

# ACCSC

## **Blueprints for Success:**

**Preparing a Comprehensive Response  
for Commission Consideration**

An **ACCSC** Member  
**Services Series**

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# ACCSC

## Blueprints for Success

### A Member Services Series

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## Introduction

The ACCSC **Blueprints for Success** highlight best practices and provide guidance on some of the more technical areas of ACCSC-accreditation in the hopes to help accredited member institutions to comply fully and accurately with the **Standards of Accreditation**, achieve institutional success, and ensure that students are well prepared to enter the workforce.

Please note that the ACCSC **Blueprints for Success** do not supersede applicable accrediting standards, are not intended to be prescriptive about the way an accredited institution operates, and do not address all compliance elements required by an institution to maintain good standing with ACCSC. Rather, the ACCSC **Blueprints for Success** provides a framework that can help an institution to gain a better understanding of the expectations and rigors of the accreditation process as well as sample documentation that an institution might consider in order to demonstrate compliance with accrediting standards.

## Modules

1. **Preparing a Comprehensive Response for Commission Consideration**
2. Organizing an Effective Electronic Submission
3. Success Strategies: The Self-Evaluation Report
4. Preparing for the On-Site Evaluation
5. An Analysis of ACCSC's Annual Report
6. Understanding and Preparing the Graduation & Employment Chart
7. Substantive Change Applications

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## Module I

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### Preparing a Comprehensive Response for Commission Consideration

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By applying for and receiving accreditation, a school accepts the obligation to demonstrate compliance with the *Standards of Accreditation* and must meet or exceed the *Standards of Accreditation* throughout the term of accreditation. A high level of reliance is placed upon information, data, and statements provided to the Commission by a school. While the Commission employs its own fact-finding methods to determine a school's compliance with accrediting standards, such as on-site evaluation teams' observations and review of information provided by third parties, the burden rests with the school to establish it is meeting the standards. Moreover, the Commission's deliberations and decisions are made on the basis of the written record of an accreditation review. Schools do not have the right to appear before the Commission. Accordingly, a school must supply the Commission with complete documentation of the school's compliance with all accrediting standards if it is to be granted and to maintain accreditation.

#### Keys to a Successful Response

Successful responses provide the Commission with a strong narrative for every item, include documentation to support all corrective action, and are organized in an intuitive manner. Fundamentally, a school's response must demonstrate, with supporting documentation, how its policies, procedures, and related operations demonstrate compliance with accrediting standards

##### ➤ **Understanding the Expectations**

In order to be successful, a school must make certain it understands the specific requirements identified in a particular accreditation standard. In order to be set up for success, a school should reference the *Standards of Accreditation* before beginning to draft a response for Commission consideration.

##### ➤ **Refer to the *Standards of Accreditation***

By referring to pertinent elements of the specific standard cited as a potential area of non-compliance, a school is able to demonstrate to the Commission that it has identified and understands the requirements for compliance.

##### ➤ **Provide an Overview of the Response**

Set the Commission up for success by including an introductory statement, a narrative explanation regarding the overall response, and then address and outline the school's approach to addressing specific compliance findings.

##### ➤ **Past-Present-Future Response Model**

In formulating a response to a compliance finding, a school's response should:

- Explain the circumstances that impacted the school's ability to demonstrate compliance with a specific accrediting standard (**Past**)

## Preparing a Comprehensive Response for Commission Consideration

- Demonstrate to the Commission that the school has taken corrective action and include documentation available to support that position (**Present**)
- Identify the school's plan to ensure that this area of non-compliance will not be a repeat finding going forward through the school's term of accreditation (**Future**)

### ➤ **Document, Document, Document**

In all cases, provide appropriate, supporting documentation to demonstrate corrective action has been taken. For example, if the school established a new policy or procedure, demonstrate to the Commission, via supporting documentation, the impact of this new policy on the school's compliance initiatives.

### ➤ **ACCSC as a Resource**

Each school seeking accreditation from ACCSC is assigned a designated accreditation liaison from the members of the ACCSC staff. If there is any confusion about a compliance finding as captured on an ACCSC letter or report, or the requirements identified in the *Standards of Accreditation*, school representatives should contact their designated ACCSC staff representative in order to seek guidance.

## The Importance of a Strong Narrative

An effective response will include a narrative response that focuses on the factors that contributed to the shortfall in compliance, discuss the school's ongoing compliance initiatives, and outline future goals going forward. Without a precise narrative explanation, the school is not providing the Commission with the necessary elements to determine the school's compliance with accrediting standards or an opportunity to understand the pertinent elements of the school's response. Keep in mind, the burden to demonstrate compliance rests with the school. An effective narrative will help to take any guess work out of the Commission's assessment and provide an effective roadmap outlining the school's compliance initiatives.

## Answering the Commission's "How" and "Why" Questions

If the Commission requires your school to demonstrate **how** or **why**, for example, the school's management team is sufficient and adequate, or **how** your library holdings are adequate to serve the student population, the Commission is providing the school with an opportunity to explain its position, and support that position with documentation. Too many times, when a school receives this type of the directive from the Commission, the school responds with only a list and does not explain **why** it is providing this information, or **how** it demonstrates compliance with accrediting standards.

## **Do's**

- *Plan ahead in preparing the school's response.*
- *Include an introductory and narrative summary of the school's response.*
- *Give a serious, thorough description of the school's compliance efforts.*
- *Reference applicable accreditation standards in the school's narrative response.*
- *Explain how the documentation demonstrates the school's compliance with accrediting standards.*
- *Take copious notes during the Exit Interview*
- *Contact your designated ACCSC staff liaison when needed.*
- *Ensure that your electronic response is intuitively organized.*

## Preparing a Comprehensive Response for Commission Consideration

### Example: Management

The Commission directs the school to demonstrate **how** its management team is sufficient and **how** it maintains appropriate management and administrative capacity. In response, the school simply submits a roster of managers and a resume for each staff member on that roster. The school should also provide a detailed narrative explanation as to:

- **Why** and **how** the experience listed on a resume is suitable to prepare that manager for a particular management position.
- **How** any changes the school has made demonstrate appropriate administration and oversight, and **how** each member of the school's management team is specifically suited and qualified for their roles in the school. -- There is no way to tell if a list of managers is sufficient if the school does not also provide, for example, the number of students being served, the program areas and level of credentials offered, and other specifics.
- Explain **why** the new staff or new organizational structure is appropriate. This means providing analysis – talk about the program areas and how those managers are equipped for each area and why the organizational structure is effective; the number of students served and how those managers are sufficient in number; the level of credentials the school issues, etc.
- **How** these personnel changes are likely to have a long-term positive effect on the management of the school and **how** the changes will ultimately contribute to sustained school and student success.

An example narrative excerpt follows, “Based on the school’s experience with career services and successful student outcomes, the school determined that for every 100 students enrolled the school must have 1 career services representative. The representatives are managed by a Career Services Director who has experience in the fields for which training is provided which aids in understanding the needs of employers. In areas the career services director does not have experience, she attends all PAC meetings and works with the Program chair in order to meet this need.”

A school should avoid simply providing a list of new managers brought on board without explaining its rationale for hiring these individuals. The narrative response should include an analysis regarding how the school determined the addition of new staff, or change to the administrative structure, is appropriate. For example, the school should explain how the revised management structure is appropriate to support the school’s mission, program objectives, and diversity of students served. Without the narrative explanation, the Commission is not afforded an opportunity to understand **how** a roster of new managers hired is sufficient to demonstrate compliance.

## Don'ts

- *Don't overwhelm the Commission by including miscellaneous documents that do not address the compliance finding or support the school's position.*
- *If you disagree with a compliance finding, do not provide a cavalier response.*
- *Don't just provide exhibits with no narrative to explain what the exhibits are intended to demonstrate.*
- *Don't simply provide copies of newly created blank forms. Blank forms do not show implementation of the form.*
- *Don't simply respond with a "will do" response that promises future action; answer with a "have done" response that demonstrates compliance.*
- *Don't simply hire a consultant to put together a response if it does not realistically reflect day to day practices at the institution.*

## Example: Learning Resource System

In the second example, the Commission directs the school to submit an explanation regarding **how** the school's Learning Resource System (LRS) materials are adequate to serve the student population.

In response, the school states "the resources in the LRS are adequate to serve the student population, and the school has analyzed its LRS standards to ensure it remains adequate and accessible. The school has spent over \$5,000 on books, periodicals, and technology thus far in 2013 for the LRS and plans to spend over \$4,000 more before the end of this year." The school's response then goes on to provide a list of all computers and LRS holdings. The response is specific and includes detail on the budget allocations in support of the LRS, but fundamentally, the response does not demonstrate **how** the school determined that the LRS holdings are adequate.

Since the school's above response indicates that it "analyzed its LRS..." the school should explain **how** it determined that the budget allocations and holdings listed in the response are sufficient to serve the student population. To do that, the school must talk about the student population. For example, the response should address **how** the number of computers available in the LRS is sufficient to serve the current student population by discussing, for example, the number of students currently enrolled at the school, the scheduling of classes, the school's analysis regarding usage studies, or how many students are in the LRS at a given time. With respect to answering questions on the adequacy of the types of LRS holdings, the school's response could address meetings between school administrators with faculty and their assignments that require use of the LRS as part of the program curriculum, and how the school determined that the LRS holdings are sufficient in quality and meet the needs of students.

**Sample narrative:** "The school added resources to the LRS because students mentioned that although teachers assign projects in the LRS, the LRS does not have all of the resources necessary to complete those assignments. Based on this, the school has met with faculty and assessed all of the assignments to ensure that the school's LRS meets the demands of the programs. As a result, the school has added the following resources [provide the LRS list]" In addition the PAC reviewed the LRS and determined it meets the needs from an employer's perspective. (Reference attached student surveys, faculty meeting minutes, documentation of procurement of additional holdings, and PAC meeting minutes.)

## Importance of Precision and Documentation

### Precision

Many times the difference between a full five year grant of accreditation and a deferral action, or the difference between a deferral and a stipulation action is the clarity and precision of the school's response in addressing the pertinent elements of the Team Finding or Commission Action Letter item.

#### **Example: Program Advisory Committee (“PAC”)**

The on-site evaluation team cites the school for not conducting two (2) PAC meetings annually, and in response the school simply provides a copy of the minutes from the most recent meeting. It is a positive step that the school conducted one PAC meeting, but the Commission may find the school failed to address the pertinent item, which is conducting two meetings annually. A precise response will focus on how the school is ensuring that two PAC meetings are being held. If the school has only had a chance to hold one PAC meeting since the on-site evaluation, explain the school's process for ensuring that two meetings will be held, submit the one set of minutes, and provide a schedule and agenda for the next meeting or two. Although the Commission may still want to follow-up on that second meeting, this more precise response may mean the difference between a deferral and “accreditation with a stipulation”.

#### **Example: Admissions**

The on-site evaluation team cites the school for not evaluating its recruitment policies, procedures, and personnel annually and in response the school provides a blank Admissions representative evaluation form. In this example, not only did the school not demonstrate implementation of the Form (see also Documentation below) but also the school only answered half of the finding - the standard cited states that the school must annually evaluate recruiting “policies and procedures” in addition to personnel. A more precise response will also demonstrate that the school has reviewed its recruitment policies and procedures, including documentation of any action items implemented as a result of that assessment. In addition, be certain that the evaluation of admission representatives, and policies and procedures include an assessments compliance with accrediting standards and are not just generic evaluations.

#### **Example: Learning Resource System (LRS)**

The on-site evaluation team cites the school for not demonstrating that the LRS is accessible during and beyond classroom hours. In response the school provides a plan for outreach - to publish and market the value of the LRS, includes a list of the LRS holdings, discusses how students log-on to the online resources, and identifies the hours of operation for the LRS.

### **Guiding Questions: Supporting Documentation**

*When reviewing the draft response prior to Commission submission, a school should ensure that it avoids including superfluous documentation without explaining what the documentation is intended to demonstrate.*

*Consider these guiding questions:*

- *Does the documentation support the school's narrative response?*
- *Is the documentation clear?*
- *Is the documentation complete (no blank forms)?*
- *Does the documentation demonstrate that a corrective action has taken place?*
- *Does the documentation show the systematic implementation of a new process or policy on a go-forward and ongoing basis?*

## Preparing a Comprehensive Response for Commission Consideration

However, this response does not specifically address the finding that LRS is not accessible during and beyond classroom hours other than providing a copy of the hours of operation. A precise response either explains how the school determined that its LRS hours of operation do meet accrediting standards, or describes changes made to the hours of operation to ensure it is accessible as required by accrediting standards.

### Documentation

Just as precision is important in a school's response, the comprehensiveness of the response is equally important. When responding to a compliance finding, a school should **always provide documentation** that shows consistency in the school's compliance initiatives. A school should avoid just submitting an example of a completed form, but rather, submit documentation that demonstrates systematic compliance over a period of time identified by the school, perhaps from the time of the on-site evaluation to the time of the response submission.

If the school has created a new policy in order to address a compliance finding and to show that the policy has been "implemented" only provides a copy of that policy as published in the catalog with a blank copy of a new form that was created as part of the policy, the Commission would likely require additional information in order to see the systematic implementation of the new policy as demonstrated through completed copies of newly created forms over a period of time. A school should avoid submitting blank forms as these blank forms do not demonstrate whether these new forms are being used by the school and have the desired impact in addressing any compliance finding.

### **Documentation of On-Going compliance and Effectiveness of the School's Corrective Actions**

An effective narrative response, and the documentation provided in support that is intended to demonstrate compliance, should specifically address the specific compliance finding cited and demonstrate that the school has resolved the issue on a go-forward basis as well.

#### **Example: Student Recruitment**

The on-site evaluation team cites the school for not having signed Codes of Conduct for each admissions representative. If the school's response simply provides three signed Codes of Conduct, the Commission has no way to know whether a code of conduct is included for every admissions representative, because there is no roster of admissions representatives included to compare it with. The school's response should include a roster, or perhaps an organizational chart, which identifies all of the school's admissions representatives.

This approach of including a roster or list which correlates to any documentation is appropriate when responding to all areas required by accrediting standards.

#### **Example: Refunds**

If there is a question regarding whether the school is making refunds in accordance with its established policy, the school's response should:

- Reference a copy of the school's refund policy;

## Preparing a Comprehensive Response for Commission Consideration

- Identify a time period (e.g. 3 months);
- Include a roster of all students who were due a refund during that period;
- Include supporting documentation (e.g., EFT, or completed checks) to demonstrate that all students identified on the roster as being due a refund were made in accordance with the school's published refund policy; and
- The school should also explain the circumstances for any student including on the roster during this time period whose refund was not processed in accordance with the school's refund policy and discuss the strategies developed to avoid this compliance shortfall going forward.

### Example: Faculty Training

If there is a question whether the school engages in ongoing faculty assessment and professional development activities, the school should avoid simply submitting a sample of trainings completed by various staff. Rather, the school's response should include:

- A copy of the school's current (revised), faculty professional development plan
- A roster of all currently faculty by program offering;
- Sample documentation to demonstrate that each member of the school's faculty engages in activities such as teaching skill development, instructional methodology development, or continuing education in the subject taught; and
- Any additional information that the school believes will assist the Commission in determining the school's compliance with accrediting standards regarding faculty professional development.

By following this format, the Commission has the opportunity to determine that each member of the school's faculty engaged in professional development required by accrediting standards as identified by the school in its faculty professional development plan.

### Example: Admissions

In the next example, an onsite evaluation team could not determine that the school is following its stated admissions policy because of the lack of documentation available during the visit to demonstrate that the school obtains a copy of each applicant's high school diploma prior to starting class. In response to this compliance finding the school states that it has implemented a new Admissions File Checklist, and provides a blank copy of that checklist.

The Commission is likely to require additional information in order to provide the school with an opportunity to provide evidence that it school has implemented the Admission File Checklist form and to ensure the school is obtaining a high school diploma for every student prior to enrollment as stated in the school's admissions policy and required by accrediting standards. A more comprehensive response would include:

## Preparing a Comprehensive Response for Commission Consideration

- A copy of the school's admissions policy and procedure as disclosed in the school's catalog;
- A roster of all applicants who formally applied for admission to the school since the team's visit (or other designated period of time);
- Copies of all documents (e.g. high school diploma, GED) required for admission into the school as outlined in the school's admissions policy;
- A copy of the executed enrollment agreement signed by all parties for each student included on the roster that was accepted into the school;
- A completed Admission File Checklist for each applicant included on the roster;
- Copies of any denial of admission decision for any applicant included on the roster; and
- An explanation of the circumstances for any student included on the roster during this time period who was admitted prior to providing all documentation required for admission to the school and discuss the strategies developed to avoid this compliance shortfall going forward.

### Example: Student Services/Satisfaction

If the on-site evaluation team cites a finding for low student satisfaction due to survey results and the school only provides a narrative of strategies to address that finding, the Commission will likely request additional information to include having the school re-survey the students to ensure that the stated strategies were effective. If cited by an on-site evaluation team for low student satisfaction, consider providing and update on the impact of the strategies implemented to improve student satisfaction. Also re-survey the students and provide:

- A description of the student survey process;
- A detailed analysis of the student survey results;
- A summary of the results of the school's student surveys presented in a comparative format with the student survey results from the on-site evaluation;
- A summary of any trends, isolated incidents, or general problems extracted from the comparison of the student surveys; and

### Submitting an Electronic Response for Commission Consideration

- *Electronic document submissions must be prepared in accordance with ACCSC's Instructions for the Submission of Electronic Documents.*
- *All electronic documents must be submitted to ACCSC as one Portable Document Format ("PDF") file.*
- *All electronic PDF documents must include electronic bookmarks and hyperlinks placed within the document.*
- *Whenever possible, directly convert documents to PDF as opposed to scanning documents, which allows for far greater readability.*
- *If the electronic document submission includes personal or confidential information that is not required for the Commission's review (e.g., social security numbers, dates of birth, etc.), remove or redact that information.*
- *Refer to Blueprints for Success – **Preparing an Effective Electronic Submission***

## Institutional Assessment and Improvement Planning: A **Blueprint** for Sustained Success

*As part of the accreditation process, ACCSC requires schools to demonstrate the capability to meet and exceed accrediting standards on an ongoing basis, to include a plan for future improvement.*

*Some Best Practices in developing an Institutional Assessment and Improvement Plan (IAIP) include:*

- *Establishing a realistic budget to ensure there is necessary fiscal support of the school's strategic initiatives identified in the IAIP.*
- *Ensuring that IAIP activities are significant and ongoing throughout the term of accreditation, not once every five years as part of preparations for an onsite evaluation.*
- *Maintaining documentation to demonstrate that the school it engages in IAIP activities in a systematic fashion.*

- A detailed narrative of the school's plan to address any areas of student dissatisfaction, if applicable.

## Putting it All Together

This next section references a series of sample team findings from an onsite evaluation conducted to a school seeking renewal of accreditation from ACCSC as well as some example responses that incorporate the “**Past-Present-Future Response Model**”, including a narrative explanation, references to required accrediting standards, and supporting documentation to demonstrate the school's systematic implementation of its compliance initiatives.

### **Example: Management and Administrative Capacity**

#### Team Finding

The school did not demonstrate that continuity of management and administrative capacity is ensured through the reasonable retention of management and administrative staff (*Section I (A)(4), Substantive Standards, Standards of Accreditation*). The team found that three of six senior managers (including the Director, Admissions Director, and Student Services Director) have been with the school for less than five months and the Admissions and Student Services areas have been through three managers in less than eighteen months.

#### School's Response

##### **Past**

The school is aware of the ACCSC requirements under *Section I (A)(4), Substantive Standards, Standards of Accreditation* and agrees that continuity of management is important for student success. The school notes that during the past couple of years it has been undergoing a number of changes and improvements due to new federal regulations and changes to accreditation standards. These improvements have created the need for additional duties for many of our managers. Upon reflection, the school came to the realization that the former Director did not provide a structured implementation of these policies which lead to frustration on the part of the management team. Furthermore the former Director did not conduct regular meetings with the management team in order to provide ongoing consultation and guidance which contributed to some dissatisfaction among members of the

management team, several of whom resigned from their positions. The school terminated the director prior to the visit.

## Preparing a Comprehensive Response for Commission Consideration

### Present

As mentioned, and as made aware to the visiting team, the school made a personnel change immediately prior to the visit. Following the visit, the new School Director, John Smith, formalized school policies with regard to manager responsibilities so that there are clear expectations. A copy of the new policies developed since the onsite evaluation are provided in **Exhibit A**. In addition, under the leadership of John Smith, the school has facilitated weekly meetings with managers to ensure issues or questions are addressed. Attached as **Exhibit B** are minutes from all four weekly management team meetings held in April 2013. In addition, attached as **Exhibit C** are a list of all managers, their date of hire, and the date of termination, which shows that all managers in place at the time of the on-site evaluation have been retained.

### Future

In order to ensure the continuity of management and retention of managers, the Director has incorporated a management retention plan as part of the school's institutional assessment and improvement plan, See **Exhibit D**. This plan provides a framework to help the school to monitor on a regular basis, management performance, job satisfaction, and professional development. The school has also included documentation of the implementation of that plan and its action items. See **Exhibit E** for copies of the completed items thus far in the areas of job satisfaction and professional development. Specifically, the exhibit includes satisfaction survey results, a list of all managers, and documentation of completed seminars in each staff member's area of operations.

## Example: Institutional Assessment, Improvement, and Planning

### Team Finding

The school did not demonstrate institutional assessment and improvement goal setting, benchmarking, and implementation activities appropriate to the size and scale of the school's operations in all areas required by the standards (*Section 1 (B)(2), Substantive Standards, Standards of Accreditation*). The school's institutional assessment and improvement planning does not address administrative policies and practices; student support services; and student achievement outcomes. The goal setting and benchmarking items that are included in the planning documents are insufficient and the school was not able to supply documentation to demonstrate the implementation of the activities in the plan.

### School's Response

#### Past

The school agrees with the team's finding in this regard and understands the expectations for institutional assessment and improvement planning as required by *Section 1 (B)(2), Substantive Standards, Standards of Accreditation*. The school would like to note that at the time of the on-site evaluation, although the school did have a strategic plan with regard to administrative policies and practices; student support services; and student achievement outcomes, these plans were not formalized as part of the assessment and improvement activities and had been operated out of separate departments and had not been centralized. See **Exhibit A** which provides the strategic plan in each department. In addition, the school did not have policies or

## Preparing a Comprehensive Response for Commission Consideration

an assigned staff member to track and maintain documentation of implementation activities, or to bring all goals set by the departments to a centralized plan which contributed to the school's shortfall in demonstrating compliance with accrediting standards.

### Present

The school has created a cross-departmental group which is responsible for maintaining the institutional assessment and improvement activities and for coordinating communication among all departments to ensure that all areas required by the standards are covered. The first task was to create a centralized document of all assessment and improvement activities and documentation of implementation. See **Exhibit B** for the school's assessment and improvement plan for 2013 and which includes goals for the future in 2014 and 2015. See **Exhibit C** for a list of all completed activities and the corresponding documentation of implementation for each.

### Future

The Director of Education has designated the program chair from each department to report on the continuous goal setting and assessment of progress toward meeting benchmarks. See **Exhibit D** for the minutes from the meetings in June 2013 and July 2013 and **Exhibit E** for the agenda for August 2013.

### Example: Student Loan Repayment

#### Team Finding

The school did not demonstrate that it has adopted a written comprehensive program, addressing such areas as student loan information, advising and monitoring, cooperation with lenders, and collection of information to facilitate location of borrowers. The school must document implementation of the program and conduct an annual evaluation of the effectiveness of the school's efforts (*Section I (E) (1), Substantive Standards, Standards of Accreditation*). The on-site evaluation team found that the school received approval from the U.S. Department of Education to participate in the Title IV funding programs in February 2012 and students started receiving Title IV funds on April 2012; however, at the time of the on-site evaluation the school had not developed a student loan repayment program.

#### School's Response

##### Past

The school agrees with the team's finding in this regard understands its responsibilities under *Section I (E)(1), Substantive Standards, Standards of Accreditation*. The school notes that at the time of the on-site evaluation although the school was able discuss how it promotes student loan repayment, the school did not have a formal written program.

### Present

The school has created a formal program to promote loan repayment which includes workshops, information, and federal student aid booklets provided at application and entrance into the program; after completion of 900 hours; upon graduation or withdrawal; upon entering repayment; and during repayment. The school determined the appropriateness of this plan by consulting the U.S. Department of Education's guidelines on this matter. The school's Financial Aid officer also tracks students' advising on a tracking spreadsheet. See **Exhibits A-D** for copies of the workshop agenda, booklets, a list of workshop dates and the corresponding list of students for each of the following: entrance into the program; after completion of 900 hours; upon graduation or withdrawal; upon entering repayment; and during repayment. In addition, **Exhibits E-F** include student sign-in sheets for each workshop and completed tracking spreadsheets for each month since the time of the on-site evaluation to present.

### Future

In order to ensure that the school's student loan repayment program is effective going forward and on a continuous basis the school has developed a Default Prevention Team to:

- Conduct analysis to determine the sources of default risk;
- Create measurable interventions/steps
- Describe 'consequent actions' to be taken to reduce default (the written plan).
- Determine the source of the default risk;
- Determine what steps to take to reduce default risk;
- Represent all parts of the institution (including management), which will contribute to risk reduction activities;
- Allocate school resources to default reduction activities; and
- Assess the effectiveness of default reduction activities over time: Are they working?
  - See **Exhibit E** for the list of Default Prevention Team members and their qualifications.
  - See **Exhibit F** for a copy of the school's default prevention plan.
  - See **Exhibit G** for a copy of the minutes from the first team meeting

### Maximizing Program Advisory Committees: Keys to Sustained Success

*Each accredited school must have a Program Advisory Committee (PAC) for each occupational program as a means to provide the school with an external review of its programs. Some best practices of high performing schools are outlined below:*

- *Establish a realistic budget to support the goal of hosting at least two PAC meetings for each program per year.*
- *Reach out to local employers that have hired graduates to serve on the PAC as they have some familiarity with the school and program offerings.*
- *To ensure strong attendance, expand the committee size beyond the minimum requirement of having at least 3 representatives from the employment community or practitioners from the program area on each PAC.*
- *Provide a tentative agenda to PAC members well in advance of the meeting and solicit feedback. Incorporate all required compliance elements identified under Section II (A)(5)(3)(i-iii) onto the agenda.*
- *Ensure that meeting minutes accurately reflect the substantive nature of the review and assessment by PAC members.*

### Example: Program Advisory Committees

#### Team Finding

The team is concerned that the school did not have two (2) Program Advisory Committee meetings in 2012 as required by *Section II (A)(5), Substantive Standards, Standards of Accreditation*. Specifically, based on a review of the minutes from the school's PAC meetings in 2012, and as confirmed via conversations with the school's staff, the school only hosted one meeting for the Culinary PAC in 2012.

#### School's Response

##### **Past**

The school is aware of the requirements regarding Program Advisory Committees as outlined in *Section II (A)(5), Substantive Standards, Standards of Accreditation*. The school agrees with the team's finding in this regard, and noted that there were a number of scheduling complications that prevented the school from having two meetings for the Culinary PAC in 2012. Additionally, upon further examination, school officials noted that there was no internal policy regarding the requirements for PAC meetings, which lead to some confusion among staff and resulted in a shortfall in the required number of meetings for the Culinary program.

##### **Present**

Since the on-site evaluation, the school has established a new internal policy regarding Program Advisory Committees (See **Exhibit A** for a copy of this policy) and has created a new administrative position that is responsible for the coordination of all PAC meetings on a go-forward basis (See **Exhibit B** for a position description). On January 2, 2013, the school hired Jane Jones to serve in this capacity. (See **Exhibit C** for a copy of the resume/Staff Personnel Report for Jane Jones). The school also hosted a Program Advisory Committee for the Culinary program on January 5, 2013. Attached are copies of the minutes from that meeting which include a description of each member in attendance (i.e., titles and affiliations) the date, time, and location of the meeting; comprehensive and clear description of the review of and commentary made by the PAC members on all areas outlined in *Section II (A)(5), Substantive Standards*; and evidence the school gives consideration to PAC input (See **Exhibit D**). The school also reviewed the Commission's webinar on Maximizing Program Advisory Committees.

##### **Future**

As referenced in our response, we have implemented a new policy regarding PACs. Accordingly, we have scheduled the next two meetings for the Culinary PAC to ensure that the school maintains compliance with accrediting standards on a go forward basis. Although the standards only require two meetings per year, given the valuable role our PAC plays, we have determined that having three meetings per year to be an ongoing goal.

See **Exhibit E** for tentative agendas for the next Culinary PAC meeting that is scheduled for April 10, 2013, and December 1, 2013, respectively. In addition attached is an updated copy of the school assessment and improvement plan which shows that the school is continuing to assess and improve on the new policy on PACs and new position which coordinates all PAC meetings. This plan is used to ensure that the school continues to manage PACs in accordance with accrediting standards. (See **Exhibit F**)

### Example: Educational Administration

#### Team Finding

The school did not demonstrate that it engages in ongoing faculty assessment and professional development activities that are appropriate to the size and scope of the school's educational programs; support the quality of education provided; and enhance student learning and achievement (Section III (A)(2), *Substantive Standards, Standards of Accreditation*). The school does not appear to have a systematic process for assessing faculty and planning for improvements. While student assessments are conducted, faculty observations are inconsistent and there is no annual review of overall performance. The team was also not able to determine that the school has developed plans that address improvements in teaching methods or professional knowledge.

#### School's Response

##### **Past**

The school understands the requirements for ongoing faculty assessment and professional development for faculty under Section III (A)(2), *Substantive Standards, Standards of Accreditation* and agrees with the team's finding that there was no systematic process for assessing faculty and planning for improvements. Although the school has always encouraged faculty to engage in professional development and to stay current with industry trends, the school had not had a formal process to assess faculty needs and areas of improvement.

##### **Present**

Immediately following the onsite evaluation, the school created a formal faculty assessment and development program which is provided as **Exhibit A**. The Director of Education is responsible for maintaining and implementing this program. All faculty have now been assessed using this program - see **Exhibit B** for a list of all faculty and the most recent assessment for each. In addition, as described in the plan, each faculty member has participated in at least one professional development seminar that corresponds to the needs that were revealed in the aforementioned assessment – see **Exhibit C** for documentation of completion for each faculty member.

#### Best Practice:

### Educational Administration and Faculty Qualifications

*ACCSC believes that the success of a school is directly related to the quality of its faculty. Accrediting standards in this area require schools to retain a strong and experienced faculty that, among other areas of focus, is obligated to continued self-improvement.*

*Some guiding questions for the Commission as it assesses a school's compliance with accrediting standards in this area include:*

- *Does the school have a written faculty development plan?*
- *Can the school document that faculty engaged in professional development activities in a systematic fashion?*
- *Did the school establish a realistic budget to support the implementation of the faculty development plan?*
- *Does the school customize the plan to meet the individual needs of faculty?*
- *Does the school tie performance evaluations to professional development activities?*
- *How is the school identifying and recruiting future instructors?*
- *Does the school have a pool of qualified substitute teachers?*
- *Does the school provide leadership opportunities for high performing instructors?*
- *How does the school evaluate the effectiveness of teachers in the classroom?*

## Preparing a Comprehensive Response for Commission Consideration

### Future

In order to ensure that the faculty are undergoing assessment and professional development activities on an ongoing basis the school has created a calendar of monthly faculty meetings where the school and the entire group of faculty go over the school's program, make updates, changes, arrange for scheduling and budgeting in order to ensure that the development plan is working document. In addition **Exhibit D** is a list of the planned professional development activities for each faculty member based on the faculty evaluations (assessment) of each faculty member. See **Exhibit E** for copies of the minutes from the first 2 monthly meetings and the agenda for the next meeting.

### Example: Student Recruitment, Advertising, and Disclosures

#### Team Finding

The school did not demonstrate that it fully executes an enrollment agreement for all enrolled students, nor did the school demonstrate that prior to starting class, students receive a final copy of the enrollment agreement signed by the student and accepting school official (*Section IV (C)(2)(d), Substantive Standards, Standards of Accreditation*). The team found that the students and admissions representatives sign the enrollment agreement on dates in close proximity to the student's start date; however, the accepting school official's signature does not occur until a later date. In some cases the accepting school official signed the enrollment agreement after the student's start date. As a result, the school has not executed an enrollment agreement for all enrolled students and students may not receive a final copy of the enrollment agreement prior to starting class. Based on the team's review, the school did not properly execute and furnish enrollment agreements to the following students [list of students].

#### School's Response

##### Past

The school has a better understanding of the requirement under *Section IV (C)(2)(d)*, and agrees with the team's finding in this regard. Prior to the on-site evaluation, the school's practice had been to provide the student a copy of the enrollment agreement at the time the student signs, and then place the fully executed copy in the student's file once the school's official had signed it. In all cases the school had obtained all required admissions documents from the applicant prior to starting class but in some cases the school official had not signed the enrollment agreement until after the student started, just due to scheduling and timing and availability of the school official. There had only been one manager, the school director, with the authority to sign enrollment agreements.

##### Present

The school has adopted a new policy and procedures, see **Exhibit A** for memo to staff. Specifically the school's policy requires that the student receive a copy at the time the student signs and another copy at the time the school official signs and the enrollment agreement is fully executed. In order to make this process easy, the school is now using a 3-page carbon enrollment agreement. When the student signs, the student is given the pink copy, and when the school official signs the student is given the yellow copy with all signatures, and the school keeps the white/top copy on file. **Exhibit B** is a roster of all students admitted to the school since the on-site evaluation and a copy of the enrollment agreement for each.

## Program Viability and Assessment

The Commission expects schools to conduct a realistic assessment of the viability of program offerings and the factors impacting student achievement. In all cases, the Commission expects that a school will take appropriate and responsible action regarding any program offering that is not meeting expectations. Some guiding questions include:

- At what rate are students graduating?
- At what rate are graduates passing licensure exams?
- At what rate are graduates getting a job in a training related field?
- Are graduation and employment rates getting better? Getting worse?
- Are there any mitigating factors impacting the school's ability to demonstrate successful student achievement?
- Did the school examine the rates of student graduation in relation to admissions standards?
- What changes has the school made with respect to the program curriculum or career service initiatives?
- What do the members of the school's Program Advisory Committee say about employment opportunities?

## Future

The school has also created a plan to ensure that this area of non-compliance will not be a repeat finding. The school has designated the Director of Education as an alternate school official to sign the enrollment agreement when the school director is not available. **Exhibit C** is the minutes from the meeting/training held with the Director of Education where the process was explained in order to ensure the Director of Education checks all the necessary requirements before signing. The Director of Education is not involved in recruitment of students, see **Exhibit D** for a copy of the job description.

## Example: Student Achievement

### Team Finding

The school reported a graduate employment rate that does not meet ACCSC's minimum benchmarks, as outlined below (*Section VII (B)(1)(b), Appendix VII, Substantive Standards, Standards of Accreditation*).

Program Title	Program Length	Employment Rate	Benchmark Employment Rate
Architectural CAD Technology	18	33%	66%

### School's Response

Typically, a finding regarding low student achievement will also include specific directives from the Commission on the information the school needs to provide in response, such as an updated Graduation and Employment Chart for the program in question which identifies a specific report date and all necessary documentation (e.g., student transcripts and verifiable records of initial employment) in support of the reported rates of student achievement included on the Graduation and Employment Chart. As part of its response, the school may also want to incorporate elements of the [Past, Present, Future Response Model](#).

**Past** - The school should provide a detailed assessment of underlying factors contributing to the low rate of student graduation or graduate employment.

**Present** - A description of the school's strategies to overcome those factors, as well as a detailed analysis regarding the effectiveness of the school's efforts.

**Future** - The school's strategic plan moving forward to address the findings identified in its analysis of underlying factors

## Preparing a Comprehensive Response for Commission Consideration

contributing to the low rate of student graduation or graduate employment.

Additionally, consider providing the following:

- A description of the factors impacting successful student achievement at the school, the school's strategies to overcome those factors, an assessment of the impact of these strategies, and an assessment school's compliance with ACCSC's student achievement outcomes requirements
- A Program Viability Study that specifically addresses, given the low reported rates of graduate employment, whether the program adequately prepares students for entrance or advancement in the field
  - Include both internal and external review as well as an analysis of the job opportunities for the school's graduates in each of the school's program offerings
- An explanation regarding any proposed changes regarding the program curriculum staffing, instruction, admissions requirements, suspensions or limitations in enrollment, cessation in program offerings, or any other material change implemented by the school in the wake of the continued low levels of reported student achievement rates
- Copies of Program Advisory Meeting minutes for all program offerings that address program length, graduation rates, graduate employment rates, and curriculum
- Results of an admissions study to determine whether there are any changes necessary in the admissions requirements and the way a school is determining the applicant's ability to benefit from the program
  - If the school has adopted changes, submit documentation of the implementation of that change.

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### Reminders:

- ✓ **Provide a Narrative Response: Every Finding, Every Response, Every Time.**
- ✓ **Precision: Answer the Question**
- ✓ **Documentation: Demonstrate Systematic Implementation**
- ✓ **No blank forms**

\*\*\*\*

**In Conclusion**, keep in mind that through the accreditation process ACCSC assesses the effectiveness of an institution's educational programs by evaluating the infrastructure that supports the delivery of programs as well as educational outcomes. While ACCSC employs its own fact-finding methods to determine an institution's compliance with [accrediting standards](#), the burden rests with the institution to establish that it is meeting ACCSC's standards before accreditation is conferred.

As captured in this [Blueprint Module](#), **Preparing a Comprehensive for Commission Consideration**, successful responses provide the Commission with a strong narrative for every item, include documentation to support all corrective action, and are organized in an intuitive manner.

# ACCSC



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