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Ralph A. Wolff

March 3, 2011

Andrew K. Benton
President
Pepperdine University
24255 Pacific Coast Highway
Malibu, CA 90263

Dear President Benton:

At its meeting February 16-18, 2011, the Commission considered the report of the Capacity and Preparatory Review (CPR) team that visited Pepperdine University on September 21-24, 2010. The Commission also had access to the University's CPR report, its Institutional Proposal, the Commission action letter of 2001, and the institution's accreditation history. The panel would like to thank you, Provost and Accreditation Liaison Officer Darryl Tippens, and Vice Provost Timothy Chester for attending the Commission meeting. Your comments were most helpful.

In its Institutional Proposal, Pepperdine University set forth three themes for the CPR and Educational Effectiveness Review (EER) stages of the review: 1) development and use of indicators of institutional performance and educational effectiveness to support planning and decision making; 2) clarification of educational objectives and criteria for evaluation; and 3) improvement of Pepperdine's capacity for self-review and quality assurance.

Following acceptance of its Institutional Proposal, the University modified its approach, incorporating these outcomes but going beyond them to address major WASC recommendations from 2001. The 2001 recommendations included the following: 1) develop university-level planning and direction; 2) articulate institutional values and integrate them into decision making; 3) address distinctions between policy and administration, and the relationship between religious commitments and academic freedom; 4) implement assessment of student learning and use findings for planning and decision making; and 5) strengthen faculty engagement and influence on institutional culture.

Thus, the University's CPR report consisted of six reflective essays on the following topics: 1) mission and institutional educational objectives; 2) program review; 3) high-impact practices; 4) faculty engagement; 5) evidence-based decision making; and 6) demographics, diversity, and effectiveness.

The Commission, like the CPR team, was impressed by this ambitious expansion of the scope of the review. Along with the team, the Commission would like to

commend the quality and thoroughness of the University's report, the extensive research it reflects, the degree of outreach to the Pepperdine community, and the self-reflection and candor that characterized the University's discussion of its findings. The Commission also noted the University's solid retention and graduation rates. The Commission encouraged the University to continue its promising efforts, first, to create a cohesive cultural identity for the entire institution; and second, to enhance the role of faculty in decision making. A meaningful role for faculty, and indeed for all staff at Pepperdine, is entirely in keeping with the University's understanding of itself as a community.

The Commission would urge the University to take full advantage of the CPR team report, which it found exceptionally well-written, insightful, and full of promising suggestions. The team made the following recommendations: 1) act as expeditiously as possible on results of learning outcomes assessment; 2) create structures that promote collaboration in university governance and support faculty engagement; 3) implement and measure the success of the strategic plan, including university-wide buy-in as an indicator of success; and 4) continue to support diversity efforts, recognizing the importance of campus climate for the quality of *all* students' educational experiences.

The Commission endorsed the recommendations of the team and would like to emphasize the particular importance of the three issues discussed below. The University should understand that the point, ultimately, is not merely the introduction of new processes – which also can be read as “results” – but rather the improvement of performance, whether of students, institutional governance, or other aspects of institutional functioning, as a result of these new processes.

Student Learning and Assessment. While the team found that the University has made a good start, it concluded that “overall ... Pepperdine will need to shift its focus from inputs and resources as indicators of quality to a focus on outcomes and student learning results.” At the time of the EER visit, the team will expect to see not only processes in place, but also specific *results*. These include the following:

- Articulation and publication of student learning outcomes, performance indicators, and standards of achievement for each degree. (CFRs 1.2, 2.2, 2.3)
- Fully implemented program-level assessment of student learning outcomes to include graduate as well as undergraduate programs and co-curricular units. Such assessment should employ direct methods, and findings should be used for feedback and improvement at program and institutional levels, with benchmarking of levels of student learning to comparable institutions when feasible. (CFRs 1.2, 2.2, 2.3, 2.6, 2.7, 4.4, 4.6, 4.7)
- Implementation of assessment procedures for high-impact practices (HIPs) and use of findings to inform academic budget decisions. (CFRs 2.2, 2.3, 4.2, 4.4, 4.7); and

- Evidence of successful implementation of the new program review process, incorporation of student learning into it, and program improvements resulting from it. (CFRs 2.7, 4.4)

Faculty Engagement. The team found that while the University has made efforts to increase faculty participation in academic policy development, resource allocation, and assessment, “much remains to be done by both the University leadership and the faculty in general.” At any institution, a vibrant and engaged faculty is essential to institutional renewal, planning, and the implementation of challenging new processes such as assessment. The Commission was pleased that Pepperdine chose to examine this sensitive issue and strongly encourages the University to continue its efforts to engage faculty more fully in the full range of University-wide initiatives, to proceed with work on a revised faculty charter, and to create a risk-free climate that encourages open communication. Evidence of the success of these efforts should be provided at the time of the EER visit. (CFRs 1.7, 2.4, 3.4, 3.8, 3.11, 4.1)

Evidence-Based Decision Making. In multiple areas such as assessment, strategic planning, financial management, and diversity, the University is likely to benefit from a sharper focus on specific goals, and critical analysis of data to inform strategies and support achievement of those goals. Thus the EER team will look for the following:

- Further development of the role of the Office of Institutional Effectiveness (CFR 4.5);
- Evidence throughout the University of systematic data collection, sharing of data, analysis, and use for decision making (CFRs 4.3, 4.4, 4.6); and
- Progress on plans for increasing diversity among students, faculty, and staff, supported by data (CFRs 1.5, 3.2).

The Commission believes that Pepperdine University is in a position to proceed to the Educational Effectiveness Review in 24 months. Thus, the Commission acted to:

- 1) Receive the Capacity and Preparatory Review Report and continue the accreditation of Pepperdine University.
- 2) Reschedule the Educational Effectiveness Review for fall 2012. The Institutional Report will be due 12 weeks prior to the visit.
- 3) Request that the institution incorporate in its Educational Effectiveness Review Report its response to the issues raised in this action letter and the major recommendations of the CPR team report. This may be done by referencing where these responses are in the Table of Contents or in an addendum to the report.

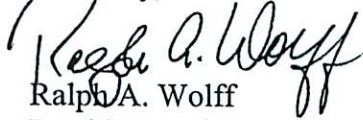
In accordance with Commission policy, a copy of this letter will be sent to the chair of Pepperdine University’s governing board in one week. It is the Commission’s expectation that the team report and this action letter will be widely disseminated throughout the University to promote further engagement and improvement and to support the University’s response to the specific issues identified in them.

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Finally, the Commission wishes to express its appreciation for the extensive work that the University undertook in preparing for and supporting the accreditation review. WASC is committed to an accreditation process that adds value to institutions while assuring public accountability, and we are grateful for your continued support of our process. Please contact me if you have any questions about this letter or the action of the Commission.

Sincerely,



Ralph A. Wolff
President

RW/BW/cf

cc: Linda Johnsrud, Commission Chair
Darryl Tippens, Provost and Accreditation Liaison Officer
Edwin Biggers, Chair of the Board of Regents
Members of the CPR team
Barbara Wright, WASC Vice President