# PREPARING THE COMPLIANCE CERTIFICATION

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#### Purpose of this session:

- Understand the form and function of the Compliance Certification,
- and identify some strategies that you might use at your institution to approach the task of completing the Compliance Certification
- and avoid common pitfalls.

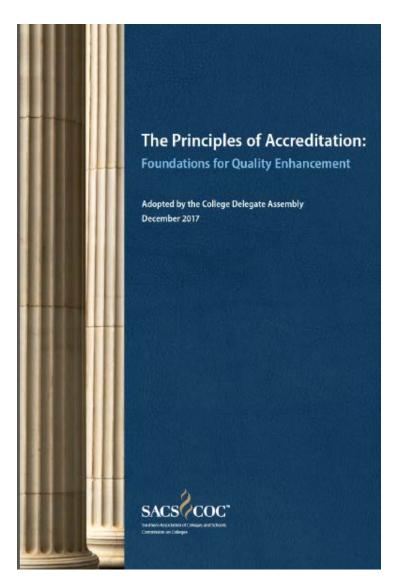
#### During this session, we will...

- Review the purpose and components of the Compliance Certification
- Explore resources and strategies
- Discuss how to avoid common issues and deal with the transition from old to new standards

• Q & A

## New Principles of Accreditation

Active as of January 1, 2018.



#### Limited number of truly new standards

- Section 4: Governing Board
- 2. The governing board
  - g. defines and regularly evaluates its responsibilities and expectations. (*Board self-evaluation*)
- Section 12: Academic and Student Support Services
- 6. The institution provides information and guidance to help student borrowers understand how to manage their debt and repay their loans. (Student debt)

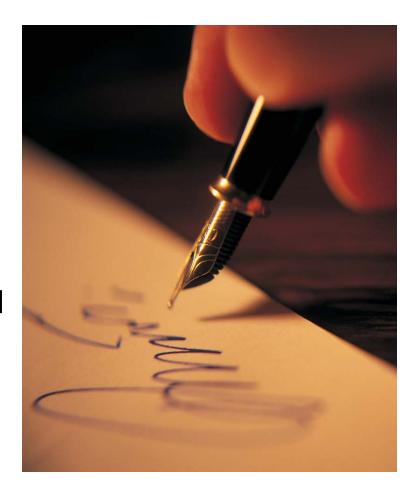
#### A few that have gone away:

- CS 3.2.7 (Organizational structure)
- CS 3.2.14 (Intellectual property rights)
- CS 3.3.1.4 (Institutional effectiveness: research)
- CS 3.3.1.5 (Institutional effectiveness: community/public service)
- CS 3.4.2 (Continuing education/service programs)
- CS 3.5.4 (Terminal degrees of faculty)

#### The Compliance Certification is...

 The report and supporting documentation used by the institution in attesting to its determination of the extent of its compliance with each of the Principles of Accreditation.

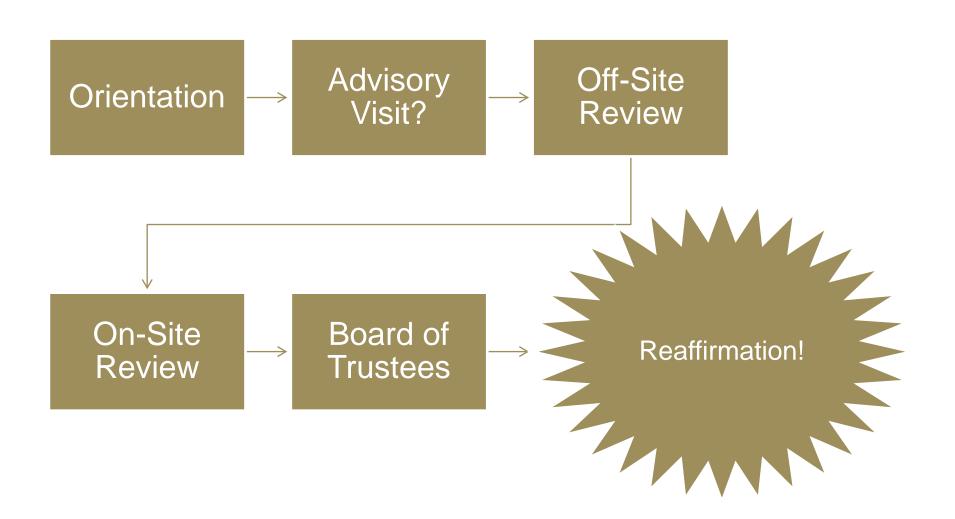
 The signatures of the CEO and the Liaison are the "bond of integrity"



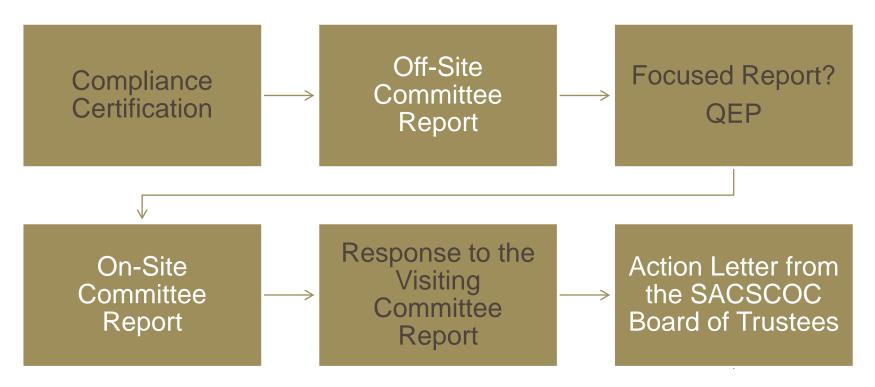
## The Compliance Certification consists of four parts:

- Part 1: Signature Page
- Part 2: List of all substantive changes reported and approved by the Commission since the institution's last reaffirmation and the date of approval
- Part 3: The institution's assessment of compliance with the Principles of Accreditation
- Part 4: "Institutional Summary Form Prepared for Commission Reviews" <a href="http://www.sacscoc.org/inst\_forms\_and\_info1.asp">http://www.sacscoc.org/inst\_forms\_and\_info1.asp</a>
  - (a) lists all locations where coursework toward a degree, certificate, or diploma can be obtained primarily through traditional classroom instruction and (b) describes distance education credit offerings that can be obtained primarily through electronic means.

#### The Reaffirmation Process



#### The Communication Flow

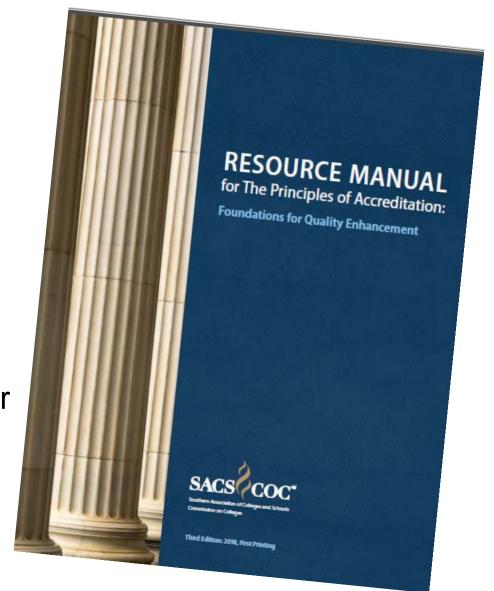


Multiple
Opportunities to
Demonstrate
Compliance



#### Resources

- The Principles of Accreditation
- SACSCOC website
- The Handbook for Institutions Seeking Reaffirmation—New version soon
- The Resource Manual for the Principles of Accreditation



#### Faculty Roster

- Are faculty members qualified to teach the courses they have been assigned?
- Avoid listing the same faculty multiple times.
- See the separate directions.

#### Faculty Roster Form Qualifications of Full-Time and Part-Time Faculty

Name of Institution:

Name of Primary Department, Academic Program, or Discipline:

Academic Term(s) Included:

Date Form Completed:

1	2	3	4
NAME (F, P)	COURSES TAUGHT Including Term, Course Number & Title, Credit Hours (D, UN, UT, G)	ACADEMIC DEGREES& COURSEWORK Relevant to Courses Taught, Including Institution & Major List specific graduate coursework, if needed	OTHER QUALIFICATIONS & COMMENTS Related to Courses Taught

## Optional Faculty Form

 For faculty found to be qualified at the last reaffirmation or initial accreditation and are currently teaching the same courses.

> Faculty from Prior Review (Reaffirmation review only)

#### Guidelines

Faculty Credentials Guidelines:
 <a href="http://www.sacscoc.org/pdf/081705/faculty%20credentials">http://www.sacscoc.org/pdf/081705/faculty%20credentials</a>
 <a href="http://www.sacscoc.org/pdf/081705/faculty%20credentials">http://www.sacscoc.org/pdf/081705/faculty%20credentials</a>
 <a href="http://www.sacscoc.org/pdf/081705/faculty%20credentials">http://www.sacscoc.org/pdf/081705/faculty%20credentials</a>

 Guidelines for Addressing Distance and Correspondence Education:

http://www.sacscoc.org/pdf/081705/Guidelines%20for%20 Addressing%20Distance%20and%20Correspondence%2 0Education.pdf

Policies and Publications:

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

#### Resources

#### Analyzing a Case for Compliance:

http://www.sacscoc.org/pdf/ANALYZING%20A%20CASE%20FOR%2 0COMPLIANCE\_SEPT2010%20\_2\_.pdf

COMPONENT	UNACCEPTABLE	WEAK	ACCEPTABLE
The narrative includes a statement of the institution's perception of its compliance with the requirement	Either the narrative does not include a statement of the institution's perception of its compliance with the requirement, or it is not applicable to the specific accreditation requirement.	The narrative includes a general statement of the institution's perception of its compliance with the requirement but it does not address each of the components of the requirement.  The narrative is not clear, concise, nor focused.	The narrative includes a statement of the institution's perception of its compliance with the requirement that addresses each of the components of the requirement (as necessary).  The statement is focused solely on the requirement.
The rationale for the assertion	The narrative provides no explanation of reason(s) for the assertions regarding compliance with all aspects of the requirement.	The narrative provides a limited discussion of the reason(s) for determining compliance with all aspects of the requirement.	The narrative provides a clear and concise statement of the reason(s) for the assertion regarding the institution's perception of compliance with the requirement.
The evidence supporting the assertion	Either no evidence is presented to support the institution's case or the evidence provided is unacceptable because of two or more of the following characteristics:	Either the evidence provided is uneven in its support of the institution's case or it is deficient because of one of the following characteristics:  • It is not reliable	The evidence provided sufficiently supports the institution's case because of at least three of the following characteristics:  • It is reliable • It is current • It is verifiable

#### The Compliance Certification is not a solo act.

People are your most valuable resource.

Others from your reaffirmation class

ACCSHE Listserv

Consultants?



#### Resource Room at the Annual Meeting

- Examples of Compliance
   Certifications, QEPs, Fifth-Year
   Interim Reports, and substantive
   changes that have been recently
   reviewed.
- Documentation should be viewed as illustrative only.



## Strategies for involving others

 Start with your president and leadership team.



## Strategies

- Establish generous timelines.
- Provide clear expectations for what you want done, by whom, and by when.



### Strategies

 Use your knowledge of colleagues' strengths and talents to guide recruitment.

 Don't feel bound to a core team--not everyone has to play a formal role.

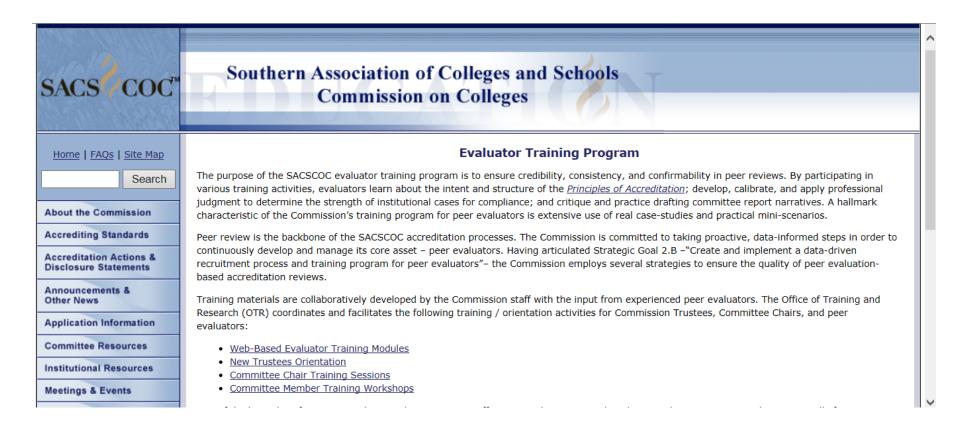


# Serve as an Evaluator or Observer

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



## **New Evaluator Training**



## **Avoiding Common Trouble Spots**

- Quality of the Response
- Interpretation of the Standards
- Lack of evidence/documentation
- Technical Issues



### Quality of the Response

- Address all parts of the standard
- Provide guideposts: headings, images/tables
- Connect the dots—especially for graphs and charts



### Quality of the Response

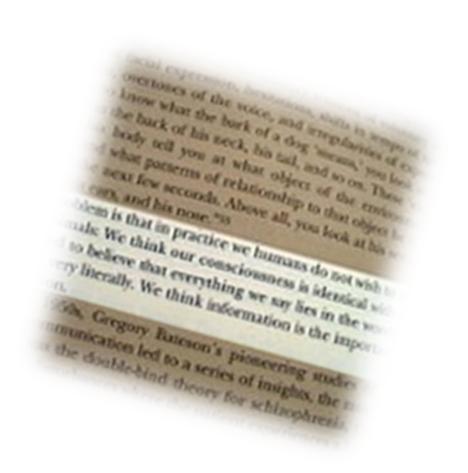
- Imagine yourself as the reader-and/or get someone else to read
- Provide evidence to support your assertions
- Tell your story—build your case for compliance or describe your plan for coming into compliance



### Quality of the Response

 Write the narrative to stand alone; link supporting documentation.

 Consider including key excerpts with links to full documentation.

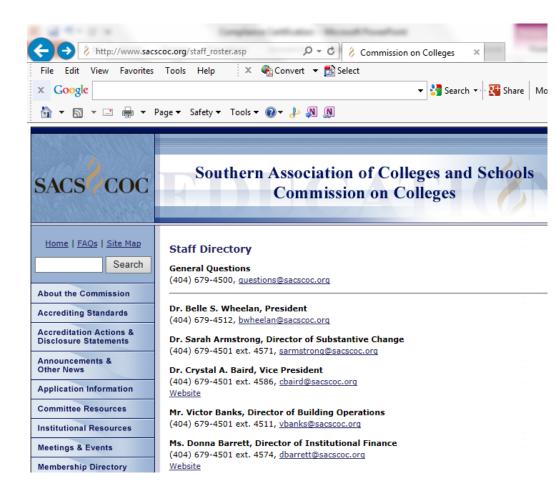


#### Interpretation of Standards

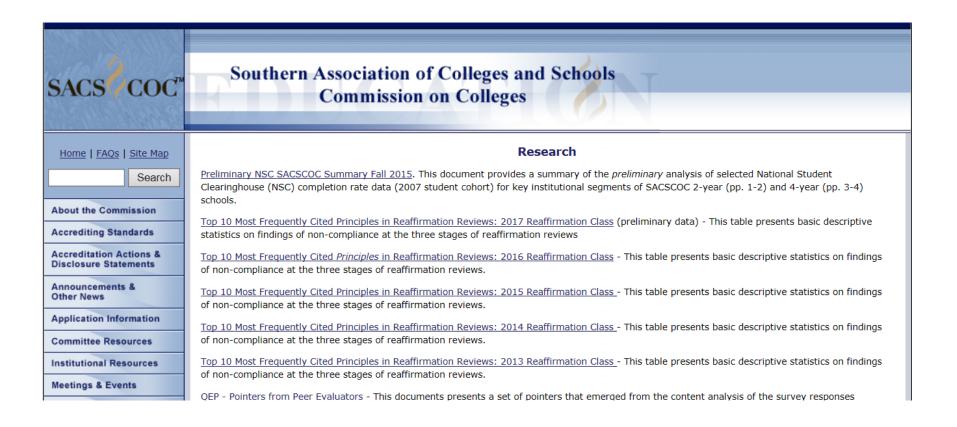
Remember your resources

New Resource Manual

When in doubt ask!



### Be aware of standards often found in noncompliance.



Top 10 Most Frequently Cited Principles in Decennial Reaffirmation Rev

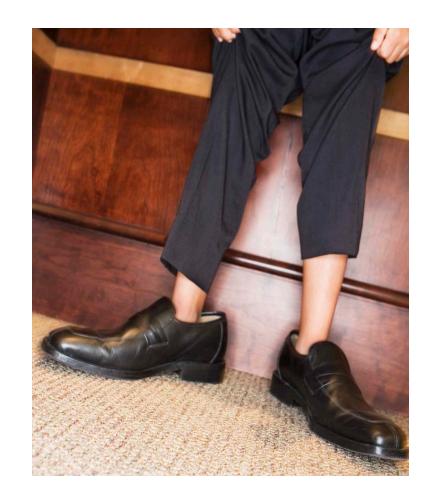
Review Stage I: OFF-Site Committee				Review Stage II: ON-Site Committee				
Rank	Requirement/Standard		% Institutions in Non- Compliance		Rank	Requireme	ent/Standard	% Institutions in Non- Compliance
1.	3.7.1 (Faculty Competence)		95%		1.	3.3.2 (Quality Enhan	ncement Plan)	56%
2.	3.3.1.3 (IE - Educational Supp	ort)	59%		2.	3.7.1 (Faculty Competence)		31%
3.	3.3.1.2 (IE - Administrative Ur	nits)	54%		3.	3.3.1.1 (IE - Educational Programs)		25%
4.	3.3.1.1 (IE - Educational Progr	rams)	51%	REPORT	4.	3.3.1.2 (IE - Administrative Units)		
5.	3.2.14 (Intellectual Property Rights)		50%	REP	5.	3.3.1.3 (IE - Educational Support)		22%
6.	6. 3.3.1.5 (IE - Community/Public Service)		47%	Q3	6.	3.3.1.5 (IE - Community/Public Service)		17%
7.	7. 2.8 (Faculty)		43%	FOCUSED	7.	3.5.1 (General Education Competencies)		14%
8.	3.7.2 (Faculty Evaluation)		41%	FC	8.	3.7.2 (Faculty Evaluation)		11%
9.	3.2.9 (Personnel Appointment)		250/	NAL	9.	3.10.1 (Financial St	tability)	10%
10.	3.4.11 (Academic Program Coordination)		35%	TIO	10.	3.3.1.4 (IE - Resear	rch)	8%
Key Descriptive Statistics (Number of Principles Cited Per Institution)			INSTIT!	Key Descriptive Statistics (Number of Principles Cited Per Instit			ution)	
Mei	an=16.8   SD=8.5   Median	1=16	Range=38		Mean=3.2   SD=2.9 Median=3 F		Range=13	

#### Principles in Decennial Reaffirmation Reviews: 2017 Reaffirmation Class

	Review Stage II: ON-Site Committee					Rev	Trustees		
	Rank	Requireme	ent/Standard	% Institutions in Non- Compliance		Rank	Requirem	ent/Standard	% Institutions in Non- Compliance
	1.	3.3.2 (Quality Enhan	ncement Plan)	56%		1.	3.3.1.1 (IE - Edu	icational Programs)	17%
	2.	3.7.1 (Faculty Comp	etence)	31%		2.	3.3.1.2 (IE - Administrative Units)		10%
	3.	5.5.1.1 (iz - Educational Programs)		250/		3.	3.10.1 (Financial Stability)		10%
ORT	4.			25%	REPORT	4.	3.3.1.5 (IE - Con	nmunity/Public Service)	8%
REP	5.	3.3.1.3 (IE - Educational Support)		22%	REP	5.	3.7.1 (Faculty Co	670	
03	6.	3.3.1.5 (IE - Community/Public Service)		17%	SE	6.	3.3.1.3 (IE - Educational Support)		7%
OCUSED	7.	3.7.2 (Faculty Evaluation) 3.10.1 (Financial Stability)		14%	RESPONSE	7.	3.5.1 (General Ed	lucation Competencies)	6%
H	8.			11%	88				
M	9.			10%	ML				≤3%
TIIO	10.			8%	TIONAL				
NSTITT	Key Descriptive Statistics (Number of Principles Cited Per Institution)				STITU	Key Descriptive Statistics (Number of Principles Cited Per Institution)			ion)
	Mean=3.2   SD=2.9 Median=3		Range=13	III			Median=0	Range=7	

#### Not all standards are equal

- Core Requirements are big ticket items.
- Institutional Effectiveness and Finance
- Standards related to federal regulations are reviewed by both Off-Site and On-Site Committees



#### Compliance Certification form

 DO look at the actual, current form.

#### Part 3. INSTITUTIONAL ASSESSMENT OF COMPLIANCE

in support of its judgment in accordance with directions requested in the category description. Compliance The institution meets the requirement and provides a convincing argument in support of its determination and provides documents or a sampling of documents (or electronic access to the documents) demonstrating compliance. Partial Compliance The institution meets some, but not all, aspects of the requirement. For those aspects meeting the requirement, the institution provides a convincing argument in support of its determination and provides a list of documents or sampling of documents (or electronic access to the documents) demonstrating compliance. For those aspects not meeting the requirement, the institution provides the reason for checking partial compliance, a description of plans to comply, and a list of documents that will be used to demonstrate future compliance. Non-Compliance The institution does not meet the requirement and provides the reason for checking noncompliance, a description of plans to comply, and a list of documents that will be used to demonstrate future compliance.

**Directions:** For each of the Core Requirements, Comprehensive Standards, and Federal Requirements listed below, the institution should place an "X" before the judgment of compliance and then add narrative

**Note 1:** Several of the standards/requirements require that an institution provide a policy. When developing policies and procedures addressing the requirement outlined in a standard, an institution may want to refer to a best practice statement approved by the SACSCOC Board of Trustees that outlines criteria for a functional policy and procedures for implementation. The document, "Developing Policy and Procedure Documents," can be found at <a href="http://www.sacscoc.org/policies.asp">http://www.sacscoc.org/policies.asp</a>.

Note 2: Core Requirements are printed in bold and marked as [CR]. All standards marked with [Off-Site/On-Site Review] will be reviewed by both the Off-Site Reaffirmation Committee and the On-Site Reaffirmation Committee regardless of the judgment rendered at the time of the off-site review.

#### Section · 8 : · Student · Achievement ¶

	"
<b>→</b>	The institution identifies, evaluates, and publishes goals and outcomes for student achievement appropriate to the institution's mission, the nature of the students it serves, and the kinds of programs offered. The institution uses multiple measures to document student success.  (Student achievement) [CR: Off-Site/On-Site Review]  Compliance   Non-Compliance   Narrative:  Narrative:
•	
1 .	The institution identifies amounted automorphism the automate action it reliables the re-
	The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results.
	in the areas below:
	8.2,a → student-learning outcomes for each of its educational programs.
	Student outcomes: educational programs) [Off-Site/On-Site Review]
	(Stade in Valcomes: Educational programs) [On-Site On-Site Review]]
	··Compliance → ··Non-Compliance → ··Partial·Compliance¶
	¶
	Narrative:¶
o	
	8.2.b→ student-learning outcomes for collegiate-level general education competencies of
	its undergraduate degree programs.¶
	→ (Student-outcomes: general-education)
	1
	·Compliance →·Non-Compliance →·Partial·Compliance¶
	¶
	Narrative:
	۵
	8.2.c→ academic and student services that support student success.¶
	→ (Student-outcomes: academic-and-student-services)¶
	¶
	· Compliance → · Non-Compliance → · Partial Compliance

## Basic Eligibility Standards

See the Notes in the Resource Manual

#### SECTION 3: Basic Eligibility Standard

SACSCOC accredits degree-granting institutions in the southern region of the United States and those operating in select international locations. To gain or maintain accreditation with SACSCOC, an institution is a continuously functioning organization legally authorized to grant degrees and other academic credentials, and able to demonstrate compliance with SACSCOC standards and policies.

- 1. An institution seeking to gain or maintain accredited status
  - a. has degree-granting authority from the appropriate government agency or agencies. (Degree-granting authority)
     [CR]
  - b. offers all coursework required for at least one degree program at each level at which it awards degrees. (For exceptions, see SACSCOC policy <u>Documenting an Alternative Approach</u>.) (Coursework for degrees) [CR]
  - c. is in operation and has students enrolled in degree programs.
     (Continuous operation) [CR]

## Standard 14.5 (Policy Compliance)

 Look to the Compliance Certification for the applicable policy statements.

14.5.a	"Reaffirmation of Accreditation and Subsequent Reports"  Applicable Policy Statement. If an institution is part of a system or corporate structure, a description of the system operation (or corporate structure) is submitted as part of the Compliance Certification for the decennial review. The description should be designed to help members of the peer review committees understand the mission, governance, and operating procedures of the system and the individual institution's role with in that system.  Documentation: The institution should provide a description of the system operation and structure or the corporate structure if this applies.						
	Compliance Non-Compliance Partial Compliance						
	Narrative:						
14.5.b	"Separate Accreditation for Units of a Member Institution"  Applicable Policy Statement. If the Commission on Colleges determines that an extended unit is autonomous to the extent that the control over that unit by the parent or its board is significantly impaired, the Commission may direct that the extended unit seek to become a separately accredited institution. A unit which seeks separate accreditation should bear a different name from that of the parent. A unit which is located in a state or country outside the geographic jurisdiction of the Southern Association of Colleges and Schools and which the Commission determines should be separately accredited or the institution requests to be separately accredited, applies for separate accreditation from the regional accrediting association that accredits colleges in that state or country.						
	Implementation: If, during its review of the institution, the Commission determines that an extended unit is sufficiently autonomous to the extent that the parent campus has little or no control, the Commission will use this policy to recommend separate accreditation of the extended unit. No response is required by the institution.						
	Compliance Non-Compliance Partial Compliance  Narrative:						

## Optional Feedback on QEP Topic during the Off-Site Review

 Institution submits an executive summary with the Compliance Certification for the consideration of the Off-Site Reaffirmation Committee and the Committee provides non-binding commentary on the concept.



## Evidence/documentation of your assertions

- Documents
- Handbooks
- Redacted examples
- Screenshots of webpages
- Links
- Photos
- Videos



#### Evidence of Implementation

- Implicit in every standard mandating a policy or procedure is the expectation that the policy or procedure is in writing and has been approved through appropriate institutional processes, published in appropriate institutional documents accessible to those affected by the policy or procedure, and implemented and enforced by the institution.
- At the time of review, an institution will be expected to demonstrate that it has met all of the above elements.
- If the institution has had no cause to apply its policy, it should indicate that an example of implementation is unavailable because there has been no cause to apply it.
- See Appendix A of the Resource Manual

### Technical Tips

- Test all flashdrives
- Double check links beware live links
- If you are presenting your Compliance Certification as a website, it must remain static for the period of review



#### Paper or Electronic?

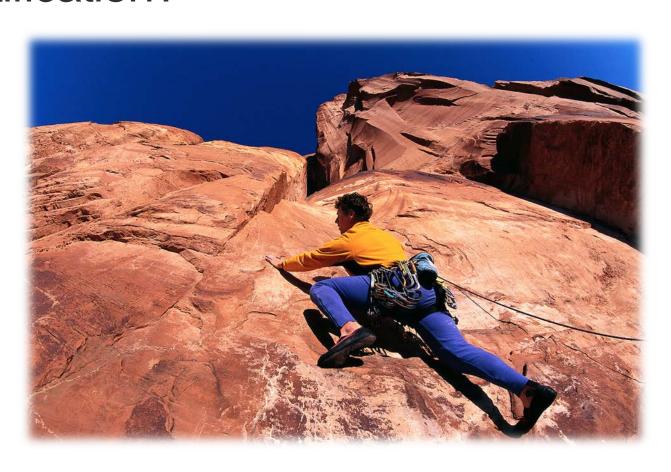
- Either—whichever you choose, try it out with someone to test ease of navigation
- Flash drive vs Paper preference? Flash drive with key printed documents
- Online Submission? Coming soon, if the technology fee passes
- Service Provider?

#### **Timelines**

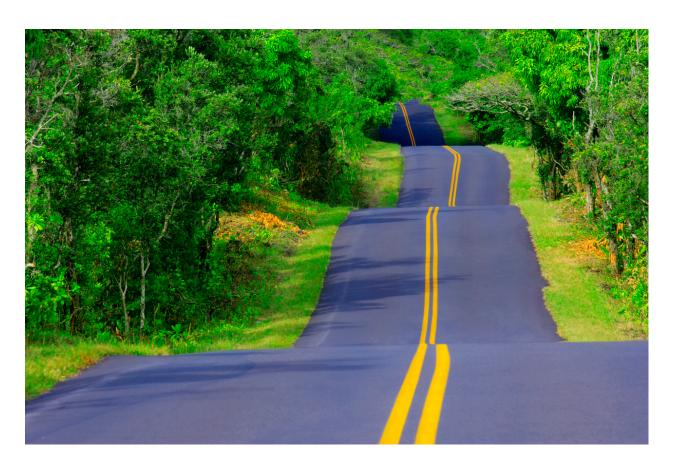
How soon can we begin writing?



# Biggest challenge before your team related to completing the Compliance Certification?



#### Questions?



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