POLICIES AND PROCEDURES
For Seeking, Maintaining, and Transferring Specialized Program Accreditation
Office of Institutional Effectiveness

Mission Statement
The mission of the Office of Institutional Effectiveness (IE) is to provide leadership to develop, integrate, and improve University- and program-level accreditation, strategic planning, and academic program review and planning, while monitoring institutional compliance with federal regulations.

Vision Statement
To be recognized for providing outstanding human, financial and intellectual resources that support integrative planning and evidence-based decision-making, and ensure high standards of accountability necessary to maximize institutional effectiveness in a premier university.

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Policies and Procedures
for Seeking, Maintaining, and Transferring Specialized
Program Accreditation

Policies
The Office of Institutional Effectiveness oversees the policies
and procedures, and serves as the repository, for all specialized
program and institutional accreditations, licensure, and
certification at Western Michigan University.

In compliance with HLC’s policies regarding PATHWAYS FOR
REAFFIRMATION OF ACCREDITATION AND FEDERAL COMPLIANCE, it is the
policy of Western Michigan University, as administered by the
Office of Institutional Effectiveness, that all academic programs
requiring specialized accreditation for their students to sit for
certification or licensing examinations secure and maintain
accreditation in good standing with agencies recognized by the
U.S. Department of Education (USDE), the Council for Higher
Education Accreditation (CHEA), or the Association of
Specialized & Professional Accreditors (ASPA). Those that do
not secure or maintain the requisite accreditation in good
standing must disclose publicly and clearly the consequences to
the students of the lack thereof. As such, program leadership
may not terminate existing accreditation either through
request or by allowing existing accreditation to lapse.

Further, it is the policy of Western Michigan University, as
administered by the Office of Institutional Effectiveness, that
all accredited academic and institutional service programs are
required to submit electronic copies of all documentation
related to the current accreditation cycle including, but not
limited to, the following:

- Letter or email from the accrediting agency that indicates
  when the program will be under review and requests the
  self-study and other administrative items (e.g., application,
  fees, site visit schedule, etc.)

- Final draft of self-study documents, submitted in MS Word
  format, including all appendices (must be submitted within
  30 days prior to submission to the agency for review)

- Final draft of annual and interim reports, submitted in MS
  Word format, including any supporting material (must be
  submitted within 14 days prior to submission to the agency
  for review)
• Reports and correspondence from the program to the agency (e.g., final submission of self-study, annual and interim reports, rejoinder documents, responses to inquiries, etc.)

• Reports and correspondence from the agency to the program (e.g., site visit team report, agency response to self-study report and/or interim report submission, letters requesting additional information to satisfy standards or guidelines, etc.)

• Letter confirming the program’s accredited status, period for which the program will be accredited, and the period of the next program review

• Notice of pending changes to the accreditation process (e.g., updated standards, agency name change/merger, program’s plans to change agencies, etc.)

While there is no University policy regarding the use or dissemination of accreditation documents (e.g., self-study reports, communication between agencies and programs, final accreditation letters, etc.), the Office of Institutional Effectiveness does comply with its agencies’ public disclosure policies and practices. As such, it is the policy of the Office of Institutional Effectiveness to not share accreditation, certification, or licensure information with the University community or the general public. Non-administrative requests for access to accreditation, certification, or licensure documentation will be directed back to the program in question, and will be subject to the policies and practices of the program’s overseeing department or college.

Procedures
The following procedures pertain exclusively to academic programs housed in the Division of Academic Affairs at Western Michigan University. They are arranged in a workflow or “process” format, and are intended to operationalize a number of existing policies and procedures, as well as provide guidance to first-time and seasoned accreditation coordinators in identifying key points in the process where they may need additional support. Required procedures are specifically identified within the document.

Seeking Specialized Program Accreditation
The Office of Institutional Effectiveness provides assistance during the identification and “discovery” processes for proposed and existing programs to seek specialized program accreditation, especially for those programs whose graduates will sit for certification or licensure.

Initiation of New Accreditation
The Office of Institutional Effectiveness (IE) conducts periodic environmental scanning to ensure that all WMU academic programs that “should be” accredited become or remain accredited. The assistant director of integrated program review and accreditation provides program coordinators and the associate provost for institutional effectiveness with information regarding potential agencies. Academic units proposing new curricula or changes to existing curricula, with the intention of seeking program accreditation, should alert IE at the start of the process.

Process
1. Academic administrative unit (e.g., dean, chair/director) notifies the associate provost for institutional effectiveness that the unit is seeking initial accreditation for a new or existing program

2. The associate provost for institutional effectiveness directs the assistant director of integrated program review and accreditation to schedule a meeting with the unit’s accreditation contact (typically the program coordinator) to set up an “introductory meeting” to discuss specifics of the application period, cost coverage, needs assessment, agency and WMU reporting requirements, initial submission dates, site visit scheduling, etc.
3. Based on results of the “introductory meeting,” the assistant director of integrated program review and accreditation drafts a workflow process agreement, and receives the unit’s accreditation contact’s approval.

4. The assistant director of integrated program review and accreditation notifies the associate provost for institutional effectiveness and the provost of the proposed application for accreditation and workflow timeline.

5. The associate provost for institutional effectiveness notifies the unit’s accreditation contact that the unit may begin the process.

Preparation of Required Documentation
The following covers the typical documentation request process when initiating a new accreditation.

Process
1. Unit accreditation contact works with program faculty to write a self-study report, responding to the agency’s standards, and adhering to the agency’s reporting specifications – if requested in the needs assessment completed as part of the workflow agreement, assistant director of integrated program review and accreditation assists the unit accreditation contact with templates and formatting (e.g., hyperlinking, automatic table of contents, etc.)

2. Unit accreditation contact submits a final draft of the self-study report (including all appendices, charts, graphs, etc.) to assistant director of integrated program review and accreditation no later than 30 days prior to the submission to the agency – this is a requirement, and mirrors the self-study submission process for maintaining accreditation (see page 6, #2)

3. Assistant director of integrated program review and accreditation submits a copy of the report to the Office of Institutional Research requesting verification of institutional data and its source information

4. Assistant director of integrated program review and accreditation submits a copy of the report to the associate provost for assessment and undergraduate studies for comments on the program’s assessment endeavors.

5. Assistant director of integrated program review and accreditation reads and copy edits the report for compliance with agency requirements and standards (including addressing any weaknesses or concerns from the last visit), HLC requirements and standards, adherence to WMU’s policies and procedures, compliance with the WMU Writing Style Guide, and spelling and grammatical errors

6. Assistant director of integrated program review and accreditation submits edited documentation to the associate provost for institutional effectiveness and the provost for their comments.

7. The associate provost for institutional effectiveness and the provost return their comments to the assistant director of integrated program review and accreditation.

8. Assistant director of integrated program review and accreditation returns edited documentation with all comments to the program accreditation contact for revision and submission to the agency no later than five business days prior to the agency’s deadline – should revisions be extensive, the unit is required to submit an edited draft to assistant director of integrated program review and accreditation for a second review prior to submission to the agency.

9. Unit accreditation contact makes final revisions to documentation and submits it to the agency by the agency’s deadline, along with payment of the application fee from a fund 11 department – reimbursement is remitted upon request.
10. Unit accreditation contact submits an electronic copy of the application and initial self-study report to assistant director of integrated program review and accreditation for inclusion in the WMU Accreditation Library’s electronic holdings

11. Assistant director of integrated program review and accreditation saves the electronic copy of application and initial self-study report to the WMU Accreditation Library

Maintenance of Specialized Program Accreditation
Please visit http://wmich.edu/effectiveness/accreditation/specialized for a current list of WMU accredited, certified, and licensed programs and their respective agencies.

Initiation of New Accreditation Cycle
A new accreditation cycle begins when either the agency sends an “initial letter” or the program is required to self-initiate:

- **Agency-sent initial letter**: Letter from agency informing department/school of the upcoming site visit, and includes instructions for completing self-study/interim reports and submission deadlines – upon receipt, program accreditation contacts are required to submit an electronic copy to the associate provost for institutional effectiveness, and to assistant director of integrated program review and accreditation for inclusion in the WMU Accreditation Library’s electronic holdings

- **Self-initiation**: Some agencies require the department/school to be responsible for submitting required application materials for initiating the accreditation cycle – after submitting to the agency, program accreditation contacts are required to submit an electronic copy to the associate provost for institutional effectiveness, and to assistant director of integrated program review and accreditation for inclusion in the WMU Accreditation Library’s electronic holdings

**Process**

1. The associate provost for institutional effectiveness initiates contact with the program accreditation contact to discuss the set-up of a “cycle introductory meeting” to discuss/coordinate submission dates, site visit scheduling, needs assessment, etc.

2. The associate provost for institutional effectiveness directs assistant director of integrated program review and accreditation to set-up those “cycle introductory meetings” that have been requested by program accreditation contacts

3. Assistant director of integrated program review and accreditation facilitates “cycle introductory meetings” with program accreditation contacts to assess specific needs

   **NOTE**: If the program accreditation contact believes that an extension of the submission deadline is necessary, the program accreditation contact must receive written permission from the department chair/school director, college dean, and provost prior to submitting the request for extension to the agency – documentation of the extension request and notification of agency acceptance or denial must be submitted to the associate provost for institutional effectiveness upon receipt

4. Assistant director of integrated program review and accreditation develops a workflow based on the needs assessment and date requirements that includes dates to send reminders, and coordinates with program accreditation contact for agreement

5. Assistant director of integrated program review and accreditation inputs workflow timelines into the associate provost for institutional effectiveness’ calendar, and into personal calendar with five-day-out reminder dates
6. Assistant director of integrated program review and accreditation emails the associate provost for institutional effectiveness and the provost to notify them of established schedules

Preparation of Required Documentation
A number of required documents are requested by accreditors at intervals throughout the accreditation cycle. These include self-study reports, rejoinders, annual and interim reports, and reporting of compliance with new standards. The following covers the typical documentation process from accreditation cycle initiation to subsequent reporting during the maintenance phase.

Process
1. Program accreditation contact works with program faculty to write a self-study report, responding to the agency’s standards, and adhering to the agency’s reporting specifications – if requested in the needs assessment completed as part of the workflow agreement, assistant director of integrated program review and accreditation assists the program accreditation contact with templates and formatting (e.g., hyperlinking, automatic table of contents, etc.)

2. Program accreditation contact submits a final draft of the self-study report (including all appendices, attachments, charts, graphs, etc.) to assistant director of integrated program review and accreditation no later than 30 days prior to the submission to the agency

3. Assistant director of integrated program review and accreditation submits a copy of the report to the Office of Institutional Research requesting verification of institutional data and its source information

4. Assistant director of integrated program review and accreditation submits a copy of the report to the associate provost for assessment and undergraduate studies for comments on the program’s assessment endeavors

5. Assistant director of integrated program review and accreditation reads and copyedits the report for compliance with agency requirements and standards (including addressing any weaknesses or concerns from the last visit), HLC requirements and standards, adherence to WMU’s policies and procedures, compliance with the WMU Writing Style Guide, and spelling and grammatical errors

NOTE ON SUBMISSIONS
Failure to submit a final draft of the self-study report a minimum of 30 days prior to the agency deadline will result in denial of the request for reimbursement of annual accreditation fees for the remainder of the accreditation cycle for which the self-study is being submitted
6. Assistant director of integrated program review and accreditation submits edited documentation to the associate provost for institutional effectiveness and the provost for their comments

7. The associate provost for institutional effectiveness and the provost return their comments to Assistant director of integrated program review and accreditation

8. Assistant director of integrated program review and accreditation returns edited documentation with all comments to the program accreditation contact for revision and submission to the agency no later than five business days prior to the agency’s deadline

9. Program accreditation contact revises documentation and submits it to the agency by the agency’s deadline

10. Program accreditation contact submits an electronic copy to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings

Agency Review of Self-Study/Interim Report

Upon receipt of the self-study report, the agency reads the document to verify that all standards and requirements have been met, and that any weaknesses or concerns have been addressed. The agency either will approve the self-study report as-is, or make a request for additional information or clarification.

- **Approval**: Letter from agency informing program accreditation contact that the self-study report was accepted, and makes request to schedule the site visit and establish the timeline
- **Request for rejoinder(s)**: letter from agency informing program accreditation contact that the self-study report was received, but requires additional information/clarification of the documentation

**Process in the Case of Agency Approval of the Self-Study Report**

1. Program accreditation contact submits an electronic copy of the approval letter to the associate provost for institutional effectiveness, and to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings – NOTE: the agency also may have sent a copy of the approval letter to the president, college dean, and department chair/school director

2. Assistant director of integrated program review and accreditation saves the electronic copy of the submitted documentation to the WMU Accreditation Library

**Process in the Case of Agency Request for Rejoinder**

1. Program accreditation contact receives a copy of the letter requesting clarification and/or additional information as a supplement to the self-study report – NOTE: the agency also may have sent a copy of the approval letter to the President, college dean, and/or department chair/school director

2. Program accreditation contact submits an electronic copy of the rejoinder request to the associate provost for institutional effectiveness, and to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings

3. Assistant director of integrated program review and accreditation saves the electronic copy of the submitted documentation to the WMU Accreditation Library

Steps 1 through 9 can occur one to several times within a given time-frame, based on the agency’s level of satisfaction with program accreditation contact’s responses.
4. Program accreditation contact works with program faculty to respond to the agency’s questions and concerns in a rejoinder document.

5. Program accreditation contact submits a final draft of the rejoinder documentation to assistant director of integrated program review and accreditation no later than 14 business days prior to the submission to the agency.

6. Assistant director of integrated program review and accreditation reads and copyedits the rejoinder for compliance with agency’s request, compliance with the WMU Writing Style Guide, and spelling and grammatical errors.

7. Assistant director of integrated program review and accreditation submits edited documentation to the associate provost for institutional effectiveness and the provost for their comments.

8. The associate provost for institutional effectiveness and the provost return their comments to assistant director of integrated program review and accreditation.

9. Assistant director of integrated program review and accreditation returns edited documentation with all comments to the program accreditation contact for revision and submission to the agency no later than three business days prior to the agency’s deadline.

10. Program accreditation contact revises documentation and submits it to the agency by the agency’s deadline.

11. Program accreditation contact submits an electronic copy to the associate provost for institutional effectiveness, and to assistant director of integrated program review and accreditation for inclusion in the WMU Accreditation Library’s electronic holdings.

12. Program accreditation contact submits a copy of the agency approval letter to associate provost for institutional effectiveness, and to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings. – NOTE: the agency also may have sent a copy of the approval letter to the president, college dean, or department chair/school director.

Scheduling the Site Visit
Program accreditation contacts work directly with the accrediting agency to develop a timeline for the site visit typically based on the institution’s and program’s calendars of availabilities (e.g., excluding break weeks, exam weeks, etc.).

In creating the schedule of meetings for the site visit team, the program accreditation contact schedules the associate provost for institutional effectiveness and the provost to meet with site visit team members as part of the site visit rotation, and includes the associate provost for institutional effectiveness in the site visit team’s exit interview.

Process
1. Program accreditation contact receives an official letter or email correspondence from the agency approving the schedule, and submits an electronic copy, upon receipt, to assistant director of integrated program review and accreditation for inclusion in the WMU Accreditation Library’s electronic holdings.

2. Program accreditation contact schedules a briefing meeting with the associate provost for institutional effectiveness and the provost approximately four weeks prior to the site visit.

3. **Four weeks prior to the site visit** – Program accreditation contact creates an executive briefing summary that includes brief program demographics, information on pass/fail rates, program strengths and weaknesses, and a section reacting to deficiencies noted (if any) in previous accreditation final report.
4. Program accreditation contact emails a copy to the associate provost for institutional effectiveness and to the assistant director for integrated program review and accreditation for review one week prior to the scheduled briefing. – NOTE: This material will be added to academic program review results and other Academic Affairs indicators, if necessary (e.g., if there has been an issue with faculty ratios, Academic Affairs operational indicators may be added as they relate to that point).

5. Program accreditation contact meets with the associate provost for institutional effectiveness and the provost to discuss the materials and work out a plan to address weaknesses and noted deficiencies prior to meeting with the president and the site visit team.

6. The Office of Institutional Effectiveness will synthesize results of the briefing into a packet with the initial document, and email to the provost and WMU president, as requested.

7. Assistant director of integrated program review and accreditation saves the electronic copy of the briefing packet to the WMU Accreditation Library

After the Site Visit
 Agencies typically submit a preliminary site visit team report that allows programs to correct errors of fact and clarify data and misinterpretations. Programs typically have 30 days in which to respond to the preliminary report. Agencies use submitted information to correct or clarify statements made in the official site visit report prior to submission to agency review committees. Depending on the agency, review committees can take anywhere from a month to a year to rule on the report and decide on accreditation status.

Process

1. Program accreditation contact receives the preliminary site visit report from the agency

2. Program accreditation contact works with program faculty to address any errors of fact and clarify data and misinterpretations

3. Program accreditation contact submits a final draft of the response documentation to assistant director of integrated program review and accreditation no later than 14 business days prior to the submission to the agency

4. Assistant director of integrated program review and accreditation reads and copyedits the response document for compliance with agency’s request, compliance with the WMU Writing Style Guide, and spelling and grammatical errors

5. Assistant director of integrated program review and accreditation submits edited documentation to the associate provost for institutional effectiveness and the provost for their comments

6. The associate provost for institutional effectiveness and the provost return their comments to assistant director of integrated program review and accreditation

7. Assistant director of integrated program review and accreditation returns edited documentation with all comments to the program accreditation contact for revision and submission to the agency no later than three business days prior to the agency’s deadline

8. Program accreditation contact revises documentation and submits it to the agency by the agency’s deadline

9. Program accreditation contact submits an electronic copy to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings

10. Program accreditation contact receives the agency final decision documentation, typically a copy of the official site visit report submitted to the review committee and a letter describing the agency’s decision
regarding accreditation status – NOTE: the agency also will have sent a copy of the final decision documentation to the president and college dean, and in some cases to the department chair/school director

11. Program accreditation contact submits an electronic copy to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings

Subsequent Preparation/Submission of Additional Reports
Regardless of the final outcome/decision, agencies often require annual and/or interim reports as well as confirmation of compliance with new standards and requirements.

Process
1. Program accreditation contact receives request from the agency – NOTE: the agency also will have sent a copy of the request to the president and college dean, and in some cases to the department chair/school director
2. Program accreditation contact submits an electronic copy to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings
3. Program accreditation contact works with program faculty to comply with request and draft documentation of the compliance
4. Program accreditation contact submits a final draft of the documentation to assistant director of integrated program review and accreditation no later than 14 business days prior to the submission to the agency
5. Assistant director of integrated program review and accreditation reads and copyedits the documentation for compliance with agency’s request, compliance with the WMU Writing Style Guide, and spelling and grammatical errors
6. Assistant director of integrated program review and accreditation submits edited documentation to the associate provost for institutional effectiveness and the provost for their comments
7. The associate provost for institutional effectiveness and the provost return their comments to assistant director of integrated program review and accreditation
8. Assistant director of integrated program review and accreditation returns edited documentation with all comments to the program accreditation contact for revision and submission to the agency no later than three business days prior to the agency’s deadline
9. Program accreditation contact revises documentation and submits it to the agency by the agency’s deadline
10. Program accreditation contact submits an electronic copy to assistant director of integrated program review and accreditation upon receipt for inclusion in the WMU Accreditation Library’s electronic holdings

Reimbursement of Accreditation Fees
The Office of Institutional Effectiveness is an administrative unit of the Division of Academic Affairs from which it receives its annual operating budget. As such, the office is not authorized to reimburse institutional service areas for annual accreditation, licensure, or certification fees.

The Office of Institutional Effectiveness will reimburse academic departments and colleges for:

- Annual maintenance of accreditation fees when:
  - their accredited programs have complied with the 30-day minimum submission requirement
  - fees have been processed through fund 11 accounts
As stated in Preparation of Required Documentation, “failure to submit a final draft of the self-study report to assistant director of integrated program review and accreditation a minimum of 30 days prior to submission to the agency will result in denial of the request for reimbursement of annual accreditation fees for the remainder of the accreditation cycle for which the self-study is being submitted.”

- Membership fees in professional organizations when membership is a specific requirement for obtaining/maintaining accreditation
- Application fees for initiating accreditation with a new agency when the process for initiating new accreditation has been followed (see Initiation of New Accreditation, page 4, #9)

**The following fees will not be reimbursed by the Office of Institutional Effectiveness, and are therefore the sole responsibility of the accredited program’s administrative unit:**

- Application fees for initiating a new accreditation cycle with an existing agency (as distinguished from seeking initial accreditation)
- Additional fees for submitting report documents (e.g., self-study, annual reports, interim reports, etc.) beyond the annual maintenance of accreditation fee
- Costs for site visits
- Costs for purchasing preparation and/or research materials from the accrediting agency
- Dues and or membership fees that are not a specific requirement for maintaining accreditation
- Fees paid for membership in professional organizations which provide program approval (as distinguished from accreditation)

**Process**

1. Accredited program’s administrative unit (e.g., dean’s office, department/school office) receives annual invoice from the accrediting agency, and issues payment from a fund 11 department number
2. Unit’s budget specialist forwards request for reimbursement to the Office of Institutional Effectiveness’ administrative assistant senior, which includes copies of the invoice and verification of payment from the fund 11 department (e.g., copy of the signed voucher, receipt from procurement card use, etc.)
3. IE’s administrative assistant senior verifies that the accredited program has complied with the 30-day minimum submission of draft self-study report for the current accreditation cycle
4. IE’s administrative assistant senior issues reimbursement through the WMU online Journal Entry Spreadsheet (JES) system
5. IE’s administrative assistant senior emails a PDF copy of the JES to the unit’s budget specialist for verification of reimbursement

**Transferring Accreditation from One Agency to Another**

Under rare circumstances, programs may find it necessary to seek accreditation through a different agency. Examples include: a new agency that has more stringent standards or greater benefits to students; or, the current agency fails to provide the services for which it was contracted (e.g., delays in reaccreditation, etc.).

**Process**

1. Administrative unit notifies associate provost for institutional effectiveness that the unit intends to transfer accreditation from one agency to another, and provides documentation as to the reasons for the requested change
2. The associate provost for institutional effectiveness directs the assistant director of integrated program review and accreditation to schedule with the unit’s accreditation contact to discuss associate provost for institutional effectiveness’s and the provost’s comments, and to coordinate submission of termination letter to existing agency, and initiation of accreditation with the new agency (please refer to “Initiation of New Accreditation,” page 2)

3. Assistant director of integrated program review and accreditation drafts a workflow based on meeting with the unit accreditation contact that includes dates to send reminders, and receives accreditation contact’s approval of, and agreement to, the process

4. Assistant director of integrated program review and accreditation notifies associate provost for institutional effectiveness and the provost of the proposed application for accreditation and workflow timeline

The remaining process for seeking new accreditation mirrors the process listed under maintenance of specialized program accreditation, beginning with “Preparation of Required Documentation,” page 4.
HLC Policies

Policy Title: Assumed Practices
(effective September 1, 2017)

Policy Number: CRRT.B.10.020

A. Integrity: Ethical and Responsible Conduct:

“7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.”

“a. An institution offering programs that require specialized accreditation or recognition by a state licensing board or other entity in order for its students to be certified or to sit for the licensing examination in states where its students reside either has the appropriate accreditation and recognition or discloses publicly and clearly the consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.”

“b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status and recognition of the program by state licensing boards at each location.”

“c. An institution that provides a program that prepares students for a licensure, certification, or other qualifying examination publicly discloses its pass rate on that examination, unless such information is not available to the institution.

HLC Criteria:

“Criterion Two. Integrity: Ethical and Responsible Conduct - The institution acts with integrity; its conduct is ethical and responsible. Core Component 2.B. The institution presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty, and staff, costs to students, control, and accreditation relationships.”

“Criterion Four. Teaching and Learning: Evaluation and Improvement - The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement. Core Component 4.A. The institution demonstrates responsibility for the quality of its educational
Programs. Core Subcomponent 4.A.5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.”

Policy Number Key
Section CRRT: Criteria and Requirements
Chapter B: Criteria for Accreditation
Part 10: General
Last Revised: June 2016

First Adopted: February 2012

Revision History: February 2012, June 2013, June 2014, June 2016

Notes: This policy will sunset on August 31, 2017. The revised Assumed Practices adopted June 2015 will be effective for all institutions on September 1, 2017. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013.

Policy Title: Standing with State and Other Accrediting Agencies
Policy Number: FDCR.A.10.090)

“An institution has a responsibility to remain in good standing with each state in which it is authorized or licensed as well as with any other institutional or programmatic accrediting agency recognized by the U.S. Department of Education by which it is accredited or pre-accredited up to the point that it voluntarily withdraws from such relationships. An institution shall fairly represent to the Commission and to the public its history or current or previous status with other institutional or programmatic accrediting bodies and with each state in which it is authorized or licensed.

An institution shall disclose to the Commission any pending or final state actions that affect the institution’s legal status or authority to grant degrees or offer programs and any pending or final actions by an accrediting agency to withdraw accredited or pre-accredited status, impose a sanction or deny an application for such status. Such disclosure shall take place at the time of the action by the other entity and on the Commission’s Institutional Update as well as in preparation for a comprehensive evaluation by the Commission.

Commission Review. If another such accrediting agency or if a state has taken any of these actions, the Commission will undertake a prompt review of the institution and the related action.

With regard to an applying institution, the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant candidacy or accreditation. If it chooses to grant candidacy or accreditation to such an institution, it will provide the Secretary of Education a written explanation of why that action is appropriate within thirty days of taking the action.

With regard to an accredited institution, the Commission will determine whether additional review or Commission action, including sanction or withdrawal of accreditation, is appropriate. The Commission may undertake its review in any way provided for in Commission policy.”

Policy Number Key
Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General
Last Revised: June 2012
Policy Title: Obligations of Affiliation
Policy Number: INST.B.30.020

“6. The institution notifies the Commission when it receives an adverse action from or has been placed on sanction by any other accrediting agency or if a state has issued a pending or final action that affects the institution’s legal status or authority to grant degrees.”

Policy Title: Relation with Other Recognized Accrediting Agencies
Policy Number: COMM.C.10.020

“The Commission will base the grant or reaffirmation of accreditation on its own Criteria for Accreditation and processes and will evaluate the entire institution, but in granting or reaffirming status to an institution it will take into consideration actions, particularly but not exclusively adverse actions, sanctions, and show-cause orders, taken or issued by any recognized institutional, specialized or professional accrediting agency previously or currently associated with an institution.

Consideration for the Accreditation Decisions or Other Agencies. In determining whether an institution meets the Commission’s Eligibility Requirements, Criteria for Accreditation and Commission Requirements, the Commission will consider the reports, action letters and other information of other recognized institutional, specialized and professional accrediting agencies previously or currently associated with the institution, with specific attention to any adverse, probationary or show-cause actions. The Commission will expect that institutions will disclose such information in the Eligibility Process and place it in its Assurance File when seeking candidate or accredited status or when undergoing regular review by the Commission through any pathway. The Commission may request information directly from the recognized accrediting agency and place it in the Assurance File for review by an evaluation team for consideration in the accrediting action.

In considering a substantive change the Commission may request information from an institution regarding its specialized or professional accreditation or may request it directly from the accrediting agency and take it into account in the accrediting action.
If another recognized accrediting agency has denied or withdrawn affiliation or pre-accreditation or placed sanctions on the institution the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant accredited or candidate for accreditation status. If it chooses to grant affiliation to such an institution, it will provide the Secretary of Education a written explanation within thirty (30) days of taking action of why the issues that led to the action by the other recognized accrediting agency did not preclude the Commission from reaching a decision to grant accreditation or candidacy or did not otherwise justify a different action.

**Information Provided to Other Recognized Accrediting Agencies.** If the Commission takes action to place an institution on notice or probation or withdraw or deny accreditation or candidate for accreditation status, or if the Commission places an institution on show-cause, the Commission will notify all recognized accreditors at the same time that it notifies the institution and the U.S. Department of Education but not later than thirty days after the action, and will include a Public Disclosure Notice that provides reasons for the Commission’s decision. If the action was denial or withdrawal of accredited or candidate for accreditation status that Public Disclosure will within sixty (60) days after the action becomes final include comments from the affected institution or information to indicate that the institution was provided an opportunity to comment but did not do so. The Commission will notify state higher education agencies of an action to reaffirm or grant accreditation or initial candidacy or approve a substantive change or the results of monitoring within thirty days of the action; it will notify the state higher education agency of a voluntary resignation by an institution of its accredited or candidate status within thirty days of receiving notification from the institution of the resignation.

If another recognized accreditor seeks written or other information about an institution that has accredited or candidate status with the Commission, or that has previously sought such status with the Commission, the Commission will forward that information to the other accreditor after receiving a written request.

**Coordinated Visits with Other Recognized Accrediting Agencies.** The Commission may conduct a coordinated visit with a specialized or professional accrediting agency recognized by the USDE or CHEA. Coordinated visits typically will be limited to no more than three participating agencies. While the teams of the participating agencies may coordinate some or many of their activities on campus, decision-making and the production of the team report will be done separately by each agency. A letter of agreement for each coordinated visit, signed by the Presidents of the participating agencies or their designees, will lay out the level of coordination and interaction allowed among agency representatives involved in the visit.”

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Chapter C: Relationships with External Agencies
Part 10: General
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