SACSCOC Compliance Certification and Review

Presented to the Board of Trustees
September 19, 2019
Principles of Accreditation

(revision approved in December 2017; effective January 2018)

• Largely a re-structuring of 2012 principles, with relatively few substantive changes, but considerable consolidation of closely related principles.
  • --Board evaluation (4.2.g)
  • --Student debt (12.6)
  • --Multi-level governance (4.3) [reformulated, more than new]

• Our submission will address 2018 Principles

• Our submission will be evidence driven
SECTION 4: Governing Board

• 4.1 Governing Board Characteristics
• The institution has a governing board of at least five members that (a) is the legal body with specific authority over the institution. (b) exercises fiduciary oversight of the institution. (c) ensures that both the presiding officer of the board and a majority of other voting members of the board are free of any contractual, employment, personal, or familial financial interest in the institution. (d) is not controlled by a minority of board members or by organizations or institutions separate from it. (e) is not presided over by the chief executive officer of the institution. (Governing board characteristics) [CR]
SECTION 4: Governing Board

4.2a Mission Review
• The governing board ensures the regular review of the institution’s mission. (Mission review)

4.2b Board/Administrative Distinction
• The governing board ensures a clear and appropriate distinction between the policy-making function of the board and the responsibility of the administration and faculty to administer and implement policy. (Board/administrative distinction)
SECTION 4: Governing Board

4.2c CEO Evaluation
• The governing board selects and regularly evaluates the institution’s chief executive officer. (CEO evaluation/selection)

4.2d Conflict of Interest
• The governing board defines and addresses potential conflict of interest for its members. (Conflict of interest)

4.2e Board Dismissal
• The governing board has appropriate and fair processes for the dismissal of a board member. (Board dismissal)
SECTION 4: Governing Board

4.2f External Influence
• The governing board protects the institution from undue influence by external persons or bodies. (External influence)

4.2g Board Self Evaluation
• The governing board defines and regularly evaluates its responsibilities and expectations. (Board self-evaluation)

4.3 Multiple-Level Governing Structure
• If an institution’s governing board does not retain sole legal authority and operating control in a multiple-level governance system, then the institution clearly defines the following areas within its governance structure: (a) institution’s mission, (b) fiscal stability of the institution, and (c) institutional policy. (Multi-level governance)
14.5.a “Reaffirmation of Accreditation and Subsequent Reports”

• **Applicable Policy Statement.** If an institution is part of a system or corporate structure, a description of the system operation (or corporate structure) is submitted as part of the Compliance Certification for the decennial review. The description should be designed to help members of the peer review committees understand the mission, governance, and operating procedures of the system and the individual institution’s role within that system.

• **Documentation:** The institution should provide a description of the system operation and structure or the corporate structure if this applies.
The SACSCOC Reaffirmation Process

• **STAGE 1: The Off-Site Process**
  • Institution Submits Compliance Certification
    ✓ [by September 10, 2019]
  • Off-Site Review Committee
    • 9 or 10 members
    • Spend 2 weeks on each of 3 institutions
    • Conference calls, emails, SharePoint, but no interaction with institution [except IT issues]
    • Meet in Atlanta [November 5-8, 2019]
  • Outcome: “Preliminary Findings”
    • [by early December 2019]
The SACSCOC Reaffirmation Process

• **STAGE 2: The On-Site Process**
  
  • Institution Submits
    
    • Focused Report (*responses to off-site preliminary report*)
    
    • Quality Enhancement Plan
      
      • [6 weeks before visit – by mid-February, 2020]
  
  • On-Site Review Committee
    
    • Generally 7-9 members
    
    • E-mails, conference calls, possible interaction with institution
  
  • Institution Hosts On-Site Visit [March 30-April 2, 2020]
  
  • Outcome: Report of the Reaffirmation Committee [draft within a few weeks – final in a month or so after visit]
The SACSCOC Reaffirmation Process

• **STAGE 3: Commission Action**
  - Institution Submits Response to the Report
    - [5 months after visit: September 2, 2020]
  - Compliance & Reports Committee (of BOT)

• Outcomes:
  - Commission Action [December, 2020]
  - Action Letter [January 2021]
SACSCOC Reaffirmation Process:
Desired Outcomes

• **Compliance Certification** (Off-Site Review)
  – “Preliminary Findings”
  Compliance/Non-Compliance

• **Focused Report** (On-Site Process)
  – “Reaffirmation Committee Report”
  No Recommendations/Recommendations

• **Response Report** (SACSCOC BOT Review)
  – “Action Letter”
  • Reaffirm/Deny Reaffirmation (with continued accreditation)
  • No Monitoring/Monitoring
Number of Findings of Non-Compliance at 3 REAFFIRMATION Review Stages
(Class of 2018 | Preliminary Data [n=76])

- Off-Site: 1,154
- On-Site: 190
- C&R: 43
8.2– Student outcomes (in context of 7.1 and 8.1)

The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:

a. student learning outcomes for each of its educational programs, (Student outcomes: educational programs)
b. student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs (Student outcomes: general education)
c. academic and student services that support student success. (Student outcomes: academic and student services)

7.3 administrative effectiveness (third step of process not required here)
Distinctions Among Related Standards

Institutional Effectiveness

Distinctions among related standards:

CR 7.1 (Institutional planning) [CR]

vs.

8.2.a (Student outcomes: educational programs)
8.2.b (Student outcomes: general education)
8.2.c (Student outcomes: academic and student services)
7.3 (Administrative effectiveness) (no use of results required here)

Guidelines for sampling (if used)

8.1 (Student achievement) [CR]

(Completion data-March 29, 2018 letter)
Another area of frequent attention

• Faculty (Section 6)
  --especially adequate number of FT faculty (6.1; 6.2.b) and qualifications of all faculty (6.2.a)
  --use of optional form now available for 6.2.a
    (“Faculty from Prior Review Form”)

  --6.2.c (Program coordination)
Implicit in every standard mandating a policy or procedure is the expectation that the policy or procedure is in writing and has been approved through appropriate institutional processes, published in appropriate institutional documents accessible to those affected by the policy or procedure, and implemented and enforced by the institution.