



**WESTERN MICHIGAN UNIVERSITY**  
Office of  
Institutional Effectiveness

# 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 strategic management of cross-collaborative projects and initiatives that support student success and institutional coherency. IE accomplishes its mission by facilitating the planning, implementation, monitoring, adjusting, and evaluation of strategic projects and initiatives that improve and demonstrate responsibility for the organization's overall performance.

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# Policies and Procedures

for Seeking, Maintaining, and Transferring Specialized Program Accreditation

## Introduction

The Office of Institutional Effectiveness (IE) at Western Michigan University oversees the process for tracking and reporting specialized program accreditation endeavors. In compliance with HLC's policies regarding [PATHWAYS FOR REAFFIRMATION OF ACCREDITATION AND FEDERAL COMPLIANCE](#) (see pages A1 through A3), IE ensures 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. Approval by the provost and vice president for academic affairs must be secured prior to withdrawing from accreditation or allowing it to expire.

IE serves as liaison between accredited programs and the Office of Academic Affairs, ensuring the provost remains current on program accreditation status as well as timelines and procedures for accreditation reviews. IE works with program coordinators, department chairs/school directors, and college deans to provide institutional responses to agency requests and review of documentation prior to submission.

IE maintains a complete history of all accreditation, licensure, and certification documents pertaining to academic programs and the facilities that provide students with training and supervision related to their accredited academic programs. This repository is known as the WMU Accreditation Library. IE complies with accrediting agencies' public release policies, which include specific language for posting accreditation decisions in print or electronic publication. IE does 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 are directed back to the program in question, and are subject to the policies and practices of the program's overseeing department or college.

"The goal of accreditation is to ensure that education provided by institutions of higher education meets acceptable levels of quality."

*U.S. Department of Education, Office of Post-Secondary Education  
(<http://ope.ed.gov/accreditation>)*

## 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 intended to operationalize procedures and provide guidance to first-time and seasoned accreditation coordinators in identifying key points in 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.

### Initiating New Accreditation

Academic units intending to seek new accreditation for proposed or existing programs must contact the Office of Institutional Effectiveness **prior to applying to the agency**.

#### *Process*

1. Academic unit obtains a copy of the accrediting agency’s handbook or published eligibility requirements.
2. Academic unit contacts IE to discuss its process for meeting eligibility requirements as well as required costs, initial submission dates, site visit scheduling, etc., and collaboratively develops a workflow timeline.
3. IE schedules a meeting with the academic unit, dean, and vice provost for budget and personnel to discuss cost coverage and approve initiation of the process.
4. Academic unit works with program faculty and accreditor to develop necessary curriculum forms ensuring compliance with agency standards and requirements, and obtains any required supporting documentation; unit submits forms adhering to the Curriculum Review Process’ established procedures.
5. Academic unit meets periodically with IE regarding workflow progress.
6. Academic unit prepares application for candidacy, and submits to IE for review **14 days prior to submission** to agency.
7. IE constitutes a review panel (e.g., ALO, assessment, IR, etc.) based on institution-level reporting; returns reviewed application for editing and submission.
8. Academic unit notifies IE when program has been granted candidacy status.
9. Academic unit prepares application materials for full accreditation (e.g., application form, self-study report, etc.), and submits to IE for review **30 days prior to submission** to agency.
10. IE constitutes a review panel (e.g., ALO, assessment, IR, etc.) based on institution-level reporting; returns reviewed application materials for editing and submission.
11. Academic unit revises application materials and works with IE to obtain required signatures from the provost and vice president for academic affairs or the university president.
12. Academic unit works with IE to establish a site visit schedule that includes the provost and vice president for academic affairs.
13. Program coordinator sets up briefing meeting with IE **two weeks prior to site visit**; IE provides a copy of the [SITE VISIT BRIEF](#) template for unit to complete and return prior to meeting.
14. Program coordinator meets with provost and vice provost for budget and personnel to discuss the [SITE VISIT BRIEF](#), and work out a plan to address weaknesses and noted deficiencies prior to meeting with the site visit team.

15. Academic unit notifies IE when program has received the draft site visit report; unit works with IE to prepare responses to “errors of fact” and submits.
16. Academic unit notifies IE when program has received the agency’s final decision regarding accreditation.
17. Academic unit submits required documentation to IE for inclusion in the WMU Accreditation Library’s electronic holdings.

#### *Required Documentation*

Academic unit **must** submit to IE final electronic copies of the following documents:

1. Agency’s handbook.
2. Completed application for candidacy.
3. Agency official notice granting candidacy status.
4. Agency requests for additional information, interim reports, or ad hoc reports.
5. WMU (i.e., program-, department-, college-, or institution-level) responses to agency requests.
6. Completed application for full accreditation.
7. Completed self-study report (including all appendices, attachments, charts, graphs, etc.) responding to the agency’s standards and adhering to the agency’s reporting specifications.
8. Report from site visitor(s) to agency.
9. Draft response to site visit report checking “errors of fact”
10. Agency final decision letter and report

#### *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 offers 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. Academic unit contacts IE with a request to transfer accreditation to another agency including an explanation for the transfer.
2. IE schedules meeting with provost, vice provost for budget and personnel, dean, and chair/director, and program coordinator to discuss request as well as the process for Initiating New Accreditation (see pages 2 and 3).

#### *Required Documentation*

In addition to the documents required for submission under Initiating New Accreditation, the academic unit **must** submit to IE final electronic copies of the following documents:

1. Official request for transferring accreditation, including all supporting materials.

## Maintenance of Specialized Program Accreditation

In compliance with the Higher Learning Commission's Core Component 4.A.5, the Office of Institutional Effectiveness provides assistance during and between reaccreditation/reaffirmation cycles for accredited academic programs to ensure they remain in “good standing” with their accrediting bodies (see page 8 of the Appendix).

Academic programs preparing to initiate a new accreditation cycle must contact the Office of Institutional Effectiveness **at the beginning of the process**.

### Process

1. Program coordinator contacts IE to discuss submission due dates, site visit scheduling, etc., and collaboratively develops a workflow timeline.
2. Program coordinator prepares application materials for full accreditation (e.g., application form, self-study report, etc.), and submits to IE for review **30 days prior to submission to agency**.
3. IE constitutes a review panel (e.g., ALO, assessment, IR, etc.) based on institution-level reporting; returns reviewed application materials for editing and submission.
4. Academic unit revises submission materials and works with IE to obtain any required signatures from the provost and vice president for academic affairs or the university president.
5. Program coordinator works with IE to establish a site visit schedule that includes the provost and vice president for academic affairs; IE attends the exit interview with the site visit team unless specifically prohibited by the accreditor.
6. Program coordinator sets up briefing meeting with IE **two weeks prior to site visit**; IE provides a copy of the [SITE VISIT BRIEF](#) template for unit to complete and return prior to meeting.
7. Program coordinator meets with provost and vice provost for budget and personnel and IE to discuss the [SITE VISIT BRIEF](#), and work out a plan to address weaknesses and noted deficiencies prior to meeting with the site visit team.
8. Program coordinator notifies IE when program has received the draft site visit report; unit works with IE to prepare responses to “errors of fact” and submits.
9. Program coordinator notifies IE when program has received the agency’s final decision regarding accreditation.
10. Program coordinator submits required documentation to IE for inclusion in the WMU Accreditation Library’s electronic holdings.

### Required Documentation

Academic unit **must** submit to IE final electronic copies of the following documents:

1. Any approved extension request, and notice of agency acceptance or denial.
2. Any notice of pending changes to the accreditation process (e.g., updated standards, agency name change/merger, program’s plans to change agencies, etc.)

*Accredited programs seeking an extension on their reaccreditation cycle must first obtain written permission from the department chair/school director, college dean, and provost prior to submitting the request for extension to the accrediting agency.*

3. General communication between program and agency containing references to timelines, deadlines, schedules, fees, etc.
4. Agency requests for additional information, annual reports, interim reports, or ad hoc reports (e.g., health emergency protocols, etc.).
5. WMU (i.e., program-, department-, college-, or institution-level) responses to agency requests for additional information.
6. Completed annual, interim, and ad hoc reports to agency.
7. Completed self-study report (including any application, all appendices, attachments, charts, graphs, etc.) responding to the agency's standards and adhering to the agency's reporting specifications.
8. Report from site visitor(s) to agency.
9. Draft response to site visit report checking "errors of fact"
10. Agency final decision letter and report

### Reimbursement of Accreditation Fees

Reimbursement of annual accreditation fees is not a guarantee, but rather a long-standing practice of the Office of Institutional Effectiveness (IE) to encourage compliance with HLC's requirement that all programs that can be accredited are accredited. With the university's move to an SRM model, costs associated with specialized program accreditation continue to be the responsibility of the college overseeing the program.

IE is designated as a "service unit" under the university's Strategic Resource Management model. As such, it receives its annual operating budget as part of the UPA shared by service units under the Office of the Provost and Vice President for Academic Affairs. IE offers reimbursement of annual accreditation fees as a "strategic initiative" to demonstrate institutional support to accrediting agencies. Prior to moving to the SRM model, IE was able to reimburse annual accreditation fees at 100 percent. With rising costs and the move to the new budget model, IE is unable to continue this practice.

Effective July 1, 2022, the Office of Institutional Effectiveness will reimburse the RU for 80% of its annual maintenance of accreditation fees once the RU has paid the initial invoice and submitted a request to IE for reimbursement consideration. "Maintenance of accreditation fees" are limited to those fees published by the accrediting agency that are specifically identified as "annual fees." IE also will reimburse 80% of separate membership fees in professional organizations that are associated with the accrediting agency when that membership is a specific requirement for maintaining accreditation.

IE will not reimburse the following:

- Late fees or other penalty costs
- Application fees for initiating a new accreditation cycle with an existing agency (as distinguished from seeking initial accreditation)
- Fees for submitting report documents (e.g., self-study, annual reports, interim reports, etc.) that are separate from the annual maintenance of accreditation fee
- Costs associated with site visits
- Costs for purchasing preparation or research materials from the accrediting agency
- Costs associated with travel to agency-sponsored conferences or training events
- Costs associated with hosting training events for accreditation processes
- Dues and or membership fees that are not a specific requirement for maintaining accreditation (e.g., faculty or student memberships, etc.)

- Fees paid for membership in professional organizations that provide additional specialized program recognition leading to post-graduation certification or licensure of students (as distinguished from accreditation)
- Accreditation fees and expenses for institutional service areas (e.g., Landscape Services, Sindecuse Health Center, etc.) outside the scope of Academic Affairs

To request reimbursement, RUs must email an electronic copy of the invoice(s), proof of payment (i.e., procard receipt, signed generic voucher), and a Fund 11 department number for processing the reimbursement.

The Office of Institutional Effectiveness is an administrative service unit of the Division of Academic Affairs. As such, the office is not authorized to reimburse institutional service areas for annual accreditation, licensure, or certification fees.

#### *Process*

1. Administrative unit receives agency invoice for annual fees; unit initiates payment from a fund 11 department
2. Unit's business manager emails request for reimbursement to IE that includes PDFs 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 issues reimbursement through the WMU online Journal Entry Spreadsheet (JES) system, and emails a PDF copy of the JES to the unit's business manager for verification of reimbursement

## HLC Policies

### Policy Title: Assumed Practices

(Revisions Adopted February 2019)

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.”

“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 ensures the quality of its educational offerings.

## APPENDIX A

### HLC Policies and Criteria

Core Subcomponent 4.A.5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.”

*Criteria for Accreditation: Revisions Adopted February 2019, Effective September 2020.*

## 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*

*First Adopted: January 1983*

*Revision History: Policy 9.1 (Adopted January 1983, revised February 1996, effective June 1996, revised February 1998, revised June 2008); Policy 9.2 (Adopted February 1986, revised February 1996, effective July 1996, revised June 2001, revised June 2008); Policy 9.3 (Adopted February 1988, revised February 1996, revised February 1998); Policy 9.4 (Adopted February 1998, revised June 2008); combined, revised, and renumbered June 2012*

*Notes: Former policy number 4.0(i).*

## 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 Number Key*

*Section INST: Institutional Policies*

*Chapter B: Requirements for Achieving and Maintaining Affiliation*

*Part 30: Obligations of Membership and Affiliation*

*Last Revised: February 2017*

*First Adopted: January 1983*

*Revision History: Renumbered February 2010, February 2012, June 2013, February 2017*

*Notes: Policies combined November 2012 – 1.6, 2013 – 1.6(a), 1.6(b), 1.6(b)1. 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: 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.”

*Policy Number Key*

*Section COMM: Commission Policies*

*Chapter C: Relationships with External Agencies*

*Part 10: General*

*Last Revised: April 2013*

*First Adopted: January 1983, February 1986, June 2000*

*Revision History: February 1996, February 1998, June 2001, February 2008, June 2008, February 2009, June 2012, April 2013*

*Notes: Former policy number – 9.1*