# Preparing the Compliance Certification

DR. CRYSTAL A. BAIRD
VICE PRESIDENT
DECEMBER 2019

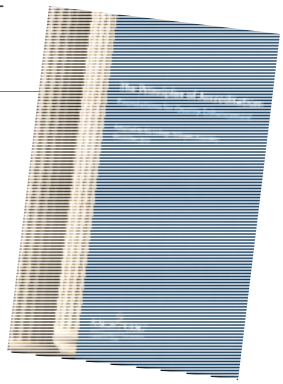
## Purpose of this session:

- 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

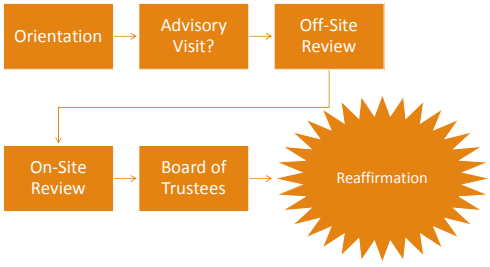
**Part 2**: List of all substantive changes reported and approved by the Commission since the institution's last reaffirmation and the date of approval

**Part 3**: The institution's assessment of compliance with the *Principles of Accreditation*

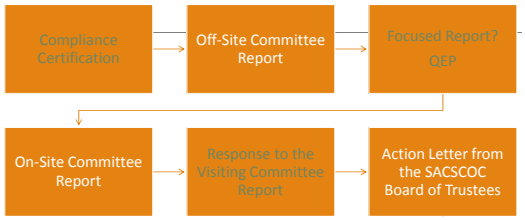
**Part 4**: "Institutional Summary Form Prepared for Commission Reviews" http://www.sacscoc.org/inst_forms_and_info1.asp

- (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



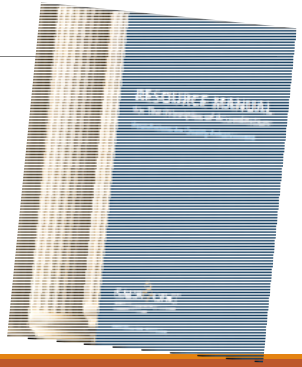
## The Communication Flow




## Multiple Opportunities to Demonstrate Compliance

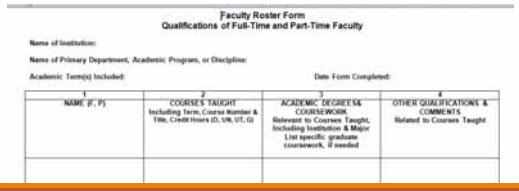
## Resources

- *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:

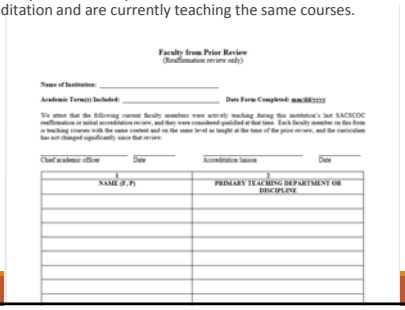
Name of Primary Department, Academic Program, or Discipline:

Academic Term(s) Included: Date Form Completed:

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

Name of Institution: _____

Academic Term(s) Included: _____ Date Form Completed: mm/dd/yyyy

We attest that the following current faculty members were actively teaching during this institution's last SACSCOC reaffirmation or initial accreditation review, and they were considered qualified at that time. Each faculty member on this form is teaching courses with the same content and on the same level as taught at the time of the prior review, and the curriculum has not changed significantly since that review.

Chief academic officer _____ Date _____ Accreditation liaison _____ Date _____

| 1<br>NAME (F, P) | 2<br>PRIMARY TEACHING DEPARTMENT OR DISCIPLINE |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

## Guidelines

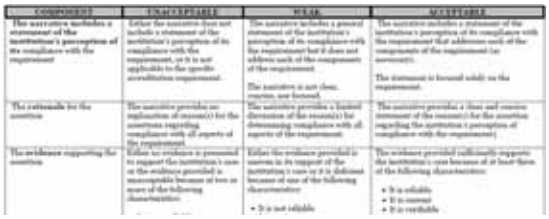
Faculty Credentials Guidelines:
http://www.sacscoc.org/pdf/081705/faculty%20credentials.pdf

Guidelines for Addressing Distance and Correspondence Education:
http://www.sacscoc.org/pdf/081705/Guidelines%20for%20Addressing%20Distance%20and%20Correspondence%20Education.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%20COMPLIANCE_SEPT2010%20_2_.pdf



## 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

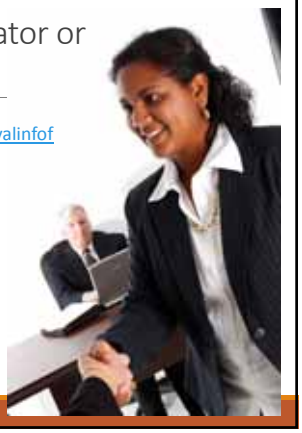
- Establish generous timelines.
- Provide clear expectations for what you want done, by whom, and by when.

## 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

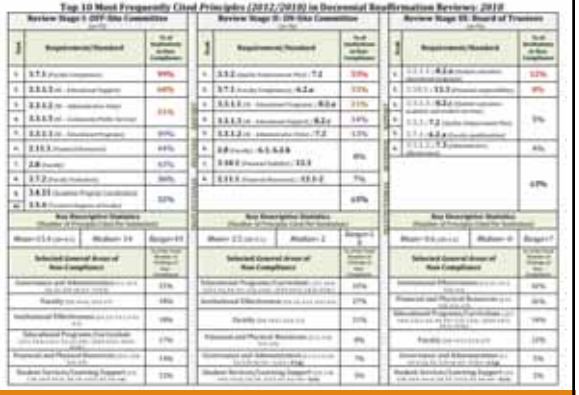
## Quality of the Response

- 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 non-compliance.



**Top 10 Most Frequently Cited *Principles* in Decennial Reaffirmation Rev**

**Review Stage I: *OFF*-Site Committee**

| Rank | Requirement/Standard | % Institutions in Non-Compliance |
|---|---|---|
| 1. | 3.7.1 (Faculty Competence) | 95% |
| 2. | 3.3.1.3 (IE – Educational Support) | 89% |
| 3. | 3.3.1.2 (IE – Administrative Units) | 54% |
| 4. | 3.3.1.1 (IE – Educational Programs) | 51% |
| 5. | 3.7.14 (Intellectual Property Rights) | 50% |
| 6. | 3.3.1.5 (IE – Community/Public Service) | 47% |
| 7. | 2.0 (Faculty) | 43% |
| 8. | 3.7.2 (Faculty Evaluation) | 41% |
| 9. | 3.2.9 (Personnel Appointment) | 35% |
| 10. | 3.4.11 (Academic Program Coordination) | |

**Key Descriptive Statistics** (Number of *Principles* Cited Per Institution)

| Mean=16.8 \| SD=8.5 | Median=16 | Range=38 |
|---|---|---|

**Review Stage II: *ON*-Site Committee**

| Rank | Requirement/Standard | % Institutions in Non-Compliance |
|---|---|---|
| 1. | 3.3.2 (Quality Enhancement Plan) | 56% |
| 2. | 3.7.1 (Faculty Competence) | 31% |
| 3. | 3.3.1.1 (IE – Educational Programs) | 25% |
| 4. | 3.3.1.2 (IE – Administrative Units) | |
| 5. | 3.3.1.3 (IE – Educational Support) | 22% |
| 6. | 3.3.1.5 (IE – Community/Public Service) | 17% |
| 7. | 3.5.1 (General Education Competencies) | 14% |
| 8. | 3.7.2 (Faculty Evaluation) | 11% |
| 9. | 3.10.1 (Financial Stability) | 10% |
| 10. | 3.3.1.4 (IE – Research) | 8% |

**Key Descriptive Statistics** (Number of *Principles* Cited Per Institution)

| Mean=3.2 \| SD=2.9 | Median=3 | Range=13 |
|---|---|---|

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

**Review Stage II: *ON*-Site Committee**

| Rank | Requirement/Standard | % Institutions in Non-Compliance |
|---|---|---|
| 1. | 3.3.2 (Quality Enhancement Plan) | 56% |
| 2. | 3.7.1 (Faculty Competence) | 31% |
| 3. | 3.3.1.1 (IE – Educational Programs) | 25% |
| 4. | 3.3.1.2 (IE – Administrative Units) | |
| 5. | 3.3.1.3 (IE – Educational Support) | 22% |
| 6. | 3.3.1.5 (IE – Community/Public Service) | 17% |
| 7. | 3.5.1 (General Education Competencies) | 14% |
| 8. | 3.7.2 (Faculty Evaluation) | 11% |
| 9. | 3.10.1 (Financial Stability) | 10% |
| 10. | 3.3.1.4 (IE – Research) | 8% |

**Key Descriptive Statistics** (Number of *Principles* Cited Per Institution)

| Mean=3.2 \| SD=2.9 | Median=3 | Range=13 |
|---|---|---|

**Review Stage III: *C&R* | Board of Trustees**

| Rank | Requirement/Standard | % Institutions in Non-Compliance |
|---|---|---|
| 1. | 3.3.1.1 (IE – Educational Programs) | 17% |
| 2. | 3.3.1.2 (IE – Administrative Units) | 10% |
| 3. | 3.10.1 (Financial Stability) | |
| 4. | 3.3.1.5 (IE – Community/Public Service) | 8% |
| 5. | 3.7.1 (Faculty Competence) | |
| 6. | 3.3.1.3 (IE – Educational Support) | 7% |
| 7. | 3.5.1 (General Education Competencies) | 6% |
| | | <3% |

**Key Descriptive Statistics** (Number of *Principles* Cited Per Institution)

| Mean=0.9 \| SD=1.5 | 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**

**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 in support of its judgment in accordance with directions requested in the category description.

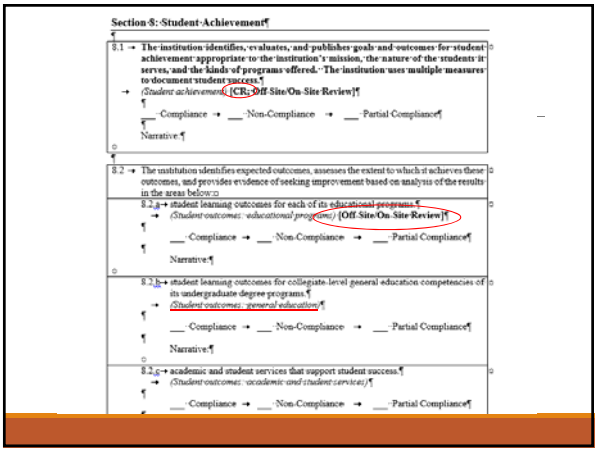
__ **Compliance** The institution meets the requirement and provides a convincing argument in support of its determination and provides documents or a sampling of documents (or electronic access to the documents) demonstrating compliance.

__ **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 non-compliance, a description of plans to comply, and a list of documents that will be used to demonstrate future compliance.

**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 procedure for implementation.* The document, "Developing Policy and Procedure Documents," can be found at http://www.sacscoc.org/policies.asp.

**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**

8.1 → **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 → __ Partial Compliance

Narrative:

8.2 → 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]**

__ Compliance → __ Non-Compliance → __ Partial Compliance

Narrative:

8.2.b → student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.

→ *(Student outcomes: general education)*

__ Compliance → __ Non-Compliance → __ Partial Compliance

Narrative:

8.2.c → academic and student services that support student success.

→ *(Student outcomes: academic and student services)*

__ Compliance → __ Non-Compliance → __ Partial Compliance

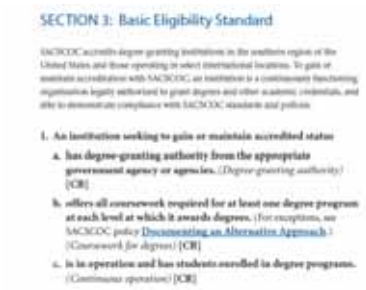
## CR 8.1 (Student achievement)

**Evolved expectations:**

- **One** of the measures of student achievement will be graduation/completion rate.
- The institution will discuss its current graduation/completion rate in relation to the benchmark established with SACSCOC in 2018.
- The discussion should include the steps the institution has taken, is taking, will take to try bring about improvement in completion rates.
- As of January 1, 2020, there should be a disaggregation by one or more equity factor, as appropriate to the mission and student population of the institution (gender, ethnicity, socioeconomic level, etc.).

## Basic Eligibility Standards

See the Notes in the *Resource Manual*



SECTION 3: Basic Eligibility Standard

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 Documenting an Alternative Approach.) *(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?

- Electronic preferred
- Flash drive preferred (CD/DVD not every evaluator can access)
- Online Submission? Coming soon, if the technology fee passes
- Service Provider?

## Timelines

- How soon can we begin writing?
- Reaffirmation timelines: http://www.sacscoc.org/pdf/Time%20Lines%20for%20Reaffirmation%20Tracks.pdf

## Biggest challenge for your team related to the Compliance Certification?

## What else would you like to talk about?

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