

# Focusing Accreditation on Quality Improvement

## **Findings from an Exploration of Community College Accreditation Policies and Practices**

**February 2011**



the Research & Planning Group  
for California Community Colleges

# Research and Planning Group for California Community Colleges

The Research and Planning Group for California Community Colleges (RP Group) strengthens the ability of California community colleges to undertake high quality research, planning and assessments that improve evidence-based decision-making, institutional effectiveness and success for all students. It does so through two primary strategies. First, the RP Group conducts research and evaluation projects that utilize the skills and perspectives of California community college institutional researchers, faculty and administrators. Second, the RP Group builds the skills of administrators, faculty and staff through professional development offerings, disseminating effective practices and providing technical assistance. Because the RP Group provides a unique, on-the ground perspective on complex issues within the California community college system, it has successfully developed strategic partnerships and provided leadership on statewide initiatives to help keep evidenced-based decision-making, accountability and student success at the forefront of California community college efforts.

Since 2000, the RP Group has led 20 system-level research and evaluation projects that have resulted in significant changes to the California community college system, including laying the groundwork for the statewide accountability system (ARCC), modifying the admission requirements for the registered nursing programs and writing Basic Skills as the Foundation for Success in the California Community Colleges. This document, popularly known as “the Poppy Copy” was instrumental in the development of the Basic Skills Initiative (BSI) and provided the framework for evaluating college-level basic skills programs throughout the state.

The success of RP Group projects is rooted in their design. Each project is led by a unique team of community college staff, faculty and administrators who have proven research skills and a direct understanding of the subject at hand. Projects culminate in audience-specific products that stimulate discussion, lead to action, improve outcomes and strengthen student success. You can find out more about the RP Group at [www.rpgroup.org](http://www.rpgroup.org)

## Acknowledgements

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# Table of Contents

<b>Chapter</b>		<b>Page</b>
<b>Preface</b>		p. 1
<b>Reader's Guide</b>		p. 4
<b>Chapter 1</b>	Introduction	p. 7
<b>Chapter 2</b>	Methodology	p. 12
<b>Chapter 3</b>	North Central Association of Colleges and Schools – Higher Learning Commission (NCA-HLC)	p. 17
<b>Chapter 4</b>	Southern Association of Colleges and Schools – Commission on Colleges (SACS)	p. 40
<b>Chapter 5</b>	Western Association of Schools and Colleges – Accrediting Commission for Community and Junior Colleges (ACCJC)	p. 64
<b>Chapter 6</b>	Discussion	p. 96
<b>References</b>		p. 107
<b>Appendices</b>	Appendix A: Profile of Commissions Studied	p. 110
	Appendix B: Phase I Interview Protocol	p. 111
	Appendix C: Commission Descriptions	p. 113
	Appendix D: Phase II Interview Protocol	p. 119
	Appendix E: Letter to College Presidents	p. 123
	Appendix F: Discussing Accreditation – Findings, Discussion Questions and Report back from the Field on Community College Accreditation Policies and Practices	p. 125

## Preface

This research project, which seeks to shed light on the accreditation of California's community colleges and how best to achieve the twin goals of quality assurance *and* quality improvement, began with a conversation. At a joint conference of the Research and Planning Group for California Community Colleges (RP Group) and the Chief Information Systems Officers Association (CISOA) held in April 2009, the RP Group's board discussed concerns with the increasing number of community colleges in the state on sanction due to their failure to meet accreditation standards. The conversation ranged in its perspectives. Some of us thought specific colleges deserved sanctions because of their failure to respond to repeated warnings, while others saw problems with the training of visiting evaluation teams and still others feared the inconsistent application of accreditation standards by the commission.

The discussion led us to several questions: What was happening in other areas of the country? How were other accrediting commissions balancing issues of compliance with quality improvement? What could we learn from the policies and practices of other regional commissions and community colleges? How could the RP Group make a productive contribution to the direction of community college accreditation in the state? We hoped that providing a national view of accreditation practices would stimulate dialogue, both among California community college leadership and between the state's colleges and the Accrediting Commission of Community and Junior Colleges (ACCJC). We agreed the goal of such a project would be to focus the statewide conversation on specific changes that both ACCJC and the colleges could adopt to ensure that accreditation and reaffirmation focuses on student success and institutional improvement as well as compliance.

The RP Group knew that weighing in on this issue held some risk; the debate on accreditation was growing contentious. ACCJC asserted that college leadership had to take responsibility for the sanctions received by their institutions, while college leadership pointed to the commission as the problem. Wasn't it safer for the RP Group to let the institutions work with ACCJC and stay on the sidelines?

Ultimately, we resolved that the organization had a responsibility to help move the accreditation discussion in a positive direction. It is our mission to provide practitioner-driven research and professional development that sheds light on pressing issues within the California community college system. Furthermore, the RP Group strives to keep accountability, student success and institutional effectiveness at the forefront of California community college efforts. Issues of accreditation could not be more relevant to this charge and the RP Group had stepped out on related initiatives before.

In 2002, the RP Group took the lead in supporting what were then characterized as controversial new accreditation standards. We sponsored regional workshops on student learning outcomes assessment that were attended by more than 2,000 faculty and administrative staff. The organization was also instrumental in raising concerns about the state of the student assessment and placement system within the colleges and we played a key role in the development of Accountability Reporting for Community Colleges (ARCC), the system-wide accountability system. Finally, it was the RP Group that wrote *Basic Skills as a Foundation for Success in the*

*California Community Colleges*—more commonly known as the Poppy Copy—a review of effective developmental education practices, one of the foundations for the Basic Skills Initiative.

And so we began. The work on this project comprised three phases. During the first phase, we conducted interviews with leadership of the seven regional commissions, probing their policies and practices related to their application of standards, training, sharing of effective practices and holding of two- and four-year colleges to common accreditation standards.

During Phase II, we conducted a series of interviews with college presidents, accreditation liaison officers and faculty from community colleges in three regions: the North Central Association-Higher Learning Commission (NCA-HLC), the Southern Association of Colleges and Schools (SACS) and ACCJC. We chose the NCA and SACS regions because our initial review in Phase I revealed some significant innovations that could be relevant to the California colleges; we chose the ACCJC region to delve more deeply into the issues that college leadership in the state perceived as important.

Phase III of the project entailed taking our preliminary findings out into the field so commission and college leadership could reflect on the meaning of our findings. We prepared a 10-page brief that focused on the themes emerging from the interviews, paired with discussion questions about the issues identified in our research. We then met with each of the major statewide constituency groups to get their feedback on the content and to add their insights into our analysis. The specific groups included the California community college chief executive officers, trustees, chief instructional and student services officers, the Academic Senate and the system-wide Chancellor's Office. We also met with the ACCJC president and her staff.

The project has taken a total of 21 months. What did we find after 29 interviews, hours of reviewing commission websites, manuals and papers and face-to-face meetings across the state? One significant insight that I return to over and over again is the centrality of the joint responsibility college and commission leadership carry within the accreditation process. There is a delicate balance between a commission's duty to uphold standards, its responsibility to prescribe directions for the colleges and its efforts to promote quality improvement beyond basic compliance through the processes it implements and the supports it offers. Similarly, the state's community college leadership must balance their strategic sense of institutional direction with their accountability for appropriately addressing the accreditation standards. To a significant degree, the differences expressed within California are about how much responsibility ACCJC shoulders versus the institutional leadership.

One of the key learnings gleaned from this study is how commissions establish mechanisms to calibrate the commission-college balance of responsibility. For example, SACS created a series of reviews of college progress prior to a final determination of reaffirmation, where each review allows the college time to make adjustments. NCA supports high-performing colleges in establishing statewide consortiums that enable the college members to continue conversation about quality strategies directly related to accreditation standards. Both of these commissions show (albeit in different ways) that building a multi-pronged training programs allows colleges and the commission a variety of opportunities to ensure well-trained visiting team members as well as well-informed CEOs and accreditation liaison officers. California community colleges

would be well served by working with ACCJC to jointly agree on how this balance can be achieved in a way that meets both quality assurance and improvement goals.

We hope this study will contribute positively to the accreditation conversations in California, offering insights into tangible improvements we can all make and clarifying possible approaches for making the process as productive and meaningful as possible.

Dr. Robert Gabriner  
Director, Center for Student Success  
The Research and Planning Group for California Community Colleges

## Reader's Guide

This document begins with an overview of community college accreditation in the United States and the purpose of this study. The guide below directs readers to the specific components of *Chapter 1: Introduction*.

### Introduction to Accreditation & the Study

<b>What Is Accreditation?</b>	p. 7
<b>How Are Accrediting Agencies Organized?</b>	p. 7
<b>What is the Accreditation Process?</b>	p. 8
<b>Who Accredits the Accreditors?</b>	p. 8
<b>What Is the Intent of this Study?</b>	p. 9
<b>How Is this Report Structured?</b>	p. 10

Following the introduction, the report provides a thorough description of the methodology employed by the research team in *Chapter 2: Methodology*. The guide below points readers to details on various components of the research design and implementation.

### Research Methodology

<b>Phase I – Focus on Commissions</b>	p. 12
<b>Phase II – Focus on Colleges</b>	p. 13
<b>Research Participants</b>	p. 14
<b>Data Sources &amp; Coding</b>	p. 14
<b>Phase III – Focus on Dialogue &amp; Action</b>	p. 16

This document also offers a full report of findings from the RP Group's examination of accreditation practices and policies from three specific commissions (*Chapter 3: North Central Association-Higher Learning Commission*, *Chapter 4: Southern Association of Colleges and Schools*, *Chapter 5: Accrediting Commission of Community and Junior Colleges*). Given the considerable scope of research discussed, readers may wish to focus on a particular aspect of the findings. To facilitate this review, we use a parallel format for Chapters 3-5, presenting research on the commissions and organizing findings into four main sections: (1) Commission Profile, (2) Process Components Designed for Quality Improvement, (3) Strategic Supports Designed for Quality Improvement and (4) College Perspectives on their Return on Investment. The following guide directs readers to these sections in the chapters on the commissions studied.

## Commission Profile

Section:	NCA-HLC	SACS	ACCJC
Accreditation Standards	p. 17	p. 40	p. 64
Reaffirmation Process	p. 18	p. 41	p. 66
Evaluation Team Selection	p. 21	p. 42	p. 67
Colleges Studied	p. 21	p. 43	p. 67

## Process Components Designed for Quality Improvement

Section:	NCA-HLC	SACS	ACCJC
Implementation of: <ul style="list-style-type: none"> <li>▪ Academic Quality Improvement Program (NCA-HLC)</li> <li>▪ Quality Enhancement Plans (SACS)</li> </ul>	p. 22	p. 43	n/a
Approach to Compliance	p. 29	p. 46	p. 68
Use of Sanctions	p. 29	p. 48	p. 73

## Strategic Supports Designed for Quality Improvement

Section:	NCA-HLC	SACS	ACCJC
Development of the Commission/College Relationship	p. 30	p. 50	p. 75
Establishment of a Consistent Understanding of Standards	p. 31	p. 52	p. 77
Consistent Application of Standards	p. 32	p. 53	p. 78
Provision of Training & Other Institutional Supports	p. 34	p. 56	p. 83
Facilitation of Effective Practices Sharing	p. 37	p. 61	p. 90

## Colleges' Return on Investment

	NCA-HLC	SACS	ACCJC
	p. 38	p. 63	p. 93

The document concludes with *Chapter 6: Discussion* which synthesizes key findings across the three commissions and attempts to highlight five areas that demonstrate the greatest potential for dialogue and action on the part of both ACCJC and its member colleges. These findings are organized by how commissions: (1) set the stage for quality improvement, (2) support institutions in achieving reaffirmation, (3) consistently apply standards and effectively use sanctions throughout a review, (4) establish productive relationships with colleges served and (5) generate a positive return on an institution's investment.

Each of these sections concludes with discussion questions that stem from the findings and that commissions and colleges might consider as they work together to optimize the accreditation process for true quality improvement. In addition, we present suggestions for accreditation

process improvements offered by college interviewees in textboxes throughout this chapter. The guide below directs readers to each section of the discussion chapter.

## **Areas for Possible Dialogue and Improvement**

<b>Setting the Stage for Quality Improvement</b>	p. 96
<b>Developing a Relationship between the Commission &amp; Colleges</b>	p. 97
<b>Supporting Institutions in Achieving Reaffirmation</b>	p. 98
<b>Consistently Applying Standards and Effectively Using Sanctions Throughout Review</b>	p. 101
<b>Generating a Positive Return on Investment</b>	p. 105

# Chapter 1: Introduction

## What is Accreditation?

Accreditation began over 100 years ago in the United States stemming from the need to protect and serve the public interest as it relates to education. According to the Council for Higher Education Accreditation (CHEA), a national coordinating body for institutional and programmatic accreditation, “Accreditation is a process of external quality review created and used by higher education to scrutinize colleges, universities and programs for quality assurance and quality improvement” (CHEA, 2009, p.1).

The accreditation of educational institutions in this country is not conducted by the government, but instead is a private enterprise, led by private, nonprofit organizations that were specifically created for this purpose. However, both state and federal governments rely on accreditation to assure the quality of institutions and programs for which they provide funding in the form of federal and state financial aid to students and direct state funds to public institutions.

Accreditation serves four primary functions:

- **Quality assurance.** Accreditation is how institutions of higher education assure students and the public that an institution is meeting threshold standards related to faculty, curriculum, student services, libraries, financial stability, etc.
- **Eligibility to receive federal and state funding.** An institution must be accredited in order for its students to receive federal or state financial aid and the institution to receive state apportionment funding and qualify for federal grant programs.
- **Private industry confidence.** Whether a job applicant’s educational credentials were awarded from an accredited institution plays an important role in employers’ selection processes. Attendance at an accredited institution can also influence whether an employer is willing to provide tuition support for current employees. Additionally, an institution’s accreditation status can be a factor considered by private individuals and foundations in decisions about private giving.
- **Transfer among institutions.** The accreditation status of an institution can impact whether its students will be able to transfer credits and credentials earned there to other institutions. Receiving institutions have the choice as to whether they will accept credits from an institution that is not accredited, and in most cases they will not. Accreditation is considered an important indicator of quality and can make the transfer process much easier for students.

## How Are Accrediting Agencies Organized?

The American system of higher education is both complex and decentralized, which has resulted in an accreditation structure that is the same. American higher education enterprise is comprised of institutions that are both degree-granting and non-degree-granting institutions, and these institutions can be public or private, two- or four-year, nonprofit or for-profit. In this study, we focused on the seven regional accrediting associations, but there are a total of four different types of accrediting organizations:

1. **Regional accreditors** accredit public and private, mainly nonprofit and degree-granting, two- and four-year institutions.
2. **National faith-related accreditors** accredit religiously affiliated and doctrinally based institutions, mainly nonprofit and degree-granting.
3. **National career-related accreditors** accredit mainly for-profit, career-based, single-purpose institutions, both degree and non-degree.
4. **Programmatic accreditors** accredit specific programs, professions and freestanding schools, e.g., law, medicine, engineering and health professions.

All accrediting organizations generate most of their funding through the annual dues and fees paid by the institutions they accredit. In some instances, accrediting organizations have received financial assistance from sponsoring organizations or obtained funding for special initiatives through grants from the federal or state government or private foundations.

## What is the Accreditation Process?

The accreditation process is the periodic “self-review and peer review for improvement of academic quality and public accountability of institutions and programs” (CHEA, 2006). Accreditation occurs on an ongoing cycle that typically ranges from every three to 10 years. Once an institution becomes accredited, the process is only beginning. Institutions must undergo a periodic review in order to maintain their accredited status. This review process consists of several steps that encompass the institution’s in-depth examination of its own practices, an evaluation conducted by peer reviewers and the decision of the accrediting agency as to accreditation status. More specifically, the steps are:

1. **Self-study.** Institutions conduct a comprehensive self-review and prepare a written report of their performance based on standards established by the accrediting organization.
2. **Peer review and site visit.** The accrediting commission carefully selects a group of faculty and administrative peers to serve on a team that will review an institution’s self-study and conduct a site visit where they will evaluate whether the institution is meeting the standards.
3. **Decision of accrediting commission.** The accrediting commission is a decision-making body whose members are administrators and faculty from institutions the commission serves, as well as public members. These commissions make the decision as to whether a new institution receives initial accreditation, whether already accredited institutions are reaffirmed or whether an institution’s accreditation must be revoked.

## Who Accredits the Accreditors?

The accrediting associations are as accountable as the institutions they accredit. Accreditors are accountable to the institutions they accredit, the public and state and federal governments, as all of these stakeholders deserve quality assurance based on the level of investment each has in higher education. Similar to the review process for institutions, accreditors conduct a periodic self-assessment and undergo an external review of their organizations. This review process is known as “recognition” and is conducted either by the Council for Higher Education Accreditation (CHEA), a private, non-profit organization that coordinates accreditation at a

national level, or the United States Department of Education (USDE). Although accreditation of institutions is not a function of the federal or state governments, the recognition of the accrediting agencies is. The recognition process is similar to accreditation in various ways in that accrediting organizations:

- Must meet standards established by CHEA and/or USDE
- Must assess their performance related to the recognition standards
- May need to submit to a site visit as determined by CHEA or USDE
- Will have their recognition status determined by CHEA and/or USDE
- Must undergo the review process on a regular basis in order to maintain their recognition

In the CHEA recognition process, accreditors are normally reviewed every 10 years and are required to submit two interim reports. To conduct the review of accrediting organizations, CHEA has established a committee of institutional representatives, accreditors and public members. This CHEA committee reviews the accreditor's self-evaluation and the results from a site visit, if conducted, in order to evaluate an accreditor's eligibility for CHEA recognition. The committee then gives its recommendation as to affirm or deny the accreditor's recognition to the CHEA governing board, which makes the final decision.

In the USDE recognition process, accreditors are normally reviewed every five years. Although the review takes place more often, the process is similar to that of CHEA. The review is conducted by USDE staff based on a report from the accreditor and occasional site visits. The USDE staff forwards its recommendation to recognize an accrediting organization to the National Advisory Committee on Institutional Quality and Integrity (NACIQI), a group of appointed educators and public members, which then recommends action to the US Secretary of Education.

CHEA and USDE recognize many of the same accrediting organizations and all seven regional accrediting commissions are recognized by both. Recognition from CHEA helps accrediting organizations establish a legitimate position in the academic landscape of national higher education. However, in order for the institutions to be eligible for federal student aid funds, they must be accredited by an accreditor that has USDE recognition.

## **What is the Intent of this Study?**

As outlined in the Preface, the Research and Planning Group for California Community Colleges (RP Group) decided to undertake this study in 2009 based on the disconnect between the state's community colleges and Accrediting Commission for Community and Junior Colleges (ACCJC) about whether or not the region's accreditation process fosters a focus on quality improvement. The RP Group consists of researchers and planners in the state and in this role, our members are often deeply involved in the accreditation process either as leaders of the self-study process on campus, providers of data and research required for the self-study and/or members of the evaluation teams that visit colleges. For this reason, the RP Group members have a vested interest in the accreditation process and were becoming increasingly concerned about how the

discussion in the state seemed to be deteriorating. As a result, the RP Group board and staff decided to undertake this research in an effort to offer contextual information about accreditation policies and practices nationwide and engender a productive discussion among ACCJC, the state's community colleges and key constituent groups about how these findings might assist in optimizing the accreditation process for true quality improvement.

The RP Group, much like the Council for Higher Education Accreditation, believes that students are more likely to benefit from systems that focus on quality improvement (CHEA, 2003 & 2010; Harvey, 2005). When review systems use a quality assurance lens, they are designed to identify deficiencies and ensure that steps are taken to correct these problems, thus focusing efforts on process improvements. Quality improvement-focused review systems are designed to proactively improve the entire institution so that the focus is put on the quality of what students receive. Furthermore, quality assurance alone does not naturally lead to quality improvement; quality assurance encourages a process that is narrowly focused on accountability, which can discourage improvement efforts (Dano & Stensaker, 2007; Leef & Burriss 2004; Middlehurst 1997).

The intent of this study was to gather and disseminate information about accreditation practices and processes of the seven regional accreditation commissions in the nation that could be of benefit to California. This research would result in the creation of a compendium of practices and perspectives from the different commissions on topics such as quality improvement, accreditation review processes, compliance, training and the identification and sharing of effective practices

To begin, a taskforce of RP Group board and staff members conducted reviews of the websites of all seven regional accrediting commissions to examine the topics listed above. In addition, the taskforce members conducted telephone interviews with the leadership of all seven commissions. After assembling the resulting data, we had a general overview of each commission's policies, practices and processes (see Appendix A for a profile of the commissions studied).

After reviewing these data, we concluded that we needed to extend our research to individual colleges to understand how they perceive the effectiveness of their commissions' efforts. Consequently, we decided to conduct interviews with select community colleges from three of the seven regional commissions in order to help us identify those practices that make a difference for the colleges.

## **How Is this Report Structured?**

The report to follow begins with a presentation of the methods used in this study including how the three commissions were chosen for deeper examination, how the colleges were selected within these regions to be interviewed and how interviews were conducted. The findings from the three commissions that were examined in depth are organized by commission in order to allow for the presentation of a comprehensive and complete picture of each commission. The goal here is not to draw comparisons among the commissions, but to present a coherent and cohesive examination of how each commission works to ensure quality in their region. The report concludes with a discussion of the implications of the key findings and includes questions

that could potentially help begin conversations about practices that appear to be worth examining here in California. This section also incorporates several of the recommendations from the field for all three commissions that were obtained in the course of our interviews with the colleges.

# Chapter 2: Methodology

The RP Group aims to strengthen the skills of administrators, faculty and staff through research, professional development and dissemination of effective practices. Hence, we designed and conducted a three-tiered qualitative research study that gathered information about accreditation nationwide in an effort to inform and enhance quality-driven practices both locally and nationally.

## Phase I – Focus on Commissions

In the first phase of the project, the RP Group evaluation team designed four primary research questions that addressed how a commission offers training, how it facilitates sharing and identifying effective practices, how it approaches routine procedures and if and how it promotes two- and four-year engagement and interaction. These questions included:

1. Explore how the seven regional commissions provide training to both visiting teams and colleges in preparation for accreditation review.
2. Explore how colleges in the seven regions learn about effective practices that are aligned with the current accreditation standards.
3. Explore practices and processes used by the seven regional commissions in accreditation reviews.
4. Explore the relationship between two- and four-year institutions within each of the seven regions as it relates to accreditation.

Following the development of this framework, the RP Group evaluation team conducted extensive interviews with staff at all seven regional accrediting commissions across the country. These commissions, referenced hereafter by their acronyms, include:

- Middle States Association of Colleges and Schools – Middle States Commission on Higher Education (MSCHE)
- New England Association of Schools and Colleges – Commission on Institutions of Higher Education (CIHE)
- North Central Association of Colleges and Schools – Higher Learning Commission (NCA-HLC)
- Northwest Commission on Colleges and Universities (NWCCU)
- Southern Association of Colleges and Schools – Commission on Colleges (SACS)
- Western Association of Schools and Colleges – Accrediting Commission for Senior Colleges and Universities (ACSCU)
- Western Association of Schools and Colleges – Accrediting Commission for Community and Junior Colleges (ACCJC)

The RP Group evaluation team designed a nine-item, semi-structured interview protocol (found in Appendix B) that included questions such as: How would you describe the effectiveness of your region's accreditation process in leading to institutional improvement? What is the process for determining whether colleges are in compliance with the accreditation standards? How does your region train colleges to help them prepare for their accreditation review? Interviewees were selected based on their direct involvement and leadership with their commission's accreditation process. Thus, interviewees included commission presidents and chairs, directors of the review process and directors of institutional support, among others. Following one-hour, comprehensive interviews with roughly 20 participants, we coded and compiled the data under four broad categories encompassing commission training, shared practices, processes and two- and four-year interaction. A brief description of the commissions not included in Phase II of the study (described below) can be found in Appendix C.

## **Phase II – Focus on the Colleges**

Despite the extensive Phase I data collection process, the RP Group evaluation team recognized a gap in the research. The voices of college staff members were distinctly absent from this review of accreditation best practices. Subsequently, results from Phase I's exploratory review became a launching pad for Phase II, which aimed to include the views of faculty and staff participants. Further, the Phase II interview protocol (found in Appendix D) expanded and modified the primary research questions in an effort to glean a deeper and more personal perspective from college staff or faculty. Questions included:

1. How are compliance and improvement defined within the context of the accreditation process?
2. How do colleges assess their return on investment from accreditation?
3. What is the nature of the relationship between the commissions and the colleges they serve?
4. How do colleges learn about effective practices that are aligned with the current accreditation standards?
5. How does each commission work to ensure the consistent application of the standards?
6. What are the benefits and/or disadvantages to having both two- and four-year institutions within the same accreditation commission?

What follows is an account of how the RP Group ascertained data in spring 2010 to complete Phase II of this research project.

The RP Group intended Phase II to create a compendium of perspectives from different colleges within NCA-HLC, SACS and ACCJC regions on topics such as training, site visit experiences and effective practices. It is important to note here that the RP Group evaluation team chose two regional commissions (NCA-HLC and SACS) for further study because of the innovative, quality-driven and comprehensive practices they presented in Phase I of this research. The team selected ACCJC because, as the regional accrediting commission for the California community colleges, it impacts many of the schools within the purview of the RP Group.

Similar to the first phase of this study, we conceptualized Phase II as exploratory in nature, emphasizing the meaning of the accreditation experience for our participants. As such, we approached our work from a grounded theory perspective, which is defined by Creswell as “to generate or discover a theory, an abstract analytical schema of a phenomenon, that relates to a particular situation. This situation is one in which individuals interact, take actions or engage in a process in response to a phenomenon” (1998, p. 56). From this perspective, we surmised that theories on accreditation best practices would be discovered throughout the data collection process and then summarized at the conclusion of the project.

## **Research Participants**

Our primary data source for Phase II centered on semi-structured interviews with faculty and staff from colleges within NCA-HLC, SACS and ACCJC. The RP Group evaluation team chose participants via a three-pronged process. First, we discussed our general goals for the project and the participants who could convey the most meaningful accreditation experiences. Specifically, we wanted an array of higher education accreditation experiences and were thus interested in hearing from colleges with three different types of experience: (a) those in good standing, (b) those on sanction and (c) those that recently returned to good standing from sanction. We deduced that these criteria would garner responses at both ends of the accreditation continuum and present three different perspectives on accreditation. Finally, we concluded that in order to yield varied and poignant responses, our interviews should include three primary college employees: (1) the college president or chief executive officer, (2) the accreditation liaison officer and (3) a faculty member most directly involved with the campus’s accreditation process.

Second, the RP Group evaluation team sent formal letters to college presidents requesting permission to contact the abovementioned individuals and then to schedule a one-hour meeting (found in Appendix E). Third, the RP Group evaluation team contacted the potential interviewees directly to coordinate a conference call. A further discussion of the colleges ultimately interviewed can be found in each chapter presenting the findings on the policies and practices from these three commissions (see the Colleges Studied sections).

## **Data Sources and Coding**

### **Interviews**

We employed semi-structured interviews because this approach allows the researcher to remain open-ended while adhering to a core group of questions (Isaac & Michael, 1997). Interview questions included items such as the following:

Your college was placed on warning/probation in 2009. Is your college clear on what needs to be done to return to good standing? How has the commission been involved in helping you return to good standing? What specific activities have they done to help your progress? What else, if anything, could they be doing to help you?

All interviews adhered to a standard interview protocol encompassing the purpose of the study, a confidentiality agreement and the opportunity to stop the interview at any time. By spring 2010, the RP Group evaluation team had conducted a total of 29, one-hour interviews

with college staff and faculty members from 11 colleges throughout the NCA-HLC, SACS and ACCJC regions.

## Coding

In accordance with grounded theory research, the RP Group evaluation team systematically coded the data. Because all interviews were recorded, researchers were able to listen to the recordings and then transcribe them for accuracy and significant direct quotes. Following this process, we created main categories and “properties” or subcategories from the interview responses. This coding process allowed us “to dimensionalize, or show the extreme possibilities on a continuum of, the property” (Creswell, 1998, p. 57). Researchers initially worked independently to transcribe, clarify and code their data. As themes began to emerge from the work, the RP Group evaluation team convened frequently to identify areas of commonality, divergence and significance. These focused meetings were critical to our final coding process, also known as selective coding, in which “the researcher identifies a story line and writes a story that integrates the categories...” (p. 57).

## Focus Group Interviewing

Our secondary data source involved a focus group interview held with roughly 40 college administrators at the RP Group conference in April 2010. From the list of conference offerings, these participants chose an “accreditation roundtable discussion” and were informed that the one-hour session was a focus group interview that was part of a study conducted by the RP Group. Mirroring the one-on-one interviews, the focus group interview protocol included introductory statements regarding the purpose of the study, a confidentiality agreement and the opportunity to decline participation at any time.

Two researchers from the RP Group evaluation team designed and led a six-item, semi-structured group interview that included questions such as: How do you see the balance between compliance and improvement in the context of accreditation? What is the responsibility of the college leadership and what is the responsibility of the commission in helping colleges understand this balance? Focus group interviews typically face one chief disadvantage, namely, when one or more participants dominate the group dialogue. Highly trained in this methodological tool, the RP Group researchers did not permit this dynamic to occur and yielded responses from the majority of participants. The researchers took copious notes throughout the interview and recorded the session. Data collected from this experience was coded alongside the 29, one-hour interviews and included in the final coding process.

## Document Analysis

Our final data source included documents from the field: commission websites, official memos and letters, meeting minutes and newsletters. The RP Group evaluation team purposefully selected documents for their significant contribution to the study and to address gaps or disparities that became apparent after the interviews were conducted. Using this third data source in Phase II of this research, the RP Group evaluation team was able to triangulate its findings, corroborating evidence and cross-checking interview statements. For example, when

interviewees shared information on annual conferences and training sessions, the RP Group evaluation team was able to reference the commission's website for more insights and details. Collected documents were coded alongside the 29, one-hour interviews and included in the final coding process.

## **Phase III – Focus on Dialogue and Action**

Representing a new approach to engage stakeholders with our research in an effort to promote action, the RP Group shared a draft version of findings from this investigation and related discussion questions with ACCJC staff and a variety of California community college constituent groups before finalizing the written products for this project. Members of the RP Group board, staff and research team presented a draft research brief to multiple audiences during October through December 2010 including ACCJC staff; the chief executive officer, trustee, chief instructional officers and chief student service officers boards; the Academic Senate for California Community Colleges' executive committee; and the California community college chancellor's cabinet. As a result of this process, the research team created a final summary (see Appendix F for *Discussing Accreditation: Findings and Discussion Questions on Community College Accreditation Policies and Practices*) and revised the following report to incorporate additional feedback and insights from the field. Through these conversations, the organization was able to launch dialogue about what the findings from this project mean and how they can be used by all involved parties to ensure accreditation achieves both quality assurance and quality improvement. Moreover, the RP Group developed a summary of possible additions and modifications to the accreditation process in California community colleges generated through these conversations (see Appendix G for *Accreditation Action Steps: Practitioner Ideas for Process Changes and Joint Efforts*).

Through this project, the RP Group evaluation team amassed roughly 300 hours of investigative research prior to final report production. Hours spent meticulously coding and categorizing data yielded noteworthy findings and shed light on remarkable best practices nationally. The hours spent sharing these findings with the field yielded additional insights into what this research means to the accreditation of California's community colleges.

# Chapter 3: North Central Association of Colleges and Schools – Higher Learning Commission

## Commission Description

Established in 1895, the North Central Association of Colleges and Schools (NCA) serves 19 Midwestern states including Arizona, Arkansas, Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, New Mexico, North Dakota, Ohio, Oklahoma, South Dakota, West Virginia, Wisconsin and Wyoming. NCA encompasses two distinct commissions. The Commission on Accreditation and School Improvement (CASI) focuses on K-12 schools in the region while the Higher Learning Commission (HLC) serves more than 1,000 higher education institutions, making it the largest commission in the United States.

## Accreditation Standards

NCA-HLC offers two programs for maintaining accredited status, the Program to Evaluate and Advance Quality (PEAQ) and the Academic Quality Improvement Program (AQIP), described in detail later in this section. The commission maintains five “Criteria for Accreditation” and applies these standards to both the PEAQ and AQIP processes. NCA-HLC adopted these criteria in 2005 and designed them purposefully:

...so that accreditation decisions focus on the particulars of each institution, rather than on trying to make it fit a pre-established mold. The widely different purposes and scopes of colleges and universities demand criteria that are broad enough to encompass diversity and support innovation, but clear enough to ensure acceptable quality. (NCA-HLC, 2010)

The criteria are:

- **Mission and Integrity:** The organization operates with integrity to ensure the fulfillment of its mission through structures and processes that involve the board, administration, faculty staff and students.
- **Preparing for the Future:** The organization’s allocation of resources and its processes for evaluation and planning demonstrate its capacity to fulfill its mission, improve the quality of its education and respond to future challenges and supports.
- **Student Learning and Effective Teaching:** The organization provides evidence of student learning and teaching effectiveness that demonstrates it is fulfilling its educational mission.
- **Acquisition, Discovery and Application of Knowledge:** The organization promotes a life of learning for its faculty, administration, staff and students by fostering and supporting inquiry, creativity, practice and social responsibility in ways consistent with its mission.
- **Engagement and Service:** As called for by its mission, the organization identifies its constituents and serves them in ways both value.

## Reaffirmation Process

As referenced above, NCA-HLC supports two reaffirmation processes, the Program to Evaluate and Advance Quality and the Academic Quality Improvement Program. The uniqueness of maintaining two evaluative processes should not go unnoticed, as NCA-HLC is the only accrediting body in the United States to offer two options. The following section provides a general description of each program, followed by their respective processes.

### **Program to Evaluate and Advance Quality (PEAQ)**

Rebranded in 2003 in response to a significant organizational makeover, NCA-HLC recognizes PEAQ as its time-honored and traditional approach to accreditation. The PEAQ model includes a 10-year cycle with a five-step process as cited in the commission's *Institutional Accreditation: An Overview* (2010).

1. The institution engages in a self-study process for approximately two years and prepares a report of its findings in accordance with commission expectations.
2. The commission sends a team of consultant-evaluators to the institution to conduct a comprehensive onsite visit for continued accreditation and to write a report containing the team's recommendation.
3. The documents relating to the comprehensive visit are reviewed by a Readers Panel or, in some situations, a Review Committee.
4. The IAC [Institutional Actions Council] takes action on the Readers Panel's recommendation. (If a Review Committee reviewed the visit, the Review Committee takes action.)
5. The board of trustees validates the IAC's or Review Committee's recommendation, finalizing the action.

In the PEAQ model, a peer evaluation, or comprehensive visit, follows the institutional self-study to provide recommendations on whether to reaffirm accreditation status. "Every accredited organization must have its status reaffirmed not later than five years after it has been initially granted and not later than 10 years following each subsequent reaffirmation" (NCA-HLC, 2003, p. 5-4.1). Visits are thus scheduled accordingly. During the comprehensive visit, the team of consultant-evaluators (who are also called peer reviewers): (1) hosts an opening or introductory session with the institution, (2) meets with selected staff and faculty members throughout the visit and (3) concludes the three-day visit with an exit meeting to share team findings. Additionally, the team chair meets with the CEO daily to review the progress of the team. NCA-HLC encourages the institution to formally evaluate the visiting team, as this feedback is important to the consultant-evaluator review process.

At the conclusion of the visit, the visiting team writes a draft report based on its findings. The team chair submits this report to the team, a commission staff liaison and the organization under review for feedback by a stated deadline. Following this deadline, the draft report becomes the final report and is then disseminated to several governing bodies that participate in the review process. These groups are described below, followed by their role in the accreditation review process, as found in NCA-HLC's *Handbook of Accreditation* (2003).

The Accreditation Review Council (ARC) consists of no fewer than sixty experienced consultant-evaluators. The Board of Trustees appoints them to four-year terms that begin on September 1. The Board also appoints representatives of the public to serve on ARC. ARC members serve on Readers Panels and Review Committees.

The Institutional Actions Council (IAC) consists of twenty experienced peer reviewers and six public members. The Board of Trustees appoints IAC members to four-year terms that begin on September 1. No person can serve simultaneously as a member of ARC and IAC. IAC members serve on IAC Panels.

The Board of Trustees is the governing body of the Commission. The Commission's member organizations elect Trustees in the spring to four-year terms that begin on September 1. The Board is made up of no fewer than fifteen and no more than twenty-one persons. One of every seven Trustees is a representative of the public and the others are broadly representative of organizations that are members of the Commission. (p. 2.2-1)

Referenced as item number three in the five-step PEAQ process, recommendations made following a comprehensive team visit are reviewed in one of two ways: either by a readers panel or a review committee. A readers panel is selected if the organization under review is in accordance with the team's final report. A review committee, however, is engaged for particular situations, for example, when the visiting team recommends that the institution be placed on sanction or when the review team is conducting a visit for initial accreditation.

A Readers Panel consists of two Accreditation Review Council members. Panels are created as needed throughout the year to review eligible team recommendations that have been accepted by organizations. To the extent possible, members of the Readers Panel are selected on the basis of peer compatibility. (NCA-HLC, 2003, p. 2.2-2)

Should the readers panel corroborate the team's recommendations, they are forwarded to the Institutional Actions Council.

A review committee, which meets three times annually and has at least five members of the Accreditation Review Council, has a substantially different process from a readers panel. According to the *Handbook of Accreditation* (2003):

A Review Committee reviews all pertinent materials from the team visit and holds a hearing. The organization's chief executive officer and a member of the evaluation team that reviewed the organization make presentations to the Committee and respond to questions. By majority vote, the Review Committee decides on the official action: to accept the team recommendation, to modify the team recommendation, or to substitute an action significantly different from that recommended by the team. With the concurrence of the organization and the team, the Committee's decision is forwarded to the Board of Trustees for validation. If agreement is not reached, the team recommendation, Review Committee recommendation and organization's response are forwarded to IAC for a decision. (p. 2.2-3)

The Institutional Action Council meets routinely to discuss recommendations from various groups such as the abovementioned readers panel and review committee. The IAC votes to determine official action and forwards this decision to the board of trustees. Requiring a two-thirds vote, the board of trustees chooses to endorse or not the actions of the IAC (NCA-HLC, 2003, p. 2.2-3).

## Academic Quality Improvement Program (AQIP)

AQIP began in 1999 as an alternative to PEAQ through a grant initiative funded by the Pew Charitable Trusts. As mentioned earlier, based on principles of high performance organizations and quality-driven practices, AQIP involves a cycle of activities, initiatives and collaborative work intended to improve campus quality. Modeled in part after the Baldrige National Quality Program<sup>1</sup>, AQIP involves a seven-year cycle with three sub-cycles. According to NCA-HLC, the commission designed this cycle to be purposefully shorter than the 10-year PEAQ process.

AQIP “is structured around quality improvement principles and processes and involves a structured set of goal-setting, networking and accountability activities” (NCA-HLC, 2010). As reported by an NCA-HLC staff member, AQIP is therefore not the appropriate fit for uncompromising, rigid institutions that reject quality-driven and avant-garde changes. At the time of this research, the staff member calculated at least 50 colleges and universities that decided not to join AQIP, as their organizational approach did not properly suit the program model. AQIP includes an extensive application process that member institutions may only undertake after being in the PEAQ program for at least one cycle. As further noted by the interviewee, NCA-HLC staff members expect that colleges and universities interested in this alternative model are open, honest and transparent about their practices. To date, out of 200 member institutions, only three have left the program. At the time of application, however, NCA-HLC staff members can and will exercise their right to reject schools that do not provide ample evidence of their genuine interest in student-centered, holistic changes, according to the NCA-HLC interviewee. A further explanation of the AQIP process can be found in the next section, Process Components Designed for Quality Improvement.

In contrast to the five-step PEAQ reaffirmation process, AQIP maintains four steps that include:

1. The organization engages in all AQIP processes, including Strategy Forums, Annual Updates, Systems Portfolio Appraisals, and a visit to review US Department of Education compliance issues, for a seven-year period.
2. An AQIP Review Panel examines the collective history of the institution’s interaction with AQIP and the commission (i.e., reports of the various processes and activities, organizational indicators, current Systems Portfolio) to determine whether this evidence demonstrates compliance with the commission’s Criteria for Accreditation and Core Components. If evidence relating to any of the Core Components is insufficient, the Panel seeks and obtains additional information before making its recommendation.
3. The IAC takes action on the Panel’s recommendation regarding reaffirmation of accreditation and continuing AQIP participation.
4. The Board of Trustees validates the action. (NCA-HLC, 2003, p. 2.2-1)

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<sup>1</sup> The National Institute of Standards and Technology’s (NIST) Baldrige Criteria for Performance Excellence provide a systems perspective for understanding performance management and offer validated, leading-edge management practices against which an organization can measure itself. The Criteria also represent a common language for communication among organizations for sharing best practices. For more information, visit: <http://www.nist.gov/baldrige/enter/new.cfm>.

## Evaluation Team Selection

The *Handbook of Accreditation* (2003) describes factors related to team size and composition as follows:

The specific number of persons comprising the evaluation team is initially determined by the Commission's staff liaison following Commission policy. Typically, no fewer than four members serve on a team for a comprehensive visit. The team must be large enough to make a thorough and professional evaluation of the organization. In determining the appropriate number, the staff liaison weighs variables such as the number of students served, the number of degree levels offered, the number of programs offered, the breadth of services provided to students and other constituencies and the number and type of off-campus offerings supported by the organization.

Several months before the visit is to take place, the Commission staff liaison proposes to the CEO a roster of consultant-evaluators to serve on the evaluation team. Professional Data Forms that provide information about each person's current institutional affiliation and position, areas of professional expertise and experience with the Commission accompany the roster. The team is carefully selected by the Commission staff liaison, mindful of the organization being visited as well as the Commission's commitment to equity and diversity in the composition of teams. The organization may express concerns or reservations about proposed team members and definitely should indicate any potential conflicts of interest. The Commission makes every effort to alleviate serious organizational concerns about a proposed team member, but the Commission reserves the right to make the final choice of all team members. The organization is consulted on subsequent changes to an approved team caused by scheduling conflicts and emergencies. (p. 5.4-3)

## Colleges Studied

Three NCA-HLC AQIP colleges participated in this study to produce the qualitative evidence integrated below. At College A, a small, rural institution, the RP Group evaluation team interviewed the president, accreditation liaison officer and faculty point person. From College B, a large, urban institution, we again interviewed the president, accreditation liaison officer and faculty point person. At College C, another small, rural campus, we interviewed the accreditation liaison officer and faculty point person. However, the president declined to interview. For the purposes of this study, we define a small college as having less than 10,000 students, a medium-sized college as having between 10,000 and 20,000 students and a large college as having over 20,000 students.

The RP Group originally included PEAQ institutions on sanction in the target pool of interviewees. However, because so few NCA-HLC colleges are on sanction (regardless of belonging to PEAQ or AQIP), there was only one college that fit our criterion of being a two-year institution. After several attempts to reach this institution, the RP Group was forced to move forward without this information.

## Research Findings

The following section presents the research findings from the RP Group's interviews with representatives from NCA-HLC and its member institutions. These findings are grouped by process components the commission implements and strategic supports it offers to promote quality improvement. Perspectives from member colleges are woven with descriptions of these strategies as described by commission representatives and found in the agency's documentation

and website. The section concludes with a discussion of how the commission seeks to promote among its members a positive return on their investment in the accreditation process and what college interviewees say about this return.

## Process Components Designed for Quality Improvement

This section presents findings about the process components NCA-HLC employs to support member institutions in achieving quality change and perceptions that member institutions have about the commission's efforts. These efforts include how the commission uses AQIP, compliance and sanctions to encourage improvement and assure quality.

## Implementation of Academic Quality Improvement Program

As mentioned, NCA-HLC's member institutions can choose to engage with either the PEAQ or AQIP reaffirmation process. Because AQIP is newer and specifically intends to drive institutions toward quality improvement throughout accreditation, the following section will focus on what colleges experience through this alternative process. Below is a brief summary of the activities that take place within AQIP's seven-year cycle, as stated in *Institutional Accreditation: An Overview* (2010, p. 5), followed by a deeper review of each process.

The institution during a seven-year period engages in all AQIP processes, including Strategy Forums, Annual Updates, Systems Portfolio Appraisals and a Quality Checkup Visit, culminating in reaffirmation of accreditation.

An AQIP Review Panel examines the collective history of the institution's interaction with AQIP and the Commission (i.e., reports of the various processes and activities, organizational indicators, current Systems Portfolio) to determine whether this evidence demonstrates compliance with the Commission's Criteria for Accreditation. The Panel may seek and obtain additional information before making its recommendation.

A decision-making body takes action on the Panel's recommendation regarding both reaffirmation of accreditation and continuing AQIP participation.

***Application and Self-Assessment Process.*** Colleges and universities first make a very mindful and deliberate decision to join AQIP and file an application with NCA-HLC. At the invitation of the college, the commission's vice president for accreditation relations visits campuses to describe AQIP systems and procedures. Particularly because this alternative accreditation program presents a major shift in culture and workload, it is important that the expectations are clear from the outset. In the application stage, colleges must also show that they are taking the quality improvement model seriously and willing to conduct a self-assessment to gauge their systemic approaches, culture, strengths and weaknesses. Vital Focus is one mechanism, a package that includes campus-wide discussions, developed and supported by NCA-HLC to conduct an institutional self-assessment. The *Handbook of Accreditation* (2003) describes Vital Focus as:

...a self-assessment package to help organizations prepare themselves for implementing quality improvement by looking at their improvement opportunities from a systems and process perspective. Vital Focus swiftly provides an organization with an index of its strengths in relationship to the AQIP Criteria and Principles of High Performance Organizations. It makes visible the gaps between current performance and where the organization could or should be. By evaluating AQIP's fit with the organization's strategic context, mission, goals and priorities, Vital Focus serves as a tool for strategic planning and organizational learning. (p. 6.1-3)

Another tool offered by the commission for self-assessment is the AQIP Examiner, an online survey designed for staff and faculty to confidentially and anonymously assess their college's culture of quality improvement.

**Strategy Forum.** Within six months, the newly accepted college sends a team of eight staff and faculty members to the AQIP Strategy Forum, an intensive commission-sponsored conference organized for a maximum of 150 staff and faculty across 18 schools. In a strategic effort to garner campus-wide endorsement, NCA-HLC advises colleges to send a diverse group of leaders to the Strategy Forum. Institutional teams must include the following members: president or chief executive officer, accreditation liaison officer, staff member, faculty member and a board member or trustee. The representing team: (1) critically analyzes, contextualizes and debates major challenges on its campus, (2) wrestles with these obstacles for about three days and then (3) selects three action projects, or quality enhancing initiatives, that will meaningfully address identified target issues. NCA-HLC explains that "The Strategy Forum and the selection of Action Projects are designed to be the kickoff for a continuous series of projects with the successfully completed projects accumulating into a record of the institution's quality improvement activities" (NCA-HLC, 2010).

**Action Projects.** Within two months, campuses are required to have three action projects underway, including one that centers on teaching and learning.

### Sample Action Projects

The following examples come from a directory of Action Projects maintained by NCA-HLC. Colleges can access this directory for examples of effective practices geared toward quality improvement. These institutions were not included in the RP Group's research.

#### ***Design of a Process for Student Advising*** ***(Baker College, MI)***

**Goal.** This project would result in the design of a new model for advising for students. As part of this project, a needs analysis of what different segments of students need from advising will be explored along with a review of current practices across all of our campuses and best practices at other institutions to identify what works. The project will also provide an opportunity for collaboration between admissions, student services, career services and academics on how to most effectively provide advising. Our ultimate goal is to ensure that students start in the right program, receive the support needed to persist to graduation and begin rewarding and successful careers.

**Success Factors.** The implementation of a new advising model has led to increased retention (year to year) among new first-time-in-college students. This is the most important success. Additionally, the implementation of direct metrics to understand FYA behavior has allowed the institution to better understand what interactions are leading to success and to help FYAs increase their success with students by providing direct and meaningful feedback. The interdepartmental training was also highly successful and has helped increase cooperation across departments and ensured that FYAs have broader knowledge of the institution to help students.

According to the *Handbook of Accreditation* (2003, p. 6.3-2), action projects intend to:

- Make a serious and visible difference to institutional performance
- Embody challenging but attainable goals
- Stretch the organization to learn and to excel in new ways
- Focus on both efficiency and benefits to students and other stakeholders

Beginning one year after the campus joins AQIP, institutions file for an annual update, whereby they present evidence of their progress or completion of the action projects that were identified after participating in the Strategy Forum (NCA-HLC, 2010). The commission expects schools to always maintain three action projects and update their status in its web-based action project directory. Action projects must be transparent and available for peer colleges to review or to provide feedback.

**Systems Portfolio.** Every four years organizations submit a systems portfolio to the commission that includes nine categories with four main elements that help colleges inventory their best practices and areas for growth. They include:

1. Helping Students Learn
2. Accomplishing Other Distinctive Objectives
3. Understanding Students' and Other Stakeholders' Needs
4. Valuing People
5. Leading and Communicating
6. Supporting Institutional Operations
7. Measuring Effectiveness
8. Planning Continuous Improvement
9. Building Collaborative Relationships

#### Sample Action Projects continued...

##### ***Engaged Teaching and Learning (Bay de Noc Community College, MI)***

**Goal:** The goal of this Action Project is to increase the level of student engagement in the learning process by providing pedagogical training to our full-time and part-time faculty in the area of content literacy and by offering supplemental instruction opportunities to students in high-risk courses. Increased student engagement will create a higher quality and more intensive learning environment, which will lead to greater student success, both in terms of intrinsic knowledge and extrinsic achievements, such as course completion and graduation. Content literacy strategies to be applied to classroom learning include: concept and vocabulary development, academic dialogue, reading support and writing to learn.

**Success Factors:** Over the two-year cycle of the CTL project, 58% (27 of 48) of Bay's full-time faculty participated in this professional development activity. The CTL experience has become a springboard for creation and continuation of similar professional development for all faculty. Beginning with the upcoming academic year, Bay will deliver its own program of Active and Collaborative Learning (ACL) in a systematic manner whereby, over the course of a three-year period, all Bay faculty will have exposure with and the opportunity to, participate in training sessions to learn and incorporate the ACL strategies into their instruction.

This document, which must always remain current, most closely parallels the traditional institutional self-study, as it provides evidence that the institution is meeting NCA-HLC's accreditation criteria. However, a systems portfolio is not written for reaffirmation per se but rather, the systems appraisal, which is a comprehensive review process described below. According to the commission's *Handbook of Accreditation* (2003, p. 6.3-2),

The Systems Portfolio consists of an Organizational Overview and explicates each of the major systems employed to accomplish an organization's mission and objectives. The organization answers specific questions for each of the nine AQIP Criteria. For each system, the questions deal with context for analysis, processes, results and improvement. The Organizational Overview presents a capsule picture that helps readers understand the organization's key strengths and ambitions, as well as the challenges and conflicts it faces. Information about systems, processes and performance provides a context for appreciating the organization's choices and decisions.

***Systems Appraisal.*** A team of seven to nine highly trained quality improvement peer reviewers are tasked with evaluating the systems portfolio and providing a lengthy report following the assessment process. NCA-HLC does not attempt to match schools to reviewers based on the reviewer's skill set or professional expertise. This is because the commission is specifically looking for diverse teams of reviewers in areas such as geography, age, sex, race, two- or four-year college work experience and professional work history both inside and outside of higher education. While in the systems appraisal cycle, teams work and convene online for four months to complete a 60- to 70-page systems appraisal feedback report, assessing colleges in relation to the nine categories listed above as part of the systems portfolio. In this work, teams use the systems portfolio and the college's website as primary documentation. Upon conclusion of this report, colleges and universities have six months to attend another Strategy Forum to create new action projects and/or tweak existing ones. AQIP simultaneously operates 31 systems appraisal review teams of seven to nine people twice per year.

AQIP calls upon institutions to undergo a Systems Appraisal every four years. This is an opportunity for your institution to get expert, objective, third party feedback on its strengths and opportunities for improvement. In turn, what you learn from the Systems Appraisal will help you determine your next targets for advancing quality in your institution through Action Projects and other plans. (NCA-HLC, 2010)

***Quality Checkup Visit.*** To adhere to the USDE guidelines, the quality checkup visit is a two-day, onsite meeting conducted by two reviewers within three years prior to reaffirmation for accreditation. The visit provides evidence that the systems portfolio is indeed accurate and that stated action projects are underway. It also gives NCA-HLC the opportunity to discuss federal compliance issues with member organizations and reestablish collegial relations. Quality checkup visits are intended to be positive and affirming reviews. As cited on the NCA-HLC website:

The visit helps assure both the institution and the commission that the institution's reaccreditation in the following year will go smoothly, that it meets all of the commission's accreditation expectations fully. The Quality Checkup is not a visit that makes a determination on accreditation.

***Reaffirmation for Accreditation.*** In the seventh year of AQIP, member institutions submit a collection of salient materials (i.e., generally, 1,000 pages of documentation) to endorse their reaffirmation of accreditation. These materials are a culmination of all activities described above (i.e., the strategy forum, action projects, annual update, systems portfolio, systems appraisal and

quality checkup). An AQIP review panel on reaffirmation applies the NCA-HLC standards for accreditation, working and convening online similar to the systems appraisal. The excerpt below, authored by NCA-HLC, describes the intent of the reaffirmation process.

Reaffirmation of Accreditation is the summative review ending each seven-year period of participation in AQIP. An AQIP Reaffirmation Panel examines each organization's current Systems Portfolio and its last six years of Action Projects, Systems Appraisals and other interactions with AQIP and the Commission, including reports of the Quality Checkup as well as any additional organizationally requested or Commission-sponsored visits. The Panel documents where it finds satisfactory evidence of compliance with each of the Criteria for Accreditation. In exceptional cases in which the evidence is incomplete, the Panel seeks and obtains additional facts or verification, ultimately recommending to the Commission's Institutional Actions Council whether the institution meets the Criteria for Accreditation and whether it should be permitted to continue participating in AQIP. Specific procedures dictate immediate action if the evidence available fails to confirm that an institution meets all of the Commission's accreditation requirements. (NCA-HLC, 2010)

As outlined above, at the conclusion of the reaffirmation process, the review panel forwards its recommendations to the Institutional Actions Council (IAC), where similar to the PEAQ process, the IAC votes to determine official action and forwards this decision to the board of trustees. Requiring a two-thirds vote, the board of trustees chooses to endorse or not the actions of the IAC (NCA-HLC, 2010, p. 2.2-3).

According to our participants, the AQIP model is as much a complex network of interrelated activities and experiences as it is a cycle of events. Several respondents expressed that in the early stages of AQIP, frustration built at their institution as a result of the unfamiliar, less dogmatic approach to accreditation. Despite the various milestones that AQIP requires (e.g., goal-setting, systems portfolio, action projects), the guidelines for a continuous quality improvement model were perceived as vague and difficult to interpret, particularly in contrast to the PEAQ program. College A's president acknowledged,

Since 1973 we've been a PEAQ institute. In 2005, we held our first [Vital Focus conversation]. We made this much more difficult than it was. For two to three years we struggled, adapting to this new process, when what we needed to do was focus.

College B's accreditation liaison officer echoed the college's responsibility in focusing on the task at hand. She stated, "The systems portfolio is a much bigger process than we anticipated—now we get everyone involved. However, the first time we conducted our systems portfolio we were disorganized and lacked understanding. The second time was better." Finally, College C's faculty member lamented his own administration's lack of direct communication regarding the newly adopted AQIP model on his campus. He claimed, "When the college understands AQIP and the process, you get out what you put in. Here at my college, the administration miscommunicated the purpose and mission of the program, which led to the campus not understanding AQIP."

Although interviewees expressed their initial frustration with the AQIP experience on their campus, they all agreed to the inherent value of AQIP for students, faculty and staff. Ultimately, respondents expressed a distinct level of enthusiasm for the model, conceding that a continuous cycle of quality improvement keeps administrators and faculty on task, helps colleges remain forward-thinking and maintains a student-centered focus. College B's president succinctly

summarized this point by saying that as an AQIP institution, "...you never stop. The disadvantage is that so much is expected of your institution and change takes time. The advantage is that it holds your feet to the fire to make quality change happen." Interviewees cited that their campuses underwent dramatic cultural and professional shifts as a result of the new accreditation process.

What follows are two college perspectives on the AQIP model and how it has positively transformed their institution.

**College A.** College A is a small, rural community college in the North Central region where, interviewees attest, change takes time. In 2005, following the college's adoption of AQIP, interviewees indicated that the campus culture began to shift in three distinct ways: attitudinally, communicatively and systematically. The faculty respondent articulated that College A pursued the PEAQ program for decades and thus, was comfortable with the well-known 10-year process culminating in a comprehensive self-study. Nonetheless, the president led the school in a new direction to spark change.

*College A, under the influence of action projects, is more receptive to perceiving "weak spots as opportunities."*  
(NCA-HLC College A Faculty).

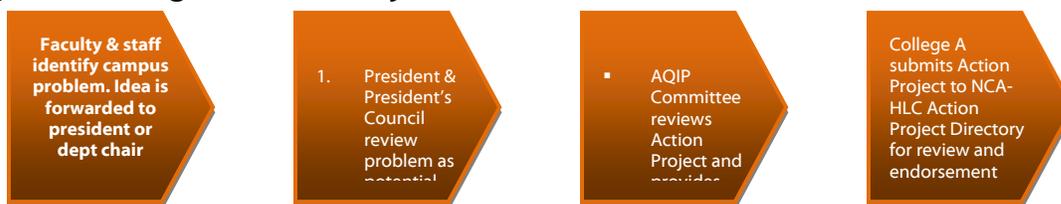
The faculty member acknowledged that College A needed to learn new ways of doing things. She noted, "AQIP helped clean up the big picture and the administration is on board. Leadership is important; they must be behind the process." But this wasn't always the case. She stated that the school had historically been "personality" driven not "process" driven. Subsequently, if someone resigned or retired, the process (e.g., financial aid, admission, hiring, testing) was compromised. According to this interviewee, the AQIP process provoked College A to commence its new accreditation cycle by constructively identifying and addressing campus-wide issues in an effort to move forward as a transparent, collaborative and quality-driven institution. She disclosed that to begin, external researchers were hired to review how communication was processed on campus, what messages were being delivered and who received them. The results were shared openly and generated an honest dialogue at College A, as stated by the faculty interviewee, which she believed led to a communication-related action project that was fully endorsed by the college administration.

AQIP is now wholly reflected in the campus culture, as corroborated by College A's president, accreditation liaison officer and faculty point person. Faculty and staff alike seek to resolve problems by recognizing issues as potential action projects, a fundamental element of AQIP that facilitates

*AQIP requires institutions to "look forward," while PEAQ compels schools to "look backward."*  
(NCA-HLC College B CEO)

institutional quality improvement. College A, under the influence of action projects, is more receptive to perceiving "weak spots as opportunities," as cited by its faculty member. The systematic process mapped below in Figure 1 was illustrated by the RP Group evaluation team to demonstrate how action projects are identified and selected at College A. However, it is important to note here that all AQIP institutional members have their own unique process for choosing action projects.

**Figure 1: College A Action Project Selection**



**College B.** As stated earlier, College B is a large, urban community college. According to the accreditation liaison officer, the institution was primed for quality change because, as she recalled, College B engaged in “quality training” in the early 1990s, but lacked specific accountability measures to monitor its implementation. The president, accreditation liaison officer and the faculty point person concur that College B applied for AQIP because its value system matched AQIP’s ideological framework, one of consistent quality improvement. College B’s philosophical underpinnings were revealed in interviews with the college president, who remarked that AQIP requires institutions to “look forward,” while PEAQ compels schools to “look backward,” thus making AQIP more useful overall to quality improvement and institutional change. College B’s faculty member further pointed out that the institution had been in a “stagnant” place and was eager to adopt a transformative program, like AQIP.

Among the institutions that participated in this research study, College B was known for having robust financial resources and a healthy organizational system. Following decades in the PEAQ program, interviews reveal that College B adopted the AQIP model with gusto, particularly for a school of its size and complex characteristics (e.g., number of adjunct faculty members, urban setting). According to the interviewees, College B’s first Vital Focus, or campus-wide forum to discuss its “strengths in relationship to the AQIP Criteria and Principles of High Performance Organizations,” was exceedingly successful (NCA-HLC, p. 6.1-3, 2010). Dozens of simultaneously facilitated conversations happened campus-wide that generated over 100 suggestions for institutional quality improvement. A team later synthesized these ideas into seven major themes and forwarded them to the college’s executive leadership team, who selected several to pursue as action projects. Generally speaking, conversations with representatives of the institution indicate that College B faculty and staff were proud of this inclusive and systematic process. Although interviewees claim that College B’s second Vital Focus was not nearly as successful, they noted that the lessons learned in inclusivity and organization from the first exercise were unparalleled.

*By adopting AQIP, institutions are choosing to work toward quality improvement.*

Similar to other institutions, College B respondents confirmed that while action projects aim to enhance campus-wide practices, they sometimes only benefit pockets of the college. Yet, according to interviewees, those on the receiving end reap massive benefits. For example, according to the faculty respondent, College B elected to pursue an action project that would increase consistency in curricula and particularly benefit students and faculty. While this action project did not necessarily improve processes campus wide, the faculty member suggested, it certainly paid dividends to faculty and students.

In summary, while the NCA-HLC AQIP colleges interviewed expressed similar frustrations with components of AQIP, respondents were particularly compelled to state that by adopting AQIP, institutions are choosing to work toward quality improvement. Respondents surmised that this choice sparked changes in campus attitude, communication and culture, thus pushing campuses away from stagnancy and focusing more on innovative quality-driven practices.

## Approach to Compliance

Recently, NCA-HLC responded to a mandate by the Office of Postsecondary Education that it provide “minimum expectations” for accreditation to its member institutions and peer reviewers. Subsequently, NCA-HLC posted a document to its website dated July 30, 2010 explaining “Minimum Expectations within the Criteria for Accreditation” to its stakeholders. According to the commission, “The Criteria for Accreditation and their Core Components are designed to spur the review, consideration, questions and conversations that may lead an institution and its evaluators to continuous improvement and ever higher expectations beyond mere compliance.” However, “The purpose of the Minimum Expectations is to document for some aspects of the Criteria a floor below which an accredited institution should not fall” (NCA-HLC, 2010). Minimum expectations include the following six areas: fiduciary responsibility, public information, programs and instruction, faculty, student support services and resources. In the posted document, these categories are described in more detail, allowing readers to connect each expectation to the criteria for accreditation and the minimum requirements that meet compliance.

Faculty and staff respondents from all three NCA-HLC AQIP institutions agreed that AQIP is about quality, rather than compliance. While many cited that adherence to federal guidelines is what allows their colleges to continue operating, it is quality improvement that enables their institutions to be successful. According to College A’s accreditation liaison officer, “Compliance is jumping through hoops. AQIP is an avenue for improvement. It is a move in the right direction. Compliance is part of the process but we focus on improvement.” Further, College B’s president noted that AQIP can be leveraged to produce quality change. “We use compliance to move improvement. The power that AQIP has is helpful to do what we want. Compliance creates a standard. What accreditation should do is first, accountability and second, improvement.”

*While many cited that adherence to federal guidelines is what allows their colleges to continue operating, it is quality improvement that enables their institutions*

In summary, in the area of quality-driven practices and federally-mandated activities, respondents were very straightforward with one simple message. AQIP is entirely about quality and as institutions eagerly implement quality improvement initiatives, they will naturally adhere to federal mandates. College B’s faculty interviewee even noted that she had never really given compliance much thought because it is folded directly into the quality producing activity.

## Use of Sanctions

NCA-HLC has two sanctions: colleges can be placed on notice or probation. Those colleges placed on notice are demonstrating the inability to meet one or more of the commission’s criteria for accreditation. In terms of process, only a site visiting team, a review committee, or the

executive director of the commission can make a recommendation to place a college on notice. The review committee and then the board of trustees review the recommendation.

The board of trustees can likewise place colleges on probation. Again, a site visiting team, a review committee, or the executive director of the commission can make this status recommendation, which is then forwarded to the review committee and endorsed or not by the board of trustees. As cited in the *Handbook of Accreditation* (2003, p. 7.3-3),

In placing an organization on probation, the Board identifies in the institution's Statement of Affiliation Status the specific conditions that led to probation and the date of the next comprehensive evaluation, at which time the organization must provide clear evidence of its progress toward ameliorating those conditions. The maximum period of probation is two years.

However, NCA-HLC has duly noted that the AQIP model has support mechanisms built into the process specifically to deter colleges from being placed on sanction. As described below in the *Handbook of Accreditation* (2003, p. 6.3-4), these provisions are a central component to the accreditation program.

Colleges and universities are supported in using their own quality improvement initiatives to accomplish goals and reach levels of performance that meet the expectations of the Commission's Criteria for Accreditation. Should an organization begin to flounder in its ability to meet a Criterion or a Core Component, the checks and milestones built into AQIP's processes provide the college or university with the feedback and help needed to prevent little problems from growing into big gaps or failings. By keeping reaffirmation of accreditation separate from its other processes and services, AQIP takes care to maintain the independence of judgment that public quality assurance requires while still providing accredited organizations with the nurture, support and encouragement that enables improvement and quality performance.

As noted earlier in the section marked "Colleges Studied", at the time of this research very few NCA-HLC colleges were on sanction (regardless of belonging to PEAQ or AQIP) and only one fit our interview criterion of being a two-year institution. Because this college declined to interview, we could not ascertain college perspectives on the commission's use of sanctions.

## **Strategic Supports Designed for Quality Improvement**

This section presents findings obtained through the review of documents accessed on the NCA-HLC website and interviews with commission staff and representatives from member institutions. Findings focus on what support NCA-HLC offers colleges to help them achieve quality change and institutions' assessment of whether this support meets their needs. This section discusses: (1) how the commission develops its relationship with member colleges, (2) how it works to establish a consistent understanding of its standards and (3) to consistently apply these standards, (4) what training opportunities and other forms of institutional support it offers and (5) how it facilitates the sharing of effective practices among institutions.

## **Development of the Commission/College Relationship**

In the *Handbook of Accreditation* (2003), NCA-HLC describes the reciprocal and ongoing relationship between the college and the commission primarily as a result of the submission of required documents, changes in federal mandates and site visits. To keep its colleges informed in

these areas, NCA-HLC connects with its colleges in multifaceted and distinct ways, such as formal training sessions, its annual meeting and correspondence via e-mail and telephone. It is during these points of contact that both the college and the commission have an opportunity to develop a strong rapport and clear communication pathways. This section represents interviewees' thoughts on their commission's rapport, responsiveness and approachability. As evidenced below, all respondents found AQIP staff members to be committed to maintaining open communication.

NCA-HLC AQIP respondents asserted that their commission is very helpful, responsive and collegial. College A's faculty point person and accreditation liaison officer claimed that the purpose of NCA-HLC accrediting process is to improve and advance quality, not critique and intimidate. They corroborated that the notion of improving quality as an accreditation framework has a positive impact on colleges, subsequently making it manageable for colleges to adopt and understand. Because AQIP is still quite new, the rules are sometimes in flux. According to College A's president NCA-HLC provides training and support to offset the frustration that some colleges can feel adopting new processes and practices.

AQIP quality check up visits are viewed by the United States Department of Education as a way for the commission to confirm that the activities reported by the colleges are indeed happening in reality. Although the commission and the colleges under review take quality check up visits very seriously, they are said to be collegial experiences, allowing colleges to showcase their hallmark projects while getting direct advice on initiatives under revision. Respondents claimed site visiting team members are helpful, positive and well informed. College C's accreditation liaison officer adds to this description.

The commission is very helpful. This is a fairly new process [for College C] and NCA-HLC is always very good and eager to assist us. Through annual meetings and e-mails, the commission has always been helpful. This was our first time going through the AQIP quality check up visit. It was my fourth time as an accreditation liaison officer, but it was the first time for the school. AQIP is structured to improve processes; it changes the culture of an institution.

In summary, college staff and faculty identified commission staff members by name and indicated that they were very helpful, engaging and supportive throughout the interviews. While respondents also cited the commission as being too vague at times, this characteristic did not overshadow the fact the commission promptly and pleasantly responded to all college inquires and requests, fostering a collegial and unintimidating relationship.

## Establishment of a Consistent Understanding of Standards

NCA-HLC's staff interviewee reported that the commission recognized the challenge of striking balance between being either overly prescriptive or too vague in supporting colleges' understanding of the standards. According to the interviewee, colleges are seemingly very nervous about the accreditation process and want to know precisely what is necessary for reaffirmation. Given this context, the commission has worked in a couple ways to avoid becoming either too narrow or too unstructured. First, colleges are discouraged from joining AQIP if they simply want to do the minimum necessary for reaffirmation. The interviewee claimed that NCA-HLC staff members work at length with colleges considering the AQIP process to emphasize its focus on continuous quality improvement, not compliance and

minimum standards for accreditation. Second, some AQIP activities are intentionally designed without an outcome. As described by the commission staff member,

We've really tried within AQIP to separate the processes and not make everything into a high stakes do or die process. And so, there are a lot of things institutions engage with us where there is no verdict. They're not going to lose accreditation or get accreditation because of it. They are going to learn things to put them in a better position to be strong.

The commission staff member commented that ultimately AQIP means increased and ongoing work toward quality improvement. NCA-HLC can provide support and structure, but it is up to the institution to pursue goals that extend beyond the minimum criteria for accreditation.

## Consistent Application of Standards

Accrediting bodies often struggle with maintaining consistent application of the standards throughout the region. In the case of NCA-HLC, PEAQ's comprehensive review process and AQIP's formal reaffirmation of accreditation process are hallmark evaluations where students, staff and faculty need assurance that they are being judged fairly and objectively. In each case, peer reviewers conduct an institutional assessment, which is then reviewed by the Institutional Actions Council and then the board. In this multi-layered system, one set of reviewers may judge more harshly than the other, causing a misalignment in commission practices. The following section focuses on how assurance in this area is integral to the AQIP review procedures.

### **Alignment of Commission Expectations with the Understanding of Institutions and Evaluators**

NCA-HLC enacts certain practices to strengthen the consistent application of the standards and to ensure that teams, colleges and the commission have an equal understanding of the review process. For example, team training provides a significant opportunity for peer reviewers to gain a deeper understanding of objectively measuring the criteria for accreditation. NCA-HLC shares accreditation case scenarios and informs peer reviewers through face-to-face and online team training sessions, multi-day face-to-face training for new peer reviewers, chair seminars and specialty workshops at the annual meeting.

Resources, guides and templates are available online and distributed during each of the above listed training sessions in an effort to calibrate the assessment process for peer reviewers. For example, as identified earlier in this section, a systems appraisal is a significant review occurring every four years to assess the college's progress in the nine designated AQIP systems. An AQIP systems appraisal guide can be found online and includes items such as a glossary of important terms (e.g., systems appraisal team leader, gap and consensus review). It also includes one worksheet per system and a flow chart to standardize the understanding of the systems appraisal rubrics and the flow of peer reviewer feedback. Although the guidebook does not provide concrete examples of each, it lists rubrics that include outstanding strength, strength, improvement opportunity and outstanding improvement opportunity. Further, the guidebook provides explicit details surrounding the consensus conversation, an activity that frames working through an issue that has been found to threaten a college's accreditation. Sample evaluator feedback is placed in the guidebook to give peer reviewers a model.

Finally, NCA-HLC assigns a staff member or accreditation liaison to all affiliated colleges and universities and an AQIP liaison to all AQIP schools. This individual is directly responsible for communicating standardized practices and procedures. As cited on the NCA-HLC website:

The Accreditation Liaison is a new role established by the Commission for improving communication with its affiliated institutions. For AQIP Institutions, the Accreditation Liaison may be the same person who serves as the AQIP Liaison. The Accreditation Liaison is appointed by your CEO.

### **Consistency across Evaluation Teams**

To further prevent misalignment across review teams, AQIP's vice president for accreditation relations explained that AQIP has a three-pronged process for AQIP's reaffirmation of accreditation. First, a reaffirmation panel conducts AQIP's summative evaluations, which are then presented to the Institutional Actions Council. "The reaffirmation panel...has as its input the formative evaluations of all the other AQIP processes over the previous six years." Second, the IAC, comprised largely of experienced peer reviewers, as noted in an earlier section of this document, conducts a final review and forwards its recommendation to the board of commissioners for action and validation. As described by the vice president "The Institutional Actions Council is our second level of review and the board treats its actions as a consent agenda and doesn't second-guess IAC." Thus, AQIP's reaffirmation panel informs the IAC, which informs the board. According to the vice president for accreditation relations in the last four years of implementing this method of review, there have been only two cases where the IAC questioned the reaffirmation panel on the outcome of a review and both cases were subsequently handled appropriately.

Further, the vice president stated that consistency would be difficult to achieve without the three-pronged, streamlined process. He asserted:

This is far easier to achieve than it would be if I had a different team making the summative recommendation for each school (as is the case with our traditional process). The inner workings of the reaffirmation panel force consensus. We carry half of the panel forward each year so there are no abrupt changes in the overall perspectives the panelists bring to their task. I get direct and quick feedback from IAC (they usually call me to come to any meeting where they have questions about the panel's recommendation). I, in turn, bring back to the AQIP reaffirmation panel any indication that IAC's standards are diverging from those the panel is using.

College respondents most commonly cited NCA-HLC's annual meeting as the most effective method for understanding the commission's expectations and the criteria of accreditation. The Strategy Forum was the second most popular resource for understanding the criteria. For example, College B's accreditation liaison officer cited that both the annual meeting and the Strategy Forum are helpful and provide clear directions to meet the criteria and understand how it will be applied. She appreciated the presence and direction of the commission staff at these sessions.

...our AQIP liaison attends the Strategy Forum and goes into each college's session at least once. He reviews what the commission expects from us and he always keeps us in touch with what's going on in the US Department of Education.

This respondent went on to say, though, that she would like to see more specialty workshops offered to support the information she is gaining from the annual meeting and help her understand the standards.

As the lead author for her school's systems portfolio, College B's faculty point person stated that she attended a writing workshop to augment her understanding of the criteria and found it to be helpful in understanding how the commission would interpret the document.

In summary, although the AQIP reaffirmation process is complex, the vice president for accreditation relations maintains that it is a tight and cohesive internal process, thus ensuring as much consistency as possible. Interviewees had only positive remarks regarding any type of review process, whether it was the quality checkup visit or the systems appraisal. One interviewee from College B commented that, in regards to consistency, she found a discrepancy in the comprehensive review process but informed the commission right away, so changes could be made to the process going forward. This experience is described in more detail in the section on Evaluator Training.

## Provision of Training and Other Institutional Supports

### Training for Institutions

NCA-HLC provides four primary programs and resources for assisting colleges and universities with their selected accreditation program: (1) the Academy for the Assessment of Student Learning, (2) the annual meeting, (3) the Strategy Forum and (4) online training and resources. These four elements collectively enable member organizations to meet NCA-HLC's criteria for accreditation. The Academy for Assessment of Student Learning is a progression of activities spanning over four years designed to help schools improve and measure student learning. The academy includes embedded activities such as a three-day roundtable, mentoring, a results forum and an electronic network to keep schools connected to the process and focused on the overarching goal—enhanced student learning.

In 2010, NCA-HLC held its 115<sup>th</sup> annual meeting to provide schools with resources and support for both PEAQ and AQIP. Sessions, for example, included themes such as choosing AQIP, writing a self-study and designing effective action projects. The annual meeting also hosts a president's seminar to cover areas like federal compliance and fiscal responsibility.

As part of its commitment to training, NCA-HLC frequently offers workshops and strategy forums, as described above, throughout the year. Sessions generally address both PEAQ and AQIP deadlines and milestones, but given the continuous nature of AQIP, the commission offers ample training for schools that pursue this program. NCA-HLC also frequently updates its website, which contains hundreds of documents that guide member organizations through the accreditation process. NCA-HLC actions are made public on this website and all commission expectations and activities are transparent to key stakeholders and the public at-large.

As previously described, colleges send a team of eight to 10 people to an NCA-HLC's strategy forum upon acceptance to AQIP, an intensive training session focused on tackling campus-wide issues. Invited guests include the president or chief executive officer, accreditation liaison

officer, a staff member, a faculty member and a board member or trustee. The designated group deliberates major college challenges over a multi-day meeting and selects three action projects, or methods for responding, to bring back to their campus. Respondents suggested that it is important to the AQIP process to allow new people, in a variety of leadership roles and with the energy and capacity, to participate in training, committee work, systems portfolio writing, etc. College B's faculty member further confirmed that action projects and the overall process of resolving campus-wide issues will "suffer" if new energy is not continuously brought into the process.

Myriad online and face-to-face training options are offered, reaching member institutions despite geographic location or technological capacity. Underlying each major training program is a set of intentions aligned with AQIP core principles, as apparent in the Academy for the Assessment of Student Learning, the Strategy Forum and annual meeting.

Among the respondents, College A's president stated that NCA-HLC training is too expensive to send representatives to each and every meeting. This college president divides conferences and training sessions into three main categories: (1) mandatory, (2) beneficial and (3) unaffordable. Thus, a guaranteed return on investment is essential to sending college representatives to Chicago, Illinois, where a majority of the major commission conferences are held.

Respondents noted that they would like increased specificity at workshops and training sessions. In some sessions, it is hard to receive direct answers. For example, College A's president claimed that he went to two sessions on the same exact problem and obtained completely different approaches on how to resolve the predicament. College B's accreditation liaison officer remarked that it would have been helpful to have information on next steps after the systems portfolio. The faculty member from College A commented, "Looking back, I wish there was more structure to NCA-HLC training, as it's very individualized" again, reiterating the need for succinct and meaningful feedback from the commission to the colleges.

### **Training for Evaluation Teams**

NCA-HLC relies on a robust Peer Review Corps program—higher education professionals who volunteer to assess peer colleges in the region. Although full-time faculty and administrators comprise the majority of peer review volunteers, NCA-HLC does permit non-higher education professionals to serve as well.

The Commission maintains a Peer Review Corps of approximately 1,300 faculty and administrators from institutions within the nineteen state North Central region. The peer reviewers play an incredibly important role in all stages of the accreditation process. They are responsible for assuring that an institution is complying with the accreditation criteria as well as for helping an institution advance within the context of its own mission. (NCA-HLC, 2010)

Applicants interested in serving in the capacity described above first apply for membership online. Regardless of the PEAQ or AQIP process, NCA-HLC is specifically looking for volunteers who will carry out two chief responsibilities (NCA-HLC, 2010):

1. **Organizational improvement.** Within the context and mission of the organization, peer reviewers offer consultative information intended to contribute to the quality of its academic offerings and to its improvement.

2. Public certification of organizational quality. Within its context and mission, peer reviewers provide public assurance of the organization by affirming its fulfillment of the Criteria for Accreditation.

Corps volunteers are expected to attend commission and peer review training throughout the year, in addition to being aptly prepared for visits, virtual meetings and decision-making. The NCA-HLC website provides ample information and resources for peer reviewers such as guidebooks, general templates, worksheets, comprehensive to-do lists and site visit report templates.

Peer reviewers comprise 1,300 college faculty and staff from within the North Central region. Three participants, with vastly different accreditation experiences, self-identified as AQIP peer reviewers in this research study. What follows is a summary of their work in this area.

College C's accreditation liaison asserts that AQIP evaluator training provides a wealth of valuable information that session participants can bring back to their campuses. She states that she would not attend peer review training if it were not for the valuable insights she was able to share with colleagues on her own campus. That being said, she does voluntarily serve on review committees and attend a three-day training event to prepare her for the process. She noted that she found her team to be very diverse as well as inconsistent in their views and opinions. She rated her team members anonymously, some more poorly than others and mentioned these inconsistencies to the commission. She claimed that she felt good about her decision to provide honest feedback to the commission knowing they use this information to create future teams.

College B's accreditation liaison officer had a different experience, in that she would rather facilitate accreditation conversations than read and debate comprehensive review documents. Thus, she is trained specifically to engage group dialogue. She is also trained, although less formally, to visit colleges in the North Central region and assist them with their decision to join AQIP. For this, she has partnered with more senior AQIP facilitators, jointly presenting information at in-services and special college forums dedicated to accreditation best practices. Finally, she is also trained to lead portions of the Strategy Forum. Her training in this area included job shadowing an experienced accreditation expert. Additionally, all forum facilitators meet one day prior to the meeting to discuss predesigned questions that help maintain consistency.

Finally, College B's president was an evaluator for PEAQ and concluded that the comprehensive reviews presented an insurmountable amount of work for any president. She asserted that she was selected once for a review despite her minimal experience and because of this, other team members executed the majority of the work. She does not agree that she should have been chosen for a comprehensive review team.

In summary, respondents from Colleges A, B and C had similar views of NCA-HLC training: (1) that it lacked a prescriptive message that colleges could easily employ on their own campuses and (2) that attending peer review training was an ideal way to strengthen their own institutions' accreditation process. Upon further investigation, it was evident that NCA-HLC balances between refining its training program to reach a larger audience and being overly prescriptive. It was also clear after speaking with the commission directly that they would like college staff and

zfaculty who attend peer review training to commit to conduct comprehensive evaluations, not simply use it to gain knowledge for their own campuses.

## Facilitation of Effective Practices Sharing

AQIP is structurally organized to ensure that colleges routinely and thoughtfully share effective practices. As an online portal, the Action Project Directory is a mechanism for communicating best practices and lessons learned. As aforementioned, colleges select three action projects to implement on their campus. However, during the selection and design phase, AQIP colleges are strongly encouraged to review comparable projects underway to help strengthen their own initiatives. NCA-HLC states the following regarding the directory:

The Directory was designed so institutions could share their Action Projects—both their specific goals and their strategies for achieving them—with other educators. The Commission found that having institutions formally declare their intentions for improvement projects made it easier for them to follow through and achieve the goals they had set for themselves. (NCA-HLC, 2010)

Additional methods for sharing effective practices, some cited earlier in this document, include statewide AQIP consortiums and NCA-HLC’s online AQIP forums. Examples of forum topics include: action projects, quality checkups and systems portfolios. Forums are yet another avenue for college staff and faculty to brainstorm, share advice and post inquiries. It is a mechanism for colleges at more advanced stages in the AQIP program to offer sound advice to their peers who may be just beginning.

NCA-HLC AQIP administrators have an informal statewide matchmaking system that connects institutions and encourages them to share ideas and strategies. Although the commission may initiate the introduction of college leaders, encouraging them to form an AQIP affiliate, the commission does not oversee these separate entities, some of which develop on their own. At the time of this research, eight states had formal AQIP associations and one was in the process of developing. These states include: Colorado, Illinois, Iowa, Kansas, Michigan, Minnesota, Missouri, Ohio and Wisconsin. College A’s president described these associations as organizations that unite “folks at different levels who can collaborate and provide guidance and advice to each other, both at the two- and four-year levels.” Further, association annual dues are kept relatively low; College A’s president claimed his college fee was \$25 per year, making it attractive for institutions to maintain membership and networking privileges with their colleagues from across the state.

As a result of each state’s collegiality, colleges may visit each other, by invitation, to share insights regarding their systems portfolio, quality check-up visits, action projects, etc. College A’s accreditation liaison articulated that his state’s association brings together two- and four-year schools for six-hour meetings, quarterly. He also noted that institutions from his state are rarely absent from this gathering because the conversation covers important ground regarding two- and four-year student priorities. He commented:

Ultimately many of our students will transfer to a four-year school and we need to be aware of what their standards are and make sure that our students academically are up to par with what the expectation is when they transfer to a four-year school.

In summary, a core component of NCA-HLC's AQIP model is peer collaboration as evidenced by the Action Project Directory, a unique online portal hosted by the commission to increase college engagement and interaction. This one mechanism alone allows colleges the opportunity to update their progress and seek feedback and assistance from other colleges in the region. Of the collaborative practices listed above, the directory was the most frequently cited example of sharing effective practices. On the other hand, PEAQ offers data analysis and assessment workshops and an annual meeting, all of which contain best practices and opportunities to see how other colleges are enhancing quality.

## **Colleges' Return on Investment**

The RP Group was particularly interested in knowing if the staff and faculty members it interviewed believed that accreditation indeed ultimately activated quality improvement. One interview question invited respondents to think about their institution's return on investment as a performance measure for accreditation. More specifically respondents were asked to recall the amount of time, money and human resources invested in accreditation in relationship to what their institution garnered from the process. NCA-HLC AQIP respondents agreed that although fully understanding and adopting AQIP can be a time-consuming process, their colleges reap significant rewards. College interviewees indicated they experience these advantages as individual institutions and as a collective of colleges in the region.

In observance of AQIP's core principles, AQIP colleges take steps that include collaboration, campus-wide involvement and respect for staff, faculty and students. Interviews indicate that when member colleges embrace campus-wide decision-making through AQIP, meaningful and valuable change can occur. As an example, College A's faculty member shared that for two years she has served on a 10-person action project committee to review distance education at her college. Given the gravity of the decision to add a degree or certificate program online, her committee hosts two, five-hour meetings per month to weigh the positives and negatives of this choice.

We have representation from both campuses, from administration, staff and faculty. And it's really powerful...we have intense, wonderful discussions and we move through the information and we come up with ideas. I have seen this kind of thing emerge from the action project process...which is building our college.

College A's accreditation liaison officer remarked that it is difficult to assess a college's return on investment prior to the conclusion of the seven-year AQIP cycle. Yet, he disclosed that thus far, the college was very pleased with the progress it made as an institution, particularly in positively reaching faculty and staff. Additionally, College B's president cited the value of applying AQIP principles more broadly across the college, rather than focusing them strictly on action projects or other components of accreditation per se. For example, she noted that AQIP's principles of high performance organizations could theoretically be infused into student learning outcomes.

In summary, interviewee responses regarding their return on investment in accreditation demonstrated that despite any frustrating aspects to AQIP, colleges overall are very pleased with its benefits. Not only does AQIP benefit the faculty, staff and students of member institutions, it also bridges campus relations across the region. Because of this AQIP camaraderie, interviewees

came across as collegial, eager to work with peer institutions and confident that they could seek help from a neighboring institution without feeling judged or inferior.

# Chapter 4: Southern Association of Colleges and Schools – Commission on Colleges

## Commission Description

The Southern Association of Colleges and Schools (SACS) consists of two commissions, the Commission on Colleges which accredits institutions of higher education and the Council on Accreditation and School Improvement Commission of Elementary, Middle and Secondary Schools that accredits K-12 schools. For the purposes of this report, the use of the SACS acronym applies solely to the SACS Commission on Colleges. SACS' mission statement offers a description of the commission and who it serves:

The Commission on Colleges of the Southern Association of Colleges and Schools is the regional body for the accreditation of degree-granting higher education institutions in the Southern states. The Commission's mission is the enhancement of educational quality throughout the region and it strives to improve the effectiveness of institutions by ensuring that institutions meet standards established by the higher education community that address the needs of society and students. It serves as the common denominator of shared values and practices among the diverse institutions in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia and Latin America and other international sites approved by the Commission on Colleges that award associate, baccalaureate, master's or doctoral degrees. The Commission also accepts applications from other international institutions of higher education. (SACSCOC, 2010)

## Accreditation Standards

In 2004, SACS moved from over 400 standards to 75 more streamlined and less prescriptive standards. According to a SACS vice president, the commission made this change because:

...Our membership had spoken to us and indicated that [we had] too many standards and it creates a cookie cutter mentality where everybody has to respond exactly the same. Of course when you have fewer standards you have to become more general just as a practical matter. We think that accreditation ought not to be a checklist of things, but a careful and thoughtful process of evaluating who you are and where you are on your journey and what needs to be improved and how you might go about doing that.

The standards are found in the handbook called *Principles of Accreditation* (SACSCOC, 2010) and are divided into four areas:

1. **Compliance with the Principles of Integrity (Section 1):** Integrity, essential to the purpose of higher education, functions as the basic contract defining the relationship between the commission and each of its member and candidate institutions.
2. **Compliance with the Core Requirements (Section 2):** Core requirements are basic, broad-based, foundational requirements that an institution must meet to be accredited with the Commission on Colleges.
3. **Compliance with the Comprehensive Standards (Section 3):** The comprehensive standards set forth requirements in the following four areas: (1) institutional mission, governance and effectiveness, (2) programs, (3) resources and (4) institutional responsibility

4. **Compliance with Additional Federal Requirements (Section 4):** The federal statute includes mandates that the commission review an institution in accordance with criteria outlined in the regulations of the *Amendments* developed by the US Department of Education.

## Reaffirmation Process

SACS institutions are reaffirmed every 10 years with a comprehensive review process. In addition, institutions are required to submit a fifth year report at the midpoint between reaffirmations.

The reaffirmation process consists of four steps.

***Step 1 – Submission of the Compliance Certification.*** Six months prior to the visit, institutions submit a compliance certification, which is the document completed by the institution to demonstrate its compliance with the core requirements, comprehensive standards and federal requirements as presented in the accreditation standards. The compliance certification is reviewed by an offsite review committee that meets in SACS’ Atlanta office and prepares a report indicating to what extent the institution has complied with each standard. This report is forwarded to an onsite review committee so they can follow up on issues identified by the offsite review committee.

***Step 2 – QEP and Focused Report.*** Six weeks prior to the visit, colleges submit a quality enhancement plan (QEP) and a focused report. The QEP “describes a carefully designed course of action that addresses a well-defined and focused topic or issue related to enhancing student learning.” (SACSCOC, 2008, p. 35). The focused report provides institutions with the opportunity to respond to any issues raised by the offsite review committee. Colleges are not required to submit a focused report, but are strongly encouraged to submit their response to the offsite review committee’s report. More detailed descriptions of the QEP and focused reports are provided below in the Research Findings section.

***Step 3 – The Visit.*** Visits are three to four days in length with eight to 12 Committee members, depending on institutional characteristics such as size and programs offered. Each onsite review committee is accompanied by a commission vice president who aims to ensure consistency among committees. Each onsite review committee only visits one college.

The onsite review committee’s focus is on: (1) the quality enhancement plan, (2) the issues identified by offsite review committee and (3) the federal requirements for which compliance must be confirmed onsite. The committee evaluates the QEP, specifically to determine if the plan is sound and comprehensive and if it appears the institution has the capacity to implement the plan.

A number of members of the committee focus on personnel matters in the visit. Two weeks prior to the evaluation visit, the college is sent a list of randomly selected faculty and professional-level staff. In the interim, the college pulls the personnel files of these faculty and staff

(including college transcripts), printouts of their class teaching assignments over a period of five years and their performance evaluations. These are made available to the onsite team committee upon their arrival. The assigned committee members review these documents to ensure:

- The personnel files are complete
- All faculty and staff are being evaluated as per the college's regulations and procedures
- All instructors and professional staff meet SACS qualification requirements vis-à-vis the classes they teach or the jobs they perform

After the visit, onsite review committee submits its report to the commission.

***Step 4 – Commission Review and Action.*** The committee on compliance and reports (C&R), a standing committee of the commission, reviews the following: (1) the report from the onsite review committee, (2) the institution's response to the onsite review committee report, which is a required, updated quality enhancement plan, (3) an evaluation of the institution's response by the chair of the onsite review committee and (4) an analysis of the institution's response by the institution's commission staff member. The C&R committee forwards its recommendation regarding an institution's reaffirmation to the commission's executive council, which then reviews and approves or modifies the recommendations of the C&R committee. The SACS board of trustees, which meets twice a year in June and December, makes the final decision on reaffirmation based on the recommendations made to it by the executive council.

## **Fifth Year Report**

The fifth year report was initiated in 2007 as a result of the USDE insisting that SACS “be in more frequent contact with its institutions” (SACS vice president). This report used to be called the Fifth Year Focused Report, which was “a report that the commission required of an institution when it was reaffirmed to ensure that the institution was still in compliance with standards where they just barely got by on at reaffirmation... it was a signal of minimum adequacy and a concern about sustainability” (SACS staff member). As a result, “most [institutions] did not have to complete the old focused fifth year report,” but now all institutions are required to submit the current fifth year report (SACS staff member).

SACS updated the report with “a mini-compliance certification in which we have extracted 15 standards and asked institutions to do a paper response, which is evaluated by peer reviewers” (SACS staff member). Additionally, the fifth year report also now includes a QEP impact report, which is a follow up on the implementation of the QEP, addressing whether the original goals were met or changed and why and what the institution learned as part of this process.

## **Evaluation Team Selection**

SACS calls its evaluation teams “review committees.” Commission staff describe their efforts to recruit for review committees as fairly aggressive based on the premise that a good review starts with a good team. Each year, SACS sends a letter to college presidents listing staff from their institution who are on the registry of potential evaluators and asking for an update of this

information. This letter also identifies areas of expertise that the commission is seeking and requests recommendations for staff who could help in these areas.

Committees are designed to contain members whose knowledge, skills and experience are the best fit for the college being visited. As a result, committees that visit community colleges tend to be from other community colleges, while four-year representatives visit four-year institutions. However, if an institution grants both associate and bachelor degrees, then SACS will assign a mixed committee. The commission rarely selects evaluators to review a college in their home state.

## Colleges Studied

As described in the Methods section, the RP Group interviewed staff from three colleges in the region. We have labeled the colleges A, B and C to maintain their anonymity. College A is a small, suburban college, College B is a large, urban college and College C is a small, rural college. As previously mentioned, we define a small college as having less than 10,000 students, a medium-sized college as having between 10,000 and 20,000 students and a large college as having over 20,000 students. All three colleges are located in different states within the SACS region.

## Research Findings

The following section presents the research findings from the RP Group's interviews with representatives from SACS and its member institutions and a review of documents posted on the SACS website. As in the last chapter, these findings are grouped by process components the commission implements and strategic supports it offers to promote quality improvement. Perspectives from member colleges are woven within descriptions of these strategies as told by commission representatives and as found in the agency's documentation and website. The section concludes with a discussion of how the commission seeks to promote among its members a positive return on their investment in the accreditation process and what college interviewees say about this return.

## **Process Components Designed for Quality Improvement**

This section presents findings about the process components SACS employs to support member institutions in achieving quality change and what perceptions the member institutions have about the commission's efforts. These efforts include how the commission uses quality enhancement plans (QEP), compliance and sanctions to assure quality and encourage improvement.

## Implementation of Quality Enhancement Plans (QEP)

The QEP is an institution-wide effort to enhance the quality of and/or environment for student learning that centers around one initiative aimed at addressing a need the college has identified. It is important to note that while the focus here is on quality improvement, institutions are still responsible for being compliant with the standards.

Commission documentation indicates that QEP teams should include representation from the entire campus including instruction, student services, finance and educational support. To begin their work on the QEP, SACS requires institutions to research best practices on which to ground their plans. QEPs must include what students will learn as a result of the initiative, an action plan with a timeline, an organizational structure for implementation, a description of resources necessary to support implementation and an evaluation plan indicating who will assess the success of the QEP.

The QEP offers colleges the opportunity to look forward to future improvements as opposed to compliance certification, which looks retrospectively at institutional actions. Institutions are allowed to identify a lead external evaluator to join the onsite review committee to evaluate the QEP. This person is usually someone with expertise related directly to the initiative the school has chosen.

*The QEP offers colleges the opportunity to look forward to future improvements as opposed to compliance certification, which looks retrospectively at institutional actions.*

SACS added the QEP to the accreditation process to “affirm the commitment of the commission to the enhancement of the quality of higher education and to the proposition that student learning is at the heart of the mission of all institutions of higher learning” (SACSCOC, 2007, p. 3). During interviews, SACS staff stressed the importance of faculty ownership and support to the success of QEPs. The commission also discussed the significance of college leadership to QEP success. While colleges carry out QEP work at the grass-roots level, SACS staff underscored the positive impact of having the person at the top talk about learning.

According to SACS staff, colleges report the following impacts of the QEP:

1. The QEP sets expectations that institutions will be competent in what they do and continuously work towards developing ways to improve what they do.
2. More presidents are talking about learning than before.
3. Faculty are directly involved and the institution is dealing directly with teaching and learning.
4. The QEP leads to massive buy-in across the campus.
5. Some of the QEP projects have been very innovative.
6. Institutions have stated that the QEP was one of the best things they ever did, generating a lot of excitement and ongoing thought about how they make what they do better.

College interviewees offered a range of perceptions about the effectiveness of the QEP. At College A, a small, suburban college, respondents found the QEP to be tangible and personal to their institution because each institution is able to choose its own focus and develop its own plan accordingly. This college believes the QEP has the most potential for making accreditation more meaningful especially to faculty, where there is a real opportunity for an increased sense of ownership. According to College A’s CEO “accreditation needs to be more than just checking items off on a list.”

At College C, a small rural college, the opinions differed between the accreditation liaison officer (ALO) and faculty member who were interviewed. The ALO described his experience as follows:

I started out thinking the requirement of a QEP was a just a total imposition on the institution and a huge expenditure. Our QEP budget is eating up a huge part of our budget and yet we've got to do it because it will come back to haunt us when have to do our fifth year report. However, we're seeing some positive results, but they're very slight. We only implemented a year ago. We're hoping that as time goes by to see more improvements in the assessment measures. I feel good about the fact that everybody—faculty, staff and administrators—is aware of what we mean by critical thinking and the need to develop assignments and assessment measures that will get at those higher order reasoning skills and really engage students.

However, the faculty interviewee stated that:

The QEP as a concept is not particularly useful to institutions. It expects an institution to add on something additional that meets fairly rigid criteria and spend a lot of money on it in a time when you don't necessarily have a lot of money to spend. There were things we would have liked to have done with the QEP that SACS wouldn't allow. For small institutions, the financial requirements of the QEP are fairly unreasonable. When we've looked at other QEPs, other schools were spending a lot less than we were. I saw some inconsistency.

The institutional interviewees also expressed concerns related to the quality of the QEPs. First, respondents at two of the three colleges raised concerns about how the quality of the QEPs themselves has varied and the appearance of an inconsistent standard for what makes a QEP acceptable. The chief executive officer (CEO) from College B observed a variance in quality from college to college and over time. The ALO at College C stated that in examining the QEPs posted on the SACS website he found that “the quality of them is so uneven,” which makes it difficult to know what will be acceptable. He further states, “The more recent ones are better, but if you go back two to three years, the quality gets worse and worse.”

The faculty respondent from College C also expressed a concern about not getting clear direction from SACS about what is acceptable:

They've been inconsistent about what they've asked for, what they've accepted. In the first couple of years they required a lot less than they did as the process went along. They got more and more demanding and still not very consistent about what they wanted. At a workshop at the SACS annual meeting, a presenter said “one of the problems with the QEP is that depending on who looks at it you can get an A on it or you can get a D on it.” There's a lack of consistency in terms of the visiting teams, in terms of the people who read the QEPs, which is sort of ironic because as an accrediting body they're supposed to be looking for consistency and they can't be consistent themselves in how they look at things, so I found that pretty discouraging.

Second, two respondents from College B expressed issues about the QEP as related to the actual quality achieved through its implementation. The CEO was particularly concerned that the QEP focuses on mid-level quality improvement (e.g., basic skills, critical thinking) and does not encourage institutions to aspire to excellence. The ALO expressed disappointment with the QEP as a strategy because there “doesn't seem to be a lot of creativity with most schools choosing the same few topics.”

In sum, while SACS staff expressed optimism about the function of the QEP based on the positive feedback they received from institutions, the institutions interviewed were not all convinced that the QEP is meeting its intended outcomes, raising issues related to the consistent evaluation of the QEPs and whether implementation of these plans drives true quality improvement.

## Approach to Compliance

All three of the colleges interviewed view compliance as either a tool that helps lead institutions to improvement or as inextricably linked to improvement, with both compliance and improvement being necessary parts of the process. However, college respondents expressed concerns related to whether or not accreditation truly focuses on improvement.

College B's CEO viewed the accreditation process as the occasional reporting of an institution's progress, but believed that self-assessment should be ongoing.

Accreditation is not the periodic study of oneself. It is a periodic report of what ought to be ongoing self awareness... We don't do a whole lot of work to get accredited, you do this work continually because it's how you maintain your focus as an institution and periodically you're asked to make reports on what is continually going on... We didn't invent a lot of new work for ourselves, we reported on our regular work, what we've been doing all along.

*"Accreditation is not the periodic study of oneself. It is a periodic report of what ought to be ongoing self awareness."*  
(SACS College B CEO)

This CEO continued by stressing that quality, not compliance with accreditation standards, is the goal and shared how he hopes that message has been made clear at his college.

Accreditation is not an end in itself... [At my college] I would hope you would never hear anyone say we have to do this because SACS says so. [Accreditation reports are] not an event in the life of the college, more an event in our relationship with SACS. What we hope to discover in the process is any gaps in understanding between the college and commission about the work the college is doing.

College B's ALO confirmed this view about the college's view on compliance:

We don't do [our work] for compliance reasons, compliance is a report we fill out. We have a culture of commitment versus compliance. [We don't use] the reason that we need to do it to comply with accreditation or complete a report. We are doing it based on our own mission and strategic plan, which is a healthier way to look at things....At times, part of the rationale used is to establish consistency with certain [SACS] requirements, but this is not a widespread practice and is not in any of our formative publications. Our goal is to move from a compliance mentality to a commitment mentality. We are doing these things because we are committed to do them as a matter of good practice in higher education not as a matter of compliance.

*"We are doing these things because we are committed to do them as a matter of good practice in higher education not as a matter of compliance."*  
(SACS College B ALO)

College B's faculty member noted a concern that the message of compliance and improvement may not be getting to enough of the faculty:

There is a compliance factor. It shouldn't be hidden. The message of emphasizing improvement over compliance has not gotten to a lot of faculty because much of the accreditation conversation occurs among administrators. Accreditation should be presented as a chance to show what we've been doing rather than needing to defend what we are.

*"The message of emphasizing improvement over compliance has not gotten to a lot of faculty because much of the accreditation conversation occurs among administrators."*  
(SACS College B Faculty)

College B's CEO shared his perspective as a member of review committees; he has observed that colleges often create reports in response to accreditation instead of creating systems for sustained improvement. As an evaluator, he asks colleges to show him the processes they have in place to maintain an improvement effort and how these systems work rather than a file or report that shows how the institution looked into an issue.

College B's CEO also discussed how he perceives the recent changes in SACS' accreditation process as shifting the focus from inputs to outputs, outcomes and processes. He summed it up with an example related to the college's library, stating that accreditation is now less about how many books are in the library and more about how students access the library and whether the library is meeting learners' needs. He continues by stating that:

Previously a much greater focus was placed on compliance with input standards such as the number of faculty, teaching loads, faculty with terminal degrees and volumes in the library, but the current model attends to student learning and performance. Conversations between community college and university faculty do not focus on these input variables, but on student outcomes such as how students are performing after transfer.

The faculty member from College B discussed the impact of this shift in focus from an instructor's perspective, saying that "Faculty are here to get students to learn and therefore can get frustrated when inappropriate data or paperwork are used to make decisions as to whether their school is OK or not." Finally, the ALO from College B noted that he believes SACS reinforces improvement by linking all accreditation inquiries back to the mission statement of the college and encourages colleges to use accreditation process to improve quality.

At College C, they see compliance and improvement going hand in hand. The CEO stated:

I don't know how you separate them. You're either in compliance or you're not. If you're not in compliance then you're in the report writing business. The onus is on the institution, it is not on the commission. The institution gives the evidence of how the assessment has led to improvements at the institution. Either you're using your evidence to improve things and you're in compliance or you're not.

*"The onus is on the institution, it is not on the commission."*  
(SACS College C CEO)

College C's ALO had a slightly different take, sharing how difficult it can be to get people to buy into the concept that the focus should be on improvement, not compliance.

[At the college there is a] necessity of constantly stressing that we're trying to improve student learning, not trying to satisfy SACS. The focus is on improvement, not compliance, but I think that deep down inside most people feel like it's really about compliance in practicality. It's focusing on

compliance because we have to comply to be reaffirmed and we have to be reaffirmed to keep our accreditation. So you're constantly fighting that battle.

However, the ALO went on to say that he was not convinced about whether SACS has truly changed to emphasize improvement. The ALO stated:

SACS has de-emphasized compliance verbally, but I'm not sure it has been effective in practice. They act more like its compliance and not improvement. They say improvement, they preach improvement, they want to see evidence of improvement, but the bottom line always seems to be compliance, compliance, compliance. There's a kind of irony involved there.

*"SACS has de-emphasized compliance verbally, but I'm not sure it has been effective in practice."*  
(SACS College C ALO)

College C's faculty member expressed similar concerns:

SACS has in some ways de-emphasized compliance and emphasized what they think is improvement, which is the QEP, but I'm not sure it really is improvement. They say they're looking at improvement but I'm not sure that they really are looking at improvement.

In sum, interviewee responses indicated that a college's own culture and leadership drive how an institution views the role of compliance in achieving quality more than any edict from SACS. Colleges stated their own philosophies about the balance between compliance and improvement as motivations behind accreditation, leaning more towards emphasizing improvement as the key and central motive. Interviewees suggested that college leadership sets the tone on campus, not the commission. However, less consensus existed among interviewees as to whether SACS has been successful in emphasizing improvement over compliance, with perceptions indicating that this emphasis is in words and not deeds.

## Use of Sanctions

Given the concerns in California about the number of institutions on sanction, the RP Group asked interviewees from the other two commissions about their views on the role of sanctions in their efforts to support quality improvement. We also asked why they thought there were so few institutions proportionately in their region on sanction. A SACS staff member expressed that the view of the commission is that:

The role of a sanction is to alert all the consumers that this institution has experienced considerable difficulty in demonstrating compliance with basic accreditation standards and obviously the implication is this may be affecting the quality of your education. First and foremost the sanction is an issue of quality assurance.

Interviews with commission representatives indicated that SACS' philosophy focuses on giving institutions every chance to address deficiencies before advancing to the leveling of a sanction. Commission staff emphasized the role of the focused report in giving colleges a chance to address concerns raised by the offsite review committee before the onsite review committee visits the campus—a measure that significantly reduces the number of colleges that advance to sanction. In this report, colleges have the opportunity to address the committee's concerns before the situation escalates to the need for sanctions.

Requiring an institution to respond to the onsite review committee report provides yet another opportunity for a college to improve before the commission makes its decision. The SACS staff member described it this way:

Having an offsite review, focused report, an onsite review and then having a chance to respond to the recommendations of the onsite committee before being considered for reaffirmation gives the institutions more opportunities to get it right before a decision is made. I think it's an extraordinarily good and effective procedure. Our philosophy is to give institutions a chance to come into compliance [and] through our procedures we have established those opportunities in fact. We have a philosophy of trying to work with our institutions, helping them to come into compliance and not wanting them to be in trouble.

*"We have a philosophy of trying to work with our institutions, helping them to come into compliance and not wanting them to be in trouble."*  
(SACS Staff)

The CEO and ALO from College B agreed that colleges are given clear indications of the problems they need to address with enough time to make improvements in order to avoid sanctions. The ALO also agreed with the CEO about the value of the focused report, viewing it as a second chance for colleges to respond to the recommendations from the offsite committee before the onsite review committee arrives to conduct their review. He believed that as a result of this opportunity "having long lists of recommendations is a thing of the past."

He continued on to say that the two-step process of the offsite and onsite reviews with the focused report in between is beneficial and not overly laborious. While SACS does not require colleges to complete the focused report, he was convinced that doing so is worth the time and effort to avoid extensive ongoing monitoring from the commission. He summed his opinion up by stating that the process provides institutions with an "opportunity to get professional feedback—and the more feedback the better—and a forum for mutual dialogue in a much more relaxed and professional environment."

Interviewees from SACS member colleges emphasized how seriously they take sanctions and view them as something to be avoided at all costs. College B's CEO described sanctions as embarrassing and a dreadful outcome. College B's faculty member shared that when his college was on sanctions many years ago, the institution became hyper-vigilant to ensure that such a negative result was never repeated again; the college has subsequently stayed off sanction.

College C's ALO said being on warning was "like having leprosy and that kind of stigma will sure enough make you work your butt off to rectify the situation." However, he pointed out that everyone's morale suffers as a result of sanctions, which can make it difficult to motivate people to do the work required to change this status.

College C's faculty interviewee felt that colleges take accreditation seriously because they truly fear SACS and have little doubt that the commission will take punitive action. She said:

[There is a] tremendous fear of SACS. People take it really, really seriously. People start preparing early. There's no doubt in anybody's mind that SACS is serious and that they'll punish you if you don't do what you're supposed to do.

Interviews with SACS staff indicated that the commission reserves sanctions for colleges with egregious non-compliance with core requirements. SACS staff pointed to the federal Department of Education's two-year rule as the impetus for the commission's need to help institutions meet standards:

Years ago there wasn't any rule about how many years [an institution] could stay on sanction. The DOE stepped in and created the [two-year] rule... [Now] institutions have to take care of their business in a much more timely way and clean things up more quickly than they used to have to. It's also pretty clear in our region that if you don't clearly demonstrate compliance you're liable to be dropped from accreditation.

As a result, SACS staff state that some institutions look at a sanction as a lever to get important changes done quickly in order to comply with the two-year rule.

In sum, college respondents indicated that they view sanctions as an extremely negative outcome and the commission stated that they view sanctions as a last resort reserved for institutions significantly out of compliance with their standards. Interviews suggest that institutions have ample opportunities to make corrections before sanctions are imposed and as a result, proportionately fewer colleges have this status in the SACS region.

## **Strategic Supports Designed for Quality Improvement**

This section presents findings focused on the support SACS offers colleges to help them achieve quality change and institutions' assessment of whether this support meets their needs. This section discusses: (1) how the commission develops its relationship with member colleges, (2) how it works to establish a consistent understanding of its standards and (3) to consistently apply these standards, (4) what training opportunities and other forms of institutional support it offers and (5) how it facilitates the sharing of effective practices among institutions.

### **Development of the Commission/College Relationship**

The examination of how the commission approaches building a relationship with its member colleges covers two areas including: (1) college contact with commission staff and (2) opportunities for colleges to provide feedback to the commission.

#### **College Interaction with Commission Staff**

On the whole, all three colleges found the commission's staff to be helpful and responsive. College B's ALO said his SACS liaison is always available to answer questions or address any problems. He described the commission staff as generally very responsive and essentially had no complaints or problems. The CEO from College B also said he had encountered no problems in contacting the commission president and that she had made herself available to visit colleges at their request. Colleges also noted that they regularly met with their assigned SACS staff member at the annual meeting, a training opportunity hosted by the commission.

Of note, College C's CEO attributed SACS' success to the commission's efforts to involve and nurture relationships with college presidents:

The conventional wisdom is that one reason SACS is seen as a strong region is because of the care and feeding of college presidents so they will participate in the process, so that they would be willing to chair a review committee, so they will go to the annual meeting, so presidents will provide resources to their institutions for what needs to be done. SACS is very consistent to inform presidents about matters and so I think that does make a difference.

At the same time, some respondents indicated that they viewed their relationship with SACS as more obligatory. College C's faculty member stated:

Schools send representatives to [SACS meetings] to sort of please SACS and if you're coming up for accreditation you send more people. It's almost like a duty you have to pay to SACS in order to make it through the process. Make sure they know who you are, make sure they know you're here, make sure they know you're taking this serious and that will help you get through the process.

College C's CEO echoed this sentiment, saying that "if SACS invites you to something, you really want to go."

*"If SACS invites you to something,  
you really want to go."  
(SACS College C CEO)*

In sum, while colleges generally expressed positive feelings about their interactions with commission staff, they stressed the importance of maintaining a good relationship with SACS as a key factor in their successful navigation of the accreditation process.

### **College Feedback to the Commission**

SACS colleges' satisfaction with their opportunity to provide feedback is mixed. College B's ALO spoke of surveys from SACS after any accreditation activity and being asked to provide feedback on SACS' website. He believed that the commission had provided a good channel of communication where there is a continuous flow of opportunities to communicate. As an example, he cited that after the commission changed its standards, SACS held open forums to introduce the standards and asked for feedback from the institutions.

The CEO from College C expressed her satisfaction with the different opportunities that exist to provide feedback to the commission, citing the built-in response system at each stage of the accreditation process, the forums held at the annual meeting where member institutions can provide input and the informal dialogue that occurs between CEOs and their assigned SACS staff member or the SACS president.

However, the ALO from College C expressed concerns about anonymity in giving feedback to the commission. He said that he would "suspect most people are careful in their response and don't want to be entirely honest just in case it comes back on you." He said he was very uncomfortable with providing feedback face-to-face or via email or telephone because he had been chastised by a SACS vice president when he was forthright in the past.

Respondents from College A also expressed a similar concern about being candid with the commission in addition to not feeling truly represented on the commission. While the CEO and ALO have access to the college's SACS staff liaison, they said they did not feel they had a real opportunity to provide input and feedback to the commission. They indicated that they were especially careful about providing negative input due to a fear of reprisal. They also said they felt

that they are not truly represented on the commission and that schools with representatives serving on the commission have more influence on SACS' actions, changes and decisions than colleges that do not.

In sum, while one college expressed satisfaction with its opportunity to provide feedback, respondents from the other two colleges shared concerns about providing candid feedback due to fear of retaliation from SACS.

## Establishment of a Consistent Understanding of Standards

One of the key areas of support that institutions receive from the commission is assistance with understanding how to meet the standards. Two of the three colleges expressed dissatisfaction with the help they received from SACS in this regard. It is important to note that these two colleges are ones that had been or were currently on sanction.

College A felt that SACS is still trying to figure out how specific or prescriptive to be with the new standards and the QEP. The ALO stated that SACS did not provide them with enough detailed information as to what the college needed to do to be removed from sanction. Instead, the commission only told the college what they had submitted was not satisfactory.

College C also did not find SACS to be particularly helpful in providing concrete information on where to focus their efforts. The ALO felt that a college's ability to remove itself from sanction depends heavily on the SACS liaison and described the process to appease the commission as a guessing game:

We felt like we didn't get much help from our liaison, so there is some possible unevenness there. It almost seems like this is a game and they knew the rules and we didn't and they were somewhat reluctant to tell us what the rules were. It was difficult to get real help beyond the superficial. If I'm being evaluated on something, I need to know exactly what it is that I'm being evaluated on and I need to be sure that the person who is doing this evaluation is willing to explain to me exactly what it is that I'm supposed to do and not only that but the person should give me feedback along the way which I felt was lacking. We were able to overcome the problem and get ourselves off sanction primarily through our own efforts and our own finding help from other institutions.

*"It almost seems like this is a game and they knew the rules and we didn't and they were somewhat reluctant to tell us what the rules were."*

(SACS College C ALO)

The faculty member from College C agreed with the lack of helpful information from SACS:

In the notification letter there was a two-sentence explanation of what it was we needed to do. It was not particularly clear. We had to ask repeatedly for clarification from our liaison as to what was expected from us...It seemed to me he was somewhat reluctant to state definitively what was being asked from us. It was a little bit vague and not always particularly helpful.

Of note, SACS staff reported that they had observed in their work with the colleges that large institutions want more flexibility and smaller institutions want more prescription, which is consistent with the findings here in that Colleges A and C are small institutions. One SACS staff member described the commission's intent in instituting broader, more general standards and the perceived results of this change:

We have moved to a thinking person's kind of standards and that brings with it some leeway. We find a pattern that our smaller institutions tend to want to be told what to do and our larger institutions that have more resources for thinking, creating and developing love the open space and really have turned onto this more broad-based type of standards. We are not terribly troubled by the fact that there is some ambiguity in the standards which makes it necessary for each different kind of institution to think pretty carefully about the best way to justify, document and build its case for compliance with the standards. We think that's a pretty good exercise, frankly. We don't want, however, to leave institutions floating on a raft, so to speak, so we have many helps for them in terms of interpretation of the standards: (1) resource manuals, (2) staff presentations at the annual meetings on core requirements, administrative and operational matters and faculty qualifications, for example, (3) Small College Initiative, (4) Summer Institute and (5) handbook for institutions seeking reaffirmation.

*"We find a pattern that our smaller institutions tend to want to be told what to do and our larger institutions that have more resources for thinking, creating and developing love the open space and really have turned onto this more broad-based type of standards."*  
(SACS Staff)

In sum, findings from this study appear to be consistent with the trend identified by SACS staff where large institutions want flexibility and small institutions want prescription.

## Consistent Application of Standards

The consistent application of the standards across institutions is of great importance to the meaningfulness and effectiveness of the accreditation process because institutions need to trust that they are being treated fairly and equally. It is each commission's responsibility to instill this trust in its member institutions by establishing processes and practices that demonstrate integrity in the treatment of all institutions. This section reports SACS' efforts to ensure consistency throughout their practices and how the member institutions assess the success of these efforts.

### **Alignment of Commission Expectations with the Understanding of Institutions and Evaluators**

According to commission staff, SACS institutional liaisons participate in the training of institutions and evaluators in an effort to ensure consistency between the expectations of the commission and the understanding of colleges and their review committees. According to one SACS staff member:

[SACS liaisons] participate in the training of chairs and committee members and those same staff hold sessions at the annual meeting in which they discuss ways of complying with the standards and the kind of documentation needed and those same staff accompany the visiting committees. With those three emphases, we make our best effort to create a consistent level of expectations.

According to the SACS staff member, another way SACS attempts to ensure consistent application of its standards is through the work of the Committees on Compliance and Reports (C&R) and the executive council of the commission. The work of these committees, as described earlier in the reaffirmation process, provides two levels of review at which an examination of consistency can occur.

First, C&R committee chairs meet when these committees annually convene at SACS' office for a day and a half to do their work. The SACS staff member stated that the chairs gather to discuss

any cases of concern and determine if their groups have been consistent in handling similar issues, which has been a great help to the commission.

Second, the SACS' *Handbook for Institutions Seeking Reaffirmation* indicates that the executive council aims to "ensure the integrity of the commission's review process" by "[monitoring] the consistency of actions recommended by the various C&R Committees before sending its recommendations to the SACSCOC board of trustees" (2008, p. 62). The SACS staff member interviewed echoed this role of the executive council in that it is specifically looking for consistency between and among similar issues. He indicated that they have from time to time overturned a decision of a C&R committee because it was inconsistent.

The SACS staff member stated that another factor that contributes to the consistent treatment of institutions is that the SACS review committees do not play a role in the decision about accreditation status. Both the offsite and onsite review committees forward only recommendations that relate directly to actions that the institution needs to take in order to meet standards. The review committees do not make any recommendations on the institution's accreditation status. That recommendation is made by the committees on compliance and reports and their recommendations are forwarded to the executive council, which makes the decision on status. The SACS staff member described the process as follows:

We no longer let our site committees recommend any sanctions...The onsite committee only makes recommendations relative to specific standards that the institution may not be in compliance with, but they don't make any decisions about accreditation [status] and they don't make any decisions about sanctions. That all comes from the C&R committees...When our C&R committee recommends a sanction, the only reason the executive council would change that is if a similar situation occurred with another institution and that C&R committee put that institution on probation, then they're going to change one of the two.

In sum, this research indicates that the commission implements four key efforts to help ensure consistency between its expectations and the understanding of institutions and the review committees: (1) SACS institutional liaisons participate in all training sessions of review committee chairs and members, (2) C&R committee chairs meet to discuss issues related to consistency, (3) the executive council reviews recommendations from C&R committees for consistency and (4) the review committees do not make any recommendations regarding institutions' accreditation status.

### **Consistency across Evaluation Teams**

College interviewees indicated that the results of a review depend heavily on the review committee and observed that what satisfactorily meets the standards to one team is not always acceptable to another team. College B's CEO stated that sometimes it can feel as though it comes down to the "luck of the draw." As the ALO from College C described it:

A lot depends on who the visiting team happens to be because they're not all the same. It should not be the case where one institution gets away with something that another doesn't. Colleges shouldn't think that if there had been a different team, it would have been a whole different story.

*"A lot depends on who the visiting team happens to be because they're not all the same."*  
(SACS College A ALO)

College interviewees stressed in particular how influential the review committee chairs are to the outcome of a visit. The CEOs from all three colleges emphasized how good committee leadership leads to good reviews and poor leadership leads to poor reviews. The ALO from College C characterized it this way:

A successful visit depends on two people: the SACS VP and the committee chair. The chair sets the tone for the visit and the expectations of the team. The SACS VP is the face of the committee with the institution and helps with quality control, making sure the committee doesn't wander off course.

*"A successful visit depends on two people: the SACS VP and the committee chair."*  
(SACS College C ALO)

When asked directly about the feeling of colleges about inconsistency across teams, the SACS staff member summed up the Commission's efforts as follows:

We from time to time do hear about the luck of the draw. Here are some of the things we do to minimize those concerns. First of all, we have chair training in which we review all the issues associated with chairing a committee, one of which is the consistent application of the standards. Secondly, [for SACS] staff members, one of their main purposes in attending the onsite visit of the committees is to contribute to the evenhandedness of how the standards are applied from committee to committee and from institution to institution. Third, committee members receive training related specifically to their role on the committee, such as institutional effectiveness and finances.

As described earlier, SACS has a Commission staff member on every site visit in an effort to ensure consistency across teams. According to the SACS staff member, the primary benefits of having this commission presence during the onsite visit are: (1) the staff member is the institution's SACS liaison, who has an established relationship with the institution, (2) the SACS liaisons are one of the Commission's vice presidents and have administrative authority on site, and (3) SACS liaisons are in the position where they can provide perspective to both review committees on site and the Commission after the visit. Specifically, the SACS liaison can share with the review committee what other committees have done in similar situations, and share with the Commission the patterns they observed during the visits they have attended. The SACS staff member described the role of the SACS liaison as such:

[The SACS liaison's] job is to facilitate the visit to make it mutually beneficial. We're out there when the team is out there. If the team members don't follow policy or if the institution has a problem of some kind, they talk to us and we as staff talk to the chair of the team and try to work it out to make sure everybody is being treated fairly and consistently. I think that's a big difference.

*"The SACS liaison's job is to facilitate the visit to make it mutually beneficial."*  
(SACS Staff)

College B's ALO described the impact of having a SACS VP on every visit as "tremendous" on achieving consistency across teams. He expressed that the SACS liaison and the review committee chair are responsible for pointing out to the team any issues related to consistency.

In sum, colleges interviewees indicated the key role the review committee chair plays in the onsite visit, and SACS staff mentioned the importance of the specialized training the review committee chairs and members regarding their specific roles. However, both the colleges and

SACS emphasized the significant impact of having the institution's SACS liaison present at every visit.

## Provision of Training and Other Institutional Supports

Interviews with SACS staff revealed four audiences the Commission targets for training: (1) institutions preparing for reaffirmation, (2) review committee members, (3) chairs of review committees, and (4) elected trustees. For the purposes of this report, the following section focuses on the training provided for institutions preparing for reaffirmation and the review committees chairs and members, commission-sponsored events, and other forms of support made available to institutions.

SACS holds training sessions for colleges and review committees at its annual meeting and the annual meetings of various professional organizations including those for institutional research and planning staff and business/finance officers.

One SACS staff member stated that their training has evolved from when they revised their standards and process in 2004. He notes that in the beginning, the training focused on process and understanding the standards. However, over time, the focus has shifted to the application of the process and the standards.

### Training for Institutions

According to a SACS VP, Commission staff conduct an Orientation Meeting for the institution's Leadership Team two years before an institution's reaffirmation. This orientation explores critical issues pertaining to the completion of the Compliance Certification and the development of the Quality Enhancement Plan and provides time to discuss timelines and other reaffirmation issues with the institution's assigned Commission staff member. This orientation is an all-day event that can include a panel of institutions that had recently gone through the process sharing their experience, what worked, and what did not work. There are also special sessions for specific institutional roles such as financial officers.

In addition, institutions can choose to have an advisory visit or conference call as a follow up to the Orientation Meeting after the institution has organized for its preparation of the Compliance Certification and the Quality Enhancement Plan. Institutions can also choose send an observer on a site visit to another school, usually the Accreditation Liaison Officer to help the institution prepare for their visit.

The SACS VP stated that when the Commission introduced its new standards, the orientations focused on an overview of the new process and terminology. However, he noted that these sessions now focus on how to organize for the review, what are the consequences of the reports prepared by institutions, what makes a compelling argument and a quality narrative, and how the leadership teams from the colleges can problem solve through the use of case studies. Now, the Commission tailors orientations to the institution being visited and uses case studies most relevant to the institution. Making the peer review a successful experience drives the orientation.

In reviewing SACS' website, the Commission provides several handbooks for institutions to help them prepare for the reaffirmation process. These handbooks are very detailed and cite examples of effective and unsuccessful responses. Key handbooks include the *Handbook for Institutions Seeking Reaffirmation* and the *QEP Handbook*, which covers in detail how to prepare the QEP and provides specific advice on both the process and the report including what the Onsite Review Committee will seek.

In addition, SACS has designed a series of templates to help institutions organize information in such a way that it aids the Offsite Review Committee in its evaluation of the extent of institutional compliance with the *Principles of Accreditation*. The Commission does not require use of these templates, and institutions are free to use another format that allows them to include information that is not included in the template. However, institutions are expected to provide a response that supports the determination of compliance.

According to the SACS staff member, while there is no specific assistance for colleges that have been sanctioned, the different programs offered by the Commission target specific problems that colleges on sanction have encountered such as financial management, governance, student learning assessment, data-driven decision making, distance education, and off-campus sites.

Finally, as mentioned earlier, every institution has a SACS staff liaison assigned to them for advice and questions. According to both the SACS staff member and college interviewees, SACS liaisons and institutions have frequent contact and visits between accreditation evaluations. The SACS interviewee noted that the Commission rotates its staff members among college assignments in an attempt for them to not become stale or biased.

### **Training for Evaluation Teams**

According to interviews with both SACS staff members and College B's ALO, the Commission provides two formal in-person training sessions for review committee chairs each year. These sessions follow a prepared curriculum and SACS staff liaisons attend to provide assistance. While there is no required in-person training for review committee members, sessions are held from time to time mostly focusing assessing specific areas within accreditation such as institutional effectiveness and student services. Review committee members more commonly use the following resources available on SACS' website: a video that provides an overview of the review process and their responsibilities; sessions held at the SACS annual meeting; and handbooks and other instructional materials that provide specific guidelines on how to write comments on an institution's compliance to each standard. In addition, some committee chairs may conduct an orientation with their committee members. All in-person trainings and resource materials focus on ensuring review committees have an understanding of the mission of the institution they are visited and how to approach evaluating the standards within the institution's mission. For example, committees visiting a theologically-based school need to be familiar with these types of institutions.

## Commission-Sponsored Training Events

In a review of the SACS website, SACS has three annual events it sponsors that are aimed at providing training and information sharing opportunities for both institutions and review committees.

***Annual Meeting.*** Every December, SACS hosts an annual meeting that is attended by over 4,000 people. At the meeting, institutions have the opportunity to attend trainings held by commission staff on accreditation requirements and presentations given by other institutions that share effective practices. Institutions typically send their accreditation leadership teams to help prepare for upcoming accreditation requirements. The focus of the annual meeting is also on training potential review committee members.

Presentations and workshops cover a very wide variety of topics. For example, the 2009 conference featured sessions on leadership in a changing environment, improving college access, exploring changing pedagogies, assessing student learning outcomes and examining accreditation practices in the South. In addition, a number of sessions were offered that helped illustrate various approaches to documenting compliance with the *Principles of Accreditation* and the quality enhancement plan.

***Institute on Quality Enhancement and Accreditation (Summer Institute).*** Every summer, SACS sponsors the three-day Institute on Quality Enhancement and Accreditation, which is also known as the Summer Institute. The focus is on best practices in higher education, quality enhancement and assessing learning outcomes and institutional effectiveness. In addition to plenary sessions, the institute features campus-based programs at a variety of institutions, small-group discussions and frequent networking opportunities.

The institute is open to anyone who is interested in best practices in higher education. It is designed to be of special interest to faculty, accreditation liaison officers, leadership teams, chief executive/academic officers and others who are interested in programs that foster institutional improvement. Institutions tend to send the team working on the QEP, therefore, the institute is attended mostly by faculty, institutional researchers, academic administrators and others involved in assessment. The major topics that were addressed at the 2009 institute included:

- Research on student achievement and motivation in postsecondary education
- Programs to enhance student learning through the implementation of quality enhancement initiatives
- Assessment resources and tools to improve institutional practices
- Student learning styles and changing instructional modalities in higher education
- Effective ways to assess performance in relation to institutional mission

***Small College Initiative.*** According to SACS staff members, the commission found that small colleges were having difficulty meeting some standards due to limited resources. In response, SACS began conducting one- and two-day workshops in 2006 to focus on impacted areas such as institutional effectiveness, finances, student learning assessment and distance learning.

## Other Training Support

Additional training support is available to institutions in the form of resources on the SACS website and the ongoing assessment of institutional needs.

***Resources Available on Website.*** In addition to the videos and handbooks mentioned earlier, SACS posts summaries of institutions' QEPs to their website to serve as a resource to institutions preparing to develop a QEP. Since these postings include contact information for the QEP coordinator, institutions are able to make direct contact with the institution about their QEP. In addition, all presentation handouts from both the annual meeting and summer institute are posted on the website.

***Assessment of Institutional Needs.*** Unique to other commissions, SACS employs a director of research and training. In an interview with the director, he described his position as one that uses research in the form of surveys to guide training, assess the effectiveness and efficiency of accreditation processes and collect data on issues that institutions and review committees are encountering to help target topics for training.

Institutions are surveyed to gauge their satisfaction with the peer review process. All training recipients are surveyed as to their satisfaction with the training. The director also performs content analysis of committee reports to examine consistency, especially regarding the threshold for whether or not an institution is in compliance.

In a conversation with the director, he shared an example of how this analysis of committee reports has impacted training. One issue discovered through the analysis relates to how a committee's judgment is affected by how well an institution has made their case for compliance; a weak or poorly written argument can lead to an evaluation that the institution is out of compliance. For example, during off site review, evaluators find that 96% of institutions are non-compliant with the faculty qualifications standard, but at the point of the commission's review, this number drops to 5%. These differences result from institutions failing to present compelling arguments in their compliance certification reports. Once a review is conducted onsite, evidence is usually found that the college is compliant. As a result, the commission is focusing its training on how to make a successful case for compliance.

Interviewees at all three colleges stated that they send a team to the annual meeting and summer institute every year. College A's CEO, ALO and faculty member all found both the annual meeting and summer institute very helpful in preparing for their reaffirmation and developing their QEP. Respondents from Colleges B and C described the annual meeting as:

- "Rewarding, useful and professional"
- "Very well organized and rich in content"
- "Got a lot out of it"
- "Valuable opportunity for the institutions"
- "Pretty amazing, part of the annual cycle of life, the annual ritual"

These same respondents had similar comments about the summer institute:

- “Power-packed, positive and a lot of information”
- “Learned a lot, came back fired up to get to work, worth the money”
- “Essential part of the SACS portfolio”

College C’s ALO summed up his impression of SACS’ educational offerings, stating “I’m a real believer in SACS’ professional development. They provide excellent training tools, no question about that. The availability and quality of their professional development is really important especially when an institution is gearing up for accreditation.”

In regards to the training received as a review committee member, two interviewees had direct experience and opinions about its value. The CEO from College A described her training as consisting of a conference call and a video and felt that she could have been better prepared, especially for her first onsite visit. However, she went on to say that she had a good first experience in spite of her lack of training due to working with a partner and having a good team leader.

The ALO from College B had experience serving as a review committee chair and stated that committee training is more personalized than it used to be, when members would watch a video that focused on protocol and was not substantive or insightful. In his role as chair, he made personal contact with each committee member, gave them examples that communicate expectations and attempted to establish a relationship with them. However, he admitted that the level of the interactivity of each chair with team members varies and that his approach may not be common among most chairs.

This same ALO identified an area he thought was missing from SACS trainings. In his work serving on review committees, he has found that most institutions are struggling with the authentic assessment of program learning outcomes. Specifically, he believes there needs to be more clarity on the expectations of the review committee, indicating a need to train review committees on how to assess program learning outcomes. He stated that SACS needs to help institutions more clearly understand what is acceptable because “right now it’s a matter of which reviewer is looking at it.”

*“SACS needs to help institutions more clearly understand what is acceptable because right now it’s a matter of which reviewer is looking at it.”*  
(SACS College B ALO)

In sum, all three colleges were generally positive about SACS’ professional development program. Three key efforts in this program include: (1) three SACS-sponsored events where colleges can receive training and share effective practices, (2) extensive written resources for institutions and review committees, (3) a dedicated staff position to collect information on institutions’ needs and experiences and apply that information directly and immediately to the commission’s training efforts.

## Facilitation of Effective Practices Sharing

SACS interviewees stated that they obtain information from other colleges about effective practices through both formal and informal means. Among the formal means are the commission-sponsored events described above (the annual meeting and summer institute), meetings of state or regional professional organizations and events sponsored by other institutions.

The SACS annual meeting and summer institute are a blend of commission training and best practices, where colleges present on their experiences, successes, challenges, practices and processes. College B's ALO and the CEO from College C cited the great value in having these venues to learn from other colleges. College C's CEO cited in particular a Small College Initiative workshop as meeting both needs. She saw this workshop as both a training opportunity designed to meet the needs of her institution and also a chance for networking with other institutions of a similar size. She was very appreciative of the invitation.

As is common practice throughout the country, most states and/or regions have established professional organizations for various positions that are common to most postsecondary institutions. Examples include organizations for board of trustee members, college CEOs, business/finance officers, instructional officers, faculty, student services officers and practitioners and researchers. College B's CEO cited the helpfulness of his staff attending events where accreditation is discussed from the perspective of specific professions.

Several interviewees cited examples of community colleges and universities in the region that have taken the initiative to provide professional development opportunities to other colleges by hosting events focused on accreditation. College B's ALO said that "certain institutions have stepped up to be leaders because they have concerns about accreditation." College B's CEO said that "these colleges are attempting to meet their own needs and just figure that they are not alone with these needs so they invite other colleges to participate and benefit." College A's CEO mentioned specifically that some workshops held by local universities had been very helpful in their accreditation efforts.

*"Certain institutions have stepped up to be leaders because they have concerns about accreditation."*  
(SACS College B ALO)

Interviewees also stated that they learn information informally by talking to colleagues or reading newspaper articles. The faculty member from College B offered one example of how he obtained information that was helpful to his college. His college's math department heard about a problem encountered by another college's math department related to faculty qualifications. College B began by investigating the problem further to understand its causes and then held discussions about steps they could take to ensure that they would not encounter the same problem during their upcoming reaffirmation process. As a result, they were able to avoid repeating the same mistake.

Interviewees were asked to compare the value of the training they receive from the commission and the information they learn from other institutions. Almost every interviewee said that both are essential to institutional success and could not value one over the other. For the most part,

interviewees saw the training from SACS as being more broad and general and the information obtained from other colleges as more specific and practical.

College A's CEO described SACS training as vital because it is "how you learn what SACS wants us to do," but also said that sharing information among colleges is equally vital because "you get specific examples and templates that show you what to do and how." College C's ALO described the SACS training as providing high-level, general information and the

*"SACS training provides high-level, general information, while the information from other colleges is nuts and bolts about how to do it, with detailed information on process, practice and experience."*  
(SACS College C ALO)

information from other colleges as providing the nuts and bolts about how to do it, with detailed information on process, practice and experience. He also found that other colleges were more honest and forthcoming in their sharing than the commission.

Another viewpoint shared by some interviewees is that while both commission training and information from other colleges are helpful, the information one gets from the commission is more reliable because the commission is the authority. College B's ALO

*The information one gets from the commission is more reliable because the commission is the authority.*  
(SACS College B ALO)

said that "information from other colleges is helpful, but they are not the authority." College C's CEO advised that while institutions frequently contact each other informally to "ask how they addressed something, SACS is the authority and you want to run any information you get from another college by SACS before you act on it."

The SACS staff member was also asked how the commission views the difference between information and training presented by the commission versus effective practices shared among colleges and what the ideal combination of the two would be. He was in agreement about the value and importance of both and echoed what college interviewees said:

We would support the philosophy that both [commission training and information sharing among the colleges] are very important to both [the colleges and the commission]. It's important that we hear from institutions too and that they

*"It's important that we hear from institutions too and that they hear from us."*  
(SACS staff)

hear from us. The commission staff bring to the table the inside experience of the visiting committee, the C&R committee, the executive council and the commission. The best practices from the institutions bring the nuts and bolts and lessons learned. We respect and appreciate the information from institutional presenters [at the annual meeting]. We have a huge educational program. Much of the presentations at the annual meeting are best practices sharing. We clearly think that the best practices aspect of our annual meeting is very important. We have a staff member who is full time at coordinating the development of the best practices sessions at the annual meeting as well as developing the program for the summer institute. We clearly are invested in helping our institutions to do well. We want them to do well.

There were two different instances when interviewees clearly valued one source over the other. College B's ALO favored the training from SACS, stating that "The broad overview of accreditation you get from the training provided by SACS is far superior to what you get from other institutions. The quality of the SACS training is excellent." At the same time, the faculty member from College B found the information she received from other institutions to be much more helpful, specifically for the QEP, saying that "Input from peers was much more helpful

than SACS. We're all in this together and people were willing to share what they had learned through the process.”

In sum, college interviewees indicated that they obtain information from other institutions through both formal and informal means. Most respondents, including the SACS staff member, found the information obtained from other colleges about effective practices to be as valuable as the training provided by SACS.

## Colleges' Return on Investment

As mentioned in the previous chapter, the RP Group was particularly interested in knowing if the staff and faculty members it interviewed believed that accreditation indeed ultimately activated quality improvement. One interview question invited respondents to think about their institution's return on investment as a performance measure for accreditation. More specifically respondents were asked to recall the amount of time, money and human resources invested in accreditation in relationship to what their institution garnered from the process.

Two colleges cited positive changes that resulted from their recent reaffirmation process. College C's CEO characterized the benefit to her college as follows:

[We experienced a] significant return on the investment put into the QEP in terms of time and resources. Faculty are working together across disciplines in ways they had not done here before. The assessment process was basically accelerated from almost nothing to warp speed almost overnight; it proves you can do it. [We have an] increased understanding of assessment and faculty are actively participating.

*“Faculty are working together across disciplines in what they had not done here before.”*

(SACS College C CEO)

College A's CEO indicated that accreditation forces colleges to get clear on their policies, practices, procedures and processes by taking the time to review them and look for areas in need of improvement. However, she also expressed doubt as to whether the time and effort invested in the reaffirmation process were worth the return, but conceded that she didn't know how to do it any differently. Similarly, the faculty member at the College C felt that her college “spent a lot of money and got very little from it.” College B is not included in this analysis because their most recent reaffirmation occurred more than five years ago.

In sum, while both colleges believed that their institution had benefitted as a result of the reaffirmation process, one was less convinced that the benefits realized were equal in value to the investment the institution made in time and money.

# Chapter 5: Western Association of Schools and Colleges – Accrediting Commission for Community and Junior Colleges

## Commission Description

The Accrediting Commission for Community and Junior Colleges accredits associate degree-granting institutions in California, Hawaii, the Territories of Guam and American Samoa, the Commonwealth of the Northern Mariana Islands, the Republic of Palau, the Federated States of Micronesia and the Republic of the Marshall Islands. ACCJC is one of three commissions under the corporate entity known as the Western Association of Schools and Colleges (WASC). The other two commissions are the Accrediting Commission for Senior Colleges and Universities (ACSCU), which accredits institutions offering the baccalaureate degree or above and is described in more detail below, and the Accrediting Commission for Schools that accredits K-12 institutions.

WASC is the only region in the country that has two separate commissions for two- and four-year institutions. According to ACCJC staff, when WASC was created in the 1960s, there was a perceived need to group different types of institutions, therefore, participants in this development process decided they wanted two separate commissions for two- and four-year institutions. Basically, the four-year institutions were concerned about the influx of the large number of two-year colleges that were being founded all over the state at that time. The four-year institutions felt that the common goals of these colleges would represent too large a block in the region and that community colleges would be better served in their own commission. As a result, it was the size and common goals of the California community college system that led to the creation of two separate commissions.

ACCJC's purpose statement outlines the commission's intent:

The purposes of the Commission shall be the evaluation of member institutions to assure the educational community, the general public and other organizations and agencies that an institution has clearly defined objectives appropriate to higher education; has established conditions under which their achievement can reasonably be expected; appears in fact to be accomplishing them substantially; is so organized, staffed and supported that it can be expected to continue to do so; and demonstrates that it meets Commission standards. The Commission encourages and supports institutional development and improvement through self-study and periodic evaluation by qualified peer professionals. (ACCJC, 2007)

## Accreditation Standards

In 2002, ACCJC adopted new standards, reducing the number from 10 to four in an effort to streamline and integrate the previous criteria for reaffirmation. In addition, the commission focused these standards on institutional dialogue, student learning outcomes assessment and institutional improvement. In the words of ACCJC:

The Standards emphasize dialogue as a means for an institution to come to a collective understanding of what it means to be learning-focused in the context of a particular institution's history and mission, of what the meaningful student learning outcomes at the program and degree level should be and on how institutional resources and processes might be structured to support the improvement of student learning. (ACCJC, 2010, p. 7)

The intent of the four integrated standards is to facilitate dialogue throughout a college focused on institutional effectiveness. The four standards are:

**Standard I: Institutional Mission and Effectiveness**

- Mission
- Improving Institutional Effectiveness

**Standard II: Student Learning Programs and Services**

- Instructional Programs
- Student Support Services
- Library and Learning Support Services

**Standard III: Resources**

- Human Resources
- Physical Resources
- Technology Resources
- Financial Resources

**Standard IV: Leadership and Governance**

- Decision-Making Roles and Processes
- Board and Administrative Organization

In addition to the standards, the commission also added in 2002 a set of six themes that “thread throughout the standards. These themes can provide guidance and structure to self-reflective dialogue and evaluation of institutional effectiveness” (ACCJC, 2010, p. 8). The six themes are:

1. Institutional Commitments
2. Student Learning Outcomes
3. Dialogue
4. Evaluation, Planning and Improvement
5. Organization
6. Institutional Integrity

Finally, along with the 2002 standards, the commission increased its emphasis on evidence, both from the perspective of requiring schools to produce evidence that they were meeting standards and from the perspective of the visiting teams to locate, review and evaluate said evidence as part of their determination as to whether a school is indeed meeting the standards. As stated by ACCJC, “Good evidence should provide the means for institutions or evaluators to make sound judgments about quality and future direction, but at the same time, it will probably stimulate further inquiry about institutional quality” (ACCJC, 2010, p. 13).

## Reaffirmation Process

ACCJC institutions follow a six-year cycle of continuous institutional review. These reviews include an annual report, an annual fiscal report, and a midterm report in the third year following a comprehensive review for reaffirmation determination. The comprehensive review process consists of three steps.

**Step 1 – Self-study.** Approximately 12 to 18 months before the scheduled reaffirmation visit, an institution begins to conduct a comprehensive self-study process that culminates in the preparation of an extensive report in which it demonstrates that it continues to address the eligibility requirements and meets or exceeds the standards of accreditation. Institutions are expected to describe how each standard is being met, an evaluation of whether these actions meet or exceed the standard and a planning agenda that covers how the institution will address any deficiencies identified in the evaluation. The self-study report is submitted to the commission no later than 60 days prior to the scheduled visit.

**Step 2 – Onsite Visit.** This period of self-study is followed by a three-day, onsite visit by a team of peer evaluators selected by the commission. The team is provided with the self-study report along with any additional documentation submitted by the institution to review in advance of the visit. Based on its findings, the team completes a detailed report that addresses whether or not the institution has met each standard and makes a confidential recommendation to the commission regarding the accreditation status of the institution. The team chair consolidates the various reports from the team members and submits the team’s report to the commission shortly after the visit. The institution’s assigned commission staff person works with the team chair to ensure that the report will be meaningful both to the institution and the commission. This report is then sent to the institution in order to allow institutions to correct any errors of fact and to the team members for their comment.

**Step 3 – Commission Action.** ACCJC’s commissioners meet twice a year in June and January to determine institutions’ accreditation status. They review the institution’s self-study and evaluation team’s report in addition to reports from the previous 12 to 18 years when making a decision about whether a college is compliance. The commissioners then communicate their decision to the institution in a formal letter before posting it to the commission’s website. This letter outlines for the institution what is expected next in their reaffirmation process such as the midterm report in three years or a follow-up report that could be due anywhere from six months to two years after the visit.

## Midterm Report

Three years following the evaluation team visit (at the midpoint in the six-year review cycle), ACCJC expects every institution to complete a midterm report. In this report, institutions must report on three areas:

1. Each of the recommendations of the evaluation team
2. The areas identified in the planning agenda of its self-study
3. Updates on substantive change approvals or pending proposals

The commission reviews midterm reports at its regularly scheduled meetings in January and June. Based on the midterm report, the commission can choose to take a number of actions ranging from continuing an institution's reaffirmation with no reports due until the next comprehensive review to requiring it to submit a follow-up report to placing a college on sanction.

## Evaluation Team Selection

According to ACCJC staff, each evaluation team is typically comprised of 10 to 12 members including the team chair and team assistant. The commission develops this group from a roster of experienced educators who have exhibited leadership and balanced judgment. The process the commission staff uses to compose evaluation teams is described in the *Team Evaluator Manual* (2010):

Typically, a team will have several faculty members, academic and student services administrators, a chief executive officer, a trustee, a business officer and individuals with expertise and/or experience in learning resources, distance/electronically mediated education and planning, research and evaluation." Each evaluator is chosen to bring perspective to the task, but not as a "representative" of an organizational constituency. Teams represent the Commission. Although team members may be selected because they have a specific expertise or hold a certain position, Commission staff are very emphatic that teams serve as representatives of the Commission during the visit.

Each team is selected to provide experienced, impartial professionals appropriate for the institution being evaluated and to address any special concerns the college may have expressed. Colleges may ask for special expertise, but they may not request specific individuals. Teams are reflective of the diversity of the college and the region. The size and complexity of the institution being evaluated will determine the number of persons on the team. The Commission seeks a balance of experienced and first-time evaluators and each team includes persons with experience at institutions similar to the college being evaluated. (p. 7)

## Colleges Studied

As described in the Methodology section, we interviewed staff and faculty from five colleges in the region. Since these colleges were assured of their confidentiality, they have been identified as College A, B, C, D and E throughout this section. College A is a large, suburban college, College B is a large, rural college, College C is a medium-sized, urban college, College D is a large, urban college and College E is a small, urban college. As previously mentioned, for the purposes of this study, a small college has less than 10,000 students, a medium-sized college enrolls

between 10,000 and 20,000 students and a large college enrolls over 20,000 students. Four of the colleges are located in California and one college is in Hawaii.

## Research Findings

The following section presents the research findings from the RP Group’s interviews with representatives from ACCJC and its member institutions as well as a focus group with California community college research and planning practitioners conducted at an RP Group conference in April 2010. These findings are grouped by process components that the commission implements and strategic supports it offers to promote quality improvement. As in previous chapters, perspectives from member colleges and focus group participants are woven within descriptions of these strategies as told by commission representatives and found in the agency’s documentation and website. The section concludes with a discussion of how the commission seeks to promote among its members a positive return on their investment in the accreditation process and what college interviewees say about this return.

### Process Components Designed for Quality Improvement

This section presents findings about the process components ACCJC employs to support member institutions in achieving quality improvement and what perceptions the member institutions have about the commission’s efforts. These efforts include how the commission uses compliance and sanctions to assure quality and encourage continuous improvement.

### Approach to Compliance

As regional accrediting bodies shift to promote quality improvement over compliance, the RP Group was especially interested in how ACCJC and its member institutions distinguished between compliance and improvement.

*“The purpose of accreditation is to improve, but it has to be taken seriously and that’s where compliance comes in as part of the process, but not the overarching issue.”*  
(ACCJC College A CEO)

According to commission staff, the commission has two primary functions: quality assurance and quality improvement. It is the former of these functions that is directly tied to and drives compliance. It is the commission’s responsibility to assure students and the public that institutions are meeting minimum standards of quality. Until institutions can demonstrate that they have in fact met the standards and are not just improving in their efforts to meet the standards, the focus will be on compliance over improvement. Quality improvement is about exceeding minimum standards, not just meeting them.

Respondents from Colleges A, B and D and the focus group all saw the value of and need for compliance within the accreditation process. The chief executive officer (CEO) from College A did not see compliance and improvement as separate because “the purpose of accreditation is to improve, but it has to be taken seriously and that’s where compliance comes in as part of the process, but not the overarching issue.”

The faculty member from College A also saw compliance as part of the process towards improvement, but stressed that colleges need time to make what equates to a culture shift. “It takes time to get people to buy into the intrinsic motivations behind self-assessment. The problem is that change takes time, but compliance has to be done overnight.”

The accreditation liaison officer (ALO) from College E made similar comments, noting that compliance-driven projects are inherent to accreditation such as program review and student learning outcomes. However, she stated that these activities are part of a larger effort to advance quality and effective programming.

An institutional research (IR) director from the focus group also emphasized that improvement takes time and pointed to the role of the college research office in helping the institution make the needed change to the culture:

I see compliance as part of the process to improvement. Yes, you have to have compliance, but you have to define what the improvement is for yourself within that framework. Of course everybody wants to improve, but they don't necessarily know how this process is going to do that. It takes time to change a culture on a campus. It's not something that happens overnight, but compliance has to happen overnight or else you're on warning and probation. First we have compliance and then it's our job in the research and planning office to help people to institute that culture so that we can show improvement can take place and how we get there. It's going to take a long time, but it's a part of that process.

*“Of course everybody wants to improve, but they don't necessarily know how this process is going to do that. It takes time to change a culture on a campus. It's not something that happens overnight, but compliance has to happen overnight or else you're on warning and probation.”*

(ACCJC IR Director)

Results from the commission's most recent external review echo the idea that change takes time. This external review is conducted every six years by ACCJC and is designed to be formative in nature, acknowledging the commission's successes and identifying areas in need of improvement. To conduct this review, an external review committee was created with membership that included college presidents, faculty, former ACCJC staff, a professor from a four-year university and a public member. This review included information gathered through surveys, focus groups and interviews with evaluation team chairs and members, staff at colleges that recently were visited, commission staff and a sample of other CEOs and ALOs.

In a report that was distributed to member institutions in September 2008, the external review committee recommended that the commission demonstrate more effectively its awareness and understanding that the changes required in the 2002 standards are part of an evolutionary process. Furthermore, the report stated that, depending on an institution's resources, these changes may necessitate capacity building before the standards can be effectively integrated at the institution.

While accepting that compliance is part of accreditation, three CEOs were dissatisfied with ACCJC's approach. The CEO from College D admitted that compliance is needed and that the commission must enforce it, but was not pleased with the commission's narrow application:

I don't think that left to their own devices, that we would be able to document what we do for improvement at [our] college and therefore some of the compliance responsibilities are good. It

focuses some schools to respond to the requirements. The commission should encourage colleges to improve. I don't know how much compliance really improves us all especially if its strict compliance with the attitude the commission has exhibited in the recent past in that you will do it our way.

The CEO from College C perceived ACCJC to be weak in the area of guiding schools through the process of understanding what actions it considers mandatory versus those it deems to be in the service of quality improvement. She felt that ACCJC should take more responsibility for clarifying these differences because of the significant financial and human resources invested in accreditation.

The CEO from College B cited that while he prefers a regional accreditor to the federal government, he viewed the commission as heavy-handed in how they are enforcing compliance:

Compliance is important because we know the feds have been trying to take over accreditation and that wouldn't be a good thing for us so we have to accept a certain amount of compliance-oriented stuff. I'd rather accept some of it than have it come down from the feds, which would be much more punitive and much more bureaucratic. The commission is more intrusive than I would like and becoming more prescriptive at times than I would like to see and a little more autocratic, but it's still better than the alternative, which would be the feds doing it.

*"The Commission is more intrusive than I would like and becoming more prescriptive at times than I would like to see and a little more autocratic, but it's still better than the alternative which would be the feds doing it."*

(ACCJC College B CEO)

A researcher from the focus group shared this concern about the federal government assuming control of accreditation "What it is that we want to avoid, which would be the greater cost, is for the USDE to get in the business of accreditation."

*"I am not sure many college staff fully understand the pressures under which ACCJC is operating from USDE."*

(ACCJC College A CEO)

However, it appears this awareness may not be widespread as expressed by the CEO from College A in that he was "not sure many college staff fully understand the pressures under which ACCJC is operating from USDE." The ALO from College B took issue with ACCJC's approach in communicating the disadvantages of federal accreditation:

Their stance has been we're trying to protect you from the wrath of the federal government. I understand the problem, but it's not being translated very well to the majority of colleges. The threat doesn't strike fear until something actually happens like it did with my college. Many people don't relate to the threat of the feds because they have no experience with them.

*"Many people don't relate to the threat of the feds because they have no experience with them."*

(ACCJC College B ALO)

The ALO from College B also expressed concern about institutions being so focused on compliance that they overlook improvement:

It's very difficult to achieve a balance between compliance and improvement because most people would say "just tell us what we're supposed to do and we'll do it." SLOs are a good example... The faculty's approach is "just tell me what I have to do to get you off my back" and that is the problem with this. I don't think institutions don't want to improve, but having somebody else tell you what you have to do and worrying about whether you're going to satisfy them and having this feeling I've

got to get these people off my back so I can do what I wanted to do in the first place just creates an impossible situation.

The faculty member from College A was also concerned about accreditation not having the right focus, “The self-study should be about celebrating what you do well and identifying what needs to improve and not just how we can best get through this nightmare.” The ALO and faculty member from College A felt that in spite of its best efforts, ACCJC has not succeeded in creating a culture in the region that focuses on quality improvement. The faculty member has heard commission staff saying that they want colleges to improve, but felt that the actions of the commission appear to emphasize compliance over improvement and process over outcomes. The ALO cited that the high proportion of institutions on sanction has created a culture of fear among California community colleges and that as a result the focus for most institutions is “on either getting off sanction or avoiding sanction and not on actual institutional improvement.” In addition, the CEO from College D expressed his concern that the emphasis on compliance was resulting in “too much process and not enough product.”

*“The self-study should be about celebrating what you do well and identifying what needs to improve and not just how we can best get through this nightmare.”*  
(ACCJC College A Faculty)

*“The focus for most institutions is on either getting off sanction or avoiding sanction and not on actual institutional improvement.”*

Respondents also expressed concerns about how the focus on compliance in the accreditation process may be detracting from institutions’ ability to address their own priorities. The ALO from College B said that accreditation has become so constant with lengthier annual reports, substantive change reports, midterm reports, follow-up reports and the self-study. As a result, colleges are:

...not devoting time to things that could improve the institution in ways you want to improve them. You have to lay things aside because you have to answer their concerns and not the ones you may believe are more important to do.

*“You have to lay things aside because you have to answer their concerns and not the ones you may believe are more important to do.”*  
(ACCJC College B ALO)

A senior administrator at the focus group was particularly concerned about how a focus on compliance can divert attention away from the classroom and work that directly impacts students:

We’re not having as many conversations about how to approach students who have come from poverty into the classroom, alternatives to lecturing or how to reach students more effectively in an online classroom. There’s only so much any of us can do be doing. We’ve done a lot of things that are very good: there’s more transparency, there’s much more understanding, there’s greater sophistication of the documentation and more data is used... but I’m not sure we have as much time for those conversations. We’re talking about how we’re going to get accredited and what is the team going to say, rather than teaching.

An IR director from the focus group cited how the emphasis on compliance at his institution has resulted in administrators who are so overloaded that they have shifted into survival mode in their approach to accreditation:

We switched from seriously looking at program review as improvement, with always some worry about compliance, to just focusing on compliance. Our administrators are so overloaded that they're just trying to comply. They have a lot more work to do and their attitude has shifted more towards survival and how can we get through this.

Another concern raised by interviewees was how an emphasis on compliance may result in a lack of quality. The faculty member from College A cited the specific instance of how student learning outcomes (SLOs) have been impacted:

The emphasis on compliance has been counterproductive with SLOs, which has resulted in a lack of meaning and quality assurance because the focus is on doing enough to comply with the 2012 mandate to be at proficiency not meaningful assessment of student learning.

*"The focus is on doing enough to comply with the 2012 mandate to be at proficiency, not meaningful assessment of student learning."*

The CEO from College B echoed these concerns about the requirement to be at the proficiency level with SLOs by 2012:

I would be shocked if it's of high quality because I think people are rushed to comply and I think very few colleges are really doing it well. They have SLOs but what they are, who knows. During a recent visit I chaired, I asked them how they knew these are good SLOs and they looked at me like I'm crazy to ask that question.

Finally, respondents emphasized that how compliance and improvement are viewed at the colleges depends on college leadership, not the commission's leadership. The commission's external review report also indicated that college leadership has the responsibility to demonstrate a commitment to continuous improvement. However, the report suggests that the high turnover in college leadership has created a lack of knowledge and understanding of accreditation, thus resulting in the message of continuous improvement not being effectively communicated on many campuses.

The faculty member from College A described the focus on quality improvement as an important leadership issue, noting that an institution's approach is likely to be influenced by how its leadership presents these concepts in light of organizational priorities, what particular spin they put on it and where they place the emphasis. According to this faculty member, placing the emphasis on compliance can be a hard sell with faculty that are interested in outcomes.

*"Placing the emphasis on compliance can be a hard sell with faculty that are interested in outcomes."*  
(ACCJC College A Faculty)

In different ways, the three interviewees from College E all commented that it is the responsibility of the institution to achieve quality enhancement, while understanding and adopting the standards. For example, the CEO argued:

If you accept the standards as markers of good practice, if you accept the idea that we need to constantly look at evidence...the boundary between good practice and compliance in my mind goes away. We don't accept it as a dichotomous situation.

The faculty member from College C felt ACCJC clearly articulated the distinction between compliance and improvement in its standards and also attested that it was the responsibility of

college leadership to facilitate continuous quality improvement, not simply compliance, on campus. An IR director from the focus group described how her campus has been changing and credited her new president:

It feels like people are [now] on board for improvement because they understand the planning process better. [Our new president] had a lot of knowledge [about planning] and was able to get buy-in from everybody. As a result, we are not feeling as under the gun for our upcoming accreditation visit.

The ALO from College E also shared how her college was beginning to grasp the value of exceeding the stated benchmarks of the standards:

There is that sense of [compliance] expectations or requirements. I think that people are now more thoughtful about why those things are asked of us and what we get out of doing it. People have come to appreciate the way in which the information we get out of an assessment process does really help us to develop, refine, to make more flexible whatever we're going for.

*"People have come to appreciate the way in which the information we get out of an assessment process does really help us to develop, refine, to make more flexible whatever we're going for."*

(ACCJC College E ALO)

In sum, college interviewees recognized compliance as a necessity within accreditation, but did not believe it should be the driving force behind institutional change. Some interviewees took issue with ACCJC's approach to enforcing compliance and were not convinced that the commission's actions match its words about accreditation being about improvement. Interviewees also expressed concern about how the perceived focus on compliance is diverting college's attention away priorities such as students. Both the commission and the colleges highlighted the importance of college leadership in creating a culture of improvement at an institution, but they also both noted that with the frequent turnover in administrative leadership it is difficult for institutions to achieve and sustain this kind of culture.

## Use of Sanctions

As discussed in the preface, the number of ACCJC institutions that are or have been on sanction in the last few years has been of chief concern to the California community colleges. Every January, the commission prepares a report about the institutions with this status. In the most recent report from January 2010, a total of 19 institutions were on sanction, representing 14% of the total 135 institutions in the region. According to this report, the most common reasons for institutions being on sanction were insufficient planning/program review and not meeting recommendations from previous visits. In the prior year's report, 24 institutions had this status, representing 18% of all member colleges.

In the interview with commission staff, they reported that 13 presidents told them that being on sanction provided the leverage they needed to motivate change on their campuses. The ALO from College B saw how sanctions can be used as a lever that can lead to significant change in a short amount of time, "something that you can use to push people to do things they don't necessarily want to do." An IR director from the focus group echoed the power of a sanction to institute change quickly:

We were on warning and then we got off warning and actually the warning gave us the impetus to really begin our full planning process. It helped us to have the teeth behind the reason that we needed to institute some of the things we were already planning to do to integrate our planning, SLOs and program review into a fully integrated process, but I don't think we would have been able to do it as effectively and as quickly as we did if we weren't on warning.

*"I don't think we would have been able to do it as effectively and as quickly as we did if we weren't on warning."*  
(ACCJC College IR Director)

Another IR director from the focus group described the benefit of the sanction for his college as such:

Going on warning produced some very good returns because it started to force people to actually acknowledge each other's value on a collegial level, a common ground and that's what I've been hearing is probably the best result.

While respondents in this study appear to agree with the potential benefit of a sanction, a couple of CEOs did cite how it can also have negative effects. The CEO from College B cited having been the victim of personal attacks as a result of the sanction his college received, but still credited it for putting his college into crisis mode and helping them clarify their direction and efforts. As a result, "we became a tighter team and we're in a much better place now."

College C felt quite anxious over the public admonishment of being placed on a sanction. To curb stakeholders' angst, the college's administrators met frequently with different groups to openly communicate with various constituents. One particular strategy in these meetings was to illuminate just how many other colleges were simultaneously on sanction around the state, therefore, diminishing the actual weight of the reprimand. The faculty member frankly admitted:

Being able to see how many colleges around the state were put on sanction helped us communicate to our constituents that things weren't as bad as they appeared. Being able to say nearly half the colleges in the system are on some level of sanction put people at ease. Now they don't feel we were singled out or we were unique. They just started wondering... what's wrong with the commission?

*"Being able to see how many colleges around the state were put on sanction helped us communicate to our constituents that things weren't as bad as they appeared."*

It is important to note here that this faculty member's perception about "nearly half" of California community colleges being on sanction is not correct, however, this perception most likely stems from a report that was distributed in 2008 that documented which institutions had been placed on sanction between 2004 and 2008. This analysis resulted in a total of 40 California community colleges having received a sanction in this four-year time span.

The CEO from College D said that being on sanction "absolutely hurts a college and has a tremendous impact." He went on to say that people at his college "are angry because we know from performance and anecdotal data that we're a good college, so it doesn't make sense that we are on warning." College C's CEO concurred in that her institution's reputation was jeopardized as a result of being on sanction and that key stakeholders, like students and parents, were alarmed about the impact on issues such as transfer coursework and admission to four-year institutions.

In sum, interviewees see how a sanction can be beneficial to a college's efforts to institute significant change in a short time. At the same time, several respondents acknowledged the possible negative impacts of receiving this status such as reducing staff morale and marring the public's perception of the college. One key finding is how colleges may be referring to the large number of institutions on sanction to negate the negative impact of this status, stressing how sanctions were a common experience.

## **Strategic Supports Designed for Quality Improvement**

This section presents findings focused on the support ACCJC offers colleges to help them achieve quality change and institutions' assessment of whether this support meets their needs. This section discusses: (1) how the commission develops its relationship with member colleges, (2) how it works to establish a consistent understanding of its standards and (3) to consistently apply these standards, (4) what training opportunities and other forms of institutional support it offers and (5) how it facilitates the sharing of effective practices among institutions.

### **Development of the Commission/College Relationship**

The examination of the commission's relationship with member colleges covers three areas: (1) interactions with commission staff, (2) the opportunity for colleges to provide feedback to the commission and (3) help from the commission in interpreting and meeting standards.

#### **College Interaction with Commission Staff**

The majority of colleges found commission staff to be helpful especially in resolving problems and interpreting reports and recommendations. College A's ALO believed the staff's "intent is to be as helpful as possible." College B's CEO described ACCJC staff as very responsive and said that he has "never had any problem interacting with commission staff." College E's respondents stated that although they did not contact the commission routinely for guidance, they found the staff to be very helpful and responsive when they did.

College B's ALO expressed mixed feelings about the commission staff in that they were available for consultation, but the information they provided has not always been very helpful, "I feel free to ask for advice from commission staff, but they're very careful about what they say to be as non-committal as possible."

College C was less than satisfied with their initial interactions with the commission staff. The ALO and faculty member both noted that ACCJC staff did not immediately reach out to initiate discourse with the college regarding its sanction, resulting in the college feeling frustrated and ignored. However, these same two respondents also acknowledged that once the college made contact with the commission, the staff ultimately provided very detailed and thorough feedback that helped put the college on a clear path to removing itself from sanction.

While the relationships that individual colleges have been able to establish with commission staff are positive in nature, the relationship between the commission and the California community colleges appears to be less than positive. The CEO from College A described this relationship as "not a healthy situation at all."

## College Feedback to the Commission

As mentioned earlier, the commission solicits feedback through its external review from those who have participated in the accreditation process, including perspectives from both the institutions being evaluated and the review evaluation teams. However, information found in ACCJC's last external review indicates that California community colleges were not necessarily well represented as the majority of survey respondents were from institutions in Hawaii and the Pacific islands. Of the 65 evaluation team members who completed the survey, 49 (or 75%) had visited a college in Hawaii or the Pacific. Of the 25 respondents from visited colleges, 22 (or 88%) were from colleges in Hawaii or the Pacific. Overall, of the 90 total survey respondents, only 19 (or 21%) were from California community colleges, which is significantly disproportionate with the percentage that the 112 California community colleges represent of two-year institutions in the region. Comparable information about the interview and focus group participants was not included in the report.

The CEOs from College A, B and E stated that the commission had provided them with sufficient opportunities for feedback and expressed that they had never felt any retribution for providing negative input. However, respondents from other colleges did not share similar views of satisfaction with the commission's acceptance of feedback from the field. They described the commission as not being receptive to constructive criticism and not encouraging feedback from the colleges and expressed concerns about retaliation.

*"The Commission is so fixed on its processes that it doesn't listen to the colleges."*  
(ACCJC College D CEO)

The CEO from College D believed that "the commission is so fixed on its processes that it doesn't listen" to the colleges. The ALO from College B stated, "I don't think they encourage [feedback]." Interviewees from College C uniformly believed that ACCJC has made it clear that feedback, whether solicited or not, is unappreciated and at times even rejected. The CEO expressly warned of retaliation in response to providing negative input:

People are very fearful to give open, honest feedback for fear of retribution. There is a perception that if you go on record with criticism, that it could come back to haunt you. Very few campuses are going on the record with concerns. If the [commission] can hold you hostage for one to two years while you are on sanction, no I don't think that's sufficient.

*"People are very fearful to give open, honest feedback for fear of retribution. There is a perception that if you go on record with criticism, that it could come back to haunt you."*  
(ACCJC College C CEO)

While ACCJC staff reported that they collect feedback from institutions that undergo the reaffirmation process, interviews with college representatives indicate some variance in the awareness and experiences of respondents related to these efforts. For example, the ALO from College E noted that institutions have the opportunity to provide feedback in the annual reports they submit to the commission. However, the ALO from College B stated she did not recall receiving anything after her college's recent visit asking how the visit went or what recommendations they would make.

This ALO continued by stating that while she found the commission staff to be defensive, she recognized

*"It's difficult to approach [the commission] because they've already been attacked so much. They are quite defensive."*  
(ACCJC College B ALO)

that this defensiveness is not unexpected given the reception they often receive from the field, “It’s difficult to approach [the commission] because they’ve already been attacked so much. They are quite defensive. The mistake the commission has made is not really being open to listen to criticism.” The ALO and faculty member from College C agreed with this suggestion that the commission is defensive, but highlighted that since ACCJC is a federally-recognized organization it needs to be more transparent. The ALO specifically commented on the discrepancy between the transparency required of the colleges by the commission and the actual transparency of the commission itself:

I’ve never seen that feedback summarized and posted on the website. One of the things I suggested anonymously was that just as colleges are required to post accreditation reports, so should the commission post their own evaluation report from the United States Department of Education, but it doesn’t happen.

*“...Just as colleges are required to post accreditation reports, so should the commission post their own evaluation report from the United States Department of Education.”*  
(ACCJC College C ALO)

The ALO from College B also expressed concern about the commission not recognizing the context in which colleges have to operate and that colleges are accountable to other authorities besides the commission. She recounted her experience at several meetings where she had heard commission staff comment that they “[do] not care about the California Community College Chancellor’s Office and what it requires.” She continued, saying “It is unrealistic for them to pretend like the CCCCO doesn’t exist. Seems like you have to acknowledge that we do have to answer to others besides them.”

Another opinion expressed by respondents focused on the limitations of how ACCJC solicits feedback from institutions given that it targets its requests for input to college CEOs and ALOs. College A’s faculty member and College E’s ALO did not know how institutions could provide feedback to the commission and believed that the forum for input needs to be broader and more inclusive. College A’s ALO agreed that there should be more opportunities for others beside CEOs and ALOs to provide feedback and that the commission makes it difficult for institutions to provide input outside their currently prescribed interactions.

In sum, interviews surfaced a difference in opinion between respondents from ACCJC and the colleges about the commission’s reception of feedback. Commission staff reported that they are open to feedback from the colleges and are frequently collecting data in this regard. While the CEOs appeared to be satisfied with their direct connection to the commission allowing them the opportunity to provide feedback, others expressed the perception that the commission’s staff are defensive and that ACCJC is not listening to its member institutions.

## Establishment of a Consistent Understanding of Standards

One of the key areas of support that institutions receive from the commission is assistance with understanding how to meet the standards. The commission’s external review recognizes that there is a great deal of variation in the way institutions understand and internalize the accreditation standards and the success they have had in implementing the standards. In this study, respondents from two of the colleges that had been or were currently on sanction were not completely satisfied with the help they received from the commission staff to understand what

needed to be done to be removed from sanction. The CEO from College D said that the description in the letter from the commission about what it would take to remove the college from warning was not clear. The ALO at College B felt that commission staff members were helpful in one regard, but not another:

ACCJC was pretty helpful in regards to recommendations related to the board, but not particularly helpful with recommendations related to planning. When we asked the commission [to recommend] models of planning processes ...their response is that they don't give out those things. You have to do that [search] on your own. I understand their position, but it's still not very helpful...The commission could help a lot more by being more clear about what they want and providing the kind of models that have been used at schools that are doing well. You can't stop people from copying the model, but maybe once they have they will feel freer as they continue to look at what they're doing to make them better and better. It's the hardest thing, the balance between the impulse to want to improve and am I doing it the right way.

*"The commission could help a lot more by being more clear about what they want and providing the kind of models that have been used at schools that are doing well."*  
(ACCJC College B ALO)

Commission staff reported working with colleges that are on sanction to help them understand what is needed to meet the standards and remove themselves from this status. The CEO from College C contended that ACCJC has a considerable role to play in facilitating its member institutions' straightforward return to good standing:

If they can place you on sanction, then they should be held accountable to give you as much information and clarity as possible and a roadmap to make your way back, because there were some clear red flags or signs that led them to that sanction.

However, College C interviewees expressed dissatisfaction with the relationship between the commission's standards and the recommendations made by the evaluation team. They felt that the recommendations they received in their last visit were perplexing and sometimes had little to do with the standards. As a result, it was challenging for the college to distinguish between how to meet the standards and how to enact a quality improvement practice.

In sum, interviews with college representatives indicated that institutions require assistance in understanding what the commission's standards mean and what needs to be done to meet these standards. While this need has been acknowledged by ACCJC, college responses imply that the success of its efforts is variable.

## Consistent Application of the Standards

As stated in prior chapters, the consistent application of standards across institutions is of great importance to the meaningfulness and effectiveness of the accreditation process because institutions need to trust that they are being treated fairly and equally. It is each commission's responsibility to instill this trust in its member institutions by establishing processes and practices that demonstrate integrity in the treatment of all institutions. A description of the commission's efforts to consistently apply its standards and college perceptions of these supports follows.

## Alignment of Commission Expectations with the Understanding of Institutions and Evaluators

In 2007, the commission developed a rubric to assist institutions, evaluation teams and the commission in their assessment of compliance with standards related to institutional effectiveness. The *Rubric for Evaluating Institutional Effectiveness* attempted to “provide some common language that can be used to describe a college’s status vis-à-vis full adherence to the standards, as well as to provide a development framework for understanding each institution’s actions toward achieving full compliance with the standards” (ACCJC, 2009). The rubric was developed in response to the need identified by the commission, institutions and evaluation teams for a tool that would help codify how well a college has done in meeting the standards. In addition, the rubric is designed to help pinpoint what additional steps an institution needs to take in order to reach full compliance.

The rubric focuses on three areas in particular: program review, institutional planning and student learning outcomes. These areas were identified by the commission as those where institutions consistently need additional guidance. Within each of these areas, the rubric identifies four levels of achievement, including awareness, development, proficiency and sustainable quality improvement, and outlines characteristics that describe what one might see at an institution for each level. ACCJC expects all institutions to be at the sustainable quality improvement level for program review and institutional planning. However, given the recent implementation of student learning outcomes, the commission has given institutions until 2012 to reach a level of proficiency in that area.

Interviewees validated the usefulness of these rubrics in their efforts to meet the related standards and appreciated the clear and established expectations that the rubrics reinforce between the commission, institutions and evaluation teams. The ALO at College A described the rubrics as “The first thing I ever got from [ACCJC] where I thought that’s what [they’re] looking at, the first time it was more about improvement than compliance.” As a result, she felt that other parts of the standards could also benefit from similar rubrics. However, College D’s CEO suggested that more instruction may be needed on how the rubrics connect back to the standards and how to use the rubrics and standards in concert, “Most people don’t understand the overlay of the rubrics to the standards.”

While interviews with colleges indicated that the commission has achieved some success with these rubrics, college respondents raised two issues that point to a disconnect between the commission’s expectations and what it communicates to institutions and evaluation teams. First relates to a lack of clarity on what the commission considers a satisfactory meeting of the standards. The commission’s external report identified a need for an increased understanding among both colleges and evaluation teams about what meets standards. Interviewees suggested that both colleges and evaluation teams want more guidance from the commission on what constitutes good practice.

The ALO from College B indicated that in her experience as both an ALO and an evaluation team member that she found that teams are at times unclear about what warrants a sanction and what the distinction is between being placed on warning or probation:

What was concerning was it's a matter of degree and it's hard to know what the tipping point is. How bad do you have to be to get a sanction? How good do you have to be to avoid a recommendation or sanction?

*"How bad do you have to be to get a sanction? How good do you have to be to avoid a recommendation or sanction?"*  
(ACCJC College B ALO)

College B's CEO observed that teams were not always clear on how to apply the standards and determine whether a college's approach was satisfactory. In describing his most recent accreditation experience where the team had judged the college's planning process as not meeting the standard, "The planning wasn't as bad as [the team] had thought it was. They didn't really understand the way we did it. The problem is the [problems] weren't really major, they were minor, but they were perceived as major."

In regards to institutions' understanding, college responses suggest that some may not understand what they need to do to meet standards. A researcher from the focus group described his experience as an evaluation team member where in his efforts to understand a college's planning process, he ended up explaining and diagramming their own process to them, "It's deeply disturbing when they don't even know their own planning process."

Second, interviewees expressed two concerns related to a perception that the commission did not value the work or judgment of the evaluation teams. First, interviewees commented that the commission makes changes to team reports and second, that the commission will take more severe action than what was recommended by the evaluation team. The CEOs from Colleges A, B and D all had served as evaluation team chairs and all reported having experienced one or both of these results.

College A's CEO reported his awareness of team reports that had been altered by the commission where recommendations had been added without consultation with the entire team. A senior administrator attending the focus group had the same awareness, stating that "there's a lot of horror stories of teams' reports being changed [by the commission]." Both College A's CEO and ALO recalled that in the past, team chairs read carefully worded recommendations at the conclusion of the visit; however, the commission now asks chairs to avoid this practice and instead to indicate only the areas their recommendations will most likely target. They both believed that this change stemmed from the commission's interest in revising recommendations if so desired, which was not a common practice previously.

In interviews with commission representatives, ACCJC staff clearly refuted the assertion that the agency has ever changed team reports.

College B's CEO, who has chaired several evaluation teams, shared that the commission's action on accreditation status was in every case more severe than what his last three teams recommended, "We didn't recommend warning for any of the three colleges, but all three ended up being on warning. That's just disturbing that the commission goes beyond what the team recommends and even adding recommendations that the team didn't make." The CEO from College D recounted a similar situation from the side of the institution

*"We didn't recommend warning for any of the three colleges, but all three ended up being on warning. That's just disturbing that the commission goes beyond what the team recommends."*  
(ACCJC College B CEO)

being reviewed. Staff at his college had spoken with members of its visiting team who were shocked that the college had been placed on warning because that is not what they recommended. College C's president corroborated this information saying, "...the visiting team and the commission are not always on same page. We feel the commission is so much harsher."

Another possible rationale behind the misalignment between the commission and the evaluation team is that ACCJC's decisions are based on more than the self-study and evaluation team report. The CEO from College D commented that he had been told by ACCJC staff that "there are many other things the commission takes into account when making a determination [of accreditation status]" but that these other factors are not made clear to or shared with the colleges or the teams.

This CEO also believed that much of the commission's and visiting team's actions are based on perceptions and relationships as opposed to facts and reality, which can result in inconsistent outcomes for institutions. He cited the school's reputation and the relationship between the team chair and college CEO as examples of these factors. College A's CEO summed up these concerns about the commission as follows:

If the commission is not going to invest itself in the teams, then why create the teams? Why doesn't the commission do the evaluation themselves? The team is the one who spent the time at the college getting to know the college, so why not trust their assessment?

In sum, interviews with college respondents surfaced issues of trust between the commission and the evaluation teams based on the perception that the commission finds it necessary to alter teams' reports. Also, while stakeholders involved in accreditation know well that an evaluation team's recommendation on a college's status is to be kept confidential, interviewee comments indicate otherwise, particularly once the commission's action becomes known.

### **Consistency across Evaluation Teams**

Commission staff reported that they strongly believe the training they provide to evaluation team chairs and members helps to establish consistency across these teams. However, the colleges interviewed through this study did not agree completely with this assessment and raised several concerns related to the consistency across teams.

The commission's external review also pointed to the difficulty the commission has experienced in recent times in getting people to serve on evaluation teams. The external review committee pointed to issues with the amount of work required, not having enough time to conduct a comprehensive visit in three days and the reluctance of some team members to hold colleges accountable for meeting the standards. Based on these findings, the committee recommended to the commission that it work more closely with institutions to facilitate college constituents' willingness to serve on evaluation teams.

Interviewees from this study echoed these results, commonly citing problems related to the selection and quality of team members. Regarding the selection of team members, interviewees identified the following problems. First, three interviewees

*"When teams are understaffed it spreads everybody thinner and maybe not getting the best view of the college."  
(ACCJC College B CEO)*

(College A's CEO and ALO and an IR director) lamented that team members are often added at the last minute. These last minute additions are ill prepared and disorganized. Second, an IR director from the focus group stated that too many new members on a review team creates an inexperienced team. "We had five or six new people who were on their first visit so that was a challenge because the learning curve was so steep [for all of us]." Finally, College B's CEO stated that too few members on the team also creates dysfunction, "When teams are understaffed it spreads everybody thinner and maybe not getting the best view of the college."

Interviewees connected these selection problems to the difficulty the commission may be having in recruiting qualified team members. In the opinion of College D's CEO, "[The commission] can't get people to volunteer because people don't want to go on these crazy things and spend all that time." College D's CEO went on to point to the ways that the evaluation teams are assembled by the commission as another source for the problems with consistency:

You're not going to get that kind of consistency [across teams] when you put teams together the way [the commission] does. We're finding team chairs that have to get their own team members because there are not enough people in the pool that are willing, ready and qualified to do the work.

*"We're finding team chairs that have to get their own team members because there are not enough people in the pool that are willing, ready and qualified to do the work."*  
(ACCJC College D CEO)

College A's CEO appreciated the opportunity to evaluate the team members as a team committee chair in order to help ensure that poor performers are not invited to serve on a team again. However, interviewees, including this CEO, expressed concerns about the quality and qualifications of the team members, including the following:

- Team chairs who are ineffective
  - "The most critical factor is the team chair. If the team chair is weak it becomes a disaster for a lot of folks." (Focus Group IR director)
  - "Good team leadership leads to good reviews and poor leadership leads to poor reviews." (College A ALO)
- Team members who are not qualified
  - "I was amazed at the [team members] that didn't understand [the process]. There are far too many team members that really don't know what they're doing." (College D CEO)
- Team members who are poor writers
  - "Some of them are terrible writers inherently." (College D CEO)
- Team members who do not know how to look at data and perform critical analysis
- Team members who are biased and bring their own agenda
  - "Some have already formed an opinion." (College D CEO)
- Team members who expect the college to provide them with "goodies"

One other issue related to the consistency across teams raised by interviewees relates to differences among teams in how they determine whether a college is meeting standards. The faculty member from College A felt that “what satisfactorily meets the standards to one team is not satisfactory to another team.” An IR director from the focus group shared his concern about how different teams may view the documentation from the college differently:

Some teams pay more attention to [the documentation]. Some colleges put together a better document. Sometimes it’s about how good you are at putting together the document... if someone does a better piece of documentation, sometimes there’s not as much follow up. They may not be meeting [the standard], but they do a great job of putting together a report.

In sum, the external review and the interviewees in this study agreed with two key issues related to ensuring consistency across evaluation teams: how the commission selects and constructs teams and the quality and integrity that team members bring to the process. Both also pointed to the need for more comprehensive training to help improve consistency and an examination of the intensive work and visit length required of evaluation teams.

## **Provision of Training and Other Institutional Supports**

ACCJC has three primary audiences for its training program: (1) institutions preparing for reaffirmation, (2) evaluation team chairs and (3) evaluation team members. To reach these audiences, the commission engages in four types of activities: (1) commission staff conduct specialized training workshops, (2) the commission sponsors conferences where ACCJC staff often make presentations, (3) commission staff present at professional organizations’ meetings and (4) ACCJC staff make in-person visits to an institution at the college’s request. For the purposes of this report, we provide detailed descriptions of the first three activities, primarily taken from ACCJC’s documentation and website.

### **Training for Institutions**

The commission invites institutions to participate in a one-day workshop presented by ACCJC staff approximately 18 to 24 months before the scheduled onsite review. This workshop focuses on reviewing the standards, the importance of evidence and how to write the self-study report.

### **Training for Review Evaluation Teams**

ACCJC requires all team chairs to attend team chair training each time they serve. Chairs are also required to attend the team evaluator workshops with their teams. Seemingly unique to ACCJC, the commission requires entire teams to attend the team training together prior to each visit. Team training workshops review the standards, the importance of evidence, what evidence to look for and how to write the team’s report, including how to produce clear and meaningful recommendations.

### **Commission-Sponsored Training Events**

ACCJC sponsors and/or presents at a variety of different conferences and workshops. In addition to commission staff who present at these various events, ACCJC also invites colleges to

participate in keynote speeches, presentations and workshops to demonstrate how they have improved and to feature their best practices.

***Academic Resource Conference.*** The Academic Resource Conference (ARC) is co-sponsored by ACCJC and the Accrediting Commission for Senior Colleges and Universities (ACSCU). This conference is “dedicated to supporting institutions of higher education as they define their challenges, develop solutions and demonstrate results” (ACSCU, 2010). The sessions consist of both workshops presented by commission staff and presentations where institutions share effective practices.

***Retreats on the Assessment of Student Learning.*** Also co-sponsored by ACCJC and ACSCU, these retreats aim to support both two- and four-year colleges in their efforts to become more learning-centered and develop their expertise in assessment of student learning, both within programs and across the campus. These retreats are offered at both beginning and intermediate levels to meet the needs of institutions that are in the early stages of implementing assessment and those that have related systems in place, but need additional help advancing to the next level.

***Community College League of California Annual Convention.*** ACCJC conducts three workshops each year at this convention for: (1) new and experienced accreditation liaison officers, (2) executive leadership from member institutions and (3) those involved in program review and institutional planning efforts.

***Strengthening Student Success Conference.*** ACCJC co-sponsors this conference each year with the Research and Planning Group for California Community Colleges. At this conference, institutions problem-solve issues related to the learning and assessment cycle, share effective student success efforts and provide information about key issues that shape student learning, assessment and success.

***Professional Organizations.*** Within each state, several professional organizations exist that bring together personnel across colleges that hold similar positions. Commission staff present at the meetings of many of these professional organizations. Recent presentations include: the California Community College (CCC) Chief Executive Officers Association, CCC Chief Instructional and Student Services Officers, CCC Trustees Association, CCC Chief Financial and Business Officers Association, the Association of California Community College Administrators, the Academic Senate for California Community Colleges, Pacific Coast Secondary Council and the University of Hawaii’s Council of Chancellors.

## **Other Training Support**

In addition to the training available to institutions and evaluation teams, ACCJC has created a series of guides and manuals designed to provide assistance. First is the *Guide to Evaluating Institutions*, which was designed to be used by both institutions preparing a self study report and evaluation teams. The *Guide* states that it “is predicated on the belief that both institutional members and outside evaluators use the standards to assess the institution and that they should be using the same tools to conduct that assessment” (ACCJC, 2010, p. 5).

The majority of the information in the *Guide* consists of a series of sample questions for each standard that help identify how to respond to the standard and a list of possible evidence that

could be used to demonstrate the standard is being met. Evaluators are instructed by the commission to use these questions to help guide them in their analysis of standard compliance. Institutions are not required to answer these questions, as there are many other questions that institutions could use in their self examination. At the same time, it may be in an institution's best interest to at least examine them in the development of the self-study, since evaluators will most likely be looking for the answers to these questions.

Another resource available to institutions preparing to conduct a self study is the *Self-study Manual*. This manual contains guidelines for how an institution can organize for self study, the required format and forms and information about preparing for the visit.

The *Team Evaluator Manual* is designed to be used by persons serving as members of evaluation teams visiting institutions as part of the reaffirmation process. It is designed to be used as a companion piece to the *Guide to Evaluating Institutions*. This manual provides information about the role of the evaluation team in the reaffirmation process; what is expected of both the team chair and team members; an outline of activities before, during and after the visit; the format of the team's report and various forms used by the team in the evaluation process.

Interviewees' reviews of the training provided by ACCJC are presented below based on whether the comment related to institutional training, team training or training provided by ACCJC in general.

**Training for Institutions.** The CEOs from Colleges B and D both found the training their colleges received in preparation for their reaffirmation to be helpful. The CEO from College B believed the ACCJC president does a "good job of framing accreditation" in these trainings. The CEO from College D felt that "the commission does a reasonable job of allowing opportunities for people to be trained."

The *Guide to Evaluating Institutions* was cited by a researcher at the focus group as a very useful tool for both colleges and evaluation teams. However, based on his personal experience as an evaluator, it appeared to him that many colleges are not using the guide in their preparation of the self-study. It was not clear to him if colleges realize how this resource could be helpful or that the evaluation team will be using this guide in their review of the self-study:

Colleges overlook the value of [the guide]. When colleges don't understand that a team is going to use [the guide], they fail to address the standards and they go off on their own tangents. The stuff is all out there in print and that's the beauty of it. [The guide] provides the framework for the self-study. If you get that, at least you've complied.

"Colleges overlook the value of [the guide]. When colleges don't understand that a team is going to use [the guide], they fail to address the standards and they go off on their own tangents."  
(ACCJC College IR Director)

A senior administrator at the focus group expressed serious concern about the timing of institutional training and whether it occurred too late to be of maximum use to institutions. He further highlighted that if the commission expects colleges to view accreditation as an ongoing process, they must do so as well in advance and make adjustments to how, when and how often they interact with colleges:

The self-study preparation workshop that ACCJC offers roughly 12 months before the report has to be in almost final draft form is useless [because] it's too late. That's the old model, the model before there was a rubric with four levels of proficiency. If you aren't there by the time they do that workshop, [it's] too late. ACCJC needs to change the way it interacts with the colleges. If it's going to say you needed to be doing this stuff for the past six years, it doesn't help to tell you that 12 months before [the visit]. Of course the assumption is that we all know that and we've built accreditation into our planning and accountability processes, but then they have to start acting that way too and dealing with us differently.

***Training for Evaluation Teams.*** The CEOs from Colleges A and B, who both have experience as evaluation team chairs, appreciated that the commission requires teams to train together before each visit. College B's CEO especially appreciated his attendance at the team chair training, "It's good [the commission] requires that before you chair a team that you go through a training. It's been helpful to me personally."

*"It's good [the commission] requires that before you chair a team that you go through a training. It's been helpful to me personally."*  
(ACCJC College B CEO)

One interesting trend found among participants in the focus group is that those who had only served on one evaluation team and thus had only attended one team training session found the training to be helpful. However, participants who had served on several teams and thus had had attended several trainings found the trainings to be much less helpful.

Two respondents raised two issues that were specific to the team training. First, an IR director from the focus group felt that before their first visit, team members are not adequately warned or prepared for the intensity and volume of the work required on a visit, "It was really intense and I don't think anyone had warned us about that part of it. They don't tell you that part in the training." Second, College D's CEO raised concerns about the true value and adequacy of the training as it exists in its current format:

You can't train somebody for two days and think they understand accreditation. Even if they have had experience at their own college, they're often confused. The training has to be very rigorous and it's not. The people have to be dedicated to really understanding how to view data, how to ask the right questions [and] how to not bring their personal prejudices.

*"You can't train somebody for two days and think they understand accreditation."*  
(ACCJC College D CEO)

***General Impressions of the Training.*** When commenting about the training provided by the commission in general, several interviewees were consistently negative in their assessment. Respondents from College A and the focus group used the following descriptors in reference to ACCJC training:

- "Waste of time" (College A CEO)
- "Horrible," "nothing but talking heads," "very confusing and mystifying process and kind of unrealistic too" (College A ALO)
- "Not effective or engaging" (College A faculty)
- "Little value" (College C ALO)

- “Massive PowerPoint slide presentation that’s almost too fast to learn anything” (Focus group IR director)

Interviewees’ specific complaints fall into three key areas: inconsistent information, lack of applicable training and absence of quality assurance. Interviewees from Colleges A and B reported having received conflicting information from commission staff who presented at different events. In the words of College A’s CEO: “the rules change from one training to another.”

The CEO and ALO from College B both cited issues with inconsistent information provided in the training on student learning outcomes (SLOs). The CEO was concerned about what is deemed as satisfactory being a “moving target” with changing definitions and examples:

SLO training has not been consistent. You go to one training and get one story and go to another and get a different story. People come back confused...It seems like [the commission is] always changing. It’s one thing to be a work in progress and to admit that, but they change things and don’t tell us why and don’t give good explanations... It unsettles people when they get different information on the same topic that is contradictory at times.

*“SLO training has not been consistent. You go to one training and get one story and go to another and get a different story.”*  
(ACCJC College B CEO)

The College B ALO was concerned about the commission being uncertain about what it deems as meeting the standards related to SLOs:

I’ve been through 15 different trainings on SLOs and all of them have been different and the commission’s advice is different. It’s like they’re saying ‘I don’t know what I want, but I know what I don’t want. I’ll know what I want when I see it, but if I see something better the next day that will be the new thing I’ll want.’ The concept of authentic assessment is a perfect example because they were giving a different definition seemingly every other week. The thing that is frustrating is that is a moving target.

*“It’s like they’re saying ‘I don’t know what I want, but I know what I don’t want. I’ll know what I want when I see it, but if I see something better the next day that will be the new thing I’ll want.’”*  
(ACCJC College B ALO)

Interviewees from Colleges A and B and the focus group felt that the training provided to both colleges and evaluators lacks depth and a focus on application. They believed this training emphasizes rules and policies, but not how to apply them in the review of the self-study and during the visit.

The ALOs at Colleges A and C and the CEO at College B criticized ACCJC for not providing real life examples in their training sessions. The ALO from College A believed that the absence of these examples makes it nearly impossible to interpret the standards. This interviewee indicated that evaluators and colleges are often asking questions like, “What rises to a level of a recommendation and what doesn’t?” and “How do I know if something is good or bad?”

College A’s ALO believed that there is a lack of consistent guidelines and, as a result, what is judged to be acceptable is “all over the board.” The CEO from College B went on to share that he did not understand why the commission does not provide institutions with examples from other regions with more experience with SLOs:

I don't understand why the commission is not sharing information from other areas of the country who have been doing SLOs longer. If they are far advanced, why aren't we looking at them and what they've done and try to learn from them instead of the models the commission gives us which I don't think are really very good.

*"I don't understand why the commission is not sharing information from other areas of the country who have been doing SLOs longer."*

The ALO from College C commented on how commission staff presenters are vague and do not answer questions from an informed perspective:

When people have asked very specific questions, ACCJC's response is "Well, we're not here to give you examples. You have to figure it out." [This] alienates virtually everybody, but particularly faculty. It is like saying, "I can't tell you what it is, but I'll let you know when I see it."

Two faculty members believed that the problem with the training is in the pedagogy used. The faculty member from College A stated that the commission is "not modeling an active learning style, which is emphasized through the standards, ironically." He

*"[The commission] is not modeling an active learning style, which is emphasized through the standards, ironically."*  
(ACCJC College A Faculty)

took issue with the commission not using a learner-centered pedagogy, especially when it expects the colleges it accredits to be learning-centered institutions. A faculty member in attendance at the focus group expressed great dissatisfaction and disappointment with the chosen delivery method of the ACCJC training:

As a faculty member, I find both the training that ACCJC does at a college to prepare them, along with the team training, is the worst way to teach people to do what it is that they're supposed to do. It's what we as faculty tell other faculty we shouldn't be doing, which is sitting you down and lecturing at you straight with a PowerPoint presentation that is going way too fast and not getting into any kind of depth. People have to dig down deeper to get to what needs to be done and that doesn't get done in the trainings because the trainings are just 'here's how you do it,' but the question of how you do it doesn't meet up with what you really have to do.

Commission staff reported that they conduct evaluations at the end of each training session and make revisions as needed, continually trying to improve, but the interviewees here did not entirely agree. The ALO from College A reported how she has repeatedly provided feedback on how the training could be improved, but has seen little to no change over the past several years. Specifically, she noted that the same PowerPoint and exercises have been used for the past six years. The ALO from College C concurred in that she had not obtained much value from attending commission-sponsored training and that she had attended only at the suggestion of ACCJC staff:

[Commission staff] strongly encouraged us to attend training sessions and workshops this year. I'll be quite honest, I have been an accreditation liaison officer for seven years and there has been nothing new in these workshops. We went because they asked us to, but there wasn't anything new. I attended training because I was told to do so by the commission.

*"I have been an accreditation liaison officer for seven years and there has been nothing new in these workshops."*  
(ACCJC College C ALO)

The CEO from College D expressed uncertainty about the commission’s efforts to assure the quality of the training they provide, “I don’t think they do a good job of checking their own results. They don’t validate what they’ve done.” The CEO from College B expressed similar concerns regarding the SLO training in particular, “I’m not sure there is quality assurance in the SLO training. It depends on who is presenting and what their perspective is.”

*“I’m not sure there is quality assurance in the SLO training. It depends on who is presenting and what their perspective is.”*  
(ACCJC College B CEO)

One area where colleges and the commission staff are in agreement is that the best training for ACCJC colleges that are preparing for a visit is to have college staff serve on an evaluation team. Through this experience, people learn what visiting teams are looking for, what not to do, how to look at their own colleges from an outside perspective and get ideas of what standard of satisfaction is being applied.

Commission staff reported that several evaluation team chairs had shared with them how valuable the team experience was in helping their own institutions prepare for accreditation. In the words of the commission staff, “The sheer experience of being on an evaluation team is a training opportunity for college employees.”

*“The sheer experience of being on an evaluation team is a training opportunity for college employees.”*  
(ACCJC staff)

College A’s CEO described the team experience as the “single most valuable professional development” and the faculty member said it was the “most useful professional development to see what’s happening at other institutions.” The CEO from College D felt the team experience provided the opportunity to “learn more about your own college and your own systems by participating.” As a result, both these CEOs said that they encourage their staff to serve on evaluation teams.

The CEO from College E pointed to how his performance as a team chair has improved over time as a result of his continued experience chairing teams:

The first team I chaired under the new standards and the new issues of evidence wasn’t good, whereas now I have it down to a science. I’ve since adopted a methodology after team training to train my team. I didn’t do this in my first job as chair under the new standards. I think I’ve done a better job than I did five years ago. There’s an evolution to it.

Several focus group participants felt that they learned much more from the actual experience of their first time as an evaluator than from the training they attended prior. They particularly highlighted how they benefitted from the experience of the team chair and other experienced team members. One IR director from the focus group put it this way:

I figured that [going on a visit] would be the best training for me to be able to help my campus. The training was good, but really the visit was where I learning more and it was mainly because of the team chair and training from people who had experience.

In sum, commission staff report receiving positive feedback from the evaluations they conduct at various training sessions and the CEOs from two institutions found the training their institutions

received to be helpful. However, most other respondents were less than satisfied. In particular, respondents took issue with the timing, quality, consistency and applicability of the training provided by the commission. One area where the commission and the colleges are in agreement is how valuable the experience of serving on an evaluation team can be to an institution whose staff have participated.

## Facilitation of Effective Practices Sharing

Interviewees reported that they obtain information from other colleges about effective practices through both formal, or planned, and informal, or ad hoc, means. Formal means cited by respondents included the commission-sponsored events described above, meetings of state professional organizations, regular meetings among institutions and events sponsored by other organizations. Informal means referenced included leveraging college staff's personal relationships with staff at other institutions, directly contacting other institutions or reviewing their websites and monitoring relevant listservs.

Commission staff reported that they often ask institutions to present at conferences like the Academic Resource Conference (ARC) to share their successes related to accreditation, such as how they got themselves removed from a sanction. In addition, retreats on student learning and assessment are designed to "provide information about effective practices that aligns with WASC accreditation expectations" (ACSCU, 2010). However, this research suggests that the two commission-sponsored events specifically designed to facilitate the sharing of effective practices directly related to accreditation are not well attended by the California community colleges.

The ARC appears to be comparable to the annual meetings that the accrediting commissions in other regions hold every year. Again, while ACCJC member institutions are invited and welcome, interviews indicated that few California community colleges actually attend. None of the interviewees from any of the colleges mentioned this conference. In examining documents on the ACCJC website, the commission reported the actual attendance at the 2009 conference. Out of the 112 California community colleges, only 15 (or 13%) were in attendance. However, these 15 colleges did represent over half of the 24 ACCJC institutions in attendance. In addition, only nine of these 24 colleges gave presentations at the conference, which in examining the overall conference program, represents a fairly small proportion of all the presentations. The report did not mention how many of the nine presenting institutions were California community colleges (ACCJC, Summer 2009).

The majority of interviewees either had not heard of or had not sent any staff to retreats on student learning and assessment (College A's CEO, ALO and faculty; College B's CEO and ALO). Yet, among those who had attended, most found the retreat to be very helpful. The CEO of College D said that the team from his college thought it was "a very worthy exercise," but commented that there was not much interaction with the four-year schools that were in attendance. The commission's report on the attendance of ACCJC colleges at these retreats in 2009 appears to coincide with the interview findings. At the level one retreat, 16 California community colleges participated and at the level two retreat, 12 California community colleges attended. It is not clear from the website whether there was any overlap in attendance between the two retreats (ACCJC, Spring 2010).

Given the results from the interviews and the commission's reports on attendance at these two events, it is not surprising that one interviewee, College A's faculty member, suggested that ACCJC host an annual event to provide colleges with the opportunity to dialogue with each other about institutional policies and practices that do and do not work in relation to accreditation.

The CEO at College B summed up these views on the need for a formal, well-attended venue in California where institutions can focus on accreditation:

There is not a free flow of information on [accreditation]. There's not a lot of formal interaction on [accreditation] issues. We pretty much go our own way. Each one of us does it ourselves. I don't think that's to the good because then it becomes idiosyncratic to that institution. We should be sharing to come up with common understanding of what we're doing.

*"There's not a lot of formal interaction on [accreditation] issues. We pretty much go our own way."*  
(ACCJC College B CEO)

It is important to note that there are two commission-sponsored events that are well attended by CCC staff, the Strengthening Student Success Conference and the Community College League of California annual convention. However, accreditation is not the central focus at either of these events, as it is at ARC and the retreats. At these meetings, accreditation is only one of many areas being covered each year.

Due to their geographic isolation, the ACCJC institutions in Hawaii rely more on regular meetings amongst themselves. For example, at the senior administrator level, College E collaborates with its neighboring institutions once a month to address topics such as assessment, underprepared students, faculty and staff unions and student admission requirements. Although all these topics are not necessarily related to accreditation, they are essential to the overall planning and effectiveness of the college, which is linked directly to accreditation. Also of note is that the community colleges in Hawaii are part of the same system as the University of Hawaii, which means the staff from these colleges often meet with their peers from the university. The ALO from College E believed that the increased interaction and shared effective practices between the two- and four-year institutions in Hawaii have proven essential for enhancing student success.

As is common practice throughout the country, the California community colleges have established professional organizations for various positions found at most colleges. Examples include organizations for board of trustee members, college CEOs, business/finance officers, instructional officers, faculty, student services officers and practitioners and researchers. The ALOs from Colleges A and B, who both serve as their colleges' chief instructional officers, cited receiving information about accreditation at the meetings of the organization for chief instructional officers.

One of the events sponsored by other organizations mentioned is an annual accreditation institute held by the Academic Senate for California Community Colleges. The faculty member from College A found the institute to be helpful in looking at accreditation from an instructor's perspective and helping to empower faculty to be more involved, but felt that the emphasis was on how to comply not how to improve.

Interviews with college respondents indicate that much of the information-sharing among ACCJC colleges is very informal, with people using their personal relationships and associations to get information related to accreditation. The faculty member from College A cited talking to faculty he knew at other institutions and doing research on different college websites. The ALO reported monitoring the RP Group listserv because effective practices are sometimes shared. She specifically stated that while the "good practices" that are floated via this listserv might not impact her everyday work, she views the listserv as helping her overall practice and keeping her up to speed with effective practices statewide.

Another example of an informal approach to obtaining information on effective practices is seen at College C. Staff from a neighboring institution, which was successful in removing itself from sanction, were invited to visit the campus and share their insights. All three College C respondents were tremendously grateful for this peer college's introspection and open communication.

One issue that contributes to the limited sharing of effective practices in California is the unique geographic composition of the WASC region. All the other regional commissions accredit institutions from numerous states, but the WASC region includes only the states of California and Hawaii and the islands of the Pacific. Interviewees with prior experience outside California are quick to comment on how ACCJC is insulated or "inbred" because the California community colleges comprise an overwhelming majority of the institutions in the region. The CEO and ALO from College A both expressed that this insulation and lack of cross-fertilization may work to colleges' detriment because they are not regularly exposed to practices and processes in other states, as occurs in other regions. The ALO from College B compared her experience implementing student learning outcomes here in California with her experience at institutions outside California, "We in California always pretend like nothing has ever been done before. We might have been better off if we had adapted some of the models from some of the other [regions] right away."

*"We might have been better off if we had adapted some of the models from some of the other [regions] right away."*  
(ACCJC College B ALO)

Interviewees were asked to compare the value of the training they receive from the commission and the information they learn from other institutions. Almost every interviewee valued the information they received from other institutions over the training provided by the commission. The CEO and ALO from College A both felt that the effective practices they learned from other colleges were most useful, with the CEO stating "the value comes from other colleges, not from the commission."

The faculty member from College A echoed this sentiment in stating that the most helpful information his institution received from other colleges was how to present evidence and formulate planning agendas within the self-study. However, he also found some value in the training from ACCJC and believes that colleges need both. He placed his assessment in the context of compliance and improvement:

*"In order to know what is needed for compliance, colleges need training from ACCJC... In order to obtain insights into how to improve institutional effectiveness, institutions need to learn about effective practices from other colleges."*  
(ACCJC College A Faculty)

In order to know what is needed for compliance, colleges need training from ACCJC because it is the commission that trains and sends the evaluation teams to the colleges and it is the commission that makes the final decision on an institution's accreditation status. In order to obtain insights into how to improve institutional effectiveness, institutions need to learn about effective practices from other colleges.

However, in spite of seeing the value of both sources, he still described the information from other colleges as more valuable.

The ALO from College B also saw that there was a place for both the ACCJC training and the sharing of effective practices among colleges. She described the information from other colleges as concrete and inductive and the information from the commission as abstract and deductive. She shared the following example, "ACCJC institutions will share practical examples with each other, such as how to get off warning, while the commission will not directly advise institutions, only providing an abstract description of what it should be."

In sum, interviewees from California community colleges reported relying on informal means and organizations other than the Commission to learn about effective practices at other institutions. Venues such as ARC exist and are open to the California community colleges, but for unknown reasons, are not well attended by these colleges. Interviewees also indicated that the geographic composition of the WASC region may be placing the California community colleges at a disadvantage in not being exposed to the practices of colleges in other states that have to meet the same accreditation standards. As a result, the California community colleges tend only to look at themselves because the other colleges in the region are at least half an ocean away.

## Colleges' Return on Investment

Several respondents saw the accreditation process as having the power to bolster quality-driven initiatives and institute broad change. The CEO from College A said that accreditation was "extremely helpful" in that he was able to use it to press for increased efforts regarding SLOs, developing a process that links planning and budgeting and emphasizing the need for evidence-based decision-making at the college. He cited accreditation as having "allowed us to make headway in these areas." Another senior administrator from the focus group also found accreditation to be helpful in this regard, "Many times it's been a nice stick to get people to change. The self-studies do lead to a lot of positive changes."

*"Many times [accreditation has] been a nice stick to get people to change. The self-studies do lead to a lot of positive changes."*  
(ACCJC College Administrator)

The faculty member from College A agreed with the benefit of the self-study process in helping institutions identify needed improvement. In particular, he viewed accreditation as "a valuable process to educate staff about the college and identify areas for improvement. Self-examination is what it should be all about." Another benefit cited by respondents relates to improved processes and increased dialogue. An IR director from the focus group working at an institution currently preparing

*"[Accreditation is] a valuable process to educate staff about the college and identify areas for improvement. Self-examination is what it should be all about."*  
(ACCJC College A Faculty)

for a reaffirmation visit indicated she already has seen a benefit, “The value so far has been just getting everybody to increase the dialogue and having people really start looking at evidence and respecting it more. I think it’s really going to help the culture of evidence.”

Another IR director at the focus group cited how accreditation led to a more formalized process and clearly identified responsible parties:

A major return that we’ve gotten, and it’s a good one, is the establishment of a committee that does deal with accreditation issues on a regular basis as opposed to every six years. Now we’ve assigned the planning agendas and accreditation standards to one committee to monitor constantly, but I don’t know if it was worth all the effort we put into the self-study.

College E respondents believed that accreditation had advanced quality on their campus. The college invested significant time and resources over a three-year period preparing for its most recent reaffirmation. What may be slightly unique is that this college joined a national initiative that focuses on increasing student retention and achievement. The CEO explained that the overarching goals of this initiative were aligned with ACCJC’s standards. He further argued that his college’s progress in meeting the requirements of both ACCJC and the initiative increased the overall caliber of the college and has created a culture of continuous quality improvement.

The CEO at College D cited a benefit that he has observed, not just at his college, but at others:

One of the greatest improvements that I’ve seen both here and at other schools is in program review. The requirement to document program review has probably been the single most important element of the emphasis on data, metrics and facts as opposed to opinions, feelings and thoughts. [Colleges] are doing the work but they don’t think to write that in [program review]. The assessment is going on, but it’s not being documented. They don’t want to do that and I understand and respect that, but being forced to do that a little more has been the greatest benefit of the most recent accreditation standards.

*“The requirement to document program review has probably been the single most important element of the emphasis on data, metrics and facts as opposed to opinions, feelings and thoughts.”*  
(ACCJC College D CEO)

In spite of all the positive feedback about how accreditation can benefit an institution, respondents cited two issues related to their return on investment in the accreditation process. The first problem related to sustaining changes that result from the accreditation process if that change is not integrated into the institution’s practices. Those colleges that have been successful at sustainment have managed to integrate accreditation into the college’s ongoing planning processes. One senior administrator at the focus group shared the process at his college:

Every planning agenda from the self-study is put into the college’s strategic plan as well as departmental plans and that gets followed up on regularly, even before the midterm report, so there are efforts to not have it collect dust for 3-4 years. We revisit it every year.

However, the above example appears to be the exception. No other comparable approaches were found among the focus group participants or college interviewees. This is further evidenced by the number of institutions on sanction for problems related to integrated planning. Another senior administrator at the focus group described how accreditation does not seem to get integrated into institutional processes at most colleges:

Integrated planning is one of the standards of accreditation, but somehow accreditation doesn't ever become part of the college's integrated planning. We're doing accreditation on a continuous basis and those planning agendas can't be disconnected. It means the accreditation standards actually have to be built into your integrated planning process, because if you were really on top of it there's no reason why any college should go through this great lurching exercise of "Oh my God! We have to write a self-study! Where's all our data and evidence?" It should be a simple matter of a semester's update in a perfect world.

The CEO from College D agreed with this idea that accreditation needs to be better integrated at institutions:

It's a tremendous amount of work just preparing for the visit. If you already have it in your processes it's not a big deal, but I don't know too many schools that do have it in their processes. Accreditation wouldn't be so daunting if self-assessment were a continual process for colleges that is integrated with other institutional processes.

After spending over a year preparing for an upcoming visit, making significant efforts to improve institutional processes and feeling relatively confident, College C still expressed concern about the college's ability to sustain these efforts. The ALO said, "Yes, there was a return on investment, but with a cautionary note that if we don't continue with what we've developed, we're going to be in the same place in the future."

The second issue identified by interviewees related to the effort and resources required for reaffirmation. College respondents indicated they value the positive change that has resulted from accreditation, yet they are not sure that these benefits are justified by the tremendous amount of effort and resources required for their achievement. In spite of citing progress her college had made with SLOs and planning, the ALO at College A assessed her college's return on investment at 10% and stated that she was not sure the college would not have made these improvements anyway because they have a culture of self-assessment.

The CEO at College D was also less than satisfied with the return his college received as a result of the effort and resources they devoted to their accreditation review, "The return on investment was marginal at best, possibly negative [and] not anywhere near where it should be."

The ALO at College B felt that the amount of work required in the accreditation process was more than is necessary to achieve improvement:

It felt it was like doing a dissertation. You do all this work that is meaningful, which is valuable, but then you get to a point in the process when it becomes cosmetic, where it's about the preparation of the manuscript and when that begins to take over I find that very frustrating. The preparation of the document takes too much darn time. It's a good thing to look at what you're doing and see how you can make it better and to have someone point out to you 'maybe you should be doing this or maybe you should reconsider how you're doing that.' I have no problem with a critical eye and with suggestions, but all this work [producing the self-study report] is superfluous.

In sum, interviewees recognized how accreditation can lead to positive changes for an institution, but raised two questions with the actual effectiveness of an approach that is based heavily on compliance. First, how can more institutions integrate accreditation with their institutional practices? Second, are the benefits achieved through accreditation truly justified by the significant amount of time, effort and resources invested by institutions in the accreditation process and in particular the development of the self-study report?

## Chapter 6: Discussion

This chapter presents a synthesis of the key findings across the three commissions and attempts to highlight those areas that demonstrate the greatest potential for dialogue and action on the part of both ACCJC and its member colleges. The information in this chapter is organized by how commissions: (1) set the stage for quality improvement, (2) developing a relationship between the commission and the colleges they serve, (3) support institutions in achieving reaffirmation, (4) consistently apply standards and effectively use sanctions throughout a review and (5) generate a positive return on an institution's investment. Each of these sections concludes with a set of questions that stem from the findings that commissions, the colleges and constituent groups might consider as they work together to optimize the accreditation process for true quality improvement.

In addition, college interviewees offered specific suggestions for how they felt the accreditation process could be improved. We present these suggestions in textboxes throughout this chapter.

### **Setting the Stage for Quality Improvement**

The three commissions studied represent a continuum of approaches to balancing quality improvement and compliance in their reaffirmation processes. This investigation suggests that *shifting the focus to quality improvement requires a reinvention of the accreditation process*. NCA's Academic Quality Improvement Process (AQIP) offers a reaffirmation model that fully integrates continuous quality improvement through a series of activities completed during a seven-year review cycle (see Chapter 3 for a complete description of AQIP). Colleges choose AQIP participation and must demonstrate a commitment to quality improvement through an initial self-assessment of strengths, weaknesses, culture and systems as well as ongoing participation in dialogue, planning, action and reflection. According to those involved with AQIP, the process naturally enables institutions to meet NCA standards. In the words of one college president, "If we focus our efforts on quality improvement, then we have compliance and transparency."

SACS partially integrates quality improvement efforts into a more traditional review approach through a quality enhancement plan (QEP). In addition to submitting documentation of compliance with commission standards, SACS institutions also complete a plan for improving a particular aspect of student learning. College representatives generally appreciated SACS' effort to focus on quality improvement through the QEP with some respondents specifically noting the value of honing in on an issue of unique importance to a given institution. One area for improvement some interviewees mentioned for SACS included more clear and consistent direction regarding what makes an acceptable QEP.

A review of ACCJC standards and interviews with commission staff indicate that ACCJC clearly aims to promote quality improvement through accreditation. At the same time, the commission does not employ a process comparable to those of NCA and SACS, which actively engages colleges with quality improvement efforts. As a result, college interviewees remarked that by default the emphasis falls on compliance which, while critical, can detract from institutional

improvement priorities—implying a disconnect between the intentions of the commission and the experience of the colleges.

Of note, both commission and college respondents indicated that *institutions develop and drive a culture of improvement—regardless of the accreditation process*. Interviewees collectively expressed that college leadership particularly plays a vital role in generating a focus on quality improvement on each campus. However, frequent turnover in administrative leadership makes it difficult for colleges to achieve and sustain this kind of culture.

These findings on how quality improvement can be an integral and integrated part of the accreditation process lead the RP Group to ask the following questions:

- How might the accreditation process improve to specifically engage institutions in activities designed to foster quality improvement?
- What can college leadership, particularly chancellors and presidents, do to support a culture of improvement that enables their institution to maximize the accreditation process for organizational renewal and sustained change?

## Developing a Relationship between the Commission and Colleges

Interview results underscore that the relationship each commission has with its member colleges is a critical component of the accreditation process. Colleges in all three regions were generally positive about their direct interactions with commission staff, citing the staff's responsiveness and willingness to help. For the colleges interviewed, maintaining a good relationship with their commission surfaced as a key factor in their successful navigation of the accreditation process.

This research suggests that a key component of a healthy relationship between a commission and the colleges is the opportunity for institutions to provide feedback to their commission on matters related to their own experiences and accreditation at large. Two primary elements are critical to these feedback loops: receptivity and security. *Transparent, open and honest opportunities for feedback without fear of retribution are very important to the commissions' relationship with the colleges. Moreover, when*

### Setting the Stage for Quality Improvement

*"Team chair training presents an opportunity for ACCJC to **emphasize improvement over compliance** since most team chairs are college presidents and can take that message back to their colleges."*  
(College A Faculty)

### Developing a Relationship between the Commission and Colleges

*"Commissions and colleges need to work together so the **commission can learn from the colleges what they're doing and why they think it's good** and colleges can work with commission staff, whose job it is to make sure that all colleges are doing good things."*  
(SACS College B faculty)

*"Commissions need to work more closely with college CEOs, vice presidents and deans to get a **better sense of the pressures under which colleges operate** that extend well beyond accreditation."*  
(ACCJC College A CEO)

*"Just as the colleges are required to post accreditation reports, so should the **commission post their own evaluation report from the USDOE.**"*  
(ACCJC College C ALO)

*commissions demonstrate that they take into account colleges' feedback, colleges feel heard and a valued part of the overall process.*

In this regard, the three commissions seem to be in different places with the colleges they serve. NCA respondents cited being satisfied with intentional opportunities to provide feedback both in the commission's annual meetings, training sessions and evaluator training. One respondent noted a particular example where the commission had implemented change based on feedback and then explained where the change originated at the next annual meeting. Additionally, the Action Project Directory was significantly redesigned based on college feedback, which NCA-HLC noted on its website and respondents themselves recognized in interviews.

With SACS, interviewees indicated that the commission offered adequate opportunities for feedback, but that there were potential consequences for providing input. Respondents from two of the three colleges expressed a concern about providing candid feedback for fear of retaliation from SACS. The CEO and ALO from the third college were clearly satisfied with their opportunity to provide feedback, have done so on numerous occasions and did not cite any negative consequences that had occurred as a result.

When it comes to the opportunities for ACCJC colleges to provide feedback to the commission, this research indicated a difference in opinion between ACCJC and the institutions interviewed. Commission staff report that they are open to feedback from the colleges and are frequently collecting data in this regard. However, the colleges interviewed found the commission generally unreceptive to constructive criticism and expressed a fear of retaliation. As an exception, two of the college CEOs expressed satisfaction with their ability to provide feedback to the commission. They suggested this comfort resulted from personal relationships they had with certain commissioners and/or commission staff, which had allowed them the chance to provide input to the commission without the fear of it negatively impacting their institutions.

One key observation made by the president of SACS College B is that colleges in his region view SACS as "our" commission, but that colleges in the ACCJC region view ACCJC as "the" commission, connoting no sense of ownership or collegiality. This observation raises the question:

- How can the commission and colleges work together to examine the perception of "the" commission versus "our" commission?

In addition, the suggestions from interviewees regarding the need for commissions and colleges to better understand each other raises these additional questions:

- What do the colleges need to understand better about the commission and the work it does?
- What does the commission need to understand better about what the colleges experience and perceive?

## **Supporting Colleges in Achieving Reaffirmation**

The types of support that commissions offer to colleges throughout the reaffirmation process are divided into three areas: (1) the commission's training of colleges and evaluators involved in the

reaffirmation process, (2) the opportunities for colleges to share effective practices and (3) the guidance provided to college by commissions to help institutions interpret and meet accreditation standards.

## Training Constituents Involved in Reaffirmation

The RP Group’s investigation indicates *a training program that is comprehensive, learner-centered, inclusive and integral to the accreditation process is most useful to institutions in their pursuit of reaffirmation*. For example, SACS offers a multi-pronged training approach designed to meet the needs of different stakeholders involved in accreditation. Their program includes three commission-sponsored events for training and effective practices sharing, extensive written and web-based resources for institutions and review committees as well as a staff position designed to collect feedback from colleges and incorporate it into training efforts. Representatives from colleges served by SACS universally described these efforts as highly useful to their reaffirmation preparation.

NCA and ACCJC also provide a range of training opportunities and support; however, college interviewees were less satisfied with their experience. NCA offers a multi-year Academy for Assessment of Student Learning, an annual conference, ongoing workshops and strategy forums. In spite of this comprehensive training program, NCA respondents expressed the desire for more prescriptive content that could be applied directly to their colleges. ACCJC conducts specialized workshops, taps existing conferences and meetings of professional organizations to make presentations and responds to the request for in-person visits from individual institutions. However, ACCJC respondents indicated that the commission’s training lacks cohesion and shared concerns about the timing, quality, consistency and relevance of the commission’s offerings. At the same time, the commission noted its limited capacity to offer a full professional development program given the size and scope of the organization. The commission shared that in their view, colleges and constituent groups should lead training and effective practices sharing.

All college respondents noted that *positive learning occurs when serving on an evaluation team—both in understanding how to be an effective evaluator as well as how to best prepare for reaffirmation as an institution*. Both NCA and ACCJC, for example, rely heavily on face-to-face training and web-based resources to provide an overview of the review process and evaluator responsibilities. SACS offers a tutorial video that evaluators can access online in addition to extensive written materials.

### Training Constituents Involved in Reaffirmation

*“The commissions should **encourage more people to participate in accreditation** because the more they do, the more they will understand how things work.”*  
(SACS College C ALO)

*“In the team training, evaluators need the **opportunity to apply the rubrics** through different exercises.”*  
(ACCJC College A Faculty)

*“Team **training should be done by standard**, which would allow attendees to focus on the type of evidence that is relevant to the standard.”*  
(ACCJC College C ALO)

Reportedly, NCA and SACS respondents find these practical resources to be instrumental to their understanding of the evaluation process. Moreover, several interviewees noted that they are motivated to attend evaluator training for the increased insight they can share with their campuses in preparation for reaffirmation. While ACCJC respondents appreciated the opportunities provided by the commission for evaluators, the majority of interviewees were less content with the quality of the face-to-face training sessions, citing dissatisfaction with the minimal opportunities for participant engagement and practical application that would be helpful in preparing to serve on a review team.

This research leads the RP Group to pose two questions related to ensuring that the training received by both the colleges and the evaluation teams is useful and practical:

- How can the commission and California's community colleges work together to design training opportunities that demonstrate the principles of quality improvement?
- How can the commission build on and extend the "learning-by-doing" opportunity afforded by review team participation?

## Sharing Effective Practices

All commissions offer formal opportunities designed to showcase effective practices that demonstrate achievement of accreditation standards. NCA in particular builds effective practices sharing into the AQIP process—making it a natural extension of reaffirmation rather than an additional support provided by the commission. However, the study indicates that *formal and informal networks created by the colleges themselves are particularly effective in offering peer guidance and specific nuts and bolts information.* For example, administrators from NCA colleges implementing AQIP maintain a statewide matchmaking system to connect institutions and encourage idea sharing; moreover, at least eight states maintain formal AQIP associations. SACS colleges host peer institutions for professional development events focused on accreditation. In addition, NCA's and SACS' annual meetings provide a regular venue where colleges can come together to share and learn about each other's experiences, successes and challenges related specifically to accreditation. Both these annual meetings are well attended with several thousand attendees every year.

At present, California's community colleges do not come together across constituency groups solely for the purposes of sharing effective practices in preparation for accreditation review. ACCJC both co-sponsors conferences and leverages existing venues to present effective practices. However, college interviewees explained that they

### Sharing Effective Practices

*"CCCs need an ongoing, very large convention like the other commissions offer where people get together every year for an **intensive time to discuss various issues that are addressed in accreditation.**"*

(RP focus group senior administrator)

*"There is **enough talent in the CCCs to have three to four major workshops each year** that are institution-driven with the commission as a partner."*

(SACS College B CEO)

*"CCCs need to **look more outside the state for effective practices.**"*

(ACCJC College A CEO and ALO)

*"It would be more helpful if the **commission website had some examples of good practice.** The commission's role in helping colleges be better educated about what others are doing could be enhanced."*

(ACCJC College F CEO)

do not necessarily avail themselves of these opportunities and when they do, they do not find them particularly informative.

Given that these opportunities are present, but the California community colleges are not participating, the RP Group poses two questions:

- How can California community colleges take responsibility for organizing among themselves to share effective practices?
- How can the commission attract and engage California community colleges to participate in the annual Academic Resource Conference (ARC) that it co-sponsors with ACSCU?

## Helping Institutions Interpret and Meet Standards

While all accrediting agencies offer different opportunities for training and effective practices sharing, nearly all college interviewees across the three commissions studied underscored that *institutions need practical, specific and direct guidance on how to understand and achieve standards*. Interviewees from smaller colleges particularly expressed the desire for a more prescriptive process; in some cases, those from larger institutions appreciated a flexible approach that allowed them to maintain their unique identity and way of being.

ACCJC in particular has responded to feedback from its constituents about the need for direction by introducing rubrics that aim to codify how well a college has done in reaching compliance with certain standards as well as pinpoint what steps need to be taken to fulfill these standards. College respondents appreciated these efforts and spoke about the utility of these tools.

The struggle that all three commissions have between being overly prescriptive or too ambiguous raises the following question:

- How can the commission and colleges work together to provide information that helps explicitly guide institutions on how to meet accreditation standards?

## Consistently Applying Standards and Effectively Using Sanctions

Commissions have the responsibility of ensuring the fair and equal treatment of colleges throughout the accreditation process. In doing so it is important to examine what processes commissions have in place to serve as assurances that consistency prevails. This section examines this issue in three respects as to how commissions: (1) ensure the consistent application

### Helping Institutions Interpret and Meet Standards

“Statements like “assess student learning” are **too vague.**”  
(NCA College A CEO)

“We need to have **specific answers to college’s specific questions.**”  
(ACCJC College C ALO)

“Colleges are **struggling with authentic assessment of program learning outcomes.** Teams need to be trained on how to assess these outcomes and colleges need to know what teams will expect.”  
(SACS College B ALO)

of standards in both the review process and in the accreditation status decision, (2) hold all institutions of higher education to the same standards and (3) effectively use sanctions to motivate institutional improvement.

## Ensuring Consistent Application of Standards during the Review Process and Status Recommendation

Regional accrediting bodies take different approaches to assuring the consistent application of standards both in how they utilize review teams to assess colleges and in determining a college's status. This research suggests *commissions promote integrity in the assessment of colleges when they implement a multi-layered, transparent review process that: (1) relies on an evaluation team's specific recommendations for improvement and (2) leaves all aspects of the decision on accreditation status under the sole purview of the commission.*

For example, SACS implements several key efforts designed to create consistency between the commission's expectations, the assessment of review committees and the ultimate reaffirmation of a college. SACS assigns a staff member or an institutional liaison to each review team who participates in reviewer trainings and takes part in college visits. In the words of one college's accreditation liaison officer, these staffers have a "tremendous impact" on achieving fidelity across teams. SACS review committees also only offer feedback to the commission about a college's need for improvement as related to specific standards and do not make any recommendations related to reaffirmation status. Finally, the commission takes visiting team input and suggestions through a two-part internal review and ultimately makes a recommendation to its trustees, who finally determine a college's status.

NCA similarly applies a three-pronged process which includes an initial assessment by a reaffirmation panel that is forwarded to the Institutional Actions Council (IAC), made up of experienced peer reviewers who then review the recommendations. The IAC then makes a final recommendation to the commission, which votes on a college's reaffirmation.

Interviewees from colleges involved with ACCJC expressed particular concern about the consistent application of standards in both the review and reaffirmation of California community colleges.

### Ensuring Consistent Application of Standards During the Review Process and Status Recommendation

*"Team training needs to ensure that all teams are clear as to what it is that they are supposed to be looking for. You shouldn't think that if there had been a different team, it would have been a whole different story."*  
(SACS College C ALO)

*"I suggest ACCJC compare the teams' recommendations on accreditation status with the commission's final decision over the past few years to determine if the perceived disconnect between the commission's expectations and teams' recommendations exists or is just a perception."*  
(ACCJC College A CEO)

*"Team chair training needs to include the opportunity for norming among the team chairs in order to establish consistent application and assessment of the standards."*  
(SACS College B CEO)

*"Team training needs to be designed to ensure that evaluators are aware of and understand common issues that arise related to consistency."*  
(ACCJC College A Faculty)

Unlike SACS and NCA, ACCJC does not implement an intermediate review of visiting team recommendations before the commission determines a college's status. Respondents referenced personal experience with commission staff having revised visiting team reports and the commission making decisions on accreditation status that were more severe than review team recommendations—both alluding to potential inconsistencies between what the commission enforces and what review teams identify as meeting standards during the visit. This finding may result from the fact that ACCJC takes into account a longer history of information on a college's actions (12 years) versus visiting teams, which only consider information gathered and reports produced during the previous accreditation cycle (6 years). It is important to note that ACCJC staff refuted claims that it changed visiting team reports without the direct involvement of the team chair.

Additionally, respondents from ACCJC colleges discussed inconsistency across review teams including issues of team member selection and qualifications, team composition and teams' ability to produce quality reviews. They also noted problems with the high intensity of review team workload coupled with the short length of the visit length.

While the colleges in the NCA and SACS region also reported some occurrences of inconsistency, it was seen as more of a natural part of the process that occurred fairly infrequently. These issues of inconsistent understanding and expectations lead the RP Group to ask:

- What additional steps are required in ACCJC's review process to ensure the consistent application of standards and awarding of reaffirmation across all California community colleges?

## Holding All Institutions of Higher Education to the Same Standards

NCA and SACS accredit all institutions of higher education in their region, unlike ACCJC which only reviews and reaffirms the accreditation of two-year institutions (please see Chapter 5 for the history of WASC's separation into two commissions). NCA and SACS colleges remarked that *holding community*

### Holding All Institutions of Higher Education to the Same Standards

*"How do we pay for accreditation?"*  
(ACCJC College C ALO)

*colleges to the same standards as their baccalaureate-granting counterparts can promote consistency in culture, quality and expectations for students.* Conversely, some interviewees representing ACCJC colleges felt they had little to learn from four-year institutions in their region. At the same time, others noted that the lack of two- and four-year integration may lead to the negative perception that these segments are held to different standards and have different expectations for students and result in perceived differences in educational quality.

In addition, many respondents from all three regions expressed concern about two-year institutions meeting the same mounting expectations for planning and requirements for reaffirmation as baccalaureate-granting institutions without the same resources or capacity.

The perceived equity in quality across two- and four-year institutions in the NCA and SACS regions leads the RP Group to ask:

- How might California community colleges benefit by being held to the same standards as baccalaureate institutions? Should the WASC consider a merger of its two commissions?

## Implementing Sanctions

Commission and college representatives ultimately agree that *sanctions can motivate positive action* when a college is not meeting accreditation standards. The research also reveals that *how and when a commission applies a sanction can influence a college's response*. Both NCA and SACS expressed that their primary goal is to work with their respective institutions to keep them off sanction; in turn they have built steps into their reaffirmation process that essentially provide for a cure period during which colleges can remediate a concern before receiving this designation. In turn, very few colleges served by these commissions are on sanction and interviewees considered a sanction to be a very serious and negative outcome to be avoided at all costs.

A proportionally larger number of community colleges accredited by ACCJC are on a sanction (as of January 2010, 1% and 3% for NCA and SACS institutions respectively, compared with 14% of ACCJC colleges). As reported by ACCJC, the commission uses sanctions to enforce the US Department of Education's two-year rule—a regulation indicating that institutions have two years to meet recommendations once made. ACCJC has a series of actions they assign colleges ranging from reaffirmation to probation; however, the commission does not apply these actions in a uniform, sequential manner where all colleges have the same chance to remediate issues discovered during their review before being placed on a sanction. For example, in one case a college might be placed on probation while another may have the chance to fix an issue and document this change through a short-term progress report. Colleges expressed confusion about what causes one institution to be placed on sanction over another. It is not clear to the colleges what deficiencies warrant a move straight to a sanction and what deficiencies warrant a progress report, which allows an institution time to remediate deficiencies before being placed on sanction and whether this standard is being applied consistently across institutions.

The research indicates that this application of sanctions provokes a range of reactions from ACCJC colleges. Some college respondents noted the urgency a sanction inspires in that it can be very effective in achieving significant institutional change in a short period of time. However, other respondents shared that the number of institutions in the region on a sanction has served to diminish the significance of this status at their college and in turn, has diminished their sense of exigency toward improvement.

The disparity in the proportion of institutions on sanction in the three regions leads to the following questions:

- What should the role of sanctions be in motivating institutional change?
- How can the commission encourage a sense of self-efficacy among its colleges that results in organizational improvement?

## Generating a Positive Return on Investment

Ultimately, commissions have the opportunity to generate a sense among their respective colleges that undertaking the accreditation process is worth the substantial commitment of time and resources required for reaffirmation. This investigation suggests *commissions engender a positive return on a college's investment when they demonstrate theoretically and practically that they value quality rather than quantity throughout the review process.*

NCA AQIP participants cited enhanced faculty dialogue, increased attention to institutional improvement and the opportunity to extend the application of AQIP principles to other parts of their colleges as significant benefits resulting from their accreditation efforts. Similarly, interviewees from SACS colleges noted the focus on quality afforded by the completion of their QEP and the ability to rapidly advance action through reaffirmation as particularly worthwhile. Colleges involved with ACCJC also expressed satisfaction with the ability to leverage accreditation for institutional change. However, unlike NCA and SACS interviewees, several ACCJC respondents questioned the value of the review process given the amount of time, effort and resources required for reaffirmation.

Some respondents from across the commissions studied noted that *colleges realize a positive return on their investment when they integrate accreditation requirements into everyday institutional practices.* Interviewees noted that on one hand, colleges must take responsibility for doing so and those that have linked accreditation with their planning processes cite greater ease with preparing for review. On the other hand, respondents indicated that when a commission takes an approach to reaffirmation that emphasizes compliance rather than improvement, real and lasting change is difficult to achieve.

### Generating a Positive Return on Investment

*“Having a visit where the team went through your processes with you and you didn't have to produce this publishable document would be more valuable and less wasteful of time and resources. All this **work to produce the self-study report is superfluous.**”*

(ACCJC College B ALO)

The issues raised about the balance between the amount of work involved in the reaffirmation process and the rewards that result from it for an institution led to the following two questions:

- How can the commission act to ensure that there is a balance between the work required for accreditation review and the results achieved (i.e., positive return on investment)?
- What can California community colleges do to integrate accreditation requirements into planning efforts?

## Conclusion

This study identifies several areas where commissions and colleges can work together and separately to serve students, the public and member institutions by assuring high quality education and operations. This chapter also offers ACCJC, the colleges and constituent groups questions that should be considered and could help guide these efforts. By presenting in-depth information from three different commissions, this study attempts to provide a broader perspective on accreditation processes and practices than what a college can find within its own

region. In addition to this broader purpose, it is the RP Group's specific hope that this research will engage all parties involved in accreditation—such as commission board members and staff, community college administrators, accreditation liaison officers, institutional researchers, faculty and other constituent groups—in a dialogue about what these findings mean and how they can be used.

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## Appendix A: Profile of Commissions Studied

	ACCJC	ACSCU	NCACS - HLC	SACS - COC	MSCHE	NEASC - CIHE	NWCCU
<b>Year Founded</b>	1962	1962	1895	1895	1919	1885	1952
<b>Geographic Region</b>	CA, HI, Guam, American Samoa, Northern Mariana Islands, Palau, Micronesia, Marshall Islands	CA, HI, Guam, American Samoa, Northern Mariana Islands, Palau, Micronesia, Marshall Islands	AZ, AR, CO, IL, IN, IA, KS, MI, MN, MO, NE, NM, ND, OH, OK, SD, WV, WI, WY	AL, FL, GA, KY, LA, MS, NC, SC, TN, TX, VA, Latin America	DE, DC, MD, NJ, NY, PA, Puerto Rico, US Virgin Islands	CT, ME, MA, NH, RI, VT	AK, ID, MT, NV, OR, UT, WA
<b>Number of States/Territories in the Region</b>	8	8	19	12	8	6	7
<b>Number of Institutions Served</b>	135	161	~1,000	796	~500	241	163
<b>Number of Commission Staff</b>	8	18	40	42	20	10	9
<b>Ratio of Institutions to Staff</b>	18 to 1	9 to 1	25 to 1	19 to 1	25 to 1	24 to 1	18 to 1
<b>Number of Standards</b>	4	4	5	4	14	11	5
<b>Number of Subsections of the Standards</b>	127 (135 for multi-college districts)	42	21	75	0	172	114
<b>Length of Review Cycle</b>	6 years with required midterm report	10 years	AQIP - 7 years PEAQ - 10 years	10 years with required fifth year report	10 years with a required 5 year periodic review	10 years with required interim report	7 years with required midterm report

# Appendix B: Phase I Interview Protocol

## Interview Questions for Regional Accrediting Commissions

1. How would you describe the effectiveness of your region's accreditation process in leading to institutional improvement?
2. What is the process for determining whether colleges are in compliance with the accreditation standards?
3. How does your region train colleges to help them prepare for their accreditation review?
4. How does your region train the committees that conduct the reviews? What is the composition of a typical visiting committee? How are committee members selected to serve? How do you ensure consistency among these committees in terms of the reviews they produce?
5. How would you describe the role of research in accreditation in your region? What is the link between IR capacity at the colleges and their ability to meet the standards?
6. Your region applies the same standards to both two- and four-year colleges. What are the benefits to having the two types of institutions use the same standards? Are there any issues? How would you describe the relation between or integration of two- and four-year institutions within the accreditation process?
7. How does your region see its role in helping institutions meet standards? In setting clear expectations for how colleges can meet the standards? In helping sanctioned institutions return to good standing?
8. How is information shared among colleges about effective practices that are aligned with the accreditation standards?
9. Have there been any notable reactions to your region's accreditation process or standards from any member institutions or faculty, administration or staff organizations?
10. What is the purpose of your annual meetings? Who is the intended audience and who attends? How does it benefit member institutions?
11. Your region provides templates for reports from the colleges and review committees, what is the success of these templates? Are they effective in helping colleges and review teams produce quality reports?
12. How do member institutions use the handbooks produced by the commission? How effective are these materials in guiding colleges to the production of effective self-studies?

13. Are there any documents or other materials you can share with me or direct me to that might be of value to our study? Is there anything else you would like to add about your region's approach to accreditation that may be relevant to our study?
14. Do you have any questions for me?

## Appendix C: Commission Descriptions

*This appendix provides basic information about the commissions studied during Phase I but that the RP Group did not further examine in Phase II of this accreditation research. The RP Group evaluation team conducted extensive interviews with staff at the following four commissions focused on how a commission offers training, how it facilitates sharing and identifying effective practices, how it approaches routine procedures and if and how it promotes two- and four-year engagement and interaction.*

### **Middle State Association – Middle States Commission on Higher Education**

Middle States Commission on Higher Education (MSCHE) is one of three commissions to evaluate and accredit schools within the Middle States Association of Colleges and Schools (MSA). The MSA region includes Delaware, the District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, the US Virgin Islands and over a dozen overseas territories. Founded almost 100 years ago in 1919, the MSCHE mission states:

The Middle States Commission on Higher Education is a voluntary, non-governmental, membership association that is dedicated to quality assurance and improvement through accreditation via peer evaluation. Middle States accreditation instills public confidence in institutional mission, goals, performance and resources through its rigorous accreditation standards and their enforcement. (MSCHE, 2010)

The commission serves nearly 500 colleges and universities and employs 20 staff members at its headquarters in Philadelphia, Pennsylvania. A 25-member commission, which governs MSCHE, ratified its 2009-2012 strategic plan, prioritizing the following areas: (1) accreditation services, (2) member services and (3) compliance with the US Department of Education/Higher Education Opportunity Act.

The commission conducts a 10-year accreditation cycle culminating in a 200-page institutional self-study and site visit by an evaluation team. The cycle also includes a five-year periodic review report. Standards for accreditation, which are listed below in Table 1, are divided into two primary categories: institutional context (standards 1-7) and educational effectiveness (standards 8-14).

**Table 1: Middle States Commission on Higher Education Standards for Accreditation**

Institutional Context	Educational Effectiveness
1. Mission and Goals	8. Student Admission and Retention
2. Planning, Resource Allocation and Institutional Renewal	9. Student Support Services
3. Institutional Resources	10. Faculty
4. Leadership and Governance	11. Educational Offerings
5. Administration	12. General Education
6. Integrity	13. Related Education
7. Institutional Assessment	14. Assessment of Student Learning

At the conclusion of the 10-year accreditation cycle, an MSCHE evaluation team conducts a three- to four-day site visit to assess the member organization’s compliance to the commission standards. Evaluation teams are comprised of a trained team chair, plus six to eight team members. Immediately following, the evaluation team chair submits a 20-page summary of findings to the commission for review and action.

Training and resources are provided to both the member organization and the evaluator or site visiting team member to prepare, conduct and follow-up on accreditation activities. For example, MSCHE offers (among other topics): (1) support for writing an institutional self-study, (2) guidance publishing the periodic review report and (3) a chairs’ and evaluators’ workshop. Similar to other higher education commissions, MSCHE also sponsors an annual meeting to disseminate information on accreditation best practices. The commission hosts an extensive website with dozens of resource manuals, newsletters, process flowcharts, reminder grids and other supportive publications that give colleges, universities, review teams and the general public ample information about MSCHE and its accreditation review practices and processes.

## **New England Association of Schools and Colleges – Commission on Institutions of Higher Education**

The New England Association of Schools and Colleges (NEASC) is comprised of six education commissions that uphold its commitment to continuous quality improvement. This section focuses on the Commission on Institutions of Higher Education (CIHE), whose service area includes Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont and eight overseas territories. As stated on the CIHE website, the mission of the commission is as follows:

The Commission develops, makes public and applies criteria for the assessment of educational effectiveness among institutions of higher education leading to actions on their institutional accreditation. By this means, the Commission assures the education community, the public and interested agencies that accredited institutions have clearly defined objectives which meet the

criteria published by the Commission; that they have the organization, staffing and resources to accomplish, are accomplishing and can continue to accomplish these objectives. In addition, through its process of assessment, the Commission encourages and assists in the improvement, effectiveness and excellence of affiliated educational institutions. (CIHE, 2010)

Founded in 1885 and serving 241 schools, the CIHE is the oldest commission in the United States. A professional staff of 10 is headquartered in Massachusetts and works to support the actions of a 24-member commission, the chief governing body that oversees the work of the CIHE.

CIHE maintains a 10-year review cycle that concludes with an institutional self-study and a four-day comprehensive site visit. Generally speaking, member institutions take two years to write their self-study using the standards below (Table 2) as a guide for self-assessing principles of good practice in higher education. The 10-year cycle also requires a five-year interim report elucidating changes that have occurred since the last reporting deadline and current or future activities aimed to strengthen the organization’s commitment to continuous quality improvement.

**Table 2: Commission on Institutions of Higher Education Standards for Accreditation**

1. Mission and Purpose	7. Library and Other Information Resources
2. Planning and Evaluation	8. Physical and Technological Resources
3. Organization and Governance	9. Financial Resources
4. The Academic Program	10. Public Disclosure
5. Faculty	11. Integrity
6. Students	

According to CIHE, a skilled and carefully selected review team conducts a comprehensive evaluation for each member institution every 10 years. This seven- to eight-member review team is selected from a pool of 1,500 peer evaluators, college faculty and staff who volunteer to endorse and uphold the mission and standards of the commission.

CIHE aims to comprehensively support colleges and universities through the accreditation process. Routinely, workshops, resources and training specific to the accreditation process can be found at the New England Association of Schools and Colleges annual winter meeting. Incorporated in the program agenda are topic areas such as program reviews, student assessment, qualitative research practices, international trends, diversity and self-study preparation. Additionally, the association and commission websites post hundreds of useful documents, resources and manuals that guide schools, peer evaluators and the public through accreditation. Finally, the commission maintains a research office designed to help the New England Association of Schools and Colleges support colleges and universities in making decisions that encourage continuous quality improvement.

## Northwest Commission on Colleges and Universities

The Northwest Commission on Colleges and Universities (NWCCU) was founded in 1952 and serves over 160 member organizations across the Northwest region, covering Alaska, Idaho, Montana, Nevada, Oregon, Utah and Washington. The commission includes a nine-member professional staff and 24-member board of commissioners. Together, the team works to carry out NWCCU's mission to:

...assure educational quality, enhance institutional effectiveness and foster continuous improvement of colleges and universities in the Northwest region through analytical institutional self-assessment and critical peer review based upon evaluation criteria that are objectively and equitably applied to institutions with diverse missions, characteristics and cultures. (NWCCU, 2010)

Newly adopted accreditation standards and a revised accreditation cycle were ratified in 2010 and aim to embody institutional self-reflection and continuous quality improvement.

The revised accreditation standards are principle-based statements of expectations of quality and effectiveness for institutions accredited by the Northwest Commission on Colleges and Universities. They function as: 1) indicators of educational quality and effectiveness by which institutions are evaluated and 2) a framework for continuous improvement. (NWCCU, 2010)

Until 2010 the NWCCU review cycle was 10 years in length and included a fifth year interim report. Now the accreditation review cycle is seven years and encompasses self-evaluation reports in years one, three and five. A comprehensive self-study and evaluation, based on the commission standards, is conducted in the seventh year. See Table 3 below for a complete list of the NWCCU standards.

**Table 3: Northwest Commission on Colleges and Universities**

<b>Standard One:</b> Mission, Core Themes and Expectations
<b>Standard Two:</b> Resources and Capacity
<b>Standard Three:</b> Institutional Planning
<b>Standard Four:</b> Core Theme Planning, Assessment and Improvement
<b>Standard Five:</b> Mission Fulfillment, Adaption and Sustainability

The accreditation review program is designed so that in year one of the process, member organizations reflect on standard one and view its contents as a foundation for writing the remaining four standards, delineated by chapters in the report. In year three of the cycle, colleges and universities are encouraged to reflect on standard one, providing an update of earlier reported activities and then review standard two, summarizing the institution's capacity to realize its mission statement. Year three also includes an evaluation committee site visit that reports its findings to the commission for action. In year five, the member institution responds to standards three and four, while updating standards one and two. There is no site visit in this year. In the seventh and final year of the accreditation cycle, member institutions write a comprehensive self-study that reflects on standard five, while reconsidering standards one, two, three and four. A formal site visit accompanies this activity in the cycle, after which time the evaluation team submits its findings to the board of commissioners for action.

Evaluation team members are selected by NWCCU based on key characteristics of the member institution under review (e.g., size, geography, two- or four-year college). Support for writing the accreditation reports and preparing for site visits comes in two primary forms: (1) the Annual Meeting and Standards Reports Workshops hosted by the commission each winter in Washington and (2) online materials and resources, including the NWCCU Accreditation Handbook, available to member institutions.

## Western Association of Schools and Colleges – Accrediting Commission for Senior Colleges and Universities

The Accrediting Commission for Senior Colleges and Universities (ACSCU) is one of three commissions within the Western Association of Schools and Colleges (WASC). As opposed to the WASC Accrediting Commission for Schools (ACS) or the Accrediting Commission for Community and Junior Colleges (ACCJC), ACSCU accredits only institutions that grant baccalaureate and/or graduate degrees. It serves 161 colleges and universities in California, Hawaii, Guam and the Pacific Basin. Founded in 1962, the WASC accreditation process has several intentions, which include:

1. Promote institutional engagement in issues of educational effectiveness and student learning
2. Promote within institutions a culture of evidence, through which indicators of performance are regularly developed and data are collected to inform institutional decision-making, planning and improvement
3. Promote active interchange of ideas among all institutions to improve institutional performance, educational effectiveness and the process of peer review. (ACSCU, 2008)

Western Association of Schools and Colleges ACSCU is comprised of 18 professional staff members, headquartered in California and a 25-member Accrediting Commission. However, a nine-member WASC corporate board governs all three commissions, those being ACS, ACCJC and ACSCU. Collectively, WASC volunteers and personnel ensure that colleges and universities uphold the highest standards of good practice. See Table 4 for a complete list of ACSCU’s standards for accreditation.

**Table 4: Western Association of Schools and Colleges**

<b>Standard One:</b> Defining Institutional Purposes and Ensuring Educational Objectives
<b>Standard Two:</b> Achieving Educational Objectives through Core Functions
<b>Standard Three:</b> Developing and Applying Resources and Organizational Structures to Ensure Sustainability
<b>Standard Four:</b> Creating an Organization Committed to Learning and Improvement

From a vast pool of higher education professionals within the region, ACSCU selects peer reviewers to serve on four key committees that are imperative to the work of the commission: eligibility review, interim report, proposal review and substantive change committees. Committees meet routinely to discuss reports, evaluative activities and ways to improve their

practice. Thus, committees largely monitor and enhance the commission's accreditation review cycle, a 10-year program with three chief milestones: the institutional proposal, the capacity and preparatory review (CPR) and the educational effectiveness review (EER). The institutional proposal stage is meant to help colleges and universities organize a plan to execute its institutional self-study. While this phase is preliminary and necessary to the accreditation process, the second two stages are lengthier and involve a deeper analytical approach. The CPR, for example, is a focused review that allows the commission to determine if the institution has the *capacity* to meet the ACSCU core commitments. The EER is conducted over two years later to determine if the institution is continuing to *fulfill* its core commitments. "The CPR and EER are intentionally designed to be aligned and sequential, to enable the institution to engage in a staged, developmental process that leads beyond minimum compliance to significant improvement of both institutional capacity and educational effectiveness" (ACSCU, 2008).

ACSCU works to prepare member institutions and team evaluators for the accreditation process via training and resources. Mandatory evaluator trainings are held twice annually. Those in committee leadership roles are offered a full-day workshop prior to their team visit. Webinars and conference calls are also available throughout the year. In preparation for the comprehensive review process, member institutions can also attend commission-sponsored training sessions or access scores of documents and guidebooks online.

# Appendix D: Phase II Interview Protocol

## Interview Questions for Colleges Served by Regional Commissions

### Recent Accreditation Experience

1. Depending on college's status, only one of the following would be asked:
  - a. (ALL) Your college recently underwent an accreditation review. How would you describe your college's experience with the process? How helpful was the commission in helping the college understand the process? In what ways did the commission help your college have a successful review? Looking back, what else could the commission have done to help you? What were the college's impressions of the team who visited you? Did the college find them to be competent and well informed?
  - b. (SACS & ACCJC) Your college was recently **removed** from warning/probation. Were you clear from the start on what your college needed to do to return to good standing? How helpful was the commission in your efforts to return to good standing? In what ways were they helpful? What specific activities did they do to help? Looking back, what else could the commission have done to help you? How did your college feel about their status being made public? What impact if any does public disclosure have on institutions?
  - c. (SACS & ACCJC) Your college was recently **placed** on warning/probation. Is your college clear on what needs to be done to return to good standing? How has the commission been involved in helping you return to good standing? What specific activities have they done to help your progress? What else could they be doing to help you? How does your college feel about their status being made public? What impact if any does public disclosure have on institutions?
  - d. (NCA AQIP) As an AQIP institute, your college underwent a quality checkup visit in 2009. How would you describe your college's experience with the process? How helpful was the commission in helping the college understand the process? In what ways did the commission help your college have a "constructive and affirming review?" Looking back, what else could the commission have done to help you?

#### Legend

**SACS:** Southern Association of Colleges and Schools

**NCA-HLC:** North Central Association Higher Learning Commission

*NCA-HLC has two accreditation processes:*

- **NCA PEAQ:** Program to Evaluate and Advance Quality (traditional process)
- **NCA AQIP:** Academic Quality Improvement Program (alternative process)

**ACCJC:** Accrediting Commission for Community and Junior Colleges

**ALL:** References questions that we could ask SACS, NCA and ACCJC

- What were the college's impressions of the team who visited you? Did the college find them to be competent and well informed?
- e. (SACS) Your college recently completed the fifth-year interim report. How would you describe your college's experience with the process? How helpful was the commission in helping the college understand the process? How long did your college prepare the interim report? Approximately how many people at the college were involved? How would you assess the role of the interim report in assuring continuing institutional quality and improvement? How has the time the college invested in the accreditation process helped the college in its efforts to improve quality?
2. (ALL) How long did your college prepare for your recent review? Approximately how many people at the college were involved? Given the time your college spent preparing for the review and visit, how would you assess the college's return on investment? How has the time the college invested in the accreditation process helped the college in its efforts to improve quality?
  3. Depending on the region, only one of the following would be asked:
    - a. (SACS) How did your college select a focus for your quality enhancement plan (QEP)? What role has the commission played in helping you develop your QEP? How has the QEP been the most effective in instilling quality institutional change?
    - b. (NCA) We notice that colleges can elect to participate in PEAQ or the alternative AQIP. How did your institution decide that AQIP or PEAQ was the more appropriate process? (If AQIP) In selecting three "comprehensive quality improvement" or action projects as part of the AQIP process, how did your college determine these specific projects? To what extent did NCA-HLC guide you through this selection process? How have these projects been the most effective in instilling quality institutional change?

## Accreditation Process

4. (SACS & NCA) Your commission serves both two- and four-year colleges. What has been the level of interaction between your college and four-year institutions within your region? What are the possible benefits to two-year colleges being in the same commission as four-year institutions? Are there any negative effects to having two- and four-year institutions together? Does the commission appear to make an effort to bring two- and four-year colleges together, do they hold separate activities for the two, or are the differences between the two seamless?
5. Depending on the cycle, only one of the following would be asked:
  - a. (SACS and NCA PEAQ) Do you find the 10-year review cycle to be too frequent, too infrequent, or the appropriate frequency to facilitate institutional improvement? What are the benefits of the 10-year cycle? What are the disadvantages?

- b. (NCA AQIP) Do you find the 7-year review cycle to be too frequent, too infrequent, or the appropriate frequency to facilitate institutional improvement? What are the benefits of the 7-year cycle in comparison to the 10-year cycle used previously? What are the disadvantages?
  - c. (ACCJC) Do you find the 6-year review cycle to be too frequent, too infrequent, or the appropriate frequency to facilitate institutional improvement? What are the benefits of the 6-year cycle in comparison to the 10-year cycle used in other regions? What are the disadvantages?
6. (ALL) How does your college view the balance between improvement and compliance in the context of accreditation? What should the role of the commission be in working with colleges to effectively address this balance in the effort to meet accreditation standards?
7. Depending on the region, only one of the following would be asked:
- a. (SACS & NCA) What opportunities do colleges have to provide feedback to the commission regarding the accreditation process, their experiences, their needs, etc.? Does your college find these opportunities to be satisfactory and adequate?
  - b. (ACCJC) Are you aware of the opportunities colleges have to provide feedback to the commission regarding the accreditation process, their experiences, their needs, etc.? Does your college find these opportunities to be satisfactory and adequate?

## Support for Quality Change

8. (ALL) We notice that the commission organizes and hosts multiple training and education opportunities that help institutions prepare for accreditation. How often does your college participate in training activities sponsored by the commission? Which activities? Who usually attends? How would you assess the training you received from the commission in helping your college prepare for your review? Looking back, what would have been helpful to have received in this training? Are there any similar forums that are organized and hosted by the member institutions themselves?
9. Depending on the region, only one of the following would be asked:
- a. (SACS) Has anyone from your college attended the Institute on Quality Enhancement and Accreditation (Summer Institute)? If so, how many attended? How have attendees generally found the experience? Which specific components did they find most effective? To what degree was it useful to your accreditation process? What was the level of interaction between two- and four-year institutions at the institute?
  - b. (NCA) Has anyone from your college attended the Academy for Assessment of Student Learning? If so, how many attended? How have attendees generally found the experience? Which specific components did they find most effective? To what degree was it useful to your accreditation process? What was the level of interaction between two- and four-year institutions at the academy?

- c. (ACCJC) Has anyone from your college attended the Retreat on Student Learning and Assessment cosponsored by ACCJC and ACSCU? If so, how many attended? How have attendees generally found the experience? Which specific components did they find most effective? To what degree was it useful to your accreditation process? What was the level of interaction between two- and four-year institutions at the institute?
10. Depending on the process, only one of the following would be asked:
  - a. (SACS, ACCJC and NCA PEAQ) How has your college learned from other colleges about effective practices related to meeting accreditation standards? Which venues/methods have you found to be most effective? Does most of this information sharing occur between your college and two- or four- year institutions? Can you give an example of valuable information you obtained from another college? Do you find the opportunities provided by the commission to help colleges access information from other colleges to be satisfactory?
  - b. (NCA AQIP) As part of AQIP, colleges are required to share effective practices related to meeting accreditation standards. Which venues/methods have you found to be most effective? Does most of this information sharing occur between your college and two- or four- year institutions? Can you give an example of valuable information you obtained from another college? Do you find the opportunities provided by the commission to help colleges access information from other colleges to be satisfactory?
10. (ALL) What does your college find more valuable, the training from the commission or best practices shared by other colleges who have been through the accreditation process?

### Experience as an Evaluator (if applicable)

11. (ALL) Have you participated in a review team? If yes, how many times? What training did you receive? How would assess the effectiveness of the training you received in preparing you to conduct a successful review? What was most helpful and what would have been more helpful? If you have served on multiple teams, how would you describe the consistency in results among the different teams on which you served? How would you assess the commission's efforts to ensure consistency among these committees/teams in terms of the reviews they produce?

### Concluding Question (ALL)

12. Is there anything else you would like to add about your college's experience with accreditation that may be relevant to our study? Do you have any questions for me?

# Appendix E: Letter to College Presidents

## Letter to ACCJC CEOs

Dear President <last name>:

The Research and Planning Group (RP Group) for California Community Colleges is currently conducting a study to gather and disseminate information about accreditation practices nationwide. In the first phase of the project, we conducted extensive interviews with staff at all seven regional accrediting commissions across the country. The purpose of phase two is to create a compendium of perspectives from different colleges within the Western Association of Schools and Colleges Accrediting Commission of Junior and Community Colleges (WASC-ACCJC), the North Central Association of School and Colleges Higher Learning Commission (NCA-HLC) and the Southern Association of Colleges and Schools Commission on Colleges (SACS-COC) regions on topics such as training, site visit experiences and how effective practices are identified and shared.

We have identified <college name> as one of the institutions within the <commission>region that we would like to study. We are, thus, asking for one hour of your (or an appointed designee) time for a telephone interview. Additionally, we would like to interview your accreditation liaison officer and a faculty member who has been directly involved in your accreditation process. All responses will be kept confidential and the results will be presented in such a way that colleges' identities will be anonymous.

The final report will be openly shared on our Web site, [www.rpgroup.org](http://www.rpgroup.org) and available for all to download free of charge. Our intent is to provide information on accreditation "best practices" and create new opportunities for discussion.

The researcher listed below has been assigned to your college and will be contacting you shortly to make interview arrangements and get the referrals for the other two people mentioned above. However, if you would like to contact her immediately, please feel free to do so:

Darla Cooper  
Associate Director,  
Center for Student Success  
Research and Planning Group

OR

Diane Rodriguez-Kiino  
Research Consultant  
Research and Planning Group

As you may already be familiar with, the RP Group is a non-profit organization that works to strengthen the ability of California community colleges to undertake high quality research, planning and assessments. I invite you to explore our website at [www.rpgroup.org](http://www.rpgroup.org) to learn more about our organization. In the meantime, if you have questions, please feel free to contact Dr. Darla Cooper. I thank you in advance for your time and effort on this project. I am sure that your college's insights will be pivotal to the success of this project.

Sincerely,  
Barbara McNeice-Stallard, MSc  
President, Research and Planning Group for California

## Letter to NCA & SACS CEOs

Dear President <last name>:

The Research and Planning Group (RP Group) for California Community Colleges is currently conducting a study to gather and disseminate information about accreditation practices nationwide. In the first phase of the project, we conducted extensive interviews with staff at all seven regional accrediting commissions across the country. The purpose of phase two is to create a compendium of perspectives from different colleges within the Western Association of Schools and Colleges Accrediting Commission of Junior and Community Colleges (WASC-ACCJC), the North Central Association of School and Colleges Higher Learning Commission (NCA-HLC) and the Southern Association of Colleges and Schools Commission on Colleges (SACS-COC) regions on topics such as training, site visit experiences and how effective practices are identified and shared.

We have identified <college name> as one of the institutions within the <commission>region that we would like to study. We are, thus, asking for one hour of your (or an appointed designee) time for a telephone interview. Additionally, we would like to interview your accreditation liaison officer and a faculty member who has been directly involved in your accreditation process. All responses will be kept confidential and the results will be presented in such a way that colleges' identities will be anonymous.

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The RP Group is a non-profit organization that works to strengthen the ability of California community colleges to undertake high quality research, planning and assessments. I invite you to explore our website at [www.rpgroup.org](http://www.rpgroup.org) to learn more about our organization. In the meantime, if you have questions, please feel free to contact Dr. Darla Cooper. I thank you in advance for your time and effort on this project. I am sure that your college's insights will be pivotal to the success of this project.

Sincerely,  
Barbara McNeice-Stallard, MSc  
President, Research and Planning Group for California Community Colleges

# Appendix F: Discussing Accreditation – Findings, Discussion Questions and Report Back from the Field on Community College Accreditation Policies and Practices

*The Research and Planning Group for **California Community Colleges** (RP Group) **presents the following summary of findings and related discussion questions resulting from an examination of community college accreditation policies and practices across the United States.** This document is not a traditional research brief. **Representing a new approach to engaging stakeholders with our research, the RP Group originally produced a draft of this document that was used in discussions with key constituent groups in California, including Accrediting Commission for Community and Junior Colleges staff; the chief executive officers, trustee, chief instructional officers and chief student services officers boards; the Academic Senate for California Community Colleges executive committee; the California Community Colleges Chancellor’s Office cabinet and the Consultation Council’s accreditation taskforce. As a result of this process, we offer a final version of this discussion guide, which incorporates additional feedback and insights from the field.***

## Introduction

Each year, public community colleges across the nation undergo accreditation review and reaffirmation. Completion of this external evaluation ensures that an institution meets a level of quality and accountability. As an accredited institution, a college can obtain key resources and support its students in securing financial aid, transferring credits and signaling to employers their readiness for the workplace. Who performs this review, how colleges engage with this process and when it takes place vary according to the region in which an institution is located. In California, community colleges must engage in accreditation review every six years through the Western Association of Schools and Colleges-Accrediting Commission for Community and Junior Colleges (ACCJC).

With accreditation reaffirmation comes the opportunity for quality assurance *and* continuous quality improvement—a chance to focus on organizational excellence and student success. Yet, in recent years, a disconnect developed between California’s community colleges and ACCJC about whether or not the current process in fact promotes a focus on continuous quality improvement. In 2009, the RP Group decided to add new perspective on this issue by doing what it does best—research.

The RP Group is an organization comprised of researchers and planners often deeply involved in their own institution’s reaffirmation process as well as in the review of others. In turn, we became particularly interested in what could be learned from the work of other accrediting commissions across the nation. Through this investigation, the RP Group ultimately aimed to **offer contextual information**

The RP Group is a nonprofit organization working to build a community college culture that views planning, evidence-based decision-making and institutional effectiveness as key strategies for student success.

**about accreditation policies and practices nationwide and engender a productive discussion** among ACCJC, the state's community colleges and key constituent groups about how these findings might assist in optimizing the accreditation process for true quality improvement.

The RP Group, much like the Council for Higher Education Accreditation, believes that students are more likely to benefit from systems that focus on quality improvement (CHEA, 2003 & 2010; Harvey, 2005). When review systems use a quality assurance lens, they are designed to identify deficiencies and ensure that steps are taken to correct these problems, thus focusing efforts on process improvements. Quality improvement-focused review systems are designed to proactively improve the entire institution so that the focus is put on the quality of what students receive. Furthermore, quality assurance alone does not naturally lead to quality improvement; quality assurance encourages a process that is narrowly focused on accountability, which can discourage improvement efforts (Dano & Stensaker, 2007; Leef & Burris, 2004; Middlehurst, 1997).

The RP Group launched this accreditation study in spring 2009 by examining policies and practices of the nation's seven regional accrediting agencies. With support from the Walter S. Johnson Foundation, the RP Group extended its research to explore the perspectives of individual community colleges engaged with three select commissions. A final phase of this work centered on sharing key findings from this research with both the ACCJC staff and California community college constituent groups and discussing potential future action.

## Reader's Guide

The RP Group presents the following discussion guide which:

- Summarizes information discovered through our investigation
- Incorporates feedback gathered through conversations with key constituents designed to validate and augment this research
- Aims to promote further dialogue about what these findings mean and how they can be used by all involved parties to ensure accreditation achieves both quality assurance and quality improvement

The guide starts with an overview of the study's methodology and a table profiling the three regional commissions investigated in-depth by the RP Group. The subsequent sections outline key findings, found in italics, that emerged from the research related to processes employed and supports offered by these commissions with the intention of promoting quality improvement. These key findings are accompanied by questions that can be used to facilitate discussions about accreditation in California community colleges. The guide concludes with a report back from the field on potential action steps.

While the RP Group did integrate input and insights from the field into this final guide after discussions with constituent groups, the **content** remains largely the same as the original draft with one primary exception. Based on questions and comments that arose during these conversations, we added a new section summarizing our research findings on how commissions foster relationships with their member colleges. Otherwise, discussions with constituents

primarily focused on future steps individuals and organizations might take as a result of the research findings, which are reflected in the final section.

Readers can find an extensive and detailed description of this research in *Focusing Accreditation on Quality Improvement: Findings from an Exploration of Community College Accreditation Policies and Practices* at [www.rpgroup.org](http://www.rpgroup.org). We include in this report an overview of the history and purpose of accreditation, a full explanation of the study's methodology, an in-depth presentation of accreditation policies and practices from the three selected commissions paired with member colleges' perceptions of their efforts and a discussion of these findings.

## Methodology

The RP Group began its investigation by reviewing the websites of and key documents from all seven regional commissions (see sidebar “Regional Accrediting Commissions”) and engaging in phone interviews with representatives from these commissions including chairs, presidents and staff. This first stage of the study focused on: (1) what process and practices each commission employs during its review, (2) how commissions train both visiting teams and colleges in preparation for reaffirmation, (3) how colleges in each region learn about effective practices aligned with accreditation standards and (4) how the region's two- and four-year institutions engage with one another as it relates to accreditation.

To extend this research and add the voice of colleges affected by the policies and practices of different commissions, the RP Group selected three accrediting agencies for deeper investigation including ACCJC, SACS and NCA-HLC. We chose SACS and NCA-HLC because these commissions emerged in the first stage as particularly innovative and quality-driven. We selected ACCJC because it directly impacts the California community colleges, which the RP Group serves. The RP Group contacted representatives from colleges within these regions representing a range of size and location and including those institutions that had successfully achieved reaffirmation as well as those that had been or were currently on sanction. A total of 29 interviews involved chief executive officers (CEOs), accreditation liaison officers and faculty from 11 different institutions.

These interviews built on the four abovementioned areas for investigation and added questions related to: (1) how colleges perceive the definition of and balance between compliance and

### Regional Accrediting Commissions

Middle States Association of Colleges & Schools – Middle States Commission on Higher Education

New England Association of Schools & Colleges – Commission on Institutions of Higher Education

North Central Association of Colleges & Schools – Higher Learning Commission (NCA-HLC)\*

Northwest Commission of Colleges & Universities

Southern Association of Colleges and Schools – Commission on Colleges (SACS)\*

Western Association of Schools & Colleges – Accreditation Commission for Community & Junior Colleges (ACCJC)\*

Western Association of Schools & Colleges – Accrediting Commission for Senior Colleges and Universities

*\*Investigated in depth through Phase II*

improvement within the accreditation process, (2) how colleges view their commission's efforts to ensure the consistent application of standards and (3) how colleges assess their return on investment from accreditation. When necessary, the research team also reconnected with representatives from these commissions for further information and clarification on data.

The table below offers a profile of the three regional commissions studied in-depth.

### Regional Accreditation Commission Profile

	ACCJC	NCA-HLC	SACS
<b>Year Founded</b>	1962	1895	1895
<b>Geographic Region</b>	California, Hawaii, Guam, American Samoa, Northern Mariana Islands, Palau, Micronesia, Marshall Islands	Arizona, Arkansas, Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, New Mexico, North Dakota, Ohio, Oklahoma, South Dakota, West Virginia, Wisconsin, Wyoming	Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia, Latin America
<b>Type of Institution Served</b>	Associate degree-granting institutions	Institutions of higher education	Institutions of higher education
<b>Number of Institutions Served</b>	135	~1,000	796
<b>Number of Commission Staff</b>	8	40	42
<b>Number of Standards &amp; Subsections of the Standards</b>	4 standards 127 subsections (135 for multi-college districts)	5 standards 21 subsections	4 standards 75 subsections
<b>Length of Review Cycle</b>	6 years with required Midterm Report	7 - 10 years depending on process selected	10 years with required Fifth Year Report

## Discussion of Findings

The RP Group used this study to gather information about the processes and supports employed by the selected commissions and the experiences and perceptions of colleges involved with these agencies. This research offers insight into how the accreditation of California community colleges might evolve to achieve maximum effectiveness for all parties involved.

The following section offers a series of key findings and related discussion questions organized by how commissions might: (a) set the stage for quality improvement, (b) develop their relationship with member colleges, (c) support institutions in achieving reaffirmation, (d) consistently apply standards and effectively use sanctions throughout a review and (e) generate a positive return on an institution's investment.

At the same time, colleges and their constituent groups have an important role in supporting quality improvement; in some cases, we present findings and questions that specifically address the responsibilities of institutions in the accreditation process.

### A. Setting the Stage for Quality Improvement

The commissions studied represent a continuum of approaches to balancing quality improvement and compliance in their reaffirmation processes. This investigation suggests that *shifting the focus to quality improvement requires a reinvention of the accreditation process*. NCA-HLC's Academic Quality Improvement Process (AQIP) offers a reaffirmation model that fully integrates continuous quality improvement through a series of activities completed during a seven-year review cycle (see sidebar "Spotlight on NCA-HLC's Academic Quality Improvement Process"). Colleges choose AQIP participation and must demonstrate a commitment to quality improvement through an initial self-assessment of strengths, weaknesses, culture and systems as well as ongoing participation in dialogue,

#### Spotlight on NCA-HLC's Academic Quality Improvement Process

NCA-HLC launched AQIP in 1999 with support from the Pew Charitable Trusts. AQIP includes the following seven events:

*Application and Self-Assessment* – internal evaluation of college commitment to improvement

*Strategy Forum* – intensive, commission-sponsored conference designed to support colleges in debating organizational change needs & selecting "action projects"

*Action Projects* – a series of initiatives that demonstrate a college's commitment to quality improvement; institutions must show continuous engagement with three action projects including one focused on teaching & learning

*Systems Portfolio* – a college's inventory of best practices & areas for growth submitted every four years to demonstrate achievement of accreditation criteria to NCA

*Systems Appraisal* – NCA's peer-review of a Systems Portfolio resulting in an extensive report to the college and commission

*Quality Checkup Visit* – a two-day onsite meeting conducted within two years of reaffirmation

*Reaffirmation for Accreditation* – a summative review of a college's accreditation standing based on these activities and their submission of related documents

planning, action and reflection. According to those involved with AQIP, the process naturally enables institutions to meet NCA-HLC standards. In the words of one college president, “If we focus our efforts on quality improvement, then we have compliance and transparency.”

SACS partially integrates quality improvement efforts into a more traditional review approach through its Quality Enhancement Plan (QEP). In addition to submitting documentation of compliance with commission standards, SACS institutions also complete a plan for improving a particular aspect of student learning. College representatives generally appreciated SACS’ effort to focus on quality improvement through the QEP with some respondents specifically noting the value of honing in on an issue of unique importance to a given institution. One area for improvement some interviewees mentioned for SACS included more clear and consistent direction regarding what makes an acceptable QEP.

A review of ACCJC standards and interviews with commission staff indicate that ACCJC clearly aims to promote quality improvement through accreditation. At the same time, the commission does not employ a process comparable to those of NCA-HLC and SACS, which actively engages colleges with quality improvement efforts. As a result, college interviewees remarked that by default the emphasis falls on compliance which, while critical, can detract from institutional improvement priorities—implying a disconnect between the intentions of the commission and the experience of the colleges.

At the same time, both commission and college respondents noted that *institutions develop and drive a culture of improvement—regardless of the accreditation process*. Interviewees collectively expressed that college leadership particularly plays a vital role in generating a focus on quality improvement. However, frequent turnover in administrative leadership makes it difficult for colleges to achieve and sustain this kind of culture.

### **Discussion questions:**

- How might the accreditation process improve to specifically engage institutions in activities designed to foster quality improvement?
- What can college leadership, particularly CEOs and presidents, do to support a culture of improvement that enables their institution to maximize the accreditation process for organizational renewal and change?

## **B. Developing a Relationship between the Commission and Colleges**

Interview results underscore that the relationship each commission develops with its member colleges is a critical component of the accreditation process. Colleges in all three regions were generally positive about direct interactions with their commissions, citing staff responsiveness and willingness to help. For the colleges interviewed, maintaining a good relationship with their commission surfaced as a key factor in their successful navigation of the accreditation process.

This research suggests that a key component of a healthy and productive relationship is the opportunity for institutions to provide feedback to their commission on matters related to their

own experiences and accreditation at large. Two primary elements surfaced as critical to these feedback loops: receptivity and security. This research indicates that *transparent, open and honest opportunities for feedback without fear of retribution are critical to a commission's relationship with member colleges. Moreover, when a commission demonstrates that it takes into account colleges' feedback, institutions feel heard and a valued part of the overall process.*

In this regard, interviews suggest that the relationship between a commission and its member colleges varied across the three regions studied. NCA-HLC respondents cited being satisfied with intentional opportunities to provide feedback both in the commission's annual meetings and trainings. One respondent noted a particular example where the commission implemented a change based on college feedback and then explained where the change originated at the next annual meeting. Additionally, NCA-HLC significantly redesigned its Action Project Directory based on institutional input, which the commission noted on its website and respondents themselves recognized in interviews.

SACS interviewees indicated that the commission offered adequate opportunities for feedback, but noted potential consequences for providing input. Respondents from two of the three colleges interviewed expressed a concern about providing candid feedback for fear of retaliation from SACS. Respondents from the third college studied were clearly satisfied with their opportunity to provide input, have done so on numerous occasions and did not cite any negative consequences that had occurred as a result.

This research indicated a difference in opinion between ACCJC and the institutions interviewed about opportunities for colleges to provide feedback to the commission. Commission staff reported that they are open to input from colleges and are frequently collecting data in this regard. However, the colleges interviewed found ACCJC generally unreceptive to constructive criticism and expressed a fear of retaliation. As an exception, two college CEOs interviewed expressed satisfaction with their ability to provide feedback to the commission. They suggested this comfort resulted from personal relationships they had with certain commissioners and/or commission staff that allowed them the chance to provide input without the fear of it negatively impacting their institutions.

One key observation made by a president from a SACS institution is that colleges in his region view SACS as "our" commission, but that colleges in the ACCJC region view ACCJC as "the" commission, connoting a lack of ownership or collegiality.

### **Discussion questions:**

- How can ACCJC and colleges collectively examine the perception of "the" commission versus "our" commission?
- What do the colleges need to understand better about ACCJC and the work it does?
- What does ACCJC need to understand better about what the colleges experience and perceive?

## C. Supporting Colleges in Achieving Reaffirmation

**1. Training constituents involved in reaffirmation.** The RP Group's investigation indicates *a training program that is comprehensive, learner-centered, inclusive and integral to the accreditation process is most useful to institutions in their pursuit of reaffirmation*. For example, SACS offers a multi-pronged training approach designed to meet the needs of different stakeholders involved in accreditation. Their program includes three commission-sponsored events for training and effective practices sharing, extensive written and web-based resources for institutions and review committees as well as a staff position designed to collect feedback from colleges and incorporate it into training efforts. Representatives from colleges served by SACS universally described these efforts as highly useful to their reaffirmation preparation.

NCA-HLC and ACCJC also provide a range of training opportunities and support; however college interviewees were less satisfied with their experience. NCA-HLC offers a multi-year Academy for Assessment of Student Learning, an annual conference, ongoing workshops and the abovementioned Strategy Forum. ACCJC conducts specialized workshops, taps existing conferences and meetings of professional organizations to make presentations and responds to requests from individual institutions for ACCJC staff to make an in-person visit. NCA-HLC respondents expressed the desire for more prescriptive content that could be applied directly to their colleges. ACCJC respondents indicated that the commission's training lacks cohesion and shared concerns about the timing, quality, consistency and relevance of the commission's offerings. At the same time, the commission asserted that they do not have the capacity to deliver a full professional development program and believed that colleges need to take greater responsibility for these kinds of trainings as well as effective practices sharing.

All college respondents noted that *positive learning occurs when serving on a review team—both in understanding how to be an effective reviewer as well as how to best prepare for reaffirmation as an institution*. Both NCA-HLC and ACCJC, for example, rely heavily on face-to-face training and web-based resources to provide an overview of the review process and evaluator responsibilities. SACS offers a tutorial video clip that evaluators can access online in addition to extensive, detailed written materials.

NCA-HLC respondents reported that these practical resources are instrumental to their understanding of the evaluation process. SACS respondents were appreciative of the training provided at the annual meeting, but felt the video left something to be desired. While ACCJC respondents appreciated the opportunities provided by the commission for reviewers, the majority of interviewees were less content with the quality of the face-to-face training sessions, citing dissatisfaction with the minimal opportunities for participant engagement and practical application that would be helpful in preparing to serve on a review team. However, what was common across all three commissions is that several interviewees noted that they are motivated to attend evaluator training for the increased insight they can share with their campuses in preparation for reaffirmation and that the actual experience of serving on a team provides the best training of all.

**2. Sharing effective practices.** All commissions offer formal opportunities designed to showcase effective practices that demonstrate achievement of accreditation standards. NCA-

HLC in particular builds effective practices sharing into the AQIP process—making it a natural extension of reaffirmation rather than an additional support provided by the commission. However, the study indicates that *formal and informal networks created by the colleges themselves are particularly effective in offering peer guidance and specific “nuts and bolts” information*. For example, administrators from NCA-HLC colleges implementing AQIP maintain a statewide matchmaking system to connect institutions and encourage idea sharing; moreover, at least eight states maintain formal AQIP associations. SACS colleges host peer institutions for professional development events focused on accreditation.

At present, California’s community colleges do not come together across constituency groups solely for the purposes of sharing effective practices in preparation for accreditation review. ACCJC both co-sponsors conferences and leverages existing venues to present effective practices. However, college interviewees explained that they do not necessarily avail themselves of these opportunities and when they do, they do not find them particularly informative.

**3. Helping institutions interpret and meet standards.** While all accrediting agencies offer different opportunities for training and effective practices sharing, nearly all college interviewees across the three commissions studied underscored that *institutions need practical, specific and direct guidance on how to understand and achieve standards*. Interviewees from smaller colleges particularly expressed the desire for a more prescriptive process while, in some cases, those from larger institutions appreciated a flexible approach that allowed them to maintain their unique identity and way of being.

ACCJC in particular has responded to feedback from its constituents about the need for direction by introducing rubrics that aim to codify how well a college has done in reaching compliance with certain standards as well as pinpoint what steps need to be taken to fulfill these standards. College respondents appreciated these efforts and commended the utility of these tools.

### **Discussion Questions:**

- How can ACCJC and California’s community colleges work together to design training opportunities that demonstrate the principles of quality improvement and explicitly guide institutions on how to meet accreditation standards?
- How can the commission build on and extend the “learning-by-doing” opportunity afforded by review team participation?
- How can California community colleges take responsibility for organizing among themselves to share effective practices?

## **D. Consistently Applying Standards and Effectively Using Sanctions**

**1. Ensuring consistent application of standards during the review process and status recommendation.** Commissions have the responsibility of ensuring the fair and equal treatment of colleges throughout the accreditation process. Regional accrediting bodies take different approaches to assuring the consistent application of standards both in how they utilize review teams to assess colleges and in determining a college’s status. This research suggests *commissions promote integrity in the assessment of colleges when they implement a multi-layered, transparent review process that (1) relies on an evaluation team’s specific*

*recommendations for improvement and (2) leaves all aspects of the decision on accreditation status under the sole purview of the commission.*

For example, SACS implements efforts designed to create consistency between the commission's expectations, the assessment of review committees and the ultimate reaffirmation of a college. SACS assigns a staff member or an "institutional liaison" to each review team who participates in reviewer trainings and takes part in college visits. In the words of one college's accreditation liaison officer, these staffers have a "tremendous impact" on achieving fidelity across teams.

SACS review committees only offer feedback to the commission about a college's need for improvement as related to specific standards and do not make any recommendations related to reaffirmation status. The commission takes visiting team input and suggestions through a two-part internal review and ultimately makes a recommendation to its trustees who finally determine a college's status. NCA-HLC similarly applies a three-pronged process that includes an initial assessment by a reaffirmation panel that is forwarded to an Institutional Actions Council (IAC) of experienced peer reviewers who review the recommendations. The IAC then makes a final recommendation to the commission, which votes on a college's reaffirmation.

Interviewees from colleges involved with ACCJC expressed particular concern about the consistent application of standards in both the review and reaffirmation of California community colleges. Unlike SACS and NCA-HLC, ACCJC does not implement an intermediate review of visiting team recommendations before the commission determines a college's status. Respondents referenced personal experience with commission staff having revised visiting team reports and the commission making decisions on accreditation status that were more severe than review team recommendations—both alluding to potential inconsistencies between what the commission enforces and what review teams identify as meeting standards during the visit. This finding may result from the fact that ACCJC staff members take into account a longer history of information on a college's actions (12 years) versus visiting teams, which only consider information gathered and reports produced during the previous accreditation cycle (6 years). It is important to note that ACCJC staff refuted claims that it changes visiting team reports without the direct involvement of the team chair.

While respondents from all three commissions discussed inconsistency across review teams including issues of team member selection and qualifications, team composition and teams' abilities to produce quality reviews, ACCJC respondents felt that these inconsistencies occurred more commonly than the respondents from SACS and NCA-HLC. ACCJC respondents also noted problems with the high intensity of review team workload coupled with the short length of the visit.

**2. Holding all institutions of higher education to the same standards.** NCA-HLC and SACS accredit all public institutions of higher education in their region, unlike ACCJC, which only reviews and reaffirms the accreditation of two-year institutions.<sup>2</sup> NCA-HLC and SACS colleges remarked that *holding community colleges to the same standards as their baccalaureate-*

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<sup>2</sup> A history of WASC's separation of the accreditation of two- and four-year institutions can be found in the RP Group's full report of accreditation research and findings at [www.rpgroup.org](http://www.rpgroup.org).

*granting counterparts can promote consistency in culture, quality and expectations for students.* Conversely, some interviewees representing ACCJC colleges felt they had little to learn from four-year institutions in their region. At the same time, others noted that the lack of two- and four-year integration may lead to the negative perception that these segments are held to different standards and have different expectations for students.

At the same time, many respondents from all three regions expressed concern about two-year institutions meeting the same mounting expectations for planning and requirements for reaffirmation as baccalaureate-granting institutions without the same resources or capacity.

**3. Implementing sanctions.** Interviews with commission and college representatives ultimately agree that *sanctions can motivate positive action* when a college is not meeting accreditation standards. The research also reveals that *how and when a commission applies a sanction can influence a college's response*. Both NCA-HLC and SACS expressed that their primary goal is to work with their respective institutions to keep them off sanction; in turn they have built steps into their reaffirmation process that essentially provides for a “cure period” during which colleges can remediate a concern before receiving this designation. In turn, very few colleges served by these commissions are on sanction and interviewees considered a sanction to be a very serious and negative outcome to be avoided at all costs.

A proportionally larger number of community colleges accredited by ACCJC are on a sanction (as of January 2010, 1% and 3% for NCA-HLC and SACS institutions respectively compared with 14% of ACCJC colleges). As reported by ACCJC, the commission uses sanctions to enforce the US Department of Education’s “two year rule”—a regulation indicating that institutions have two years to meet recommendations once made. ACCJC has a series of actions they assign colleges ranging from reaffirmation to probation; however, the commission does not apply these actions in a uniform sequential manner where all colleges have a chance to remediate issues discovered during their review before being placed on a sanction. For example, in one case a college might be placed on probation while another may have the chance to fix an issue and document this change through a short-term progress report.

The research indicates that this application of sanctions provokes a range of reactions from ACCJC colleges. Some college respondents noted the urgency a sanction inspires while others expressed confusion about what causes one institution to be placed on sanction over another. Still others shared that the number of institutions in the region on a sanction actually diminished the significance of this status at their college and in turn, their sense of exigency toward improvement.

### **Discussion questions:**

- What additional steps are required in the accreditation review process to ensure the consistent application of standards and awarding of reaffirmation across all California community colleges?
- How might California community colleges benefit by being held to the same standards as baccalaureate institutions? Should the WASC consider a merger of its two commissions?

- What should be the role of sanctions in motivating institutional change? How can the commission encourage a sense of self-efficacy among its colleges that results in organizational improvement?

## E. Generating a Positive Return on Investment

Ultimately, commissions have the opportunity to generate a sense among their respective colleges that undertaking the accreditation process is worth the substantial commitment of time and resource required for reaffirmation. This investigation suggests *commissions engender a positive return on a college's investment when they demonstrate theoretically and practically that they value quality rather than quantity throughout the review process.*

NCA-HLC AQIP participants cited enhanced faculty dialogue, increased attention to institutional improvement and the opportunity to extend the application of AQIP principles to other parts of their colleges as significant benefits resulting from their accreditation efforts. Similarly, interviewees from SACS colleges noted the focus on quality afforded by completion of their QEP and the ability to rapidly advance action through reaffirmation as particularly worthwhile. Colleges involved with ACCJC also expressed satisfaction with the ability to leverage accreditation for institutional change. However, unlike NCA-HLC and SACS interviewees, several ACCJC respondents questioned the value of the review process given the amount of time, effort and resources required for reaffirmation.

Some respondents from across the commissions studied noted that *colleges realize a positive return on their investment when they integrate accreditation requirements into everyday institutional practices.* Interviewees noted that on one hand, colleges must take responsibility for doing so and those that have linked accreditation with their planning processes cite greater ease with preparing for review. On the other hand, respondents indicated that when a commission takes an approach to reaffirmation that emphasizes compliance rather than improvement, real and lasting change is difficult to achieve.

### Discussion questions:

- How can the commission act to ensure that there is a balance between the work required for accreditation review and the results achieved (i.e., positive return on investment)?
- What can California community colleges do to integrate accreditation requirements into planning efforts?

## Report Back from the Field

As noted above, the RP Group held extensive discussions about the research findings with the ACCJC staff; the chief executive officer, trustee, chief instructional officer and chief student service officer boards; the Academic Senate for California Community Colleges executive committee; the California Community College Chancellor's Office cabinet and the Consultation

Council's accreditation taskforce. The results were also discussed by a mix of community college practitioners at a Community College League of California conference session.

These meetings were notable for two things. First, all parties were eager to explore ways to enhance the accreditation process and improve the relationship between ACCJC and the colleges. For example, both the commission staff and numerous constituency groups noted that they were encouraged by the trainings that were jointly presented by the commission and various practitioner organizations during 2010, with the new interactive components being especially appreciated by the field.

Second, clear themes emerged about specific changes that could be made so that accreditation fosters excellence and ensures that minimum standards are consistently met. These changes involve amending existing standards and accreditation processes, strengthening training and support and building collaborations among constituency groups, colleges and accrediting agencies to provide this support.

These changes are ones that would be most effectively implemented through a partnership of ACCJC, its member institutions and practitioner groups that can help to augment key functions such as offering training, sharing effective practices and providing support to colleges at risk of not meeting accreditation standards. To emphasize where colleges, knowledgeable practitioners and constituency organizations can support the work of the commission, the ideas below indicate items that might be led by the commission, led by the field or jointly undertaken by the two.

The RP Group is publishing this list of ideas in the hope that it will be used to launch a productive, statewide conversation about how to best support quality assurance and improvement, particularly in an era of funding scarcity.

## **1) Amending Standards and Processes**

### **Emphasize quality and improvement through:**

- An accreditation process where the standards, self-study and accreditation visit focus more on teaching, learning and student success and less on internal systems (ACCJC-led effort)
- A consortium of colleges that actively works to meet a set of quality standards that go beyond the accreditation standards (field-led effort)

### **Recognition of the limited capacities of colleges to continuously address the current accreditation workload as exhibited through:**

- A set of simplified standards that evaluate quality with minimum redundancy (ACCJC-led effort)
- A more streamlined system for self-studies, reports to the commission and college visits (ACCJC-led effort)

## Greater participation of the public in the accreditation process through:

- A community college trustee assigned to every visiting team to represent the public (joint field and ACCJC effort)

## 2) Strengthening Practitioner Training and Support

### Stronger understanding of accreditation processes and effective practices through:

- A commission staff person or member of the commission assigned to every visiting team to guide the interpretation of standards (ACCJC-led effort)
- Learner-centered training programs for college faculty and staff (joint field and ACCJC effort)
- Regional venues for colleges to share promising practices related to the accreditation standards (field-led effort)

### Colleges facing sanctions or on sanction could better meet or exceed the accreditation standard minimum with:

- A period prior to an accreditation team visit where colleges can opt for help from a technical assistance group comprised of experienced peers that is approved by the commission (joint field and ACCJC effort)
- A period after a college has been placed on sanction where a college can opt for help from a technical assistance group comprised of experienced peers that is approved by the commission (joint field and ACCJC effort)

## 3) Collaborating with Constituency Groups and Accrediting Agencies

### ACCJC would gain additional capacity by:

- Constituency groups such as the Academic Senate for California Community Colleges or the California Community Colleges Chief Instructional Officers offering training using content that is approved by the commission (joint field and ACCJC effort)
- Expanding collaboration with WASC Senior to implement specific components of accreditation (ACCJC-led effort)
- Increasing dues to hire more commission staff, provide additional outreach and support training (joint field and ACCJC effort)

### For more information...

For the full report of the study's findings, visit: [www.rpgroup.org](http://www.rpgroup.org).

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