

Transcript

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Welcome back to the tutorials on the CHEA recognition process. We are winding down our recognition journey. I'm Loretta Waldron, CHEA Vice President for Recognition Services. In this final session, we will go in depth on the last two of the four standards for recognition, Standard 3, Accreditation Structure and Organization, and its 13 substandards and Standard 4, Capacity and Compliance for International Accreditation, and its three substandards. For each standard, the accrediting organization must demonstrate congruency with the standard and provide evidence of compliance.

Standard 3 focuses on Accreditation Structure and Organization and demonstration by the accrediting organization of its congruency with the 13 substandards. A recognized accrediting organization demonstrates that it manifests a commitment to diversity, equity, and inclusion, ensures ethical practices and its operations, bases its accreditation decisions on how well the institution or program meets its accreditation standards, requires an institution or program to meet all standards within a specified period of time not to exceed four years,

makes clear distinction between required actions and suggested actions for institution or program improvement, has a process to ensure consistency in accreditation reviews and accreditation actions while allowing for varying institutional or programmatic mission, purpose, and operation, engages in regular self-evaluation of its performance standards, procedures, and policies, and where warranted, uses that information for improvement, maintains independence from any sponsoring and/or parent organization with respect to all accreditation activities, reviews, actions and decisions, has sufficient financial, staff, and operational resources to perform and sustain its accreditation functions efficiently and effectively, ensures procedural due process in accreditation activities, publishes an appeals policy that informs the institution or program of the process to be used and actions that may be taken, has a conflict of interest policy that covers all accrediting organization staff, site visitors, and members of the accreditation recommending and decision-making bodies, and requires opportunities for participation by higher education professionals, the public, and practitioners in accreditation activities such as accreditation reviews, decision making, policy setting, and review and revision of accreditation standards.

In Standard 3 A, the accrediting organization demonstrates that it manifests a commitment to diversity, equity, and inclusion. In the narrative portion of the application, the accrediting organization may describe the composition of its staff, board, committees and site review team rosters to reflect membership diversity or include, within its official mission statement, a value statement regarding diversity, equity, and inclusion, D E I. It may identify standards that foster diversity of theories, points of view, and experiences in academic programs. It may provide evidence of integration of D E I in its policies and procedures.

The accrediting organization demonstrates in Standard 3 B that ensures ethical practices in its operations. In the application narrative, the accrediting organization may describe the training procedures for ethical practices in reviews or visits for the staff members, site visitors and decision makers. Evidence may include signature documents indicating staff, site visitors and/or decision makers agree to demonstrate professional and ethical behavior when serving on behalf of the accrediting

organization. Additional evidence may be provided relative to the training, provided (topics, presentations, et cetera).

In Standard 3 C, the accrediting organization demonstrates that it bases its accreditation decisions on how well an institution or program meets its accreditation standards. The accrediting organization may describe how the decision-making body determines whether an institution or program is in compliance with its standards and procedures. Evidence provided should document that the accrediting organization has a governing board that meets regularly for the purpose of making accrediting decisions. The documentation may include written meeting minutes, links to recorded proceedings, et cetera, as well as any evaluation templates, rubrics or metrics if they're used.

In Standard 3 D, the accrediting organization demonstrates that it requires an accredited institution or program to meet all standards within a specified period of time, not to exceed four years. The narrative may describe its policies and/or procedures, including the timeframe for an accredited institution or program to meet all standards as well as the actions that will occur if it does not.

Evidence may include copies of letters to institutions or programs that identify deficiencies noted in the review process, including the requirements for coming into compliance with these deficiencies. Evidence should include the final actions (if the process is complete), taken by the decision-making body relative to these institutions or programs, and identify where this information is found.

The accrediting organization demonstrates in Standard 3 E that it makes clear distinctions between required actions and suggested actions for institution or program improvement. The application narrative should clearly identify if the accrediting organization provides its institutions or programs with suggestions for improvement or only identifies required actions. Evidence to support the narrative includes specific language in policy documents that delineate those items that must be addressed and those that are optional, as well as copies of letters that clearly distinguish between issues that need to be addressed and suggestions for improvement.

In Standard 3 F, the accrediting organization demonstrates that it has a process to ensure consistency in accreditation reviews and accreditation actions while allowing for varying institutional or programmatic mission, purpose, and operation. The narrative may describe the processes that are in place to ensure consistency in decision making, such as inter-rater reliability practices, orientation and training or rubrics, and whether there is sufficient evidence to determine that a standard or subpart of a standard is met. Evidence may include documentation of a process regarding accreditation reviews and actions with examples of how accreditation actions are consistently implemented among varying institutions or programs.

The accrediting organization demonstrates in Standard 3 G that it engages in regular self-evaluation of its performance standards, procedures, and policies, and where warranted, uses that information for improvement. The narrative may list the information and/or measures, comparisons and benchmarks used in evaluation and how these affirm and support current standards, policies and practices, or how the collected information has led to changes.

The narrative also may describe how often self-evaluation is conducted, what methods are used, and what data is collected, such as surveys of institutions, programs, site visitors, reliability and validity

reports, standards most often cited, how this information collected is used for improvement and whether a report or other document is produced. Evidence may include policies and/or procedures related to self-evaluation or a sample of internal evaluation processes and findings and how those findings are used to modify accreditation processes.

In Standard 3 H, the accrediting organization demonstrates that it maintains independence from any sponsoring and/or parent organization with respect to all accreditation activities, reviews, actions, and decisions. The narrative should address whether the accrediting organization has a sponsoring and/or parent organization. If there is a sponsoring and/or parent organization, a description of how the accrediting organization's accreditation activities are separate and independent from those of its parents must be included in the narrative. Evidence to support the narrative may include a memorandum of understanding that confirms separation, formal legal documents ascertaining independence from a sponsoring and/or parent organization or other documents demonstrating legal authorization to operate as an accrediting organization.

The accrediting organization demonstrates in Standard 3 I that it has sufficient financial, staff, and operational resources to perform and sustain its accreditation functions efficiently and effectively. The narrative should address the number of payroll staff, that is full-time, part-time, contract, consulting, and describe how the staff is adequate to meet the scope of the agency's operations, including an overview of the accrediting organization's major expenditures and assets. Evidence may include an organizational chart. Evidence should include budgeted and actual revenue and expenditures for the prior two years, the current year, and projection for next year, as well as the balance sheet. If revenue is provided by the sponsoring and/or parent organization, this should be included and evident in the balance sheet.

In 3 J, the accrediting organization demonstrates that it ensures procedural due process in accreditation activities. This narrative should describe the due process policies applicable to all aspects of the accreditation process, including but not limited to, eligibility, comprehensive review process, award of accreditation, appeals, reconsideration decisions, et cetera.

The evidence should include procedure documents where due process is detailed and copies of letters, as appropriate, that identify due process and demonstrate its implementation.

In Standard 3 K, the accrediting organization demonstrates that it publishes an appeals policy that informs the institution or program of the process to be used and actions that may be taken. The application narrative may address the procedures document specific to the appeals policy, process and appealable actions, and identify where the appeals policy is published, including the link if on the website. Evidence may include the documentation of the appeals policy and copies of letters where the appeals policy is explained to the institution or program.

The accrediting organization demonstrates in Standard 3 L that it has a conflict of interest policy that covers all accrediting organization staff, site visitors, and members of accreditation recommending and decision-making bodies. The application narrative may address the policies document or manual specific to the conflict of interest policy (or policies if there's more than one, that is one for staff, one for volunteers, one for decision makers), the process used for identifying conflicts of interest for accrediting organization staff and volunteers, including board and committee members, site visitors, et cetera, record keeping related to conflicts of interest and any training provided. Evidence should include signed and dated forms.

In Standard 3 M, the accrediting organization demonstrates that it requires opportunities for participation by higher education professionals, the public, and practitioners in accreditation activities such as reviews, decision making, policy setting, and review and revision of standards. The narrative may address the policies and procedures regarding the participation of higher education professionals, the public, and practitioners in accreditation activities, how individuals are identified and recruited, and how frequently solicitation calls are made.

Evidence should include examples of solicitation calls to practitioners and the public, as well as three years of rosters for the board or commission, committees, site review teams, and other accrediting activities that identify the community they represent, that is, the public, practitioner, or faculty.

Standard 4 focuses on Capacity and Compliance for International Accreditation and states in addition to demonstrating compliance with Standards 1-3, has the capacity and competence to engage in international accreditation activities, notifies appropriate international authorities of its intent and seeks guidance regarding the accrediting organization's current and proposed activities, and applies standards that are substantially comparable to US institutions and programs, and if modifications are necessary, that information will be made public.

In Standard 4 A, the accrediting organization demonstrates that it has the capacity and competence to engage in international accreditation activities. The application narrative should describe the availability of staff and onsite evaluators and expertise related to language and culture of non-US

countries in which the accrediting organization might accredit institutions or programs. Evidence to support the narrative should be included.

The accrediting organization demonstrates in Standard 4 B that it notifies the appropriate international authorities of its intent and seeks guidance regarding the accrediting organization's current and proposed activities. The application narrative should address any policies and/or procedures the accrediting organization has regarding notification of appropriate international authorities and guidance sought regarding the accreditation activities. Evidence should include copies of the accrediting organization's correspondence with international authorities and documented approval letters from the international authorities.

In Standard 4 C, the accrediting organization demonstrates that it applies standards that are substantially comparable to US institutions and programs, and if modifications are necessary, that information will be made public. The application narrative should address if the standards are applied to non-US institutions and programs the same as to US institutions and programs. If not, describe the decision-making process for allowing modifications to the application of standards. Evidence should include examples of such modifications in the past three years and how these modifications were made public.

This wraps up the tutorials on the CHEA recognition process and the standards. Thank you for participating in this recognition journey. I hope it has been enlightening. Should you have questions, please contact me @waldron@chea.org.