UNIVERSIDAD DE PUERTO RICO, RECINTO DE CIENCIAS MÉDICAS PO BOX 365067 SAN JUAN PR 00936-5067 · TEL. 787-758-2525 EXT.1711

SECRETARÍA JUNTA ADMINISTRATIVA

2019-20
Certificación Número 21

YO, **RAÚL RIVERA GONZÁLEZ**, Secretario Ejecutivo de la Junta Administrativa del Recinto de Ciencias Médicas de la Universidad de Puerto Rico, **CERTIFICO**:

Que la Junta Administrativa en reunión ordinaria celebrada el **martes, 22 de octubre de 2019**, luego de amplia discusión de rigor, la Junta Administrativa, **ACORDÓ**:

Endosar la Propuesta de Diseño de Autoestudio del Recinto de Ciencias Médicas 2020 – 2021, para la re-acreditación por la *Middle States Commission on Higher Education* (MSCHE).

Copia de dicha propuesta aprobada se hace formar parte de esta certificación.

Y para que así conste, para conocimiento del personal y de las autoridades universitarias que corresponde, expido esta Certificación bajo el sello del Recinto de Ciencias Médicas de la Universidad de Puerto Rico, hoy veinticuatro de octubre del año dos mil diecinueve.

Raúl Rivera González, DrPH, MS, MT
Secretario Ejecutivo

Vo. Bo.:

José Hawayek Alemañy, MD
Presidente Pro Tempore

RRG:JHA:ynr

Medical Sciences Campus

University of Puerto Rico

Self Study Design
2020 - 2021

Accreditation: The Future of Innovation
in Time of Crisis

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I. Institutional Overview

SSD Theme: Accreditation: the future of innovation in time of crisis.

The Medical Sciences Campus is part of the University of Puerto Rico (UPR) System, a multi-campus, state-supported institution of higher education licensed by the Puerto Rico Education Council (Certification CEPR 2018-4641). A Governing Board constituted by 14 members oversees the system. It is composed of two students (elected), 2 faculty members (elected), 8 citizens from the community appointed by the Governor, and 2 ex officio members (the Secretary of Education and a representative of the Financial Advisory Authority and Fiscal Agency known as FAFAA), created as part of the government debt restructuring and economic development process mandated by the *Puerto Rico Oversight, Management, and Economic Stability Act* (PROMESA) enacted by the US Congress in 2016. On July 7, 2017, the Governing Board elected Walter Alomar, Esq., as President, and Zoraida Buxó, Esq., as Vice President (Certification 1, 2017-2018). Newly designated President of the University of Puerto Rico on July 3, 2018, Dr. Jorge Haddock, assumed its position on September 4, 2018 (Certification 1: 2018-2019, UPR Governing Board).

The President is the Chief Executive Officer of the UPR System appointed by the UPR Governing Board for an indefinite term. He presides over the University Board, which is composed of the eleven campus chancellors, faculty representatives of each campus academic senate, student representatives, and the Central Administration Vice President for Academic Affairs and the directors of the Finance, Planning and Development, and Budget Offices. Law 1 of 1966, as amended, and the *UPR General Bylaws*, as amended, mandate the structure of the university and its units.

With the approval of the *Puerto Rico Oversight, Management, and Economic Stability Act* (PROMESA) in 2016, the island entered a challenging debt restructuring and economic development process under the purview of the Puerto Rico Oversight Board. The University of Puerto Rico, as a state-supported, higher education institution, was among the agencies targeted for a funding reduction. Medical Sciences Campus has secure additional funding to continue to fulfill its mission, and to support the Healthcare Delivery System for Puerto Rico. Some of the strategies to respond to the island's new reality and a new generation of students include; the sale of services, use of technology to increase efficiency, and a transformation of the educational offering based on assessment findings.

The Medical Sciences Campus is composed of the Schools of Medicine, Dental Medicine, Public Health, Pharmacy, Nursing, and Health Professions, along with the Deanship of Administration, Deanship for Student Affairs, the Deanship for Academic Affairs, and the Deanship of Research approved by the Governing Board through Certification 20 2018-2019 JG. The UPR Board of Governors designated Dr. Segundo Rodríguez-Quilichini as MSC Interim Chancellor on July 20, 2017 (Certification 10, 2017-2018), and installed as Chancellor on July 1, 2019 (Cert 96 2018-19 JG).

As of academic year 2018-2019, the campus had 2,253 students, 440 residents, 989 faculty members and 1,277 non-teaching staff to support its mission. For academic year 2019-2020, 2,232 students were enrolled (August 21, 2019), compared to 2,253 in previous academic year 2018- 2019. MSC offers 66 academic programs. Since May 2019, no major curricular changes been implemented (MPH and Dr.Ph. Competency Model, Graduate School of Public Health initiated Dec 2018 and finalized May 2019).

The following currently accredit the MSC professional schools and programs and hospital-based residencies: Liaison Committee on Medical Education (LCME), Accreditation Council for Graduate Medical Education (ACGME), Commission on Dental Accreditation of the American Dental Association

(CODA-ADA), Council on Education for Public Health (CEPH), Accreditation Council for Pharmacy Education (ACPE), and Commission on Collegiate Nursing Education (CCNE). Most programs in the School of Health Professions hold professional accreditations granted by the discipline specific agencies including the Doctor of Audiology and the Doctor on Physical Therapy.

The Medical Sciences Campus (MSC of the University of Puerto Rico (UPR) graduated 782 new professionals in medicine and health during its Fifty-third Degree Collation June 1, 2019. In June 2019, Medical Sciences Campus graduated the first specialists with a combined degree in Internal Medicine and Pediatrics. Officially new academic year 2019-20 started in August 7, 2019 as planned in the approved Academic Calendar.

Significant development and achievements should be highlighted:

Medical Sciences Level

The Office of Informatics and Educational Resources (OIRE) recently inaugurated new studio facilities to support online teaching and flip-classroom technique educational strategies for all six Schools of the Campus. The Office of Informatics and Educational Resources provides the entire technology infrastructure that directly serves the faculty, non-teaching staff and students. OIRE is the administrator of the official learning management system for the MSC 2019-2024 better known as Blackboard ULTRA to support Campus based teaching and for Distance Education. Moodle platform will continue as additional teaching support tool of the University of Puerto Rico. The first Professional Certificate in Data Science was offered totally online using OIRE facilities located at the School of Health Professions and graduated 225 data scientists from different professional disciplines and countries since its establishment in 2018. In addition, the first Graduate Certificate in Maternal and Child Health completely online through DECEP was approved by *Junta de Instituciones Post-Secundarias* de Puerto Rico (JIPS) on August 27, 2019 (cert 2019-166 JIPS).

Researchers from the Neuroplasticity Center of the Institute of Neurobiology of the Medical Sciences Campus (RCM) of the University of Puerto Rico (UPR) received a grant of 10.6 million from the National Institute of General Medical Sciences (NIH / NIGMS). The university center reported in on August 7, 2018 that the grant is aimed at developing the second phase of the COBRE project (Center of Biomedical Research Excellence) led by researchers Mark Miller and José Lasalde. During AY 2019-2019, 24 doctors were recognized locally and internationally for their research and service enforcements in their respective disciplines, which include prestigious designations in advisory bodies and professional organizations.

Another significant achievement was the development of the Research Deanship through the approval of the UPR Governing Board (Certification No. 20, 2018-2019 JG). The Department of Federal Education granted the University of Puerto Rico (UPR) the ownership of the land where the Puerto Rico and Caribbean Primate Center (CPRC) of the Medical Sciences Campus (MCS) operates.

Nearly forty professors from the Schools of Medicine, Dental Medicine, Public Health, Health Professions, Nursing and Pharmacy completed an Instructor training in the use of the Blackboard Ultra platform for the development of distance courses. This, as part of the development of faculty that is being prepared to enhance the online offerings of courses, certificates and reviews of the Medical Sciences Campus.

The Medical Sciences Campus (RCM) of the University of Puerto Rico (UPR) announced that the laboratory of Dr. Gregory Quirk, a professor at the UPR School of Medicine, in collaboration with a group of researchers from the University of Penn State , published a study that gives way to a new approach to therapy to treat neurological and neurodegenerative damage after a stroke.

School of Medicine

The School of Medicine of the Medical Sciences Campus received the Spencer Foreman Award for outstanding community service. This award is given annually to a medical school or a teaching hospital belonging to the Association of American Medical Colleges (AAMC) with an important long-standing institutional commitment to collaborate with the community it serves to identify and address the needs of society.

The Puerto Rico Science, Technology and Research Trust (PRTC) recognized Dr. Carmen D. Zorrilla, professor at the School of Medicine of the Medical Sciences Campus of the University of Puerto Rico with the *Bajarí* Award. This is the first time that the PRTC presents an institutional prize. *Bajarí*, a word from the *Taíno* dialect, means high distinction and represents the path that researchers follow to innovate and achieve high distinctions in their fields.

Dr. Walter Frontera was elected a member of the Royal College of Physicians of London. This prestigious recognition is awarded to the most innovative and exceptional doctors in the world.

The School of Medicine operates an Intramural Medical Practice Plan whose revenues supplement the faculty salary, generates resources for the institution, and offers students and residents a large number of clinical experiences under the supervision of the faculty.

The Post Graduate Medical Education Clinical Residency Programs of general surgery, internal medicine, orthopedic surgery and Obstetrics and Gynecology; One hundred percent (100%) of residents passed specialty Boards.

The Program of Bariatric Surgery of the Hospital of the University of Puerto Rico, *"Dr. Federico Trilla"*, becomes the only center of excellence of Bariatric Surgery in Puerto Rico after receiving prestigious accreditation from the Surgical Review Corporation.

The scientific journal Nature Communications published an investigation directed by Dr. Carlos Sariol, and Dr. Erick Xavier Pérez Guzmán, that Zika infection can counteract Dengue Disease.

School of Public Health

The Federal Environmental Protection Agency (EPA) granted $2,259,404 to the Medical Sciences Campus (RCM) of the University of Puerto Rico for the implementation of two projects funded under the Diesel Emissions Reduction Act (DERA), with the purpose of reducing emissions of pollutants generated by diesel engines in the Port of San Juan.

The Family Planning Program Title X (known by its acronyms in Spanish as PREVEN), received the approval of six million dollars in federal funds for a term of three years, at the rate of two million per year to continue offering family planning services to low-income citizens in Puerto Rico

NASA's Division of Earth Sciences approved a proposal by Puerto Rican professor Pablo Méndez Lázaro, professor of the Department of Environmental Health, at the Graduate School of Public Health, to study the behavior of the arrival of dust from the Sahara desert and its impact on the Caribbean basin.

The administrator of the Federal Emergency Management Agency (FEMA), Pete Gaynor, appointed Puerto Rican Carol Salas as one of the 15 people who will be part of the National Advisory Council (NAC) of that office. Dr. Salas is director of the Institute of Developmental Deficiencies of the Center for Excellence in Education at the University of Puerto Rico.

The Puerto Rico Geriatric Workforce Enhancement Program has received funds from HRSA to grant faculty, recent students and graduates (past two years) of all health professions of the Medical Sciences

Campus who wish to do the Graduate Certificate in Gerontology offered at the School Graduate of Public Health.

Dr. Carmen M. Vélez-Vega, Professor and Researcher was recognized with the Helen Rodríguez Trías Social Justice Award by the American Public Health Association (APHA) for her contributions to social justice and health equity.

Amailie Rivera, MPHE and Nancy Cardona, DrPh, alumnae of the Graduate School of Public Health receive the Individual Trainee Plan Award from Northeastern University for her contributions to PROTECT research project.

The Department of Environmental Health of the Graduate School of Public Health of the Medical Sciences Campus (RCM) of the University of Puerto Rico led, in collaboration with the Institute for Sustainable Solutions of Portland State University, the CAPA Heat Monitoring Program in Puerto Rico.

School of Nursing

The Council on Accreditation of Nurse Anesthesia Educational Program (COA) reaffirms the accreditation to the Master of Science in Nursing with Specialty in Anesthesia until 2022.

The Health Resources and Services Administration (HRSA), which allowed the school to grant $ 14,930 that benefited 23 master's students in Anesthesia Nursing, approved the proposal entitled Nurse Anesthesia Traineeship.

The School of Nursing of the Medical Sciences Campus (MSC) of the University of Puerto Rico (UPR), announced today that the Puerto Rico Drug Control Administration (DEA) has authorized the collection of electronic devices and cigarettes during the next XVIII National Medicine Recovery Day. The activity took place on Wednesday, October 23, 2019

School of Pharmacy

With the support of the Science, Technology and Research Trust, the first Puerto Rican pharmaceutical company was born. It will use the technology and compound developed by the Medical Sciences Campus of the UPR to commercialize a product that will stop metastasis in cancer patients. Dr. Cornelis Vlaar, Professor of the School of Pharmacy, is one of the researchers of this innovative project.

Dr. Wanda Maldonado-Dávila, was selected by a nationwide vote, as Elected President of the Council of Deans of the American Association of Colleges of Pharmacy (AACP). In addition to assuming that effective position in July 2019, Dr. Maldonado-Dávila will be part of the Board of Directors of the American Association of Colleges of Pharmacy, for a term of three years.

The Governing Board of the University of Puerto Rico recently approved the Doctor of Philosophy in Pharmaceutical Sciences (Certification 112 2018-2019 JG).

The School of Pharmacy faculty held 65 oral and poster presentations at national and international meetings and published 26 articles in peer-reviewed journals during AY 2017-2018.

Four researchers discovered in the MBQ-167 molecule the method that aims to be the most effective for treating breast cancer, triple negative grade metastases and metastatic types of the disease.

School of Dental Medicine

The School of Dental Medicine (EMD) of the Medical Sciences Campus of the University of Puerto Rico established the first Unit for Research and Analysis for Equity (UIAE) with the purpose of reducing inequalities in health in Puerto Rico with actions on the social determinants.

The American Dental Association Accreditation Dental Commission (CODA) reported that the Residency Program in Oral and Maxillofacial Surgery obtained its accreditation for the next five years under the category "approval without reporting requirements".

The School of Dental Medicine completed the implementation of the AXIUM electronic file for the use of the Residency Programs in 1) Orthodontics, 2) Prosthodontics and 3) Pediatric Dentistry; as well as in the 4) General Clinic of the School of Dental Medicine.

The Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) awarded Dr. Arlene Sanchez with the grant title Puerto Rico Innovation in Dental Education: Beyond the limits of Traditional Learning, D85HP28500 for a grant amount of $1,684,465.00.

School f Health Professions

Dr. Elsa Orellano Colon receives the PRTRC Investigator Achievement Award from the Puerto Rico Clinical and Translational Consortium of the MSC, University of Puerto Rico.

All professional programs subject to accreditation maintained their accreditation status.

Professor Lourdes E. Soto de Laurido, from the School of Health Professions, will be part of the T37 Advisory Committee that will provide training in health minority research and health disparities, with a strong focus on global mental health disparities.

The Academy of Nutrition and Dietetics, Chapter of PR selected the student of the Program of Internship in Dietetics, Valery Rivera Hidalgo as Dietitian Intern of the Year 2019.

Project Title V Cooperative Project RCM-UCC carries out integrated activity of inauguration of the Simulators in the School of Nursing and in the Radiological Technology Program of the School of Health Professions, Medical Sciences Campus.

Student of the Doctor of Physical Therapy Program, School of Health Professions was appointment as Core Ambassador of Puerto Rico by the Student Assembly Board of Directors of the American Physical Therapy Association.

II. Institutional Priorities to be addressed in the Self-Study

The MSC Executive Level identified (3) targets or main priorities to be addressed in the Self Study for re-accreditation. The Institutional priorities to be discussed are Financial Sustainability, Research Development and Assessment. These MSC Priorities were thoroughly discussed as part of the Strategic Planning Process at UPR as a system, the MSC and among its 6 Schools.
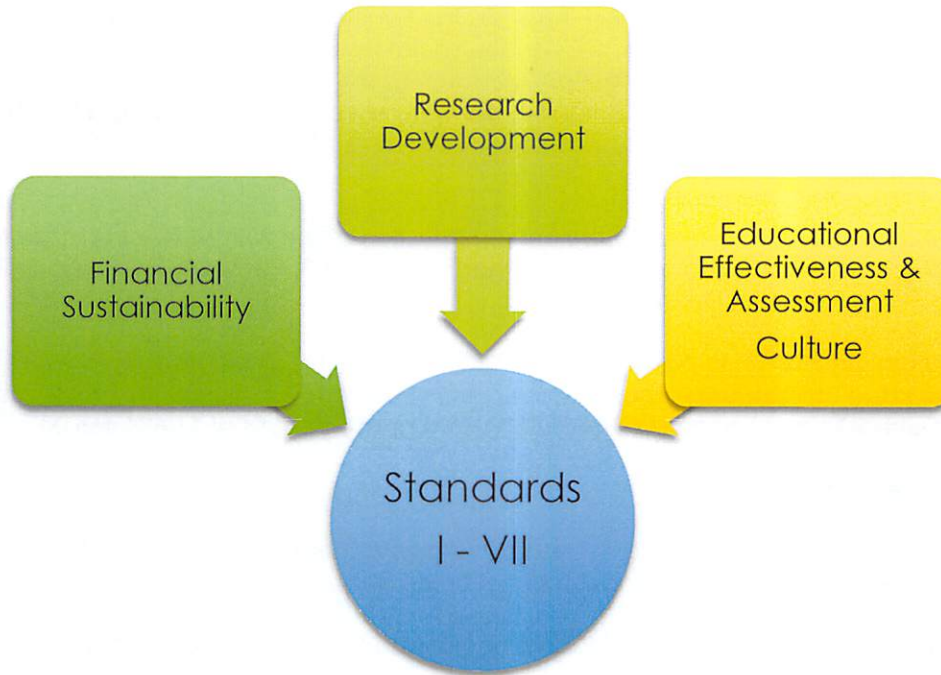
Figure I: MSC Institutional Priorities

Figure II: MSC Institutional Priorities and Alignment with Accreditation Standards

Institutional Priority	Accreditation Standards						
	Standard 1: Mission and Goals	Standard 2: Ethics and Integrity	Standard 3: Design Student Learning Experience	Standard 4: Support Student Experiences	Standard 5: Educational Effectiveness Assessment	Standard 6: Planning, Resources, Institutional Improvement	Standard 7: Governance, Leadership and Administration
Priority 1: Focus on Financial Sustainability						X	
Priority 2: Strengthen Research Development Initiative			X			X	
Priority 3: Ensure Educational Effectiveness and Assessment Culture			X	X	X	X	

III. Intended Outcomes of the Self-Study

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

MSC Self Study Goal

Gain a thorough view of Institutional Policies, Trends, Achievements, Strengths and Weakness of the MSC in order to design innovative strategies ensure its mission, accountability, and excellence of its academic programs by the MSCHE re-accreditation in 2021.

Intended Outcomes for MSC Self Study Process

a. Demonstrate the highest level of compliance with the MSCHE Accreditation Standards and Requirements of affiliations as leaders in the health sciences professions of Puerto Rico
b. Strengthen the assessment culture at the MSC UPR in decision-making processes to link assessment, resources, planning and educational effectiveness in times of crisis.
c. Integrate all levels of the university community in a participatory, evidence based self-reflection process to fulfill its mission as a higher education institution.

IV. Self-Study Approach

The MSC will be addressing the Self Study Design using the Standard Based Approach. This approach enable the campus to engage in an integrated review of its compliance with the Standards for Accreditation, and bring together the university community who work in different levels, areas, and programs at the institution. It also provides the opportunity to analyze the institutional effectiveness using a team based approach over the last 7 years, to see how the institution has fared, and where it should be headed specially in time of crisis and financial constraints.

V. Organizational Structure of the Steering Committee and Working Groups

The Accreditation Liaison Officer will serve as the Chair of the Self Study Process Steering Committee. The Accreditation Liaison Officer (ALO) selects the members of the Steering Committee with the approval of the Dean for Academic Affairs of the Medical Sciences Campus Dr. José Hawayek that serves as Ex-Officio Member. The Chancellor of the MSC sends an invitation letter to all members that were recommended by the Dean for Academic Affairs and the ALO. The members appointed for the MSCHE Steering Committee demonstrate a culture of close, dedicated institutional loyalty and collaboration across the administration and faculty that ensures the Institutional Mission and Goals.

Responsibilities of the Steering Committee:

1. Provides leadership on campus related to accreditation processes.
2. Responsible for coordinating all Self Study processes and activities.
3. Ensure timetable is met as scheduled.
4. Organize all training activities for the success of the accreditation processes and activities.
5. Evaluate whether or not the Institution is in compliance with the Standards of Accreditation and Requirement of Affiliation
6. Identify strengths, areas for opportunities and plan of action for areas that need improvement.
7. Foster participation of the university community at all levels of the Institution
8. Submit the final version of the Self Study Design and Self Study Document.

The MSC Steering Committee Membership is as follows:

Member	Titles
Dr. José A. Capriles-Quirós	Chair of Steering Committee Associate Dean for Academic Affairs Accreditation Liaison Officer Director, Office of Accreditation Professor, Graduate School of Public Health
Prof. Zulma I. Olivieri-Villafañe	Co-Chair of Steering Committee Co–Coordinator, Institutional and Student Learning Assessment Committee Professor, School of Health Professions
Dr. Wanda L. Barreto-Velázquez	Coordinator, Institutional and Student Learning Assessment Committee Chair Standard I Director, Office of Research and Institutional Assessment, Evaluation Specialist
Prof. Mayra Vega-Gerena	Chair Standard II Acting Director, Institute of Bioethics Eugenio María de Hostos Associate Professor, School of Pharmacy
Dr. Edna N. Almodovar-Caraballo	Chair Standard III Associate Dean for Academic Affairs Associate Professor, School of Pharmacy
Dr. Arnaldo A. Cruz-Rivera	Chair Standard IV Associate Dean for Student Affairs Associate Professor, School of Health Professions
Dr. Arlene Sánchez-Castellano	Chair Standard V Professor, School of Dental Medicine Member, Institutional Assessment Committee
Dr. Heriberto Marín-Centeno	Chair Standard VI Professor, Graduate School of Public Health Economist
Dr. Ramón F. González-García	Chair Standard VII Professor, School of Dental Medicine Executive Assistant to the Chancellor
Mr. José A. Caro-Torres	Chair, Evidence Inventory Workgroup Statistic Official
Ms. Irisely López-Ramos	Administrative Assistant, Clerical Coordinator Deanship for Academic Affairs MSC
Ms. Glizette O. Arroyo Morales	MSC General Student Council Representative

Working Group 1 – Mission and Goals Responsibilities

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.

1. Examine the Institution mission and goals, vision and institutional values.
2. Engage in a comprehensive self-appraisal of MSC success in meeting the institutional mission, goals, and strategic initiatives as they relate to each of the standard I for accreditation Guidelines for Reporting.
3. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
4. Review the documentation roadmap relevant to support Standard I compliance.
5. Examine the degree to which mission and goals statements are considered in the decision-making, and development of Institutional Policies.
6. Ensures periodic assessment of mission and goals to ensure they are relevant and achievable.

Working Group Standard 1 Membership	Titles
Dr. Wanda L. Barreto-Velázquez	Director, Office of Institutional Assessment, Planning and Resources
Dr. Sacha Rivera-Sarate	Faculty Pharmacy Practice Department - School of Pharmacy
Dr. María M. Hernández-Maldonado	Dean of Student Affairs, MSC
Dr. Nancy Dávila-Ortiz	Associate Dean Academic Affairs – School of Nursing
Dr. Janet Rodríguez-Rodríguez	Faculty Graduate Department – School of Nursing
Dr. Marío H. Rodríguez-Sánchez	Strategic Planning Consultant

Working Group 2 – Ethics and Integrity Responsibilities

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.

1. Examine the Institution Commitment and policies to academic freedom, intellectual freedom, freedom of expression, diversity, respect for diverse backgrounds, and property rights.
2. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
3. Review the documentation roadmap relevant to support Standard 2 compliance. Compliance with all applicable federal, state, and commission reporting policies, regulations, and requirements related to Standard
4. Provide evidence of periodic assessment of ethics and integrity as evidenced by institutional policies, processes, practices and implementation.
5. Ensure periodic assessment of ethics and integrity as evidenced in institutional policies, processes, practices and its implementation.

Working Group Standard 2 Membership	Titles
Prof. Mayra L. Vega-Gerena	Director – MSC Ethics Institute
Dr. Edna E. Pacheco-Acosta	Director – Title IX Office, MSC
Dr. Myriam L. González-Cordero	Assistant Dean Student Affairs, School of Pharmacy
Mr. Duhamel Monge-Delgado	Director, Sustainable Learning Program, Department of Human Resources
Mr. Angel Hoyos-Meléndez	Advisor in Communications, Press Office, MSC
Dr. Carlos J. Cañuelas-Pereira	Counsellor, Cecsi
Dr. Iris W. Cátala-Torres	Faculty, School of Nursing

Working Group 3 – Design-Delivery of Student Learning Experiences Responsibilities

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.

1. Examine student-learning experiences that are designed and delivered by faculty and other professionals of all academic offerings leading to a degree or recognized higher education credential.
2. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
3. Review the documentation roadmap relevant to support Standard 3 compliance.
4. Validate that the faculty assigned to design, deliver and assess the academic offerings and curricula possess the credentials, experience and expertise, and are sufficient in number to ensure student success.
5. Determine whether the UPR MSC provides adequate resources to satisfy all learning experiences expectations.
6. Ensure periodic assessment of the effectiveness of programs providing student-learning experiences.

Working Group Standard 3 Membership	Titles
Dr. Edna N. Almodovar-Caraballo	Associate Dean Academic Affairs - Pharmacy
Dr. Ruth Ríos-Motta	Evaluation Specialist, Coordinator, DrPH Program, School of Public Health
Dr. Wanda I. Colón-Ramírez	Professor, School of Health Professions.
Dr. Janet Rodríguez-Rodríguez	Faculty – School of Nursing
Dr. Edgardo Ruiz-Cora	Associate Dean, Graduate School of Public Health

Working Group 4 – Support of the Student Experiences Responsibilities

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.

1. Demonstrate 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.
2. Understand how the mission and core values of MSC relate to recruitment, selection, and retention of an academically talented and diverse student body.
3. Examine the effectiveness of academic advising and student support systems.
4. Examine the metrics and mechanisms for monitoring the quality of the student experience.
5. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
6. Review the documentation roadmap relevant to support Standard 4 compliance.
7. Ensures the periodic assessment of programs supporting the student experience.

Working Group Standard 4 Membership	Titles
Dr. Arnaldo Cruz-Rivera	Assistant Dean for Student Affairs, School of Health Professions
Dr. Blanca E. Amorós-Rivera	Associate Dean for Student Affairs, MSC
Ms. Maribel Ortiz-Belmonte	Director, Admissions Office, MSC
Dr. Maribel Pérez-Mercado	Director, Student Procurement Office, MSC

Working Group 5 – Educational Effectiveness Assessment Responsibilities

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.

1. Demonstrate that student learning and educational effectiveness assessment is fundamental to fulfill the MSC mission and goals.
2. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
3. Review the documentation roadmap relevant to support Standard 5compliance.
4. Document the assessment of student learning is effectively used to improve the student learning as well as to strengthen the excellence of academic programs
5. Evaluate the effectiveness of the student learning assessment processes at the Medical Sciences Campus.
6. Ensures the periodic assessment of the effectiveness of assessment processes utilized by the institution for the improvement of educational effectiveness.

Working Group Standard 5 Membership	Titles
Dr. Arlene Sánchez-Castellano	Assessment Specialist, School of Dental Medicine
Dr. Debora H. Silva	Faculty – School of Medicine
Dr. Ivelisse M. García-Meléndez	Faculty and Chair of Curriculum and Assessment Office – School of Public Health
Dr. Leonor M. Rivera-Rosa	Chair Evaluation Office – School of Nursing
Dr. Jonathan Hernández-Agosto	Faculty – School of Pharmacy
Dr. Cynthia Cruz-Gómez	Faculty – School of Health Professions
Prof. María E. Quintero-Vélez	Assistant Researcher, Deanship for Academic Affairs
Prof. Zulma I. Olivieri-Villafañe	Co-Coordinator, Institutional and Student Learning Assessment Committee

Working Group 6 – Planning, Resources and Institutional Improvement Responsibilities

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.

1. Demonstrate that institutional objectives are clearly aligned with the MSC goals and used for planning and resource allocation based on well-defined decision-making processes and clear assignment of responsibility and accountability.
2. Demonstrate that the MSC Planning and Budget Process are a participatory process, well-documented and communicated at all university community levels.
3. Demonstrate that institutional priorities are align with the strategic planning and institutional goals and objectives.
4. Demonstrate that the MSC has the appropriate institutional resources to fulfill its mission and goals
5. Assess the effectiveness of the MSC financial, fiscal, human and technological resources for its operational viability.
6. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
7. Review the documentation roadmap relevant to support Standard 6 compliance.
8. Ensures the periodic assessment of the effectiveness of planning, resource allocation, institutional renewal processes, and availability of resources.

Working Group Standard 6 Membership	Titles
Dr. Heriberto Marín-Centeno	Economist – School of Public Health
Dr. José M. Pérez-Díaz	Actuary – School of Public Health
Mr. Francisco Pérez-de los Santos	Director – Information Technology Office, MSC
Ms. Mildred Martínez-Rivera	Director – Budget Office, MSC
Mr. Adalberto Santos-Colón	Budget Analyst, MSC
Prof. Charles W. Seguí-Caballero	Librarian– Conrado J. Asenjo Library

Working Group 7 – Governance, Leadership and Administration Responsibilities

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.

1. Demonstrate that there exists a clearly articulated governance structure that outlines roles, responsibilities, and accountability for decision making by each constituency, including the Board of Trustees, the Central Administration, The MSC Executive Leadership, the Faculty, staff members, and students.
2. Provide the steering committee with regular updates about the core findings relevant to the assigned standard for accreditation.
3. Review the documentation roadmap relevant to support Standard 6 compliance.
4. Reaffirm that the Board of Trustees ensures that the Institution clearly fulfill its mission and goals.
5. Document that there is open communication between the Universities constituencies at all levels.
6. Validate that there are appropriate evaluation processes that periodically assess the roles, functions, and effectiveness of the Administrations, Executive Leaders, Faculty and Staff.
7. Ensure periodic assessment of the effectiveness of governance, leadership, and administration.

| Working Group Standard 7 Membership	Titles
Dr. Ramón F. González-García	Executive Assistant – Chancellors Office, MSC
Dr. Raúl Rivera-González	Executive Secretary – Administrative Board, MSC Executive Secretary – Academic Senate, MSC
Mr. Manuel Colón-Pérez	Dean of Administration, MSC
Dr. Mayra Olavarría-Cruz	Faculty – Board of Trustees, UPR System
Dr. José A. Capriles-Quirós	Chair, SSR Steering Committee
Mr. Jorge L. Rivera-Velázquez	Graduate Student Representative – Board of Trustees, UPR System

Working Group 8 – Evidence Inventory Responsibilities

The Evidence Inventory Workgroup will collect all the documentation of policies and procedures that are in writing, approved, and administered through applicable institutional processes that will support the Self Study Process for Re-Accreditation. The EIWG will use all Institutional and Reviewer templates provided by MSCHE to upload all support documentation according to the dates and requirements specified by MSCHE. The EIWG will be responsible to screen and recommend the Steering Committee the best pieces of evidence to support the Self Study Narrative Document.

Evidence Inventory Working Group	Titles
Mr. José A. Caro-Torres	Institutional Data Analyst, MSC
Prof. María E. Quintero-Vélez	Institutional Data Analyst, MSC
Mr. Javier O. Algarín-Ortiz	IT Coordinator, Deanship of Academic Affairs
Mr. Francisco Pérez-de los Santos	Director – IT Office, MSC

The Self Study Steering Committee is responsible for coordinating all phases of the self-study process, documents and reports. The Steering Committee Executives are responsible for providing the necessary leadership on campus.

The Steering Committee has already decided to use the collaborative approach and has created a Google Team Share Drive for this purpose and to facilitate communication among all workgroups. The Share Team drive is available at the following Internet address: https://drive.google.com/drive/folders/0AKDy4pEEsFVSUk9PVA?ogsrc=32
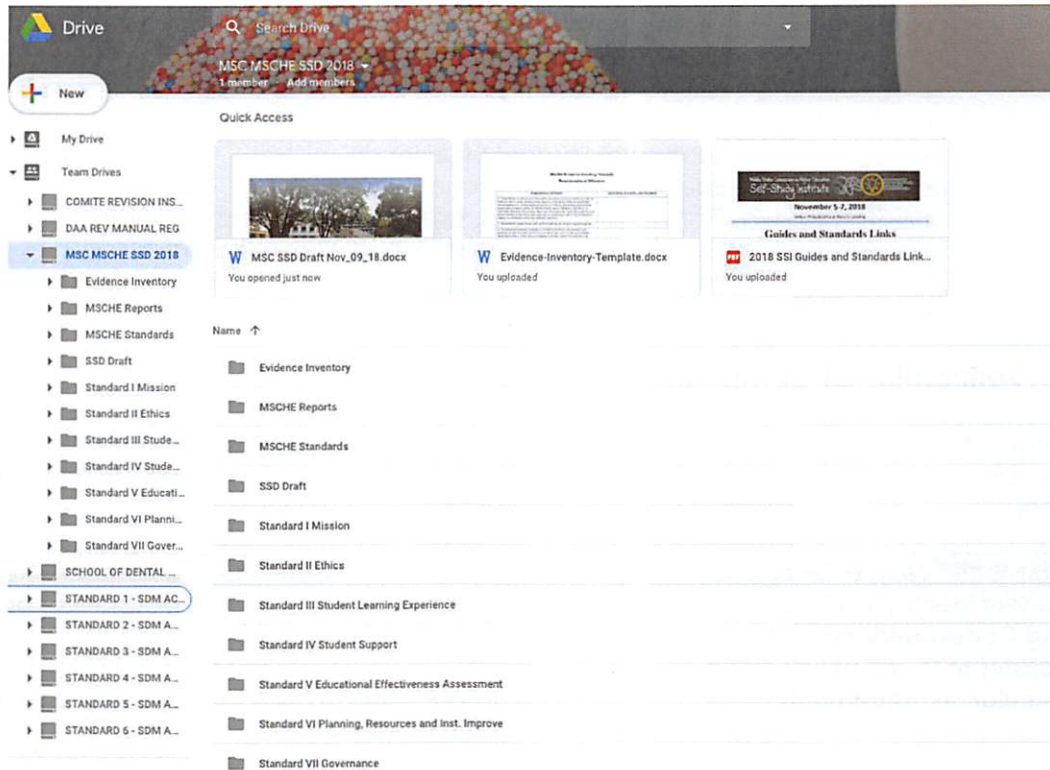
In order to assure broad participation, seven working groups (one for each accreditation standard, and one for evidence inventory) have been appointed. Groups will consist of faculty members from six schools, student representative, non-teaching staff, and other members the group deem necessary to conduct the analysis and assessment of the specific assigned area. The Working Groups will be headed by a member of the Steering Committee, thus ensuring constant communication with the Steering Committee and accountability lines between both groups. Once the Self Study Design is approved by the MSCHE, the Institutional research analysis will be started.

VI. Organization of the Final Self-Study Report

The Self Study Report will be organized as follows:

- Cover page
- Table of Content
- List of Tables
- List of Figures
- Steering Committee and Working Groups
- Executive Summary
- Institutional Overview
- Standard 1- Mission and Goals
- Standard 2 - Ethics and Integrity
- Standard 3 – Design and Delivery of Student Learning Experience
- Standard 4 – Support of Student Experience
- Standard 5 – Educational Effectiveness Assessment
- Standard 6 – Planning, Resources, and Institutional Improvement
- Standard 7 – Governance, Leadership, and Administration
- Evidence Inventory
- List of Acronyms used in the Report

VII. Verification of Compliance Strategy

Each institution is required to complete a Verification of Compliance process. The Design includes a description of what strategy(ies) the institution will employ to successfully complete this process, including:

Area for Verification of Federal Compliance	Person or Office Responsible
1. **Student identity verification in Distance and Correspondence education**	Mr. Francisco Pérez, Director, MSC Office of Informatics
2. **Transfer of Credit policies and articulation agreements**	Dr. José Hawayek, Dean for Academic Affairs Dr. José A. Capriles, MSCHE ALO, Associate Dean for Academic Affairs Prof. Brunilda Príncipe, Higher Education Specialist, Office of Academic Development / Membership, Council on Academic Planning and Integration (CIPE)
3. **Title IV program responsibilities**	Ms. Yolanda Rivera, Director, Office of Asistencia Económica
4. **Institutional Records of Student Complaints**	Dr. María M. Hernández, Dean of Student Affairs Dr. Maribel Pérez, Ombudsman, Student Procurement Office
5. **Required Information for Students and the Public**	Dr. José A. Capriles, MSCHE ALO, Associate Dean for Academic Affairs
6. **Standing with State and Other Accrediting Agencies**	Dr. José Hawayek, Dean for Academic Affairs Dr. José A. Capriles, MSCHE ALO, Associate Dean for Academic Affairs
7. **Contractual Relationships**	Not Applicable to MSC
8. **Assignment of credit hours**	Dr. José Hawayek, Dean for Academic Affairs Dr. José A. Capriles, MSCHE ALO, Associate Dean for Academic Affairs Prof. Brunilda Príncipe, Higher Education Specialist, Office of Academic Development / Membership, Council on Academic Planning and Integration (CIPE)

VIII. Self-Study Timetable

DATE	ACTIVITY
November 2018	• Self-Study Institute 2018 by invitation • Lessons learned from Self Study Institute shared with CIPE • Identification and selection of chairs and members of Steering Committee and Working Groups • Google Team Share Drive for SSD • Participation in MSCHE Annual Meeting 2018
December 2018	• Appointment Letters of Chairs of Steering Committee and Working Groups • Self-Study Training to Chairs of Steering Committee and Working Groups Dec 5, 2018 • Google Team Share Drive Training for Steering Committee and Working Groups Dec 12, 2018 • Assessment Workshop: Retention and Graduation Rates of Academic Offerings by Associate Deans for Academic Affairs of the MSC – Dec 19, 2018 • Steering Committee Meetings timeline • Begin Draft SSD
January 2019	• Remote Meeting with MSCHE Staff Liaison • MSCHE holds SSD due to Show Cause Status – January 10, 2019
February-May 2019	• SSD working document continues
June 27, 2019	• MSCHE decision to reaffirm accreditation to MSC-UPR after Show Cause
July 2019	• Begin working on Self Study for Re-accreditation 2021-2022 • Working groups gather and analyze data • Steering Committee monthly meetings • Submission of monthly progress reports to Steering Committee
September 2019	• Pre-Workshop by VPAA in preparation for MSCHE Self-Study Institute 2019
October 2019	• Approval of SSD by Steering Committee (Oct 1, 2019) • Approval of SSD by CIPE (Oct 1, 2019) • Approval of SSD by Academic Senate (Oct 3, 2019) • Approval of SSD by Administrative Board
November 2019	• MSCHE Vice President Accreditation Dr. Idna Corbett site visit to discuss SSD with MSC Steering Committee (Nov 13, 2019)
November–December 2019	• Approval of SSD by Governing Board
January–September 2020	• Simultaneous sessions of working groups • Writing Draft of Self Study Report
June 2020	• 1st Self Study Report written draft
October–November 2020	• Team Chair chosen for MSCHE Site Visit • Visit Dates chosen • Accepted SSD sent to MSCHE Site Visit Chair
November–December 2020	• Editing of Self Study Report – Steering Committee
January 2021	• Complete the Self Study Report for Re-accreditation • Validation/Approval of Self Study Report by Steering Committee
February 2021	• Presentation of the SSR to the Academic Senate
March 2021	• Presentation of the SSR to the Administrative Board
April 2021	• Submit Approved SSD to VPAA, the President of the UPR and UPR Board of Trustees

May–June 2021	• Self-Study Draft Report sent to the Team Chair • Team's chair preliminary Visit to MSC
July-August 2021	• Final Self Study Report with Team's Chair recommendations
September 2021	• Final Self Study and Evidence Inventory Uploaded to the My MSCHE Portal
October–December 2021	• Evaluation Team Site Visit to MSC • Team Report • MSC Response
March 2022	• Commission Determines Accreditation Action for UPR MSC

IX. Communication Plan

Communication methods:

- The Steering Committee will develop all Self Study Documents using Google Team Share Drive.
- The Self Study Report will be presented on extraordinary meetings at the MSC Academic Senate, Administrative Board and to Central Administration.
- After final approval, the Self Study Design will be shared with all university community at the Deanship of Academic Affairs Official Webpage.
- The Self Study Report will be posted on the MSC Official Webpage after final submission to MSCHE and Site Visit Team.
- News capsules will be published periodically on Facebook and Twitter MSC accounts to empower and disseminate information in relation to Self-Study Report Progress and Updates.

X. Evaluation Team Profile

1. The Steering Committee recommends that the Evaluation Team be composed of peers in the areas taught by Medical Sciences Campus schools (medicine, dentistry, public health, pharmacy, nursing, allied health fields, and basic and clinical research).
2. The Site Visit Team members should have teach/work at similar state-supported, academic health sciences centers, and who fully understand the importance of balancing didactic, clinical, research, and service activities in assuring quality as well as the survival of these institutions in changing health scenarios.
3. Peer evaluators should be bilingual (Spanish-English) in order to facilitate the interviews and review of the evidence inventory.
4. Although many of the official documentation of the MSC is in English, system wide and legal documents are in Spanish.

XI. Evidence Inventory

Refer to the following table of supporting documents.

XII. MSCHE Evidence Inventory Documents, Processes, and Procedures

Requirements of Affiliation

Requirement of Affiliation	Documents, Processes, and Procedures
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.	• Cert CEPR 2018 – 210 • MSCHE Status of Accreditation Statement (SAS) June 27,2019 • Status of Accreditation of Professional Degrees by each Accreditation Agencies
2. The institution is operational, with students actively pursuing its degree programs.	• Certification of Student Enrollment AY 2019-20 • Certification of Students Enrollment AY2019-20 by degrees • Academic Calendar 2019-2020
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.	• Single Audit 2017, 2018 and 2019 (update) • 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.	• Official Certification of Compliance with MSCHE, interregional and inter-institutional policies and procedures.
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 http://www.rcm.upr.edu/wp-content/uploads/sites/3/2017/07/Plan-Estrategico-RCM-UPR-2017-2022.pdf

Requirement of Affiliation	Documents, Processes, and Procedures
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 Assessment Plan 2017-2022 (under revision) • MSC Institutional Student Learning Assessment Plan 2017-2022 (under revision) • Accreditation Status of Professional Degrees AY 2019-20 • Compliance with S3, S4, S5 and S6
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.	• Statement of Accreditation Status of academic programs by Professional Accreditations rev. Aug 2019 • MSC Catalog 2017-2020 http://www.rcm.upr.edu/wp-content/uploads/sites/3/2019/01/UPR-MSC-CATALOG-2017-2020-REV-01092019.pdf • Compliance with S3, and S5
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.	• MSC Strategic Plan 2017-2022 • MSC Institutional Student Learning Assessment Plan 2017-2022 (under revision) • Compliance with S1, S3, S4, S5 and S6
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.	• Memorial de Presupuesto, Central Administration 2019-2020 • Certification JG 128 2018-19 UPR Operational Budget FY 2020 • FOMB approved UPR Budget June 30, 2019 • Compliance with 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 Certification of Related Entities for MSC • Cert 160 JG 2014-2015 - General By Laws, Rules and Regulations UPR, as amended • Compliance with S7
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.	• Cert JG 100 (2013-14) - Governing Body By Laws, Rules and Regulations • Cert 100 JG 2013-2014 Internal By Laws UPR Governing Body • OEG PR Government Ethics Act of 2011 • Statement of Code of Ethics • Ethics on MSC at http://www.rcm.upr.edu/en/ethics-on-campus/

Requirement of Affiliation	Documents, Processes, and Procedures
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.	• Certification 100 JG 2013-14 - Governing Body By Laws, Rules and Regulations
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

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.

Standard I Criteria	Documents, Processes, and Procedures

1. 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;
   b. address external as well as internal contexts and constituencies;
   c. are approved and supported by the governing body;
   d. guide faculty, administration, staff, and governing structures in making decisions related to planning, resource allocation, program and curriculum development, and the definition of institutional and educational outcomes;
   e. include support of scholarly inquiry and creative activity, at all levels and of the type appropriate to the institution;
   f. are publicized and widely known by the institution's internal stakeholders;
   g. Are periodically evaluated.
	• Disclosure via email (July 5, 2017) and RCM website (web address).
	• Strategic Planning Retreat 2017
	• MSC Strategic Plan 2017-2022 (Cert. 79 SA 2016-17)
	• MSC Annual Report 2017-18; 2018-19; 2019-20 (ongoing)
	• UPR Assessment Policy - Cert. 43 JG 2006-07
	• Evaluation First Year Strategic Plan 2017-2022
	• Annual Reports 2017-18, 2018-19, 2019-20 (ongoing)

2. Institutional goals are realistic, appropriate to higher education and consistent with mission.	• MSC Strategic Plan 2017-2022 (Cert. 79 SA 2016-17)
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.	• Institutional Assessment plan 2010-2016, 2017-2022 (under revision) • MSC Institutional Student Learning Assessment Plan 2017-2022 (under revision) • Dashboard 2014-2018
4. Periodic assessment of mission and goals to ensure that they are relevant and achievable.	• Informe de Logros AY 2018-2019; 2019-20 (ongoing) • Evaluation of First Year MSC Strategic Plan 2017-2022 • MSC Professional Accreditation Status (rev. Sept 2019)

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.

Standard II Criteria	Documents, Processes, and Procedures
1. Commitment to academic freedom, intellectual freedom, freedom of expression, and respect for intellectual property rights.	• Intellectual property protection procedures (Student Manual) • Evidence of conferences facilitated by Conrado Asenjo Library personnel • IRB procedures • Faculty Manual • Política Institucional Sobre Derechos de Autor – UPR – Cert 93-140 CES • Academic Freedom • Research Integrity Officer • Faculty Ombudsperson - http://procclaustral.rcm.upr.edu/ • Student Ombudsperson - Cert 119 JG 2014-2015 • Academic Senate – Cert 66 SA 2009-10
2. A climate that fosters respect among students, faculty, staff, and administration from a range of diverse backgrounds, ideas, and perspectives.	• Title IX Policies - rcm.upr.edu/tituloix/ • Student and faculty committee's guidelines (from each faculty). • Política Institucional sobre la Convivencia en la Universidad de Puerto Rico – Cert 38 JG 2015-16 • Derechos y Deberes del Estudiante para con el Profesor Cert 16 SA 2011-12 (Manual del Estudiante) - **Certificaciones 028, Serie 1995-1996, 031, Serie 2007-2008 y 078, Serie 2010-2011 del SA del RCM** • Derechos y Deberes del Profesor para con el estudiante • Enmienda Al Artículo 4.9 – Reglamento General De Estudiantes • Statement (©2019 Developed by the IT Unit of the Deanship of Administration. Disclaimer: The University of Puerto Rico guarantees equal opportunity for its student's employees and aspirants to study or work at the institution. The institution also promotes equal opportunity for its academic program, services and working conditions. The University does not exclude from participating, nor exclude from its

Standard II Criteria	Documents, Processes, and Procedures
	benefits, any person because of reason of age, race, color, place of birth, origin or social condition, physical or mental impediments, sexual preference, political ideals or religion. • MSC-UPR, no discrimination Institutional Policies (academic). Title IX of the Education Amended (No discrimination by sex and gender, academic integrity, reasonable modification, No discrimination)- http://www.rcm.upr.edu/en/title-ix/ • Law 51 June 7,1996, as amended - *Ley de Servicios Educativos Integrales para personas con impedimentos* • Statements approved by Academic Senate for Syllabus: Reasonable Accomodations, Title IX No discrimination, and Academic Integrity • Faculty Manual (under revision)
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.	• Student's Ombudsman Cert 119 JG 2014-2015 • Claustral Ombudsman http://procclaustral.rcm.upr.edu/ • MSC Student Manual 2019-2020 • Annual orientation on Rights and Duties of Newly admitted students to the MSC • Procedimiento para Atender Situaciones – Cert. 147 SA 2015-16 • Proceso para Atender Querellas por Parte de los Estudiantes – • Procedimiento para reclamación de la calificación final de curso en RCM - Cert. 21 SA 2018-19 • Human Resources Procedures • Ley 51 del 7 de junio de 1996 • Conflict Mediation Center http://cmc.rcm.upr.edu/ • Webaddress: http://de.rcm.upr.edu/politicas/
4. The avoidance of conflict of interest or the appearance of such conflict in all activities and among all constituents.	• UPR Certification #8 (2012-2013) Policy and Guidelines for Financial Conflicts of Interests and Commitments in Research and Sponsored Programs of the University of Puerto Rico • UPR Disclosure of Financial Interest Form 1A • UPR Disclosure of Significant Financial Interest Form 1B • UPR Financial Conflict of Interest Annual Disclosure Form 2A • UPR Financial Conflict of Interest Annual Disclosure Form 2B

Standard II Criteria	Documents, Processes, and Procedures
	• Informes de la Oficina de Etica Gubernamental • Informes de la Oficina del Contralor de Puerto Rico
5. Fair and impartial practices in the hiring, evaluation, promotion, discipline and separation of employees.	• Human Resources – Employee Manual • Hiring, disciplinary and separation of employee's procedures. • positions announcement policies and evidence • Guidelines for Promotion and Tenure • Orientation of new non-teaching staff • Revised Faculty Manual • Tenure and Promotion

6. Honesty and truthfulness in public relations announcements, advertisements, recruiting and admissions materials and practices, as well as in internal communications.	• RCM Communication Office procedures for: public relations announcements
	  a. advertisements
	  b. recruiting and admissions announcements
	  c. internal communications
	  d. Recinto de Ciencias Médicas Facebook official page
	  e. Twitter
	  f. Facebook
	  g. RCM News
	  h. DAA_Informa
	  i. RCM_Informa
	  j. Convocatorias UPR
	  k. Official MSC Webpage
	  l. Consumer Information for the General Public

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.
	• Student Manual 2019-20 and webpage de.rcm.upr.edu
	• At Students Affairs deanship procedures and protocols for economic aids application, such as :

Standard II Criteria	Documents, Processes, and Procedures
	1. GENERAL INSTRUCTIONS 2. To request admission or transfer to the Medical Sciences Campus www.rcm.upr.edu 3. INSTITUTIONAL POLICY ON EXEMPTIONS FROM REGISTRATION RIGHTS AT THE UNIVERSITY OF PUERTO RICO 4. Instructions for using the Student System (SIS) / Online Registration https://sistemas.rcm.upr.edu/prei/ 5. Manual of Procedures for the Administration of Scholarships and Collection of Legislative Loans 6. Title IV refund policyGuidelines and Procedures for the Administration of Scholarships and Legislative Loans (Manual of Procedures for the Administration of Scholarships and Collection of Legislative Loans) 7. Title IV Refund Policy 8. Cert. 4 JG 2019-20- New financial aid (Nuevas ayudas económicas Cert. 4 JG 2019-20)

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.
	• HIPAA and FELPA Law
	• Satisfactory Academic Progress Reports – Registrar Manual
	• Consumer Information on MSC homepage http://www.rcm.upr.edu/informacion-consumidor/
	• Dashboard http://coia.rcm.upr.edu/resultados/2014-2018/
	• MSCHE Annual Updates
	• IPEDS

9. Periodic assessment of ethics and integrity as evidenced in institutional policies, processes, practices, and the manner in which these are implemented.	• Sustainable Learning Program Procedures and protocols, educational agenda and evidence of attendance rates. • Title IX Policies, announcements and reports • Complaint forms / Complaint for Violation of Title IX • http://de.rcm.upr.edu/certificaciones/ • MSC Institutional Assessment Plan – evaluation results

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 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.

Standard III Criteria	Documents, Processes, and Procedures
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.	• Student Exit Surveys • Courses Assessment samples • Job placement results • New Academic Program Process • Institutional Assessment Plan 2009-2016, 2017-2022 (under revision) • Status of Professional Accreditations

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;
  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.
	• Reglamento UPR
	• School's Bylaws
	• Tenure and Promotion Procedures and Policy
	• Certification adjunct faculty
	• School's Assessment Plans
	• Curricular reviews and revisions
	• Five-year reports of programs not subject to accreditation
	• Lists of Faculty Credentials by Schools
	• Faculty Development Plan
	• Promotion and Tenure

3. 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.	• MSC Catalog, http://www.rcm.upr.edu/catalogo-del-rcm/ • Nursing http://enfermeria.rcm.upr.edu/ • Pharmacy http://farmacia.rcm.upr.edu/

Standard III Criteria	Documents, Processes, and Procedures
	• Medicine https://md.rcm.upr.edu/ • Dental Medicine http://dental.rcm.upr.edu/ • School of Health Professions http://eps.rcm.upr.edu/ • Public Health http://sp.rcm.upr.edu/ • MSC Dashboard (Retention, Graduation, Board Passing Grades, Employment Rates, etc)
4. Sufficient learning opportunities and resources to support both the institution's programs of study and students' academic progress.	• Blackboard Ultra • Moodle • Next • CATA • Title V • Office of Information Systems (OSI)
5. At institutions that offer undergraduate education: A general education program, free standing or integrated into academic disciplines, that: a. 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; b. 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; c. In non-US institutions that do not include general education, provides evidence that students can demonstrate general education skills.	• Accreditation of professional programs
6. 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.	• List of Investigators, Credentialing, Grants, and Honors • List of Research Courses • List of Student's research projects, awards, publications and presentations at local, national and international forums.

Standard III Criteria	Documents, Processes, and Procedures
	- MBRS RISE - Deanship of Research - STEM Scholarships - RCMI
7. Adequate and appropriate institutional review and approval on any student learning opportunities designed, delivered, or assessed by third party providers.	- Application Permission to take courses at other institutions - Registrar Manual - DECEP - Professional Boards - Professional Organizations Memberships
8. Periodic assessment of the programs providing student-learning opportunities.	Examples of Student Learning Assessments from each of the Six Schools of the MSC.

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.

Standard IV Criteria	Documents, Processes, and Procedures
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: a. accurate and comprehensive information regarding expenses, financial aid, scholarships, grants, loans, repayment, and refunds; 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; c. orientation, advisement, and counseling programs to enhance retention and guide students throughout their educational experience; 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.	• Manual of Standards and Procedures Registrar's Office - Cert SA 70, 2010-2011 • Cert 75 JS 2005-2006 Debt Collection • Cert 111 JG 2017-2018 DISPONE COSTO DEL CREDITO PROGRAMAS GRADUADOS ANO FISCAL 2019 • Cert 112 JG 2017-2018 DISPONE CARGOS DE MATRICULA PARA ESTUDIANTES NO RESIDENTES E INTERNACIONALES • Cert 117 JG 2017-2018 RESOLUCION NUNC PRO TUNC - ENM. CERT. 111 2017-2018 COSTOS PROGS GRADUADOS • Cert 11, CES 1981-1982 - 50% tuition reimbursement • MSC Student's Manual 2019-2020 • Cert. 140 JS 1999-2000, Cert 135 CES 1988-1989 Teaching and Research Assistant Program • Cert 108 2018-2019 ENMIENDA CERT. NUM. 55 (2016-17)-POLITICA Y NORMAS DE ELEGIBILIDAD ACAD. PARA PARTICIPACION EN PROG. AYUDAS ECONOMICAS • Cert 5 2019-2020 ENMIENDA CERT. 49 2018-2019 REGLAMENTO CONCESION ASISTENCIA ECONOMICA UPR • Cert 4 2019-2020 JG Política Institucional sobre la Otorgación de Ayudas Económicas para Estudiantes con Distinciones Académicas en la Universidad de Puerto Rico. • Cert 5 2019-2020 JG ENMIENDA POLITICA OTORGACION AYUDAS ECONOMICAS DISTINCIONES ACAD. UPR • Institutional Assessment Plan 2017-2022 • Procedural Manual Student Center for Counseling

Standard IV Criteria	Documents, Processes, and Procedures
	and Psychology (CECSI), rev 2019 • Office Service for Students with Disabilities (OSEI) • Office of Student's Financial Assistance http://de.rcm.upr.edu/asistencia-economica/ • Reasonable Modification Policy and academic services for students with disabilities enrolled in the UPR, Cert num 133 2015-2016 • http://preguntame.rcm.upr.edu/. • Comprehensive Counseling Program School of Health Professions (PCC) Rev 2015 • Manual of Standards and Procedures Registrar's Office • Admission and Graduation Requirements MSC Catalog • Institutional Policy on the authorization of students to take courses in other units or university institutions, 31 mayo 1996 • Cert JS 115, 1996-1997 Institutional Policy on transfer programs Graduation Rates (minimum and maximum times) • Retention Rates • Job placement Statistics
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.	• Manual of Standards and Procedures Registrar's Office - • Transfer Credit Policy • Competencies Models (for each academic program)
3. Policies and procedures for the safe and secure maintenance and appropriate release of student information and records.	• FERPA and HIPPA laws http://de.rcm.upr.edu/wp-content/uploads/sites/18/2018/02/LEY-FERPA.pdf • Manual of Standards and Procedures Registrar's Office • Confidentiality and Security of Student Information and Records – Institutional Policy (Annex 19) • Family Educational Rghts and Privacy Act 1974-Buckley Procedural Manual Student Center for Counseling and Psychology (CECSI), rev 2019 • Office Service for Students with Disabilities (OSEI) http://de.rcm.upr.edu/servicios-al-estudiante-con-

Standard IV Criteria	Documents, Processes, and Procedures
	impedimentos/ • Reasonable Modification Policy and academic services for students with disabilities enrolled in the UPR, Cert num 133 2015-2016
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.	• MSC Student's Manual 2019-2020 http://de.rcm.upr.edu/wp-content/uploads/sites/18/2019/06/MANUAL-DEL-ESTUDIANTE-2019-2020.pdf • Cultural Activities and Extracurricular Program http://de.rcm.upr.edu/oficina-de-actividades-sociales-y-culturales/ • Program of Quality of Life http://de.rcm.upr.edu/oficina-de-calidad-de-vida/ • *Vida Estudiantil* http://de.rcm.upr.edu/vida-estudiantil/ • Deanship of Students Affairs http://de.rcm.upr.edu/
5. If applicable, adequate and appropriate institutional review and approval of student support services, designed, delivered, or assessed by third-party providers.	• Procedural Manual Student Center for Counseling and Psychology (CECSI), rev 2019 http://cecsi.rcm.upr.edu/ • Proposal for Accreditation of the International Association of Counseling ald Psychological Services (IACS)
6. Periodic assessment of the effectiveness of programs supporting the student experience.	• MSC Student's Manual 2019-2020 • Satisfaction Surveys for counseling and psychological Services • Satisfaction Surveys for Students Medical services • Student Exit Surveys • Employers Satisfaction Surveys

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.

Standard V Criteria	Documents, Processes, and Procedures
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.	• Institutional Assessment Plan • Institutional Student Learning Assessment Plan • Course Syllabus • Student evaluation of Courses • Program evaluation of Courses in the curriculum committee
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.	• Institutional assessment plan • Professional Accreditations Status • Program self-studies for the accreditation agency • Program annual reports to accreditation agencies • Sample of the level of program licensure approval • Sample assessment reports from programs of each school • Sample of Program reports in last 2-3 years • Program Curricular Revisions • New approved academic programs • New approved academic approaches to learning • MSC website assessment dashboard • Institutional Report and other summaries (includes performance indicators)
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;	• Example of Program student learning assessment committee reports • Curriculum minutes or reports • Example of professional development activities • MSC Schools and Programs Website

Standard V Criteria	Documents, Processes, and Procedures
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	• Retention rates • Graduation rates • MSC Direct and Indirect Measures used by Programs
4. If applicable, adequate and appropriate institutional review and approval of assessment services designed, delivered, or assessed by third party providers.	Not applicable to MSC
5. Periodic evaluation of the assessment processes utilized by the institution for the improvement of educational effectiveness.	• MSC Institutional Assessment Committee minutes or reports. • Institutional Report and other summaries (includes performance indicators)

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.

Standard VI Criteria	Documents, Processes, and Procedures
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.	• UPR strategic plan 2017-2022 - http://www.upr.edu/plan-estrategico-upr-2017-2021/ • MSC Strategic Plan 2017-2022 - http://www.rcm.upr.edu/wp-content/uploads/sites/3/2017/07/Plan-Estrategico-RCM-UPR-2017-2022.pdf • Chancellor's Working Plan
2. Clearly documented and communicated planning and improvement processes that provide for constituent participation and incorporate the use of assessment results.	• MSC Institutional Assessment Plan 2017-2022 • Institution's official webpage • Chancellor's Monthly Reports to 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.	• Memorial de Presupuesto, Central Administration 2019-2020 • Certification JG 128 2018-19 UPR Operational Budget FY 2020 • FOMB approved UPR Budget June 30, 2019 • Budgetary Projections
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.	• UPR Capital Improvement Plan • NEXT • SIS • ORACLE • Google applications • MSC Core Router CISCO Catalyst 6513
5. Clear assignment of responsibility and accountability.	• Single Audit 2017,2018 and ongoing 2019

Standard VI Criteria	Documents, Processes, and Procedures
6. Comprehensive planning for facilities, infrastructure, and technology that includes consideration of sustainability, deferred maintenance, and is linked to the institution's strategic and financial planning processes.	• Preventive Maintenance Plan • Evidence of Institution's permanent improvements
7. An annual independent audit confirming financial viability with evidence of follow-up on any concerns cited in the audit's accompanying management letter.	• Single Audit 2017, 2018 and 2019 (ongoing) • Follow up of Single Audit Concerns
8. Strategies to measure and assess the adequacy and efficient utilization of institutional resources required to support the institution's mission and goals.	• Comprehensive Assessment Plan for Institutional Effectiveness (C8) • Assessment Reportsof (1) Working Plan; (2) Strategic Plan; (3) Institutional Effectiveness • Chancellor's reports to the faculty, Senate and Board.
9. Periodic assessment of the effectiveness of planning, resource allocation, institutional renewal processes, and availability of resources.	

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.

Standard VII Criteria	Documents, Processes, and Procedures
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.	• Annual Evaluation of Strategic Plan • UPR Organizational Chart • MSC Organizational Chart • Student satisfaction survey of resources (Library, Informatics, etc) • Act No. 1 of January 20, 1966, as amended • Act No. 13 of April 30, 2013 • Certification Number 160, JS 2014-2015, General Regulations of the University of Puerto Rico • Certification Number 100 JS, 2013-2014, as amended • Cert 129 2018-19 JG – reorganization of the office of the President and Vice President • Cert 10 2018-19 JG - Regulations on the operation of the Institutional transformation office

2. A legally constituted governing body that:
  a. 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;
  b. 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;
  c. ensures that neither the governing body nor individual members interferes in the day-to-day operations of the institution;
  d. oversees at the policy level the quality of teaching and learning, the approval of degree programs and
	• Act No. 1 of January 20, 1966, as amended
	• Certification Number 160, JG 2014-2015, General Regulations of the University of Puerto Rico
	• Certification Number 100, JS 2013-2014, as amended

Standard VII Criteria	Documents, Processes, and Procedures
the awarding of degrees, the establishment of personnel policies and procedures, the approval of policies and by laws, and the assurance of strong fiscal management; e. 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; 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.	
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	• Act No. 1 of January 20, 1966, as amended • Certification Number 160, JG 2014-2015, General Regulations of the University of Puerto Rico • Certification Number 10, JG 2017-2018 • Certification Number 81, JG 2017-2018

Standard VII Criteria	Documents, Processes, and Procedures
organization's efficiency and effectiveness.	

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 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.
	• Act No. 1 of January 20, 1966, as amended
	• Certification Number 160, JG 2014-2015, General Regulations of the University of Puerto Rico
	• Certification Number 124, JS 2013-2014, AB-MSC
	• Certification Number 20, JG 2018-2019

5. Periodic assessment of the effectiveness of governance, leadership, and administration.	• Certifications 136, 2003-2004; 138, 2003-2004 • Certification 80, 2005-2006 • Certification 43, 2006-2007 • Certification 3, 2009-2010; • Certification 38, 2009-2010 • Certification 27, 2018-2019 AS MSC

Jose A. Capriles Quirós, MD, MPH, MHSA
Associate Dean Academic Affairs
Medical Sciences Campus

XIII.   Appendices

CERTIFICACIÓN

Yo, Wanda L. Barreto Velázquez, Directora de la Oficina de Planificación, Investigación y Avalúo Institucional (OPIAI) e invitada permanente del Consejo de Integración y Planificación Educativa (CIPE) del Decanato de Asuntos Académicos en el Recinto de Ciencias Médicas, certifico:

Que CIPE en reunión extraordinaria del 1 de octubre de 2019, luego de la debida evaluación y discusión, aprobó por una unanimidad la **Propuesta de Diseño de Autoestudio** para la re-acreditación de la *Middle States Commision on Higher Education (MSCHE)*.

Y para que así conste, se expide y remito la presente Certificación, en San Juan, Puerto Rico, hoy 25 de octubre de 2019.

Wanda L. Barreto Velázquez, Ed.D.
Anotadora

ilr

CERTIFICACIÓN

Yo, Wanda L. Barreto Velázquez, Directora de la Oficina de Planificación, Investigación y Avalúo Institucional (OPIAI) y miembro del Comité de Timón de Autoestudio del Recinto de Ciencias Médicas, certifico:

Que el Comité Timón de Autoestudio para la re-acreditación de la *Middle States Commision on Higher Education (MSCHE)* en reunión extraordinaria del 1 de octubre de 2019, luego de la debida evaluación y discusión, aprobó por una unanimidad la **Propuesta de Diseño de Autoestudio**.

Y para que así conste, se expide y remito la presente Certificación, en San Juan, Puerto Rico, hoy 25 de octubre de 2019.

Wanda L. Barreto Velázquez, Ed.D.
Anotadora

·ilr

Senado
Académico
*Academic
Senate*

**2019-2020
Certificación 018**

Yo, Raúl Rivera González, Secretario Ejecutivo del Senado Académico del Recinto de Ciencias Médicas de la Universidad de Puerto Rico, Certifico:

Que el Senado Académico en su reunión ordinaria del 3 de octubre de 2019, acordó:

- **Aprobar la Propuesta de Diseño de Autoestudio del Recinto de Ciencias Médicas 2020-2021.**

- **La Propuesta forma parte de esta Certificación.**

Y, para que así conste, expido y remito la presente Certificación bajo el sello del Recinto de Ciencias Médicas de la Universidad de Puerto Rico, en San Juan, Puerto Rico, hoy 8 de octubre de 2019.

Raúl Rivera González, DrPH, MS. MT.
Secretario Ejecutivo

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RRG/mmr

UPR

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*Equal Employment
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SECRETARÍA JUNTA ADMINISTRATIVA

2019-20
Certificación Número 21

YO, **RAÚL RIVERA GONZÁLEZ**, Secretario Ejecutivo de la Junta Administrativa del Recinto de Ciencias Médicas de la Universidad de Puerto Rico, **CERTIFICO**:

Que la Junta Administrativa en reunión ordinaria celebrada el **martes, 22 de octubre de 2019**, luego de amplia discusión de rigor, la Junta Administrativa, **ACORDÓ**:

Endosar la Propuesta de Diseño de Autoestudio del Recinto de Ciencias Médicas 2020 – 2021, para la re-acreditación por la *Middle States Commission on Higher Education* (MSCHE).

Copia de dicha propuesta aprobada se hace formar parte de esta certificación.

Y para que así conste, para conocimiento del personal y de las autoridades universitarias que corresponde, expido esta Certificación bajo el sello del Recinto de Ciencias Médicas de la Universidad de Puerto Rico, hoy veinticuatro de octubre del año dos mil diecinueve.

Raúl Rivera González, DrPH, MS, MT
Secretario Ejecutivo

Vo. Bo.:

José Hawayek Alemañy, MD
Presidente Pro Tempore

RRG:JHA:ynr