiences. Cultural respect is our starting point, for that reason, we incorporate simple language approaches and the use of new technologies to disseminate initiatives that are relevant and innovative in the context of local, national, and international interest. Since last accreditation, MSC, designed a well-organized website in which all current laws and institutional policies and procedures are made available to the campus community in one convenient, easily accessible source. The website also includes internal communications. Social media has been adopted to strengthen communication channels with all sectors.

Communications regarding recruitment and admissions materials and practices are contained in official documents such as the MSC Catalog, MSC Admissions Office Website, and School Websites. The Dean for Academic Affairs, the Dean for Student Affairs, and the schools’ deans are the responsible individuals for maintaining transparency and truthfulness in all materials and practices. To ensure this, the MSC Catalog is revised every 6 months with all Associate Deans from the six schools and at least once per year.
compared to the information found in the different websites. When differences are found, corrective measures are taken.

Social Network Ethics within Campus
The MSC recognizes the importance and benefits of communication through social networks (Facebook, Twitter, Instagram, and YouTube). Social media is a powerful medium through which the Medical Science Campus can publicize relevant news and stay connected with the academic community and the public. The MSC supports the use of social media to share news and communicate with a variety of audiences around the world and encourages our students, faculty, and employees about the appropriate and ethical use that we should make of these media, facing the challenges presented by these technologies.

It is important to note that the Medical Sciences Campus is an academic institution for health professionals in various fields. As an element concerning the development of professional training of students and professionals who work and study, we ensure they have access to health information, following the instructions applied by the Federal Health Insurance Portability and Accountability Act (HIPAA). The Campus is committed to protect the information that users disclose to us through social networks in an ethical and responsible manner, according to the Protocol for the Use of Social Media (S2C2.6-Protocol for Acceptable Use of Social Media). The Press and Communications Office and the Information Systems Office administers the MSC use of social media. To guarantee a responsible administration of social networks, the Press and Communications Office of the Medical Sciences Campus, requires that each official institutional account have an administrator. The social media administrator is under the supervision of each school/ faculty. If a violation is identified, the Deans are notified and in charge of the appropriate actions, according to Protocol for the Use of Social Media.

Disclosure protocol to the external community
When a faculty member of the MSC makes a request for information disclosure, or the Press Office identifies information that requires divuluation, three factors are considered: context, relevance, and novelty. The Press Office establish contact with the applicant or vice versa. The press office proceeds to develop a media plan, whether a press conference, a press release, an interview, or participation in a campaign or initiative. The media plan is reviewed by the spokesmen and the Dean to make any suggestions or recommendations. Once the media plan is approved, both parties set a date to make the disclosure.
To maximize the reach of the publications and media efforts these are shared through the institutional social networks; Facebook, Twitter, and Instagram, and must follow the S2C2.6-Protocol for Acceptable Use of Social Media.

Criteria 2.7
As appropriate to its mission, services, or programs in place:

- to promote affordability and accessibility;
- to enable students to understand funding sources and options, value received for cost, and methods to make informed decisions about incurring debt;

The MSC Deanship of Students is an essential key to promote affordability and accessibility to prospect students and the MSC student community. The Deanship of Students website, https://de.rcm.upr.edu), provides useful and updated information in areas such as: academic programs, admissions requirements, online enrollment process, costs of credits, financial aid, and access to electronic resources. Specifically, the Students Right to Know page, https://rcm2.rcm.upr.edu/student-right-to-know/, contains the links to important information including educational costs, information regarding needs based financial aid including grants and scholarships.

The Office of Financial Aid/Student Assistance is responsible for helping students obtain funds needed to complete their academic programs. At their webpage, https://de.rcm.upr.edu/asistencia-
there is specific information regarding financial aid including
deadlines of FAFSA and student loans, scholarships, grants, tuition and fees, and other services needed by
students. Updated information regarding costs is contained at the MSC Catalog (S2C2.2-UPR-MSC-
CATALOG-2021-2024-Rev-June_21_2021) which is updated at least every six months.

Information regarding financial aid, scholarships, and grants is also included in the orientation sessions for
all incoming students.

Criteria 2.8
Compliance with all applicable federal, state, and Commission reporting policies, regulations, and
requirements to include reporting regarding:

- the full disclosure of information on institution-wide assessments, graduation, retention,
certification and licensure or licensing board pass rates;
- the institution’s compliance with the Commission’s Requirements of Affiliation;
- substantive changes affecting institutional mission, goals, programs, operations, sites, and
other material issues which must be disclosed in a timely and accurate fashion;
- the institution’s compliance with the Commission’s policies;

The MSC complies with all applicable regulations and requirements including full disclosure of information
on institution wide assessment, graduation, retention, certification, and licensure or licensing board pass rate through the Institutional Effectiveness Dashboard: https://coia.rcm.upr.edu/dashboard/. The
dashboard contains the following information: accreditation, board pass rate, selective student demand,
number of matriculates, occupation rate, international students, graduation rate, retention rate, research,
faculty numbers, work-study rates, scholarship, collaborative agreements, and service agreements. Links to
the Dashboard can be found at the webpages of the Deanship of Academic Affairs and the Office of
Institutional Planning, Research, and Assessment and at each of the six schools webpages.

The Office of Institutional Effectiveness is tasked with ensuring compliance with local and federal
regulations (https://daa.rcm.upr.edu/institutional-effectiveness). Verification of Compliance with
Accreditation-Relevant Federal Information demonstrates compliance with all applicable regulations
including credit hours, transfer of prior learning, and articulation agreements. (S2C2.8- Institutional
Federal Compliance Report)

The MSC fulfills all MSCHE requirements of affiliation and maintains ongoing compliance. In the last
years, there have been no substantive changes at MSC with respect to mission, goals, programs, operations,
sites, or any other material issue. The MSC has principles of ethics and integrity in its mission and all
operations and practices that impact students, faculty, and staff. It promotes these in its contracts and
commitments. It complies with the Commission’s policies (reference: https://daa.rcm.upr.edu/accreditation). Furthermore, it observes applicable federal and local requirements
and follows all related to MSC-UPR policies and procedures.

CRITERIA 2.9

Periodic assessment of ethics and integrity as evidenced in institutional policies, processes, practices,
and the manner in which these are implemented.

The MSC periodically evaluates the role of ethics and integrity in politics, practices, and institutional
leadership as mandated by law in Puerto Rico. As stated in Criteria 2.4, the University of Puerto Rico Board
of Governors, administrators, staff, and faculty must all abide by the ethical code established by the Law
on Government Ethics 2011 (S2C2.3-Law of Government Ethics). This law includes monitoring and
oversight by an MSC Institutional Ethics Committee (https://rcm2.rcm.upr.edu/etica-en-el-recinto/) mandated by the law. This law enforces, guides, and governs the Code of Ethics for the public services agencies and corporations, including the University of Puerto Rico. The Office of Government Ethics (http://www.eticapr.net/) provides governmental central monitoring to compliance with the law.

The Office of Government Ethics has the Center for the Development of Ethics (CDPE) which has the mission to prevent ethical misconduct through educational activities such as: Face-to-face training, Ethos Government Magazine, Alternate Methods "Online"; these include Series of Investigative Work in Progress and films, symposia, and conversations, among others. To monitor and assess MSC employee’s compliance with 20 hours of continuing education requirements, each School at the MSC has a designated person to track the number of hours completed by every employee and notifies them when they have not met the requirement, so they know and complete it.

In addition, reports from both the student’s and faculty’s ombudspersons and Title IX are used to evaluate if there is any ethical misconduct and act accordingly. Each school also has additional mechanisms implemented to evaluate compliance with ethics and integrity. For example, at the SDM continuously monitors the ethical conduct of the members of the academic community thru daily evaluations of student’s professional attitude (includes ethical conduct) and the availability of the report tool of any member of the academic community in case of inadequate behavior or conduct during work. Student’s claims are received by the Professor, Dean of Clinic and/or Assistant Dean for Students Affairs, employees’ claims are managed by the supervisor. Cases could be forwarded to the Academic Progress Committee for the application of the Professional and ethics code for students. The professional code applies to the members of the SDM even during official extracurricular activities.

At the SP, professional and ethical conduct is measured in all practice experiences (from the first to the fourth year) of the Doctor of Pharmacy Program by using the Behavioral Professionalism Assessment Form. Students with academic difficulties or that behave in an unethical or unprofessional manner are referred to the Evaluation, Promotion and Graduation Committee of the School of Pharmacy for intervention and recommendations. The SHP requires students to demonstrate ethical conduct according to their specific professional area but also those established in the Student Manual. Ethical conduct is expected to be observed by students in the classroom, with their classmates and professors. If there is any situation that requires an intervention, it is managed through the Deanship of Students Affairs and its professional advisor. If the identified situation directly affects student academic performance, it is submitted to the School's Promotion and Graduation Committee.

The GSPH emphasizes in the school community the importance of practicing ethical conduct in workplace and educational process. For students, the introduction to each course emphasizes the importance of academic integrity and professional conduct in and out of the classroom. Students are oriented on the actions that constitute a lack of academic integrity and sign a document certifying that they have received the orientation. At the SOM, students’ and faculty’s ethics and professionalism are evaluated at all courses and clerkships. Students also evaluate their clinical training sites and identify any issues with professionalism or mistreatment and have a published process of reporting mistreatment. When misconduct is identified, it is referred to the appropriate administrator based on the bylaws. The school also has a Learning Environment Committee that evaluates all survey results regarding ethical conduct within the learning environments and acts on results such as implementing training on how to prevent mistreatment to students, faculty, and residents.

Conclusion:

The standard was met.
1. The MSC has clearly stated policies that encompass all operational areas and that guarantee the institution’s ethical and professional integrity in matters pertaining to students, employees, and the members of the community it serves.
2. There are clear and fair grievance procedures for staff, faculty and students.
3. The institution demonstrates its adherence to ethical standards and its own stated policies and procedures, providing support for academic and intellectual freedom.
4. The policies regarding the hiring, evaluation, promotion, disciplining, and separation of employees are clearly defined and are regulated by the MSC.
5. The MSC of the University of Puerto Rico is committed to transparency and effective communication with the university community.
6. The Press Office identifies information that requires release, considering three factors—context, relevance, and novelty—and how they align with the extant media plan and conform with the regulations that govern UPR communications.

Recommendations or Areas for Improvement:

1. Ombudsperson office annual reports: Even when the data provided present a broad profile of inquiries and complaints received by the Office of the Faculty Ombudsperson, specific information regarding follow-up actions and/or final outcomes in some categories of inquiries/complaints could provide a better view of the efforts made by the faculty ombudsperson. Further efforts should be made to provide specific data regarding how inquiries and complaints were resolved.
2. Diversity Goals: Although diversity is part of the MSC values and is supported through policies, processes, offices, and activities, with the purpose of further supporting MSC diversity, specific goals will be included as part of the 2022-2027 Strategic Plan.
X. STANDARD III: Design and Delivery of the Student Learning Experience

An institution provides students with learning experiences that are characterized by rigor and coherence at all program, certificate, and degree levels, regardless of instructional modality. All learning experiences, regardless of modality, program pace/schedule, level, and setting are consistent with higher education expectations.

CRITERIA 3.1 (Requirement of Affiliation 9)
An accredited institution possesses and demonstrates the following attributes or activities: Certificate, undergraduate, graduate, and/or professional programs leading to a degree or other recognized higher education credential, of a length appropriate to the objectives of the degree or other credential, designed to foster a coherent student learning experience and to promote synthesis of learning.

The MSC, as a specialized health sciences institution of higher education, offers academic programs that are rigorous, coherent, with high quality, that demonstrate excellence, promote the synthesis of learning, and are well recognized by the community. All the degree-granting programs subject to accreditation are accredited.

As described in the MSC Catalog (S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021), the MSC offers 65 academic programs at a diversity of academic levels, including first professional doctoral degrees (MD, DMD, PharmD, AuD, and DPT), professional (DrPH) and philosophical (PhD) doctorates, and postdoctoral master’s degrees and certificates, as well as master’s degrees, post-baccalaureate certificates, and baccalaureate and associate degrees. These programs cover a wide variety of disciplines and areas of knowledge in the health sciences, some of which are unique to Puerto Rico. They are offered by six schools: the School of Dental Medicine (SDM), the School of Health Professions (SHP), the School of Medicine (SOM), the School of Nursing (SON), the School of Pharmacy (SP), and the Graduate School of Public Health (GSPH). In addition, two completely online programs granting a certificate of professional study (maternal and child health and data science) were incorporated during AY 2019-2020 upon MSC’s being accredited for distance education (granted by the MSCH). The MSC also offers accredited residency programs in medicine, dental medicine, and pharmacy. All the educational programs offered by the MSC are licensed by the Board of Postsecondary Institutions (JIPS, the abbreviation in Spanish) of Puerto Rico.

The MSC is the only academic institution in Puerto Rico that offers programs leading to a Doctor of Philosophy (PhD) degrees in pharmaceutical sciences, anatomy and neurobiology, biochemistry, microbiology and zoology, pharmacology and toxicology, and physiology. In addition, doctoral degree subspecialties (tracks) in neuroscience, virology, and molecular genetics are provided. Moreover, the MSC offers a combined MD/PhD degree program in collaboration with the Mayo Clinic, the University of Texas MD Anderson Cancer Center, and the Yale University School of Medicine and Graduate School of Arts and Sciences. The Biomedical Sciences Graduate Program (BSGP) co-sponsors an intercampus PhD program with the Department of Biology at the Rio Piedras campus.

Other unique programs offered at the MSC and aimed to prepare professionals and researchers in the health area include the following:

- Associate Degree in Ophthalmic Technology
- Bachelor’s in Health Education
- Bachelor’s in Nuclear Medicine Technology
- Post-Bachelor’s Certificate in Cytotechnology
- Master of Science in Occupational Therapy
• Master of Science in Clinical Laboratory
• Master of Health Administration Information
• Master of Science in Pharmacy
• Post-Doctoral Certificate in Clinical and Translational Research
• Doctor of Audiology
• Doctor of Physical Therapy
• Doctor of Nursing Science
• Doctor of Philosophy in Pharmaceutical Sciences
• Doctor of Public Health, specializing in health systems and management
• Doctor of Public Health, specializing in social determinants of health
• Doctor of Public Health, specializing in environmental health
• Doctor of Dental Medicine, including six post-doctoral certificates in dental medicine

The MSC also offers non-degree granting programs. The SOM offers 20 residency programs and 18 subspecialties, all properly accredited by the ACGME. Many of these specialties/subspecialties are unique offerings on the island. Among them are urology, orthopedic surgery, pediatric neurology, adult neurology, pediatric intensive care, neonatal/perinatal medicine, ophthalmology, and anesthesiology. The SP offers two residency programs, as well, and currently has the only accredited pharmacy residency program on the island.

The UPR has proper guidelines for the creation of academic programs that describe the criteria for designing coherent learning experiences that are of appropriate lengths according to their objectives. (S3C3.1 - Academic Program Development Policy). To ensure that programs are rigorous, appropriate in length to meet objectives, coherent, and promote synthesis of learning the UPR requires that all programs be continuously monitored and evaluated through accreditation (S3C3.1- UPR Policy on Program Accreditation) or through the continuous monitoring of educational effectiveness every 5 years (S3C3.1- BoG #45 Programmatic Assessment Requirement). The MSC has forty-seven degree-granting academic programs subjected to accreditation (S3C3.1- MSC ACCREDITATIONS July 2021), all currently accredited by their corresponding accrediting agency. The Radiologic Technology Program is in Probation due to low first pass rate on the boards and consequently, low job placement as these graduates cannot obtain employment as their law of practice does not allow for the provision of a temporary license to a candidate in order to seek employment while studying for the board. The program is working on an action plan, already established and implemented, to remediate outcomes, with a progress report pending for January 2022 and a For Cause extension until February 2024 due to mitigating circumstances, one of which is that, due to the COVID-19 Pandemic, the certification examination was not offered for 18 months making it impossible for the program to show improvement in board pass rate (S3C3.1- JRCERT Letter of Probation; S3.C3.1- JRCET For Cause Extension; S3C3.1- Radiologic Technology Program Action Plan). This program continuously evaluates its curriculum based on national competencies, as described on the Action Plan. The program will undergo a curriculum review this AY with the purpose of ensuring all contents related to the local board examination are included and deciding if the program should be converted into a bachelor’s degree. This last is being considered because more than 50% of graduates continue studies towards a Bachelor’s Degree in Radiologic Technology.

Accrediting agencies closely monitor the curricular content of such programs to guarantee their compliance with standards of excellence established for the disciplines to which they belong. Thus, the UPR and MSC policies directs all academic programs to be systematically evaluated; all changes that are made must correspond to assessment findings, including graduate profiles, competencies, objectives, course contents, and curriculum sequences, among others.
Most MSC programs incorporate capstone courses, projects, objective structured clinical examinations (OSCEs), and/or the creation of professional portfolios that promote synthesis of learning. Through them, students critically evaluate available research evidence and learn how to use research findings and other scientific evidence to solve clinical problems. Moreover, through competency examinations and portfolio development, students can undergo self-assessment of their achievement of program competencies thus developing life-long learning skills. Some examples are as follows:

- At the SON, through the course Introduction to Research and Evidence-Based Practice (ENFE 4075), undergraduate students learn about the elements of the research process and the use of best evidence in nursing practice. They critically evaluate research findings and learn how to use them, along with other scientific evidence, to solve clinical problems. During the course, students establish a problem statement, formulate a PICOT question, synthesize literature, examine the level of evidence, and conclude with practice implications and recommendations. Graduate students (Master of Science and Nurse Anesthesia programs) conduct evidence-based practice (EBP) projects in the clinical track courses. Some projects include an implementation phase after the analysis of the scientific evidence. The students recruit participants, implement the project or intervention, collect, and analyze data, and draw conclusions to support the best clinical practices.

- In the Speech–Language Pathology program seminar course, the students integrate the knowledge and skills acquired in previous courses by developing a capstone project. Students work on their capstone projects with the aim of solving a problem using the EBP framework. Presentations of case studies are used, and students formulate the key question(s), search educational and health-related databases, and select and appraise available evidence. At the end of the course, the students apply the evidence in a clinical context: Each must generate a written document and an oral presentation.

- Professional portfolios are another example of an assessment tool to assess the achievement of program competencies. For example, at the SHP, students of the Cytotechnology program develop a portfolio during their academic years. The portfolio includes a self-assessment and a reflection of their performance, their ability to think critically, and their communication skills. Likewise, dental medicine students must develop a portfolio that includes a personal reflection on the development of 23 competencies, the diagnoses, and treatments of three cases, the student’s self-assessment of his or her performance on those three cases, an oral presentation, and a research component. In the Doctor of Pharmacy program, students work on their portfolios throughout the four academic years, collecting evidence for the 10 abilities required in the curriculum. Portfolios are evaluated by the faculty twice each academic year. A holistic reflection is required with each portfolio. The student reflects on his or her performance, strengths, and weaknesses and identifies areas that need improvement. Students set goals and implement procedures for goal attainment. Because portfolios are worked on throughout the four years of the university experience, students are accorded multiple opportunities to practice self-reflection and to achieve higher degrees of self-awareness and learning synthesis, especially towards the end of the program.

- As a graduation requirement, the MD program requires a clinical practice examination (CPX). The CPX is an OSCE that aims to evaluate the clinical skills that each student has acquired. It consists of eight clinical encounters in which fourth-year medical students must demonstrate their abilities to gather and interpret clinical patient data, develop differential diagnoses and management plans, interpret imaging studies and basic laboratory results, educate their patients, develop patient-centered approaches, and demonstrate communication skills that are appropriate for their level of medical education. In addition, fourth-year medical students must demonstrate their ability to work as part of a healthcare team while managing a patient experiencing a sudden clinical deterioration.
CRITERIA 3.2 (Requirement of Affiliations 9 and 15)
An accredited institution possesses and demonstrates the following attributes or activities: Student learning experiences that are designed, delivered, and assessed by faculty (full-time or part-time) and/or other appropriate professionals who are

a. rigorous and effective in teaching, assessment of student learning and scholarly inquiry, and service, as appropriate to the institution’s mission, goals, and policies;
b. qualified for the positions they hold and the work they do;
c. sufficient in number;
d. provided with and utilize sufficient opportunities, resources, and support for professional growth and innovation;
e. reviewed regularly and equitably based on written, disseminated, clear, and fair criteria, expectations, policies, and procedures.

Student learning experiences are designed, delivered, and assessed by competent and qualified faculty, which are rigorous and effective, sufficient in number, active in professional development and reviewed regularly and equitably. Currently, the MSC faculty holds degrees and credentials in a wide range of health disciplines and specializations, providing a strong foundation for the teaching, service, and research activities carried out by each school. As of July 2021, the MSC had 1,112 faculty members: 633 (56.9%) full-time and 479 (43.1%) part-time. Fifty-five percent of the faculty members are female. Faculty with tenured or tenure-track positions account for a 31.1%. The academic rank of professor is held by 37.2%; that of associate professor, 18.8%; assistant professor, 41.8%; and instructor, 2.2%. Of the 1,112 faculty appointments, 663 (59.6%) are in the School of Medicine, 151 (13.6%) are in the School of Dental Medicine, 80 (7.2%) are in the School of Health Professions, 81 (7.3%) are in the Graduate School of Public Health, 37 (3.3%) are in the School of Pharmacy, 40 (3.6%) are in the School of Nursing, and 60 (5.4%) are in other divisions. As evidenced by the student/faculty ratio of each school, there is a sufficient number of faculty to effectively deliver and evaluate the academic programs.

Table 2. Student/Faculty Ratios by School

<table>
<thead>
<tr>
<th>School</th>
<th>Student/Faculty Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>1/1(*)</td>
</tr>
<tr>
<td>Dental Medicine</td>
<td>1.5/1</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>5.3/1</td>
</tr>
<tr>
<td>Public Health</td>
<td>5.2/1</td>
</tr>
<tr>
<td>Health Professions</td>
<td>5.5/1</td>
</tr>
<tr>
<td>Nursing</td>
<td>6.4/1</td>
</tr>
</tbody>
</table>

Student/faculty ratios = Total number students/total number faculty (total students and faculty per school as of August 2020). Data are from the Institutional Planning, Research, and Assessment Office report from October 2020.

*Number of faculty members is higher than number of students; number rounded to 1.

As described in Articles 43, 43, and 47 of the UPR General Bylaws (S2C2.1 - UPR General Bylaws), the MSC has established procedures based on merit and academic excellence for the recruitment of qualified faculty and have policies for faculty evaluation, promotion, and tenure. The following criteria are considered in the appointment of academic personnel: 1) quality of the applicant’s academic work, 2) degrees and other credentials, 3) areas of expertise, 4) teaching experience and application of knowledge in a particular area, 5) number and quality of peer-reviewed publications, 6) that the individual is in basic agreement with the philosophy and objectives of the university, and 7) that the individual has the ability to conduct scientific research and/or creative work. The MSC grants the academic ranks of instructor, assistant
professor, associate professor, and professor, the equivalent levels for the rank of researcher, and four levels (I–IV) for the ranks of librarian, counselor, social worker, and psychologist.

The MSC evaluation system is described in the S2C2.5-MSC Faculty Evaluation Instructions 2016. The system is based on a meticulous analysis of the functions and tasks performed by the faculty in diverse positions and categories: professors, researchers, professional librarians, professional counselors, social workers, psychologists, and faculty who are in administrative positions. Faculty evaluations by peers and immediate supervisors are generally conducted at the program and department levels within each school; students provide faculty and course evaluations, as well. During AY 2017-2018 through AY 2019-2020, 135 faculty members were promoted and 31 received tenure. In addition, during that period, nine faculty members received financial aid to pursue advanced degrees.

The faculty are provided with multiple opportunities for professional development and support. The Faculty Resource Network, RCM Online Division, the Research Centers in Minority Institutions (RCMI) program, the Office for Research and Development, the Title V Cooperative Project, and the individual schools offer faculty development activities. Furthermore, in compliance with local laws, all health professionals must complete a specified number of continued education (CE) credits, yearly, to renew professional licenses. Faculty members are encouraged to attend CE activities. Department chairs and deans also recommend that faculty representatives attend specific activities, according to institutional and individual academic goals. The RCM Online Division educates, guides, and assists the faculty in the best educational technologies and practices for planning, creating, offering, and evaluating online courses. During AY 2019-2020, 10 activities were offered, receiving a total attendance of 737.

According to the MSC’s annual reports (AY 2017-2018, AY 2018-2019, and AY 2019-2020), the schools and other divisions offered a total of 407 faculty development activities, for a total attendance of 4,340. In the AY 2017-2018, faculty members traveled for academic purposes on 393 occasions. The number of faculty trips decreased to 326 in AY 2018-2019 and to 265 for 2019-2020.

Data from the annual reports are a strong indication of the level of faculty scholarship. In AY 2017-2018, faculty members presented the results of their research on 473 occasions at local, national, and international forums. In AY 2018-2019 and 2019-2020 they presented 370 and 411 times accordingly. For both academic years, there were a total of 501 peer-reviewed publications.

CRITERIA 3.3
An accredited institution possesses and demonstrates the following attributes or activities: Academic programs of study that are clearly and accurately described in official publications of the institution in a way that students are able to understand and follow degree and program requirements and expected time to completion.

All MSC academic programs of study are clearly and accurately described in the MSC Catalog (S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021). MSC webpage, and each school’s and program’s electronic sites and internal documents. Each program’s information is also shared through official MSC Facebook, Twitter, and Instagram accounts. The MSC Catalog is available to all students and to any member of the public who is interested in acquiring information about the campus offerings. The catalog is available at https://daa.rcm.upr.edu/wp-content/uploads/sites/12/2021/06/UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021.pdf. It is easily accessible on the main webpage of the MSC at the link labeled “Academia.” The MSC Catalog is an official publication; in it, students find accurate and detailed descriptions of the general and specific admission requirements, registration information, academic standing, promotion and graduation procedures, and the requirements for all the MSC degree granting academic programs. The catalog also provides information on academic policies and governance, academic
conduct, the grading system and units of instruction, attendance and evaluation procedures, excused absences, and the completion of academic activities, among others.

The MSC Catalog has a specific section for each of the six MSC schools. Each schools’ section includes that school’s mission and goals, the specific degree programs offered, detailed admission and graduation requirements for each academic program, and the specific curriculum/study programs required for degree completion. Each study program/curriculum is described, including the pre-/co-requisites for taking a given course, the total number of hours or semester/trimester credit hours, and the hours or credit hours by course. Each study program is described in terms of its accreditation status (the accrediting agency is identified, as well), licensure requirements, and other information that is specific to the program. A list of the faculty members of each school, by office or department, is also included in the MSC Catalog. The Registrar’s Manual (S3C3.3- MSC Registrars Manual) includes the minimum and maximum completion times for all the MSC programs.

In addition to the MSC Catalog, the campus publishes official academic program information on the campus’/school’s official webpages. The MSC: https://rcm2.rcm.upr.edu/; the School of Nursing: https://enfermeria.rcm.upr.edu/; the School of Pharmacy: https://farmacia.rcm.upr.edu/; the School of Medicine: https://md.rcm.upr.edu/; the School of Dental Medicine: https://dental.rcm.upr.edu/; the School of Health Professions: https://eps.rcm.upr.edu/; and the Graduate School of Public Health: https://sp.rcm.upr.edu/. The MSC webpages contribute significantly to communication within and outside of the institution. All the school/program webpages include specific information related to program admission, expected time to degree completion, curriculum study programs, and graduation requirements, and more. Students also have access to information regarding support services they may need to complete their education.

CRITERIA 3.4 (Requirement of Affiliation 9)
An accredited institution possesses and demonstrates the following attributes or activities: Sufficient learning opportunities and resources to support both the institution’s programs of study and students’ academic progress.

The MSC’s mission of forming health professionals is accomplished with a wide variety of learning opportunities, all of which are focused on professional competency and skill development. Learning opportunities are designed and implemented based on specific program competencies and desired outcomes. To enhance student learning, the educational program curriculums at the MSC rely on a variety of courses (didactic, seminar, laboratory, clinical, practicum/internship, and research). These courses furnish a wide variety of learning opportunities based on established educational strategies and models (see Table 3, below).

Table 3. Learning Opportunities Provided & Educational Strategies Used by the MSC Schools

<table>
<thead>
<tr>
<th>Learning Opportunities/Educational Strategies</th>
<th>Public Health</th>
<th>Medicine</th>
<th>Dental Medicine</th>
<th>Nursing</th>
<th>Pharmacy</th>
<th>Health Professions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lectures, conferences, seminars</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Distance learning lectures, modules, and webinars</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Multimedia-assisted learning and projects (videos etc.)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
Learning Opportunities/Educational Strategies

<table>
<thead>
<tr>
<th></th>
<th>Public Health</th>
<th>Medicine</th>
<th>Dental Medicine</th>
<th>Nursing</th>
<th>Pharmacy</th>
<th>Health Professions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent study and learning, critical reading</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Group discussions, presentations, and projects</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Standardized patient simulations/practice/role-play</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Case-study discussions/case-based learning</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Supervised clinical practice</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Research projects</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Portfolios</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Interprofessional activities</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Skills and simulation laboratory</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Information systems, research or wet laboratory</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community and field experiences</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Team-based learning</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problem-based learning</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Service-learning activities (clinical and community)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Service learning is another cornerstone of the learning opportunities to be found at the MSC; this learning strategy combines classroom learning with community service. The MSC has a long tradition of community partnerships and service. Students further their learning experience through their participation in community clinics, shelters for the homeless, service programs in communities, internships in community-based organizations, and health fairs for the community, among other activities. For example, the SDM provides students with supervised clinical practice experiences in clinics at the MSC and in the community. At the GSPH, collaborative partnerships are established with community-based organizations; these partnerships allow student learners to take part in applied projects, such as community health assessments, health education program planning and implementation, policy development, and advocacy.

Doctor of Pharmacy students are introduced to service learning during the course entitled Health Promotion and Disease Prevention, which is offered during the first year. Further development is achieved through the course titled Service-Learning Practicum; for this course, second-year pharmacy students visit community organizations, evaluate community needs, and implement a service plan for a specific community, in collaboration with the participating organization. The SON has a collaborative agreement with the public housing administration of the municipality of San Juan (the Manuel A. Pérez Center for Integral Health Promotion and Maintenance). The center serves as a practice area for students who are learning to promote and maintain health and prevent disease among the residents of the housing projects and adjacent areas. The service-learning activities (e.g., health fairs, educational and disease-screening activities) promote interprofessional collaboration with the students and faculty of other MSC schools, as well as with government and non-government entities.

Throughout their four years of study, medical students (SOM) have various opportunities to participate in both elective and required service-learning activities. First-year students are exposed to the basic principles of service learning during the required course activity known as Community Visits, which is part of the course on human development. Additionally, during their final year of study, students must take a course by the name of Public Health III. Students are assigned to a community-based organization, and then they,
along with participants and staff, identify a relevant problem and analyze it from the point of view of the determinants of health, health policy, and health justice. The students and community representatives, as collective protagonists, propose and implement alternatives and create a sustainable resource for the organization to advance health equity and social justice. The Association of American Medical Colleges Awarded the Spencer Foreman Award for Service Learning to the SOM in 2018 as a result of these activities.

The Speech–Language Pathology program at the SHP provides students with supervised clinical practice experience in the community through the Interdisciplinary Project of Service Excellence (PIES, using its Spanish abbreviation). In PIES, the students provide services to children with disabilities (referred to the SHP by the Puerto Rico Department of Education). In the community, the students screen children, and adults to identify speech and/or language disorders. For those in whom a disorder is identified and who do not have the necessary financial resources, therapy services are provided free of charge. Additionally, during the summer session, the Occupational Therapy program offers the course TEOC 6501: Fieldwork Experience Level 1A. In this course, the program establishes a collaborative agreement with community organizations, which allows students to evaluate community needs and implement a plan to promote and improve occupational performance and the quality of life and health of the community.

Resources:
The MSC supports student learning opportunities with technology and information system infrastructures and a network of collaborations with community-based organizations and institutions, MSC clinical services, and research and training projects. The MSC information technology infrastructure is central to student learning opportunities. Students are required to have an institutional email account and access to a computer and the internet. The Schools of Medicine, Dental Medicine, and Pharmacy all use e-books. Blackboard Ultra is available and used by most of the programs on the campus. Academic programs also provide printed and online course information and online access to educational materials prepared by members of the faculty. All the schools have information-technology facilities for their students and faculty in order to support their particular curricula and educational activities. To enhance IT resources on campus, the institution has undertaken several collaborative projects. Some are based at the Conrado F. Asenjo Library, while some are part of the Title V Cooperative Project. The Conrado F. Asenjo Library is the only academic library in the UPR system that specializes in the health sciences. To see more about the Library resources please refer to Standard 6. To maximize distance learning, the UPR is developing a strategic plan for distance learning which is right now in a draft form (S3C3.4- Draft UPR Distance Learning Strategic Plan)

The Title V Cooperative Project (specializing in clinical and translational research [CTR], with an interdisciplinary and entrepreneurial approach for students in and faculty who are part of undergraduate programs in Puerto Rico) serves, primarily, undergraduate students in Puerto Rico who are in health sciences and science programs, including the 329 undergraduate students who belong to the School of Nursing and the School of Health Professions. The institution was awarded $3,000,000 for the project, which began in 2020 and will run through 2025. One of the main components is the participation of students, teachers, and health professionals in a training program in clinical and translational research that will provide them with the opportunity to carry out pilot projects and a Science Entrepreneurship program.

Support Services:
At the campus, school, and program levels, the MSC has other resources and activities that support learning opportunities. The MSC has a teaching and research assistant program that provides stipends to student learners and allows them to focus on their academic pursuits. This program sponsors integrative learning experiences and thesis work. Each year, the campus holds a research and education forum; students participate and present abstracts and papers, which activities help them to increase their abilities in
quantitative and scientific reasoning and written and oral communication and allow them to apply their knowledge.

Student support services include academic counseling, personal counseling, career counseling, mentoring, and tutoring. At the MSC level, the Counseling Center (CECSI) has psychologists and licensed counselors to provide academic counseling to students including time management, stress management, and study skills. Students are referred to outside psychologists for further evaluation of emotional, psychiatric, or neurodevelopmental conditions if they choose to do so or are evaluated and treated at the Center. The Center is free of cost. For more information, please refer to Standard 4.

Schools also have support services including tutoring and academic counseling activities that encourage student achievement and mentoring programs to help students progress through their careers. For example, the SOM has an Academic Counseling System that includes early identification of at-risk students by faculty and by the Monitoring Committees which meet monthly. Once a student is identified, they are referred to the school full-time psychologist or full-time social worker or to the CESI advisors to receive the needed support (students may choose). Students have access to tutoring services and are also assigned a mentor that will provide further guidance. The school has also implemented required academic counseling sessions where all students are exposed to study skills, time management, stress management, and wellness activities. The SDM has a Student Assessment Committee that is responsible for periodic monitoring of students’ academic performance to identify those with academic problems and refer them for tutoring (through the Teaching Assistance program tutoring services) or academic counseling, mentoring, and advising. The school has a counseling office staffed by a full-time licensed psychologist and one full-time counselor. They offer support to students. Students may also be referred to the campus Center for Counseling and Psychological Services (CECSI), the Psychiatric clinics of the School of Medicine (9th floor), or other off-campus mental health professionals. The SP provides tutoring upon students’ request, coordinated by the school’s full-time counselor with the Rho Chi Honor Society students. At-risk students are referred to the school’s counselor by the Evaluation, Promotion and Graduation Committee. Students are referred to CECSI services or external services if preferred by students. For more specific information please refer to Standard 4.

CRITERIA 3.5
An accredited institution possesses and demonstrates the following attributes or activities: At institutions that offer undergraduate education, a general education program, free standing or integrated into academic disciplines, that

- offers a sufficient scope to draw students into new areas of intellectual experience, expanding their cultural and global awareness and cultural sensitivity, and preparing them to make well-reasoned judgments outside as well as within their academic field;
- offers a curriculum designed so that students acquire and demonstrate essential skills including at least oral and written communication, scientific and quantitative reasoning, critical analysis and reasoning, technological competency, and information literacy. Consistent with mission, the general education program also includes the study of values, ethics, and diverse perspectives; and
- in non-US institutions that do not include general education, provides evidence that students can demonstrate general education skills.

This criterion does not apply to the MSC. The MSC admits students after they have completed their bachelor’s degrees or upon completion of approximately two years of college education. Thus, by the time they are admitted to the campus, students already have a background in general education.
CRITERIA 3.6
An accredited institution possesses and demonstrates the following attributes or activities: In institutions that offer graduate and professional education, opportunities for the development of research, scholarship, and independent thinking, provided by faculty and/or other professionals with credentials appropriate to graduate-level curricula.

Research development is one of the main priorities of the MSC, as set forth in the institution’s mission statement, Pillar 2 of the Strategic Plan, and Institutional Priority 2. Research and scholarship are taken into consideration for faculty hiring, evaluation, promotion, and tenure. The MSC has a cadre of faculty with the appropriate credentials to teach and train students. Research courses, projects mentored by faculty members, internships, and participation as part of a research team in collaborative research projects, among other activities, engage students in experiences that foster skills involving critical inquiry, independent thinking, and scholarly research. Dissemination activities at local, national, and international conferences are also ways that students increase their abilities in terms of quantitative and scientific reasoning, written and oral communication, and applying their knowledge. The MSC also offers teaching and research assistantships, which are funded by institutional budget allocations and distributed based primarily on academic merit rather than financial need. Decisions regarding teaching and research assistantships are made by a standing committee chaired by the MSC Associate Dean for Academic Affairs.

The Deanship of Research (https://research.rcm.upr.edu/) provides the structure for the development of successful proposals that will enable research opportunities and secure additional funding for the institution. Its mission is to support researchers in growing and diversifying research funding, to increase the competitiveness of investigators for extramural research support, to develop and implement research policies to protect and enhance resources in coordination with the UPR Vice Presidency of Research and Technology, to optimize administrative support for research, ensuring efficient and accountable administration, and to promote a research culture and environment within the MSC. The MSC keeps a directory of active investigators (http://rcmi.rcm.upr.edu/?q=directory) through the RCMI program that is titled Research Directory. This directory is a web-based database containing information about the active investigators in the different fields of research at UPRMSC.

The MSC is the leading institution conducting biomedical research in Puerto Rico. MSC investigators have developed interdisciplinary and transdisciplinary research initiatives and projects in basic science, clinical, translational and population (epidemiological) research. Based on the projects and programs receiving extramural funding, the MSC has identified several research clusters: cancer, neurobiology, HIV/AIDS, drug and alcohol use, virology, and immunology. Moreover, natural disasters and the COVID-19 Pandemic have provided the opportunity to develop new research initiatives, outside and within the clusters, to understand the how these occurrences have affected Hispanic/Puerto Rican populations.

Students at the MSC have ample opportunity for the development of research, scholarship, and independent thinking. There are more than 75 research-related courses offered at the MSC (S3C3.6- Research Courses for Students). More than 700 students register annually for a research course. All the MSC schools require training in research, a research project and/or competency in evaluating the scientific literature or scientific evidence.

Other important information related to student and faculty research and scholarship is as follows:

- List of student research projects, awards, publications, and presentations at local, national, and international forums.

A total of 1,064 graduate students (unduplicated) participated in research at the MSC during the 2017-2018 academic year, and 869 participated in AY 2018-2019. Among them were students
enrolled in research courses, recipients of thesis or research assistantships (with stipends) in research centers or programs, and students who participated in research projects.

- **Data on students receiving research-related financial aid at the MSC during the period under study.**
  
  There were 185 students who received thesis or research assistantships during AY 2017-2018, and 176 students received such aid in AY 2018-2019.

  Six students from the School of Medicine received stipends to work on research projects in AY 2017-2018 and AY 2018-2019 at the PR Center for Environmental Neuroscience and in the Partnership in Research and Education program that is attached to the MSC Institute of Neurobiology.

- **MBRS RISE (Research Initiative for Scientific Enhancement) program.** The MBRS RISE program website: http://mbrs-rise.rcm.upr.edu This program aims to enhance the research environment at minority-serving institutions. The overall goal is to increase the interest, skills, and competitiveness of students and faculty in pursuit of biomedical research careers.

- **MBRS SCORE (Support of Competitive Research).** MBRS SCORE program website: http://mbrs-score.rcm.upr.edu/ MBRS SCORE program awards support the research endeavors of individual faculty members and strengthens the institution’s biomedical research capabilities, thus providing opportunities for student research and training.

- **Research Centers in Minority Institutions (RCMI).** RCMI program website: http://rcmi.rcm.upr.edu/ The RCMI mission is to contribute to the national research infrastructure and increase the capacity for research in the health sciences by supporting basic, behavioral, and clinical studies in health disparities that affect minority populations.
  - Research impact: http://rcmi.rcm.upr.edu/?q=rimpact

- **Title V Cooperative Project/RCM-UCC.** Title V Cooperative Project/RCM-UCC website: https://proyectotitulo5rcmucc.education/ The Title V Cooperative Project/RCM-UCC is a joint initiative between the MSC of the University of Puerto Rico and the Universidad Central del Caribe (UCC). It is sponsored by the U.S. Department of Education under the Developing Hispanic-Serving Institutions Title V Program. This project aims to foster scientific curiosity and provide new opportunities in clinical and translational research (CTR) for the undergraduate students and faculty of the MSC and UCC during their training as health professionals. In addition to incorporating students and graduate faculty in peer mentoring, this project allows the faculty and students from the two previously identified institutions of higher education in Puerto Rico, and who are interested in CTR, to work collaboratively.

- **Research Centers.** Website: https://rcm2.rcm.upr.edu/investigacion/ UPRMSC promotes a research culture by partnering with programs/units to enhance research education across all the MSC schools. Specifically, the institution is committed to supporting broad research efforts, with interdisciplinary emphasis in the biomedical, biopsychosocial, clinical, and educational areas.

  The following is a list of research support programs or units currently in place that contribute to strengthening research capacity at the MSC and opportunity to students:

  1. Center for Environmental and Toxicological Research
  2. Caribbean Primate Research Center
  3. Puerto Rico Clinical and Translational Research Consortium
Thus, the MSC provides ample opportunity for students to develop research skills, scholarship, and independent thinking by being taught, mentored, and supervised by faculty with the appropriate credentials to do so.

**CRITERIA 3.7**

An accredited institution possesses and demonstrates the following attributes or activities: Adequate and appropriate institutional review and approval on any student learning opportunities designed, delivered, or assessed by third-party providers.

This criterion does not apply to the MSC.

**CRITERIA 3.8 (Requirements of Affiliation 8 and 10)**

An accredited institution possesses and demonstrates the following attributes or activities: Periodic assessment of the effectiveness of programs providing student learning opportunities.

As stated in Criteria 3.1, the UPR has strict policies for programmatic assessment. The university also provides a guideline for evaluation of programs that are not accredited (S3C3.8- Guide for Program Assessment). The institution has an ongoing process for revising its programs in terms of their depth and rigor ensuring the periodic assessment of all student-learning opportunities. This process ensures that academic programs are structured in such a way that they provide students with the necessary experiences at the levels required to meet the academic rigor of the degrees offered. Each school has a systematic plan of evaluation. The schools’ and programs’ assessment plans are closely tied to the competencies expected of graduates. Programs use assessment results for the continuous improvement of their academic offerings. Examples of actions taken because of the different schools’ programmatic assessment processes is briefly described below.

In response to the withdrawal of accreditation of the Neurosurgery Residency Program and the Probation status of the Radiologic Technology Program the MSC and other programs in other units of the UPR, the UPR mandated a restructuring of accreditation oversight by the Deanship of Academic Affairs of the different campuses (S3C3.8- Mandate for Accreditation Offices Restructuring). To this end, the MSC restructured the Accreditation Division of the Deanship of Academic Affairs. From July 1, 2021, onward, all programs have been reporting to the deanship all communication with accrediting agencies. All submitted a status of accreditation report (S3C3.8- Status of Accreditations' Report), and this will continue to be requested yearly. In addition, a risk assessment was requested from programs that have
pending accreditation visits during this academic year with the purpose of implementing the necessary changes to be in compliance with accreditation requirements (S3C3.8- Example of Email Requesting a Risk Assessment).

**School of Nursing**

The SON has a systematic process to determine the effectiveness of its programs and learning outcomes. In November 2016, the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) placed the program on “monitoring” status because the certification exam pass rate was below the 80% required. The program implemented an action plan that included the revision of the admission policies, curriculum, and student progression policies and increased support services to include the use of ExamSoft and APEX Anesthesia Review. In November 2019, the program was removed from monitoring as the certification examination scores were at or above the minimum COA pass rate.

**School of Pharmacy**

The SP assesses the attainment of educational outcomes through the implementation of its curriculum outcomes assessment plan (COAP). In the Doctor of Pharmacy program, the school employs two assessment tools to measure critical thinking skills: the California Critical Thinking Disposition Inventory (CCTDI) and the Health Sciences Reasoning Test (HSRT). COAP baseline results for first-year students show that 44% of the students rated below favorable in the category of truth-seeking. Regarding the category of systematization, 60% of the students rated below favorable, as well. As a result, activities were incorporated into the P1 and P2 integrative seminars to reinforce critical thinking skills. Results from the graduated class of 2019 show a statistically significant increase in willingness to think more critically compared to baseline results within the same class. Regarding HSRT results (“strength in using reasoning to form reflective judgments about what to believe or what to do”), the mean overall score for the class showed a strong tendency for academic success and career development.

**School of Dental Medicine**

Every year, the SDM uses an outcomes assessment plan. One of the outcome measures evaluated is the percentage of students who pass the National Board Dental Examination, part I (NBDE I), on their first attempt. The expected result is that 80% of the school’s students would have passed this exam on the first attempt. However, when the school assessed student performance on the NBDE I, they, the school, observed a decline in the NBDE I, first-time passing rate for the 2014 and 2015 graduating classes.

The school faculty implemented several measures to improve results. These measures included the following:

1. Students were presented with strategies for preparing for the boards.
2. New Dental Decks were made available to the students.
3. The biomedical sciences faculty met and assessed the results of the students’ overall performance on the NBDE I to establish new strategies for improvement. They discussed plans to ensure that the content and format evaluations of the courses would be like those presented in the boards. To that end, the school distributed NBDE I review materials to the biomedical faculty.
4. Students were required to purchase their textbooks in an electronic format (Vital Source Library).
5. The school implemented the use of the electronic platforms Blackboard and ExamSoft.
6. With the goal of increasing the knowledge required for the biomedical courses, the school recommended that the number of hours for some of the courses be increased.

The class of 2018 met the outcome measure: Eighty percent of the students passed the NBDE I on their first attempt.
School of Medicine
The SOM MD Program has a competency-based curriculum and thus evaluates student outcomes based on a competency framework. The faculty of the SOM observed a decreasing trend in the performance of the medical students during the USMLE Step 2 Clinical Skills (CS) exam. The Step 2 CS exam was used as one of the outcome measures of the educational objectives of the MD program. In 2016, the faculty of the SOM approved, as a requirement for graduation, the need to pass the USMLE Step 2 CS exam. The curriculum committee appointed a curriculum implementation subcommittee for the CS curriculum revision. This revision of the curriculum included a consultation visit from staff members of the National Board of Medical Examiners (NBME). Through the years, multiple changes have been made to the curriculum, including: Adding an English language encounter to all OSCEs; changing the scale for assessing the communication process for all OSCEs; including electronic health records starting in the second-year clinical skills course for all OSCEs; adding a Formative OSCE to the second-year clinical skills course and clerkships; providing feedback after the Formative OSCEs; changing the grading system for the OSCEs: The student must pass each skill test if he/she is to pass the OSCE; revising the remedial process for students who do not pass the OSCE and/or who show deficiencies in their clinical skills; and developing a scoring rubric for the electronic health records. For the students who took the USMLE Step 2 CS exam in AY 2019-2020, the interim report shows that UPR SOM students performed at the national level in all the areas of the exam.

Another example of how the school utilizes assessment outcomes for change is the withdrawal of accreditation of the Neurosurgery Residency Program. The UPR, MSC, Medical School and the department of health of Puerto Rico have been working together to implement all the necessary changes that are needed to re-open the residency program. Moreover, the implemented actions are sustainable. For example, the Fiscal and Management Board of PR assigned 15 M of recurrent moneys to hire staff as recommended by ACGME and, as a result of, resident’s evaluation of workload. The MSC assigned a new section chair and an associate program director. The School of Medicine is hiring new neurosurgical faculty and the Neurosurgery Section is undergoing multiple faculty development training. All these actions guarantee that at the time of re-opening, scheduled for 2023, all requirements are being met. (S3C3.8- Neurosurgery Action Plan).

School of Health Professions
The Master of Science in Clinical Laboratory Science program is committed to the teaching and learning process of the students. After a delay in the graduation time was observed, a new course was developed; in it, students identify a research topic and conduct a literature review. This new course is offered the semester before the course in which students develop a research proposal. As a result, most students complete their research project on time, therefore, graduating on time.

In the Cytotechnology program, the students were not completing their degree in the time established by the program as being sufficient (one calendar year). The reason resulted to be the time it was taking to complete the research project. Due to the IRB’s requirements and the data collection process, it was difficult for students to finish their projects in the required time. For the 2014-2015 cohort, only 60% of the class graduated in one year, and the reason for the low graduation rate was determined to be delays in completing the research project. An exhaustive evaluation was made. This evaluation took into consideration the accrediting agency’s competency-based graduation requirements that were expected of other, similar, academic programs in the United States. As a result of the evaluation, the faculty restructured the requirements for the research project. For AY 2017-2018, the option of carrying out a case study and publishing it was added. As of today, 100% of the students who met the grade requirements graduated in the timeframe required.

Thus, the program assessment process is meaningful, trustworthy, is considered in modifications to programs, is directly aligned to resource allocation, and is sufficient enough to be worth the effort.
Conclusion:

The standard was met.

1. The numerous and diverse educational offerings at the MSC are congruent and aligned with the institutional mission and are characterized by rigor and coherence.
2. All the programs are continuously evaluated, and programs use assessment results to continuously improve their academic offerings.
3. The MSC has a well-qualified, multidisciplinary faculty with strong teaching competencies and research lines; faculty members are fully committed to their students and to the health of the communities they serve thus, working towards the MSC mission.
4. The MSC promotes and supports faculty development, as evidenced by the strategic goals, campus faculty development activities, and faculty development plans of the different MSC schools.
5. The institution’s catalogs, publications, and websites are truthful in their contents and accurately portray the campus and its institutional offerings.
6. The academic programs are regularly evaluated and updated through the systematic use of assessment results; said programs comply with accreditation standards, regulations, and procedures.
7. The curriculums of the different education programs at the MSC use a variety of educational methods to enhance student-learning opportunities, such as didactic instruction, seminars, laboratory and clinical coursework, practicums/internships, and research based on competency models for skill development.
8. The MSC supports student learning opportunities with technology and information system infrastructures and a network of collaborations with community-based organizations and institutions, MSC clinical services, and research and training projects along with counselors, academic counseling, skills training, and tuition among others.
9. Research courses, projects mentored by the faculty, internships, and participation as part of a research team in collaborative research projects, among others, engage students, enabling them to foster the skills necessary for critical inquiry and scholarly research.

Recommendations and/or Areas of Improvement

1. All the official schools and academic programs are required to review and update their respective webpages so that they include the expected times of completion (minimum and maximum) of their academic offerings, the average student profile, and/or, the competencies that their alumni develop. Each school should assign a faculty member that will review the webpages at least twice per year.
XI. STANDARD IV: Support of the Student Experience

Across all educational experiences, settings, levels, and instructional modalities, the institution recruits and admits students whose interests, abilities, experiences, and goals are congruent with its mission and educational offerings. The institution commits to student retention, persistence, completion, and success through a coherent and effective support system sustained by qualified professionals, which enhances the quality of the learning environment, contributes to the educational experience, and fosters student success.

Introduction

The MSC has rigorous admission policies for graduate and undergraduate students and offers comprehensive support services to retain and graduate the best students. The specific unit in charge of these services is the Deanship of Student Affairs (DSA), with the collaboration of the Deanship of Academic Affairs (DAA) and the deanships for student affairs at the six schools. The MSC student support service units include the Admission’s Office, Office of Financial Aid, the Registrar’s Office, and the Student Center for Counseling and Psychological Services (CECSI, by its initials in Spanish), among others. Other services available are the teaching assistant and research program; the Students Health Services Office; computer, technology, and informatics services, all of which rely on and/or are linked to the Office Information System (OSI, using its abbreviation in Spanish); distance education and support (RCM Online Division: https://rcmonline.education) for Blackboard Ultra; and the Center for Technological Support in Academia (CATA, by its Spanish initials). After the COVID-19 pandemic began, all these units continued to support student services via rigorous electronic communication coordinated by the DAA and the DSA. A list of student support offices, services, and programs is detailed in Table 4.

Table 4. Support Services Available to Facilitate the Student Experience at the MSC

<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deanship of Student Affairs</td>
<td>Assists students in all matters related to the university</td>
<td><a href="mailto:maria.hernandez15@upr.edu">maria.hernandez15@upr.edu</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:jussett.vega@upr.edu">jussett.vega@upr.edu</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:carmen.rivera40@upr.edu">carmen.rivera40@upr.edu</a></td>
</tr>
<tr>
<td>Admissions Office</td>
<td>Coordinates aspects related to the official entry of students to the campus</td>
<td><a href="mailto:admisiones.rcm@upr.edu">admisiones.rcm@upr.edu</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:maribel.ortiz5@upr.edu">maribel.ortiz5@upr.edu</a></td>
</tr>
<tr>
<td>Registrar’s Office</td>
<td>Produces transcripts and degree/enrollment verifications for students and</td>
<td><a href="mailto:registrador.rcm@upr.edu">registrador.rcm@upr.edu</a></td>
</tr>
<tr>
<td></td>
<td>alumni, oversees campus-wide registration and grading, and produces and</td>
<td><a href="mailto:ablardo.martinez@upr.edu">ablardo.martinez@upr.edu</a></td>
</tr>
<tr>
<td></td>
<td>distributes diplomas.</td>
<td></td>
</tr>
<tr>
<td>Office of Student Financial Assistance</td>
<td>Assists students in obtaining funding to finance their education.</td>
<td><a href="mailto:yolanda.rivera3@upr.edu">yolanda.rivera3@upr.edu</a></td>
</tr>
<tr>
<td>Office of Students Health Services</td>
<td>Takes care of student health emergencies and provides guidance on testing</td>
<td><a href="mailto:mir.castro@upr.edu">mir.castro@upr.edu</a></td>
</tr>
<tr>
<td>Office</td>
<td>control.</td>
<td><a href="mailto:lizzette.colon1@upr.edu">lizzette.colon1@upr.edu</a></td>
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<tr>
<td></td>
<td></td>
<td><a href="mailto:serviciosmedicosestudiantes.rcm@upr.edu">serviciosmedicosestudiantes.rcm@upr.edu</a></td>
</tr>
<tr>
<td>Service</td>
<td>Description</td>
<td>Contact</td>
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<td>----------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------</td>
</tr>
<tr>
<td>Student Center for Counseling and Psychological Services (CECSI, by its initials in Spanish)</td>
<td>Provides professional counseling and psychological services for currently enrolled students.</td>
<td><a href="mailto:carlos.canuelas1@upr.edu">carlos.canuelas1@upr.edu</a> <a href="mailto:maribel.pagan4@upr.edu">maribel.pagan4@upr.edu</a> <a href="mailto:sandra.santori@upr.edu">sandra.santori@upr.edu</a></td>
</tr>
<tr>
<td>Office of Services for Students with Disabilities (OSEI)</td>
<td>Coordinates services that assist students with qualifying disabilities to obtain reasonable modifications through an interactive process involving the student needing service, the relevant faculty member or members, and the pertinent school or schools, to ensure equal opportunities for students with disabilities. This includes the academic experience and evaluation, as well as access to support services.</td>
<td><a href="mailto:osei.rcm@upr.edu">osei.rcm@upr.edu</a></td>
</tr>
<tr>
<td>Student Ombudsperson Office</td>
<td>A resource for students to work on conflict resolution during their time of study at the MSC.</td>
<td><a href="mailto:procuraduria-estudiantil.rcm@upr.edu">procuraduria-estudiantil.rcm@upr.edu</a></td>
</tr>
<tr>
<td>Conrado F. Asenjo Library</td>
<td>Offers a complete collection in the health sciences and a virtual reference service that allows students and faculty to, using a computer, access information from anywhere.</td>
<td><a href="http://rcm-upr.libanswers.com">http://rcm-upr.libanswers.com</a>; access to databases is available at <a href="http://www.upr.edu/biblioteca-rcm">http://www.upr.edu/biblioteca-rcm</a></td>
</tr>
<tr>
<td>Center for Technological Support in Academia (CATA, its initials in Spanish)</td>
<td>Provides technical support to students.</td>
<td><a href="mailto:cata1101.rcm@upr.edu">cata1101.rcm@upr.edu</a></td>
</tr>
</tbody>
</table>
This chapter addresses matters pertaining to MSC students, how the institution serves them, and how the MSC facilitates their achievements. This section of the self-study report analyzes the policies and procedures that guide the student admissions process, policies, and services that enhance the quality of student life and the students learning environment. It will also discuss how student services were transformed during the COVID-19 pandemic, in AY 2019-2020 and AY 2020-2021. Figure 2 provides a snapshot of the institutional profile for the AY 2020-2021.

**Figure 3. MSC Profile for Academic Year 2020-2021**
CRITERIA 4.1 (Standard of Affiliation 10)
An accredited institution possesses and demonstrates the following attributes or activities: Clearly stated, ethical policies and processes to admit, retain, and facilitate the success of students whose interests, abilities, experiences, and goals provide a reasonable expectation for success and are compatible with institutional mission, including

It is in the best interest of the MSC to admit the most qualified students. To that end, the MSC has a recruitment program which provides multiple activities to attract the best and qualified candidates. This is the responsibility of the Promotions and Recruitment Program which is part of the Deanship of Student Affairs (https://de.rcm.upr.edu/promocion-reclutamiento). The MSC has a rigorous admission system that is consonant with the mission and vision of the academic institution. The institution offers administrative and academic support from the initial contact with the interested student to, after having been accepted, his or her graduation. This conforms to all the federal and state operating standards, laws, and regulations and meets the criteria of each accrediting agency of each academic program. The MSC succeeds in retaining the students it admits. In some measure, this is attributable to the fact that as a professional campus with mostly accredited programs, some of them unique in Puerto Rico, the MSC admits only those students who are highly qualified and are highly driven and motivated to succeed. All the schools and student services are intended to facilitate the student experience and support students in their individual journeys towards becoming qualified health professionals. The MSC recognizes that a student is a holistic and integrated human being who needs to share extracurricular experiences that promote health and well-being. For this reason, the MSC offers opportunities for students to channel stress productively. (S4C4.1- Example of Student Affairs Workshop for Students)

a. accurate and comprehensive information regarding expenses, financial aid, scholarships, grants, loans, repayment, and refunds;

The MSC provides prospective and current students with accurate and comprehensive information. Consumer information can be found at the MSC webpage (https://rcm2.rcm.upr.edu/) in the link “Información al Consumidor” (https://rcm2.rcm.upr.edu/informacion-consumidor/). Cost for attendance is included in the MSC Catalog (S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021), in the MSC Webpage (https://de.rcm.upr.edu/wp-content/uploads/sites/13/2021/07/UPR-RCM-Costos-de-Estudios-Creditos-2021-2022-pdf.pdf), and each schools’ webpage. All information regarding expenses, financial aid, scholarships, grants, loans, and repayments are found on the Office of Financial Aid webpage (https://de.rcm.upr.edu/asistencia-economica) and refund information is found on p. 33 of the Registrars Manual (S4C4.1- Registrars Manual).

The Financial Aid Office’s main objectives are to guide students through the application process for financial aid, inform them of the eligibility requirements and the federal rules and regulations that apply to the granting of such aid, and contribute to the achievement of their study goals. Once the student is admitted to the MSC, the Financial Aid Office provides group or individual orientations. Attendees are provided with all the available information related to financial aid (Table 5), which includes deadlines, study costs, estimates of the expected educational expenses (tuition, fees, and equipment) and of the cost-of-living expenses (this last estimate provided by the Vice Presidency of Student Affairs of UPR Central Administration), and financial aid eligibility, among other important information. Students receive follow-up phone calls and emails and are provided with brochures and written information that gives them details about the procedures for the evaluation and provision of financial aid, from their entrance into the institution to their graduation.

In addition to listing contacts within the Financial Aid Office, the webpage dedicated to financial aid provides information regarding expenses, financial aid, grants, and scholarships, and how to fill out the FAFSA, among other things (https://de.rcm.upr.edu/asistencia-economica). Prospective and current
students can find information related to deadlines and procedures on the Financial Aid Office’s website; program costs are available at the webpage titled *Vida Estudiantil* (Student Life) (https://de.rcm.upr.edu/vida-estudiantil).

Table 5. Financial Aid for Undergraduate/Graduate Students at the MSC

<table>
<thead>
<tr>
<th><strong>Federal Aid for Undergraduate Students</strong></th>
<th><strong>Federal Aid for Graduate Students</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PELL Grant:</strong> Eligibility for this grant is determined by a uniformly applied formula once the student completes the FAFSA. The amount will depend on the EFC (expected family contribution) and the course load.</td>
<td><strong>PLUS Loan:</strong> Processed by the MSC; only for advanced placement students enrolled at the dental school. Requires a course load of 6 or more credit hours (per semester). The amount will depend on the cost of the program of study. Accumulates interest from the first disbursement. Exit interview required.</td>
</tr>
<tr>
<td><strong>Federal Supplemental Educational Opportunity Grant (FSEOG):</strong> Eligibility is determined based on the EFC (calculated after the FAFSA has been completed) and the course load; it is distributed while funds are available.</td>
<td><strong>Federal Work-Study Program:</strong> Eligibility is established by the parameters of the U.S Department of Education. Offers part-time employment to students in need of additional income: $7.25/hour for a maximum of 20 hours per week.</td>
</tr>
<tr>
<td><strong>Federal Work-Study Program:</strong> Eligibility is established by the parameters of the U.S Department of Education. Offers part-time employment to students in need of additional income: $7.25/hour for a maximum of 20 hours per week.</td>
<td><strong>Unsubsidized loan:</strong> Requires a course load of 6 or more credit hours (per semester). The amount will depend on the cost of the program of study. Accumulates interest from the first disbursement. Exit interview required.</td>
</tr>
<tr>
<td><strong>Subsidized loan:</strong> Requires a course load of 6 or more credit hours (per semester). The loan amount will depend on the year of study, EFC, and the other aid already granted to the student. This loan does not accumulate interest while studying. Exit interview required.</td>
<td><strong>Legislative Scholarship and loans:</strong> Granted by the Commonwealth of Puerto Rico Law no. 17. Aid for students with economic need. Available only for doctoral programs (medicine, dental medicine, and veterinary medicine) and to students enrolled in a properly accredited medical school in or out of Puerto Rico. Students must demonstrate need of aid and have a GPA of at least 2.5.</td>
</tr>
<tr>
<td><strong>Unsubsidized loan:</strong> Requires a course load of 6 or more credit hours (per semester). The amount will depend on the cost of the program of study. Accumulates interest from the first disbursement. Exit interview required.</td>
<td><strong>Complementary scholarship:</strong> Eligibility is based on the economic necessity of the student together with the EFC; distributed while funds are available.</td>
</tr>
<tr>
<td><strong>Puerto Rico funding aid</strong></td>
<td><strong>Legislative Scholarship:</strong> Eligibility is determined by the EFC and course load; distributed while funds are available.</td>
</tr>
</tbody>
</table>
 Federal Aid for Undergraduate Students | Federal Aid for Graduate Students
---|---
**Institutional benefits** | Tuition exemptions and extensions to pay tuition credits. | Waivers
**Title IV funding benefits** | Reimbursement process of financial aid for students who withdraw completely; established by the Code of Federal Regulations (34 CFR 668.22). | Extensions
| Payment plans are available to qualified students, on request. |  |

To continue the process of facilitating the granting of financial aid to students, the Financial Aid Office, as has been the case with all the offices of the MSC, has had to make significant changes because of the COVID-19 pandemic. Among the changes that were implemented and put into practice are the following:

1. Active students began receiving all official communication by email.
2. The communications from “ESTUDIANTE INFORMA” (the student list serve) kept students abreast of the renewal process.
3. New students received orientation via Zoom and Google Meet, among other forms of online communication.
4. All financial aid applications were uploaded, as usual, to the Financial Aid Office’s webpage.
5. The documents to be sent from the Financial Aid Office and those to be received from the students were transmitted via email.
6. Student records were changed from physical to electronic.
7. In the “NEXT” portal a tool was added that allowed students to upload documents directly to their online files.
8. When necessary, members of the Financial Aid Office communicated with students by cellphone to resolve any situations that may have arisen and to process requests for help made by the students.

Work was done responsibly and diligently to continue giving service to the students so they would receive financial aid regardless the COVID-19 pandemic crisis.

   b. a process by which students who are not adequately prepared for the study at the level for which they have been admitted are identified, placed, and supported in attaining appropriate educational goals;

The MSC abides by the university’s general policy on admissions as established the former Council on Higher Education’s general policy on admissions (S4C4.1- Admissions Guidelines CES 116), in agreement with the institutional mission. Due to the diversity of academic offerings and professional accreditation requirements, each school and program establishes specific requirements for admission within the framework of the guideline.

The admissions policies of the MSC schools and programs reflect the university’s mission and vision to improve society at large through education, research, clinical care, and service. Each degree program has separate, independent admissions policies, processes, and standards that are derived from their professional accreditation requirements and are available at each program’s webpage and at the MSC Catalog. Components for admission that are common to most of the programs include GPAs and transcripts, letters of recommendation, interviews, written essays, test scores from admissions exams such as the Dental Admission Test (DAT), the Graduate Record Examination (GRE), the Medical College Admission Test (MCAT), among others. Some schools also have technical standards that are non-academic criteria for admission. These include specific communication, behavioral, and motor skills that might be required of disciplines that provide care and treatment to patients. Through the COVID-19 pandemic, efforts were made
to keep, not only the academic offerings up to date, but also information related to the admission criteria and other items mentioned above. Staff from the Registrar’s Office, the Admissions Office and the various academic programs were (and remain) available via institutional email and by phone to the clarify doubts of and answer questions from future candidates for admission.

Through comprehensive analysis, the MSC selects the best possible candidates: individuals who fulfill the admission criteria and show the motivation, character, personal traits, and commitment necessary to pursue a career in one of the health professions. The students at the MSC are highly competitive. Those very few students that are admitted but do not meet the standards for the level of study in their program are identified, placed, and supported through their remediation. Such cases are worked at the level of student’s school by the faculty and the offices of the associate and the assistant dean of students. The MSC provides support services that all students at all schools can access (S4C4.1- Deanship of Student Affairs Student Services). Through the different interventions and services (e.g., reasonable modifications, counseling, individual therapy, group interventions, and psychoeducation), students receive support for developing strategies to deal with these issues and attain their educational goals.

In general, the early detection of a student having academic difficulty is the responsibility of the faculty and the associate/assistant dean for student affairs or academic affairs of a given program, which are charged with monitoring student progress. During the academic process, students who are experiencing difficulties in the courses are identified and strategies are implemented to address those difficulties. With this information, the program director evaluates each individual case, makes pertinent referrals and recommendations, and provides appropriate follow-up, when needed. As stated, if the intervention of the school counselor is needed, an action plan is developed to address the student’s needs. At each school’s office of student affairs, students are offered strategies for improving time management skills, for managing stress and/or anxiety, and for developing assertive communication and problem-solving skills, among others. Schools have formal programs in place identify at risk students and provide the appropriate services.

For example, the SOM has a program introducing students to the study of medicine that is called the Introductory Program for Students of Medicine (PIEM, by its abbreviation in Spanish), which is part of the student-performance component of the Hispanic Center of Excellence. Disadvantaged students compete for admission on equal terms with their peers, with the difference being that the former tend to have been educated at public schools (in Puerto Rico, the differences between public and private schools are relatively marked, in that the former are generally less effective at educating than the latter) and to come from low-income families. During the summer, before starting formal studies at UPR, these students receive an introduction to the medical studies that they will be pursuing during the academic year and participate of personal development workshops. In addition, they (as well as their classmates) are administered a study-skills-assessment questionnaire at the beginning and end of the program to assess the program’s effectiveness and are later offered opportunities to work with the academic, personal, and emotional areas.

Once they begin the program, the school has an Academic Advising System with required and optional sessions aimed at helping student develop study skills, time management skills, and stress management skills through group orientation and personal counseling sessions. At risk students are identified early in each course (when they obtain <70% in any assessment activity) and referred to the school’s counselors and/or to CECSI. They receive mentorship from the Office of the Associate Dean for Student Affairs and tutoring services. The school also offers the same support services to all medical residents of the 38 residency programs. The Associate Deanship for Graduate Medical Education of the SOM has a full time social worker to directly support residents; each residency program is required to provide wellness activities for residents; each residency program has a Clinical Competency Committee that follows residents closely for monitoring their performance and providing the support needed to complete their training.

The SP has a system for the early detection of academic difficulty in any course; as part of this system, course coordinators monitor student progress. Each course coordinator must submit an academic progress
report to the Evaluation, Promotion, and Graduation Committee at the midpoint of every course or semester. The report identifies students who are experiencing difficulties in the courses and provides strategies to address those difficulties. With this information, the committee evaluates each individual case, makes pertinent recommendations, and provides appropriate follow-up, when needed. Based on an assessment of his or her needs, an academically at-risk student are referred to a school counselor or assistant dean or to a student services office available on or off the campus. If the intervention of the school counselor is required, an action plan is developed to address the student’s needs. The plan may include the coordination of tutoring sessions for the student. At the SP, students who are members of Rho Chi, an academic honor organization, provide tutoring to at-risk students in coordination with the efforts of the school’s counselor.

The SON identifies students with limitations in their academic performance, referring them to the academic advisor of the school and the director of the department or program, this after having used the pertinent strategies to help them. This process is carried out at both the undergraduate and graduate levels. The Office of Student Affairs of the school offers these students a number of services aimed at improving their performance, these services address stress management and anxiety, difficulties in attention and concentration, and difficulties with time management, as well as providing strategies for improving public speaking skills, strategies to identify learning styles, strategies for reducing conflict in group work, strategies for managing pre-test anxiety, and strategies for improving professional attitude in academic performance. The school has a professional counselor for students and when necessary, makes external referrals to mental health professionals.

At the GSPH, newly admitted students are assigned an academic advisor by mid-September in their first year of study and receive a letter communicating their assigned advisor with contact information. Students are encouraged to contact their academic advisor at any time. Academic advisors assist students in planning their course work and course sequence, as well as to discuss academic and career issues. They also address areas such as time management, course workload and enrollment, and goal planning. Academic advisors may also refer students the school’s professional counselor or to the MSC CECSI. As part of the academic advising process, at the end of each academic term (trimester), program coordinators review student grades and progress to identify risk indicators (students who have withdrawn from a course, failed a course, or obtained a “C” grade in a required course) and refer them to academic advisors. Upon review of an at-risk student’s academic performance, academic advisors may create a study plan and meet with students to discuss implications of the identified risk factors, determine challenges, and establish courses of actions. Study plans are reviewed with students and documented in the student’s academic record at the program level. Academic advisors inform program coordinators about advising recommendations and decisions, and submit study plans for approval of program coordinators. Advising also includes providing information on available resources and mechanisms to students with disabilities who may need reasonable modification. In accordance with this policy, the MSC provides support services to all students to promote their welfare, improve their quality of life, and support the attainment of their academic goals.

The SDM makes every effort to quickly identify those students who are experiencing academic difficulties. Faculty or course coordinators are the first to suggest academic counseling, tutoring, and/or support based on the struggling student’s performance and/or behavior. Direct communication exists and is encouraged between course coordinators and the assistant dean of academic affairs of the school. The SDM has also developed its own mechanism for the early identification of academic deficiencies: the Student Assessment Committee, an ad-hoc committee formed under the Academic Performance Committee, which conducts periodic monitoring of student academic performance to identify those with academic problems, early on, and refer them for tutoring and/or academic counseling. Once a student has been identified as being at risk, he/she may be assigned an academic counselor by the assistant dean of academic affairs or referred either to the school’s Office of Student Affairs for academic counseling or to the school’s counseling service so that the probable root cause or causes of his/her problems and/or deficiencies can be identified. At SDM, each student has a counselor. The school provides tutoring and mentoring services that are offered by postgraduate dental students and by biomedical sciences graduate students. The money to pay the tutors
comes from funds allocated to the Institutional Student Assistantship program, which is administered by the MSC Deanship of Academic Affairs. Most of the students who receive academic assistance or who are directed to participate in remedial activities nevertheless successfully complete their predoctoral studies, including fulfilling graduation requirements, as evidenced by the school’s retention rate. In some circumstances, the school offers special curricular arrangements to dental students who have demonstrated that they have academic deficiencies. The main goal is to retain students, allow them time to manage their challenges, and enable them to successfully complete their academic program.

Once a student requiring help is admitted to the SHP, a needs assessment is conducted by the Office of Student Affairs. Based on that assessment, a comprehensive counseling program (under the auspices of the Office of Student Affairs) develops group interventions that consider the student’s assessed needs. With this preventive approach and the need for early identification as their focus, all the students admitted to the SHP academic programs participate in an initial group contact in the charge of a professional counselor. This strategy is effective in identifying students who need to strengthen areas of knowledge and skills and who might have attitudes that may affect their learning process and their performance in their academic training. A given student might be referred to the school’s professional counselor, a clinical psychologist, or a healthcare professional located off campus, any one or all of whom might recommend an intervention intended to remedy the situation.

During the COVID-19 pandemic, special efforts were made to continue offering virtual services for the identification, location, and support of admitted students. Through institutional email and virtual guidance and monitoring, the student support office of each school ensured that pertinent information was disseminated, uncertainties were clarified, and questions related to the general operation of the campus were answered. The email addresses, telephone extensions, and names of the contact person and/or persons of the offices of particular interest were sent to the students to guarantee the continuous communication between all the involved parties. Special attention was—and still is—given to distance learning and educational support via RCM Online.

**c. orientation, advisement, and counseling programs to enhance retention and guide students throughout their educational experience;**

The MSC succeeds in retaining the students it admits. In some measure, this is attributable to the fact that as a professional university with mostly accredited programs, some of them unique in Puerto Rico, the institution has students who are highly qualified upon admission and are highly driven and motivated to succeed. These attributes in the students, coupled with a robust array of curricular and co-curricular support services, create an environment within which students accepted into a program of study at the university are very likely to persist, flourish, and graduate. In the event of any difficulty with a program, academic advising comes largely from the faculty and counselors of each program as described above. Each school has professional counseling services that are available to give support, from a preventive, psychoeducational perspective. The professional counselors of a given school get involved when a student’s personal situation interferes with his or her academic performance and hampers his/her educational experience.

The MSC has a central counseling and psychological office (S4C4.1- Deanship of Student Affairs Student Services) that is part of the Deanship of Student Affairs but that remains physically independent from the six schools. The Student Center for Counseling and Psychological Services (CECSI, by its abbreviation in Spanish) has two professional counselors and one clinical psychologist, all of whom serve the students from the six MSC schools. The counseling and psychological services provides individual counseling and psychotherapy and psychoeducational activities such as lectures and workshops on such topics as study skills, time management, teamwork, and stress management, among others, all of which have been identified by students as areas of need. In addition, CECSI, itself, also offers help through other avenues, such as **CECSI Capsulas** (CECSI Capsules) that can be accessed at https://cecsi.rcm.upr.edu/cecsi-
capsulas/, which are short informative and/or uplifting segments that are published online, twice per month, and that feature self-help advice and topics for reflection; brochures, grouped under the title CECSI Educa (CECSI Educates), offer a series of self-help tools and an interactive website for helping students select which career in the health professions is right for them; called ¡Pregúntame! (Ask Me!) This web tool can be found at http://preguntame.rcm.upr.edu/.

Each school has an office for student affairs that supports these efforts. For example, the SDM provides mentoring activities to the junior and senior pre-doctoral students; the activities are targeted to identifying postdoctoral career and study choices and include support in terms of the submission of applications and the interview process, finding clinical rotations abroad, and managing job offers and their respective contracts, when applicable.

As part of the Academic Advising System, the SOM offers tutoring to students to support their academic development and mentoring to facilitate residency matching. All MSC students are required to have an individual developmental plan, and a mentoring program is available to both students and faculty. Feedback sessions at the end of each academic year encourage students to discuss the positive aspects of their programs of study and to identify areas of improvement. The SHP developed a comprehensive counseling program in which all admitted students are required to participate. Via workshops, the program takes a preventive approach to helping students adapt to academic life. Continuous monitoring is carried out, both individually and in groups, either through student self-referrals or referrals by faculty members or the program director. The SON, SP, and GSPH also have well-articulated follow-up systems aimed at enhancing retention and guiding students throughout their educational experience. At an administrative level, all the schools promote student participation in the strategic planning committee, in which their opinions and points of view are incorporated into the teaching–learning process.

During the COVID-19 pandemic, most of these services have had to be modified and offered online, virtually, and through other interactive platforms. In the same way, cellular phones have become necessary tools to achieving communication between counseling support services and students. COVID-19 operating procedures aimed at prevention have been prepared so that students can be attended by appointment while meanwhile following safety protocols, which mandate the use of masks, social distancing, and other strategies for the prevention of COVID-19 contagion.

d. processes designed to enhance the successful achievement of students’ educational goals including certificate and degree completion, transfer to other institutions, and post-completion placement.

As explained above, the MSC offers a variety of academic and support services that help students complete their academic degrees. Academic programs offer workshops and guidance so that students can successfully complete their graduation requirements. In addition to all support services already discussed, the library has a complete collection on the health sciences and the virtual reference service, which allows students and faculty to access information from anywhere. Librarians offer workshops and orientations on data search topics, oral presentation skills, and the American Psychological Association (APA) guidelines, and they are specialized liaisons for students and faculty, helping with their research and special projects.

In addition to taking advantage of the services offered by the Conrado F. Asenjo Library (virtual reference: http://rcm-upr.libanswers.com; access to databases is available through the library page: http://www.upr.edu/biblioteca-rcm), users are able to access educational, academic, and research material of importance through the use of interlibrary loans. Interested students communicate with the specialized library staff, who then help in managing access to educational and/or research material. A low-cost photocopier service is available for the reproduction of whatever materials might be necessary to carry out
a student’s particular academic task. Other student support services include professional and licensed resources that offer sports and recreational activities (e.g., salsa dancing classes, Zumba, aerobics, yoga).

UPR recognizes the right of students to change concentrations and allows those interested in making such a change access to other UPR campuses. The institutional policy covering the movement of students between units (S4C4.1- Policy on student transfer UPR units), details the processes by which undergraduate students can transfer from one campus to another, effect articulated internal transfers, and be reclassified. These processes are also described in detail in the MSC Catalog. The institution provides the mechanism for students to take courses at other UPR campuses and at other institutions. Another way the campus enriches the curriculum is through internship and exchange programs. Almost all the schools offer internships and exchanges with organizations and institutions within and outside of Puerto Rico. Some of these exchanges are with the VA Learning Opportunities Residency (VALOR) program and the VA Caribbean Healthcare System, the Oticon Audiology Summer Camp, Johns Hopkins Bayview Medical Center, and the University of Michigan Health System. The experiences gained at these locations allow students to deploy the knowledge and skills that they acquired in their programs of study in other clinical settings. In addition, they are enriched by working and spending time with future colleagues in their respective disciplines.

The graduation standards and requirements for all the academic programs are described in the MSC Catalog and in the promotional materials of the respective programs. Through the entirety of the available information, students and potential students can find out both what is required for each academic degree and the specific courses offered by each academic program. Included are possible scenarios for getting a job once they have completed their degree.

Once graduated, students of the health professions are highly appreciated in the labor market in Puerto Rico and the mainland United States, so placement is not a problem. The student support services at the schools’ programs provide guidance to pass board exams, obtain professional licenses, and strengthen personal marketing skills (for employment) through supplying workshops on personal marketing, tools for job searches, guides for resume preparation, job fairs, orientations about residency application, and guidance for choosing a residency or post-doctoral program. Professional counseling services at each school give support in these areas and some schools, like the SOM and SDM have formal Career Counseling systems.

CRITERIA 4.2
An accredited institution possesses and demonstrates the following attributes or activities: Policies and procedures regarding evaluation and acceptance of transfer credits, and credits awarded through experiential learning, prior non-academic learning, competency-based assessment, and other alternative learning approaches.

The MSC has a Transfer Credit Policy that was approved by the Council on Educational Planning and Integration (CIPE, by its Spanish abbreviation) in April 2015 and revised on June 2021 (S4C4.2- MSC-Transfer-Credit-Policies-Guidelines-RevJune2021) to ensure that the institution is compliant with the pertinent federal regulations. This policy applies to students transferring either from an external institution or from within the UPR system and to students who are granted special permission to take a course, either within the UPR system or at an external institution, with the purpose of transferring the credits. The transfer credit policy applies to students pursuing an undergraduate or graduate degree. In general, credit will be awarded for coursework of comparable content, level, and scope if completed at a fully accredited college or university. Credits earned at foreign postsecondary institutions may be evaluated for transfer if the institution in question is recognized by the local department of education as a degree-granting institution. The specific academic program of the MSC will determine how external credits are to be applied to fulfill graduation requirements. The final approval about transfer of credits is made by the Associate Dean for Academic Affairs of the school.
Internal or in-transfer admission applies to students requesting admission to one of the undergraduate programs. As the MSC does not admit students directly from high school, these students must enter one of the other campuses of the UPR system or a private institution to take general education and introductory courses. After completing these general education requirements, they can transfer to the MSC for the professional courses that complete the requirements of their chosen associate or bachelor’s degree. Applications for in-transfer admissions are processed by the Office of the Registrar and are forwarded through the relevant school’s office of student affairs to the corresponding program for the selection process. Although in-transfer admission agreements are in place with some of the originating units, students must comply with a series of requisites and may still have to compete for the limited number of positions available in the program of interest. The transfer credit policy and guidelines approved by CIPE are available in the Registrar’s Manual Sec. IV, B2 (S4C4.1- Registrars Manual).

The general guidelines dictate that to qualify for credit transfer, a course must be similar in content, level, and learning objectives to the corresponding offering of the MSC and must fulfill a requirement in the student’s curriculum. Academic departments/programs will determine transferability after evaluating the pertinent course’s syllabus. Transfer students from schools with an integrated curriculum must provide the syllabus for each course whose credits they want to transfer. The overall curriculum content and learning objectives must be similar to those of the relevant MSC offering(s) when evaluated as a whole curriculum and must fulfill the curriculum requirements. This evaluation takes into consideration experiential learning, competency-based assessments, and other alternative learning approaches. The evaluation must also comply with specific programs’ accreditation requirements. Transfer students wanting to graduate from the MSC must complete their final year of study at the school that will grant the degree. In addition, credits awarded will not exceed 50% of the credits needed for graduation.

Undergraduate and first-level professional programs will award credits for approved courses in which the student has earned a C or higher. Graduate programs will award credit for approved courses in which the student has earned a B or higher. Transfer credits from external institutions are not considered in the calculation of GPA, while the grades of those classes within the UPR system and from which credits are being transferred are considered. The MSC does not grant transfer credit from College-Level Examination Program (CLEP) tests; remedial courses; continuing-education courses; courses taken at other institutions when the student was under academic suspension; approved courses in which the student earned a D or lower; non-credit courses; technical, vocational, professional, and/or work experience/co-op credits from other institutions; basic and general approved courses that were taken 10 years or longer before, core, professional, or specific specialty-approved courses that were taken six years or longer before; and courses already used to earn a degree.

Each program establishes the maximum number and type of transfer credits. Courses with the same course codes (as those offered at any unit of the UPR) will be considered equivalent. If the course codes differ, equivalency will depend on the similarity of content and objectives, as established by the academic program. Coursework done at a foreign institution must be evaluated for U.S. institutional equivalence by a credential evaluation service recognized by the U.S. Department of Education. Accredited programs may only consider transfer credit from accredited schools, as established by their accrediting agencies. At the SOM, the Medical Doctor (MD) program, the official unit for granting credit for courses taken towards that degree, considers the total number of hours per academic year of the subject course. For students requesting a transfer of credits, be it for courses taken at other institutions and pre-approved by the school or for students transferring for advanced placement for the third year, the credit hour equivalents are evaluated using a table labeled “Transfer of Credits Equivalencies” which is Appendix 1 of the Policy.

Credits awarded at the MSC follow the Credit Hour Policy (S4C4.2- MSC-UPR-Credit-Hour-Policy-CIPE-Jun072021) and all learning methods that will receive credit are contemplated on this policy. Revision for transfer credit includes program and course objectives which guide the evaluation along with
course credits/hours and assessment methods used among others. Decisions are student centered striving for appropriate balance among fairness, consistency, flexibility, good educational practice, and academic program integrity. The policy is revised every 5 years. Due to the COVID-19 Pandemic this was postponed and at the time of submission of this Self Study, the Policy is in Revision by CIPE. The Registrars Manual, Credit Hour Policy, and Transfer Credit Policy are available at the MSC Deanship of Academic Affairs webpage Resources link: https://daa.rcm.upr.edu/resources/. The list of institutions with which the MSC has articulation agreements is published with the Transfer Credit Policy as Attachment 2.

CRITERIA 4.3
An accredited institution possesses and demonstrates the following attributes or activities: Policies and procedures for the safe and secure maintenance and appropriate release of student information and records.

The Family Educational Rights and Privacy Act (FERPA) (https://www.upr.edu/mdocs-posts/disposiciones-de-la-ley-ferpa/) and the Health Insurance Portability and Accountability Act (HIPPA) govern the MSC in terms of those policies related to the receipt, storage, and dissemination of confidential student information.

The Medical Sciences Campus keep student records as follows:
- Final grades and official transcripts are kept at the Medical Sciences Campus Office of the Registrar.
- Financial aid history is kept at the Medical Sciences Campus Office of Financial Aid.
- Health records are kept at the Medical Sciences Campus Students Health Services Office.
- Personal and psychological counseling records are kept at the counselors’ offices either at the Medical Sciences Campus CECSI Office or at each of the schools’ counselors’ offices.

The Registrar’s Office adheres to the laws mentioned above as stated in p. 55 of the Registrars Manual (S4C4.1- Registrars Manual). The Registrars’ student record is the official academic record and includes student’s study program history (courses registered, dropped, or repeated); final grades; board grades history (failures and pass); and official transcripts. Official records are kept at a secure online program and only accessed by those working at the Registrar’s Office. For the official processes regarding the student’s official academic record please refer to the Registrars Manual. Each academic program protects the personal data and academic records of their students, following these laws and the regulations of their accrediting agencies. These records may include each student’s study program which includes a list of courses and electives authorized in campus or away electives; plans of actions approved by advancement committees and discussed with the student and recommendations provided to the student. They do not keep or provide a record of official grades nor transcripts. These laws are well understood by faculty and students and are applied as per the UPR requirements.

For counseling and psychological services, each school has its own procedures for keeping counseling records secure. In the case of CECSI, before receiving any kind of service, the student seeking service must sign a confidentiality agreement; no information is disclosed without the consent of that student. However, in such a case as there appears to be a possibility of imminent or foreseeable harm to the student or to a third party or parties or in the presence of a court order, the university—in the form of CECSI—will reveal only that information deemed necessary to prevent the potential harm, to avoid compromising the security, integrity, and dignity of the student.

CECSI uses an electronic medical record system named Titanium Schedule. This system has an independent server and license. Only the CECSI counseling and psychology staff have access to student counseling information. Hard copies of active and inactive case records are maintained in a locked, secure central area
in locked metal filing cabinets. Once the counseling process ends, the inactive records are kept for seven years from the last date of service, at which time, they are disposed of (shredded). The professional counseling services at each school keep student case records in a locked, secure location that is under the responsibility of each counselor at that school’s Office of the Associate/Assistant Dean for Students Affairs.

Following HIPAA protocol and regulations, the Students Health Services Office safeguards the information in student records. In this way, the security of the information is maximized. The Students Health Services Office keeps each student’s records for five years from the date of his or her graduation. In the same way, the Office of Services for Students with Disabilities (OSEI) has a digital platform named Accessibility through which the faculty members who teach courses attended by students with disabilities can, during a given academic session, safely and confidentially access the strategies to be implemented in the classroom.

The Office of Financial Aid keeps student record related to financial information provided by student, parents, and financial aid officer such as loans, scholarships, and school debts. It also includes compliance with debt management activities. This information is kept in secure online platforms and only those working at the office have access to it.

Both FERPA and HIPPA laws are well understood by faculty and students.

**CRITERIA 4.4**

An accredited institution possesses and demonstrates the following attributes or activities: If offered, athletic, student life, and other extracurricular activities that are regulated by the same academic, fiscal, and administrative principles and procedures that govern all other programs.

The MSC is committed to offering its students activities and services to promote their mental and physical welfare, improve their quality of life, and support the attainment of their academic goals. The MSC provides its students with a variety of centralized support services. The respective offices are staffed by a wide range of qualified professionals who are dedicated to serving the students. Each of these services supports the MSC mission and many provide essential co-curricular and interdisciplinary support services that enhance student development and learning, promote diversity and inclusion, encourage student health and wellness, develop exceptional student leaders, and ensure interprofessional engagement and opportunities.

The MSC Deanship of Student Affairs has a cultural and extracurricular program found at the Student Life Webpage or “Vida Estudiantil” (https://de.rcm.upr.edu/vida-estudiantil) that offers the students at the MSC a variety of activities and opportunities directed at their non-academic, on-campus lives. Sports and social and cultural activities encourage interaction among the students of the six schools and promote opportunities for inter-academic social connections, relaxation, and the acquisition of well-being. Talent shows, health fairs, food fests, dance (salsa) classes, job fairs, aerobics, Zumba classes, movie nights and forum discussions, and other social activities are among those sponsored by the university. Various schools coordinate game days, goofy games, social meetings, fundraisers on special days (e.g., Valentine’s Day), and costume parties (on Halloween) for their students. Every year, the MSC Student Council celebrates University Student Afternoon in the first week of May. Every effort is made to schedule cultural events during the designated “universal hour” (Wednesday, from 11:00 AM to 1:00 PM), in which span of time the schools do not schedule formal academic activities.

The Deanship of Student Affairs offers an athletic program that allows and encourages students to participate in basketball, volleyball, and indoor soccer tournaments. The athletic program sponsors these recreational sports tournaments and there is excellent student participation in them. The Deanship of Student Affairs has a cultural/social activities coordinator and a sports and athletic activities coordinator. The Physical Conditioning Center (CAF, by its abbreviation in Spanish) has a fully equipped fitness center for use by the member of the campus community for a nominal monthly fee. It has certified physical trainers.
and convenient hours (Monday through Friday, from 5:00 AM to 9:00 PM, to best accommodate the needs of the student and encourage them to go). At the fitness center, students can release the stress produced by the intense academic load while also improving their physical and mental health.

The Office of Quality-of-Life Office (https://de.rcm.upr.edu/oficina-de-calidad-de-vida) develops programs to promote a healthy and safe environment that allows the members of the university community to achieve a measure of well-being. Its primary role is the prevention of drug and alcohol abuse, violence, and the spreading of sexually transmitted diseases. The office coordinates special events, such as educational fairs, community service activities, and the Come Pantera (Eat Panthers) program. Via the donations of a variety of agencies, the program ensures that students experiencing economic hardship and/or food insecurity will have something to eat, as well as access to personal grooming and hygiene products. Additionally, food and drink are available at a reasonable cost at Café Don Juan. The coffee shop is strategically located next to the MSC Student Center and the Guillermo Arbona Irizarry Building and is open from 6 AM to 7 PM, from Monday through Friday.

The Students Health Services Office offers primary healthcare services to all students enrolled at the MSC, regardless of the medical insurance they have (or do not have, as the case may be). The office is in the Guillermo Arbona Irizarry Building, third floor, office B-349. All students enrolled at the university, without exception, must have a medical file. It is in this office that each student’s history is recorded. This record includes the name of his or her primary care physician, the results the admission’s physical examination, evidence of vaccinations, regulations, and the results of annual screening tests. More information is available at https://de.rcm.upr.edu/servicios-medicos-a-estudiantes. Student medical records are confidential, and the information they contain is protected under the HIPAA Act (Section 45 CFR 164.520 of 1996).

As sources of information used in the improvement of existing services, student opinions are very important. To ensure that their voices are heard, students are represented at various academic and administrative levels of the institution. They are represented in the MSC General Student Council by students form the six schools, in the MSC Academic Senate, MSC Administrative Board, and other deliberative academic and administrative bodies. Additionally, each school has a student council that participates in committees such as the strategic planning committee (COPE, by its abbreviation in Spanish), the Admissions Committee, and the Promotion Committee. The students participate in diverse professional and interprofessional chapters and student organizations that are recognized by the accrediting agencies of their academic programs. These student’s organizations have clearly stated mission, vision and goals related to community service, professional advocacy, among others. Actually, the MSC has approximately 70 student’s organizations. A list of these organizations is available in the Student Life Webpage (https://de.rcm.upr.edu/organizaciones-estudiantiles) and MSC Student Manual (S2C2.2- MSC Student Manual 2019-2020); they are aimed at helping the students develop core skills such as leadership skills and teamwork.

Schools also provide extracurricular activities. For example, the GSHP has the “Oasis of Serenity Bubble” (OSB) founded in 2016. The mission of the OSB is to offer students a safe space that offers tranquility, as well as regular activities, that promote wellness, primarily through the practice of mindfulness. Among general in-vivo or in-vivo virtual activities are, yoga for relaxation, breathing training and exercises, Pilates, massage, and spa (in conjunction with practicing students), tai chi with video, water-color mindfulness, mandala mindfulness, sand play mindfulness, pet therapy, self-home spa, candle making mindfulness, home-made hot chocolate making mindfulness, Spirograph serenity mindfulness, guided meditation, and mural mindfulness meditation.

The SOM has a Wellness Center (https://md.rcm.upr.edu/wellness/). The Center provides the space for students to relax, exercise, clear their minds, and socialize with peers. In the Wellness Center, students can meditate, do yoga, and participate in massage, aromatherapy, and meditation workshops. It is a space for
talks on useful topics for the daily life of the students. The Center also provides personal and group sessions of relaxation techniques and mindfulness. The school has a Wellness Committee composed of students and faculty and they provide recommendations for the development of activities. Students evaluate each activity provided.

The SHP has a comprehensive counseling system which includes psychoeducational and extracurricular activities for students. There are interdisciplinary student leadership projects such as the Interprofessional Leadership Student Program (PILE), job fairs, community health fairs, talent shows, food fests, Special dates (Saint Valentines friendship day, Halloween Costume parties), among others. Every Thursday at noon, the Stress Break workshop takes place at luncheon time. In it, students can channel their stress and anxiety through creative group activities, cooperative and competitive games, and group dynamics led by the professional counselor. The SHP evaluates the student experience using detailed surveys and satisfaction questionnaires about the services received, not only at the level of academic experience or support services, but also about their perception of extracurricular activities provided. Activities such as transition from student life to that of a health professional are emphasized considering elements such as preparation for employment interview, and professional resume. All the schools support student organizations and has different methods of providing extracurricular activities and wellness activities to their students.

Due to the COVID-19 pandemic, many activities—cultural, sporting, and social—have been limited to avoid contagion. The MSC used virtual platforms to develop programs that promote the well-being and health of students. These programs consist of virtual educational workshops on topics related to stress and anxiety management in the time of pandemic, guidance on the correct use of social networks, and virtual education; the workshops are intended to facilitate the student learning process. The perspective of the MSC Student Council and student leaders is that it is vital that new, creative activities and opportunities for social connection be developed; the thinking is that by participating in cultural and extracurricular activities, the stress of living in a pandemic might be ameliorated.

CRITERIA 4.5
An accredited institution possesses and demonstrates the following attributes or activities: If applicable, adequate and appropriate institutional review and approval of student support services designed, delivered, or assessed by third-party providers.

This criterion does not apply to the MSC.

CRITERIA 4.6 (Standard of Affiliation 8)
An accredited institution possesses and demonstrates the following attributes or activities: Periodic assessment of the effectiveness of programs supporting the student experience.

There is a concerted effort at MSC to assess the efficiency and effectiveness of the programs and services offered to students. The assessment of student support services is used to drive decision making and program development. Students periodically evaluate services at the Deanship of Student Affairs and at the school levels. The acting student dean oversees the satisfaction surveys of all the offices attached to the Deanship of Students. This process began in August 2018. For example, in a survey of the guidance services of the MSC Admissions Office (S4C4.6 - Student Satisfaction Survey - Admissions Office) which was carried out in the year 2020, it was found that in a sample of 167 possible candidates who applied for admission, 95% (n = 160) classified the services they received as excellent. Additionally, 95.2% (n = 159) professed being satisfied with the time spent waiting, 96% (n = 162) were satisfied with the attention and availability of the employee(s) who attended them, 93.4% (n = 156) were happy with the service hours, and 96% (n = 161) were satisfied with the knowledge of the person or persons who attended them and with the quality of guidance received.
CECSI evaluates student satisfaction with the counseling and psychology services received on a day-by-day basis using a satisfaction survey. The information is tabulated and analyzed once a year, after which such changes or corrective actions regarding the quality of service as are deemed necessary are implemented. For example, in a study that explored student satisfaction (S4C4.6 - S4C4.6 - Student Satisfaction Survey - CECSI), among student users (n = 78), with the services received from CECSI in AY 2019-2020, 99% (n = 77) of the responding students professed being satisfied with the friendliness of the staff; regarding the effectiveness of their visit, 96% (n = 75) reported that it had been effective; 91% (n = 71) were content with the amount of time that they spent waiting in the office; and 88% (n = 69) expressed their satisfaction with the physical environment of the office. In addition, the Office of Students Health Services Office has a follow-up evaluation (S4C4.6 – Student Satisfaction Survey - Health Services) that is given to explore student satisfaction with the services they received. A survey that assessed the medical services received in 2019-2020 was taken by 250 students from the six MSC schools. The results demonstrated that 99.1% of the respondents rated the availability of personnel and the respect and privacy received as excellent. The promptness of the services offered, and the attention provided by the staff were also rated as excellent, this time by 96.2% and 93.5%, respectively, of the respondents.

The main responsibility of the Office of Services for Students with Disabilities (OSEI) is to provide support related to the reasonable modification of student environments. OSEI has an evaluation form to follow-up on the satisfaction of students. A survey assessing student satisfaction with the reasonable modifications (S4C4.6- Student Satisfaction Survey- Reasonable Modification Services (OSEI) made in 2019-2020 was taken by 18 of students from the six MSC schools. Regarding their experiences of the orientation process, 100% (n = 18) of the respondents were satisfied with the kindness and respect they received and the clarity of the instructions they were given; 94.4% (n = 17) were satisfied with the promptness of the services offered and the knowledge of the staff about institutional policies and applicable laws; and 94.1% (n = 16) were satisfied with the guidance they received regarding the rights of students with disabilities.

Other surveys assess individual and group counseling services, health fairs, community service, job fairs, student leadership projects, orientation, and recruitment fairs; and exit surveys are taken by graduating students (S1C1.2- Student Surveys).

At the GSPH, an exit survey is taken, annually, by the graduating students. The survey is sent to the students through their institutional email, and the data are collected using a Likert-type scale. The survey provides multiple options for the students to express their perceptions of the service received. The exit survey includes general elements that explore each student’s academic experience, such as relationship with academic advisors/counselors, the quality of the counseling services received, and the accessibility of the faculty in terms of scheduling; also examined are campus security and additional support services, such as the library, access to a wireless internet signal, and the IT team. The survey also evaluates the number of opportunities that the graduate program provided for integrating knowledge and practice, student-centered learning, the promotion of the development of practice-related behaviors, and opportunities to participate in extracurricular activities. These areas were evaluated by the students as “completely agree” and “agree,” in their highest percentages.

The SP conducts a survey of the different types of counseling offered to graduating students. The survey explores accessibility to career counseling services, career planning guidance, access to reasonable modification services, financial-assistance counseling, the medical services provided, and health and wellness, among other things; the student evaluations were primarily as “completely agree” and “agree,” in their highest percentages (refer to the SP exit surveys, 2017, 2018, and 2019). Similarly, the SHP evaluates the student experience using detailed surveys and satisfaction questionnaires that explore and assess the services received. Students provide feedback on academic experiences and support services and also report their perceptions of the extracurricular activities that were provided. Among the activities offered were
interdisciplinary student leadership projects, job fairs, and food fests. These elements have, so far, been positively evaluated in terms of learning and the opportunities for collaboration in extracurricular activities. Additional evidence, from both graduate satisfaction surveys and employer surveys (attached to this report), supports the fact that the school’s academic programs meet the objectives of graduating students, who are competent in the specialized areas of the health professions in which they were trained.

The SON also regularly conducts surveys of the student perceptions of its associated counseling services. Students’ complete satisfaction questionnaires on such issues as professionalism, suicide prevention in students, people with functional diversity in the workplace and academia, budget management, and the identification of fraud, among others. Up to now, the surveyed students have been wholly positive in their evaluations. The SOM’s graduating students must complete the Association of American Medical Colleges Graduation Questionnaire which has questions regarding support services including academic counseling, career counseling, student health services, financial aid and debt management, wellness initiatives, the work of the dean of students, and personal counseling among many others. Results are discussed at the Curriculum Committee and action plans are based on them.

Each academic program has its own procedure for giving exit interviews to their students and alumni (follow-up after the student graduates). Usually, programs that are accredited are obligated to communicate with their students six to 12 months after those students graduate. In this kind of follow-up interview, questions are asked about to the student’s employment history, place of employment, future study plans, and the passing of certification exams, for example. Information is also collected (using questionnaires) from employers, for the purpose of identifying the number of graduates working for that employer and the positions that are vacant; the employer questionnaire also explores the knowledge, skills, and attitudes of the institution’s graduated students. This information is collected with email messages, phone calls, and/or written communications. The six schools of the MSC meet the objective of periodically evaluating and measuring the effectiveness of their programs to support the student experience.

Conclusion:

The standard was met.

Strengths

1. The MSC has clearly stated, ethical policies, processes, and procedures to admit, retain, and facilitate the success of students with reasonable expectations compatible with institutional mission and goals.
2. The MSC admits qualified students who perform well academically and are successful in completing their degrees.
3. Admission criteria, policies, and procedures are clear and applied.
4. The Deanship of Student Affairs offers direct counseling and health services and develops cultural programs that enhance the quality of student life.
5. Recreational services have been significantly improved and expanded, including the creation of a fitness center and several sports activities.
6. Accurate information about financial aid, scholarships, grants, loans, and student assistantships is available for students enrolled in MSC academic programs.
7. The MSC complies with federal regulations, procedures, and definitions, including the transfer-of-credit policy and credit hours.
8. The institution conducts needs-assessment activities designed to identify common issues affecting MSC students; all the schools address issues that affect their students and do so at every level of the institution.
Recommendations and/or Areas of Improvement

1. The hours for student services could be extended to accommodate the needs of nocturnal students once these programs begin.
2. The MSC should identify additional sources of funding for the improvement and expansion of student services.
XII. STANDARD V: Educational Effectiveness Assessment

Assessment of student learning and achievement demonstrates that the institution’s students have accomplished educational goals consistent with their program of study, degree level, the institution’s mission, and appropriate expectations for institutions of higher education.

This chapter provides evidence of the ongoing and relevant assessment of the achievements of institutional, school, and program educational goals in fulfilling the MSC’s mission and vision as a specialized institution of higher education in the health sciences on the island of Puerto Rico. The MSC has consistently grown, strengthening its culture of assessment to accomplish its mission.

The MSC has implemented policies and procedures that allow the institution, schools, and programs to make sure students achieve their educational and career goals by the time of their graduation. The MSCHE, together with other professional accreditation agencies, contributes to the effective monitoring of student learning activities during the training process and contributes to student achievement indicators. The assessment strategies have been modified based on the findings and results as well as on the reflections of the faculty staff. These practices add to the quality of teaching and student learning experiences, resulting in a highly qualified health-related workforce for the island.

CRITERIA 5.1 (Requirement of Affiliation 9)
An accredited institution possesses and demonstrates the following attributes or activities: Clearly stated educational goals at the institution and degree/program levels, which are interrelated with one another, with relevant educational experiences, and with the institution’s mission.

The mission and goals of the MSC define three essential areas of activity: teaching, research, and service. The MSC goals address the training of health professionals; the creation of interdisciplinary health teams; the quest for excellence, ethical values, and commitment to the community; lifelong learning; and the development of basic and applied research in the health sciences.

The MSC is the unit of the University of Puerto Rico system that is responsible for educating health professionals who will (primarily) serve Puerto Rico. The schools of the MSC maintain congruence with the MSC’s mission and goals as well as with those of UPR. UPR’s spirit of service to the Puerto Rican community and the university’s integral development within a democratic society is inherent to each MSC schools’ mission and goals and is in alignment with the campus mission to improve PR’s health condition through the formation of professionals, the advancement of knowledge, and the provision of the services explicitly outlined in the relevant plans and missions of the MSC and the six MSC schools (S1C1.1 - MSC Strategic Plan 2017-2022; S1C1.1- MSC Schools’ Executive Summaries).

Each schools’ vision, mission, values, and institutional and strategic goals address teaching, service, and research and are aligned with those of the MSC and to the MSC Competency Domains for graduates (S5C5.1- Alignment Between MSC Schools’ Mission and MSC Competency Domains; S1C1.1- MSC Schools’ Executive Summaries). Every school and program have aligned their mission to the MSC Competency Domains and the Graduate Profile to MSC Competency Domains (S5C5.1- Schools Competencies-Profiles aligned to MSC Competency Domains). Since assessment methods are based on Graduate Profiles (sometimes called Competencies or Educational Program Objectives too), there is a direct alignment of assessment methods to knowledge, skills, values of graduates and to the MSC Competency Domains and its mission.

In congruence with the MSC mission and goals, the School of Nursing (SON) offers undergraduate and graduate programs and CE. It prepares highly qualified nursing professionals who will go on to offer competent care to a changing and culturally diverse society. It fosters interdisciplinary work on the health
team, leadership in education, service, research, leadership in service at all levels of healthcare, and advancement of the profession in consonance with the MSC.

The mission and strategic plan of the School of Pharmacy (SP) address education, research/scholarship, practice, and service. The school prepares pharmacists and scientists who will serve society’s needs, emphasizing Puerto Rico’s population. The school pursues excellence in pharmacy education at the professional and graduate levels, promoting human and ethical values, social awareness, and critical thinking. In addition, the school provides pharmacy-related services as an integral component of the educational-, research-, and faculty-development experiences. Several of the school’s obligations are to update the knowledge and skills of pharmacists and other pharmaceutical personnel, promote and facilitate excellence in basic and applied research, focus on the community’s specific, pharmacy-related health problems, and integrate all the previous into the educational process. Finally, the school labors to establish an effective operational management system that will facilitate administrative processes, preserve institutional integration and unity of purpose, and promote an environment that facilitates creative activity, respect for human values, and social progress.

The School of Dental Medicine (SDM) mission is as a proactive institution of higher education that develops professionals of the highest quality. The school is sensitive to patient needs and is oriented toward providing comprehensive service to Puerto Rico and the global community. The SDM has become a leader in improving the oral health of the populations of Puerto Rico and the Caribbean.

The School of Medicine (SOM) mission is to educate diverse and competent physicians and scientists, provide excellent interprofessional care to patients, and generate knowledge through research. This mission is aligned to the MSC mission, and the school’s strategic areas, goals and objectives are aligned to the MSC pillars and goals. Educational goals at the SOM include academic excellence, curricular innovation, and research. Program evaluation is done through evaluation of outcomes of these goals and student achievement of competencies. For example, the MD Program has defined competencies and educational program objectives (EPOs) and their outcome measures. Evaluation of outcomes drive curricular development and assessment. As other schools and programs, the MD program competencies are aligned with the MSC graduate competency domains, which are evaluated as a measure of mission achievement (S5C5.1- SOM Competencies-Aligned to MSC Competency Domains).

In the 2019-2020 academic year, all School of Health Professionals (SHP) programs updated their mission to include the MSC student learning domain, the interprofessional-/interdisciplinary-knowledge domain, lifelong learning, social awareness, critical thinking, ethical values, and development of human sensibility. These revisions align with the UPR and MSC missions of addressing Puerto Rico’s current and future needs for a high-quality workforce. The commitment of the SHP programs is also aligned with the MSC mission to improve Puerto Rico’s health condition by forming qualified professionals, advancing knowledge, and providing the services described in said mission. Together, the programs of the SHP and its mission emphasize the preparation and graduation of general practitioners and specialists who are prepared to perform their respective roles and functions according to the specific profession’s scope of practice. The missions of UPR, the MSC, and the SHP all include being responsible for the formation of healthcare professionals who will provide high-quality service.

The Graduate School of Public Health (GSPH) revised its strategic plan in AY 2018-2019. The revised plan is aligned with the MSC mission and goals. The plan has clearly articulated goals and objectives in terms of education, research, service, and administration. With respect to the education and student learning goals, establishing a system of student learning assessment is a central part of this domain. The GSPH revised its curriculum in AY 2018-2019 to comply with new accreditation criteria and competencies established by CEPH, the accreditation agency. As part of this process, a system for assessing student learning was
implemented in AY 2019-2020; the system follows the competency development and progress of the students throughout the curriculum.

All the schools of the MSC communicate their vision and mission statements to the academic and general communities through the websites, catalogs, annual reports, and faculty meetings. This information is also posted in the public spaces of each school. For example, at the SDM, this information is posted in the entrance hallway that leads to the main clinic. At the SOM, it is in the central hall and the amphitheaters. Similarly, the SON mission is included in a variety of brochures, with the expected program outcomes published on the SON’s home page, on leaflets available in the school’s classrooms, and in program manuals. The overarching mission of the institution and its vision and values are displayed in the main hallway of the second floor of the MSC main building (see the MSC website). In their totality, the mission, vision, and values guide the decision-making processes and all the educational, research, and service activities.

CRITERIA 5.2 (Requirements of Affiliation 8, 9, and 10)

An accredited institution possesses and demonstrates the following attributes or activities: Organized and systematic assessments, conducted by faculty and/or appropriate professionals, evaluating the extent of student achievement of institutional and degree/program goals. Institutions should:

a. define meaningful curricular goals with defensible standards for evaluating whether students are achieving those goals;

b. articulate how they prepare students in a manner consistent with their mission for successful careers, meaningful lives, and, where appropriate, further education. They should collect and provide data on the extent to which they are meeting these goals;

c. support and sustain assessment of student achievement and communicate the results of this assessment to stakeholders.

The UPR and all its campuses have organized and systematic assessment processes that has resulted in meaningful and useful discussions about the strengths, and weaknesses with regards to learning outcomes. Policies such as the UPR Institutional Effectiveness Policy (S5C5.2- UPR Institutional Assessment Policy; S5C5.2- UPR Institutional Effectiveness Policy), requirement for evaluation of all programs (S3C3.1- BoG #45 Programmatic Assessment Requirement), and requirement for programs’ accreditation (S3C3.1- UPR Policy on Program Accreditation) are the bases of an assessment system that evaluates the extent of student achievement of institutional, unit, and program goals.

To ensure compliance with the assessment systems, the MSC Academic Senate approved a campus-wide assessment policy in 2007-2008 (S5C5.2 – MSC Institutional Assessment Policy). This policy is congruent with those established for the assessment of institutional effectiveness at the UPR system. The MSC has a well-articulated institutional plan for assessing student learning (S1C1.1- MSC Institutional Plan for Learning Assessment); it has been strengthened by the strategic planning and self-study processes that are carried out for the accreditations of the campus, schools, and individual programs, and the required UPR programmatic assessment processes. Using the data gathered, the processes of institutional and student learning assessment are consistenlty and effectively implemented throughout the MSC. There is an assessment plan at the campus level, and each academic unit has its own assessment plan. Results are discussed at each schools’ curriculum committees, assessment committees, and accreditation committees. Results are also discussed centrally at CIPE.

The Institutional Assessment Committee (CoIA, by its initials in Spanish) and the Institutional Planning and Development Committee (COPDI, by its initials in Spanish) are responsible for monitoring the success of the MSC Assessment Plan and the MSC Strategic Plan respectively, which were both designed with the institutional mission and goals in mind. As explained and evidenced in Standard 1, the current assessment plan covers both institutional effectiveness (S1C1.1- Institutional Assessment Strategic Plan
Operational Plan) and student learning assessment (S1C1.1- MSC Institutional Plan for Learning Assessment). For this new assessment plan, the MSC Strategic Plan was utilized to set priorities and identify specific areas to be evaluated. This approach resulted in better resource allocation.

The CoIA advises the MSC academic administration in developing, implementing, and maintaining a system of continuous assessment that determines the effectiveness of the institution in fulfilling its mission, goals, and objectives. The CoIA has members from each school and deanship, including education and assessment experts, and works with two components: institutional effectiveness and student learning. The student learning component develops and facilitates the implementation and dissemination of a plan for assessing student learning to determine the fulfillment of the mission, goals, and learning objectives of the schools (per the MSC’s third institutional goal). Ideally, a student reaches the highest levels of excellence in terms of his or her knowledge of his or her chosen discipline and in the development of human sensibility and ethical values, social awareness, professional skills, critical thinking, and lifelong learning and interprofessional/interdisciplinary focus. The CoIA collaborates in developing, coordinating, and offering guidance and training activities in learning assessment; encourages the dissemination of the results obtained from the learning assessment process as well as the use of learning-assessment activities for the continuous improvement of MSC schools and deanships; keeps the MSC community informed of the work carried out by the committee for the assessment of learning; promotes the exchange of information, at the faculty level, on the learning assessment process; and informs the MSC administration of the results of corrective actions implemented by the academic programs of the different schools (S5C5.2- Institutional Assessment Committee Policies).

The MSC and its six schools have their own ongoing assessment plans for measuring student learning outcomes, program effectiveness, determining academic and clinical faculty preparedness for teaching, assessing clinical/professional education experiences, and following-up on graduate practitioners (S5C5.2- MSC Schools Student Learning Outcomes Plans). The plans include goals and indicators that are meaningful and aligned with expected outcomes. Quantitative and qualitative data and direct and indirect measures are collected for formative and summative purposes. These assessment plans include comprehensive and integrated evaluation measures to monitor student performance and improve the student learning process as it relates to academic and clinical/professional experiences. Each program at each school develops specific criteria to evaluate student performance and uses various assessment tools to monitor, measure, and evaluate the knowledge level, actions, characteristics, and behaviors required for a specific task. Assessment plans are developed by faculty and assessment experts at each school with the assistance of the Institutional Development and Effectiveness Office staff when needed. All assessment measures and tools involve direct observation of the knowledge, skills, and behaviors/values that students are expected to achieve which, as evidenced above, are consistent with mission and they also relate to successful preparation for careers after graduation be it further education or job placement.

The MSC offers 65 academic programs specializing in the health sciences, which programs in their entirety lead to first professional doctoral degrees (MD, DMD, PharmD, AuD, DPT); professional (DrPH), research (PhD, DNS), and philosophy (PhD) doctorates; postdoctoral master’s degrees and certificates; master’s, baccalaureate, and associate degrees; and post-baccalaureate certificates. The MSC programs prepare competent entry-level professionals in various disciplines to meet different challenges and deal with the changes in today’s healthcare delivery system.

The MSC programs have specific curricular goals; by continuously measuring student learning (with assessments that take place throughout each academic year), the programs monitor and, subsequently, demonstrate its adherence to the mission and goals. Each program’s assessment of student outcomes and competencies is aligned with that program’s goals and objectives. Programs differ in the assessment terminology used (learning objectives, goals, competencies, learning outcomes), but they all present evidence of the attainment of their specific goals and objectives. There have been changes made to the
curricula of MSC programs because of the analysis of assessment data. The MSC also revised the admission requirements and institutional assessment indicators as part of the continuous process of improvement. The programs systematically revise student learning outcomes to increase clarity and render them measurable according to accrediting agency criteria and institutional policies. The contents of each program’s syllabus are aligned with the expected competencies and the graduate profile of that program.

Different strategies are used by the MSC programs to measure a variety of learning opportunities; direct measures assess community-based and applied research projects, theses, clinical practice, oral reports, patient presentations (oral and written), case discussions, standardized patient encounters, patient simulations, projects using comparative methodological approaches, policy analyses, written exams, quizzes, reflections, portfolios, comprehensive exams, case study analyses, written assignments, practical exams, mock tests of national exams, public health leadership role-play exercises, and decision memos, among other elements of the total educational experience. Indirect measures of learning outcomes are essential to the assessment of student learning. Such measures include student evaluations of courses and faculty, exit interviews, graduate and employer surveys, and retention and graduation rates. These direct and indirect measures are used to make formative and summative assessments of acquired knowledge, content integration, and performance, and they stimulate the development of student learning domains. These student learning assessments provide for program evaluation and facilitate curriculum revision and support systems enhancement aimed at improving student learning and strengthen program quality.

Novel community and service activities at the MSC and its schools and programs contribute to developing students’ skills and their individual visions of their chosen professions and prepare them for success in their future careers. These activities promote reflective thinking about their future professions and help them to define their specific interests and/or specialties, thereby helping them to achieve success and develop meaningful lives in the discrete contexts of their professions. The MSC programs have demonstrated various strengths, as indicated by graduates, employers, and preceptors. The MSC identified these strengths through formal and informal evaluations; the variety of practice areas and rotations were just two of them. In addition, the institution boasts preceptors with diverse specialties and experience and provides students with opportunities to practice at public and private institutions. The variety and complexity of the populations served (different socioeconomic levels, ethnic and age groups, health conditions, and variables that reflect the cultural diversity in Puerto Rico) are also named as strengths. The programs at the MSC publish the indirect measures of student learning on the institutional website dashboard (https://coia.rcm.upr.edu/dashboard/), which measures include graduation rates (S5C5.2- Graduation Rates), retention rates (S5C5.2- Retention Rates), and board passing rates (S5C5.1- Board Exams Percent Approval). This information is available to prospective students, stakeholders, and the public. For the 2014 to 2018 cohort, the MSC graduation (in the maximum time allowed) rates were 87.2%, 90%, and 85% in 2017 and 2018, respectively. The average retention in the 2014 to 2018 cohort was 95.5%; in the specific years of 2017 and 2018, the retention rates were 95.9% and 96.5%, respectively. Over 90% of the MSC graduates from 2014 to 2018 have passed their national exams to practice their profession (Dashboard, CoIA results from 2014-2018- https://coia.rcm.upr.edu/dashboard/).

CRITERIA 5.3 (Requirements of Affiliation 8, 9, and 10)
An accredited institution possesses and demonstrates the following attributes or activities: Consideration and use of assessment results for the improvement of educational effectiveness. Consistent with the institution’s mission, such uses include some combination of the following:

a. assisting students in improving their learning;

As demonstrated above, all the schools and programs at the MSC have implemented systematic processes that use different assessment methods and resources to develop mechanisms to help students improve their learning. All the schools have one or more committees that collect data on student achievement of the
designated learning outcomes, appraise the student support services, and evaluate the teaching and assessment strategies. These committees work with assessment data and develop different improvement methods, including mechanisms to improve their own learning, curricular changes, requirements for graduation, assessment methods among others. Once changes are made, these changes are reassessed through the same process.

For example, the SDM has an academic performance committee that carries out an early and ongoing assessment of each student’s academic progress to evaluate and guide academic achievement and professional development. The assessment is also concerned with all aspects of the student activities that may impact professional development. The committee evaluates students and provides feedback and learning tools (e.g., tutoring sessions for a particular course). The same applies to the SOM, which has monitoring committees that perform similar assessments. At the SOM, these committees sometimes refer students to personal counselors within the school or to the MSC Student Center for Counseling and Psychological Services (CECSi) program to work with time management, studying strategies, and/or stress management. The CECSi program, which is under the auspices of the Deanship of Student Affairs of the MSC, offers psychological and academic counseling to all MSC students. This mechanism helps identify at-risk students and offers them support to improve their learning. At the SP, the school’s CoIA revises all the data that have been gathered by the different assessment instruments and then provides an institutional assessment report to the faculty at large and to the corresponding units so that the recommended actions can be implemented. These committees also provide results to their curriculum committees or administrative committees so that such school- or program-wide modifications, such as are deemed necessary, can be implemented. At other schools, such as the School of Nursing, each semester and in each program, a midterm assessment is made in each course to evaluate the student learning experiences. Yearly, the data are analyzed directly by the curriculum committee and decisions regarding the improvement of student learning are made; an example of a past improving modification is the addition (prompted by student recommendations and the outcomes of student assessments) of an introduction to anesthetic agents in the course on basic anesthesia.

The SHP has developed a mechanism for the early identification of academic deficiencies through the departmental student evaluation committee. This committee follows the day-to-day academic performance of the students. Accordingly, those with academic problems are identified early in the academic year and referred for counseling and support (provided by the school’s counselors), assigned mentors, or scheduled to receive tutoring/remedial assistance. Counseling and guidance are among the essential student services offered at the MSC’s CECSi.

As part of a curriculum revision made in AY 2018-2019, the GSPH implemented, in 2019-2020, a system to assess student learning. The system follows each student’s competency development and progress throughout the curriculum. The school uses qualitative and quantitative measures at the program and course levels to assess student learning according to the parameters established by each program. Those students experiencing academic difficulty might be directed to a professional counselor as explained in Standards 3 and 4.

b. improving pedagogy and curriculum;

As demonstrated in Standard 3, the MSC academic programs are rigorous and coherent and include appropriate assessments of student achievement. To improve pedagogy and curricula, each of the schools and programs at the MSC has a curriculum committee that analyzes and discusses the results of each outcome measure with the aim of assessing the student attainment of competencies and objectives. These curriculum committees also assess the students’ evaluations of the faculty and courses. When an area or individual needing improvement is identified, action plans are designed and implemented. These areas
might include course content, teaching strategies, assessment strategies, the sequence of courses, the need to create electives, student support services, or others.

For example, at the SDM, the faculty instituted a hands-on workshop in the simulation laboratory to increase the passing rate of the graduates taking the (dental) clinical licensure examination. These modifications increased the first attempt pass rate from 80% in 2010 to 91.7% in 2017. Similarly, in January 2019, the Anesthesia program of the SON instituted an intensive simulation workshop on induction, intubation, regional anesthesia, the placement of central lines, the placement of arterial lines, and other vital and pertinent skills. The workshop was instituted because of student recommendations and assessment results. At the SOM, the MD program instituted a review of all the objective structured clinical examinations (OSCEs) that were part of the clinical courses. In these reviews, students receive performance feedback that is intended to help them to better prepare for each clinical course’s summative OSCE. This change was made because of student outcomes on the summative clinical OSCEs, and the feedback provided by those students.

The GSPH reviewed its curriculum following its accreditation agency’s new criteria and competency model. As part of this process, the school offered faculty members workshops in curriculum development, syllabus design, online learning and teaching strategies, and student learning assessment, among other topics. All curricular changes and learning and evaluation strategies were reviewed by the GSPH’s curriculum committee and were approved by CEPH, the accreditation agency. Program coordinator meetings are scheduled each trimester with the Associate Dean for Academic Affairs, in which curriculum, faculty training needs, and student learning are reviewed and assessed.

Every academic year, the SHP faculty assessment committee discusses different topics pertaining to the faculty development program. The SHP has an ongoing faculty training program that emphasizes the development of faculty skills to be used in assessing student learning. From 2014 to the present, the SHP has offered 32 assessment activities (workshops and lectures) to the faculty (seven in FY 2014-2015, seven in FY 2016-2017, eight in FY 2017-2018, six in FY 2018-2019, and four in FY 2019-2020). The evaluation reports for the SHP faculty activities indicate that the activities completely satisfied the need to improve those pedagogic skills related to the assessment of teaching and learning.

At the SOM there is a curricular evaluation cycle and an Annual Curriculum Retreat where all outcomes of the curriculum and all courses are presented by the faculty and by the students. Decisions are made for modifications to the curriculum including content, timing of a particular content within the curriculum, longitudinal and vertical integration, and teaching and assessment methods. These decisions are implemented and reassessed cyclically.

The COVID-19 pandemic has transformed all of society, presenting everyone with multiple challenges (to which the university has not been exempt). Distance education has occupied a pivotal role in transforming academic settings, and the combination of societal need and the strengthening of online learning management systems has made this an essential and viable service for all academic institutions. UPR is committed to developing distance education, aligned with the UPR Strategic Plan, 2020-2025, as it pertains to distance education (S3C3.4- Draft UPR Distance Learning Strategic Plan). Policies established by the UPR Board of Governors (S5C5.3 - UPR Distance Education Policy), provide guidelines regarding the methodology to use in courses and programs being offered remotely. As explained in Standard 1, the MSC created the RCM Online division as a branch of the Deanship of Academic Affairs. Its creation is intended to strengthen distance education at the MSC. During the COVID-19 pandemic, the RCM Online division offered faculty capacity building and instructional design on distance education and the technology employed to facilitate student learning. The MSC created 708 online courses, trained over 326 faculty on the use of Blackboard Ultra, and performed 741 virtual sessions in Blackboard Collaborate. More than 1,583 students took online courses, eight faculty conversations were held on topics related to distance
education, electronic resource pages were developed for faculty and students, and a survey was conducted to evaluate both the experiences and the newly uncovered needs of the participating faculty. The MSCHE authorized the MSC to grant academic degrees via distance learning. To that end, the institution formed an important affiliation with Quality Matters (QM) to ensure the institution’s compliance with quality standards in online courses and, in addition, promoted faculty development regarding such learning; in 2020, the MSC had its first faculty member certified as a QM coordinator by the QM organization.

c. reviewing and revising academic programs and support services;

The MSC schools are continuously and systematically reviewing and revising their academic programs and support services. The periodic review of outcome assessments can lead to a given school’s carrying out an action plan whose results demonstrate the importance of these assessments to the institution’s educational effectiveness, which is consistent with the institution’s vision and mission. The majority of the MSC programs and schools are subject to the accreditation process (as carried out by the corresponding accrediting agency), which requires each school to demonstrate that it meets the established regulatory requirements and standards. All the MSC programs that are subject to accreditation are fully accredited with one program on Probation. This program, the Radiology Technology Program, already implemented its action plan and will provide a progress report on January 2022. In 2020, the School of Dental Medicine’s accreditation visit was performed by CODA, with the school receiving full accreditation.

All the MSC programs that are not subject to accreditation nevertheless must comply with an established process to ensure their assessment (S3C3.1- BoG #45 Programmatic Assessment Requirement). The non-accredited program must also submit (to the MSC Deanship of Academic Affairs) evidence that the program is implementing a self-review and making the necessary revisions that are revealed by said review. This procedure takes place every five years. Finally, the programs that are not subject to accreditation must adhere to the institutional mission of guaranteeing that the institutional offerings are of the highest quality, ensuring this by regularly evaluating the attendant academic programs.

It is through this periodic review of each program’s assessment outcomes, strengths, and areas needing improvement that the institution can reaffirm the cultures of evaluation and evidence and thus improve the quality of teaching, research, and service. This constant self-assessment makes it possible for the institution as a whole and the schools on their own to address those areas requiring improvement and establish priorities for taking such short- and/or medium-term (as applicable) actions as might be necessary. The program evaluation processes are linked to planning structures, academics, resource allocation, and decision making, with significance within and outside of the university. The procedures to evaluate current academic programs and preparing and processing corresponding reports are standardized. The program evaluation model presented in this guide is one of participation and collaboration. It proposes integrating the most significant number of constituents at institutional unity and the university system in the evaluation process. It promotes reflection, dialogue, and contribution, both individually and collectively.

The MSC schools also measure the accomplishments of their academic programs and support services annually by evaluating their strategic plan indicators, with said evaluations being conducted by the respective institutional assessment and curriculum committees of the schools. Once the data are analyzed and evaluated, each school presents its faculty results and forwards them to the corresponding units for action implementation. The MSC and its schools use this information to identify strengths and weaknesses, enabling them to determine how best to revise the academic programs and support services. This analysis also guides the MSC in identifying strategic issues; the MSC both demonstrates and improves the quality of teaching, research, and service by regularly reviewing the results of the different academic programs and deciding how best to address problem areas, prioritizing actions based on the short and medium terms.
The schools also periodically review their academic programs. For example, the School of Pharmacy did a comprehensive analysis of all its PharmD courses in 2015 and again in 2017 to ensure that they were aligned with the new 2016 professional standards. As a result of the ongoing process of evaluation and the use of those results to improve educational effectiveness, the SP is currently transitioning from its master’s program in pharmaceutical sciences to a PhD program in pharmaceutical sciences. In the same way, the School of Nursing’s Nurse Anesthesia program was also revised. A proposal has been made to transition the program to offer a Doctor of Nursing practice degree with a specialty in anesthesia (DNP-SA) in 2022. The Doctor of Nursing Science program is also in process its regular quinquennial evaluation, and plans related to curricular improvements will be considered to enhance program outcomes.

To ensure the efficacious design of future curricula, curriculum revisions are made using as a basis student outcome data, the student evaluations of faculty and courses, the graduation-questionnaire results (surveys filled out by graduating students who are members of professional associations), and the revision of student services such as tutoring, academic counseling, and personal counseling. For example, as stated above, at the School of Medicine, an annual curriculum workshop is conducted. Each course is discussed by the students and faculty; workshop members assess student outcomes and satisfaction with the course and its faculty (as determined by course and faculty evaluations). In addition, the current national standards are reviewed, and their inclusion in the course is discussed. The overall curriculum review and the revision of academic programs and support services promote educational effectiveness. Each biomedical sciences program (MS and PhD) participates in an annual curriculum workshop that has a process like the one described above.

Similarly, the School of Dental Medicine had a major curriculum reform from 2006 through 2013. The integration of the basic sciences and dental medicine into the curriculum was one of the targeted goals of the reform. From 2013 to the present, the process of revising the curriculum has been underway. The school has also embraced new models for patient care and research, with the aim of building innovative teaching and learning programs. With the world-spanning explosion of technology (in all areas, but to a huge degree, in education), the SDM aligned moneys with the strategic plan and implemented the EHR, created the Center for Informatics and Learning Resources, and is at this moment devolving online curricula.

The programs of the SHP continually review and update their academic offerings. From 2014 through 2019, seven programs incorporated changes into their curricula, these changes having been approved by the Vice Presidency of Academic Affairs and Research. Each academic year, the curriculum of each program is reviewed, and the syllabus of that program updated to include current trends and the new requirements (should such exist) of the accrediting agencies; the revisions consider such institutional policies as pertain. Many SHP programs must complete annual reports for their accrediting agencies; when any such action is required, the program and SHP respond promptly. In the past, for example, compliance or progress reports have been required from the Occupational Therapy program, Physical Therapy program, and Nutrition and Dietetic Internship program. For this task, the programs are supported by the Deanship of Academic Affairs. To assist the SHP in endeavors related to the revision of curricula, the programs of the school have the support of other institutional resources, as well—the library and the Office of Informatics and Educational Resources (OIRE, using its Spanish abbreviation) being among them. The OIRE provides all the technology infrastructure that directly serves the faculty, non-teaching staff, and students of the 17 academic programs of the SHP. It plans, coordinates, and develops special projects for strengthening the academic and administrative processes. It is also responsible for managing, preserving, and providing all the technical support for the SHP’s local network, the website of the school, the faculty and non-teaching staff portal, and the student portal. The information systems unit of the OIRE manages different servers in support of teaching and other academic and administrative processes.

The GSPH revised its curriculum in AY 2018-2019 to comply with new accreditation criteria and competencies established by the accreditation agency the Council on Education for Public Health. The
The council’s new criteria required revisions of all the program competencies—including public health foundational knowledge and the alignment of curricular design—and mandated that some courses be updated, and others created. The council also identified opportunities to assess student competency attainment in each course and to revise integrative and practice learning experiences. As part of the new accreditation cycle, the Master of Health Services Administration program, which is accredited by the Commission on Accreditation of Healthcare Management Education (CAHME), has undergone a curriculum revision that includes a new competency model. Although accreditation is the main impetus for program review, this is a constant process at the GSPH. Assessments of student and program effectiveness are done on an ongoing basis in program and department faculty meetings.

Some MSC programs help students improve learning in many areas and according to their specific needs. One such “program,” is the school library, which is a critical part of the educational process at UPR. As will be explained in greater detail in Standard 6, the Conrado F. Asenjo Library of UPRMSC is the leading health sciences information resource center on the island. The library offers a full range of information resources and services to the students and faculty of the schools. Reference librarians offer workshops on the development and management of information search skills in the use of databases, the preparation of bibliographies, the use of evidence-based practice, and other key skills. The library assigns a liaison to the school faculty and has library personnel who assist students, faculty, and clinical instructors. The services provided by the library are fundamental because they provide, among other things, updated information related to the databases that support each program; access to new and relevant information is necessary to development of skills in the domain of lifelong learning, which itself is important to maintaining and improving each student’s ability to practice his or her profession.

Librarians at the MSC have a longstanding tradition of participating in the institution’s educational mission. It is their job to help in the shaping of literate health professionals. In terms of the SOM, for example, the librarians support medical education in numerous ways, including by co-teaching an integration seminar—which orients the students of the different years about the library’s resources—and participating in the curriculum committee as appointed ex officio members. The liaison librarian keeps the faculty informed of new services and library resources. The librarians of the MSC hold academic rank, which further assures their integration into academic life and their partnership in the school’s educational mission. Additionally, librarians also participate in the academic and accreditation processes, resulting in their having direct knowledge of academic requirements.

In general, support services for students at the MSC, as described in Standard 4, include academic, career, personal, and wellness counseling, all of which can be received through the schools or CECSI. The effectiveness of the offered services is assessed yearly via student questionnaires, and outcomes are revised by the Institutional Assessment Committee and the curriculum committee for action implementation. The MSC performs a data analysis with all the schools’ data; the analysis is used to transform the organizational culture so that it fosters an environment in which faculty, students, and support staff are committed to the vision, mission, and values of the institution.

d. planning, conducting, and supporting a range of professional development activities;

The MSC is committed to its faculty’s continued professional development. Every year, the MSC provides professional development activities through the DAA and other units as well as through each school. Schools provide faculty development workshops based on the needs of the faculty and the academic programs (SSC5.3- MSC Schools’ Faculty Development Workshops). Schools also endorse faculty participation in local, national, and international forums.

For example, every year, at the SP, the division of curricular and institutional effectiveness evaluation administers a needs assessment that helps the school plan, conduct, and support a range of professional
development activities for faculty administrative personnel. Based on the results of assessment, the school develops and implements a series of workshops and provides resources to faculty and personnel to improve their professional skills. Each academic year, the SP systematically assesses its faculty’s productivity in scholarship and teaching effectiveness as well as the professional and community service efforts of that body. The SOM has a very similar approach, which is also based on findings and faculty needs. There is a faculty development program that provides the needed training to the faculty at all the clinical sites, using various methods. Training sessions cover, among other things, leadership, research, teaching skills, assessment methods, the learning environment, and conflict resolution. Furthermore, each department also plans, conducts, and supports specialty-specific professional development activities. All faculty must maintain their licenses and attend CE pertaining to their specialty areas.

The SON has a faculty development plan to advance faculty outcomes in the following areas: education, scholarly work, and service; thus, the faculty development plan contributes to the achievement of the mission and goals of both the school and the MSC. This plan is aligned with the SON strategic plan and is revised and evaluated every three years. Professional development activities that have been accomplished are documented in an annual report.

Similarly, the SDM employs various methods for faculty development. These methods include meetings, conferences, workshops, participation in pre-clinical courses and clinical courses, access to course material on Blackboard, the preparation and distribution of rubrics, online calibration modules, free continuing-education courses, participation in trimester competency assessment meetings, and participation as graders in the clinical and laboratory examinations. These resources ensure that the clinical faculty use standardized methods when evaluating student performance and improve their professional proficiencies.

The SHP is committed to improving faculty skills. The SHP monitors program faculty to verify that, through CE, each is keeping his or her professional licenses and certifications updated, thus ensuring that each is current with the changes in his or her profession. The workshops on integration of new technology, instructional strategies, and assessment techniques into academic courses or curriculums offered at the SHP evidence the faculty’s support and participation in assessing student learning outcomes. For example, the school uses a standardized patient exercise to measure student competencies and evaluate the achievement of curriculum goals in the Physical Therapy program to do this, the faculty was trained in SP modality; another example of the school’s involvement is that it trained faculty to conduct calibration so that they—the faculty—can fairly and efficiently assess students who are learning scaling and polishing procedures via the Expanded Functions Dental Assistant preventive clinic.

The GSPH offered its faculty workshops and seminars in competency-based curriculum development, syllabus design, online learning and teaching strategies, and student learning assessment, among others. In compliance with local laws, all health professionals must complete a specified number of CE credits each year to renew their licenses. Faculty are encouraged to attend CE activities. According to institutional and individual academic goals, department chairs and deans may also recommend that faculty representatives attend specific activities. Other opportunities for faculty development include attendance at professional meetings, seminars, and workshops. The MSC supports faculty-member participation in professional development activities designed to improve teaching and the assessment of student learning. As previously explained in Standards 1, 3 and the answer to criterion 5.2, more than 700 faculty members were trained to use Blackboard and develop online courses during the years 2019-2020 and 2020-2021. The MSC research centers offer faculty training in research in mentoring.

For example, the Hispanic Alliance for Clinical and Translational Research has a faculty education core that offers multiple trainings and workshops, many of them online (https://alliance.rcm.upr.edu/cores/professional-development-core/#1599241572507-ebdeda61-9fb1). The
Center for Collaborative Research in Health Disparities’ (RCMI) has offered more than 140 seminars/workshops in the last 5 years (http://rcmi.rcm.upr.edu/). The following research centers/institutes provide faculty training and development yearly through seminars and workshops: the Behavioral Sciences Research Institute (https://bsri.rcm.upr.edu/), the Institute of Neurobiology (http://www.neuro.upr.edu/?q=education), Minority Biomedical Research Support-Support of Continuous Research Excellence (MBRS-SCORE) (http://mbrs-score.rcm.upr.edu/director.html), the Research Initiative for Scientific Enhancement (RISE) (http://mbrs-rise.rcm.upr.edu/?q=seminars.html), the Center for Maternal and Infant Studies (CEMI) (https://md.rcm.upr.edu/cemi/mentoring-institute-for-hiv-and-mental-health/), Center for Clinical Research in Health Promotion (http://ccrhp.rcm.upr.edu/), and the Endowed Health Services Research Center (https://md.rcm.upr.edu/ehsrc/). All of these programs, combined, provide more than 100 activities yearly for faculty development. Many, also provide online training modules.

The Office of Academic Development of the DAA also offer consulting services, seminars, workshops, and webinars on numerous topics, including teaching–learning skills, research, educational strategies, and techniques for assessing student learning. The MSC and its schools are continuously engaged in offering activities to improve student learning and promote excellence in education. One of the primary means of supporting excellence in academic life is the enrichment of teaching and learning through educational activities offered to faculty and academic administrators.

e. planning and budgeting for the provision of academic programs and services;

The MSC’s schools and programs align the planning and budgeting plans with the goals of the MSC Strategic Plan. The plan takes into consideration faculty, non-faculty personnel, support technologies, infrastructure, and other issues and includes in that consideration the needs of hard-to-recruit faculty by area of specialty and technological needs for the continuity of academic programs and services. The strategic plan for each school of the MSC includes developing academic offerings that are in tune with the needs of healthcare professionals, the current requirements of the different disciplines, the demands of the global labor market, and evaluation results (S1C1.1- MSC Schools’ Executive Summaries).

An example of the use of assessment results in planning and budgeting for the provision of academic programs and services at the School of Nursing is the recommendations of students and faculty regarding the need for high-fidelity simulation models and support technologies for the development of simulations in such specialized courses as Nursing Care for Women and Newborns. Other examples are the acquiring of new computers for faculty, the student computer center (Audiovisual and Interactive Technology Center: CAIT, by its initials in Spanish), and the school’s internet service upgrade. Similarly, a sonogram machine was acquired for the Nurse Anesthesia program to strengthen its students’ practice and regional anesthesia skills. Equally, the purchase of materials and equipment for the Center for the Development of Nursing Clinical Skills is considered on a yearly basis.

The School of Dental Medicine’s strategic plan redirected the school towards a more fiscally sustainable institutional management with a strengthened mandate to incorporate greater internal efficiency into its academic and administrative operations. Looking towards the future, the SDM is reinforcing the funding base necessary for achieving higher levels of fiscal sustainability. The tasks involved in reaching this goal of sustainability will be the expansion of clinical services with newer clinical facilities for the faculty practice plan (new facilities in progress), the establishment of the Master of Dental Science (Periodontology), participation in the electronic health record incentive program, the promotion and facilitation of new revenue-producing projects (e.g., distance learning through the offerings of the CE division), and the increasing to 40 students (up to 20 per class by AY 2021) in the Advanced Placement program.
The School of Pharmacy planned to acquire and budgeted for new telecommunications equipment (switches and power supplies) to replace that which was damaged by Hurricane Maria’s passage and the subsequent electrical issues. Telecommunications equipment was purchased from Cisco Systems and Extreme Networks. Existing equipment was updated or changed for Wi-Fi internet access in several school areas; previous equipment that came from Cisco Systems was switched out for Extreme Networks equipment, which is more powerful and more technologically advanced. All this was done to make way for the new Wi-Fi internet network, RCMNet, which is more potent than was the previous network, WLAN Pharmacy, although the latter will, to a lesser extent, remain in use. The Cisco-to-Extreme switch was made in the classrooms, lunchrooms, and inner courtyard; the new equipment is installed on the building’s exterior columns.

The School of Medicine plans its yearly budget based both on the MSC Strategic Plan and on accreditation requirements. Two committees continuously assess whether the school is meeting its goals. The strategic planning committee makes certain that its strategic plan is operationalized and, every three months, reviews the goals that have been met and designs new ones, when needed. The first area of the SOM’s strategic plan is academic excellence, and it is always a priority area. Simultaneously, the continuous quality improvement committee ensures that all accreditation requirements are being met (being fully accredited is also part of the MSC Strategic Plan) and plans accordingly if they are not. An example of budgeting based on the MSC Strategic Plan and accreditation requirements is the institution’s having acquired computers for the Clinical Skills program due to the need to improve student outcomes on the USMLE Step 2 CS exam (one of the licensing exams). Students now use the computers to write patient notes, as they will do on the exam, itself. The first-pass rate increased from 88% in AY 2015-2016 to 94% in AY 2019-2020.

Based on the Graduate School of Public Health’s strategic plan, a budget redistribution was made to increase the budget assigned to reinforce resources that impact academic programs and services, resulting in the use of non-traditional venues (e.g., social networks) to promote the school’s academic programs. In addition, a student study area was also designed; it is accessible 24 hours a day and provides a wireless communication system; the area, which is labeled “WIFI ZONE,” was designed to offer 10 additional spaces (work cubicles) to students to use their laptops, tablets, and other mobile devices. SALP 6006 – Introduction to Public Health, a required course for all students admitted to the GSPH, was redesigned, transferred to a learning management system, and implemented using eLearning instructional design.

f. informing appropriate constituents about the institution and its programs;

The MSC and its schools and programs use different processes to inform the academic community and public in general assessment outcomes. Assessment results inform the appropriate constituents of student learning achievements, and program effectiveness; reports include the areas needing improving (if any) and the plans for their improvement (ditto). Every school submits an annual report to the DAA; the report is aligned with the submitting school’s own strategic plan and with that of the MSC. Each report describes the school’s goals and how and whether those goals have been achieved, by which the effectiveness of the programs is judged, and student learning outcomes are assessed. Similarly, the accredited programs of each school submit the relevant reports to their corresponding accrediting agencies. Each program that is not subject to accreditation submits a five-year report or the results of its respective quinquennial evaluation to the MSC’s DAA. As mentioned, the five-year report is a type of self-study that is required of programs that are not subject to accreditation. The self-study analyzes achievement outcomes and assessment results that indicate a given program’s effectiveness and—correspondingly—the levels of student learning associated with that program. Likewise, each school (and its corresponding programs) generates internal reports for the committees (executive and curriculum) of the school with which it is associated to expedite decision making and the improving of programs, processes, and services. Further, at the different schools, information is delivered to the relevant academic communities, including students, faculty, and staff, through various methods, which methods include institutional email, class listservs, Blackboard postings,
and the webpages of each school and the MSC. The MSC dashboard contains the outcome measure results of the Institutional Plan for Learning Assessment and the Institutional Assessment Strategic Plan’s Operational Plan.

- **g. improving key indicators of student success, such as retention, graduation, transfer, and placement rates;**

- **h. implementing other processes and procedures designed to improve educational programs and services.**

The CoIA follows key indicators of student success such as retention, graduation, transfer, and placement rates. Throughout the yearly assessment process, the CoIA identifies strengths, areas of concern, and areas in which the data collection methods need improvement. The dissemination and discussion of results at the CIPE, where the schools’ associate deans for academic affairs are present, along with key assessment personnel, promotes the analysis of the assessment process and of the instruments to determine its effectiveness and comprehensiveness. The preliminary analysis of findings (using data from AY 2016-2017 through AY 2018-2019) offered the CoIA an opportunity to review the indicators of some of the objectives, considering data availability and quality. This evaluation allowed for the fine-tuning of the indicators as measures of the achievement of institutional goals and objectives. This process reaffirms the importance of collecting accurate information during the institutional assessment process, since it is only with accurate information that the teaching–learning process and the offered services can be improved. At the school level, the discussion of assessment results is part of the continuous improvement processes required for the academic programs. These results are discussed in curriculum committee meetings within each school. They are also discussed at program, department, and school meetings. For example, during the 2018-2019 AY schools had to evaluate all programs based on retention and graduation rates to assess if the program was meeting the goals and if not, to provide with an action improvement plan.

Academic programs use various direct and indirect measures to collect information about the achievement of their student learning outcomes and programmatic missions. These measures allow the faculty to collect and evaluate information about the ability of their students to select, use, and apply the theoretical concepts learned in the courses. Additionally, they help identify how students integrate the methods, techniques, and strategies for making use of the knowledge gathered and how they implement decision making in their fields of study. The overall outcome of these measures guide program assessment.

The learning assessment plan of each school highlights the fulfillment of educational objectives aimed at developing student skills and competencies (graduate profile). All the academic programs include community/clinical practice and research experiences that promote the authentic evaluation of the integration of the knowledge and skills required for a successful experience. The MSC campaign called *Recinto Vital: Recinto llega a Ti* (Campus Life: The Campus Comes to You) had students from all six schools join in doing volunteer work and health screenings for those most affected by the hurricanes that ravaged Puerto Rico in 2017. The MSC students began their participation in these interprofessional activities in October 2017 and continued their participation until the COVID-19 Pandemic arrived. These interprofessional activities helped student serve the most vulnerable populations on the island and, through them they learned the remarkable results that can be attained when working in collaboration.

Academic programs consistently use academic progress, graduation rates, course evaluations, curricula, and syllabi analyses, exit interviews, and alumni surveys as indirect measures. It is important to note that each academic program’s curriculum has characteristics that call for the use of such specific measures as are required by its professional accrediting agency. The MSC requires all programs to undergo a periodic assessment to ensure their educational effectiveness (*SSC5.3- MSC Schools' Curricular Revisions*). All the programs use vital indicators of student success, such as national test outcomes, the achievement of
competencies and educational objectives, and retention, graduation, transfer, and placement rates to assess program effectiveness.

The School of Medicine utilizes student retention, graduation, entrance into residency programs for the MD program, and the placement rates of the biomedical sciences programs as indicators of program and student success. These outcomes are discussed annually at meetings of the curriculum committees and plans for improvement are made according to those outcomes. Once the plans are implemented, outcomes are revised and reviewed at the annual curriculum workshops of the MD and biomedical sciences programs. The SOM also collects and uses various internal (institutionally developed) and external (nationally developed, standardized examinations) outcome data to demonstrate medical student performance in achieving the SOM’s educational objectives. These data are also used annually by the curriculum committee and its subcommittees to enhance and improve the MD program’s quality through action plans and revisions of the outcomes. To improve educational effectiveness, the overall curriculum review and the revision of academic programs and support services are done every year at an annual curriculum workshop. A continuous quality improvement process is also implemented to improve educational programs and student services. The school’s continuous quality improvement committee assesses yearly compliance with all accreditation standards. Educational effectiveness and student services are assessed yearly as part of this committee’s agenda, and outcomes are used to provide recommendations to it. The school also has a mentor program for medical students. Starting in the second year of study, mentors discuss with students their academic and career needs and guide them toward achieving the ideal outcomes.

The School of Pharmacy’s institutional assessment plan includes school goals and objectives, indicators, information sources, and the names of individuals responsible for data collection and frequency with which said data are collected. From the data analysis, reports regarding institutional-assessment findings are generated for every academic year, which reports are used to transform the organizational culture to foster an environment in which faculty, students, and support staff are committed to attaining the school’s vision, fulfilling its mission, and upholding its values. Faculty, administrators, students, and staff are also involved in the assessment process through their representatives on the CoIA. For example, the PharmD program’s graduation rates from 2017 and 2018 were 93% and 95%, respectively. In 2019, the retention rate was 100%. The first attempt NAPLEX (North American Pharmacist Licensure Examination) passing grade for the PharmD students was 97.5%.

The Doctor of Pharmacy program’s student-progression process abides by the documented policies, norms, and procedures for the evaluation of, promotion in, and the graduation from the Doctor of Pharmacy program, as approved by the faculty on June 28, 2006 (revised on March 6, 2013). This referred-to document contains the policies and procedures regarding student evaluation, promotion and progression, probation, readmission, graduation, remediation, dismissal, and rights to due process and appeals. The established process has several objectives: providing feedback to students, identifying their difficulties, providing information to faculty during the promotion and progression process, and tracking student achievement in each course and through the program. The evaluation policy included in the document is consistent with the curriculum philosophy. With this information, the committee evaluates each case, makes pertinent recommendations, and provides appropriate follow-up.

At the School of Nursing, student success indicators are considered for each program’s annual plan. The results are discussed, and decisions made by the different schools’ executive committees and the student admission committee of each program on how to improve the critical indicators that demonstrate student success. For example, the data concerning student promotion established that in AY 2016-2017, 89% of the bachelor’s degree in nursing students had completed the program compared to 67% in the master’s program having completed said program. Improvement was observed in AY 2018-2019, with 93% and 86%, respectively, of students completing their respective programs. The improvement observed in the master’s program was due to the efforts of the School of Nursing in establishing an improvement plan. The School
of Nursing considers the recommendations and qualitative assessment information provided by the school’s advisory board when implementing processes to improve educational programs and services. The advisory board has two meetings each year, one per semester. This board has its bylaws, which detail the purpose and function of this board as a School of Nursing committee.

The School of Dental Medicine has demonstrated a solid commitment to curriculum change and innovation based on assessment data. In the past several years, various projects for curriculum change and innovation have been developed and implemented. The curriculum committee oversees the analyzing and make recommendations regarding improvements to the content and sequence of the courses. The committee also discusses course evaluations in its meetings. All the information concerning student outcome assessments is collected and analyzed regularly. An important result of this process is that, for example, at least 80% of the graduates pass the state board on the first attempt. To provide some contrast, in 2010, 70% of the graduated students passed the state board on the first attempt. An action plan was designed to increase the first attempt passing rates. The school conducted various meetings with the state board members for faculty calibration. As a result, the restorative sciences faculty and the surgical sciences faculty offered hands-on workshops in the simulation laboratory for those two areas. In the last seven years, progress in the achievement of this outcome measure has been made. In the classes of 2016 and 2017, the first attempt passing rates of students taking the state boards were 86.5% and 91.7%, respectively. The curriculum committee evaluates the collected information and recommends appropriate curriculum modifications in terms of content, sequence, and organization. For example, regarding the implementation of new SDM competencies, the clinical assessment system for junior and senior year students is based on their progress in achieving said competencies and the organization of third- and fourth-year students into clinical teams. The Doctor of Dental Medicine program has implemented different and comprehensive evaluations to verify that students have achieved each of the defined competencies.

The School of Health Professions has an ongoing assessment plan consisting of six goals with appraisal of 17 academic programs. This plan provides essential information about student success. The SHP approaches assessment as a tool for understanding and being accountable for the teaching–learning process, because the assessment process dictates institutional responsibilities. The SHP assessment plan (2018-2023) includes three major areas: academic excellence, research, and service. Furthermore, the school assesses student learning outcomes indirectly. A discussion of the AY 2018-2019 and AY 2019-2020 outcomes of the new assessment plan will take place in AY 2020-2021, beginning at the SHP faculty assessment committee level. The preliminary data of various indicators related to the cohorts of admission, such as graduation and retention rates, academic program demand, and occupancy rate, were collected at the school level and were discussed with department and program directors in the first semester of AY 2019-2020. Finally, the results were (and continue to be) published on the SHP website by each program.

The Graduate School of Public Health continuously reviews key indicators in different academic and administrative committees. The offices of the deans of academic affairs and student affairs of the school prepare a report on key indicators. The report is discussed by the executive committee (composed of the deans and department chairs of the school) and the committee of academic and administrative affairs (composed of deans, department chairs, department faculty representatives, and a student representative). These reviews serve as the basis for decision making and policy reviews. For example, in AY 2018-2019, the school identified some programs with low graduation rates and therefore required program coordinators and faculty to develop and submit a report to address these low rates. These plans were reviewed and discussed by the committees before being implemented.

The MSC schools use qualitative and quantitative measures at the program and course levels to assess (according to the parameters established by each program) the results of the student learning process. Outcomes of pre-established criteria are used to evaluate student performance, assessing knowledge level, actions, characteristics, and specific behaviors required for the achievement of a given task. Outcomes are
obtained using scales with different categories and checklists. Achievement tests are also frequently used to assess student learning. The instruments that evaluate student performance use open questions and comments to obtain more qualitative information. In addition, most academic programs offer an integrative course or culminating experience with comprehensive instruments to evaluate student learning and the integration of knowledge and skills. Some programs use surveys with closed and open questions (making it possible to ascertain the student perspective regarding the study programs or informal discussion groups) to collect qualitative data for curriculum revision and changes. The schools also conduct exit surveys with which students, upon completing their degrees, evaluate programs; advising, counseling, and support services; campus security; and the attainment of competencies. The analysis of information is of great value to the decision-making process at the program level.

**CRITERIA 5.4**

An accredited institution possesses and demonstrates the following attributes or activities: If applicable, adequate and appropriate institutional review and approval of assessment services designed, delivered, or assessed by third-party providers; and

This criterion does not apply to the MSC.

**CRITERIA 5.5 (Standard of Affiliation 8)**

An accredited institution possesses and demonstrates the following attributes or activities: Periodic assessment of the effectiveness of assessment processes utilized by the institution for the improvement of educational effectiveness.

The MSC and its six schools have ongoing, effective, meaningful, and useful assessment plans and processes that evaluate student learning outcomes, academic and clinical faculty preparedness for teaching, clinical/professional education experiences, and graduate practitioners. It includes indicators that are aligned with the expected outcomes, a timeframe for data collection, and the expected performance levels. Quantitative and qualitative data are collected, and direct and indirect measures made for formative and summative purposes. These assessment processes include comprehensive and integrated evaluation measures to monitor student performance and program effectiveness and improve the student learning process in terms of the academic and clinical/professional experiences. Each program at each school determines the specific criteria for evaluating student performance, with various assessment tools being used to monitor, measure, and evaluate the knowledge skills, characteristics, and behaviors required for each competency.

The assessment of student learning at the MSC schools demonstrates that, at graduation or other appropriate points across the curriculum, the students have attained the knowledge, skills, and competencies consistent with the specific program’s learning and education goals. Examples of integrated evaluation measures that aim to improve the academic and clinical performance of the students are lab experiences, patient simulations, role-playing, case presentations, evidence-based learning, and supervised community activities. Some examples of the data that is collected and used to assess student learning are results from a) written and practice exams, b) standardized patient experiences, c) the graduate survey, d) employer surveys, e) performance instruments that assess specific aspects of the clinical/professional practice, f) oral presentations of research proposals and other topics, g) the program exit interview, h) the student exit survey, and i) comprehensive exams.

**Conclusion:**

The standard was met.

1. The MSC has demonstrated a significant improvement in assessment since the last accreditation.
2. Assessment plans are developed at both the campus and institution levels and MSC has demonstrated that the results of assessments are being used in the decision-making process.

3. Most academic programs are accredited by professional accreditation agencies and have evidenced the presence of assessment strategies and outcomes.

4. The MSC strongly believes and promotes the institutionalization of student learning assessments.

5. The MSC has a well-designed institutionalization assessment plan that is aligned with the MSC Strategic Plan and the MSC mission and goals.

6. It is well documented that the programs of the MSC schools use assessment results to improve and modify the curriculum and learning opportunities of the students.

7. The students have expressed their satisfaction with the acquired knowledge and skills development, which knowledge and skills enable them to be successful in their professional careers.

8. Graduation, retention, and first attempt passing (of the national boards) rates are evidence of the quality of the education offered to the students.

9. The alignment of the findings of the student learning assessment with those of the institutional assessment program translates into a continuous improvement of the excellence of the academic and service activities offered by the MSC to the community it serves.

10. The MSC assessment culture continues to be reinforced and promoted at all levels of the institution.

**Recommendations and/or Areas of Improvement**

1. There is a need to further systematize data gathering, recording, and reporting for institutional and student learning assessments throughout the campus.

2. The importance of the annual report updates for assessment should be emphasized and further review data requested in alignment with the MSC and student learning assessment plans.
XIII. STANDARD VI: Planning, Resources, and Institutional Improvement

The institution’s planning processes, resources, and structures are aligned with each other and are sufficient to fulfill its mission and goals, to continuously assess and improve its programs and services, and to respond effectively to opportunities and challenges.

This chapter focuses on the nature and quality of the MSC’s dynamic planning process and its alignment to resources in support of the institutional mission, goals, and objectives thus discussing the Institutional Priority 1, Fiscal Sustainability. The analysis will demonstrate the effectiveness in systematic planning, establishing priorities and allocating resources, aligning planning and resources to mission and goals, and continuous assessment of programs and services resulting in strategic actions necessary to improve and sustain institutional quality and renewal. Specific academic and administrative decisions are made considering the critical issues identified in the UPR, MSC, and its six schools’ strategic plans. It also assesses the adequacy of human, financial, library, technical, and other resources, and physical facilities necessary to achieve the institution’s mission and goals. In addition, it provides information to reviewers on how the MSC has dealt with the current financial crisis, economic impact of the Covid-19 Pandemic, and how it proposes to overcome it.

CRITERIA 6.1 (Requirements of Affiliation 8 and 10)
Institutional objectives, both institution wide and for individual units, that are clearly stated, assessed appropriately, linked to mission and goal achievement, reflect conclusions drawn from assessment results, and are used for planning and resource allocation.

As stated in Standard 1, the MSC Strategic Plan 2017-2022 (S1C1.1 - MSC Strategic Plan 2017-2022) clearly states institutional strategic areas (Pillars), goals, and objectives that serve as a roadmap to meet its mission. Outcomes of the plan are assessed yearly by the MSC administration and are used for planning and allocation of resources. Each of the six schools’ strategic plans are aligned to the MSC plan and undergo a similar process (S1C1.1 MSC Schools’ Executive Summaries). The planning process at the MSC promotes continuous improvement, monitors, and analyzes performance and challenges towards goals achievement. The MSC Strategic Plan is congruent with the UPR Strategic Plan (S1C1.1 UPR Strategic Plan 2017-2022). Since 1995, the UPR Schools and MSC develop their budget proposals based on the Institution’s mission and goals as determined in the Strategic Plan. The MSC Strategic Plan and the schools’ plans are published at the webpage of each school and are illustrated at posters at key areas around the campus. At the same time, the planning process allows the institution to respond to opportunities and challenges such as the COVID-19 Pandemic.

Beginning on the fiscal year 2018-2019, an evaluation of Strategic Goals and outcomes is part of the ongoing process to support multi-year financial planning. This process is undertaken by a multidisciplinary MSC Finance Taskforce appointed by the Chancellor. For example, Pillar 3 of the Strategic Plan is Physical and Technological Infrastructure, which is aligned to the UPR Strategic Plan Goal of Technological Culture and Sustainable Management. Goal #2, within this Pillar, is to develop to the maximum of its possibilities the technological infrastructure of the MSC, the online services, the support networks, and the training of its employees. One of the goals’ objectives is to adapt the physical infrastructure to the technological development needs of the MSC to expand activities related to teaching, research, administration, and community service. The actions taken to meet this goal are explained in the answer to Standard 1 since this goal was a result of the external environment’s evaluation. In the context of alignment of planning, outcomes, and resources then it is important to add to all the outcomes already delineated in Standard 1, that the MSC allocated $90,000 to the development of RCM Online Division in addition to the costs of obtaining and maintaining the Blackboard Ultra and Blackboard Collaborative platforms. This allocation of funds resulted in the training of faculty members and in the development of courses that add funds to the institution thus also being aligned to Pillar 4 Strengthening and Fiscal Sustainability. Because the MSC
gave priority in budgeting and planning to this goal, when the COVID-19 Pandemic crisis developed, the institution was prepared to move all courses to online format, train more faculty, and develop more projects for improving funding. For other examples of alignment of strategic goals, planning, and resource allocation please refer to **S6C6.1- Examples of Alignment- Strategic Objectives-Outcomes- Budget**. Schools also allocate budget based on their strategic goals and planning. For example, during the AY 2020-2021 the School of Pharmacy allocated $15,195, the School of Health Professions allocated $38,472, and the School of Dental Medicine allocated $298,500 to optimize and maximize the effective use of technology (Pillar 3). Actions included the purchase of computers (SHP), new telecommunications equipment (SP), and the creation of an Informatics and Educational Resources Center (SDM). The GSPH allocated $11,422 to hire 2 part time professors to improve the time to dissertation of doctoral students to increase graduation rates outcomes which is part of the academic quality and innovation strategic area (Pillar 1). The SOM allocated $320,112 to grant four tenure positions to Basic Science faculty so they can receive research grants (Pillar 2).

**Ensuring a Sustainable Future**

Historically, the UPR has been largely dependent on Commonwealth appropriations to fund its annual operations. Recent fiscal challenges by the Commonwealth have driven a significant reduction in appropriations historically directed towards UPR’s operations. Prior to the start of PROMESA law, the Commonwealth funded approximately $833 million or 72% of the UPR’s annual expenses. The remaining 30% was backed by the University’s own revenues and federal funds. In contrast, the funding structure of most mainland public universities is based on a majority coming from tuition, federal funds, and self-produced revenues. The MSC external funds represents 71% of the consolidated budget and the commonwealth appropriations funds are 29% for Fiscal Year 2020-2021. The University’s Government Appropriations have been reduced by over $330 million through FY’20. This has produced the shift of having less dependency on the Commonwealth, from 72% in FY’17 to 50% in FY’20 while maintaining total consolidated operational budget relatively constant.

In alignment with Pillar 4 of the Strategic Plan, Strengthening and Fiscal Sustainability, the MSC Finance Task Force was established to develop recommendations to overcome the fiscal, structural, and organizational challenges resulting from budget cuts. The objective of which is to identify areas of priority based on the strategic plan outcomes and emerging opportunities and challenges and develop specific measures that allow for greater fundraising and/or savings.

**CRITERIA 6.2 (Requirement of Affiliation 8)**

Clearly documented and communicated planning and improvement processes that provide for constituent participation and incorporate the use of assessment results.

The strategic planning process at the UPR is a three-tier process that considers the school/unit plans, campus plans, and the university system plan. It is geared towards increasing institutional effectiveness in the use of resources to attain the system goals. The development of the strategic plan at the MSC is led by the Institutional Planning and Development Committee (COPDI, for its Spanish acronym) and each of the schools Strategic Planning Committees (COPEs, for their Spanish acronym). As stated in Standard 1, the MSC Strategic Plan 2017-2022 2017 (**S1C1. MSC Strategic Plan 2017-2022**) was developed through a comprehensive review process which was highly participatory and included members of the different constituents: faculty, non-teaching staff, students, deans of schools and support units, Academic Senate, and Administrative Board. The MSC Strategic Plan 2017-2022 was approved by the MSC Administrative Board and Academic Senate. Each school developed their strategic plans aligned to the MSC plan and all were approved by the faculty at large of each school. This participatory process has become part of the institutional culture in compliance with all professional accreditation agencies.
The Dean for Academic Affairs presides the Institutional Planning and Development Committee (COPDI), which monitors the assessment of outcomes of the strategic plan. The Institutional Planning, Research, and Assessment Office assists the committee in data gathering. Information related to outcomes of the strategic plan are discussed at the Academic Senate and Administrative Board (S1C1.1-Examples of Chancellors Presentations and Certifications of the Academic Senate), and at the COPDI. The MSC Finance Taskforce also reviews outcomes of the strategic plan and aligns planning with budget allocation. The results of assessments of the strategic plan are posted at the Institutional Effectiveness Website https://daa.rcm.upr.edu/institutional-effectiveness/ thus ensuring the academic community is appraised of outcomes.

As stated on Standard 1 the MSC wants to strengthen the systematic collection of data and continuous monitoring and revision of the MSC Strategic Plan outcomes through the development of a Strategic Planning Committee of which the Chancellor or his/her appointee will be the chair. This Committee will have faculty representation from each school, from students, the MSC deans, and key administrators from the budget and finance offices and will include those responsible for developing and implementing action plans based on outcomes. This will allow for more precise alignment of strategic goals and objectives with funding allocation priorities. The Institutional Planning and Development Committee will continue to assess outcomes related to student achievement of learning and program achievements of assessment outcomes.

CRITERIA 6.3 (Requirements of Affiliation 10 and 11)
A financial planning and budgeting process that is aligned with the institution’s mission and goals, evidence-based, and clearly linked to the institutions and units’ strategic plans/objectives.

Financial planning and budgeting at the MSC are based on the MSC and the six schools’ strategic plan’s goals and objectives and the standard operational needs of the institution. The strategic plans were designed and implemented in such a way as to guide us to be able to prioritize and distribute resources to serve our mission. The planning process at the MSC aligns financial planning and budgeting processes with the mission and goals and promotes continuous improvement, monitoring, and analyzes performance and challenges towards goals achievement. As stated in Standard 1, the MSC Strategic Plan is based upon 4 pillars: Academic Quality and Innovation; Research and Innovation; Physical and Technological Infrastructure; and Strengthening and Fiscal Sustainability. The six schools’ strategic plans are aligned with these pillars. This alignment establishes a clear direction for the schools, deanships, and units, promoting the achievement of goals and fulfillment of the MSC mission. Different sources of information, such as: institutional statistics reports; schools, deanships, and support units’ annual effectiveness reports; assessment indicators and special information requirements of external entities, among others, facilitate the evaluation of the strategic planning activities. Deliberative bodies that include faculty, students, and administrative officers in the decision-making process utilize this information. Moreover, the schools, deanships, and units use assessment results for further planning and resource allocation. Resource allocation is based on priorities, once basic needs are met, and these priorities are based on the strategic plan. The MSC as part of the UPR, also follows the UPR guidance to obtain budgeted funds from the UPR Central Administration.

The UPR, in an effort to acquire ongoing sustainability has developed a Fiscal Plan aligned to strategic priorities since 2018. On March the UPR Board of Governors published the Fiscal Plan for 2021-2024 (S6C6.3- UPR Fiscal Plan 2021-2026) with the purpose of continuation of financial adequacy and it takes into consideration outcomes such as the continuous evaluation of academic programs (p.7). The UPR has a 0 based budget and every year the MSC Budget is developed through a participatory process that includes constant communication with the UPR Central Administration (S6C6.3- Integrated Budget Development Flow Chart). Within the MSC, each school and deanship submit its priorities to the Chancellor and Budget Offices prior to the beginning of the academic year based on their needs and strategic plans. The MCS
prepares an institutional plan addressing all identified priorities for the UPR Central Administration to analyze, so they can budget the needed resources to sustain its mission and goals. In case of hiring faculty staff, Central Administration authorization is requested to fill vacancies within academic programs. For example, on November 2020 the Central Administration authorized MSC to recruit 9 teaching appointments to meet the need for teaching staff in academic areas regulated by accreditations (Pillar 1) and to comply with the UPR Fiscal Plan.

Once the UPR Central Administration approves their budget allocations (S6C6.3- UPR Budget Certification 2021-2022) the MSC budget and finance office consolidate the budget adding the external funds projected (more than 70% of the total MSC budget). Schools and deanships also develop their budgets based on the moneys assigned by the UPR Budget and adding on their projected external funds. Allocation of resources is done based on priorities: employee payroll, operating expenses and restricted funds are covered first and these priorities, once basic operational needs are met, are based on strategic goals and objectives to meet the mission, new opportunities, and challenges. As stated above, the S6C6.1- Examples of Alignment- Strategic Objectives-Outcomes- Budget shows examples of the MSC Strategic Plan goals and objectives, activities, budget allocation, and actions taken during 2020-2021, and schools also undergo the same processes.

The integration of the budgeting and planning processes in the last decade has resulted in the following benefits: (1) the creation of a forecast tool, (2) improved adaptation of the MSC to the challenges of the external environment, (3) budgeting and planning cycles’ time reduction, (4) leverages of data that was previously independent, enabling management efficiency and quality control, and (5) establishment of effective linkages to broaden and achieve the organizational goals. The integration of both processes has become a meaningful part of the MSC and UPR management in terms of goal achievement, decision-making processes, and daily operations.

For example, during academic year 2018-2019 and 2019-2020, the Chancellor and the Dean for Academic Affairs conducted workshops to analyze priorities and establish the alignment between strategic goals, budget, and operational plans. The Chancellor and deans identified and prioritized objectives. The objectives pertained to maintaining professional accreditations, strengthening student services, revising academic programs, conducting research in competitive areas, faculty evaluation, research infrastructure, remodeling of physical facilities, technology infrastructure, continued improvement of administrative processes, and fund raising. This AY 2021-2022 a similar process will take place, with the Chancellors Executive Committee and the Financial-Budgeting Taskforce.

The institution and schools’ annual Effectiveness Reports (S1C1.1 - Institutional Effectiveness Report 2019-2020) are used as input for the revision of the Strategic Plan and to justify budget requests. The Report is also used to examine the attainment of institutional goals. The MSC annual budget proposal document includes a section on the previous year’s achievements, providing a continuous reference to how the institution is achieving them.

The following diagram illustrates the alignment between the Planning, Management, and Assessment processes.
Under the premise that the budget approved by the Legislature will not increase over the next several years, budget allocations have been redistributed using the monies of vacant faculty and nonteaching personnel positions (due to retirement or resignations) and other financial constraint measures mandated by the Board of Governors. These are discussed in the following sections of this report but are mentioned here as an example of swift adjustments made by the campus in response to sudden changes in the external environment. From the planning standpoint, this evidences that the institution can modify its plans when critical situations arise. The MSC community has determined that it may address the financial challenges by: (1) relying less on legislative funds allocations, (2) increasing federally funded teaching, research, and service projects, (3) increasing fund-raising initiatives, (4) developing and strengthening faculty practice at all six schools, (5) sharing resources and facilities among MSC units, and (6) creating new programs as self-financing ones which are all aligned with Pillar 4 of the MSC Strategic Plan and Institutional Priority 3.

Future plans for budgeting, financing, and planning include:

- Increase efforts in student recruitment to academic programs that represent new opportunity to generate additional income.
- Continue to improve and enhance the detailed reporting on the distribution of allocated resources aligned to the Strategic Plan objectives through the implementation of a Strategic Planning Committee which will have the responsibility of evaluating outcomes of the Plan and develop an action plan.
- The Finance Office, in coordination with the Budget Office of MSC, will continue to jointly prepare the corresponding budgetary settlement after the fiscal year and ensure that the financial accounting system provides for the monitoring, control, and information necessary for the annual preparation of the Financial Statement of the UPR.

CRITERIA 6.4 (Requirement of Affiliation 11)
Fiscal and human resources as well as the physical and technical infrastructure adequate to support its operations wherever and however programs are delivered.

AND
CRITERIA 6.7 (Requirement of Affiliation 11)
An annual independent audit confirming financial viability with evidence of follow-up on any concerns cited in the audit’s accompanying management letter.

Despite the financial situation of Puerto Rico and the constraints of the UPR, the MSC has had the ability to adequately allocate human and financial resources to support the institution’s operations and programs. Financial Sustainability is the first Self-Study Priority and Pillar 4 of our Strategic Plan. The institution utilizes a variety of assessment practices to evaluate how adequately operations are supported. Some of these assessment processes include school and program accreditation processes, strategic planning processes, and curricular management processes. The results are utilized by the schools to ensure adequate resources.

Financial Situation of the University of Puerto Rico System
The UPR continues to comply with the issuance of audited financial statements and reports required by the Uniform Guidance (i.e., Single Audit). Henceforth having issued its reports for fiscal year 2019 in March 2020 within the uniqueness to said year in the context of COVID-19 – an evolving epidemic that has radically reshaped the operations of the University, management has kept working hard to continue shortening its annual financial reporting time-to-issuance in a manner that allows for the timely and consistent completion of reports, thus achieving one of the principal characteristics of information in financial reporting as stated in Concepts Statement No. 1 of the Governmental Accounting Standards Board (GASB), Objectives of Financial Reporting. The UPR keeps making decisions based on assessment results and updated information. This has been an effective practice that has focused and enhanced its sound business practices. The University has persisted in employing various actions and initiatives that have been fruitful in the past to keep improving its timeliness over financial reporting. First, a timeline for significant milestones and to monitor the audit progress is still in place. All necessary resources (human, financial, and technological) to solve problems and to help with the progress of the audit process were identified. Likewise, regular virtual meetings among the Finance Office Directors of the eleven campuses are held in order to monitor the progress of all the steps in the course of action. There are permanent financial consultants still designated to the three biggest campuses to promptly aid in the resolution of issues related to the audit process. Also, the UPR has continued to hire professional services as an aid to handle, examine, and manage financial and qualitative essential information needed for audit processes. In the same way, regular and close communication among management, external and internal auditors, component units, and other specialists and consultants to reach an overall leaner process is still happening in a continuous way.

Moreover, the University has institutionalized the processing of monthly financial accounting and reporting which assists management in understanding performance metrics and enhances its ability to measure productivity and key performance indicators. The University is continuously producing monthly reports such as Cash Flow Statements, Liquidity Reporting, and Budget to Actual Reports, among others. Finally, an evaluation of budget alignment per academic department was done taking into consideration enrollment and courses during the 2019-2020 academic year. The evaluation was provided to the Budget Office in Central Administration and the Chancellors and used in the 2020-2021 budget assignment and distribution.

Financial Statements Status (S6C6.4- UPR Annual Audits 2017-2020)
The University of Puerto Rico commissions and undergoes an annual independent audit of its financial statements and Report on Expenditures of Federal Awards as required by the Uniform Guidance, the latter commonly referred to as Single Audit. Submission of those reports come as a requirement of 34 CFR § 668.23- Compliance audits and audited financial statements, and those of other key stakeholders for the University. These reports, for the fiscal year ended on June 30, 2021, are currently underway with a work and monitoring plan that supports managements underlying expectation to have the reports available by March 31, 2022, which is the due date to submit them to the U.S. Department of Education.
The UPR initiatives previously described have shown positive results, so it is important for the MSC to keep investing in fiscal and human resources to keep complying with state and federal agencies as well as with the Middle States Commission on Higher Education. Institutional accreditation is of utmost priority for the MSC; its administration believes in building a strong compliance culture to maintain reputation and prestige. For example, the 2020 Financial Audit stated that the accounting and financial reporting operations of certain units of the University, specifically the Medical Sciences Campus and the Mayaguez Campus, are not able to detect or prevent accounting errors effectively nor efficiently which resulted in multiple audit adjustments. It also states that account receivables include unpaid medical services provided by the faculty members of the Medical Sciences Campus (MSC) of the University to the Commonwealth’s health reform program patients. To resolve these situations, the MSC has implemented a system of Continuous Quality Improvement following a Plan-Do-Study-Act framework. For each of the actions, a project management approach has been taken so that it is clear what the action plan is, the designated individual to implement it, and the due date. Some of the steps taken to improve the Accounting Closing Cycle and the Account Receivables include:

1. Evaluate the accounting closing process to make it more agile, responsive and less time-consuming, identify areas of strengths and vulnerabilities, develop short- and long-term action plans to resolve the vulnerabilities and implement the necessary changes. Examples of actions taken by the Taskforce include:
   a. One of the identified issues was a need to update software services. To this end, the Deanship of Research is in the process of acquiring the Streamline Program which is an electronic Research Administration Platform that fits present and future needs. At the same time, the Contracts Office is evaluating different platforms to acquire one that is cost effective and time efficient in improve the billing of contracted services. Finally, the Director of the Office Information Services new director has ample knowledge with the Oracle programs (Financing Platform at the UPR) and one of the immediate plans is to maximize its use to minimize paper transactions.
   b. Develop and implement a “lines of communication” flowchart to improve communication within the MSC budget-finance-accounting areas.
   c. Decide on training needs of personnel working directly with the accounting, financial and internal auditing processes at the MSC and developed a schedule of training activities with the first one scheduled for November 2021.
   d. Develop flowcharts of each of the processes within the accounting closing process which include deadlines and responsible individuals. These flowcharts will be contained in an Operational Manual of the Financial Closing Cycle.
   e. Use the Planner Microsoft App as a project management tool. Each of the projects are organized into tasks with deadlines by the Interim Dean of Administration. This allows for better organization and planning of multiple projects at the same time.

The outcomes that will be measured, once the trainings are provided and the flowcharts distributed in October, include timeliness of the financial reports submitted from each of the administrators; accuracy of these reports, measurement of number of errors and description of the types of errors; timeliness and accuracy of the information submitted to the Central Administration Budget and Finance Offices for the development of the Single Audit. To see some of the meeting Acts please refer to S6C6.4-6.7- Examples of Finance and Budgeting Task Force Acts.

2. Work towards improving the aggressive debt collection of debts for services provided. For example, the Board of Governors approved the School of Medicine to collect the debt owed by ASEM of 48 M (S6C6.3- BoG 108 2020-2021 ASEM Debt Collection). A transaction was made with University Medical Services (SMU) for the collection of 13 M debt which was approved. The
SOM Medical Practice Plan contracted BlueHaus Capital Company to evaluate how to better organize finances and they recommended a “write off” of accounts uncollected from 2003-2015 because these debts will never be able to be collected due to the Law of Puerto Rico. Thus, a request to the UPR Finance Committee and the Board of Governors was made so that there is “write off” of 79M from accounts uncollected from 2003 to 2015 from the Medical Practice Plan. This request is pending approval.

Financial Situation of the Medical Science Campus (MSC) from fiscal years 2018 to 2024

The MSC financial status for the period spanning from fiscal years 2018 to 2024 is shown and discussed in this section (S6C6.4- Financial Status MSC 2018-2024). This financial status demonstrates a positive financial improvement in the MCS’s operations since fiscal year 2018. Data for fiscal years 2018 to 2020 (FY2018-FY2020) are based on historical and estimated data, and for fiscal years 2021 to 2024 (FY2021-FY2024) the numbers are projected. These estimates and projections already incorporate the effects of the policy measures that the UPR Board of Governors have been implementing and have approved in response to the UPR’s Fiscal Plan certified by the Fiscal Oversight Management Board of PROMESA.

The most recent historical net position of the MSC was $196.3 million in FY2018, an estimated $152.5 million at the end of the current FY2020, and a projected $173.0 million in FY2024 (Figure 5). The projected reduction of 11.9% in the net position of the MSC are mostly related to a projected reduction of 25.3% in deferred outflows of resources from $203.1 million in FY2018 to $151.7 million in FY2024. At the same time, from FY2018 to FY2024 total assets were projected to increase in $9.1 million or 3.4% and total liabilities are projected to decrease in $12.8 million or 5.2%, solidifying MSC’s solvency in the medium and long range. With the COVID-19 Pandemic the financial situation is fluid and these projections may vary, but the UPR is committed to support the MSC’s sustainability and the MSC is committed to continue implementing self-sustainable projects.

Total revenues for the MSC were $268.4 million in FY2018, an estimated $289.3 million for current FY2020, and a projected $316.2 million in FY2024 (Figure 6). This represents a projected increase of almost $47.8 million or 17.8% in total revenues compared to FY2018, enhancing MSC’s operational liquidity in the short and medium range. Total expenditures for the MSC were $303.8 million in FY2018, an estimated $312.9 million for current FY2020, and a projected $316.4 million for FY2024 which represents a projected increase of $12.6 million or 4.2% compared to FY2018. In FY2018 the MSC had a deficit of $35.4 million which is estimated to decrease to $23.6 million in current FY2020 and between FY2021 and FY2023 it is projected that the MSC will have surpluses of $9.3, $9.7, and $4.2 million but then in FY2024 will again have a small deficit of $252,535.
These estimates already incorporate the temporary losses in revenues in sales of health services and continue education courses due to the COVID-19 pandemic. However, a very important factor that will contribute to the continue increase in projected revenues for the FY2018-FY2024 period is how successful the MSC have implemented strategies geared toward strengthening and expanding its capacity for obtaining federal research grants and by generating additional revenues from the expansion of provision and sale of healthcare services within the health system in Puerto Rico. This effort has already brought benefits because it is expected that the trend in the amount of operating revenues will continue to surpass by even a larger amount the revenues obtained from non-operating sources (Figure 7). This will place the MSC in a path to eventually achieve a sustainable financial business model by which its dependence from commonwealth appropriations will become less of a burden.

This trend is seen more clearly appreciated when revenues are classified between those funds that derive from the Commonwealth government appropriations versus funds that are generated directly by the MSC through federal grants and revenues from the provision and sale of healthcare services, for example (Figure 8). By calculating a ratio were the MSC own generated funds are placed in the numerator and government appropriations are in the denominator it is possible to see how many dollars the MSC can generate by each government dollar. In FY2018 for every dollar of commonwealth government dollar the MSC received, an estimated and additional $1.14, this is projected to gradually increase to $1.56 in the FY2024. The MCS’s management team will be able to convert each dollar the Commonwealth government invests into an additional $1.56 of revenues for the MSC. In summary, the MSC has been able to successfully gear its
budgetary situation into a sustainable path and adapt to the budget cuts and changes that are required by the UPR’s Fiscal Plan approved by the certified by the Fiscal Oversight Management Board of PROMESA.

Human Resources

This section addresses matters concerning MSC faculty and non-faculty human resources which is the most important resource of any academic institution. As of FY2020, the MSC had a total of 2,414 employees which are distributed between 1,164 (48.2%) faculty and 1,250 (51.8%) non-faculty employees that translates in a ratio of 107 non-faculty employees for every hundred faculty employees (Figures 9 & 10). The absolute numbers and the ratio have changed since FY2011, when the campus had a total 2,333 employees from which 874 (37.5%) were faculty and 1,459 (62.5%) were non-faculty employees which results in a a ratio of 167 non-faculty employees for every hundred faculty members. This reduction in the ratio of non-faculty to faculty employees is due to a 33.2% increase in faculty employees from FY2011 to FY2020 versus a reduction of 14.3% in non-faculty employees during the same period.

Of the 2,414 employees that the MSC had in FY2020, 1,499 (68.6%) are women, 1,871 (77.5%) work full-time, and 1,178 (48.8%) are 50 years or older. The workload and age distribution of the personnel has changed from FY2011 when 90.3% worked full-time and 41.9% were 50 years or older which indicates that not only the MSC personnel has become older but also that the institution is relying more heavily on part-time personnel. These distributions and trends, however, may differ according to the type of personnel. For example, in FY2020 non-faculty employees compared to faculty employees had a higher share of
women (68.6% vs 55.1%), had a higher share of full-time personnel (96.6% vs 57.0%), and had a lower share of personnel 50 years of age or older (41.1% vs 57.0%). Figure 10 summarizes data on the ratio of non-faculty to faculty employees.

These trends in the MSC personnel could be partially explained by the Commonwealth and UPR system financial status, which has lasted more than a decade and has presented a major challenge to the MSC in terms of personnel recruitment. There is a freeze on retiring employees' positions, except for positions that impact teaching, service, and research goals, which are assessed on a case-by-case basis by university authorities. The achievement of institutional goals has been addressed by the institution’s capacity to re-engineer its organizational structure while maintaining standards of excellence despite fewer employees. By streamlining operations, the institution has been able to minimize the impact of the workload of retiring personnel that at this moment cannot be replaced by new recruits due to the institutional hiring freeze. The MSC has also been able to relocate some human resources (non-faculty) to other departments according to institutional needs or have requested special permission from university authorities to hire in those cases in which skills are essential.

Technological transformation in the administrative processes has been an important tool for the MSC to achieve its institutional goals. The campus has been continuously upgrading its technological infrastructure to increase efficiency in administrative and human resources processes. During the last decade, newly hired personnel have been required to have knowledge and skills in the use of computers and applications and the MSC has progressively transformed the administrative processes, implementing paperless or automated ones, based on standard operating procedures.

**Impact of Covid-19 Pandemics on MSC Financial Situation**

On March 12, 2020, the Governor of Puerto Rico imposed a lockdown in Puerto Rico due to the COVID-19 pandemic. The University of Puerto Rico Medical Sciences Campus (UPRMSC) moved to online education to continue its academic programs. Later, on May 21, 2020, an executive order was issued declaring exempt from the lockdown “Researchers from university laboratories, provided that they abide by the social distancing rules and follow all precautionary measures in discharging their duties”. This allowed the faculty to continue their research activities. On June 12, 2020, the government allowed the opening of practice and research laboratories “in order for students to be able to complete their academic programs, provided that all precautionary measures are strictly complied”. This permitted the institution to complete its laboratory and clinical courses and or rotations.

To provide faculty, employees, and students the precautionary measures necessary to deal with the COVID-19 pandemic, the MSC have incurred in additional expenses such as the purchase of Personal Protective Equipment, cleaning and disinfecting solutions, physical barriers, hand sanitizers, thermometers, laptop

![Figure 10-MSC Ratio of Non-faculty to Faculty Employees: FY2011 & FY2020](image-url)
computers (loaned to students), among others. To finance these additional expenses until December of 2020 the MSC had been assigned $595,132 from the CARE ACT funds, and to subsidize the services provided by the UPRMSC, the Government of Puerto Rico provided $1,212,577.00 for research activities related to COVID-19 and $540,000.00 to the intern and residents, nurses and medical technologists employed by the MSC.

Library Resources
The Conrado F. Asenjo Library (S6C6.7- Conrado F. Asenjo Library) offers the most comprehensive collection of bibliographical health sciences resources in the Caribbean. The library serves the campus community, practicing health professionals, and the community at large. The library consists of the following sections: Administrative Office, Circulation and Reserve, Reference, Collection Development and Administration, Serials, Special Collections (Puerto Rican, History of Medicine, and Bailey K. Ashford Collections), Center for Multimedia Resources and Services, and the Institutional Historical Archives. The collection comprises 29,673 print book titles and 83,950 electronic book titles; 1,989 active journal subscriptions covering the fields offered by the campus academic programs. The library has access to 72,219 electronic journal titles through databases such as ClinicalKey, ScienceDirect, Scopus, EBSCOHost, ProQuest, Ovid, Karger eJournals, and Wiley Online Library. Other resources such as Micromedex and Infotrac Encyclopedias and databases, Credo Reference Academic Core, CREDO Reference for Nursing and Allied Health, CREDO Reference for Pharmaceutical Science, CREDO Reference for Rehabilitation and Therapy, NCM Nutrition Care Manual, NCM Pediatric Nutrition Care Manual, NCM Sports Nutrition Care Manual, PsychiatryOnline, Sage Research Methods, Scopus, Thieme MedOne ComSci, and full access to the National Library of Medicine products, serves the information needs of the academic community. The library recently acquired Elsevier’s EMBASE database thru the Title V of the US Department of Education grant number PO31S200104. Remote and local access to our databases is available to authorized users by means of OpenAthens. Interlibrary loans and Document delivery service is available to borrow physical books or receive electronic documents from other libraries.

Library personnel include six librarians who hold academic rank and 12 nonteaching staff members. Library faculty members participate in teaching, the campus Academic Senate, institutional committees, and accreditation processes. As a Resource Library of the National Network of Libraries of Medicine (NNLM) of the National Library of Medicine (NLM), the library participates in the network’s document delivery program. It is also a member of the Consortium of Southern Biomedical Libraries (CONBLS). Through these programs, materials that are not available in the collection are obtained from other health sciences libraries using interlibrary loans. Besides the NNLM/NLM collaborative agreements, the library has established arrangements with other units of the UPR Library System. The library liaisons to the six schools provides support to the faculty in conjunction with the collection development section to identify e-books that reinforce online courses, as well as other available open access resources. The reference section has available through the website metaliteracy modules that provide an opportunity for the development of these skills to students with their use in courses offered by the faculty (https://www.upr.edu/biblioteca-rcm/modulosdemetaliteracia)

The library occupies a five-story building adjacent to the campus main building and the Puerto Rico Medical Center hospitals. Office and stack areas measure 38,044 sq. ft. Targeted to satisfy the patrons’ learning styles and needs. These include group meeting rooms, LCD interactive “smart board” system, 24/7 study area, photocopy rooms, computer workstations with Internet connection, and two multipurpose computer classrooms with projector, screen, podium, and desktop computer, with room for 15 persons each. Services include a Wi-Fi environment, end-user searching areas equipped with personal computers in the Circulation Section and 6th floor with Internet. Other services include interlibrary loans and document delivery. The Reference Section offers a strong information literacy program in collaboration with professors from the campus schools that formally integrate the teaching of information skills into courses. As a result, these activities are integrated into the course syllabi. Besides participating in formal courses, reference librarians
also offer workshops and individual training in the use of library resources. Reference services are also offered online through the Virtual Reference service “Ask the Librarian” (Pregúntanos), sing SpringShare LibChat (a chat widget) or by LibAnswers (using an online form), and replying in 24 hours or less. In this Covid-19 reality, were developed strategies that allowed the user to have the services continuously online. The library personnel have been able to increase the LibChat service schedule, which now operates from Monday to Friday, 7 am to 4 pm with librarians from other sections of the library taking 5 or more hours weekly shifts. Also available on the library’s webpage is LibGuide, a content management system we use to create subject specific resources on topics from writing styles, strategically effective searches and how to use library's databases., a content management system we use to create subject specific resources on topics from writing styles, strategically effective searches and how to use library's databases. As of this moment, there is a remodeling project of the fourth floor of the library. When finished, it will house recent print journals, and space for our academic community. It will have a combination of study rooms, lounge chairs and tables to accommodate different necessities; five group rooms 4 people maximum, two rooms for 6 people maximum, 17 tables 4 people maximum, 60 one person cubicles, 12 lounge chairs.

In response to the COVID-19 Pandemic, the reference section developed a page of scientific literature exclusively on COVID-19 and made it available on the library website for faculty and researchers, as well as an orientation page to reach the community to orient with reliable and quality information. The reference staff reinforced and created new guides using the Springshare LibGuides program available 24/7 from the library website. The staff currently offers online workshops, and workshop recordings to offer asynchronously to students and faculty on different topics such as review and critical evaluation of scientific literature, APA 7, Mendeley, PubMed, Plagiarism, use of the website and bases data, technological tools for distance education, among others. The staff offers the opportunity for one-on-one or group online meetings to faculty and students as requested by appointment.

Technology
The Medical Sciences Campus is committed to developing and maintaining the technology infrastructure to support its mission of teaching, service, and research, and its administrative processes. It comprises a centrally supported digital network that supports high speed data communications within the UPR System and between the campus schools. The information system integration on campus has evolved to a more efficient and distributed, being able to incorporate new technologies and systems from the University of Puerto Rico Central Administration. The implementation of a new electronic system has been completed to enable access to services through Internet browsers, in which students can see all the courses they are enrolled, access their grades, and carry out the financial aid process.

As explained in Standard 1, in 2019, the MSC changed on-premises Blackboard Learn to the latest version of Blackboard Learn Ultra in a cloud-based environment. This innovative learning management systems provides a better experience of distance learning for academic programs. Also, the MSC created a division “RCM Online” dedicated to enhancing and support Distance Education for Faculty and Students. Recently the MSC was recognized with the statement of accreditation approved by MSCHE and affiliated with Quality Matters (QM) which certifies and establishes the quality standards to distance education programs.

The campus Information Systems Office (OSI, for its Spanish acronym) is responsible for the operation, maintenance, and security of the main campus networks, and adequately safeguards confidentiality, reliability, availability, and integrity of the information system. OSI oversees coordinating and communicating core technology that supports all schools and programs. Recent improvements include a redesign of the main MSC Backbone network to support 10Gibs interconnection between buildings and the MSC Datacenter. The OSI upgraded his Core router, Firewalls, and Core Switch to support 10Gbitbs connections which improve user experiences when accessing high bandwidth-oriented applications including video conference and external MSC networks services such as Cloud-based Learning Management Systems.
New facilities including the new School of Pharmacy building and remodeling of the School of Health Professions and School of Nursing buildings include new amphitheaters with multimedia capabilities, and multiple computer labs. Some of the main achievements have been that all schools have the necessary computers and software, standardized video conferencing equipment, electronic classrooms, wired and/or wireless environments, and mobile stations shared by departments and units.

The UPR Central Administration has updated its administrative computer systems in a network comprising the eleven campuses and the Central Administration. The system uses the Oracle eBusiness Suite and provides an integrated solution that allows the University to unify its, Financial, and almost all its Human Resources Systems. To improve security, innovation, and technological transformation at the UPR. In July 2020, the Information Systems office of the Central Administration completed the migration of email accounts and the calendar of employees and faculty of the University of Puerto Rico to the Microsoft 365 platform. This new email and calendar system provides a set of efficient tools to support users in the receipt and handling of spam, phishing, and other cyber-attacks. Also, it provides our university community with access to the most up-to-date technology. The change to the new institutional e-mail system entailed several months in adjustments of educational and administrative processes, in addition to other changes in institutional systems for continuity of the communication of the faculty with the students. According to work plans of the Central Administration, it is expected to migrate the student accounts to the Microsoft 365 email platform.

The MSC continues to improve upon its technology infrastructure and resources to ensure they can effectively carry out the campus teaching, services, and research mission. The University is currently upgrading its wired and wireless campus network infrastructure to provide increased speed, capacity, reliability, and security to all academic, administrative, clinical and research buildings as well as outdoor areas.

Physical Facilities
The physical facilities at MSC accounts for nine (9) principal buildings and with a total of approximately 1,500,000 square feet of net usable area, considering all MSC structures and facilities. There are six (6) main schools which are: School of Medicine, Pharmacy, Nursing, Public Health, Dental Medicine, and the School of Health Professions. Being an urban campus inside the Puerto Rico Medical Center (PRMC) has great potential and benefits. The most important benefit is the interaction with students, teaching staff, professionals, employees, and patients. Faculty can keep a clinical practice accessible to the community at the Outpatient Clinic. With the “Tren Urbano” (urban mass train system) it makes it easy to travel within other MSC affiliated facilities off campus and makes feasible the potential of expansion.

The MSC began an exhaustive plan of rehabilitating the existing buildings to maximize the use of space together with new infrastructure and systems. Recently, we completed the remodeling work of the 4th Floor of the Conrado F Asenjo Library to maximize the use of the space on the area, the modernization of technology and systems, including ADA Compliance Bathroom on the floor. Other important projects under current construction:

- Full Modernization of Panoramic Elevator of the Main Building: The main objectives of the Modernization of Panoramic Elevator of the Main Building is the replacement of all the components of the elevators which have become most affected by wear and tear and normal use over an extended period and an update in the electrical wiring for energy saving.
- Intramural Dental Practice Plan: The Intramural Dental Practice Plan will increase the number of dental chairs with the purpose of increasing the number of residents rotating.
- Remodeling of the Institute of Developmental Deficiencies, a Temporary Roof Waterproofing repair, Exterior Building Painting, and Inter-building pedestrian bridges Repairs, among others.
• Relocation of the Deanship of Students offices (Registrars, Financial Aid, Office of the Dean of Students, Quality of Life among others) to the second floor of the Main Building. Hurricane Maria destroyed the previous offices, and these were relocated to different areas around the campus. The students have requested to have all support services centralized and this is the reason for the project.

Other important projects under design are the Construction of and Pharmaceutical Laboratory, Remodeling of Caribbean Primate Center Areas/ Mechanical Systems, and the Improvements of the Neuroscience Building. All the Projects included in the Capital Improvement Plan of 2020-2021 to 2024-2025 for the MSC has a total budget approved of $14,936,921.00 and Post Maria Hurricane FEMA total budget disbursed of $5,076,672.38.

Facilities Maintenance Plan
Campus maintenance is provided by the Physical Resources Department, which has 91 employees and is divided into 6 units that deal with plumbing, electricity, conservation, HVAC systems, maintenance, and moving services. The department also services the off-campus facilities and operates with a $4,178,193.00 annual budget. The Maintenance Unit oversees the areas of equipment and physical facilities. The Preventive Maintenance Plan includes a description of the equipment, spare parts list, and a preventative maintenance program based on the equipment’s operation and maintenance manuals. It also establishes the yearly-programmed tasks. The department implemented a job order system that has facilitated maintenance tasks and follow-up processes. The system includes a satisfaction questionnaire that has helped identify strengths and weaknesses and determine new and efficient ways to solve existing problems. It has also been helpful in the reassignment of personnel according to institutional needs and reengineering of processes.

During the period under study, the department implemented several energy efficient measures such as the use of high-performance lighting, installation of reflective sheets on lamps, and the installation of movement sensors in compliance with an energy audit. Along with these measures, the department implemented an automated control for the air conditioning system that has been effective in maintaining room temperature comfort and saving energy costs. In its effort to be ecologically conscious and to incorporate “green practices”, the department launched a policy, to buy “green seal” cleaning products, which is part of the eco-friendly measures leading to the LEED certification.”

Since the COVID-19 epidemic, the Department of Physical Resources established a cleaning and disinfection process for all areas used in the Campus, in compliance with the guidelines established by the CDC and the protocol of the Medical Sciences Campus.

CRITERIA 6.5
Well-defined decision-making processes and clear assignment of responsibility and accountability.

The two legislative pieces (Act 1 of 1996, as amended and Act 13 of 2013) that establish the UPR and their corresponding by-laws attend to matters of its governance structure, as well as the duties, responsibilities of the different components. They establish the relationships between duties, responsibilities, and accountability matters related to policy development and decision making, including involvement of the different constituencies. As will be further explained in Standard 7, the Board of Governors, through its policy-making role, is ultimately accountable for all macro structural components of the University System, such as financial stability, academic excellence, and integrity, including accreditation; fiscal robustness, strategic planning; and an assessment culture, among others. The working agenda of this body is designed to promote institutional stability in ways that foster our mission of developing academic, service, and research activities for the benefit of the university community and society at large. Among the powers and duties of the Board of Governors that can be found at https://www.juntagobierno.upr.edu/junta-de-gobierno/funciones/ the following are related to the planning and decision-making processes.
• Approve the University's comprehensive development plan and review it annually.
• Approve the appointment of the Director of Finance Office of the University of Puerto Rico.
• Consider and approve the draft budget of the university system that the President submits annually, approve, and maintain a uniform accounting and auditing system for the use of university funds in accordance with the law and regulations.
• Fully attend to the requirements of the accrediting entities, the regional ones and their own, among them, the Council of Education of Puerto Rico, the "Middle States Commission on Higher Education", and those that offer private professional accreditations.

The President is the Chief Executive Officer of the university system and is appointed by the Board of Governors for an indefinite term, upon consultation to the academic senates. He/she presides over the University Board, which is composed of the chancellors of the eleven UPR campuses, faculty representatives elected by each academic senate, student representatives elected from each student council, the directors of Central Administration offices, the Vice-President of the University of Puerto Rico and the Associate Vice-Presidents for Academic Affairs, Student Affairs and Research and Technology. The University Board, through the Act of the University of Puerto Rico, has the functions of keeping the university system integrated with respect to its joint planning and advises the President in coordinating the progress of the different institutional units in academic, administrative, and financial matters. The University Board oversees academic planning and development; allocation of the system’s resources through assessment of academic programs; research and service activity; as well as faculty, non-teaching personnel, and student issues. This is the forum in which members of the eleven campuses can discuss academic issues as a system and make recommendations to the Board of Governors regarding them.

As stated above, planning at the UPR begins with the Central Administration budgeting aligned to strategic areas. The same process occurs concurrently at the different campuses. At the MSC, the budget is developed by the Budget Office taking into consideration the needs and priorities of all units and of the MSC. It is discussed and approved with the Chancellor and the deans and approved by the Chancellor. The UPR Central Administration receives the budget request and assigns moneys according to the UPR priorities. Due to PROMESA law, the UPR Central Administration must have its budget approved by the Financial Oversight and Management Board of Puerto Rico. The UPR Central Administration finally approves the UPR Budget, which includes allocation of moneys to the MSC (S6C6.3 UPR Budget Certification 2021-2022). Once the total allocation of moneys is received, the Budget Office assigns the appropriate portion to each school based on their budget proposals. This distribution is approved at the Administrative Board. After this is completed, the MSC administration and each of the schools’ administrators consolidate this budget to include external funding. Planning and allocation of funding priorities is done after the consolidated budget is completed so that discretionary money is used properly.

Any needs identified through the year and not considered in the initial budget is worked at the same levels: once the schools have their approved budgets, they can modify plans based on needs and their strategic plans with the approval of the dean. If they need an increase in budget this must be worked with the Budget Office at the MSC and approved by the Chancellor. Any needs of the campus that is not part of the budget, must be presented to the Chancellors Office and supported by evidence. Modifications are approved by the Chancellor, who is the ultimate responsible for the management of the MSC budget with the Office of Finance overseeing the process. Ongoing identified needs are the result of assessment processes that evidence outcomes of the strategic plans and program priorities. Answer to Criterion 6.3 explains the alignment between strategic planning, budgeting, and funds allocation and the continuous communication between the MSC planning entities, Academic Senate, units, Administrative Board, and deanships with the Budget Office and Finance Office.
Programs are continuously assessed, including services needed by students, so that appropriate modifications can be made. This usually happens through accreditation processes but programs that are not accredited are also evaluated continuously following the UPR guidelines (S3C3.1- BoG #45 Programmatic Assessment Requirement). The final responsible administrator of each programs’ results is the dean of the school. Assessment results are used by the units when allocating resources and developing their budget plans. These programmatic reviews improve agility in programming and create efficiencies to save resources. Key performance indicators are found at the MSC dashboard as stated in Standard 1.

CRITERIA 6.6 (Requirements of Affiliation 8 and 10)
Comprehensive planning for facilities, infrastructure, and technology that includes consideration of sustainability and deferred maintenance and is linked to the institution’s strategic and financial planning processes.

As demonstrated in the answers to Standard 1, and Standard 6 Criterions 6.1 to 6.4, the MSC has appropriate allocation of resources based on comprehensive planning which supports the achievement of its mission, goals, and objectives. Strategic and financial planning are aligned as described above. The UPR has a deferred maintenance plan (S6C6.6- BoG 32 2018-2019 Deferred Maintenance) and a Permanent Improvement Plan (S6C6.6- UPR Permanent Improvement Plan updated 2020-2021). The MSC in addition, has defined strategies and goals that guarantee the sustainability of institutional projects. These strategies and goals strengthen the institution’s commitment to its contribution to health and teaching in its subjects in Puerto Rico, the Caribbean and for other Spanish-speaking communities. This involves recurring sources of financing for the maintenance of teaching support infrastructure with access to information networks and modernization of laboratories. Academic support organizations work together to achieve the development and implementation of activities that guarantee the correct use of financial resources to have at the forefront aspects related to distance education. Short-term plans are prepared to address changes in the government's daily public policy decisions regarding appropriate protocols in laboratory use. Long-term plans are made to analyze the state of the infrastructure to act in a way aimed at improving services and adapting to changes in the environment.

For example, as explained in Standard 1, during the COVID-19 Pandemic, the MSC opened a distance education office responsible for developing and implementing plans for the service with appropriate funds allocations, the RCM Online Division. As previously explained training strategies were used to maximize available educational tools for distance education and the adaptation of the courses that were usually carried out in person. The Campus maintains a recurring annual budget of funds from laboratory fees and technology fees, which are tempered to the Academic strategies and goals of the Campus for the different academic terms in the different faculties, and these were used for distance learning throughout the pandemic. The Campus maintains rules for the distribution of these resources in a systematic way so that they are restricted to activities related to student learning. The Administrative Board and the Academic Senate examined, evaluated, and approved the activities carried out by the different curricular committees of schools. Adequate learning experiences be it distance learning, hybrid, or face-to-face has been guaranteed. In addition, the MSC has been successful in guaranteeing safe access to laboratories and classroom courses, as well as regular and safe access to hospitals for students and residents who are caring for patients.

Another example would be technology planning, which is driven at the highest level, from the University of Puerto Rico and the Medical Sciences Campus Strategic plan. More detailed and specialized planning occurs within each IT operating unit (Enterprise Technology Services, Enterprise Application Services, Technology Support Services, and Security & compliances services) to forecast budget requirements each fiscal year. There are specific sections of these strategic plans that address technology needs/requirements for academic, research, health services, and administrative functions, and those are used as the overarching 'roadmap' of technology services that Information Technology focuses on. The campus Information
Systems Office strives to work in partnership across schools to create more fluid, streamlined services that increase the medical sciences campus effectiveness.

The campus Information Systems Office organizational structure is well defined and separates IT support functions into logical operational units: technology infrastructure, application management, user support services, and security & compliance services. Also, there are other IT Technology Units for some schools or to support specific internal areas. Decisions that affect other IT units or the campus at large follow a hierarchical process from unit managers or directors to the campus IT Director to the chancellor and if necessary, the academic senate. The UPR has a policy and process for the ethical and legal use of information technology. ([S6C6.6- UPR Policy and Process for Ethical and Legal use of Information Technology](#))

Like most public higher education institutions, the University of Puerto Rico faces the common challenges of thin budgets, staffing constraints in certain operational areas, and the ongoing effort to remain ahead of the constant march of technology innovation. To provide the best services possible with existing resources, IT focuses on the areas that have the most direct impact on the Campus students, faculty, and staff to ensure that those areas are being serviced adequately.

**CRITERIA 6.8 (Requirement of Affiliation 10)**

**Strategies to measure and assess the adequacy and efficient utilization of institutional resources required to support the institution’s mission and goals; and**

The University Board, at the central level, oversees academic planning and development; allocation of the system’s resources through assessment of academic programs; research and service activity; as well as faculty, non-teaching personnel, and student issues. This is the forum in which members of the eleven campuses can discuss academic issues as a system and make recommendations to the Board of Governors regarding them.

The Administrative Board of the MSC is composed of the deans of the six schools; the Deans of Academic Affairs, Administration, Student Affairs and Research; and one elected student representative and two elected faculty representatives from the Academic Senate. The Directors of Legal Affairs, Budget, and Human Resources Offices participate in the Administrative Board meetings as permanent guests. As the governing body of the MSC, the Administrative Board discuss all financial planning aligned to the strategic plan, budgetary decisions, resource allocation, campus-wide planning, policies, rules, and regulations and other matters as per request of the Chancellor or as referred by the Academic Senate. At the Administrative Board, the MSC leadership evaluates assessment results and outcome indicators of the strategic plan, of accreditation agencies, and of the required program evaluation processes. The members discuss the budget and allocation of resources within the MSC, and their units based on outcome measures and plan accordingly. These assessment measures, taken as a whole, provides for adequate measuring and assessment of utilization of resources. Since it is ongoing, it also provides for identification of new needs in real time. This promotes the campus development as a financially sound academic health center and has been instrumental in surviving the current financial situation, as evidenced in fairly and equally distributed fiscal measures.

**CRITERIA 6.9 (Requirement of Affiliation 8)**

**Periodic assessment of the effectiveness of planning, resource allocation, institutional renewal processes, and availability of resources.**

The Board of Governors has established the basis for the use of assessment results in decision-making to improve the institution. Over the last decade, the University has made a purposeful and intensive effort to
institutionalize assessment at all levels of the operation. There are system-wide policies regarding assessment applicable to all units (S5C5.2- UPR Policy on Institutional Effectiveness; S3C3.1- UPR Policy on Program Accreditation; S3C3.1- BoG #45 Programmatic Assessment Requirement). In compliance with these policies, the MSC continuously undergoes assessment through the continuous evaluation of the MSC Strategic Plan (SIC1.1- MSC Strategic Plan Executive Summary 2021) and each of the schools’ assessment of their strategic plans through the processes already established in Standard 1 (SIC1.1- MSC Schools’ Executive Summaries), through continuous accreditation processes of its programs and evaluation of programs that are not accredited.

For example, Academic Excellence in Pillar 1 of the MSC and part of all the schools’ strategic plans. Allocation of resources to sustain programs, be it human, technological, or financial is always a priority because education is the MSC mission. To this end, and as explained on Standard 5, each school has a curriculum committee that is responsible, or the continuous assessment and planning related to each academic program’s outcomes and to evaluate the need for resources.

For example, on March 2019 the Committee on Curricular Integration and Planning (CIPE), which is the curricular management committee of the MSC of which all associate deans for academic affairs of the 6 schools plus other administrators that provide support to all academic areas are member, requested that all programs be evaluated based on specific data such as retention and graduation rates to make decisions regarding inactivation of programs as a means to budget for programs that have appropriate outcomes. This exercise allowed schools to objectively evaluate outcome data to better plan for fiscal sustainability. Each school has implemented processes for continuous evaluation of their programs. At the School of Medicine there is an Annual Curricular Retreat where program outcomes are discussed and the Curriculum Committee has a cycle of curricular revisions for courses, phases of the curriculum, longitudinal integrated threads, and the student assessment plan are also reviewed and revised. The School of Dental Medicine has a Curriculum Committee that revises a group of determined courses and programs yearly. At the School of Health Professions and the School of Public Health each program has an annual evaluation of their outcomes which are discussed with the programs’ faculty. At the School of Nursing there is an Annual Faculty Retreat where program outcomes are discussed. The School of Pharmacy has a Curriculum Outcomes Assessment Plan, and its evaluation is the responsibility of the Assessment Committee. Results are discussed yearly at faculty meetings and the Curriculum Committee is responsible for implementing the recommendations approved. Therefore, all schools have implemented systems to evaluate their program outcomes and based on these outcomes, needs are identified and discussed with school administrators for budget allocation. Resources are requested, approved, and allocated as can be seen in the examples of school allocation of resources in answer to Criterion 6.1.

The MSC Strategic Plan’s Pillar 3 is Physical and Technological Infrastructure and, as can be seen by the S6C6.1- Examples of Alignment- Strategic Objectives-Outcomes- Budget and the schools’ allocation of funds during 2020-2021 (see response to Criterion 6.1), institutionally and at each unit, upon evaluation and planning, a need for further enhancement of technology was identified. Extensive plans were made, and budget allocated for online systems, improvement of billing and payment, computers, software, and equipment. Overall, more than $1,000,000 was allocated to technological enhancement by the MSC administration and the schools.

Conclusion:

Standard VI was met.

1. The MSC systematically evaluates and aligns planning processes and resources.
2. The resources are sufficient to support the institutional goals, objectives, and strategies and to respond to opportunities and challenges.
3. Budged allocation is aligned with strategic plans at the MSC and at the schools ‘levels.
4. There are multiple strategies to assess adequacy and efficient utilization of the MSC resources.

**Recommendations and/or Areas of Improvement**

1. Expand sources of external funds to ensure financial stability of the MSC.
2. Request that university authorities redesign and expedite the special permission process for core faculty and essential non-teaching employees to comply with the MSC mission and goals.
3. Continue with the plan to improve accounting and financial operations and consider the use of an online project management tool for improvement of communication.
XIV. STANDARD VII: Governance, Leadership and Administration

The institution is governed and administered in a manner that allows it to realize its stated mission and goals in a way that effectively benefits the institution, its students, and the other constituencies it serves. Even when supported by or affiliated with governmental, corporate, religious, educational system, or other unaccredited organizations, the institution has education as its primary purpose, and it operates as an academic institution with appropriate autonomy.

CRITERIA 7.1 (Requirement of Affiliation 12)
An accredited institution possesses and demonstrates the following attributes or activities: A clearly articulated and transparent governance structure that outlines roles, responsibilities, and accountability for decision making by each constituency, including governing body, administration, faculty, staff, and students;

UPR System Governance
The University of Puerto Rico (UPR) and its campuses, including the Medical Sciences Campus (MSC) is governed and administered in a manner that allows it to realize its mission and goals. Law 1 of 1996, as amended (S7C7.1-Law #1 1966 Law of the UPR), and Law 13 of 2013, the University of Puerto Rico (UPR) (S7C7.1- Law 13 2013 Law of the UPR) clearly articulate the governance structure of the UPR with defined roles and responsibilities, in which all its constituents are held accountable for their work. The Law of the UPR is published and available to all. The UPR system was originally governed by a Board of Trustees, which was composed of 17 members: The governor of Puerto Rico appointed 14 citizens to six-year terms; one student and two faculty members were elected (by their respective peers on the University Board, described below) to one-year terms. The appointment of diverse community representatives by the governor was intended to safeguard the public interest by including members of the financial, legal, health, education, and other non-academic sectors. Although students and faculty participated in decision making at all levels of the UPR system, the MSC Academic Senate and other deliberative bodies at other campuses proposed changes to the number, composition, selection, and terms of service of members of the Board of Trustees. The changes proposed by the MSC were intended to increase the participation of the faculty and students and include the representation of non-teaching personnel (S7C7.1- MSC Academic Senate Certifications 35, 36, 37).

In 2013, the Legislature of Puerto Rico amended Law 1 of 1966, the Law of the University of Puerto Rico, by Law No. 13 of April 30, 2013, creating a new UPR Board of Governors composed of 13 members. This was the most significant change that was presented at the last MSCHE accreditation. The board now has two students (one undergraduate, one graduate), two professors from different units within the university system, and the secretary of education of Puerto Rico (ex officio). The inclusion of the secretary of education as an ex officio member of the UPR Board of Governors is considered an important step to ensure the proper synergy between the public-school system and the state’s university system. Law 13 of 2013 specifically establishes clear criteria for the selection of the other 8 members of the UPR Board of Governors in terms of areas of expertise—such as finance, arts, science, and other professional areas—to reflect a diversity of representation that fortifies the institutional mission, perspective, and culture. The Law also requires that three members be alumni of the University of Puerto Rico, and one of these must be a distinguished social and community leader. One member should live outside of Puerto Rico with established ties to the Island, to include the 4 million Puerto Ricans who live on the mainland United States and in other parts of the world. The chair of the UPR Board of Governors is one of the 13 members and is elected by the board members. Additionally, under the provisions of Puerto Rico Article 16 of Law No. 2 of 2017 (S7C7.1- Fiscal Agency and Financial Advisory Authority), known as the Fiscal Agency and Financial Advisory Authority (FAAFA) Law of Puerto Rico due to PROMESA law, the executive director of that agency, or its designee, is an ex-officio member of the UPR Board of Governors (BoG). The composition
of the BoG provides for sufficient expertise and their bylaws for sufficient independence to ensure the integrity of the institution.

In addition, with this amendment, the relative participation of faculty representatives and the absolute participation of students were increased. Faculty representation changed from two of 17 to two of 13. Student representation increased from one of 17 to two of 13, placing students on an equal footing with the faculty. In addition, this amendment set the groundwork for more appropriate student participation, with provisions that incorporate one representative at the undergraduate level and a second at the graduate level.

The S7C7.1-Law #1966 Law of the UPR and S7C7.1-Law 13 2013 Law of the UPR legislative pieces along with the UPR General Bylaws (S2C2.1 - UPR General Bylaws) are readily available to UPR and MSC academic community and to the public at large. Together, they define the governance structure of the UPR and its campuses, the roles and responsibilities of the President, the Chancellors, Deans, Associate Deans, Department Chairs, and of all its constituents including the role of students in the governance structure and their participation at the Board of Governors, Campuses Academic Senates, Campuses Administrative Boards, Campuses Student Councils, among others. These laws and bylaws assign authority and accountability for policy development and decision making, including a process for involvement of constituents in such processes.

CRITERIA 7.2 (Requirements of Affiliation 12 and 13)

An accredited institution possesses and demonstrates the following attributes or activities: A legally constituted governing body that serves the public interest, ensures that the institution clearly states and fulfills its mission and goals, has fiduciary responsibility for the institution, and is ultimately accountable for the academic quality, planning, and fiscal well-being of the institution;

a. has sufficient independence and expertise to ensure the integrity of the institution.
   Members must have primary responsibility to the accredited institution and not allow political, financial, or other influences to interfere with their governing responsibilities;

b. ensures that neither the governing body nor its individual members interferes in the day-to-day operations of the institution;

c. oversees at the policy level the quality of teaching and learning, the approval of degree programs and the awarding of degrees, the establishment of personnel policies and procedures, the approval of policies and bylaws, and the assurance of strong fiscal management;

d. plays a basic policy-making role in financial affairs to ensure integrity and strong financial management. This may include a timely review of audited financial statements and/or other documents related to the fiscal viability of the institution;

e. appoints and regularly evaluates the performance of the chief executive officer;

f. is informed in all its operations by principles of good practice in board governance;

g. establishes and complies with a written conflict of interest policy designed to ensure the impartiality of the governing body by addressing matters such as payment for services, contractual relationships, employment, and family, financial or other interests that could pose or be perceived as conflicts of interest; and

h. supports the chief executive officer in maintaining the autonomy of the institution.

The UPR Board of Governors (BoG) (https://www.juntagobierno.upr.edu/), serves the public interest and is responsible for the fulfillment of the institutional mission and goals, has a fiduciary responsibility toward the institution, and is ultimately accountable for the academic quality, planning, and fiscal well-being of the institution. The board has sufficient independence and expertise to ensure the integrity of the institution; it is responsible for the quality of teaching and learning, the approval of degree programs, the awarding of degrees, the establishment of personnel policies and procedures, the approval of policies and bylaws, and the assurance of strong fiscal management. It has a policy-making role in the financial affairs of the
institution to ensure integrity and strong financial management, appoints and regularly evaluates the performance of the President (chief executive officer), and supports President in maintaining the autonomy of the institution. All the members of the UPR Board of Governors comply with a written conflict-of-interest policy that was designed to ensure the impartiality of this body.

The BoG, through its policy-making role, is ultimately accountable for all the macro-structural components of the university system. This includes financial stability, academic excellence, and integrity (including accreditation); fiscal robustness and strategic planning; and ensuring the presence of an assessment culture, among other elements. The institution is aware that in a multi-campus system, the BoG must be very vigilant attending to all the interests of all the system’s constituents and components, within the systemic context.

As a result of the aforementioned awareness and vigilance, the working agenda of this body has been designed to promote institutional stability in ways that foster the mission of developing academic, service, and research initiatives for the benefit of the university community and society at large. In November 2020, through Certifications 028 and 029 (S7C7.2- BoG Committees Priorities 2020) the BoG established, in accordance with the provisions of its internal regulations, the standing committees that are responsible of key priority areas: appeals and law and regulations, academic affairs, student affairs, financial affairs, the retirement system, audits, development, and infrastructure and technology. In addition, the following two special committees were ratified: the Special Committee for Academic–Administrative Restructuring and University Reform and the Special Research Committee. In accordance with the internal regulations of the UPR Board of Governors, the board may establish other permanent or special committees to assist in the performance of its function and in the discharge of its responsibility. The powers and duties of the UPR Board of Governors can be found at https://juntagobierno.upr.edu/facultades-y-deberes/ and some are presented below:

- Approve the university’s comprehensive development plan and review it annually.
- Authorize the creation, modification, and reorganization of the campuses, centers, and other institutional units (colleges, schools, faculties, departments, and dependencies) of the university.
- Authorize the creation and elimination of non-faculty deanships.
- Approve and/or amend the UPR General Bylaws, the UPR General Student Bylaws, the student bylaws of each campus, the retirement plan bylaws, and any other regulations that might apply.
- Appoint, in conjunction with the academic senates or equivalent bodies of the respective units, the president of the university and the chancellors of the university units and of any other autonomous units that are created within the university system and that, due to their nature, the UPR Board of Governors determines must be directed by a chancellor.
- Approve the appointment of the director of the Finance Office of the University of Puerto Rico.
- Consider and approve the draft budget of the university system that the president submits annually and approve and maintain a uniform accounting and auditing system to ensure that university funds are used in accordance with the law and the regulations of the institution.
- Establish the procedure for the temporary replacement of university officials.
- Establish the general rules for granting scholarships or any other financial aid to students in the public university system.
- Develop mechanisms to ensure that the students who transition from the local high schools, especially public ones, to the university system are educated in an environment that is appropriate to the university level.
- Authorize the creation of subsidiary or affiliated corporations that offer services to the university community and/or the people of Puerto Rico.
- Fully attend to the requirements of the accrediting entities, both regional and local, among which are the Council of Education of Puerto Rico, the Middle States Commission on Higher Education, and several that offer private professional accreditations.

Figure 11. Organizational Chart of the UPR Board of Governors

Any board member may attend committee meetings, except in cases of a possible conflict of interest, but will not interfere with the processes, work, deliberations, or decisions of the committees to which he or she does not belong. In terms of communication with the campuses and broader university community, the UPR Board of Governors has a webpage (https://www.juntagobierno.upr.edu/) where all the information regarding meetings, appointments, policies that have been approved, recordings of meetings, and other relevant initiatives are posted. All the regulations that are approved by the UPR Board of Governors are disseminated through electronic mail to all the members of the academic community.

Except for the two student representatives, the two faculty representatives—who are elected by their peers in the institution—and the FAAFA representative, the other members of the Board of Governors are appointed by the governor, with the approval of the Puerto Rico Senate. The members of the BoG have staggered terms and perform their duties as outlined in the Law of the university and until their successors are appointed and qualified.

The BoG appoints the UPR President who is the chief executive officer of the UPR (S7C7.2- BoG Appointment of Interim President) and approves the UPR Budget (S6C6.3- UPR Budget Certification 2021-2022). Other duties of the BoG are stated in the UPR Law and UPR General Bylaws and operationalized in policies and certifications such as the Certifications which guide the evaluation of the president and chancellors of the University by the BoG (S7C7.2- President and Chancellors Evaluation Procedures Policy). The BoG evaluates the performance of the president who reports to the BoG which is responsible for working with the president to set performance goals, indicators, and evaluate them on a regular or ongoing basis. The BoG publishes the Presidents’ Plan yearly.

As explained in Standard 2, the BoG members are guided by the Government Law of Ethics (S2C2.3-Law of Government Ethics) and their conflicts of interest policies and process (S2C2.4-BoardofGov Bylaws; S2C2.4- BoardofGov Recusal) that assures that those interests are disclosed and that they do not interfere with the impartiality of governing body members or outweigh the greater duty to secure and ensure the academic and fiscal integrity of the institution. Thus, the institution and its Board of Governors adhere to a
conflict-of-interest policy that ensures the academic and fiscal integrity of the institution including that the president, nor any other chief executive officer of the Government of Puerto Rico serve as chair of the BoG.

Meetings of the Board are transmitted live and recorded (link at the BoG webpage directed to YouTube https://www.youtube.com/watch?v=fvVMTrunf0s) and there is a published calendar of meeting (https://juntagobierno.upr.edu/). The BoG published to the whole academic community all approved certifications (S7C7.2- BoG Email with Certifications).

CRITERIA 7.3

An accredited institution possesses and demonstrates the following attributes or activities: A chief executive officer who

a. is appointed by, evaluated by, and reports to the governing body and shall not chair the governing body;

b. has appropriate credentials and professional experience consistent with the mission of the organization;

c. has the authority and autonomy required to fulfill the responsibilities of the position, including developing and implementing institutional plans, staffing the organization, identifying and allocating resources, and directing the institution toward attaining the goals and objectives set forth in its mission;

d. has the assistance of qualified administrators, sufficient in number, to enable the chief executive officer to discharge his/her duties effectively; and is responsible for establishing procedures for assessing the organization’s efficiency and effectiveness.

The president is the chief executive officer of the university system and is appointed by the UPR Board of Governors (after having consulted with the various academic senates and following the UPR General Bylaws) for an indefinite term. The president is appointed by, evaluated by, and reports to the BoG and cannot not chair this committee. The president of the University of Puerto Rico must possess the appropriate credentials and professional experience consistent with the institutional mission which are evaluated thoroughly through the appointment process. The Law of the University of Puerto Rico gives the president the authority and autonomy required to fulfill the responsibilities of this position (S7C7.1-Law #1 1966 Law of the UPR; S7C7.1- Law 13 2013 Law of the UPR). The president has the support of qualified administrators and is responsible for establishing procedures for assessing the organization’s efficiency and effectiveness (S2C2.1 - UPR General Bylaws) (see Figure 12, below).

The president is the director of the university system. The president coordinates and supervises university work and is also responsible for harmonizing the programs and projects of these bodies and officials and taking his/her/they own initiative to promote the development of the university. He/she/they presides over the University Board, which is composed of the chancellors of the 11 UPR campuses, faculty representatives elected by each academic senate, student representatives elected by each student council, directors of the central administration offices, executive vice president of academic affairs and research, vice president of student affairs, vice president of external resources, vice president of philanthropy, and vice president of professional and distance programs. Concomitantly, the University Board publishes a calendar of meetings (http://juntauniversitaria.upr.edu/mod/page/view.php?id=3) and the academic community and public have access to all approved certifications (http://juntauniversitaria.upr.edu/mod/page/view.php?id=9). In the answer to Criterion 7.4 the roles of the University Board are explained.

The organizational chart of the president’s central administration office is presented below:
The Law of the UPR enumerates the duties of the president of the UPR system, which are as follows:

- Enforce the objectives, rules, regulations, and budget plans for university development.
- Officially represent the university.
- Preside over the University Board.
- With the counsel of (and for consideration by) the University Board and the recommendations of the various units and programs of the entire UPR system, formulate a comprehensive development plan for the university as a whole and for its annual reviews.
- Submit (to the UPR Board of Governors) the regulations of general application and all those agreements of the university board that require the board’s approval.
- Formulate an integrated project budget for the entire university system based on the project budgets submitted by the chancellors (once said budgets have been approved by the administrative boards of the respective campuses); with the recommendations of the University Board, submit the budget for the consideration and approval of the UPR Board of Governors.
- Submit to the UPR Board of Governors, for its consideration, the appointments of campus chancellors, the finance director, and those other officials who require the confirmation of the governing body.
- Appoint or hire the technical and administrative staff of his/her office and the personnel of any university dependencies that are not under the administrative jurisdiction of any campus or college.
- Resolve any appeals that may have been filed against the decisions of the chancellors.
- Establish and maintain relationships with other universities and cultural centers in Puerto Rico and abroad.
- Render an annual report to the UPR Board of Governors on all aspects of university life.

The chancellor is the chief executive officer of the MSC as it is an autonomous campus according to Chapter 12, Article 12.2 of the UPR General Bylaws (S2C2.1 - UPR General Bylaws). The chancellor is nominated by the President after an official process of evaluation by the faculty, staff, and students of the MSC as per Article 19 of the UPR General Bylaws. The chancellors’ expertise and experience are evaluated through this confirmation process. The chancellor is appointed by the UPR BoG. The chancellors have the
maximum academic and administrative authority within their units. According to the UPR General Bylaws, Section 19.3, the chancellors at the UPR are responsible for:

- Orienting and supervising personnel and teaching, technical, research, and administrative functions.
- Develop the budget based on recommendation of departments, faculty, and other dependencies which must be approved by the Administrative Board and submitted to the President and the University Board.
- Represent their institutional unit in formal activities, ceremonies, and academic functions.
- Preside the Academic Senate, the Administrative Board, and the faculty meetings.
- Appoint and hire personnel and other administrators.
- Resolve appeals of decisions that are contrary to the deans.
- Submit an annual report of the campus activities to the president and BoG.

CRITERIA 7.4
An accredited institution possesses and demonstrates the following attributes or activities: An administration possessing or demonstrating

a. an organizational structure that is clearly defined and that clearly defines reporting relationships;

b. an appropriate size and with relevant experience to assist the chief executive officer in fulfilling his/her roles and responsibilities;

c. members with credentials and professional experience consistent with the mission of the organization and their functional roles;

d. skills, time, assistance, technology, and information systems expertise required to perform their duties;

e. regular engagement with faculty and students in advancing the institution’s goals and objectives;

f. systematic procedures for evaluating administrative units and for using assessment data to enhance operations.

Figure 11 above presents the organizational structure of the University of Puerto Rico’s central administration. Each office/unit role is clearly described, with defined reporting relationships included. This organizational structure is appropriate in size and the organization it represents is filled with credentialed and experienced personnel who assist the chief executive officer to fulfill his/her/they roles and responsibilities in a manner consistent with the institutional mission. This organizational structure was constructed with the input of faculty and students to fulfill the mission, goals, and objectives of the University of Puerto Rico; assessment data is used to improve university operations. The University Board, through the Law of the University of Puerto Rico, is charged with keeping the university system integrated with respect to its joint planning and advises the president on coordinating the progress of the different institutional units in academic, administrative, and financial matters. The University Board oversees academic planning and development, the allocation of system resources through the assessment of academic programs, research and service activities, and issues concerning the faculty, non-teaching personnel, and students. This is the forum in which members of the 11 campuses can discuss academic issues as a system and make recommendations to the UPR Board of Governors regarding them. Other duties of the University Board (S7C7.4- Internal Policy of the University Board) are as follows:

- Review the general regulations of the University of Puerto Rico, submitting recommendations for their examination by the academic senates and evaluating the reports they issue because of that examination; submit said reports to the Board of Governors for its consideration.
• Review the general regulations of the students at the University of Puerto Rico and submit their recommendations to the UPR Board of Governors for the final consideration of that body.
• Evaluate the systemic strategic plan of the University of Puerto Rico that the president submits to it—the University Board—and formulate such recommendations as are deemed pertinent, thereafter submitting these recommendations for the consideration of the UPR Board of Governors.
• Evaluate the draft of the university system’s integrated budget, as formulated by the president of the university, that is to be submitted to the UPR Board of Governors.
• Resolve any appeals that might be filed against the decisions of the administrative boards, the academic senates, or the board of academic degree and title recognition, according to the provisions of the UPR General Bylaws, the regulations regarding the administrative appeal procedures of the University of Puerto Rico, and the regulations regarding internal appeals of the University Board.
• Evaluate and submit the student bylaws of each autonomous institutional unit (and approved by the Academic Senate or equivalent bodies) to the Board of Trustees.

The UPR Board of Governors has established the basis for the use of assessment results in decision making to improve the institution. Over the last decade, the university has made a purposeful and intensive effort to institutionalize assessment at all levels of the operation. There are system-wide policies regarding assessment that are applicable to all the units (S5C5.2- UPR Policy on Institutional Effectiveness; S3C3.1- UPR Policy on Program Accreditation; S3C3.1- BoG #45 Programmatic Assessment Requirement). The Office of the Associate Vice President of Academic Affairs, in coordination with the dean of academic affairs and the assessment offices of each campus, submits yearly assessment reports following the requirements of the system-wide policies. These include assessment data on student admission, enrollment, retention, and graduation rates, and faculty scholarly production, among other data. (see MSC Institutional Effectiveness Report 2019-2020 at S1C1.1 - Institutional Effectiveness Report 2019-2020). The board’s explicit support and clear directives regarding assessment, as evidenced by the above-mentioned certifications, have been decisive in terms of the university’s significant development.

MSC Governance

As described in the Institutional Overview, the MSC is composed of the Schools of Medicine, Dental Medicine, Public Health, Pharmacy, Nursing, and Health Professions and of the deanships of academic affairs, administration, student affairs, and research (See Figure 13. MSC Organizational Chart). The Deanship of Research was created in 2018, as a result of strategic planning and budgeting, through Certification No. 020, JG, 2018-2019, of the UPR Board of Governors. Its purpose is to support scientific research, the training of researchers, and compliance with institutional, local, and federal requirements. This is the biggest change in the governance structure at the MSC since the last accreditation visit. The current organizational chart is presented below:
As stated above, the chancellor of the MSC is the chief executive officer of the campus, reports to the university president, and presides over the MSC Academic Senate and Administrative Board.

The MSC Administrative Board is composed of the deans of the six schools—the deans of academic affairs, administration, student affairs, and research—one elected student representative, and two elected faculty representatives from the Academic Senate. The election processes for the student and faculty representatives are established by the UPR General Student Bylaws and in the MSC Academic Senate Bylaws (7C7.4- MSC Academic Senate Bylaws), respectively. The directors of legal affairs, budget, and human resources participate in the Administrative Board meetings as permanent guests. As the administrative governing body of the MSC, the Administrative Board oversees all major budgetary decisions, resource allocation, campus-wide planning, policies, rules and regulations, leaves of absence, granting of academic rank, tenure, promotions, sabbatical leaves, and other matters per the request of the chancellor or as referred by the Academic Senate (https://juntaadministrativa.rcm.upr.edu/wp-content/uploads/sites/24/2020/04/Reglamento-Interno-JA.pdf). At Administrative Board meetings, the MSC leadership promotes the adequate use of funds and resource allocation aligned to strategic priorities and planning and provides a collegiate environment for the discussion and analysis of crucial issues regarding the institution. This promotes the campus’s development as a financially sound academic health center and has been instrumental in the university’s being able to survive the current financial situation, as evidenced by the fairly and equally distributed fiscal measures. Information about the MSC Administrative Board is readily available at its website (https://juntaadministrativa.rcm.upr.edu/) where certifications and other documents are posted. It meets monthly and its Internal Rules and Regulations Policy is, at this moment being revised (S7C7.4- Internal Rules and Regulations MSC Administrative Board).

The Academic Senate is the deliberative forum of the academic community and is composed of 36 senators elected by the faculty, 14 ex officio members (university president, MSC chancellor, deans, directors of the campus library and the campus counseling office), six elected student senators, three ex officio student senators (student representatives of the University Board and Administrative Board, and president of the MSC General Student Council), and two regular guests (faculty and student ombudspersons). The Academic Senate oversees all academic matters, i.e., new programs, major curriculum revisions, faculty and student issues, academic policies, and academic planning. The chancellor, the deans, two faculty senators and one student senator participate in both the Academic Senate and the Administrative Board,
thus guaranteeing communication and coordination between the two decisional bodies. The MSC mission and goals and Strategic Plan are discussed and approved by the Academic Senate. This assures adequate input from the academic community about these key institutional documents. The Academic Senate publishes its meetings’ calendar yearly (S7C7.4- Academic Senate Meetings Calendar 2020-2021), and all decisions, certifications, meeting acts among other are found in its webpage (https://senadoacademico.rcm.upr.edu/).

Each school at the MSC is headed by a dean, who responds to and works in close collaboration with the chancellor. Each dean’s staff consists of at least one associate dean for academic affairs, an associate or assistant dean for student affairs, and an administrator. Some schools also have an assistant dean for research. All the schools are divided into departments, each with a director. The schools’ associate deans for academic affairs meet monthly with the MSC Associate Dean for Academic Affairs at the Curricular Planning and Implementation Committee (CIPE) to discuss policies and procedures related to the MSC and university wide. For example, during the 2018-2019 AY the schools underwent an evaluation of all their programs as a request from the UPR Vice President of Academic Affairs. This was organized and analyzed at the CIPE. At the same time, campus academic deans meet monthly with the UPR Vice President of Academic Affairs thus ensuring adequate communication and streamlining throughout the university system. The same process occurs for the schools’ associate/assistant deans for student affairs which meet monthly with the MSC Dean for Student Affairs to discuss matters pertaining to all such as graduation.

The department directors are the chief executive and administrative officers of each department as per the UPR General Bylaws (S2C2.1 - UPR General Bylaws) Article 25. Department directors preside over the meetings and are the official representatives of the departments before the faculty and university authorities. They oversee the implementation of all the agreements made by the members of the department in their duly constituted meetings and raise, before the corresponding authorities, those agreements that require it. These individuals will be ex officio chairpersons of all the permanent committees of the department except the personnel committee. Regarding the personnel committee, the director of the department will be a member of such, and its president will be elected from among its members. The committee structure at each school varies, but all the schools have personnel committees at the school and department levels, as well as curriculum, administration, and assessment committees at the school level. These committees have representation from the faculty of the different departments.

Upon examination of the current institutional rules, regulations, and other normative documents, it is evident that the present structure and governance of the MSC are appropriate and well-organized, with clearly defined functions for each academic and support unit. Lines of authority are well-established and appropriate mechanisms are in place to assure harmonious institutional operations. The MSC has adequate autonomy to safeguard institutional integrity and to carry out the responsibilities related to policy development and resource allocation and that are consistent with its mission. The campus system of governance and leadership facilitates achieving the mission and goals by allowing members of the academic community the opportunity to be heard at all institutional levels. The faculty and students have representation in all the governing bodies. This helps foster and facilitate compliance with the MSC mission and goals, within a framework of a clearly stated academic freedom policy.

**Student Governance**

Student governance is exercised through the General Student Council and the schools’ student councils. The General Student Council is composed of student representatives from each of the schools, while the schools’ councils have representatives from all the student sectors and levels within the schools’ programs. The councils are the bodies that are officially recognized as representing the students, who also participate in almost all the school and department committees, the Academic Senate, the Administrative Board, the University Board, the UPR Board of Governors, student liaison committees, and assessment committees at the school and campus levels. Regulations and bylaws for student participation at the different
organizational levels are established by both Section 22.10 of the UPR General Bylaws (S2C2.1 - UPR General Bylaws) and Chapters 3 and 4 of the UPR General Student Bylaws (S2C2.1 - UPR General Student Bylaws).

Student input is instrumental in policymaking and revision. They are members of the Board of Governors, the MSC Administrative Board, and the MSC Academic Senate. Student input is also taken into consideration at faculty evaluations for promotion, curricular evaluations, and program evaluations. The Institutional Assessment Committee also takes student input into consideration through the evaluations of different areas of interest, course and faculty evaluations, and evaluations of student life. There are student liaison committees at the school level that meet regularly with the associate/assistant dean of student affairs of each school and work on issues affecting student life and performance.

At least once every semester, there is a campus-wide meeting between students and the chancellor and deans to talk about areas affecting student life. A report is prepared delineating issues assigned to specific campus officials for prompt attention and such solutions as might be called for. Students also actively participate in the accreditation process of programs. These committees and workgroups, as well as the multiple school-based and campus-wide participatory forums, foster interaction between all the community constituents, particularly students.

CRITERIA 7.5
An accredited institution possesses and demonstrates the following attributes or activities: periodic assessment of the effectiveness of governance, leadership, and administration.

Institutional assessment and the assessment of student learning are discussed throughout all the Standards. The University of Puerto Rico, in the guises of both the central administration and the MSC, periodically assesses the effectiveness of the institution’s governance, leadership, and administration. Over the past several years, the university has made a purposeful and intensive effort to institutionalize assessment at all levels of its operation. Certification 136 of the UPR Board of Trustees (2003-2004) establishes the policy on institutional effectiveness for the UPR system (S5C5.2- UPR Policy on Institutional Effectiveness) and Certification 033 of the MSC Academic Senate (2007-2008) establishes the assessment policy for the MSC (S5C5.2- MSC Institutional Effectiveness Academic Senate Certification).

The UPR Board of Governors has established system-wide policies regarding assessment that are applicable to all the units as explained previously. The Office of the Associate Vice President of Academic Affairs, in coordination with the deans for academic affairs of each campus, submit assessment reports following the requirements of the system-wide policies. These include assessment data on faculty scholarly production, student admissions, and enrollment, retention, and graduation rates, among others. The board’s explicit support of and clear directives regarding assessment, as evidenced by the above-mentioned certifications, have been decisive in the institution’s significant development. In addition, the MSC has an Institutional Planning, Research, and Assessment Office which mission is to provide the information basis and necessary knowledge for planning, decision making, continuous improvement, policy improvement, evaluation, effective administration, and the allocation of the resources that facilitate the accomplishment of the institutional mission. The effectiveness of the MSC emerges from the contribution of each program and service to the common purpose of attaining the institutional goals.

The governance is assessed through the evaluation of the President and the Chancellor (S7C7.2- President and Chancellors Evaluation Procedures Policy). Every 3 to 5 years the Chancellors are evaluated. The process of evaluating the Chancellor of the MSC was implemented by the MSC Academic Senate in January 2021 through online surveys to all constituents. The results were final in June 2021. By this date the Chancellor and the President had both stepped down, thus the results were sent to the BoG. Further
implementation of other academic administrators’ assessment is planned for the next academic year. Evaluation of the Chancellor will continue in an ongoing basis.

**Conclusion:**

The standard was met.

1. The MSC is a well-structured institution that is governed by clearly defined sets of bylaws, rules, regulations, procedures, certifications, policies, and procedures.
2. The academic, research and service accomplishments clearly demonstrate that the organizational leadership of the MSC and the governance of same allow the attainment of its mission and goals for the success of academic and programmatic areas.
3. The institutional structures, leadership, management, and governance have proven to be effective and resilient, allowing for and encouraging institutional development in times of crisis, financial constraints, and administrative–political changes.
4. There are numerous participatory mechanisms in the institutional governance that provide opportunities for the faculty and students to elect representatives at the different decision-making levels of the MSC and the UPR system.

**Recommendations and/or Areas of Improvement**

1. The mechanisms for finding all the institutional policies and regulations should be simplified.
2. Systematize the evaluation of all academic administrators.
## XV. Evidence Inventory - Requirements of Affiliation

<table>
<thead>
<tr>
<th>Requirement of Affiliation</th>
<th>Documents, Processes, and Procedures</th>
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</thead>
</table>
| 1. The institution is authorized or licensed to operate as a postsecondary educational institution and to award postsecondary degrees; it provides written documentation demonstrating both. Authorization or licensure is from an appropriate governmental organization or agency within the Middle States region (Delaware, the District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, and the U.S. Virgin Islands), as well as by other agencies as required by each of the jurisdictions, regions, or countries in which the institution operates. | • UPR Cert. CEPR 2018 – 210  
• MSCHEN Status of Accreditation Statement (SAS) June 27, 2019 |
| 2. The institution is operational, with students actively pursuing its degree programs. | • Certification of Students Enrollment AY 2020-2021 by degrees  
• Academic Calendar 2021-2022 |
| 3. For institutions pursuing Candidacy or Initial Accreditation, the institution will graduate at least one class before the evaluation team visit for initial accreditation takes place (Step 7 of the initial accreditation process), unless the institution can demonstrate to the satisfaction of the Commission that the lack of graduates does not compromise its ability to demonstrate appropriate learning outcomes. | • N/A |
| 4. The institution’s representatives communicate with the Commission in English, both orally and in writing. | • English and Spanish are the official languages of the Government of Puerto Rico – Language Law of 1902 |
| 5. The institution complies with all applicable government (usually Federal and state) policies, regulations, and requirements. | • UPR Annual Audits 2017-2020  
• Default Cohort Rates (Title IV) |
| 6. The institution complies with applicable Commission, interregional, and inter-institutional policies. These policies can be viewed on the Commission website, www.msche.org. | • UPR – Medical Sciences Campus - Statement of Accreditation Status  
• S2C2.8- Institutional Federal Compliance Report |
| 7. The institution has a statement of mission and goals, approved by its governing body that defines its purpose within the context of higher education. | • MSC Strategic Plan 2017-2022  
• Compliance with S1 and S6 |
| 8. The institution systematically evaluates its educational and other programs and makes public how well and in what ways it is accomplishing its purposes. | • MSC Institutional Strategic Plan’s Assessment Plan 2017-2022  
• MSC Institutional Student Learning Assessment Plan 2017-2022  
• Accreditation Status of MSC Academic Programs AY 2020-2021 |
<table>
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<tr>
<th>Requirement of Affiliation</th>
<th>Documents, Processes, and Procedures</th>
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<tbody>
<tr>
<td>9. The institution’s student learning programs and opportunities are characterized by rigor, coherence, and appropriate assessment of student achievement throughout the educational offerings, regardless of certificate or degree level or delivery and instructional modality.</td>
<td>• Compliance with S3, S4, S5 and S6</td>
</tr>
</tbody>
</table>
| 10. Institutional planning integrates goals for academic and institutional effectiveness and improvement, student achievement of educational goals, student learning, and the results of academic and institutional assessments. | • Accreditation Status of MSC Academic Programs AY 2020-2021  
• MSC Catalog 2021-2024  
• Compliance with S3 and S5 |
| 11. The institution has documented financial resources, funding base, and plans for financial development, including those from any related entities (including without limitation systems, religious sponsorship, and corporate ownership) adequate to support its educational purposes and programs and to ensure financial stability. The institution demonstrates a record of responsible fiscal management, has a prepared budget for the current year, and undergoes an external financial audit on an annual basis. | • MSC Strategic Plan 2017-2022  
• MSC Institutional Student Learning Assessment Plan 2017-2022  
• Compliance with S1, S3, S4, S5, and S6 |
| 12. The institution fully discloses its legally constituted governance structure(s) including any related entities (including without limitation systems, religious sponsorship, and corporate ownership). The institution’s governing body is responsible for the quality and integrity of the institution and for ensuring that the institution’s mission is being carried out. | • UPR Budget Certification 2021-2022  
• UPR Fiscal Plan 2021-2026  
• Financial Status MSC 2018-2024  
• Operational Budget FY 2021  
• Compliance with S6 |
| 13. A majority of the institution’s governing body’s members have no employment, family, ownership, or other personal financial interest in the institution. The governing body adheres to a conflict-of-interest policy that assures that those interests are disclosed and that they do not interfere with the impartiality of governing body members or outweigh the greater duty to secure and ensure the academic and fiscal integrity of the institution. The institution’s district/system or other chief executive officer shall not serve as the chair of the governing body. | • UPR Certification of Related Entities for MSC  
• UPR General Bylaws Spanish  
• UPR General Bylaws English  
• Compliance with S7 |
|                           | • Board of Governors Bylaws  
• Law of Government Ethics  
• Ethics on MSC at https://rcm2.rcm.upr.edu/etica-en-el-recinto/  
• Compliance with S2 and S7 |
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<tr>
<th>Requirement of Affiliation</th>
<th>Documents, Processes, and Procedures</th>
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<tr>
<td>14. The institution and its governing body/bodies will make freely available to the Commission accurate, fair, and complete information on all aspects of the institution and its operations. The governing body/bodies ensure that the institution describes itself in comparable and consistent terms to all of its accrediting and regulatory agencies, communicates any changes in accredited status, and agrees to disclose information (including levels of governing body compensation, if any) required by the Commission to carry out its accrediting responsibilities.</td>
<td>- Board of Governors Bylaws</td>
</tr>
</tbody>
</table>
| 15. The institution has a core of faculty (full-time or part-time) and/or other appropriate professionals with sufficient responsibility to the institution to assure the continuity and coherence of the institution’s educational programs. | - Official Faculty List and credentials.  
- Faculty Staff by Credentials and Regular-Irregular Appointments  
- Compliance with S3 |
XVI. Evidence Inventory by Standards and Criteria of Accreditation

XVII. STANDARD I: Mission and Goals

The institution's mission defines its purpose within the context of higher education, the students it serves, and what it intends to accomplish. The institution's stated goals are clearly linked to its mission and specify how the institution fulfills its mission.

<table>
<thead>
<tr>
<th>Standard I Criteria</th>
<th>Documents, Processes, and Procedures</th>
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</thead>
</table>
| 1. Clearly defined mission and goals that: | • S1C1. MSC Strategic Plan 2017-2022  
• S1C1.1 UPR Strategic Plan 2017-2022  
• S1C1.1- Self-Study Research  
• S1C1.1- Institutional Assessment Strategic Plan’s Operational Plan  
• S1C1.1 – Strategic Plan Report 2017-2018  
• S1C1.1 – Strategic Plan Achievements Report 2018-2019  
• S1C1.1 – Institutional Effectiveness Report 2019-2020  
• S1C1.1- MSC Institutional Plan for Learning Assessment  
• S1C1.1- Report of the MSC Institutional Assessment Strategic Plan’s Operational Plan  
• S1C1.1- Report of the MSC Institutional Plan for Learning Assessment 2021  
• S1C1.1 MSC Schools’ Executive Summaries  
• S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021  
• S1C1.1- Examples of Chancellor Presentations and Certifications of the Academic Senate  
• S1C1.1- MSC Strategic Plan Executive Summary 2021 |
| a. are developed through appropriate collaborative participation by all who facilitate or are otherwise responsible for institutional development and improvement; | |
### Standard I Criteria

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<tr>
<th>Documents, Processes, and Procedures</th>
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<tr>
<td>S1C1.2 - Institutional Effectiveness Report 2019-2020</td>
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</table>

3. Institutional goals focus on student learning, related outcomes, and on institutional improvement; are supported by administrative, educational, and student support programs and services; and are consistent with institutional mission.

4. Periodic assessment of mission and goals to ensure that they are relevant and achievable.

<table>
<thead>
<tr>
<th>Documents, Processes, and Procedures</th>
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<tr>
<td>S1C1.1- MSC Institutional Plan for Learning Assessment</td>
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### Standard II Criteria

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<th>Documents, Processes, and Procedures</th>
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<tr>
<td>S1C1.1- MSC Strategic Plan Executive Summary 2021</td>
</tr>
<tr>
<td>S1C1.1 MSC Schools’ Executive Summaries</td>
</tr>
</tbody>
</table>

#### XVIII. STANDARD II: Ethics and Integrity

Ethics and integrity are central, indispensable, and defining hallmarks of effective higher education institutions. In all activities, whether internal or external, an institution must be faithful to its mission, honor its contracts and commitments, adhere to its policies, and represent itself truthfully.

<table>
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<tr>
<th>Documents, Processes, and Procedures</th>
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<tr>
<td>S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021</td>
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<tr>
<td>S2C2.1-UPR General Bylaws</td>
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<td>S2C2.1 - Faculty Manual Rev2021</td>
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<td>S2C2.1-MSC AS# 38, 1997-1998</td>
</tr>
<tr>
<td>S2C2.1- BoG #59 2012-2013</td>
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<tr>
<td>S2C2.1- #93-140 CES</td>
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<td>S2C2.1-Circular 95-01</td>
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<td>S2C2.1- UPR BoG # 45 (2006-07)</td>
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<td>S2C2.1 - CRECED #167 JA-RCM</td>
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<tr>
<td>S2C2.1 - UPR General Student Bylaws</td>
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<td>S2C2.1- MSC General Student Bylaws</td>
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<td>Standard II Criteria</td>
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</table>
| 2. A climate that fosters respect among students, faculty, staff, and administration from a range of diverse backgrounds, ideas, and perspectives. | • S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021  
• S2C2.1 - Faculty Manual Rev2021  
• S2C2.2- MSC Student Manual 2019-2020  
• S2C2.2 UPR Coexistence Policy  
• S2C2.2 - BoG #58 2004-2005  
• S2C2.2-Title IX regulations  
• S2C2.2- RCM No Discrimination TIX  
• S2C2.2- Faculty Duties, Responsibilities, and Rights  
• S2C2.2- Students Duties, Responsibilities, and Rights  
• S2C2.2 – Pregnant Womens’ Rights President’s Letter 2015  
• S2C2.2-BoG #133 2015-2016 Reasonable Accommodation and Academic Support  
• S2C2.2-Crime Awareness and Campus Security Act of 1990 |
| 3. A grievance policy that is documented and disseminated to address complaints or grievances raised by students, faculty, or staff. The institution's policies and procedures are fair and impartial, and assure that grievances are addressed promptly, appropriately, and equitably. | • S2C2.3- Uniform Administrative Law of the Government of PR  
• S2C2.1- UPR General Bylaws  
• S2C2.3- Appeals Processes UPR  
• S2C2.1 - UPR General Student Bylaws  
• S2C2.1- MSC General Student Bylaws  
• S2C2.3- Student Grievance Process MSC  
• S2C2.3- Regulations for Disciplinary Procedures of UPR Employees  
• S2C2.3- Students Ombudsperson Complaints Report  
• S2C2.3- UPR Sexual Harassment Policy  
• S2C2.3-Sexual Violence Protocol |
| 4. The avoidance of conflict of interest or the appearance of such conflict in all activities and among all constituents. | • S2C2.3-Law of Government Ethics  
• BoG #20 2003-2004; Council on Higher Education #130 1988-89 |
<table>
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<tr>
<th>Standard II Criteria</th>
<th>Documents, Processes, and Procedures</th>
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</table>
| 5. Fair and impartial practices in the hiring, evaluation, promotion, discipline, and separation of employees. | - BoG #30 2008-2009  
- S2C2.4- Board of Gov Recusal  
- S2C2.4 -BoG #63  2007-2008  
- S2C2.4- BoG #123 1996-1997  
- S2C2.4- BoG # 124 1996-1997 |
| 6. Honesty and truthfulness in public relations announcements, advertisements, recruiting and admissions materials and practices, as well as in internal communications. | - S2C2.1 - UPR General Bylaws  
- S2C2.1 - Faculty Manual Rev2021  
- S2C2.5- Recruitment, Retention and Evaluation  
- S2C2.5-MSC Faculty Evaluation Instructions 2016  
- S2C2.5- MSC Adm Board # 56, 2017-2018  
- S2C2.5- MSC Adm Board #16, 2018-2019  
- S2C2.5- MSC Differential Plan 2004 |
| 7. As appropriate to mission, services, or programs in place:  
a. to promote affordability and accessibility, and;  
b. to enable students to understand funding sources and options, value received for cost, and methods to make informed decisions about incurring debt. | - S2C2.6-Clear Communication approach of the National Institute of Health, Office of Communications and Public Liaison  
- S2C2.6- Procol for Acceptable Use of Social Media |
| 8. Compliance with all applicable federal, state, and Commission reporting policies, regulations, and requirements to include reporting regarding:  
a. The full disclosure of information on institution-wide assessments, graduation, retention, certification and licensure or licensing board pass rates;  
b. The institution's compliance with the Commission's Requirements of Affiliation;  
c. Substantive changes affecting institutional mission, goals, programs, operations, sites, and other material issues which must be disclosed in a timely and accurate fashion;  
d. The institution's compliance with the Commission's policies. | - S2C2.8- Institutional Federal Compliance Report |
<table>
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<tr>
<th>Standard II Criteria</th>
<th>Documents, Processes, and Procedures</th>
<th>S2C2.3-Law of Government Ethics</th>
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<tbody>
<tr>
<td>9. Periodic assessment of ethics and integrity as evidenced in institutional policies, processes, practices, and the manner in which these are implemented.</td>
<td>• Documents, Processes, and Procedures</td>
<td>• S2C2.3-Law of Government Ethics</td>
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</table>
XIX. STANDARD III: Design and Delivery of the Student Learning Experience

An institution provides students with learning experiences that are characterized by rigor and coherence of all programs, certificate, and degree levels, regardless of instructional modality. All learning experiences, regardless of modality, program pace/schedule, level, and setting are consistent with higher education expectations.

<table>
<thead>
<tr>
<th>Standard III Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
</table>
| 1. Certificate, undergraduate, graduate and/or professional programs leading to a degree or other recognized higher education credential, designed to foster a coherent student learning experience and to promote synthesis of learning. | • S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021  
• S3C3.1 - Academic Program Development Policy  
• S3C3.1- UPR Policy on Program Accreditation  
• S3C3.1- BoG #45 Programmatic Assessment Requirement  
• S3C3.1- MSC ACCREDITATIONS July 2021  
• S3C3.1- Radiologic Technology Program Action Plan  
• S3C3.1- JRCERT Letter of Probation  
• S3.C3.1- JRCET For Cause Extension |
| 2. Student learning experiences that are:  
  a. designed, delivered, and assessed by faculty (full-time or part-time) and/or other appropriate professionals who are rigorous and effective in teaching, assessment of student learning, scholarly inquiry, and service, as appropriate to the institution's mission, goals, and policies;  
  b. designed, delivered, and assessed by faculty (full-time or part-time) and/or other appropriate professionals who are qualified for the positions they hold and the work they do;  
  c. designed, delivered, and assessed by faculty (full-time or part-time) and/or other appropriate professionals who are sufficient in number;  
  d. designed, delivered, and assessed by faculty (full-time or part-time) and/or other appropriate professionals who are provided with and utilize sufficient opportunities, resources, and support for professional growth and innovation; | • S2C2.1 - UPR General Bylaws Spanish  
• S2C2.1- UPR General Bylaws English  
• S2C2.5-MSC Faculty Evaluation Instructions 2016 |
<table>
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<tr>
<th>Standard III Criteria</th>
<th>Documents, Processes, and Procedures</th>
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<tr>
<td>e. designed, delivered, and assessed by faculty (full-time or part-time) and /or other appropriate professionals who are reviewed regularly and equitably based on written, disseminated, clear, and fair criteria, expectations, policies, and procedures.</td>
<td>• S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021&lt;br&gt;• S3C3.3 - MSC webpage: <a href="http://www.rcm.upr.edu">http://www.rcm.upr.edu</a>&lt;br&gt;• S3C3.3 - Nursing: <a href="http://enfermeria.rcm.upr.edu/">http://enfermeria.rcm.upr.edu/</a>&lt;br&gt;• S3C3.3 – Pharmacy: <a href="http://farmacia.rcm.upr.edu/">http://farmacia.rcm.upr.edu/</a>&lt;br&gt;• S3C3.3 – Medicine: <a href="https://md.rcm.upr.edu/">https://md.rcm.upr.edu/</a>&lt;br&gt;• S3C3.3 - Dental Medicine: <a href="http://dental.rcm.upr.edu/">http://dental.rcm.upr.edu/</a>&lt;br&gt;• S3C3.3 - School of Health Professions: <a href="http://eps.rcm.upr.edu/">http://eps.rcm.upr.edu/</a>&lt;br&gt;• S3C3.3 - Public Health: <a href="http://sp.rcm.upr.edu/">http://sp.rcm.upr.edu/</a></td>
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<td>Standard III Criteria</td>
<td>Documents, Processes, and Procedures</td>
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<tr>
<td>c. In non-US institutions that do not include general education, provides evidence</td>
<td>S3C3.6 - Deanship of Research</td>
</tr>
<tr>
<td>that students can demonstrate general education skills.</td>
<td>(<a href="https://research.rcm.upr.edu/#">https://research.rcm.upr.edu/#</a>)</td>
</tr>
<tr>
<td>6. In institutions that offer graduate and professional education, opportunities</td>
<td>S3C3.6 - Directory of Active Investigators-</td>
</tr>
<tr>
<td>for the development of research, scholarship, and independent thinking, provided</td>
<td>(<a href="http://rcmi.rcm.upr.edu/?q=directory">http://rcmi.rcm.upr.edu/?q=directory</a>)</td>
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<tr>
<td>by faculty and/or other professionals with credentials appropriate to graduate-level</td>
<td>S3C3.6 - MBRS RISE (<a href="http://mbrs-rise.rcm.upr.edu">http://mbrs-rise.rcm.upr.edu</a>)</td>
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<td>curricula.</td>
<td>S3C3.6 – MBRS SCORE (<a href="http://mbrs-score.rcm.upr.edu/">http://mbrs-score.rcm.upr.edu/</a>)</td>
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<td></td>
<td>S3C3.6 - Research Center for Minority Institutions (RCMI) (<a href="http://rcmi.rcm.upr.edu/">http://rcmi.rcm.upr.edu/</a>)</td>
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<tr>
<td></td>
<td>S3C3.6 - Title V Cooperative Project RCM-UCC – (<a href="https://proyectotitulo5rcmucc.education/">https://proyectotitulo5rcmucc.education/</a>)</td>
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<td></td>
<td>S3C3.6 – Research Centers (<a href="https://rcm2.rcm.upr.edu/investigacion/">https://rcm2.rcm.upr.edu/investigacion/</a>)</td>
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<tr>
<td></td>
<td>S3C3.6- Research Courses for Students</td>
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<tr>
<td>7. Adequate and appropriate institutional review and approval on any student learning</td>
<td>Does not apply</td>
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<td>opportunities designed, delivered, or assessed by third party providers.</td>
<td></td>
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<tr>
<td>8. Periodic assessment of the programs providing student-learning opportunities.</td>
<td>S1C1.1- MSC Institutional Plan for Learning Assessment</td>
</tr>
<tr>
<td></td>
<td>S3C3.8- Guide for Program Assessment</td>
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<td></td>
<td>S3C3.8- Mandate for Accreditation Offices Restructuring</td>
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<tr>
<td></td>
<td>S3C3.8- Status of Accreditations' Report</td>
</tr>
<tr>
<td></td>
<td>S3C3.8- Example of email requesting a risk assessment</td>
</tr>
<tr>
<td></td>
<td>S3C3.8- Neurosurgery Action Plan</td>
</tr>
</tbody>
</table>
XX. STANDARD IV: Support of the Student Experience

Across all educational experiences, settings, levels, and instructional modalities, the institution recruits and admits students whose interests, abilities, experiences, and goals are congruent with its mission and educational offerings. The institution commits to student retention, persistence, completion, and success through a coherent and effective support system sustained by qualified professionals, which enhances the quality of the learning environment, contributes to the educational experience, and fosters student success.

<table>
<thead>
<tr>
<th>Standard IV Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
</table>
| 1. Clearly stated, ethical policies and processes to admit, retain, and facilitate the success of students whose interests, abilities, experiences, and goals provide a reasonable expectation for success and are compatible with institutional mission, including:  
  - accurate and comprehensive information regarding expenses, financial aid, scholarships, grants, loans, repayment, and refunds;  
  - a process by which students who are not adequately prepared for the study at the level for which they have been admitted are identified, placed, and supported in attaining appropriate educational goals;  
  - orientation, advisement, and counseling programs to enhance retention and guide students throughout their educational experience;  
  - processes designed to enhance the successful achievement of students' educational goals including certificate and degree completion, transfer to other institutions, and post-completion placement. |  
  - MSC Webpage: https://rcm2.rcm.upr.edu/  
  - MSC Consumer Information: https://rcm2.rcm.upr.edu/informacion-consumidor/  
  - Financial Aid Office webpage https://de.rcm.upr.edu/asistencia-economica  
  - Program costs at Student Life webpage https://de.rcm.upr.edu/vida-estudiantil  
  - S4C4.1- Registrars Manual  
  - S4C4.1- Example of Student Affairs Workshop for Students  
  - MSC Catalog S1C1.1-UPR-MSC-CATALOG-2021-2024-Rev-June_21_2021  
  - S4C4.1- Admissions Guidelines CES 116  
  - S4C4.1- Deanship of Student Affairs Student Services  
  - S4C4.1- Policy on student transfer UPR units |
| 2. Policies and procedures regarding evaluation and acceptance of transfer credits, and credits awarded through experiential learning, prior non-academic learning, competency-based assessment, and other alternative learning approaches. |  
  - S4C4.2- MSC-Transfer-Credit-Policies-Guidelines-RevJune2021  
  - S4C4.2- MSC-UPR-Credit-Hour-Policy-CIPE-Jun072021  
  - S4C4.1- Registrars Manual |
| 3. Policies and procedures for the safe and secure maintenance and appropriate release of student information and records. |  
  - S4C4.1- Registrars Manual  
  - UPR FERPA- https://www.upr.edu/mdocs-posts/disposiciones-de-la-ley-ferpa/  
  - MSC FERPA Website Link-
<table>
<thead>
<tr>
<th>Standard IV Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
</table>
| 4. If offered, athletic, student life, and other extracurricular activities that are regulated by the same academic, fiscal, and administrative principles and procedures that govern all other programs. | - Student Life Services (https://de.rcm.upr.edu/vida-estudiantil)  
- Quality of Life Office (https://de.rcm.upr.edu/oficina-de-calidad-de-vida)  
- Student Medical Services (https://de.rcm.upr.edu/servicios-medicos-a-estudiantes)  
- S2C2.2- MSC Student Manual 2019-2020  
- Student Organizations (https://de.rcm.upr.edu/organizaciones-estudiantiles) |
| 5. If applicable, adequate, and appropriate institutional review and approval of student support services, designed, delivered, or assessed by third-party providers. | Does not apply  
The MSC has no third-party providers for student support services. |
| 6. Periodic assessment of the effectiveness of programs supporting the student experience. | - S4C4.6- Student Satisfaction Survey- Admissions Office  
- S4C4.6 - Student Satisfaction Survey- CECSI  
- S4C4.6 – Student Satisfaction Survey- Health Services  
- S4C4.6- Student Satisfaction Survey- Reasonable Modification Services (OSEI)  
- S1C1.2- Student Surveys |
XXI. STANDARD V: Educational Effectiveness Assessment

Assessment of student learning demonstrates that the institution’s students have accomplished educational goals consistent with their programs of study, degree level, the institution’s mission, and appropriate expectations for institutions of higher education.

<table>
<thead>
<tr>
<th>Standard V Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
</table>
| 1. Clearly stated student learning outcomes, at the institution and degree/program levels, which are interrelated with one another, with relevant educational experiences, and with the institution’s mission. | S1C1.1 - MSC Strategic Plan 2017-2022  
S1C1.1- MSC Schools’ Executive Summaries  
S5C5.1- Schools Competencies-Profiles aligned to MSC Competency Domains  
S5C5.1- Alignment Between MSC Schools’ Mission and MSC Competency Domains  
S5C5.1- SOM Competencies-Aligned to MSC Competency Domains |
| 2. Organized and systematic assessments, conducted by faculty and/or appropriate professionals, evaluating the extent of student achievement of institutional and degree/program goals. Institutions should:  
a. define meaningful curricular goals with defensible standards for evaluating whether students are achieving those goals;  
b. articulate how they prepare students in a manner consistent with their missions for successful careers, meaningful lives, and, where appropriate, further education. They should collect and provide data on the extent to which they are meeting these goals;  
c. support and sustain assessment of student achievement and communicate the results of this assessment to stakeholders. | S5C5.2 – UPR Institutional Assessment Policy  
S5C5.2 – UPR Institutional Effectiveness Policy  
S3C3.1- BoG #45 Programmatic Assessment Requirement  
S3C3.1- UPR Policy on Program Accreditation  
S1C1.1- MSC Institutional Plan for Learning Assessment  
S5C5.2- MSC Institutional Assessment Policy  
S5C5.2- MSC Schools Student Learning Outcomes Plans  
Institutional Effectiveness Dashboard: https://coia.rcm.upr.edu/dashboard/  
S5C5.2- Graduation Rates  
S5C5.2- Retention Rates  
S5C5.2- Board Exams Percent Approval |
| 3. Consideration and use of assessment results for the improvement of educational effectiveness. Consistent with the institution’s mission, such uses include some combination of the following:  
a. assisting students in improving their learning;  
b. improving pedagogy and curriculum;  
c. reviewing and revising academic programs and support services; | S5C5.3 - UPR Distance Education Policy  
S3C3.4- Draft UPR Distance Learning Strategic Plan  
S3C3.1- BoG #45 Programmatic Assessment Requirement  
S5C5.3- MSC Schools’ Faculty Development Workshops  
S1C1.1- MSC Schools’ Executive Summaries  
S5C5.3- MSC Schools' Curricular Revisions |
### Standard V Criteria

| d. | planning, conducting, and supporting a range of professional development activities; |
| e. | planning and budgeting for the provision of academic programs and services; |
| f. | informing appropriate constituents about the institution and its programs; |
| g. | improving key indicators of student success, such as retention, graduation, transfer, and placement rates; *and, |
| h. | implementing other processes and procedures designed to improve educational programs and services. |

*required

| 4. | If applicable, adequate, and appropriate institutional review and approval of assessment services designed, delivered, or assessed by third party providers. |
| Does not apply |
| The MSC does not have third-party providers assessment services. |

| 5. | Periodic evaluation of the assessment processes utilized by the institution for the improvement of educational effectiveness. |
| ● | S5C5.3- MSC Schools' Curricular Revisions |
XXII. STANDARD VI: Planning, Resources, and Institutional Improvement

The institution’s planning processes, resources, and structures are aligned with each other and are sufficient to fulfill its mission and goals, to continuously assess and improve its programs and services, and to respond effectively to opportunities and challenges.

<table>
<thead>
<tr>
<th>Standard VI Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
</table>
| 1. Institutional objectives, both institution-wide and for individual units, that are clearly stated, assessed appropriately, linked to mission and goal achievement, reflect conclusions drawn from assessment results, and are used for planning and resource allocation. | • S1C1.1 - MSC Strategic Plan 2017-2022  
  • S1C1.1-UPR Strategic Plan 2017-2022  
  • S1C1.1-MSC Schools’ Executive Summaries  
  • S6C6.1- Examples of Alignment- Strategic Objectives- Outcomes- Budget                                                                 |
| 2. Clearly documented and communicated planning and improvement processes that provide for constituent participation and incorporate the use of assessment results. | • S1C1.- MSC Strategic Plan 2017-2022  
  • S1C1.1-Examples of Chancellors Presentations and Certifications of the Academic Senate                                                                 |
| 3. A financial planning and budgeting process that is aligned with the institution’s mission and goals, evidence-based, and clearly linked to the institution’s and units’ strategic plans/objectives. | • S6C6.3- UPR Fiscal Plan 2021-2026  
  • S6C6.1- Examples of Alignment- Strategic Objectives- Outcomes- Budget  
  • S1C1.1- MSC Schools’ Executive Summaries  
  • S1C1.1 - Institutional Effectiveness Report 2019-2020                                                                 |
| 4. Fiscal and human resources as well as the physical and technical infrastructure are adequate to support the institution's operations wherever and however programs are delivered. | • S6C6.4- UPR Annual Audits 2017-2020  
  • S6C6.3- BoG 108 2020-2021 ASEM Debt Collection  
  • S6C6.4- Financial Status MSC 2018-2024  
  • Library: https://www.upr.edu/biblioteca-rcm/modulosdemetaliteracia  
  • S6C6.4-6.7- Examples of Finance and Budgeting Task Force Acts.  
  • S6C6.7- Conrado F. Asenjo Library                                                                 |
| 7. An annual independent audit confirming financial viability with evidence of follow-up on any concerns cited in the audit’s accompanying management letter. |                                                                                                                                 |
| 5. Well-defined decision-making processes and Clear assignment of responsibility and accountability. | • S6C6.5 – Board of Governors (https://www.juntagobierno.upr.edu/junta-de-gobierno/funciones/)  
  • S6C6.5 UPR Budget Certification 2021-                                                                 |

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<table>
<thead>
<tr>
<th>Standard VI Criteria</th>
<th>Documents, Processes, and Procedures</th>
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<tbody>
<tr>
<td>6. Comprehensive planning for facilities, infrastructure, and technology that</td>
<td>2022</td>
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<tr>
<td>includes consideration of sustainability, deferred maintenance, and is linked to the</td>
<td>• S3C3.1- BoG #45 Programmatic Assessment Requirement</td>
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<tr>
<td>institution's strategic and financial planning processes.</td>
<td></td>
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<tr>
<td>8. Strategies to measure and assess the adequacy and efficient utilization of</td>
<td></td>
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<tr>
<td>institutional resources required to support the institution's mission and goals.</td>
<td>• S6C6.6- UPR Permanent Improvement Plan updated 2020-2021</td>
</tr>
<tr>
<td></td>
<td>• S6C6.6- BoG 32 2018-2019 Deferred Maintenance</td>
</tr>
<tr>
<td></td>
<td>• S6C6.6- UPR Policy and Process for Ethical and Legal use of Information Technology</td>
</tr>
<tr>
<td>9. Periodic assessment of the effectiveness of planning, resource allocation,</td>
<td></td>
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<tr>
<td>institutional renewal processes, and availability of resources.</td>
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<tr>
<td></td>
<td>• S5C5.2- UPR Institutional Assessment Policy</td>
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<tr>
<td></td>
<td>• S5C5.2- UPR Institutional Effectiveness Policy</td>
</tr>
<tr>
<td></td>
<td>• S3C3.1- UPR Policy on Program Accreditation</td>
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<tr>
<td></td>
<td>• S3C3.1- BoG #45 Programmatic Assessment Requirement</td>
</tr>
<tr>
<td></td>
<td>• S1C1.1- MSC Schools’ Executive Summaries</td>
</tr>
<tr>
<td></td>
<td>• S1C1.1- MSC Strategic Plan Executive Summary 2021</td>
</tr>
</tbody>
</table>
XXIII. STANDARD VII: Governance, Leadership, and Administration

The institution is governed and administered in a manner that allows it to realize its stated mission and goals in a way that effectively benefits the institution, its students, and the other constituencies it serves. Even when supported by or affiliated with governmental, corporate, religious, educational system, or other unaccredited organizations, the institution has education as its primary purposed, and it operates as an academic institution with appropriate autonomy.

<table>
<thead>
<tr>
<th>Standard VII Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
</table>
| 1. A clearly articulated and transparent governance structure that outlines its roles, responsibilities and accountability for decision making by each constituency, including governing body, administration, faculty, staff, and students. | • S7C7.1-Law #1 1966 Law of the UPR  
• S7C7.1- Law 13 2013 Law of the UPR  
• S7C7.1- MSC Academic Senate Certifications 35, 36, 37  
• S7C7.1- Fiscal Agency and Financial Advisory Authority  
• S2C2.1 - UPR General Bylaws |
| 2. A legally constituted governing body that:                                          | • S7C7.2 – Board of Governors webpage (https://www.juntagobierno.upr.edu/)  
• S7C7.2- Board of Governors (https://juntagobierno.upr.edu/facultades-y-deberes/)  
• S7C7.2- BoG Committees Priorities 2020  
• S7C7.2- BoG Appointment of Interim President  
• S7C7.2- BoG Committees Priorities 2020  
• S7C7.2- President and Chancellors Evaluation Procedures Policy  
• S7C7.2- BoG Appointment of Interim President  
• S6C6.3- UPR Budget Certification 2021-2022 S7C7.2-President and Chancellors Evaluation Procedures Policy  
• S2C2.3-Law of Government Ethics  
• S2C2.4-BoardofGov Bylaws  
• S2C2.4- BoardofGov Recusal |
<table>
<thead>
<tr>
<th>Standard VII Criteria</th>
<th>Documents, Processes, and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>documents related to the fiscal viability of the institution; f. appoints and regularly evaluates the performance of the Chief Executive Officer; g. is informed in all its operations by principles of good practice in board governance; h. establishes and complies with a written conflict of interest policy designed to ensure that impartiality of the governing body by addressing matters such as payment for services, contractual relationships, employment, and family, financial or other interests that could pose or be perceived as conflicts of interest; and, i. supports the Chief Executive Officer in maintaining the autonomy of the institution.</td>
<td>• S7C7.1-Law #1 1966 Law of the UPR • S7C7.1- Law 13 2013 Law of the UPR • S2C2.1 - UPR General Bylaws • S7C7.2- President and Chancellors Evaluation Procedures Policy</td>
</tr>
<tr>
<td>3. A Chief Executive Officer who: a. is appointed by, evaluated by, and reports to the governing body and shall not chair the governing body; b. has appropriate credentials and professional experience consistent with the mission of the organization; c. has the authority and autonomy required to fulfill the responsibilities of the position, including developing and implementing institutional plans, staffing the organization, identifying and allocating resources, and directing the institution toward attaining the goals and objectives set forth in its mission; d. has the assistance of qualified administrators, sufficient in number, to enable the Chief Executive Officer to discharge his/her duties effectively; and is responsible for establishing procedures for assessing the organization's efficiency and effectiveness.</td>
<td>• S5C5.2- UPR Institutional Assessment Policy • S5C5.2- - UPR Institutional Effectiveness Policy • S3C3.1- UPR Policy on Program Accreditation • S3C3.1- BoG #45 Programmatic Assessment Requirement • S1C1.1 - Institutional Effectiveness Report 2019-2020</td>
</tr>
<tr>
<td>4. An administration possessing or demonstrating: a. an organizational structure that is clearly defined and that clearly defines reporting relationships; b. an appropriate size and with relevant experience to assist the Chief Executive Officer fulfilling his/her roles and</td>
<td></td>
</tr>
<tr>
<td>Standard VII Criteria</td>
<td>Documents, Processes, and Procedures</td>
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</tbody>
</table>
| responsibilities; c. members with credentials and professional experience consistent with the mission of the organization and their functional roles; d. skills, time, assistance, technology, and information systems expertise required to perform their duties; e. regular engagement with faculty and student in advancing the institution’s goals and objectives; f. Systematic procedures for evaluating administrative units and for using assessment data to enhance operations. | • S2C2.1 - UPR General Bylaws Spanish  
• S2C2.1- UPR General Bylaws English  
• S2C2.1 - UPR General Student Bylaws  
• S7C7.4- MSC Academic Senate Bylaws  
• S7C7.4- Internal Policy of the University Board  
• S7C7.4- Internal Rules and Regulations MSC Administrative Board |
| 5. Periodic assessment of the effectiveness of governance, leadership, and administration. | • S5C5.2- UPR Institutional Assessment Policy  
• S5C5.2- - UPR Institutional Effectiveness Policy  
• S5C5.2- MSC Institutional Effectiveness Academic Senate Certification  
• S7C7.2- President and Chancellors Evaluation Procedures Policy |
### XVI. List of Acronyms Used in this Report

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA</td>
<td>Academic Senate (Senado Académico)</td>
</tr>
<tr>
<td>ACGME</td>
<td>Accreditation Council for Graduate Medical Education</td>
</tr>
<tr>
<td>ACPE</td>
<td>Accreditation Council for Pharmacy Education</td>
</tr>
<tr>
<td>JA</td>
<td>Administrative Board (Junta Administrativa)</td>
</tr>
<tr>
<td>ACTU</td>
<td>AIDS Clinical Trail Units</td>
</tr>
<tr>
<td>APA</td>
<td>American Psychological Association</td>
</tr>
<tr>
<td>AEB</td>
<td>Announcement Examination Board</td>
</tr>
<tr>
<td>AVP</td>
<td>Associate Vice President</td>
</tr>
<tr>
<td>BSGP</td>
<td>Biomedical Sciences Graduate Program</td>
</tr>
<tr>
<td>CCTDI</td>
<td>California Critical Thinking Disposition Inventory</td>
</tr>
<tr>
<td>CIES</td>
<td>Center for Evaluation and Sociomedical Sciences</td>
</tr>
<tr>
<td>CRESCO</td>
<td>Center for Research, Entrepreneurship and Scientific Collaborations</td>
</tr>
<tr>
<td>CRECED</td>
<td>Center of Research Compliance and Development</td>
</tr>
<tr>
<td>AC</td>
<td>Central Administration (Administración Central)</td>
</tr>
<tr>
<td>CAIT</td>
<td>Centro Audiovisual y de Interacción Tecnológica</td>
</tr>
<tr>
<td>CTR</td>
<td>Clinical and Translational Research</td>
</tr>
<tr>
<td>CPX</td>
<td>Clinical Practice Examination</td>
</tr>
<tr>
<td>CLEP</td>
<td>College Level Examination Program</td>
</tr>
<tr>
<td>CEPH</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>CCNE</td>
<td>Commission on Dental Accreditation</td>
</tr>
<tr>
<td>CODA</td>
<td>Council of Education in Public Health</td>
</tr>
<tr>
<td>CE</td>
<td>Continuing Education</td>
</tr>
<tr>
<td>CIPE</td>
<td>Council of Integration and Educative Programming</td>
</tr>
<tr>
<td>COA</td>
<td>Council on Accreditation of Nurse Anesthesia</td>
</tr>
<tr>
<td>CEPH</td>
<td>Council on Education for Public Health</td>
</tr>
<tr>
<td>COAP</td>
<td>Crime Awareness and Campus Security Act of 1990</td>
</tr>
<tr>
<td>DAA</td>
<td>Deanship of Academic Affairs</td>
</tr>
<tr>
<td>MD</td>
<td>Doctor of Medicine</td>
</tr>
<tr>
<td>DrPh</td>
<td>Doctor of Public Health</td>
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<tr>
<td>EBP</td>
<td>Evidence-based practice</td>
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<tr>
<td>FERPA</td>
<td>Family Educational Rights and Privacy Act</td>
</tr>
<tr>
<td>FAFAA</td>
<td>Financial Advisory Authority and Fiscal Agency</td>
</tr>
<tr>
<td>FOMB</td>
<td>Fiscal Oversight Management Board</td>
</tr>
<tr>
<td>FY</td>
<td>Fiscal Year</td>
</tr>
<tr>
<td>FAFSA</td>
<td>Free Application for Federal Student Aid</td>
</tr>
<tr>
<td>JG</td>
<td>Board of Governors (Junta de Gobierno)</td>
</tr>
<tr>
<td>GPA</td>
<td>Grade Point Average</td>
</tr>
<tr>
<td>GSPH</td>
<td>Graduate School of Public Health</td>
</tr>
<tr>
<td>HSRT</td>
<td>Health Sciences Reasoning Test</td>
</tr>
<tr>
<td>IACUC</td>
<td>Institutional Animal Care and Use Committee</td>
</tr>
<tr>
<td>COIA</td>
<td>Institutional Assessment Committee</td>
</tr>
<tr>
<td>IBC</td>
<td>Institutional Biosafety Committee</td>
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<tr>
<td>Organization</td>
<td>Abbreviation</td>
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<td>----------------------------------------------------------------------------</td>
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<tr>
<td>Institutional Review Board</td>
<td>IRB</td>
</tr>
<tr>
<td>Junta de Instituciones Post Secundarias, Government of Puerto Rico</td>
<td>JIPS</td>
</tr>
<tr>
<td>Liaison Committee on Medical Education</td>
<td>LCME</td>
</tr>
<tr>
<td>Master of Public Health</td>
<td>MPH</td>
</tr>
<tr>
<td>Maternal Infant Study Center (Centro de Estudios Materno-Infantiles)</td>
<td>CEMI</td>
</tr>
<tr>
<td>MD Anderson Cancer Center</td>
<td>MDACC</td>
</tr>
<tr>
<td>Medical Sciences Campus</td>
<td>MSC</td>
</tr>
<tr>
<td>Middle State Commission on Higher Education</td>
<td>MSCHE</td>
</tr>
<tr>
<td>Minority Biomedical Research Support</td>
<td>MBRS</td>
</tr>
<tr>
<td>Molecular Sciences and Research Center</td>
<td>MSRC</td>
</tr>
<tr>
<td>National Boards Dental Examination</td>
<td>NBDE</td>
</tr>
<tr>
<td>National Boards Medical Examination</td>
<td>NBME</td>
</tr>
<tr>
<td>Neuroimaging and Electrophysiology Facility</td>
<td>NIEF</td>
</tr>
<tr>
<td>North American Pharmacist Licensure Examination</td>
<td>NAPLEX</td>
</tr>
<tr>
<td>Objective Structured Competency Examinations</td>
<td>OSCE</td>
</tr>
<tr>
<td>Office of Informatics and Educational Resources</td>
<td>OIRE</td>
</tr>
<tr>
<td>Office of Information Technology</td>
<td>OSI</td>
</tr>
<tr>
<td>Office of Services to Students with Disabilities</td>
<td>OSEI</td>
</tr>
<tr>
<td>Pan American Health Organization</td>
<td>PAHO</td>
</tr>
<tr>
<td>Partnership in Research and Education</td>
<td>PIRE</td>
</tr>
<tr>
<td>Puerto Rico Oversight, Management, and Economic Stability Act</td>
<td>PROMESA</td>
</tr>
<tr>
<td>Quality Matters</td>
<td>QM</td>
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<tr>
<td>Radiation Safety Committee</td>
<td>RSC</td>
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<tr>
<td>Research Centers in Minority Institutions</td>
<td>RCMI</td>
</tr>
<tr>
<td>Research Initiative for Scientific Enhancement</td>
<td>RISE</td>
</tr>
<tr>
<td>School of Dental Medicine</td>
<td>SDM</td>
</tr>
<tr>
<td>School of Health Professions (Escuela de Profesiones de la Salud)</td>
<td>SHP</td>
</tr>
<tr>
<td>School of Medicine</td>
<td>SOM</td>
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<tr>
<td>School of Nursing</td>
<td>SON</td>
</tr>
<tr>
<td>School of Pharmacy</td>
<td>SP</td>
</tr>
<tr>
<td>Students Center for Counseling and Psychological Services</td>
<td>CECSI</td>
</tr>
<tr>
<td>Support of Competitive Research</td>
<td>SCORE</td>
</tr>
<tr>
<td>Technical Support Center for Learning</td>
<td>CATA</td>
</tr>
<tr>
<td>the Institutional Planning and Development Committee</td>
<td>COPDI</td>
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<tr>
<td>Universidad Central del Caribe</td>
<td>UCC</td>
</tr>
<tr>
<td>University Board (Junta Universitaria)</td>
<td>JU</td>
</tr>
<tr>
<td>University of Puerto Rico</td>
<td>UPR</td>
</tr>
<tr>
<td>Vice Presidency of Academic Affairs and Research</td>
<td>VPAAR</td>
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</tbody>
</table>