

***SURVEY OF CHEA- AND USDE-RECOGNIZED ACCREDITING ORGANIZATIONS:
MEETING THE CHALLENGE OF COVID-19***

APRIL 2020

SURVEY BACKGROUND AND OVERVIEW

The Council for Higher Education Accreditation (CHEA) surveyed 56 CHEA- and U.S. Department of Education (USDE)-recognized accrediting organizations on April 14, 2020. The focus was on accreditation and assisting institutions and programs as schools address the challenges of Covid-19. Surveys were sent to those accrediting organizations that had participated in a CHEA Webinar on the same subject on April 9, 2020. Forty-seven (47) organizations or 84 percent responded.

While responses vary among the different organizations, the survey indicates that accreditors are very much focused on providing flexibility to their accredited institutions and programs while, at the same time, maintaining requirements that all standards and policies are met. Accreditors, in general, are undertaking virtual site visits, postponing visits, extending terms of accreditation, postponing clinical/laboratory/field experiences where feasible and holding institutions and programs accountable for standards and policies even as remote learning is being used extensively in higher education, in some institutions for the first time.

Accreditors are engaged in training of site visitors for virtual activity and, at times, developing special policies for their virtual engagements. While decisions about, e.g., revising the academic calendar or shifting from letter grades to pass/fail or “ng” grading are made by institutions and programs themselves, accreditors are frequently consulted prior to a college or university making these academic determinations. Scheduling to accommodate the needs and current capacity of institutions and programs as well as the need to make case-by-case decisions play a strong role in accrediting organizations sustaining both flexibility and quality.

Following the Webinar, CHEA consulted with USDE about its oversight of accreditation during this period. USDE issued, on [March 5 and March 17, 2020](#), guidance to federally recognized accreditors. The guidance is effective until June 1, 2020, although USDE may consider an extension of this deadline. In general, the USDE guidance allows considerable flexibility for accreditors, e.g., (1) make some changes to policies related to accommodating Covid-19 without going through a public comment period, (2) extend terms of accreditation for some institutions and programs and (3) utilize virtual site visits (a follow-up in-person visit is required).

SURVEY QUESTIONS

1. **How is your organization handling site visits initially scheduled for this Winter/Spring and into Summer 2020?**
2. **Are you extending the length of a term of accredited status for institutions or programs and, if so, on what basis?**
3. **Are your institutions or programs experiencing any difficulty with carrying out responsibilities associated with providing clinical, laboratory or field experiences that are typically required to complete a course or program?**
4. **Are your institutions or programs experiencing any difficulty or concerns with state licensing boards?**
5. **Given the current extensive reliance on remote learning, what is your organization doing to assure that your institutions and programs are sustaining quality offerings?**

SURVEY RESULTS

1. How is your organization handling site visits initially scheduled for this Winter/Spring and into Summer 2020? Please check all that apply:

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| 1 | We are doing a combination of both virtual and postponing visits. | 51% |
| 2 | We are only postponing visits. | 37% |
| 3 | We are offering virtual visits. | 30% |
| 4 | Virtual visits are not available to institutions or programs either on probation or show cause or any other status that raises concerns about quality and meeting our standards. | 22% |
| 5 | Virtual visits are not available to institutions or programs seeking initial accreditation. | 12% |
| 6 | Virtual visits are available to all institutions or programs scheduled for this time period. | 12% |
| 7 | Other: | 7% |
| | <ul style="list-style-type: none">• We didn't have any visits scheduled in spring 2020, so nothing had to be cancelled. We are looking at 3 in the fall that could slide into early 2021. We already have a virtual pre-site review process, but have not considered doing a virtual site visit yet.• At present have postponed visits but the Commission is still investigating options.• Virtual visits are not available to optometric residency programs seeking initial accreditation. For O.D. programs, virtual visits are available to programs that hold the status of preliminary approval, and that are seeking initial accreditation students enrolled in the final year of their four-year program. (These programs have undergone an on-site visit prior to starting, and during each of the years of operation. An on-site visit will be held to any program undergoing a virtual visit as soon as practical after the COVID-19 interruption). | |

2. Are you extending the length of a term of accredited status for institutions or programs and, if so, on what basis?

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| 1 | We are extending terms of accredited status under these conditions. | 71% |
| 2 | We are not extending terms of accredited status. | 29% |

3. Are your institutions or programs experiencing any difficulty with carrying out responsibilities associated with providing clinical, laboratory or field experiences that are typically required to complete a course or program?

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| 1 | Yes, experiences have to be postponed even though they need to be completed. | 37% |
| 2 | Yes, experiences cannot be carried out virtually. | 13% |
| 3 | No, experiences can be carried out virtually. | 9% |
| 4 | No, requirements have been temporarily waived. | 4% |
| 5 | Other: | 37% |
| | <ul style="list-style-type: none">• I'm sure some are but the issues are pursued with their programmatic accreditors, not so much with us an institutional accreditor.• Not known at this time. | |

- For this accreditor, none of these answers accurately reflect what is happening. How is virtual defined? Accreditor is not waiving minimum hour requirements for direct care. If minimums are met, simulation may be used to augment clinical but can't be a substitute for the minimum. Telehealth is "virtual" and may be used toward the minimum hours as it is considered direct patient care. Accreditor is not requiring programs to postpone experiences. I'm happy to elaborate further if that would be helpful.
- We are in the process of preparing a survey for the programs to ascertain the degree that it has been a problem and what adjustments they have made.
- For most programs, experiences can be carried out virtually, but it depends on state regulations. Some flexibility has been provided for our clinical hour requirement.
- We are seeing 1, 3 and 4.
- Most programs had completed the requirements by the time the move to online education due to COVID-19 began. Schools were able to make modifications to the clinical experiences by instead using simulation, independent study, or other method to complete the semester.
- Internships are impacted (no clinical/lab expectations) - and there are processes to waive those or conduct virtually.
- We don't require clinical. But those that offer internships or studio projects are making modifications to the number of hours required for completion.
- Depends on how in-depth an experience is or what is involved.
- Programs are experiencing difficulty. We are allowing the programs to determine their best course of action and explain how they have handled adjustments.
- We are an institutional accreditor and hear all of the above, depending on the institution, programs and context.
- We do not have specific requirements around laboratory or clinical experiences, though many graduate programs have these as part of their curriculum. Programs are trying various options - virtual labs, delayed clinical experiences, etc.
- Both virtual and on-sight options are being made available.
- There is a great deal of diversity regarding how clinical experiences have been impacted. Some programs have moved to tele-practice operations, while others have continued in-person and others have temporarily ceased offering services.
- Some experiences can be carried out virtually. Since the interruption occurred near the end of the spring semester, many students had already achieved enough clinical experience to allow them to demonstrate competency and meeting of the program's mission, goals and objectives. Those that haven't attained clinical competency may need to do additional work.
- Some are doing it virtually, others are not.

4. Are your institutions or programs experiencing any difficulty or concerns with state licensing boards? If so, please describe:

- No, most boards are working with the programs.
- Yes, to some degree. Certain state licensing boards are waiving customary examination requirements, allowing members of the Class of 2020 to practice without first passing the customary national licensing examination. This has tremendous ramifications for future reciprocity opportunities and will greatly muddle how other state boards customary approach transfers between states.
- Not known at this time.
- Accreditor is being flexible and permitting limited simulations but the national certification board is not being flexible.
- Some programs have reported needing to get permission from their state board of nursing to conduct more simulation than allowable or to seek a waiver related to minimum clinical hour requirements for prelicensure nursing programs. I am unable to quantify how many programs are doing this or if it's specific to certain states, however.
- This will be another question asked in the survey.

- States are lagging in waiving requirements or providing guidance on policy/laws.
- Some state licensing boards have strict/rigid requirements that have not provided any allowances during this time. Many are unresponsive in providing information to programs and institutions.
- None have been expressed.
- Some states have required number of clinical hours that must be met.
- Not yet, as many of the licensure requirements had been met due to the timing of the virus.
- Unclear at this point.
- Most licensing Boards are offering some type of flexibility and some are asking for extensions on behalf of providers.
- Licensing boards have made accommodations for licensees but not pre-license. State DoEs are modifying pre-cert requirements.
- As of yet it we have not heard of any issues.
- We don't get into that.
- One of our jurisdictions has decided to forego the requirement of a licensing exam, which is contrary to our current policy. We have no authority over jurisdictions' decision to do this, however. Other jurisdictions are postponing exams.
- No. Our Certification Board has delayed exams that were scheduled for May. Next exams are scheduled for August, so we will see how that is handled.
- No institution has mentioned this as an issue; only as a concern.
- It is still too early to tell, although it seems that many licensure boards recognize the impact on training that COVID-19 is having.
- 50 states with 50 sets of requirements.
- Some state licensing boards require a specific amount of clinical experience weeks
- we have not been made aware of issues yet, but we expect to learn more soon
- Not yet although one state is considering licensing new graduates without having them take the national licensure exam.

5. Given the current extensive reliance on remote learning, what is your organization doing to assure that your institutions and programs are sustaining quality offerings?

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| 1 We are requiring that institutions or programs continue to meet our standards, even as they operate remotely. | 80% |
| 2 We have developed special standards or policies for scrutiny of remote learning, beyond existing standards or policies, and on a temporary basis. | 11% |
| 3 Other. | 9% |

CHEA WILL CONTINUE TO HOST WEBINARS AND OTHER GATHERINGS INTENDED TO BE OF VALUE TO ACCREDITORS, INSTITUTIONS AND PROGRAMS. PLEASE CHECK THE CHEA WEBSITE AT WWW.CHEA.ORG FOR INFORMATION ON UPCOMING EVENTS.

