



*Southern Association of Colleges and Schools  
Commission on Colleges  
1866 Southern Lane  
Decatur, Georgia 30033-4097*

## **WRITING COMMENTS FOR COMMITTEE REPORTS SOME HELPFUL STRATEGIES**

### **Introduction**

Peer review committees will be provided with a report template for documenting its review of an institution's case for compliance with the *Principles of Accreditation*. Reviewers are expected to develop a draft narrative for each of the Core Requirements and Standards for which they are assigned as primary reviewers. Primary reviewers may be partnered with secondary reviewers to assist in reviewing the institution's narrative and supporting documentation. The committee will discuss the draft narratives to reach consensus. The final narratives should have the support of the committee.

Committees typically review only those standards that are included on the standard report template. However, in some instances, the SACSCOC Board of Trustees may request review of additional standards. In addition, Third-Party Comments or Unsolicited Information may prompt review of additional standards. Lastly, if a peer review committee, during its review, is provided with evidence of an institution's non-compliance with one or more standards not included on the report template, the committee should consult with SACSCOC staff regarding adding the standard to the template.

Investing time in the development of comments for all the standards reviewed serves two important purposes. First, the addition of comments for those standards found in compliance provides a richer report with greater historic value. Second, the added depth provided by these comments assists SACSCOC in demonstrating fulfillment of its responsibilities as a regional accrediting entity.

To ensure that these comments are cogent, coherent, and informative, this set of guidelines offers four strategies for developing substantive comments that succinctly reflect the institution's status of compliance at the time of the peer review.

### **Strategy One**

***Do not simply repeat the standard.***

Why not? Because a simple repetition of the standard provides no specific details relative to the institution under review. This lack of detail significantly reduces the report's historic value.

**Example One: CR 7.1 – The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission. (*Institutional planning*)**

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|  | <p><b>Compliance</b></p> <p>Comment: The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission.</p> |
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Notice how this comment lacks any reference to the institution reviewed. A comment should contain some specific details that not only tie it to the institution under review but also make that particular comment inappropriate for other institutions. In other words, comments need to be customized. This comment, however, could be applied to virtually any member institution.

**Strategy Two**

*Include details specific to the institution.*

Why? Because specific details not only confirm that the reviewer has digested the narrative and documentation presented in the Compliance Certification, but such comments also provide a thumbnail sketch of the institution’s compliance at the time of the review.

**Example Two: CR 7.1 – The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission. (Institutional planning)**

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|  | <p><b>Compliance</b></p> <p>Comment: The institution uses a multifaceted approach to planning and evaluation that includes a systematic strategic planning process, an annual planning and evaluation process, and a program review process. <i>The institution’s Advisory Committee on the Planning Process and its Planning Committee coordinated the development of the institution’s current strategic plan (2015-2019) ensuring that all campus constituencies were involved. The institution’s annual evaluation and planning process involves 2-3 days of planning and assessment retreats held each spring or summer for the purposes of reviewing progress on current goals and for developing goals, expected outcomes, and methods for achieving outcomes for the upcoming year. A review of the results from these retreats revealed evidence that the institution uses the evaluation and assessment results to improve its programs and services. Changes resulting from assessment are clearly linked to the institution’s mission as indicated in the minutes of the Planning Committee.</i></p> |
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Notice how details such as the “Advisory Committee on the Planning Process,” the dates of the current strategic plan, and “2-3 days of planning and assessment retreats held each spring or summer” tie this comment to a particular institution. That the language of this comment would apply verbatim to any other member institution is unlikely.

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**Strategy Three**

*Reference the documentation reviewed.*

Why? Because references to the documentation that has been examined tie the comment even more tightly to the specific institution under review and establish an important historical note should further review of the same issue become necessary in the future.

**Example Three: CR 7.1 – The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission. (Institutional planning)**

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|  | <p><b>Compliance</b></p> <p>Comment: The Committee’s review of <a href="#">the last five annual <i>Planning Initiatives and Assessment Results</i></a> reports confirms that the institution engages in ongoing and systematic planning and evaluation that leads to improvement of its programs and services and the fulfillment of its mission. The institution uses a multifaceted approach to planning and evaluation that includes a systematic strategic planning process, an annual planning and evaluation process, and a program review process. The institution’s Advisory Committee on the Planning Process and the Planning Committee coordinated the development of the institution’s current strategic plan 2010-2014) ensuring that all campus constituencies were involved. The institution’s annual evaluation and planning process involves 2-3 days of planning and assessment retreats held each spring or summer for the purposes of reviewing progress on current goals and for developing goals, expected outcomes, and methods for achieving outcomes for the upcoming year. A review of the results from these retreats revealed evidence that the institution uses the evaluation and assessment results to improve its programs and services. Changes resulting from assessment are clearly linked to the institution’s mission as indicated in the minutes of the Planning Committee.</p> |
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Note how easily a reference to key documentation was slipped into the first sentence.

## Strategy Four

### *Address all parts of the standard.*

Why? Because SACSCOC needs to document a comprehensive review. The historic value of a report is severely compromised when the comment does not clearly indicate compliance with all aspects of the standard.

Example Four: Standard 6.4 – The institution publishes and implements appropriate policies and procedures for preserving and protecting academic freedom. (*Academic freedom*)

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|  | <p><b>Non-Compliance</b></p> <p>Comment: The Committee’s review of Section 5.3.1 of the <i>Faculty Handbook</i> indicates that the institution has a policy on academic freedom which is appropriately <b>published</b>. This <b>policy</b> contains procedures regarding alleged violations of academic freedom, including a procedure through which a faculty member may defend himself or herself against such allegations. These <b>procedures</b> appear to outline an appropriate process, with clear timelines and steps.</p> <p>The Committee was unable to determine, however, whether the institution has <b>implemented</b> its policy and procedures regarding academic freedom.</p> |
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The dual requirements embedded in this Standard are not enumerated, yet the comment needs to establish (1) whether the institution has published appropriate policies and procedures related to preserving and protecting academic freedom and (2) whether the institution has demonstrated implementation of its policy and procedures.

Some standards flag multiple compliance components more clearly. Consider, for example, Standard 4.3:

If an institution’s governing board does not retain sole legal authority and operating control in a multiple-level governance system, then the institution clearly defines that authority and control for the following areas within its governance structure: (a) the institution’s mission, (b) fiscal stability of the institution, and (c) institutional policy. (*Multi-level governance*)

### **Length**

How long should these comments be? Just long enough to make a clear, unambiguous statement of the institution’s degree of compliance with all parts of the standard and to provide details specific to the institution and the documentation reviewed.

Some standards, such as Core Requirements 3.1.a, 3.1.b, and 3.1.c, may generate comments as short as a single sentence. Other standards, as illustrated above, require greater length. Instances of non-compliance may demand the greatest length because the text needs to establish the foundation for a recommendation or for an Off-Site Reaffirmation Committee referral to the On-Site Reaffirmation Committee.

*Edited: January 2024*