Crash Course: Compliance Certification

• We will (quickly) cover a number of points and tips, leaving some time at the end (we hope) for questions. But feel free to ask questions as we go

• Certain things are universal, some are unique

Crash Course: Compliance Certification

• Recurring theme: view your work from multiple perspectives taking guidance from other successful processes at your institution

• Ultimately, the CC should be a perfect fit for your institution – your skills to develop it will grow in the process
So .... Who are we to say?

- Marty: Leader of successful 2012 reaffirmation of accreditation at Old Dominion University (no recommendations), institutional effectiveness, SACSCOC on-site/off-site reviewer, consultant

- Leroy: Provost overseeing the Compliance Certification for the Norfolk State University in the 2019 reaffirmation cycle and substantial involvement in the 2008 reaffirmation process.

Three Bites: Reaffirmation Process

- **Compliance Certification (CC)**
  - Off-Site Review – Report
- **Focused Report**
  - On-Site Review – Report
- **Response Report** (optional)
- → Commission Votes

- Advice on Strategy: Clear as many standards as early as you can leaving time to fix real issues

Compliance Certification Elements

**Narrative**

- Past and Present-Oriented
  - Use future tense if you are planning to remedy a shortcoming and declare partial compliance (at least)
  - QEP is your opportunity to talk about the future
Principles of Accreditation: “Standards” Organized in “Sections”

1. Principle of Integrity
2. Mission
3. Basic Eligibility Standard
4. Governing Board
5. Administration/Organization
6. Faculty
7. Institutional Planning and Effectiveness
8. Student Achievement
9. Educational Programs Structure and Content
10. Educational Policies, Procedures and Practices
11. Library and Learning/Information Resources
12. Academic and Student Support Services
13. Financial and Physical Resources
14. Transparency and Institutional Representation

Common Compliance Certification Shortcomings

- Failure to respond to all components of each standard in the narrative; some are multi-part, and some parts apply only in certain situations
- Providing inadequate evidence to support an assertion in the narrative
### Common CC Shortcomings

- Providing **unnecessary narrative and/or evidence** that does not usefully address the standard in the clearest way
- *...every institution’s solution is their own ...* crafted to meet with their particular situation ... you may not feel this going in, but if you persist, you will become the expert

### Institutional factors and organizing for the Compliance Certification: People & Process

- Use characteristics of **other successful institutional processes** (e.g., general education reform, faculty policy development) for guidance- What made them successful?
- Connect the **right people to the appropriate aspects** of the CC process (e.g., faculty in the academic standards)
- **Build redundancy** into the process to reduce the risk of missing important details – multiple levels of review

### Process for Writing and Editing Compliance Certification
### SACSCOC Reaffirmation Visit - NSU Plan

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
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</thead>
<tbody>
<tr>
<td>2017</td>
<td>Background</td>
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<tr>
<td>2018</td>
<td>Certification Draft Report</td>
</tr>
<tr>
<td>2019</td>
<td>Public Decision</td>
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### SACSCOC Reaffirmation Visit

**VISIT**
Visit is scheduled for March 5-7, 2019.

**MEET**
SACSCOC has redefined Principles of Accreditation (approved at the December 2017 Annual Meeting):
- New Principles
  - Streamlined to remove redundancy
- Two New Principles
  - Principle 4.2.6 Self-Evaluation of the Board of Visitors
  - Principle 12.6 Student Debt – How the institution informs students about financial literacy

**RESPONSE**
NSU will be among the first class to fully respond under new Principles.

### SACSCOC Reaffirmation Timeline

<table>
<thead>
<tr>
<th>Year</th>
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<tr>
<td>2018</td>
<td>NSU Internal Review</td>
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<tr>
<td>2019</td>
<td>External Review</td>
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</tbody>
</table>

**2018**
- Submission: September 1-10, 2018
- Final Draft: July 2, 2018
- Off-Site Review: November 4-10, 2018
- Response via Focused Report: November 11, 2018 – January 24, 2019
- Response to On-Site Review: March 7 – August 8, 2019

**2019**
- Submissions:
  - Focused Report and Updated Institutional Summary
  - Quality Enhancement Plan: January 25, 2019
Accreditation:
Reaffirmation of Accreditation Process
Preparation and Response Plan

University-wide Review (75)
Internal Review/Faceting Team (13)
External Review Team (30)
Focus Writing Team (11)

Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting

December 8, 2019

NSU Writing Teams
Reaffirmation of Accreditation
Preparation and Response Plan

Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting

December 8, 2019

12 Writing Teams: Peer Reviewers

<table>
<thead>
<tr>
<th>Writing Team 1</th>
<th>Writing Team 2</th>
<th>Writing Team 3</th>
<th>Writing Team 4</th>
<th>Writing Team 5</th>
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<tr>
<td>Dr. Stanley Donaldson*</td>
<td>Dr. Danny Adams</td>
<td>Dr. Cathy Jackson</td>
<td>Dr. Denise Oye</td>
<td>Dr. Angela E. Goodloe</td>
<td>Patrick Wisbey</td>
<td>Dr. Marva Speight</td>
<td>Dr. Julie Jingard</td>
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<td>Dr. Faith Johnson-Coleman</td>
<td>Dr. Angeline Goudie</td>
<td>Dr. Patrick Wisbey</td>
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Norfolk State University | 2019 SACSCOC Annual Meeting

December 8, 2019

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<th>Writing Team 9</th>
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<tr>
<td>Ms. Mark Finney*</td>
<td>Dr. Willie L. Todd, Jr.*</td>
<td>Ms. Karla J. Amaya Gordon*</td>
<td>Dr. Suely Black*</td>
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<td>Ms. C. Lynne Harrison</td>
<td>Ms. Traci Johnson</td>
<td>Ms. Tanya Perry</td>
<td>Dr. Reddy Dondeti</td>
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<td>Ms. Tony Corrington</td>
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Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting

December 8, 2019

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December 8, 2019

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Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting

December 8, 2019
NSU Writing Team Project Plan

<table>
<thead>
<tr>
<th>Writing Team Project Plan Checklist</th>
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<tbody>
<tr>
<td>• Analyzed Principles</td>
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<tr>
<td>• Created Summer Work Schedule</td>
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<tr>
<td>• Made Team Assignments</td>
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<tr>
<td>• Established Completion Timeline</td>
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<tr>
<td>• Collected Evidence</td>
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<tr>
<td>• Drafted Narratives</td>
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<tr>
<td>• Exchanged Narratives with Assigned Internal Peer Review Team</td>
</tr>
<tr>
<td>• Posted Drafts of Narratives to SharePoint Site</td>
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</tbody>
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NSU Internal Review Team
Reaffirmation of Accreditation

Preparation and Response Plan

Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting

NSU Internal Review Writing Team

- Dr. Andrew Arroyo
- Dr. Annie Perkins
- Dr. Aurelia Williams
- Dr. Clifton Myles
- Dr. Denelle Wallace
- Dr. Denise Snowden-Langley
- Dr. Desideria Hacker
- Dr. Dorothy Jones
- Dr. Elise Barnes
- Dr. Enrique Zapatero
- Dr. Felicia Mebane
- Dr. Gladys Bennett
- Ms. Karla Amaya Gordon
- Dr. Berkley King
- Dr. Marty Smith Sharpe
NSU Internal Review Process

NSU External Review Team
Reaffirmation of Accreditation
Preparation and Response Plan

Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSOC Annual Meeting

NSU External Reviewers

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<tr>
<th>1.</th>
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<tr>
<td>Retired SACSOC Vice President</td>
<td>Provost and Vice President</td>
<td>Assistant Vice President</td>
<td>Assistant Vice President</td>
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<td>Institutional Effectiveness</td>
<td>Institutional Effectiveness Assessment</td>
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<td>Associate Dean of University Studies Assessment Advisory Council James Madison University</td>
<td>Director Library Services</td>
<td>Director Civic Leadership and Service Learning</td>
<td>Associate Vice President</td>
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<tr>
<td>Standards: 8, 10</td>
<td>Standard 11</td>
<td>Standard 12</td>
<td>Financial Services</td>
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<tr>
<td>Assistant Vice President of Finance and Controller</td>
<td>Distance Education Professional Consultant</td>
<td>Standards: 10, 14</td>
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December 8, 2019
Accreditation Update:
SACSCOC Website
Compliance Certification Report

Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting

BOARD OF VISITORS STATEMENT OF GOVERNANCE
Amended September 13, 2016. Approved December 13, 2016

In accordance with the Code of Virginia § 23.2-64 (1) and upon recommendation of the Executive Committee, the Board of Visitors of Norfolk State University adopts this Statement of Governance setting forth the role of the Board in the governance of the University.

1. As a public institution, Norfolk State University is accountable to the citizens of Virginia through institutional direction from its active, informed, and engaged Board of Visitors.

2. The powers and duties of the Board are based on specific sections of the Code of Virginia and are exercised to accomplish the purposes and mission, and to promote the general welfare of the University.
2018 Timeline:
NSU Preparation and Response Plan

Forging Onward

External Review
May 28, 2018 - June 1, 2018

Reaffirmation Report Submission
July 2, 2018

Reaffirmation Report (Final Draft)
September 20, 2018

SACSCOC Off-site Review
November 8 - 10, 2018

Focused Report Submission
September 10, 2018

Reaffirmation Report
July 2, 2018

SACSCOC Off-site Review
November 12 - 16, 2018

2019 Timeline:
NSU Preparation and Response Plan

Forging Onward

Submission: Focused Report
January 25, 2019

On-site Review: Visiting Team
March 5-7, 2019

Response to On-site Review Feedback
March 7, 2019 - August 8, 2019

Public Decision
December 5, 2019

Quality Enhancement Plan
**Close Reading for Effective Writing (CREW)**

Dr. Leroy Hamilton, Jr., Provost and Vice President for Academic Affairs (I)
Norfolk State University | 2019 SACSCOC Annual Meeting
### Quality Enhancement Plan: Close Reading for Effective Writing (CREW)

**Committee Members:**

- QEP Director, Professor, History, COLA
- Professor, NPE, SOE
- Professor, English, COLA
- Professor, Business, SOB
- Dean, Library Services
- Dean, Interdisciplinary Studies, COLA
- Director, Assessment
- Assistant Director, Assessment

**Dean, Honors College:**
- Executive Director, Student Success
- Assistant Professor, Sociology, COLA

**Dean, Education:**
- Associate Vice Provost
- Accreditation Specialist

**Dean, Interdisciplinary Studies, COLA:**
- Director, Student Pathways and Academic Formation

**Dean, Library Services:**
- Assistant Professor, Liberal Arts, CSET

**Dean, Nursing:**
- Assistant Professor, Rehabilitation & Mental Health Counseling, SOE

**Dean, Interdisciplinary Studies, COLA:**
- Director, Academic and Student Services, SOE

**Provost:**
- Dean, Education

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### Think Like the Reviewer

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### Quality Enhancement Plan

**NSU CREW**

*Join Our CREW*

*Close Reading for Effective Writing*

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### NSU CREW

*Rowing into Reading and Writing*

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### Quality Enhancement Plan

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### Think Like the Reviewer
Embrace principles of “Think Like the Reviewer”

- "Think like the reviewer" is a variation of "know your audience" dictum in public speaking and writing.
- Unhinge yourself from parochial thinking: your unique ways of talking about things need to be translated into common higher education language.
- Understand reviewers’ assignments and make key information readily accessible – don’t make them dig!

Embrace principles of “Think Like the Reviewer”

- Organize the exposition of narrative and evidence to emphasize the key decision points of the reviewer.
- Present a plausible case – not everything is perfect!
- Minimize the use of interesting but distracting materials.

The Reviewer’s Task

- For the most part, reviewers want the institution to be successful.
- Reviewers are very busy.
- Each reviewer is assigned a group of 7-8 standards for which s/he is the primary reviewer; a secondary reviewer is also assigned.
  - Each reviewer has 7-8 standards and is charged with writing a draft report on their primary assignments.
The Reviewer’s Task

• What this means for the institution:
  • Essential: Present a narrative and associated evidence in a form that an interested and motivated reader can quickly review and render a judgment
  • Reviewers who are presented an organized, clear narrative with relevant supporting evidence are happy reviewers.
  • Reviewers who are confused or required to dig to find needed information are less positively disposed.

The Institution’s Response

• Remember: A primary problem in reports presented to SACSCOC is failure of the institution to answer all aspects of the standard which apply.
• Reviewers are instructed to ensure that institutions address all aspects of each standard.

The Institution’s Response

• Some standards have a single theme; others are multi-part, with subordinate phrases and qualifiers.
• Break down each standard into its component elements and be sure that you address all.
Working with SACSCOC principles and resource materials

- **Analyze and deconstruct standards** with CC team members to refine understanding and application of the standards

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Deconstructing the Standard

- **5.1** The institution has a chief executive officer whose primary responsibility is to the institution. (Chief executive officer) [CR]
- **has a chief executive officer** [SCOPE]
  - primary responsibility is to the institution [ASPECTS]

---

Deconstructing the Standard

12.1 The institution provides appropriate academic and student support programs, services, and activities consistent with its mission (Student support services) (Core requirement)

**Academic and student support: programs – services – activities** [SCOPE]
  - Consistent with mission [ASPECTS]
  - Intended to:
    - Promote student learning
    - Enhance development of students
SACSCOC Resources

Principles of Accreditation ("standards")
Manuals & Handbooks: Resource Manual
SACSCOC Policies
Guidelines
Best Practices

Key Documents for Your Use

- 2018 Principles of Accreditation
- SACSCOC Resource Manual – the MOST valuable resource – a guide not a formula. Guidance on making the case for compliance – rationale, questions to consider, documentation, references to key policies and other SACSCOC documents, and cross-references on standards
- Handbook for Institutions Seeking Reaffirmation Outlines process and deadlines
Key Documents for Your Use

- “Compliance Certification Document”
  - MS Word document
  - Lists all the standards and references policies
  - Functions as a “template” for the entire Compliance Certification

- Crosswalk for Proposed Principles
  - Links 2012 standards to associated to 2018 Standards.
  - Remember there are significant wording changes; some standards were split, some are new, some were dropped
  - Templates for certain standards, e.g., Faculty Roster

Working with SACSCOC Principles and resource materials

- Pay attention when a standard relates to a particular SACSCOC policy – know and address that policy! Consult Resource Manual.
- Mine information from SACSCOC handbooks and manual to develop review checklists and rubrics
  - SACSCOC home page → Policies and Publications

SACSCOC Required Institutional Policies

- Review all standards for the words “policy” “procedure” or “process”
  - The institution must have a policy in that area
  - It should be published
  - You should provide evidence that the process has been implemented (or make a statement why not, e.g. CR 3.2.5 Board Dismissal)
  - Also related: be sure that you can provide evidence that you follow your own institutional policies
Narrative Writing:
The Perfect Chapter

Narrative writing and “the perfect chapter”

• Narrative tells the institution’s “story” within the particular focal area(s) covered by the standard

• Accreditation writing is unlike any other type of writing: avoid a public relations approach
Narrative writing and “the perfect chapter”

• Craft responses to each standard into a free-standing chapter – tell the whole story as it relates to the components of the standard – reviewers may or may not review related chapters

• Use of past and present tense. Use of future tense suggests that the institution is not currently compliant.

Narrative writing and “the perfect chapter”

• Use of sections and headers to help reviewers keep their place – have the chapter organization point the reviewer to the case for compliance.

• Many/most of the assertions you make should be supported by evidence.

Importance of consistency

• Keep your story straight:
  • Within and across chapters of the narrative and in the evidence provided
  • Inconsistency can affect reviewer’s opinion regarding integrity
  • Also: Be mindful of expectations created by CC for the on-site visit
Declaring Less Than Compliant

• CC is an off-shoot of the culture and practices of your institution

• Approach should be declarative and forthright

• Standard One: *Principle of Integrity* – how you present things provides information about institutional integrity. Appearing unwilling to present all the facts calls into question everything you have done.

Declaring Less Than Compliant

• Advice: Lay out the facts as they are, and if necessary, outline a remedy to the problem and declare partial compliance or non-compliance -- if you see the problem, so can the reviewer.

• This is the case where the use of the *future* tense is appropriate –
  • You must provide a specific, clearly articulated plan to bring the institution into compliance.

Declaring Less Than Compliant

• The Focused Report provides the opportunity to describe the actions taken to bring the institution into compliance and to provide supporting evidence.
Declaring Less Than Compliant - Example:

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

While new Board members typically sign a conflict of interest agreement [cite examples] during their initial orientation, the Board does not have a formal conflict of interest policy. The chair of the Board’s Bylaws and Policies Committee has drafted such a policy [cite draft] for consideration and possible adoption at the January 2016 Board meeting. This policy requires that each member of the Board sign a conflict of interest agreement each year.

Presentation of evidence, documentation, tables and graphs

- Embed access to evidence within the narrative.
- Build drill-through tables allowing reviewer access to desired level of detail quickly – builds a sense of transparency

Presentation of evidence, documentation, tables and graphs

- Label tables and graphs to track with the narrative, e.g. first table in 4.3 would be labelled Table 4.3-1
- Format large evidence documents to take reviewer to appropriate page of the document and highlight
- Use of figures to describe processes, e.g. 7.1 IE
Rules of Thumb

• Institutional Effectiveness and Distance Learning/Off-Campus (if applicable) are concepts that need to be addressed across standards – not just those explicitly mentioning them. See the Resource Manual.

• Faculty oversees the curriculum – need to provide evidence of this in multiple places relating to curriculum approval (10.4), acceptance of credit (10.8), amount and level of credit (10.7)

Rules of Thumb .....  

• Start gathering Documentation/Evidence early:
  • Minutes to key meetings – board, faculty meetings, curriculum are essential to demonstrate process
  • Remember: If the standard uses words “institution has policy/procedure.....” or “process” this means you must have policy, likely have to publish and must provide evidence that they policy has been implemented
Rules of Thumb ....

• In all of your other policies – even those not required by SACSCOC – follow your own policies and provide evidence that you follow them when you discuss them in the narrative.
• Track related standards to ensure consistency across narratives – see Resource Manual
• Always, always, always say “SACSCOC” not “SACS”

Rules of Thumb ....

• Wording of standards – identify scope appropriately look closely if it covers “programs” or “degree programs”
• Remember: Be sure that you have the most current version of the “Compliance Certification Document” (Template for CC)
  • Word Document
  • If you use a vendor for your CC, be sure they have all standards preloaded correctly

Editors and External Reviewers

Leveraging Resources for Effectiveness
The Writer/Editor

• Views your CC from a higher level and seeks to establish consistency in voice, formatting, and presentation
• Identifies issues in cases made across sections

The writer/editor ideally should be

• Somewhat knowledgeable about your institution
• Familiar with accreditation writing
• Invested in the process

External Reviewers:
Boosting quality and completeness

• Independent reviewers are not embedded in your culture and will be able to bring an objective perspective and give helpful advice
• Experienced SACSCOC reviewers know the review process and can judge how well your CC holds up under scrutiny
• Also: senior faculty/staff at your institution who have not been involved in the process can also provide assistance

Using Technology for Success

Managing the Process
Presenting the Compliance Certification for Review
Using Technology:
Spreadsheets to Manage the Process

• **Macro**: Listing of All (Applicable) Standards
  - Overall Status – Draft vs. Complete
  - Percent Complete Tracking

• **Micro**: Production Processes
  - Specifics regarding status - where in the process is each standard. What needs attention?

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Example: Tracking Spreadsheet

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<tr>
<th>Type</th>
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<th>Mandatory</th>
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<th>Draft Complete</th>
<th>Narrative</th>
<th>Narrative Required</th>
<th>Narrative Provided</th>
<th>Narrative Uploaded</th>
<th>Evidence</th>
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Spreadsheets: Managing the Process

• Other possible additions to your tracking spreadsheet using Resource Manual information:
  - Related to standard(s)....
  - Related SACSCOC Policy
  - DL Flag
  - SACSCOC Template Provided
  - Institutional Policy Required
  - To Be Reviewed On-Site
  - Included in the 5th Year Report
Presenting the Compliance Certification Documents to Reviewers

- Generation of print and electronic reports
- Providing access to evidence
- How do you want your print documents to look?
- How do you want reviewers to access electronically?
- Jump drive? Website? Both?

Electronic Systems

- Many are available, differing levels of maturity
  - Examples: Compliance Assist, Xitracs, WEAVEOnline, Taskstream . . .
- Movement toward integrated systems which include preparation of:
  - Accreditation documents, Compliance Certification, Focused Reports,
    Fifth Year Report– narrative and evidence
  - Assessment and institutional effectiveness system
  - Planning systems
  - Portfolios
  - Adobe Pro can also be used to create linked documents to submit if the prepackaged systems are too expensive.

Electronic Systems

- Many provide environment for
  - Document editing environment
  - Document management and backup
  - Tracking progress on each section
  - Faculty Credentials
  - Document storage and linking
  - Production of free-standing electronic version of document – e.g., for jump drive
  - Hosting of website for reviewers
Considerations

• Build it yourself only if you have the capacity and support to make rapid and ongoing adjustments

• Identify required functionality and technical support needed for the CC and decide what is most important for your institution

• Consider short- and long-term benefits of selection

Considerations

• Key factors in considering external vendor products
  • Importance of ease of use: reviewers differ in their comfort with technology
  • Support: Availability of quick response when technical issues arise
  • Ability to produce: a free-standing web version and a quality printed version

• Get information about vendors while you are here

New 2018 Principles of Accreditation

Bonus Slides (if we have time)

What's new and different?
Previous Organization of principles (2012)

1. Integrity
2. Core Requirements
3. Comprehensive Standards
4. Federal Requirements

Principles of Accreditation: “Standards” Organized in “Sections”

1. Principle of Integrity
2. Mission
3. Basic Eligibility Standard
4. Governing Board
5. Administration/Organization
6. Faculty
7. Institutional Planning and Effectiveness
8. Student Achievement
9. Educational Programs Structure and Content
10. Educational Policies, Procedures and Practices
11. Library and Learning/ Information Resources
12. Academic and Student Support Services
13. Financial and Physical Resources
14. Transparency and Institutional Representation

Principles of Accreditation: “Standards”

Integrity – the ultimate standard
Core Requirements (CR) – indicated with each standard; must be found compliant on all CRs to be reaffirmed

Crosswalk from 2012 Principles to Proposed Principles can be found on the SACSOC website sacscoc.org ➔ Accreditation Standards ➔ Crosswalks for Reaffirmation and for Fifth Year Interim Report.
RULE OF THUMB:
SACSCOC doesn’t embellish or add extra words; if seemingly similar words are used in a standard, subtle differences are important to consider in making your case for compliance

12.1 The institution provides appropriate academic and student support programs, services, and activities consistent with its mission. (Student support services) (Core requirement)

programs, services, and activities

Major Changes

Much policy has been incorporated into standards instead of numerous items under the “policy” standard – formerly, 3.13, now 14.5

Effort to remove overlap/redundancies
• Student services/academic support combined
• Mission standards consolidated,
• Student complaint sections
• Faculty evaluation only once
• Program length, program content each only once

Complex standards
• Parts are more explicitly separated to allow compliance with each to be addressed.

Major Changes: Adjustments in Emphasis

Expanded cooperative academic arrangements language
• More explicitly describes the range of cooperative and/or consortial arrangements:
  • Cases where credit originating elsewhere is transcripted as your own
  • Regional or denominational consortia or state-wide distance education agreements
  • Contractual instruction
  • Joint/Dual Degrees
Other Major Changes

Federal policies incorporated as standards:
• Archived information on degree requirements
• Recruitment practices
• Branch campus names and dependence on parent as accredited entity
• Representation of other accreditors

What's Missing?

• 3.2.7 Organizational structure
• 3.2.14 Intellectual property rights
• 3.3.1.4 Institutional Effectiveness - Research
• 3.3.1.5 Institutional Effectiveness – Community/Public service
• 3.4.2 Continuing education/service programs
• 3.5.4 25 percent of undergraduate major taught by faculty with terminal degree

Major Changes – New Standards

New 4.2.g Board self-evaluation
• Expectation that board considers its duties and expectations and conducts a formal evaluation regarding how well they have accomplished their goals as a board
• Not evaluation of individual board members, but of the effectiveness of the body as a whole
• Evidence should be more than the statement that a self-evaluation has been conducted by the board – needs to be more substantive.
• There is the expectation that the Board have process or policy in this area that requires regular reviews (see Resource Manual this section and Appendix A.)
Major Changes — New Standards

New 12.6 Student debt information and guidance

• Expect institutions to inform students about the implications of debt and ways of repaying debt
• Beyond loan entrance and exit counseling required by the Department of Education

► Perhaps something as part of new student orientation. And you might want it to be mandatory.
► Resource Manual, “focuses on providing financial management information and guidance to student borrowers … [expectation] to ensure that students are appropriately informed of the obligations associated with debt and repayment of student loans.

► Note: the focus is on borrowers.

Other Changes to Address

Old 2.8 Faculty is Split into two standards

• 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.

New 6.1 Full-Time Faculty

• The institution employs an adequate number of full-time faculty members to support the mission and goals of the institution. (Full-time faculty) [CR]

New 6.2.b Program Faculty

• For each of its educational programs, the institution employs a sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review. (Program faculty)

Consolidation of Graduate Standards

Old 3.6

• 3.6.1 Post-baccalaureate program rigor
• 3.6.2 Graduate curriculum
• 3.6.3 Institutional credits for a degree

New 9.5 Institutional credits for a graduate/professional degree

• At least one-third of the credit hours required earned through instruction offered by the institution awarding the degree.

New 9.6 Post-baccalaureate rigor and curriculum

• Post-baccalaureate professional degree programs and graduate degree programs are progressively more advanced in academic content than undergraduate programs, and are structured (a) to include knowledge of the literature of the discipline and (b) to ensure engagement in research and/or appropriate professional practice and training.

Other standards in Sections 8 and 9 apply to all programs
Advice for the “Conductor” of the CC

• One person (with a trained backup) should orchestrate the development of the 70+ sections
  • Track status of each, ensure redundant review, prepare for final signoff
• For a substantial part of the CC writing, your other duties need to be reassigned elsewhere; be sure you have support for this.
• If you can, have someone else be primary lead on the QEP

Summary

• Consider the best internal organization and strategy for writing the Compliance Certification
• Think Like the Reviewer
• Use SACSCOC-provided materials and locally developed materials
• Format narrative and evidence to ensure ease of review
• Build Redundancy into the Process
• Remember the link between consistency and perceived integrity
• Use writer/editors and external reviewers effectively
• Choose technology that you can use
Parting Advice:

Deadlines are closer than they appear....

...Get Started!!!!!