THE FIFTH-YEAR INTERIM REVIEW
PROCESS & INCLUDED STANDARDS

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Vice President
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The 2013 Summer Institute
During this session, we will…

• Review the Fifth Year Interim Review Process

• Have a Closer Look at the Current Select Standards & How to Avoid Common Trouble Spots

• Q & A
Why a Fifth-Year Interim Review Process?

• Higher Education Opportunity Act (HEOA)
  • Reg 602.19(b) Speaks to accrediting agencies monitoring their accredited institutions to ensure ongoing compliance.

  • Reg 602.22(c)(2) Calls for accrediting agencies having an effective mechanism for conducting, at reasonable intervals, visits to additional locations of institutions that operate more than three additional locations.

  • There are variances in review cycles among accrediting bodies.
So how does this process work?

- **NOTIFICATION:** Institutions are notified about eleven months prior to the due date for the report.

- **SUBMISSION:** Fifth-Year Interim Reports are submitted mid-March or mid-September.

- **REVIEW:** Report will be reviewed by the Fifth Year Interim Review Committee, which meets each June and December.

- **RESULTS:** A letter will go out to the reviewed institutions the following month, informing them of the results of the review.

- **FOLLOW UP:**
  - If there are no issues for follow up—the process ends here.
  - If there are issues, an institution would be asked to provide an additional report that will go to Compliance & Reports Committee, addressing the specific areas noted.
Components of the Report

• Part I: Signatures Attesting to Integrity

• Part II: Abbreviated Institutional Summary Form Prepared for Commission Reviews

• Part III: Fifth-Year Compliance Certification

• Part IV: Additional Report (applicable only to select institutions)

• Part V: Impact Report of the Quality Enhancement Plan

• An institution may be requested to host a committee charged to review new, but unvisited, off-campus sites initiated since the institution’s previous reaffirmation. An institution was notified of this at the time it received its letter from Dr. Wheelan regarding the Fifth-Year Interim Report.
A Closer Look at Part III

Responding to select areas:

1. CR 2.8 Number of Full-time Faculty
2. CR 2.10 Student Support Programs
3. CS 3.2.8 Qualified Administrators and Academic Officers
4. CS 3.3.1.1 Institutional Effectiveness: Educational Programs, to include Student Learning Outcomes
5. CS 3.4.3 Admissions Policies
6. CS 3.4.11 Qualified Academic Coordinators
7. CS 3.11.3 Physical Facilities
8. FR 4.1 Student Achievement
9. FR 4.2 Program Curriculum
10. FR 4.3 Publication of Policies
11. FR 4.4 Program Length
12. FR 4.5 Student Complaints
13. FR 4.6 Recruitment Materials
14. FR 4.7 Title IV Program Responsibilities and CS 3.10.2 Financial Aid Audits
Additional Standards as of January 1, 2012

15. 3.13.1 Policy compliance: “Accrediting Decisions of Other Agencies”

16. 3.13.3 Policy compliance: “Complaint Procedures Against the Commission or Its Accredited Institutions”

17. 3.13.4 Policy compliance: “Reaffirmation of Accreditation and Subsequent Reports”

18. 4.8 Distance and correspondence education

19. 4.9 Definition of credit hours
Referrals for 2014 Institutions
(39 institutions Track A & 35 institutions Track B)

<table>
<thead>
<tr>
<th>Category</th>
<th>Standard</th>
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<td>4 of 21</td>
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QEP Impact Report: 2 of 11 (18%), 4 of 21 (19%)
## Referrals for 2015 Institutions

*(39 institutions per track)*

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(41 institutions Track A & 34 institutions Track B)

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<td>15%</td>
<td>8</td>
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<td><strong>FR 4.4 Program Length</strong></td>
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Referrals for 2016 Institutions
(34 institutions Track B)

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<th>Additional Standards</th>
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# Referrals for 2017 Institutions

(33 institutions Track A & 40 institutions Track B)

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<td>CR 2.10 Student Support Programs</td>
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<td>1 3%</td>
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<td><strong>CS 3.4.11 Qualified Academic Coordinators</strong></td>
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<td>CS 3.10.2/FR 4.7 Financial Aid Audits/Title IV Responsibilities</td>
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<td><strong>QEP Impact Report</strong></td>
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### Referrals for 2017 Institutions

*(34 institutions Track B)*

<table>
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<th>Additional Standards</th>
<th>2017 Track A (33)</th>
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<td><strong>CS 3.13.1 Accrediting Decisions</strong></td>
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<td>8%</td>
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<td><strong>CR 3.13.3 Complaint Record</strong></td>
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<td>12%</td>
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<td><strong>FR 4.8.1 Student Verification</strong></td>
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<tr>
<td><strong>FR 4.8.2 Protecting Student Privacy</strong></td>
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<td>0%</td>
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<tr>
<td><strong>FR 4.8.3 Additional Student Charges</strong></td>
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<td><strong>FR 4.9 Credit Hours</strong></td>
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<td>1</td>
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<td></td>
<td>6%</td>
<td>3%</td>
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</table>
5 Most Cited Standards for the Fifth-Year Over the Past 4 Years

1. CS 3.3.1.1 Institutional Effectiveness: Educational Programs, to include Student Learning Outcomes—49%
2. CR 2.8 Number of Full-time Faculty—42%
3. CS 3.4.11 Qualified Academic Coordinators—32%
4. CS 3.10.2/FR 4.7 Financial Aid/Title IV—21%
5. FR 4.5 Student Complaints—17%
CR 2.8 Number of Full-time Faculty

- The number of full-time faculty members is adequate to support the mission of the institution and to ensure the quality and integrity of each of its academic programs. (Core Requirement 2.8)
CR 2.8 Number of Full-time Faculty

Common Issues:

- Not providing faculty data disaggregated to the program or discipline level
- Not explaining what the data mean or not presenting a case for why the number of faculty is adequate
- Not addressing faculty loads
CR 2.8 Tips:

- Disaggregate full-time faculty by program/discipline/ mode/location; include information on faculty teaching in all programs, including those teaching via distance education and at off-campus sites.

- Explain why the number is adequate, if indeed it is, or describe the plan for coming into compliance if the number is not adequate.

- Provide information regarding faculty loads and expectations for faculty outside of the classroom like committee work, service, advising, curriculum development, etc.

- Remember that you are building a case for compliance.
CR 2.10 Student Support Programs

- The institution provides student support programs, services, and activities consistent with its mission that are intended to promote student learning and enhance the development of its students. (Core Requirement 2.10)
CR 2.10 Student Support Programs

Common Issues:

- The institution’s website and/or catalog details numerous services not mentioned in the report.

- Student Support Program descriptions are confusing, jargon-laden, or inadequately explained.

- No mention is made of how support is provided to distance education and off-campus site students.
CR 2.10 Tips:

- Clearly describe the Student Support Services provided.

- Explain how the services meet the needs of your students, including those enrolled in programs offered via distance education and at off-campus sites.
CS 3.2.8 Qualified Administrators and Academic Officers

• The institution has qualified administrative and academic officers with the experience and competence to lead the institution. (Comprehensive Standard 3.2.8)
CS 3.2.8 Qualified Administrators and Academic Officers

Common Issues:

- Giving a list of names and degrees, or set of vitae with no explanation
- Not providing an organizational chart to help evaluators understand who oversees what
- Providing degree level information (MA, PhD) without listing major
CR 3.2.8 Tips:

- Provide an organizational chart.

- Describe the qualifications the administrators and academic officers, building a case for why they are qualified for their respective roles.

- Provide documentation like current vitae.

- Consider using the CS 3.2.8 template or the faculty roster form as a model for your own form.
The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in the following area: (Comprehensive Standard 3.3.1)
- 3.3.1.1 educational programs, to include student learning outcomes
CS 3.3.1.1 Common Issues:

- Lack of defined student learning outcomes and/or methods for assessing the outcomes
- Limited/Immature data
- Not documenting use of data to make improvements
- Non-representative sampling
- Not addressing distance education and off-campus site programs
CS 3.3.1.1 Tips:

- Focus on educational programs and student learning outcomes

- Use mature data
  - If using a new system, use data from the previous system, if necessary and possible, to demonstrate ongoing compliance

- Document the use of data to make improvements

- If presenting a sampling, use a representative sampling and include a rationale for what makes the sample reasonable and representative of the programs offered

- Include data on programs offered at off-campus sites and via distance learning
CS 3.4.3 Admissions Policies

- The institution publishes admissions policies that are consistent with its mission.
  *(Comprehensive Standard 3.4.3)*
CS 3.4.3 Admissions Policies

Common Issue:

- Information provided in the report does not match that given in the catalog and/or website

Tips:

- Provide a clear and consistent narrative regarding admissions policies.
- Address special admissions policies for specific programs as well as the institutional admissions policy.
- Explain the connection between admissions policies and the mission
For each major in a degree program, the institution assigns responsibility for program coordination, as well as for curriculum development and review, to persons academically qualified in the field. In those degree programs for which the institution does not identify a major, this requirement applies to a curricular area or concentration. *(Comprehensive Standard 3.4.11)*
CS 3.4.11 Qualified Academic Coordinators

Common Issues:

- Not providing a rationale for why an individual is qualified to coordinate a program, and oversee the development and review of the curriculum—especially in cases where the reasoning is not obvious

- Listing a coordinator’s degree with no reference to major
CS 3.4.11 Tips

• Identify coordinators for all programs, including those offered at off-campus sites and via distance learning.

• List coordinator’s degree and major.

• Make a case for the coordinator’s qualifications to oversee the development of the program.

• If “lead faculty” are used to help coordinate, include their names and qualifications.
CS 3.11.3 Physical Facilities

- The institution operates and maintains physical facilities, both on and off campus, that appropriately serve the needs of the institution’s educational programs, support services, and other mission-related activities. (Comprehensive Standard 3.11.3)
CS 3.11.3 Physical Facilities

Common Issues:

• Providing a narrative with no (or dated) supporting documentation
• Data presented indicated a lack of adequate physical facilities
• Not discussing physical facilities for off-campus sites

Tips:

• Include supporting documentation such as current Facilities Master Plan, space utilization reports, satisfaction survey results, facilities maintenance schedules.
• Address facilities at off-campus sites.

Applicable Policy Statement. Any institution seeking or holding accreditation from more than one U.S. Department of Education recognized accrediting body must describe itself in identical terms to each recognized accrediting body with regard to purpose, governance, programs, degrees, diplomas, certificates, personnel, finances, and constituencies, and must keep each institutional accrediting body apprised of any change in its status with one or another accrediting body.

List of DOE Recognized Accrediting Agencies
CS 3.13 Policy Compliance

3.13 A. (3.13.1) “Accrediting Decisions of Other Agencies”

**Documentation:** The institution should:

1. **list** federally recognized agencies that currently accredit the institution and its programs

2. provide the **date** of the most recent review by each agency and indicate if **negative action** was taken by the agency and the **reason** for such action

3. provide **copies of statements** used to describe itself for each of the accrediting bodies

4. indicate any agency that has **terminated** accreditation, the date, and the reason for termination, and

5. indicate the date and reason for the institution **voluntarily withdrawing** accreditation with any of the agencies.
CS 3.13 B (3.13.3)
“Complaint Procedures Against the Commission or Its Accredited Institutions”

- **Applicable Policy Statement.** Each institution is required to have in place student complaint policies and procedures that are reasonable, fairly administered, and well-publicized. *(See FR 4.5).* The Commission also requires, in accord with federal regulations, that each institution maintains a record of complaints received by the institution. This record is made available to the Commission upon request. This record will be reviewed and evaluated by the Commission as part of the institution’s decennial evaluation.
CS 3.13.3. “Complaint Procedures Against the Commission or Its Accredited Institutions”.

• Documentation: The institution should provide information to the Commission describing how the institution maintains its record and also include the following:

  • (1) **individuals/offices** responsible for the maintenance of the record(s)

  • (2) **elements** of a complaint review that are included in the record, and

  • (3) **where** the record(s) is located (centralized or decentralized). The record itself will be reviewed during the on-site evaluation of the institution.

  • Who?
  • What?
  • Where?
CS 3.13 C. (3.13.4) “Reaffirmation of Accreditation and Subsequent Reports”

- **Applicable Policy Statement.** An institution includes a review of its *distance learning programs* in the Compliance Certification.

- **Documentation:** In order to be in compliance with this policy, the institution must have incorporated an assessment of its compliance with standards that apply to its distance and correspondence education programs and courses.
FR 4.1 Student Achievement

- The institution evaluates success with respect to student achievement consistent with its mission. Criteria may include enrollment data; retention, graduation, course completion, and job placement rates; state licensing examinations; student portfolios; or other means of demonstrating achievement of goals. (Student achievement)
FR 4.1 Student Achievement

Common Issues:

- Presenting data with no analysis or indication of how they are used to consider student achievement
- Not describing the criteria for determining success
FR 4.1 Tips

- Include a variety of measures
- Provide an analysis of the data and explain how data are used
- Provide criteria used to determine the acceptability of intended achievement goals.
FR 4.2 Program Curriculum

- The institution’s curriculum is directly related and appropriate to the mission and goals of the institution and the diplomas, certificates, or degrees awarded. *(Federal Requirement 4.2)*
FR 4.2 Program Curriculum

Common Issues:

- Not offering a rationale for the appropriateness of the programs offered
- Not providing supporting documentation
- Not addressing distance education and off-campus sites

Tips:

- Explain how the mission and the curricula are related.
- Document how the curriculum is developed, including distance education and off-campus site programs.
FR 4.3 Publication of Policies

- The institution makes available to students and the public current academic calendars, grading policies, and refund policies. *(Federal Requirement 4.3)*
FR 4.3 Publication of Policies

Common Issue:
  • Variations exist between published versions of the grading policies, refund policies and/or academic calendars

Tips:
  • Verify that all versions of published academic calendars, grading, and refund policies are current and accurate.
  • Address how this information is disseminated to distance education and off-campus site students.
FR 4.4 Program Length

- Program length is appropriate for each of the institution’s educational programs. *(Federal Requirement 4.4)*
FR 4.4 Program Length

Common Issues:

- Program length exceeds those allowed by internal or system policy
- Discrepancies exist between the length of program as presented and as described in the catalog
- Not providing program length information in an easily accessible format
FR 4.4 Tips:

• Identify measures of program length for all programs, including those offered at off-campus sites and via distance learning.

• Explain any significant variances in program length that are not in keeping with accepted practice.

• Verify that program length information is published accurately.
FR 4.5 Student Complaints

• The institution has adequate procedures for addressing written student complaints and is responsible for demonstrating that it follows those procedures when resolving student complaints. (*Federal Requirement 4.5*)
FR 4.5 Student Complaints

Common Issues:

- No evidence of implementation provided
- Inappropriate example (e.g., a complaint from a parent)
- Not addressing how a complaint from students enrolled in distance education programs or at off-campus locations is handled
FR 4.5 Tips:

• Provide a copy of student complaint policies.

• Provide real examples (student names redacted) that document and illustrate how complaints are resolved.

• Address how complaints are handled from students enrolled at off-campus sites and via distance education.
FR 4.6 Recruitment Materials

- Recruitment materials and presentations accurately represent the institution’s practices and policies. *(Federal Requirement 4.6)*
FR 4.6 Recruitment Materials

Common Issue:
- Recruitment presentations are not addressed

Tip:
- Address how the institution ensures that recruitment materials and presentations accurately represent institutional practices and policies.
The institution is in compliance with its program responsibilities under Title IV of the most recent *Higher Education Act* as amended. *(Federal Requirement 4.7)*

The institution audits financial aid programs as required by federal and state regulations. *(Comprehensive Standard 3.10.2)* formerly numbered CS 3.10.3
Common Issues:

• Financial aid audit results are not yet available.
• The institution has responded to audit issues with a plan but has not yet received the USDOE letter accepting the plan.

Tips:

• Work with auditors well in advance to ensure that audit results are available by report due date.
• Present evidence of financial aid audits as required by state regulations, not just federal, in CS 3.10.2.
FR 4.8 Distance and Correspondence Education

FR 4.8.1 demonstrates that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit by verifying the identity of a student who participates in class or coursework by using, at the option of the institution, methods such as:

- (a) a secure login and pass code
- (b) proctored examinations, or
- (c) new or other technologies and practices that are effective in verifying student identification.
FR 4.8.2 has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs.

FR 4.8.3 has a written procedure distributed at the time of registration or enrollment that notifies students of any projected additional student charges associated with verification of student identity.
FR 4.9 Definition of Credit Hours

- The institution has policies and procedures for determining the credit hours awarded for courses and programs that conform to commonly accepted practices in higher education and to Commission policy.
Revised Resource Manual is Now Available!


- Rationale and Notes
- Relevant Questions for Consideration
- Documentation
- Reference to Commission Documents
- Cross-References to Other Related Standards
Part V: QEP Impact Report
Common Issues:

• Failure to launch project due to leadership and/or resource issues
• Not presenting the goals or outcomes of the project
• Not describing the implementation of the project, regardless of changes from original plan
• Not collecting and/or using data to assess the impact on student learning
QEP Impact Report Tips:

- **Address ALL of the elements**
  1. A succinct list of the initial goals and intended outcomes of the Quality Enhancement Plan;
  2. A discussion of changes made to the QEP and the reasons for making those changes;
  3. A description of the QEP’s impact on student learning and/or the environment supporting student learning, as appropriate to the design of the QEP (to include the achievement of identified goals and outcomes, and any unanticipated outcomes of the QEP); and
  4. A reflection on what the institution has learned as a result of the QEP experience.
*Use your 10 pages wisely*

- Reviewers are looking to see that the institution...
  - Has done what it said it was going to do, given reasonable adjustments to the plan
  - Has measured and analyzed the impact on student learning and/or the learning environment as per project goals/objectives
  - Has learned from the process
Words of Wisdom from Fifth-Year Report Evaluators
As you approach the task of report writing...

- Your narrative and evidence for each standard should be as comprehensive as your narrative/evidence in your Compliance Certification Report.

- Follow all of the directions.

- Write clearly and succinctly, using pointed examples.

- Save the reader time by pointing directly to the specific supporting documentation - excerpting when it makes sense.
Also…

• Use outside readers to identify and reduce institution-specific jargon and blind-spots as well as assist with editing.

• Make sure all electronic devices and links work!

• When in doubt, ask your SACSCOC Vice President for advice.

• Serve as an evaluator, if you can.
Presenting Data

• Provide an analysis of data, not just a data dump.
Presenting Data

• Use tables and graphs when appropriate, along with narrative to help the reader understand what you are trying to illustrate.

• Connect the dots for the reader—remember you are translating, providing a context, and building a case for compliance.
Presenting Data

• Remember if you plan to use sampling:
  • An institution may provide a sampling of its programs as long as it is representative of its mission and includes a valid cross-section of programs from every school or division. This sampling, however, does not preclude the institution from having effectiveness data/analysis available on all programs in case evaluators request to review it.
  • It is the institution’s responsibility to make a compelling case as to why the sampling and assessment findings are an appropriate representation of the institution’s programs.

• How many years of data are needed?
  • It depends; what are you trying to illustrate/document?
Packaging

• Submit 1 printed copy for archival purposes, but the other copies can be printed, electronic, or a combination of the two.
• Consider the ease of the evaluators, who might not have always have access to the internet.
• For electronic media:
  • Label clearly
  • Include instructions for how to access or make the starting point obvious
  • Test all before sending, using different computers if possible
So what’s in it for me and my institution?

- Fifth-Year Review is an excellent opportunity to refocus on compliance and introduce new campus community members to accreditation concepts.

- Completion of a cycle; marks conclusion of the reporting on your QEP
Questions?

http://www.sacscoc.org/cbaird.asp