

# Evaluation Manual

New England Commission of Higher Education



# Evaluation Manual

**New  
England  
Commission of  
Higher  
Education**



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## INTRODUCTION

This manual has been prepared by the New England Commission of Higher Education as a guide for evaluation teams participating in site visits as part of the accreditation process. It describes the philosophy, goals and procedures which characterize the Commission's work, and provides both a context and blueprint for site visitors as they prepare for and conduct institutional evaluations.

While the Commission's *Self-Study Guide* remains the institution's primary source of information about the self-study process, institutions may also find the *Evaluation Manual* helpful in understanding the respective roles of the visiting team and of the Commission throughout the evaluation process.

Additional information about the Commission's *Standards for Accreditation*, its policies and practices, and other information for the public may be found on the Commission's website <https://neche.org>.

Questions regarding the *Evaluation Manual* or about the accreditation process in general should be directed to the office of the Commission. In addition, to assist in further revisions of the manual, the Commission welcomes suggestions from those who use it. Please address all comments to:

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## Chapter I

### U.S. Regional Accreditation

#### *Overview*

*Institutional accreditation, as practiced by seven regional commissions, provides quality assurance to the public and encourages institutional quality through a process of self-evaluation and peer review. Institutional accreditation is voluntary in two ways: 1) except as otherwise defined by state law, degree-granting institutions of higher education need not seek accreditation; and 2) accreditation processes, such as site visits (the team) and accreditation decisions (the Commission), are carried out by volunteers. Institutions accredited by an organization that is recognized by the U.S. Department of Education may participate in programs of federal financial aid for students.*

#### **The Role and Value of Accreditation**

In the United States, accreditation is the primary process for assuring and improving the quality of higher education institutions. Accreditation of over 3,000 colleges and universities is carried out through a process known as 'regional accreditation,' a peer review process based on standards set by the higher education community with the involvement of the public. Institutions are evaluated on how and how well they meet these standards, in light of their mission. Following review by a team of peers, accrediting commissions determine the accreditation status of the institution and establish follow-up and further evaluation as appropriate.

Regional accreditation oversees the quality of research universities; community colleges; liberal arts colleges; state colleges and universities; religiously affiliated institutions; special-purpose institutions in the arts, sciences, and professional fields; military academies; historically black and Hispanic-serving institutions; and tribal colleges. Regionally accredited institutions are public and private, for-profit and not-for-profit, secular and religious, urban and rural, large and small, old and new, traditional and non-traditional. The quality of these colleges and universities - and the talent they have contributed to develop regional accreditation over the decades - means that regional accreditation is highly regarded around the world.

In the United States, the regional commissions are recognized by the U.S. Department of Education and by the Council on Higher Education Accreditation (CHEA). Recognition by the U.S. Department of Education provides access to federal student aid to eligible students at participating institutions.

Regional accreditation is overseen by a professional staff for each commission, totaling slightly more than 160 full-time employees nationally. Annually the work of accreditation is carried out by approximately 4,300 volunteers who serve on visiting teams and on the commissions. These volunteers include college and university presidents; academic officers; faculty; campus experts in the assessment of learning outcomes, finance, and student services; and public members who, including members of their immediate family, have no paid or trustee involvement in institutions of higher education.

Regional accreditation traces its roots to 1885. Today's enterprise is based on decades of experience, both leading and reflecting the development of American higher education. Current accreditation standards go beyond inputs and processes (e.g., Does the institution provide clear public statements about what students are expected to gain from their



education?) to focus increasingly on outcomes (Is there verifiable information that the institution understands what its students have gained as a result of their education and useful evidence about the success of its recent graduates?). Regional accrediting commissions have been leaders in helping colleges and universities develop trustworthy ways to understand student learning and to use the results for improvement.

American higher education is known for its diversity. *The Economist's* global survey of higher education praised the American system, noting "A sophisticated economy needs a wide variety of universities pursuing a wide variety of missions [and] the more that the state's role contracts, the more educational variety will flourish." Regional accreditation has provided the conditions and framework under which diversity – and quality – have flourished.

## **Peer Evaluators**

Accreditation is a system of peer review. The New England Commission of Higher Education has a database of approximately 2,000 evaluators that includes faculty members and administrators at accredited institutions in New England and beyond who are qualified by their credentials and experience to apply the Commission's standards.

The team of evaluators, comprised of both academic and administrative members, is chosen to represent diverse groups and talents from institutions comparable to the one being evaluated. Evaluators are provided with comprehensive training prior to the evaluation visit. They are expected to make sound professional judgments, based on the *Standards for Accreditation*, which help the Commission evaluate and enhance the quality of higher education among the institutions accredited by the Commission.

To assure member institutions and members of the public that accreditation decisions are based solely on the application of professional and impartial judgment, peer evaluators, as representatives of the Commission, are expected to carry out their responsibilities with the highest level of integrity. Commissioners, evaluators, and staff recuse themselves from any review that might represent or be perceived as a conflict of interest. (See the Commission's *Policy Statement on Conflict of Interest*, appendix i, and its *Expectations of Peer Evaluators*, appendix ii.)

## Chapter II

### Accreditation by the New England Commission of Higher Education

#### *Overview*

*In the six New England states and for a small number of American-style institutions abroad, the New England Commission of Higher Education undertakes the evaluation of colleges and universities. Accreditation means specifically that an institution of higher education fulfills the Commission's Standards for Accreditation, including meeting its Requirements of Affiliation. Approximately 230 institutions of higher education have achieved this distinction.*

*The New England Commission of Higher Education evaluates institutions against nine standards, each of which encompasses a principal area of institutional activity or responsibility. Each standard, in addition to containing specific criteria by which to measure institutional quality, requires that the institution assess its degree of effectiveness in the areas covered by the standard and use the results of that assessment to improve and enhance the institution's ability to meet its mission. Commission standards also require that the institution carry on every aspect of its activities with integrity and transparency. Accreditation by an institutional accrediting body indicates the institution has appropriate purposes; has the resources necessary to accomplish its purposes; can demonstrate that it is accomplishing its purposes; and gives reason to believe that it will continue to accomplish its purposes.*

#### **The New England Commission of Higher Education**

The New England Commission of Higher Education is responsible for the evaluation of institutions which award the associate's, bachelor's, master's, and/or doctoral degrees. NECHE is recognized by the U.S. Department of Education as a reliable authority as to the quality of education for the institutions it accredits. The Commission is also recognized by the Council for Higher Education Accreditation (CHEA), affirming that its *Standards for Accreditation* and processes are consistent with the quality, improvement, and accountability expectations that CHEA has established.

NECHE traces its roots to the New England Association of Schools and Colleges. (NEASC), the nation's oldest regional accrediting association that today consists of three commissions dedicated to the accreditation of K-12 institutions: Commission on Independent School; Commission on Public Schools; and Commission on International Education K-12. In 2018, the New England Commission of Higher Education (NECHE) became a separate and independent entity.

Recognizing the importance of clearly stated and understood purposes as a guide to the effective conduct of its affairs, the Commission has adopted the following statements affirming its vision and mission:

#### ***Vision Statement***

*Accreditation by NECHE is widely recognized as an effective and efficient system of peer review, assuring the quality of education, supporting innovation, and providing value to institutions and to the public.*

#### ***Mission Statement***

*The Commission exercises the dual roles of quality assurance and encouraging continuous improvement for degree-granting institutions of higher education. The Commission assures the*

*education community and the public that accredited institutions have clearly defined objectives consistent with Standards for Accreditation established by the Commission; that they have the organization, staffing and resources to accomplish and sustain these objectives. In addition, through its process of accreditation, the Commission promotes the improvement and effectiveness of its affiliated educational institutions.*

The New England Commission of Higher Education consists of at least 21 members elected for three-year terms at its annual meeting in December. A Commissioner may be elected for one additional three-year term; Commissioners serving as chair or vice-chair may have their terms extended. Membership on the Commission is drawn from a range of institutions and from the public. At least one of every seven commissioners is a member of the public who, along with immediate family members, is not an employee, contractor, or trustee of an institution of higher education. Commissioners serve without compensation and those who are institutional representatives must be currently active on the faculties or staffs of an institution accredited by the Commission. The Commission normally meets four times a year.

The day-to-day activities of the Commission are conducted by the President of the Commission, professional staff, and support staff. The President and professional staff oversee and direct the work of the Commission's evaluation program, including the self-study and on-site evaluation processes. In addition to representing the Commission to its affiliated colleges and universities, they also work closely with the various state offices of higher education and promote the work of the Commission through participation in appropriate local, state, regional, national, and international meetings.

## **Standards for Accreditation**

Institutions of higher education achieve and maintain accreditation through NECHE by demonstrating that they meet at least minimally the Commission's *Standards for Accreditation* adopted in 2016. Nine in number, each standard encompasses a principal area of institutional activity and responsibility:

- Mission and Purposes
- Planning and Evaluation
- Organization and Governance
- The Academic Program
- Students
- Teaching, Learning, and Scholarship
- Institutional Resources
- Educational Effectiveness
- Integrity, Transparency and Public Disclosure

The *Standards for Accreditation* define quality and provide a framework for evaluation in terms of institutional mission. Thus, they have been developed to include a wide range of collegiate institutions as evidenced by their differences in purposes, size, organization, scope, clientele served, support, and control. By design, the standards welcome perceptive and imaginative innovation aimed at increasing the effectiveness of higher education.

Visiting teams are asked to maintain appropriate balance and emphasis between and among the various standards, seeking to come to conclusions that integrate findings through the application of the standards as a whole. As noted in the Preamble to the *Standards for Accreditation*, an institution found to meet the standards is one that:

- *has clearly defined purposes appropriate to an institution of higher learning;*
- *has assembled and organized those resources necessary to achieve its purposes;*
- *is achieving its purposes;*
- *has the ability to continue to achieve its purposes.*

In addition to the *Standards for Accreditation*, the Commission has adopted a series of policies and statements to which institutions are expected to adhere. The *Standards for Accreditation* establish criteria for institutional quality; Commission policies and statements elucidate the standards and relate to their application.

Accreditation implies more than that an institution meets minimum criteria, however. As part of their fulfillment of Commission standards, an affiliated institution is expected to work toward improving its quality, increasing its effectiveness, and continually striving toward excellence. The Commission's evaluative processes are designed to encourage such improvement. In addition, the Commission requires that institutions conduct all operations with integrity. As noted in the *Standards of Accreditation*, the institution is responsible for all activities that are sponsored by the institution or carry its name

While measuring institutional fulfillment of individual standards is important, accreditation by NECHE speaks to the institution as a whole and encompasses all of the institution's academic programs and student bodies across certificate and degree levels, instructional modalities, and locations. It is a summary judgment about the capacity of an institution to fulfill the *Standards for Accreditation* in light of its mission and purposes. In other words, the fundamental unit of analysis for the Commission is the institution. Therefore, while specific programs or courses may be reviewed as a part of the evaluative process, they are not accredited in and of themselves. Some aspects of an institution are always stronger than others. While accreditation does not guarantee the quality of individual programs, courses, or graduates, serious weaknesses in some areas may threaten an institution's accreditation.

When granted, accreditation is never partial. It applies to the entire institution and must be reviewed periodically. Each accredited institution is required annually to update its description and data summary on file with the Commission. Substantive changes initiated subsequent to the most recent evaluation which significantly alter the objectives, scope, or control of the institution, or which establish instruction at a new geographic location, at a different degree level, through distance, correspondence, competency-based education or through a contractual relationship, are not automatically included in the institution's accreditation. In addition, most institutions will be asked to further engage with the Commission through progress reports or focused evaluations.

Accreditation is viewed by the New England Commission of Higher Education as a continuing status that, once confirmed, is withdrawn only for cause. The nature and timing of evaluative reviews vary in accordance with the circumstances at a given institution and with the Commission's judgment as to how it can best serve the institution's needs while simultaneously fulfilling its responsibility to the public. In any case, at intervals not to exceed ten years, with a required interim report typically at the fifth year of a ten-year evaluation cycle, member institutions are evaluated comprehensively against the standards through on-site visits. In addition, at more frequent intervals an institution may, at the Commission's discretion, undergo reviews which are less than comprehensive. All evaluations review not only the degree to which an institution fulfills the Commission's standards, but also its progress in self-improvement through an ongoing process of planning and self-evaluation.



## Chapter III

### Steps in the Evaluation Process

#### *Overview*

*Institutional evaluations most commonly take one of three forms: **comprehensive**, in which the institution is reviewed for the degree of its fulfillment of all the standards of the Commission; **focused**, in which, at the special request of the Commission, fulfillment of certain designated standards is examined; or **substantive change**, in which the implementation of a substantive change is evaluated. Other more specific types of visits are the biennial visit for candidate institutions and the visit accompanying the interim report when requested by the Commission. Although the variations in scope and purpose lead to some differences based on the type of visit, the procedures are essentially the same.*

*The focus of this Manual is on comprehensive and focused evaluation visits. Procedures for substantive change evaluation visits are found in appendix iii and also on the Commission's website.*

#### Types of Evaluation Reviews

In preparation for a **comprehensive evaluation**, which institutions accredited by the New England Commission of Higher Education must undergo at least once every ten years (or five years for newly accredited institutions), an institution prepares a self-study report in which the standards serve as a basis for self-analysis. (An institution applying for initial accreditation or candidacy also undergoes a comprehensive evaluation.) In addition to providing a foundation for the Commission's evaluation of an institution against its *Standards for Accreditation*, the process of self-study encourages institutional self-improvement. That is, a member institution accepts the obligation of a periodic self-study designed to clarify its specific objectives, to assess realistically its success in attaining them, and to develop means of enhancing its institutional effectiveness. The Commission's *Self-Study Guide* contains detailed information about this process, including the format in which the report is to be presented and the required Data First and E-series (Making Assessment More Explicit) forms intended to foster a data driven approach.

A **focused evaluation**, as its name indicates, focuses on a particular area or areas. It is undertaken at the request of the Commission and provides a means of monitoring specific developments or concerns within an institution between comprehensive evaluations. One type of focused evaluation is a visit accompanying the interim report to validate its contents. Consequently, the report for a focused evaluation is more limited in scope than the self-study prepared for a comprehensive evaluation. Similarly, the visiting team is smaller, comprising only those needed to review and assess the institution's fulfillment of the standards and policies upon which the visit is focused. The team report prepared provides a summary of the team's findings related to the areas designated for review by the Commission.

#### Summary of the Accreditation Process

This *Manual* provides detailed information about the accreditation process. The steps for comprehensive and focused evaluations are summarized as follows:

**Approximately two years:** Before a scheduled comprehensive site visit (or eighteen months before a focused visit), Commission staff remind the institution of the evaluation and request input regarding preferred dates for the team visit. For comprehensive evaluations and certain focused reviews, a member of the Commission staff visits the institution to assist in its

preparation for the evaluation by endeavoring to assure that Commission policies and procedures are understood and to otherwise provide help and direction to the institution.

**Approximately one year in advance of the site visit:** Commission staff propose to the institution an individual who will chair the evaluation team asking the institution to identify any potential conflict of interest it may have with the candidate. Before accepting the invitation to chair a visit, the nominated individual is also instructed to decline if there is a conflict of interest unidentified by the institution. During the semester before the site visit, the chair arranges a preliminary visit to the institution in order to become familiar with it, to review the logistics related to the evaluation, and to take preliminary steps to arrange the schedule for the team's visit to campus.

**During the semester preceding the evaluation:** Commission staff select, propose, and invite prospective team members, confirming each candidate has no conflict of interest with the institution or its faculty/staff, making replacements, as necessary. When the team is complete, a final team list is sent to the institution's president and to all team members. At that time, Commission staff also mail materials related to the visit to the team members.

**Six weeks prior to the visit:** The institution mails a copy of its self-study and related materials to each team member and sends four paper copies and an electronic copy (single, searchable pdf format) to the Commission office. Following receipt of the self-study, the team chair corresponds with team members about such things as the schedule and individual areas of responsibility during the visit. (*Note:* In the case of a focused evaluation, the report is mailed approximately one month in advance of the visit.)

**On the scheduled visit dates:** The team visits the campus; it conducts its evaluation, develops a rough draft of a report that includes a list of the institution's significant strengths and concerns based on the degree to which the institution fulfills Commission standards; and prepares a confidential recommendation to the Commission. Before leaving campus, the chair gives an exit report, i.e., an oral summary of the team's evaluation.

**Following the visit:** By the fourth week after the visit, the chair sends a first draft of the report to team members and Commission staff who suggest necessary changes and corrections; at the same time, team members submit their confidential evaluation of the visit and of the chair to the Commission office.

By the sixth week after the visit, the chair sends a draft of the report to the institution's chief executive officer for review of *factual* accuracy.

By the seventh week after the visit, the chair receives the president's comments.

By the ninth week after the visit, the chair sends an electronic pdf copy of the final report to the institution for duplication; in addition, the chair sends to the Commission office (1) the team's confidential recommendation (on letterhead with the chair's signature), and (2) the confidential evaluation of team members.

By the tenth week after the visit, the institution sends one copy of the report to each member of the evaluation team and four copies of the report (double-sided) with an electronic copy (single, searchable pdf file) to the Commission office.

Commission staff seek the institution's official written response to the report; when received, the institution's response is provided to the chair as well as to the Commission.

**The semester following the visit:** The chair and president meet with the Commission at one of its meetings; following the meeting, the Commission notifies both the institution and the team of the action taken on the institution's accreditation status.

## Chapter IV

### Assessing Learning Outcomes and Measuring Student Success

#### Overview

*The Commission's Standards for Accreditation, most directly Educational Effectiveness (Standard 8), speak to the importance of an institution having a comprehensive approach for assessing student learning outcomes and using assessment results and other measures of student success to improve its academic program and services for students. The standards also address the institution's obligation to measure the achievement of its students and to make the results known. An institution is expected to:*

*... demonstrate its effectiveness by ensuring satisfactory levels of student achievement on mission-appropriate student outcomes. Based on verifiable information, the institution understands what its students have gained as a result of their education and has useful evidence about the success of its recent graduates. This information is used for planning and improvement, resource allocation, and to inform the public about the institution. Student achievement is at a level appropriate for the degree awarded. (Educational Effectiveness, Statement of the Standard)*

*To provide a framework for institutions preparing self-studies, and useful information for visiting teams and the Commission, and to fulfill its responsibilities to be recognized by the federal government as a reliable authority on the quality of education, the Commission uses two sets of data forms: the E-series (Making Assessment More Explicit) and the Data First for Educational Effectiveness (Standard 8).*

#### **E-series Forms (Making Assessment More Explicit) and Data First Forms for Educational Effectiveness (Standard 8)**

To assist institutions in collecting, presenting, and analyzing data related to student success, the Commission has developed the E-series forms (Making Assessment More Explicit) and the Data First forms for *Educational Effectiveness* (Standard 8). These forms are included with comprehensive self-studies, interim reports, and in focused visit reports when specified by the Commission.

In the E-series forms (Making Assessment More Explicit), the institution selects a basic approach to report on its assessment of student learning outcomes and to summarize improvements made based on its findings. Reporting includes the assessment of what and how students are learning at the institutional, general education (for undergraduate institutions), and program levels.

In the Data First Forms for *Educational Effectiveness* (Standard 8), the institution reports data on progression, retention and graduation rates, licensure passage and job placement rates, and other measures of student success important to the institution. As appropriate, information for each of the institution's student bodies - undergraduate, graduate, distance education, and/or off-campus - is reported.

Institutions are encouraged to complete the data forms early in the self-study process (Data First!) and then to use the report to discuss their capacity to collect, analyze and use the data on student achievement and success, and to state commitments for improvements in these areas. Importantly, any findings and trends observed are to be addressed in the self-study narrative, reflecting on how the data are being used to understand student success and to improve the institution's academic programs and student services.



## Addressing Assessment and Student Achievement During the Site Visit and in the Team Report

The Commission expects each institution undergoing a comprehensive evaluation to explicitly address its assessment of student learning outcomes and criteria for student achievement, most comprehensively in Standard 8, *Educational Effectiveness*, and also as appropriate in other sections of the self-study report; visiting teams are expected to validate the institution's progress and success in these areas. All of the institution's student bodies – as identified by degree level, location, modality, or other categories – are to be included. To this end, evaluators should seek evidence that the institution demonstrates its practices to assess, verify, and enhance its effectiveness in measuring and reporting student achievement and relate the findings in the team report. The team is also charged with determining whether "... student achievement is at a level appropriate for the degree awarded" (*Educational Effectiveness*, statement of the standard).

Taking, as an example, the assessment of what and how students are learning, the evaluator responsible for the standard on *Educational Effectiveness* validates that the institution has assessment mechanisms in place to provide useful data and that it can demonstrate the results have been used to improve the institution's academic programs and student services. The evaluator looks for evidence that these mechanisms are systematically applied and that the outcomes are analyzed across all programs, instructional locations, and delivery formats. In addition, this section of the visiting team's report includes an analysis of the institution's overall performance with respect to student achievement, i.e., retention and graduation, licensure passage and job placement, and other mission-appropriate measures of student success.

As part of its review of the institution's assessment of student learning outcomes and its analysis and use of student achievement data, teams will want to evaluate the extent to which the institution's E-series Forms and the Data First forms for *Educational Effectiveness* (Standard 8):

- were complete,
- were reviewed by faculty and appropriate administrators as part of the self-study and otherwise as useful in the institution's processes,
- were discussed in the self-study, and
- provided evidence the data reported was used for improvement.

In determining how well an institution is addressing the standard on *Educational Effectiveness*, evaluators should keep in mind that the Commission is concerned with how the institution has progressed in its assessment activities since the time of its last review. Although institutions will be at varying stages of development with respect to the assessment of student learning outcomes, the Commission expects that all institutions will have made discernable progress in the articulation of learning outcomes for students, the collection of data regarding student achievement of those outcomes, and the use of those data for institutional and program improvement.

## Chapter V

### Before the Visit

#### *Overview*

*Because effective preparation contributes to the success of an evaluation visit, the New England Commission of Higher Education has established processes meant to enhance the accomplishment of activities before the team visits campus. These processes involve the institution, the team chair, and the team members. Both the chair and team members are responsible for knowing and understanding the Commission's standards and policies in order to assess the institution's fulfillment of them. They also need to study and understand the institutional materials sent to them. Other responsibilities reflect the chair's role in providing leadership of the evaluation.*

#### **Establishing the Dates for the Evaluation Visit**

A list of dates during which institutional visits may be scheduled, that precludes evaluations during holidays and either too early or late in the academic term, is prepared by Commission staff two years in advance. Institutions are asked to provide input regarding their preferred dates for the team visit from the list. Except on very rare occasions, visits must take place while the institution is in regular session. Once established, only Commission staff can authorize changes in the duration or dates of the visit. Comprehensive evaluation visits and those validating interim reports generally begin on a Sunday afternoon and end on Wednesday at noon; other focused visits are typically one day shorter, concluding on Tuesday at noon. Team members are expected to participate throughout the period of the visit.

#### **Principles of Team Composition**

The Commission staff is responsible for assigning the chairperson and composing the evaluation team, always in the light of each institution's mission, specific situation and needs, and the Commission's requirement that all standards receive appropriate coverage. Early in the process, general requirements for the team are discussed by members of the Commission staff with the institution. In addition to the qualities sought in individual members, the team as a whole is chosen to provide representation of such groups as faculty and administrators, as well as a mix of both experienced and new evaluators.

The Commission must balance two important priorities: identifying potential evaluators from peer institutions (including, sometimes, competitors), and avoiding evaluators who have, or appear to have, a conflict of interest in participating in a specific institutional review. This balance is sought through consultation with the individuals and the institutions involved. The Commission recognizes that it is not possible to be aware of all circumstances where a conflict, or the appearance of a conflict, may exist. Therefore, institutions are asked to review proposed evaluation teams and bring to the attention of the Commission any conflicts of interest or the appearance of such. Individuals invited to participate in the evaluative process are asked to decline serving in the review of an institution when they have, or when it might reasonably appear that they have, a conflict of interest. (See the Commission's *Policy Statement on Conflict of Interest*, appendix i.)

The Commission selects the visiting team from its pool of evaluators, which is composed of faculty members and administrators at accredited institutions who are qualified by their credentials and experience to apply Commission standards. From time to time, the Commission also includes trustees as team members. Most team members will be affiliated with institutions

accredited by NECHE, although some may come from other regions; some will be serving as evaluators for the first time.

Collectively, the team is expected to make sound professional judgments which will enable the Commission to realize its goals of assessing and enhancing the quality of higher education among its member institutions. As representatives of the Commission, team members are expected to be open minded, to be thoroughly familiar with the standards, policies, and procedures of the Commission, and to carry out their responsibilities with the highest level of integrity and professionalism. (See the Commission's *Expectations of Peer Evaluators*, appendix ii.)

### **Selection of the Team Chair**

As indicated in Chapter III, approximately one year before the visit Commission staff propose to the institution's president a team chair whose experience and ability are believed to be appropriate for the review. While the Commission reserves the right to select the chair as well as members of the visiting team, in those instances when the institution's observations and comments raise concerns about a potential conflict of interest or other legitimate issue as to the effectiveness and objectivity of the individual proposed, Commission staff will endeavor to propose an alternate whose participation in the evaluation will ensure the confidence of both the institution and the Commission. The institution is asked not to contact the person proposed until the candidate's agreement to participate has been confirmed by Commission staff. Should the proposed chair be unable to serve, the process is repeated.

Upon the chair's acceptance of the assignment, the institution is informed. The chair receives a copy of documents describing Commission policies and procedures along with the following materials related to the visit: a summary of the institution's history with the Commission; copies of the notification letters sent to the institution since the last comprehensive visit, the previous visiting team report with its list of strengths and concerns, and the institution's response to that report.

The *Chairs' Checklist*, included as appendix iv, provides assistance throughout the evaluation process.

### **Selection of Team Members**

During the semester preceding the visit, Commission staff propose the remaining members of the team to the institution, indicating those standards which their experience qualifies them to review in the evaluation process. If an institution has identified one or more areas of emphasis for its self-study, Commission staff will pay particular attention to ensuring the team includes strength in the area(s). The role of the institution is primarily to comment upon areas covered and institutional fit rather than to approve or veto specific individuals. As noted above, an institution is expected to alert Commission staff to any potential conflict of interest that might be raised by the participation of a particular evaluator. In those instances where the institution's observations and comments raise legitimate issues as to the effectiveness and objectivity of an individual proposed, the staff will endeavor to propose an alternate whose participation in the evaluation will ensure the confidence of both the institution and the Commission. The institution is asked not to contact the evaluators proposed until their agreement to participate has been confirmed by Commission staff. All invited individuals are responsible for recusing themselves from participating in any review that might raise issues related to a real or perceived conflict of interest. If an invited individual declines to participate, Commission staff do not propose a substitute to the institution but directly invite a replacement with similar qualifications.

Several weeks before the visit, when the visiting team has been confirmed, a final list including contact information will be sent to the institution and to all team members. As an aid in organizing the visit, Commission staff provide suggestions for the team chair to consider regarding assignment of the standards and other areas relevant to the institution's review, e.g., areas of emphasis identified by the Commission, review of compliance with federal regulations, and/or off-campus or distance education programming. Typically, each team member has primary responsibility for one or two standards, and may have secondary responsibility for one or two others. Before the conclusion of the visit, evaluators are expected to draft the chapter(s) of the team report for the standard(s) for which they have primary responsibility. In addition to their other responsibilities, all team members have secondary responsibility for the standards on *Mission and Purposes* and *Integrity, Transparency, and Public Disclosure*.

When the final list of team members is sent, evaluators also receive a copy of the Commission's *Standards for Accreditation; Evaluation Manual; Policy on the Periodic Review of Member Institutions* and other relevant policies; a summary of the institution's history with the Commission and notification letters since the last comprehensive visit; and confidential team member's evaluation form. All these documents, which provide the context for the evaluation, require thoughtful study. If evaluators have any questions or anything appears to be missing, the Commission office should be contacted.

## **Training for Chairs and Team Members**

As representatives of the Commission, all evaluators – chairs and team members – are provided with comprehensive training prior to the evaluation visit as preparation for their respective roles in the accreditation process. The emphasis of the training provided by Commission staff is on making sound professional team judgments based on the *Standards for Accreditation*.

During the semester before the scheduled evaluation, a one-day workshop is conducted for team chairs. Both new and experienced team chairs are invited to foster an exchange of questions and advice about the role of the team chair before, during and after the campus visit. Topics covered include understanding and applying the *Standards for Accreditation*, and making good use of the Commission's E-series (Making Assessment More Explicit) and Data First forms for *Educational Effectiveness* (Standard 8) while on campus and in the team report, as well as offering practical advice for deploying the team, writing the report, and preparing the confidential recommendation. In addition, an update on federal regulations and the team's role in reviewing institutional responsibilities under Title IV of the Higher Education Act is provided. Should a team chair be unable to participate in the workshop, Commission staff arrange an individual meeting to ensure that all team chairs are well prepared for their leadership roles.

Visiting team members are provided a similar orientation at the beginning of the semester in which the visit is scheduled to take place (typically mid-September and mid-February). This one-day workshop is designed to provide (1) an overview of accreditation and the visit process; (2) an understanding of the Commission's *Standards* and the emphasis on assessing learning outcomes and student success; (3) a review of the team's responsibilities related to federal regulations; and (4) advice on reading the self-study, preparing for the visit, using the time on campus productively, and writing the team report. All team members are required to attend a workshop prior to their first team visit, and, at a minimum, again when significant changes take place (e.g., revisions to the standards or new federal requirements). In addition to the one-day workshops, conference call orientation sessions are conducted for evaluators coming from outside New England, and group and individual make-up sessions are arranged so that all evaluators have an opportunity to participate.

## Chair's Preliminary Visit

Prior to all comprehensive evaluation visits, and for more complex focused visits such as those that take place at the time of an interim report, the chair is expected to contact the institution to arrange a preliminary visit, typically one day in length. The importance of the preliminary visit in setting the stage for a successful team evaluation cannot be overemphasized. The chair's preliminary visit is designed to establish a mutual understanding about the nature of the evaluation, and to familiarize the chair with the institution and its personnel thereby helping to plan how best to deploy the team. It is also to assist the institution in making the necessary preparations for the visit by helping it understand the team's needs and how best to address them, to let it know what will happen thereby reducing surprises, and, in short, to plan for the visit. In addition to initial development of the team's schedule while on campus, the logistics of the visit, to include arranging visits to off-campus locations and/or meetings with distance education students should be given attention.

**Timing of the Preliminary Visit.** Typically, the preliminary visit occurs three to six months before, but in any case no later than six weeks prior to the team visit. The actual timing of the preliminary visit will depend upon the nature of the evaluation, the chair's schedule, the state of progress of the institution's self-study or focused report, and institutional schedules. As soon as the date is agreed upon, the Commission office should be notified. In addition, the chair should send a copy of any correspondence to the institution or team members to the Commission office.

**Agenda for the Preliminary Visit.** In order to make optimum use of the preliminary visit, the chair should expect to receive in advance appropriate materials from the institution such as relevant publications/documents to give a sense of the institution's organization, and a current draft of the self-study or focused report.

At the beginning of the preliminary visit, the chair meets with the president to discuss the status of the institution's self-study report, including progress made on any designated areas of emphasis, and to review the steps ahead before, during and after the team's campus visit. At the meeting with the president, as well as at meetings with other members of the campus community, the chair should endeavor to develop a clear impression of the institution, i.e., how it is organized and its character and style, so that the team will be able to approach the evaluation visit with a minimum of lost time. As one of the purposes of the preliminary visit is for the chair to come to an understanding of the institution's goals for the evaluation, the chair should meet with those who can provide relevant information.

In addition to meeting with the president and the self-study steering committee, the team chair should also talk with those, if different, who are responsible for the assessment of student achievement as articulated in the Commission's standard on *Educational Effectiveness*. As noted in Chapter IV, the institution should be able to demonstrate that it uses assessment results to enhance the quality of its academic programs and the delivery of its services. Although Commission policy mandates no specific means of assessment, it does note that successful efforts will be both quantitative and qualitative in nature and will include both direct and indirect measures of student success.

**Logistical Arrangements for the Team Visit.** In addition to considering these substantive issues and other any areas of emphasis identified by the Commission during the preliminary visit, the chair should clarify logistical arrangements related to the site visit and identify a contact person for subsequent communication, typically someone in the president's office. The chair should also visit the proposed workroom for the team on campus where materials relevant to and supportive of the self-study will be made available, and discuss how the team will be able to electronically access the resources both before and during the site visit.

To facilitate the work of the team, a hotel should be chosen that serves breakfast and that has adequate space in each of the team member's individual rooms. Experience has shown that it is preferable to have a meeting room in the same place where the team is housed (perhaps combined with or adjacent to the chair's accommodations). The chair should ensure that this meeting room allows for adequate privacy and security. The institution is expected to stock the team's workroom with a supply of writing materials and other items as specified by the chair. In addition, the team will need access to computers, a printer, and 24-hour technology support. The institution may also wish to make available such items as copies of current class schedules, staff directories, campus maps, bulletins and other institutional publications to facilitate the work of the team.

If required, arrangements for the transportation of team members from the airport to the hotel and/or campus should be discussed at the time of the preliminary visit.

**Planning the Team's Schedule.** During the preliminary visit, the chair should also begin to plan with the president for a number of mandatory meetings to be held during the site visit. One such meeting required as a part of all comprehensives (and focused visits when governance is an area of emphasis) is a session with members of the board of trustees, typically including the chair, vice chair, and the chairs of board committees, without the president in attendance. This meeting should be arranged at a convenient location and held as early in the visit as possible, preferably the morning of the first day of the visit if trustee schedules permit.

The preliminary visit is also an opportunity to discuss the arrangements for the first evening of the team visit. It is customary for the first interaction between the team and the host institution to be a "working" dinner or reception for the team and a selected number of individuals from the host institution to get acquainted and to establish the tone of the visit. The chair should be sure that the president understands that this gathering need not be elaborate and that the visit is not a social occasion.

The institution will also need to make plans to organize open meetings for members of the college community - one for faculty, one for students, and, in most cases, one for staff. So that each of these constituencies has an opportunity to talk directly and freely with the team about their respective roles in the institution, the expectation is that the president, deans, chairs, and other senior administrators will not attend. These events should be widely publicized on campus in the weeks before the team visit.

Finally, the format of the exit report (described later in Chapter VI) conducted on the final day of the visit should be discussed with the president. Of specific concern is who the president intends to invite to ensure the room selected is large enough to accommodate the members of the team and others in attendance.

In developing the schedule for the campus visit, it is important, too, to build in sufficient time for team conferences throughout the visit, as well as time in the workroom for the team to review the supporting materials made available by the institution.

**Considerations for Institutions with Off-campus Sites and/or Distance Education.** A chair who is reviewing an institution with off-campus sites at which students can take 50% or more of an academic program or where a degree-completion program is offered should consult with Commission staff who will, in consultation with the institution and the team chair, review the number, enrollments, and geographic distribution of the institution's off-campus locations to determine an appropriate representative sample. If an institution has two or more off-campus locations, no fewer than two sites will be visited. If an institution has off-campus locations in states other than that of the main campus, at least one out-of-state campus will be visited. If the institution has off-campus locations outside the United States, at least one overseas campus will

be visited. (See the Commission's *Guidelines for the Review of Off-Campus and Distance Education Programming during a Comprehensive Evaluation*, appendix v.)

If an institution has off-campus sites which are to be visited, arrangements for the visits should be made during the preliminary visit. It is sometimes more convenient that the evaluation of off-campus locations be conducted prior to the visit to the main campus. In such instances, finalization of these arrangements may not be possible until the chair has ensured that the arrangements are satisfactory to the other team member(s) asked to assist with the evaluation of the institution's off-campus sites.

A chair who is visiting an institution that offers instruction via distance education or correspondence education should, during the preliminary visit, discuss the means through which team members will be able to evaluate these delivery formats including meeting – in person or online – with the students and faculty involved. (See the Commission's *Guidelines for the Review of Off-Campus and Distance Education Programming during a Comprehensive Evaluation*, appendix v.)

**Summary.** In short, the chair should work with the president to plan carefully, while keeping things simple. The chair shares a joint responsibility with the president to guard the institution's time and resources and to make no elaborate or expensive arrangements. The chair should be sure that the president understands (and, later, that it is clear to the team) that team members will be wholly responsible for bar bills and other personal expenses. The president should understand the legitimate travel expenses that will be billed to the institution so that they can be budgeted for and paid promptly.

## **Following Up the Preliminary Visit**

As soon after the visit as possible, the chair should write to the institution to confirm the arrangements made during the preliminary visit. At the same time, the chair may wish to contact Commission staff regarding the composition of the evaluation team or other aspects of the evaluation. If, in light of the preliminary visit, it appears that preparations for the evaluation appear to be at variance with the information provided by Commission staff, the staff will communicate with the institution to make appropriate adjustments. Also, at this time, the chair's expense voucher for the preliminary visit should be mailed to the Commission office so that Commission staff can forward it to the institution for reimbursement.

## **Special Situations**

- **Public Institutions That Are Part of Centrally Administered Systems**

In addition to seeing the president of a public institution, the chair of the evaluation team typically meets with the head of the system (when one exists) either before or during the accreditation visit. The team chair, prior to the team visit, should be in touch with the central office to discuss system operations and issues. Such contact enhances the chair's ability to interpret system operations and procedures for other team members and to include in the final report narrative an analysis of any issues related to the system that impact the institution.

- **Institutions That Are Part of a For-Profit Corporation**

Team chairs who visit institutions that are part of a for-profit corporation will want to talk with representatives of the corporation responsible for the academic and administrative oversight of the institution. It may be useful in such circumstances for the team chair and the team member responsible for the standards on *Organization and Governance* and/or

*Institutional Resources* to visit the corporate headquarters. It will also be important for the team to meet separately with the public members on the institution's governing board (those not affiliated with the corporation) and to have the opportunity to meet with institutional staff and faculty when corporate representatives or investors are not present.

- **Institutions with Other Sponsoring Entities**

In addition to institutions that are part of a centrally administered system or for-profit corporation, the Commission accredits other institutions with "sponsoring" entities (e.g., a religious order or hospital). These relationships may involve arrangements for shared services such as information systems and/or payroll processing, or have other governing board structures (e.g., a "corporation" comprising members of the sponsoring religious order). While such relationships do not typically require a similar level of review as described above, the team chair will want to ensure that appropriate information and documentation is available to the team to provide assurance that the institution being reviewed has sufficient independence to be held accountable for meeting the Commission's standards and policies.

- **Visiting Institutions Abroad or Overseas Instructional Locations**

For visits to an institution or instructional location outside of the U.S., team members have the option of making their own travel arrangements and then requesting reimbursement after the visit has been conducted. Such arrangements should be made far enough in advance to take advantage of more reasonably priced fares. Alternatively, it is possible for team members to work through the host institution to arrange travel and ticket purchase. Team members are expected to travel at coach rate fares, except as provided below.

It is recommended that team members on international visits arrive the day prior to the visit to have some time to adjust to the time difference and, because of flight schedules, to depart the day following the visit. Lodging is covered by the host institution for this entire period (e.g., from Saturday night through Wednesday night for comprehensive evaluations scheduled for Sunday afternoon through Wednesday noon).

Team members may choose to extend the trip on either end at their own expense. While a family member or friend may join the team member before or after the site visit, they should not be present during the days when the review is scheduled.

Team members may be authorized business class travel should the total travel time in each direction exceed 14 hours (in line with federal government travel regulations), assuming the most efficient travel schedule and transfer time between connecting flights. Should business class be authorized, team members will be informed in advance of making travel arrangements. (See *Guidelines for Visiting Institutions Abroad and Overseas Instructional Locations*, appendix vi.)

## **Materials from the Institution**

Six weeks prior to the campus visit (or four weeks for a focused evaluation), institutions are requested to forward to each team member a copy of the completed self-study or focused report. Included with all self-studies are the E-series and Data First forms, as well as the institution's most recent financial statements and management letter. Team members also receive a list of supporting documents with information about how to access the documents electronically (e.g., on a flash drive and/or via a secure website). These documents, which comprise the basis of an



evaluator's initial understanding of the institution as a whole, should be thoroughly and thoughtfully studied before the visit.

The chair, who bears responsibility for the overall evaluation, should call the Commission office in those rare instances when the materials provided by the institution are incomplete, or if the self-study appears to be seriously weak or inadequate. There is no point in making the evaluation visit if the institution is not thoroughly prepared. The Commission relies on the chair's judgment here, but the staff accept the responsibility for the final decision as to whether to proceed with the evaluation.

## **Communicating with the Team Members**

Typically, about six weeks prior to the campus visit, after receiving the institution's self-study or focused report, the chair contacts the team members to confirm the standards/areas of focus for which they will have primary and secondary responsibility, as well as any additional assignments.

Chairs are strongly encouraged to schedule a conference call with the team and, if helpful, a member of the Commission staff can join all or a portion of the call. In addition to a self-introduction, the chair should provide the following:

- list of team members' areas of responsibilities and other assignments, with specific reference to the Commission's standards;
- arrangements for the review of distance education and/or correspondence education programs, when appropriate;
- plans for visits to branch campuses or instructional locations, when appropriate;
- chair's expectations as to when report chapters will be due before the end of the visit;
- tentative schedule for the evaluation visit;
- indication of those on campus with whom appointments have been arranged and a request that team members consider appropriate additions to the list;
- team members' need for technology during the visit;
- discussion of the role of a state observer,\* if one is accompanying the team; and
- request for information about any special accommodations that need to be communicated to the host institution.

*\*Note:* Observers accompanying the team receive a copy of the schedule and other correspondence sent to team members. (See Chapter VI for a discussion of State and other observers that may accompany a visiting team.)

The chair should also ensure team members receive advance information about the logistical arrangements being made for the site visit. For example, they will need to know where the team will be housed, directions to the hotel and to the institution, the time and place of their first meeting, when they can expect to finish their work, and whatever practical advice the chair thinks will help team members prepare for the on-site visit.

## **Reviewing Institutional Materials**

Working with Commission staff, an institution develops its 100-page self-study that addresses the nine standards as a basis for self-analysis; it defines the context in which it will be evaluated by the visiting team. The self-study (or focused visit report) is thus the primary source document

team members validate during the evaluation visit. In reading the institution's report, team members should therefore be aware of the importance of reading carefully not only the chapters and standards specifically assigned, but also the entire self-study and accompanying materials.

Upon receipt, the evaluator should peruse the institutional materials accompanying the report in order to get a clear idea of such matters as the nature of the institution, the structure of its governance, the style of student life, the scope of its programs, and so forth. Team members should also begin to plan for their time on campus, i.e., whom they would like to interview and what questions they need to ask, as well as a list of the strengths and concerns for their assigned standards/areas. Any request for appointments and/or additional information from the institution should be made through the chair.

After reading the whole self-study or focused report, evaluators should examine those chapters devoted to the standards/areas for which they have primary or secondary responsibility, formulating questions that will guide their on-campus activities. As evaluators read, analyze, and think about the self-study, they should consider the following:

- Whom and what should I see to validate the written information supplied? Does the self-study/report document need amplification or interpretation?
- What seem to be institutional strengths and concerns in regard to each of the standards or areas of focus? What are the institution's general strengths and concerns?
- Who else on the team will have to be consulted in order to get a full picture of the institution's performance in these areas?
- How does the institution's performance in these areas fit into the whole picture and effect the fulfillment of the institution's stated purposes?
- What else do I need to know about the institution? How do the parts of the self-study fit together?
- Were all of the institution's student bodies, including those at off-campus locations and in distance education programs, covered in the self-study?
- Did the institution refer to and use the data from the Data First forms in its report? Did the institution reflect on any findings/trends presented by the data?
- Did the E-series (Making Assessment More Explicit) forms provide evidence that the institution approaches assessment on the course, program, and institutional levels and that it uses the results to improve learning opportunities for students?
- Did the *Educational Effectiveness* (Standard 8), Data First forms provide institutional data on retention and graduation that reflect the institution's mission, levels of degree, and student body (or student bodies)? What other outcomes measures have been developed to provide evidence of student achievement?
- Did the institution demonstrate that "... student achievement is at a level appropriate for the degree awarded?"
- Did the institution adequately attend to any areas specified for emphasis by the Commission in its notification letter(s)?
- Was the institution's credit hour policy discussed? What evidence will need to be reviewed to determine (1) whether it is consistent with the Commission's *Policy on Credits and Degrees*, and (2) how it is being applied in practice?

Evaluators are reminded that their objective is to formulate working hypotheses, not to come to *a priori* conclusions. If an evaluator's review and study of the self-study or focused report suggest the need for additional or clarifying information, this should be communicated to the chair. (For example, the team member primarily responsible for the standard on *Planning and Evaluation*

might wish to review the institution's current planning documents prior to arriving on campus.) It is the chair's responsibility to convey all such requests to the institution so that the material can be made available to the visiting team no later than the time of its initial meeting on the campus. To avoid duplication of requests, only the chair should contact the institution.

Particularly at the time of a comprehensive review, evaluators are reminded of the Commission's emphases on assessment of student learning and measurement of student success. Evaluators should examine both the extent to which the institution has developed a comprehensive process of assessment that leads to improvements in curriculum, instruction, and services for students, and also what metrics the institution uses to provide evidence of student success (e.g., retention rates, graduation rates, and other measures of achievement appropriate to the institution's mission.)

Evaluators are encouraged to begin a draft of their section(s) of the team report before arriving on campus, knowing there will be major revisions. This early draft can be a way of figuring out what additional information is needed and who to meet with while on campus.

## CHAPTER VI

### During the Visit

#### *Overview*

*Preparation before the visit involves each team member working individually to have a clear and thorough understanding of the self-study and the data forms. However, from the time they convene on campus, often meeting one another for the first time, team members work as a group. By consulting written materials from the institution, interviewing institutional representatives, and conferencing with each other, the members of the evaluation team validate the self-study or focused visit report and prepare draft reports on each of the standards or areas of emphasis assigned. They are expected to support each other's efforts, going beyond written documents to assess the institution's fulfillment of the Commission's Standards for Accreditation, and otherwise cooperate with the chair to contribute to a report that will assist the Commission in coming to its decision regarding the institution's accreditation status.*

#### **Duration of the Visit**

Comprehensive evaluation visits, as well as visits accompanying the interim report, usually extend from Sunday afternoon until midday Wednesday; focused visits typically are one day shorter, Sunday afternoon until midday Tuesday. In agreeing to serve as a member of an evaluation team, evaluators accept the responsibility to be present during that full period, through the exit report. A team member must be prepared to work steadily and to intensively focus on the task at hand during an evaluation visit. At the same time, the interaction with host campus students, faculty and staff, as well as with fellow team members, provides participants an opportunity to gain a thorough knowledge of an institution other than their own, as well as involvement in an important effort to improve higher education. A team visit is helpful to the host institution; it is also a valuable professional experience for the site visitors.

#### **Role of the Chair During the Visit**

The chair's primary responsibility to the Commission is to ensure that the institution is evaluated against all of the standards. To this end, the chair is chiefly concerned during the visit with the team's understanding of its task, its concentration on matters of concern, its approach, and its ability to work together. Team member relationships – with each other and with the institution – should be kept purposeful while informal and relaxed. While the chair generally assumes responsibility for a particular standard (e.g., *Mission and Purposes*) or area of emphasis, the chair may at times also have to take over a particular area or supplement the work of a team member who requires assistance. Nevertheless, it is important that the chair remain free to carry out the main function of facilitating the group's performance. Finally, while it is important to build consensus on the institution's strengths and concerns, the content of the final exit summary and written report is ultimately the chair's responsibility.

The chair should be sure that the team is properly oriented and that all members approach their work not as "inspectors," but as colleagues and objective observers. As a fair evaluation notes both strengths and concerns, the team's job is not just to find faults and weaknesses. The chair must keep team discussions focused on the primary task: looking for solid evidence of the degree to which the institution is in fulfillment of the Commission's *Standards for Accreditation*. If evidence is not apparent, the chair should work with the team to determine whether the absence of evidence results from an institution's lack of accomplishment or from its inability to demonstrate its accomplishment. At times, too, the team chair will be called upon to help the team address sensitive issues and unforeseen situations. It should be kept in mind that the team's

responsibility is to evaluate the institution against the Commission's *Standards for Accreditation* so that the final team report will enable the Commission to reach the appropriate decision regarding the institution's accreditation status.

### **Observer from a State Department of Higher Education**

The Commission has over the years maintained a good working relationship with the higher education departments in the states that comprise the New England region. It wishes to continue these relations without compromising its independence as a non-governmental agency. State approval of institutions in some New England states is contemporaneous with and/or dependent upon Commission accreditation.

Each year after the schedule of comprehensive evaluation visits is prepared, Commission staff notify the departments of higher education in each New England state. In turn, they sometimes identify a staff member to accompany the evaluation team. The observer from the state department of education, while not part of the Commission's accreditation team, does receive all materials sent to the team. The observer can be of considerable value to the team as a source of information about the state's system of higher education, its resources, constraints, and plans.

Observers may participate in team discussions, but are not present for the team's deliberations regarding its recommendations nor do they receive a copy of the team report. They can observe group interviews and meetings with trustees. However, should it be determined that the observer's presence could hamper the success of a particular interview (e.g., when the issue at hand deals with the relationship between the institution and the state), at the chair's sole discretion, the observer should be excused. The team chair is encouraged to discuss such situations in advance with the observer. If any questions arise with respect to an observer from a state department of higher education, the chair should not hesitate to contact the Commission office. (See *State Department of Higher Education Observers of Evaluation Teams*, appendix vii.)

### **International and Other Observers**

Occasionally the Commission is asked by accreditation authorities of other countries or other agencies to permit an observer to accompany an evaluation team. Such arrangements are made only with the concurrence of the institution and team chair. Like observers from the state, these observers are provided with the self-study and other materials. They, too, are permitted to observe team discussions and interviews, but not to participate in the team's decision-making regarding its recommendations with respect to accreditation nor in the preparation of the team report.

### **First Team Meeting**

Upon arriving at the hotel, the team first meets as a group to get to know one another, share initial impressions of the institution, discuss issues raised by the self-study or focused report (including any gleaned during visits to off-campus locations, if applicable), clarify plans for activities on campus (including the review of distance and correspondence education, if applicable), and cover necessary housekeeping tasks.

During the initial team meeting, the chair should also:

- discuss impressions of the institution *in relation to the standards*, based on preliminary meetings with key personnel and the material received from the institution;

- draw team members out, seeing what they think, discovering their blind spots and/or perhaps their biases;
- guard against *a priori* conclusions, instead establishing working hypotheses as a way to approach the upcoming meetings with students, faculty, and staff; and
- have team members begin working towards a summary list of the institution's strengths and concerns based upon their initial impressions.

To facilitate the visit, the chair should:

- establish a timetable for each day;
- indicate where and when team members should submit their rough drafts (e.g., by 11 p.m. under the chair's door; by 8 a.m. the final morning) as well as the format to be used;
- assign team member responsibilities for interviews. In most instances, every major academic and administrative officer of the institution, every department head, as many faculty members as possible, and a representative sampling of students should be involved in the process; and
- remind team members to review the supporting documents. Every institution has been provided a list of recommended materials to make available to the team in the workroom and/or electronically. In addition, many institutions provide other materials supplementary to the self-study.

Having read the self-study and other supporting materials to prepare for the visit, individual team members will have formed preliminary ideas about what they are going to find and questions about the ways in which the institution goes about its business. Upon arriving on campus, the team then begins to function as a group. Team members are most often deployed in teams of two or more for scheduled meetings with institutional representatives, and they need to rely on one another to gather information to examine an issue from different perspectives. The chair's role is to keep the team focused on the institution as a whole and on its effectiveness in meeting *its own goals* and *the Commission's standards*.

### **Initial Meeting of Team with the Campus Community**

The initial meeting of the team with the campus community, arranged during the preliminary visit, typically takes place Sunday evening. Usually a "working" dinner meeting for comprehensive visits and a reception for focused visits, it serves the important function of setting the stage for the evaluation visit by providing whatever additional orientation of either a general or specific nature the institution deems appropriate. To the extent possible, this first meeting with institutional personnel should be informal, and evaluators should attempt to allay anxieties, if any. The role of the state or other observer should, if necessary, also be explained to the institution's representatives.

Evaluators are asked to bear in mind that they are on campus as guests and colleagues invited to discuss the self-study or report and to offer the kind of rigorous, constructive criticism that can come only from informed, objective peers. Team members and campus personnel engage in high-level discussion during an evaluation visit, and such useful exchanges begin at this opening dinner/reception.

Following the opening event, team members then again meet, compare notes, and make any necessary adjustments in the visit schedule for the remainder of the visit.

## Interviews with Institutional Personnel

During the evaluation visit, the team should talk with as many people as needed to gain knowledge and develop an understanding of the institution. The first meeting, alone or with others as the chair wishes, should be with the president. It should be a working session at which the plans for the meeting with trustees and the format for the exit report are finalized. At this meeting, the chair should also remind the president of the need to complete the Preface Page to the Team Report that will be included in the team's final report. (The chair and president will have received the preface page by email approximately one month prior to the visit. A copy is also available on the Commission's website.) Throughout the visit, the chair should arrange to periodically check in with the president to both provide a progress report and also to see if any issues related to the visit have surfaced.

As part of all comprehensive visits, the chair, most often with one or two members of the team, meets with representatives of the board of trustees. On a focused visit, the degree of interaction with the trustees will depend upon the nature of the visit. At such meetings, the institution's president should be absent. This meeting provides an opportunity for the team to assess the board's engagement with the institution, as well as its independence and ability to act in the best interests of the institution.

Overall, the team should develop a cross-sectional view of the institution, rather than interacting only with its high-level officers. To gather information to validate the self-study or focused report, team members will need to talk with a broad, representative sample of institutional representatives, using both formal and informal meetings. Group interviews should be arranged in those cases where such sessions can be both productive and timesaving. In addition, evaluators should make an earnest effort to circulate about the campus as fully as time permits, meeting people and gathering information. They should also leave time in their schedules to review the supporting documents provided by the institution, follow leads, check information adequately, and compare perceptions from and with other members of the team.

For comprehensive evaluations, as noted in Chapter V, every institution is asked to schedule "open meetings" during the visit: one for students, one for faculty, and, in most cases, one for staff. Such meetings are "open" in the sense that any member of the designated constituency may attend and offer comments to the visiting team. Participation in each meeting is limited to the designated constituency (e.g., administrators are not permitted to attend the meeting for faculty; student services staff should not attend the meeting for students) as the group should feel comfortable providing input to the team about the institution. Teams will also want to schedule other meetings with representatives of these groups (e.g., faculty on assessment committees, financial officers, students in leadership positions or studying at a distance).

Although the overall goal of all team members is the same – to evaluate the institution against the *Standards for Accreditation* – the approach of individual team members may vary. One of the strengths of the evaluation process is the variety of approaches, backgrounds and experience brought by team members. The Commission expects, however, that all team members will conduct their inquiries in the spirit of professional peers.

Experience suggests that classroom visits during the evaluation are not productive. A few class visits provide relatively little input to the process of making reliable judgments on the quality of the institution as a whole. Instead, a thorough analysis of outcomes data in the self-study (i.e., the E-series and Data First forms) and other evidence presented by the institution attesting to its efforts to evaluate its effectiveness in achieving its objectives, to include assessing student learning outcomes and measuring student success, provides more trustworthy evidence.

In reviewing their respective standards or areas of emphasis, team members should determine how effective the institution is in meeting both its goals and the Commission's standards. In all

instances, the central question is whether the area under review forwards the achievement of these two objectives. That is, does a given program, procedure, curriculum, etc., assist an institution in meeting the institution's stated objectives? If not, in what ways? Does a given program, procedure, curriculum, etc., align with the Commission's standards? If not, in what ways? Team members should resist the natural tendency to compare the situation they are observing with that on their home campuses. While the host may be interested in hearing about solutions which are working well at a team member's institution, during the visit it is the local context that is the shared concern of both.

Team members should remember that a fair evaluation provides a comprehensive and balanced view of an institution, assessing strengths as well as concerns. The institution expects – and deserves – honest, constructive criticism; neglecting the positive side of an evaluation only diminishes the usefulness and validity of such feedback.

Throughout the site visit, team members should bear in mind the need to submit a basic draft of their section(s) of the report to the team chair before leaving campus. Team members should take careful notes during their meetings with institutional representatives to help provide documentation to support their conclusions in the written report that will be read closely by a variety of audiences. Notes should include the names of those with whom they met, although such information is not included in the final report. Even before the visit, team members should begin to record their reactions, judgments, questions – always relating them to the Commission's standards. All notes and other materials related to the visit should be viewed as confidential and destroyed once the final team report is complete.

It is important that evaluators not let themselves be drawn into debates on the relative merits of specific approaches to an institution's problems. The inadvertent or other involvement of individual team members on one or another side of an issue may undermine the institution's confidence in the objectivity of the team's final report. The Commission takes no position on such issues as unionization, collective bargaining, teaching loads, class size, etc. Rather, it is concerned only with the impact of the solution adopted by the institution on the quality and effectiveness of its educational work and on the achievement of its students.

## **Off-Campus Sites and Distance Education Programs**

As noted in Chapter V, Commission policy requires that an institution's off-campus sites and distance and correspondence education programming be reviewed as part of its comprehensive evaluation. Through these reviews, team members provide assurance to the Commission that these programs also fulfill the *Standards for Accreditation*.

Arrangements for the review of off-campus sites and distance and correspondence education programming will have been made during the chair's preliminary visit to the campus. Visits to off-campus sites can take place during the comprehensive visit or at other times depending upon the location and number of sites to be visited. Preferably, visits to off-campus sites occur before or at the time of the comprehensive visit. During visits to off-campus sites, evaluators will want an opportunity to speak with faculty and students, as well as to review the resources available at the location. Evaluators will also want to assess the capacity of the institution to administer its off-campus sites and its distance and correspondence education programs.

Additional guidance concerning the review of off-campus sites and distance education and correspondence education programs is found in the Commission's *Guidelines for the Review of Off-Campus and Distance Education Programming During a Comprehensive Evaluation*, appendix v). Teams visiting institutions that offer distance education programs will also want to refer to the C-RAC Guidelines for the Evaluation of Distance Education (On-line Learning).



## **Team Review of the Institution's Award of Credit**

The Commission's *Policy on Credits and Degrees* (appendix viii) incorporates the federal definition of a credit hour. While on campus the team has the responsibility to review the institution's policy (or policies) and curriculum to determine if the award of credit is in keeping with Commission policy and with the expectations of good practice. The institutional policy should address the amount of engaged academic time typically expected of students for all delivery formats offered (e.g., distance and correspondence education, condensed formats, low residencies, summer and weekend programs) and how the total credit awarded is consistent with Commission policy.

The team is looking to determine both whether the institution's expectations for student learning and workload are appropriate for the credit hours awarded (i.e., consistent with Commission policy), and also that the evidence provided by the institution demonstrates the institution is following its policy. Examples of evidence a team will want to review include the institution's course catalog(s), course schedules, and a robust, diverse and representative sample of course syllabi that includes a cross section of all course levels and delivery formats offered. The team will also want to learn how the policy is made known to those who use it, and to talk with faculty and other academic administrators to assess their understanding and application of the institution's policy on the award of credit.

Finally, as part of the "Integrity in the Award of Academic Credit" section of *The Academic Program* chapter (Standard 4) of the team report, the team should include a summary of the review conducted, its conclusions on whether the institutional policy is appropriate and sufficiently detailed, and the team's determination of whether the evidence demonstrates that the institution is following its policy on the award of credit as required by federal regulation.

## **Team Conferences/Meetings**

A major strength of the evaluative process is the collaborative work of team members during their group conferences. The chair should organize team conferences carefully, knowing in advance what is to be accomplished at each point in the process. The chair should lead but not dominate, seeking observations from each team member and encouraging discussion, all the while making certain that the focus remains on the application of the Commission's standards. Team members should be reminded that the goal of each conference is to refine and ultimately finalize the team's summary of the institution's strengths and concerns. Most teams work informally and reach decisions by consensus. Consensus, of course, does not preclude significant differences of opinion on some points. These differences, too, should be reflected in the team's final report.

Ensuring there is sufficient time for conferencing is one of the reasons why the team is lodged together. It is important that the schedule include team meetings throughout the visit. For example, members may wish to begin over breakfast and then to meet formally as a group at the end of each day. Some team chairs also schedule time for the team to touch base with one another at other times during the day (e.g., during or after lunch in the team workroom). Chairs should also be careful not to let team meetings go beyond a reasonable hour at night. Blocks of time, too, must be left for team members to review supporting materials made available by the institution and to prepare their drafts, which are collected before the team's departure from campus even if some members choose to send a more polished version a few days after returning home.

The focus of conferences early in the visit is to decide who and what needs to be seen and why. Later conferences will often focus on determining the relative magnitude and overall importance of institutional issues. The final conference should result in consensus on the institution's major strengths and concerns.

At the final team meeting, either the evening before or early morning of the day of the exit report, the team has an opportunity to clarify the substance of the team report and to ensure that the major findings of the team are accurately and clearly stated. Achieving consensus on (1) the list of institutional strengths and concerns, and (2) the team's confidential recommendation to the Commission regarding the institution's accreditation status, are the major tasks at the final team meeting. The summative list of strengths and concerns developed should be concise, indicating those broad issues that affect institutional development that must be preserved or addressed to ensure the continued success of the institution and its students.

## Drafting the Team Report

One of the major responsibilities of the team is to prepare a report documenting how, and how well the institution fulfills each of the Commission's standards. While each individual team member prepares a section of the report, the full report is regarded as the product of the team as interpreted by the chair. It is from the team drafts that the chair constructs the exit report delivered to the institution at the conclusion of the campus visit. The written draft reports are then also used by the chair, together with notes from discussions and interviews, to prepare an organized, coherent document that presents the findings of the team.

From notes taken throughout the visit, team members prepare a draft for each of their assigned standards or areas of focus. Most team members choose to draft the descriptive components of their report(s) before arriving on campus. These preliminary efforts, of course, are subject to revision as a result of new information received during the visit. A team member's draft constitutes a nearly completed report and is more than a series of notes. Its contents should reflect the standard or area of focus to which it is responding, indicating the team member's findings of both the related strengths and concerns. The standard itself can be used as an outline for the report, although institutional realities may dictate a different organizational structure.

While the Commission prescribes no one best way for institutions to achieve or document its effectiveness, the report should give direction to the Commission and to the institution as to which parts of the institution, if any, are stronger than others and which are subject to concern. Therefore, each section should contain enough evidence and be sufficiently analytical so that it allows a reader who has not participated in the visit to draw the same conclusions as the team regarding the degree to which the institution fulfills the standard. Finally, the narrative should be compatible with the summary list of strengths and concerns included at the end of the report.

As evaluators prepare their sections of the report, they are encouraged to remember that the team report has at least two audiences: the institution and the Commission. In addition, many institutions make the team report public. Team members will therefore find it helpful to keep the following ideas in mind as they write their section(s):

- Avoid statements about whether or not the institution meets or does not meet a particular standard (e.g., "The College meets Standard Two" or "The College does not appear to fulfill the Standard on *Institutional Resources*"). Such judgments are the purview of the Commission, not team members. Be sure, however, to include sufficient evidence in the report that the Commission has the information it needs to determine whether or not each standard is met. Concerns about the extent to which the institution meets (or does not meet) one or more of the standards should instead be conveyed in the team's confidential recommendation to the Commission.
- Remember that the identification of strengths is just as important as pointing out concerns. Unless both are taken into account, a change made to meet a concern could erode an area of strength.

- Don't reveal to the institution the team's confidential recommendation regarding the institution's accreditation status.
- Avoid vague or unsubstantiated statements (e.g., "Efforts at program evaluation are uneven." or "The College has an adequate number of line officers with appropriate qualifications."). It is more helpful to the institution and to the Commission for the team to directly raise concerns about institutional features that appear troubling (e.g., "The organizational plan of the college does not appear to facilitate the day-by-day decisions that need to be made by line officers.").
- Avoid comments and suggestions about personalities in the institution (e.g., "The administrative style of the president is interesting and unconventional."). Avoid such comments even if they incorporate praise (e.g., "The Director of Institutional Research is doing an excellent job."). The short time period of the visit does not permit the team to adequately judge the performance of individuals within the institution, nor is it appropriate to do so as part of the review. Instead, such comments and suggestions are best related to organizational elements (e.g., "There is good rapport between student leaders and the college's student services office.").
- In general, avoid prescribing specific solutions to problems (e.g., "The student personnel office is overworked and an Associate Dean of Students should be hired."). While it is appropriate to identify issues of concern (e.g., "Students report needing to wait a week or more for an appointment in the financial aid office."), the specific solution should be left to the institution. Further, institutions can confuse specific prescriptions and advice from teams as accreditation requirements.
- Avoid using an abrasive or patronizing tone (e.g., "The condition of the facilities is appalling.") and excessive subtlety (e.g., "The College might want to consider the condition of its facilities.").
- Don't appear to question the particular political, ecclesiastical, or corporate sponsorship of the institution. Here, the team's observations should be concerned only with the impact of this relationship on the institution's pursuit of its objectives without limitations that diminish academic effectiveness.
- Don't apply the formulas or requirements of other organizations (e.g., "The library collection does not meet the ALA standard for a college of its size."). While their ideas are often useful for an institution, the New England Commission of Higher Education cannot appear to be endorsing the standards of another organization or acting as its enforcing agency. Also, the team should not be an advocate for or advise against specialized accreditation.
- Don't advance as solutions to problems an individual evaluator's pet educational theories.
- For each of the standards, do make sure to balance the dimensions of inputs, processes and outcomes.
- Do discuss distance, correspondence, and/or competency-based education as well as off-campus locations in those sections of the report where relevant.
- Do use as evidence information provided on the Data First and E-series forms.
- Do validate that assessment mechanisms are used to provide evidence of student achievement and that the resulting information is taken into consideration as the institution seeks to enhance the experiences it provides for students, as well as to assure that the level of student achievement is appropriate for the degree awarded.

- Do include an analysis of the institution's overall performance with respect to student achievement as measured by its retention and graduation rates, licensure passage and job placement rates, and other measures of student success used by the institution.
- Do discuss the institution's award of credit as part of the Integrity in the Award of Academic Credit section of Standard 4, *The Academic Program*.

## **Affirmation of Compliance**

As part of a comprehensive self-study, every institution is asked to complete an Affirmation of Compliance form to document its compliance with federal requirements relating to Title IV program participation, including relevant requirements of the Higher Education Opportunity Act, and to include the form in the appendix of the report. Verification of the institution's compliance is confirmed by the team in a brief summary, written by the chair or a designated member of the team, that includes at least one or two sentences addressing each of the Affirmation of Compliance items: Credit Hour; Credit Transfer Policies; Student Complaints; Distance and Correspondence Education; Verification of Student Identity; and Public Notification of an Evaluation Visit and Opportunity for Public Comment.

## **Summary List of Strengths and Concerns**

A most important part of the team's work is the development of a list of strengths and concerns to be communicated to the institution at the conclusion of the visit. This list of strengths and concerns – related to the Commission's *Standards for Accreditation* – should not be a mere compilation of individual points of view, but should represent a consensus on major strengths and concerns which are significant to the institution's evaluation and to its improvement. Strengths and concerns related to individual areas of institutional activity but not of major significance to the institution as a whole should instead be included in the narrative of the chapters of the report.

Significant strengths: An institution should be commended for those aspects related to the fulfillment of its mission that are considered by the team to be especially valuable, and which need to be emphasized both to commend the institution and also to make clear that they are things that should not be permitted to weaken as the institution goes forward.

Significant concerns: An institution should be directed toward significant concerns related to the fulfillment of its mission that the team believes require attention. Some of these may currently be adversely affecting the quality of the institution. Others may have the potential for adverse effects, e.g., a governance document or set of bylaws that has the potential to create conflict, even though no significant conflict has yet occurred.

## **Exit Report**

During the final session at the institution, the chair presents an oral preview of all the major points that will be made in the written team report, omitting the confidential recommendation regarding the institution's accreditation status. In effect, this "exit" report is a summary of the team's written report. All team members attend. The chair and the president decide who among the campus community should be present at this session. For example, some presidents will have just the major administrative officers and/or the steering committee of the self-study present, while others will open the meeting to the entire campus community. Regardless, the chair will want to meet privately with the president in advance of the meeting to preview the contents of the report.

The exit report is challenging and is one of the most important tasks of the chair's job. The chair, who delivers the report, must present an exact summary of the report to be written. In addition to thanking the institution for its hospitality during the visit, the chair should begin by explaining the form, purpose, and boundaries of the exit report to avoid any misunderstanding. The summary of the team's findings then follows. It concludes with a reminder of the next steps in the evaluation process.

As always, the Commission's *Standards for Accreditation* form the basis for the exit report. During the evaluation, the team has attended to the effectiveness with which an institution is meeting its mission and is using assessment results to increase its effectiveness. At the time of the exit report, the team chair should be specific in presenting the team's findings on each standard or area of focus. In addition to commenting on the institution's strengths, the chair should speak to those areas the team found in need of improvement.

It is important that the tone and content of the oral exit report be consistent with the written report the chair will later send to the institution. The exit report should leave no doubt about institutional concerns perceived by the team. A candid report will not endanger the confidentiality of the team's recommendation to the Commission; rather, it is the specific recommendation that should not be revealed to the institution.

At the completion of the exit report, the team's on-campus responsibilities are concluded. Though the president or other institutional personnel may wish to raise questions about the report, both the chair and the institution should keep in mind that the exit report is not a time to either extend or debate the evaluation itself. The institution will be given full opportunity later to respond to the team's report before it is considered by the Commission.

## **The Confidential Recommendation**

At its last meeting, the team should reach a consensus on its confidential recommendation concerning the institution's accreditation status and any future reporting requirements. This recommendation is conveyed to the Commission in a letter from the team chair that is *not* shared with the institution. While the recommendation is confidential, it should reflect the tone and content of the team report.

In formulating the confidential recommendation, evaluators should remember that NECHE accreditation always applies to the institution as a whole; the Commission does not accredit programs or parts of an institution. Accreditation attests the judgment of the Commission that an institution is guided by well-defined and appropriate objectives, that it has evidence of substantial achievement of those objectives, and that it can be expected to continue its level of achievement; more specifically, it signifies that the institution substantially fulfills the Commission's nine *Standards for Accreditation*.

The team's confidential recommendation fulfills one purpose of the on-site visit: declaring what the team believes should be the accreditation status of the institution. It is a confidential statement of the team's conclusion that, together with the team report, provides a basis for the deliberations of the Commission.

It is critical that the confidentiality of the recommendation be maintained. It should not be shared with anyone from the institution nor, of course, anyone not on the team itself other than the Commission and Commission staff. Since it is a recommendation and therefore subject to possible modification by the Commission, confusion and embarrassment could be created by communicating it to the institution. This caution in no way suggests that the Commission will fail to take the evaluators' recommendation seriously. The recommendation is, however, only

one factor in the decision-making process that the Commission has developed in its effort to carry out as responsibly as possible its task of judging an institution's effectiveness.

The team's confidential recommendation should include the following elements:

1. A statement as to what the team believes should be the *accreditation status* of the institution;
2. *Additional reporting requirements*, if any, to monitor the institution between comprehensive evaluations; and
3. The team's *reasons* for the recommendations.

A discussion of each element of the recommendation follows:

**1. Accreditation Status.** A team conducting a comprehensive or focused evaluation must make a recommendation as to the accreditation status of the institution. The basic affiliation of the institution with the Commission is at issue. Based on the team's findings regarding the institution's fulfillment of Commission standards, this portion of the recommendation indicates whether or not:

- An institution should be admitted to candidacy;
- A candidate institution should be granted initial accreditation; or
- An accredited institution should be continued in accreditation, or asked to show cause why it should not be placed on probation or have its accreditation withdrawn.

Before being denied candidacy or accreditation, or before being placed on probation or having its accreditation withdrawn, the institution will be asked to show cause why the adverse action should not be taken. Thus, the team's action in these cases is to recommend to the Commission that the institution be asked to show cause why the action should not be taken.

The definitions below are provided to help in the team's determination of an institution's accreditation status. (See also the Commission's policy on the *Range and Meaning of Commission Actions Affecting Institutional Status* (appendix ix) and its *Policy on the Status of Probation* (appendix x)).

*Granted Candidacy:* A team should recommend that an applicant institution be granted candidacy when the institution has demonstrated that it meets the Criteria for Candidacy, specifically: 1) meets the Requirements of Affiliation; 2) has, with the intention of meeting the Commission's *Standards for Accreditation*, effectively organized sufficient human, financial, learning, and physical resources into educational and other activities so that it is accomplishing its immediate educational purposes; 3) has established and is following realistic plans to acquire, organize and appropriately apply any additional resources needed to comply with the Commission's *Standards for Accreditation* within the candidacy period; and 4) meets the Commission's standard on *Integrity, Transparency, and Public Disclosure*.

*Granted Initial or Continued in Accreditation:* A team should recommend initial accreditation for a candidate institution or continued accreditation for a member institution when it has found that the college or university fulfills the *Standards for Accreditation*.

*Probation Status:* A recommendation to show-cause for probation is appropriate when the team finds that the institution fails to meet one or more *Standards for Accreditation*. While such a determination is ultimately a matter of judgment, guidance is provided by the statement of the standard—the boldface text at the beginning of each of the Commission's standards. If an institution is placed on probation, it will have a specified period of time, not to exceed two years, to demonstrate its compliance or the Commission will withdraw the institution's accreditation.

Probation is a public status; it may be appealed as detailed in the Commission's *Procedure for the Appeal of Adverse Actions*.

Before making such a recommendation, the team should review the *Policy on the Status of Probation* found in appendix x. In addition, the team chair should consult with Commission staff.

*Denial of Initial Accreditation or Withdrawal of Accreditation:* A candidate institution has a maximum of five years to demonstrate its fulfillment of the standards. The evaluation near the end of the candidacy period represents the institution's application for initial accreditation. If the institution fails to demonstrate that it meets each standard, the Commission is obliged to deny initial accreditation.

A team should recommend show-cause for withdrawal of accreditation if it finds that the institution fails to meet one or more of the Commission's standards to the extent that, in the judgment of the team, it will be unable to bring itself into compliance with the two-year probation period.

Before making such a recommendation, the team should review the policy statement on *Range and Meaning of Commission Actions Affecting Institutional Status*, found in appendix ix. In addition, the team chair should consult with Commission staff.

**2. Additional reporting requirements.** An evaluation team may choose to add additional reporting requirements to its recommendation regarding the institution's status with the Commission. Among the means the Commission uses to monitor the quality and stability of its accredited institutions between comprehensive evaluations are: a progress report, specifying topics to be addressed in an interim report, submission of an Annual Report on Finance and Enrollment (ARFE), a focused evaluation with a site visit, and/or issuing a Notice of Concern or a Notation.

*Progress report:* A progress report serves the purpose of providing information to the Commission on an institution's success in addressing certain specified concerns when the team believes it is appropriate for the Commission to have such information before a scheduled interim report or comprehensive self-study. It may also provide information about developments or changes at the institution which bear on its accredited status. A progress report should be recommended to provide information which does not require validation through an on-site visit. Thus, the enrollment at an institution may be an appropriate subject for a progress report, but an institution's success in improving communication between administration and faculty would not be appropriate. When a progress report is recommended, the team should clearly specify the subject(s) of the report as well as the timing for its submission. The recommended timing should reflect the urgency of the problem.

*Specifying items for attention in an interim report:* Candidate and accredited institutions are required to submit an interim report at the mid-point between comprehensive evaluations. (Candidacy has a maximum time period of five years. Initial accreditation is granted for no more than five years, and accredited institutions must have a comprehensive evaluation after a period specified by the Commission, not to exceed ten years.) A team may wish to recommend that the institution address certain items in its interim report.

*Annual Report on Finance and Enrollment (ARFE):* When an institution is found to have significant current or potential fiscal and/or related enrollment problems that may adversely affect its ability to continue to comply with the criteria for candidacy or the *Standards for Accreditation*, particularly the standard on *Institutional Resources*, the team may recommend submission of an ARFE. Through this report, the Commission is able to monitor the institution's financial situation between site visits. Components of an ARFE report include: a narrative discussion of the institution's financial and enrollment situation; audited financial statements for the previous two

years and accompanying management letters, and completed Finance and Enrollment (F&E) data forms that include information on the institution's financial position, revenues and expenses, debt, admissions, and enrollments.

*Focused evaluation:* A focused evaluation (i.e., visit) should be recommended when the team believes there are concerns that merit validation through an on-site visit rather than a written progress report. Such a visit is preceded by the development of an institutional report and is undertaken by a small team charged to evaluate institutional progress in the designated area(s) of focus. The team may recommend that a focused evaluation accompany an interim report. In making a recommendation for a focused visit, the team should specify the area(s) to be evaluated and the timing of the visit.

*Notice of Concern:* A Notice of Concern should be recommended when the team determines that the institution *is in danger* of being found not to meet one or more of the Commission's standards if current circumstances or trends continue. **A formal Notice of Concern is not made public by the Commission.** An institution issued a formal Notice of Concern undergoes an on-site evaluation within two years to assess its success in addressing the identified concerns. If the Commission finds that the concerns have been appropriately addressed, it will remove the Notice of Concern. If the concerns have not been satisfactorily addressed, the Commission may issue a continued formal Notice of Concern. Alternatively, if the Commission finds that the institution may now fail to comply with one or more *Standards for Accreditation*, the Commission will ask the institution to show cause why it should not be placed on probation or why its accreditation should not be withdrawn. In making a recommendation for a formal Notice of Concern, the team should specify the standard(s) that the institution is in danger of not meeting.

*Notation:* A Notation should be recommended when the team determines that the public should be notified when conditions at an institution with respect to the Commission's standard are such that the institution's candidacy or accreditation may be in jeopardy if current conditions continue or worsen. **A Notation is made public by the Commission.** An institution on Notation undergoes a focused evaluation within two years to assess the institution's success in addressing the identified concerns. If the Commission finds the institution has successfully addressed the concerns, it will remove the Notation and specify further monitoring. If the Commission has reason to believe the institution may or may not meet one or more of the *Standards for Accreditation*, the Commission will ask the institution to show cause why it should not be on probation or why its accreditation should not be withdrawn. If the Commission finds that the concerns have not been sufficiently addressed, a continued Notation will be issued.

**3. Reasons for the Recommendation.** The team's recommendation must be followed by its rationale for the recommendation. There is no established structure or style for this component of the letter. The reasons, citing relevant standards, should be stated clearly and succinctly. They should also be specific and compatible with the content of the report. Enough information should be included so that any reader, even one unfamiliar with the institution and the evaluation, would understand why the team made its particular recommendation.

The team must provide reasons for all elements of the recommendation. Thus, for example, the team should indicate why it believes the institution should be granted or continued in accreditation, or that it be asked to show cause why it should not be placed on probation or have its accreditation withdrawn. If a recommendation for additional reporting is included, the rationale for the recommended reporting, as well as its timing, should be stated. The team's rationale should be linked as directly as possible to the applicable standards and policy statements.



## **Accommodations and Expenses**

Since expenses for food and lodging are borne by the institution, evaluators should do what they can to keep these costs reasonable.

Within two weeks of the visit, any out-of-pocket expenses incurred should be entered on the New England Commission of Higher Education's expense voucher and sent with supporting receipts to the Commission office. (Some institutions also require a W-9 form in order to process evaluator expense vouchers, and it is best if this form can be completed while the team is on campus.) After receiving and reviewing all expense vouchers from the visiting team, Commission staff forward them to the institution for reimbursement. Promptness in filing for reimbursement is a courtesy to other team members. This is also a good time for team members to complete and return the form provided for their confidential appraisal of the evaluation process.

Use of a personal automobile in connection with an evaluation visit is reimbursed at the current federal reimbursement rate for mileage. Evaluators who find it necessary to rent a car in connection with their assignment should discuss these arrangements in advance with Commission staff.

## **Confidential Assessments and Thank-you Letters**

The chair's confidential assessment of each team member, used as an aid in selecting future teams, is seen only by Commission staff. Charity is out of place in these evaluations; the chair should give rigorous scrutiny to each team member's strengths and weaknesses as an evaluator. Team members' confidential appraisals of the evaluation process are also of significant help to the Commission.

After the evaluation visit, an appreciated courtesy is for the chair to write to the chief executive officer of each evaluator's home institution to express appreciation for the team member's contributions to the accreditation process – when this is indeed the case. The Commission office, in expressing its appreciation to each member of the team, sends a letter to the president of the institution in any case, but a letter from the chair may have additional meaning.

## **Evaluators' Subsequent Relationship with the Institution**

While carrying out their duties for the Commission, evaluators should refrain from using the review process for personal gain, including the establishment of an employment or consulting relationship, for a least one year after the Commission's final action on the evaluation (i.e., approximately 18 months after the visit). Any subsequent relationships beyond this timeframe are entirely at the individual's discretion and solely between them and the institution.

## CHAPTER VII

### After the Visit

#### *Overview*

*Although the team's evaluation is concluded when the team members leave the campus, the reporting activities which take place after the visit are extremely important. They provide the permanent record of the evaluation and culminate in the Commission's decision on the institution's accreditation status along with any follow-up requirements or stipulations related to it.*

#### **Writing the Formal Team Report**

Team members are responsible for preparing an initial draft of their assigned standard(s) or area(s) of focus, and the chair is then responsible for compiling the evaluation report. While no doubt drawing heavily upon team member comments and ideas, the chair is not limited by their written reports. The chair's job is neither a mere editorial nor a cut-and-paste task; rather, it is to produce a well-organized, coherent document that assesses the institution's fulfillment of the Commission's standards. The body of the report should provide the documentation necessary to support the concluding list of strengths and concerns. The chair should be sure to include all major points made in the exit report. Emphases within the report should honestly reflect the views of the team.

In a period of heightened public interest and growing concern for consumer protection, it is likely that the team report will be read and referred to by lay as well as professional parties unknown to members of the team or the Commission. The chair should therefore bear in mind that although the evaluation report is addressed to the institution, it will be seen by a wide audience, including the Commission. The report should be both fair and factually accurate in describing the institution and its operations with regard to fulfillment of the *Standards for Accreditation* as observed by the team during its visit.

The report should be written immediately after the visit, before the flavor and the details of the experience dim. No later than six weeks after the visit, and after having circulated a draft of the report and confidential recommendation to team members and Commission staff, the chair should send a draft of the report to the institution's president for a review of factual accuracy.

The Commission requests that the team report for comprehensive reviews and focused visits be organized as follows:

- a. **Cover Page**
- b. **Preface Page to the Team Report** – Prior to the visit, the chair and institutional president receive via email from Commission staff a Preface Page to the Team Report that is to be filled out by the institution **during the visit** and returned to the chair. The Preface Page to the Team Report summarizes the institution's most current enrollment and financial data. When complete, this page should be inserted directly after the cover page of the team's report.
- c. **Introduction** – Written by the chair, the introduction identifies the type of evaluation undertaken (comprehensive or focused) and summarizes the evaluation process, giving an indication of the types of materials reviewed by the team and the sorts of meetings

conducted during the visit, including any visits to off-campus locations. The chair should write the introductory section with particular care, using it to emphasize the rationale of the entire evaluation process. Among points to be made or commented upon: the quality and thoroughness of the institution's self-study (or focused evaluation report); its value, along with the team report, as a reference document and basis for ongoing self-study, planning and development; the opportunity which remains for the institution to respond to the report as a further dimension of the evaluation process.

- d. **Narrative** – Here, include a chapter for each of the nine *Standards for Accreditation* or, for focused visits, each area being reviewed. Each chapter should describe how, and how well the institution fulfills the *Standard* and should highlight particular strengths of the institution as well as any concerns noted by the team. For comprehensive evaluations, note that the chapter on Standard 4, *The Academic Program*, should discuss the team's review of the institution's policy on credit award as part of the "Integrity in the Award of Academic Credit" section.

In fashioning the report using the *Standards for Accreditation* (or the areas of focus) as an outline, the chair should keep in mind that they vary in length, degree of detail, scope, breadth and complexity. The responses made in the report to each of the standards/areas will therefore also vary not only because of the content of the standards/areas themselves, but also because of the emphasis given by the institution and the team to certain matters over others.

Chairs and team members will note that the paragraphs of the nine *Standards for Accreditation* are preceded by sequential numbers. These have been included primarily for purposes of reference and convenience. The inclusion of the numbers is not meant to suggest that the team report should be organized accordingly. The team report may instead reflect institutional organization for purposes of clarity. What is important is that the various sections of the team report, as prepared by the chair, present reasonable and logical responses to the various components of each standard/area in an integrated and coherent document.

The report must include reference to any special focus which has been requested by the Commission; it must be scrupulously fair and balanced in praise as well as in criticism. It should reflect the totality of the institution's degree offerings, including off-campus, distance and correspondence education, competency-based programs, as well as other delivery formats.

- e. **Affirmation of Compliance Summary** – (Included in team reports for comprehensive evaluations only.) This summary documents the institution's compliance with federal requirements relating to Title IV program participation, including relevant requirements of the Higher Education Act. It should contain at least one or two sentences addressing each of the items on the Affirmation of Compliance form.
- f. **Summary and list of institutional strengths and concerns** – The final section of the report should include a summary appraisal of the team's major findings. Typically, this section comprises a short narrative followed by a summative list of institutional strengths and concerns of major significance that grows out of the narrative in the body of the report. This is not meant to be a compilation of all the strengths and concerns mentioned in the report narrative; rather, its purpose is to focus the attention of the institution (and the Commission) on the matters of greatest importance.

## **Format of the Report**

**Formatting:** The report should be single-spaced, on 8-1/2 x 11-inch paper. Please use a 12-point font and include page numbers. Begin a new section with each Standard (or area of focus); use the subheadings in the standards in the report as well.

**Length:** No standard length has been established for visiting team reports for comprehensive evaluations, but experience suggests that appropriate coverage and analysis of the institution in terms of the Commission's *Standards for Accreditation* will probably require around 30 single-spaced pages. Brevity, clarity, and substance are essential.

Focused evaluation reports vary depending on the number and complexity of issues to be addressed. Experience suggests that appropriate coverage of each area of focus will require 2-3 pages; the introduction and summary sections will be about 1-2 pages each.

## **Team Member Review of the Report**

As soon as the first draft of the report is complete, the chair shares it with the other members of the visiting team who will have one week in which to suggest corrections of factual errors or misinterpretations of notes. At the same time, the chair should send a copy of the draft to the Commission office for review by the staff, who will notify the chair as to the report's conformity with Commission expectations.

Once team members have submitted their comments on the team report and have responded to any suggestions made by the team chair, their responsibilities both to the institution and to the Commission will have ended and all materials related to the review should be destroyed. If contacted by a representative of the host campus with questions or comments, team members should simply refer the inquiry to the Commission office without further involvement.

## **Sending the Draft Report to the Institution's President**

As soon as the changes to the draft report suggested by the team and/or Commission staff have been made—but no later than six weeks after the visit—the chair should send a copy to the president of the institution for review of its factual accuracy. This error-in-fact response should not be confused with the institution's formal written response to the final team report sent to the Commission. The chair should make clear that what is needed is simply the institution's help in eliminating any errors of fact; the institution may not modify or edit the professional judgments of the team. The chair should remind the president that the institution will be afforded an opportunity to reply in writing to the substance of the report and can at that time include any events occurring subsequent to the visit that might have an impact on the report's content or conclusions.

Obviously, serious consideration must be given to any changes proposed by the institution. In the end, however, the chair must say what needs to be said, reflecting as accurately as possible the consensus judgment of the team. The chair should bear in mind that the final report will be the team's official review of the information gathered from the self-study and validated during the on-site visit. As such, it will be used as a guide by the Commission and the institution itself.

## The Final Report

The institution being evaluated handles reproduction of the report. This process is the simplest and least expensive. In addition, it protects the confidentiality of the report more than any other option.

The chair's obligations are as follows:

1. Provide the institution with an electronic copy (single, searchable pdf file) of the final report in time to allow the institution to meet the deadlines set by the Commission office. Except in unusual circumstances, this electronic copy is due to the institution no later than nine weeks after the on-site visit. Any costs the chair incurs for preparing the final report should be reported on the final voucher submitted to the Commission office after the visit.
2. Communicate to the president of the host institution the procedures for duplicating and mailing copies of the final report. The institution's responsibilities are as follows:
  - a. Duplicate the report, double-sided, on 8½x11 inch paper.
  - b. Mail a copy to each member of the visiting team, stamping the envelope **CONFIDENTIAL**.
  - c. Mail four (4) hard copies and an electronic copy (single, searchable pdf) of the report to:

*President  
New England Commission of Higher Education  
3 Burlington Woods Drive, Suite 100  
Burlington, MA 01803-4514*

## Submitting the Confidential Recommendation

At the same time the final report is sent to the institution for duplication, the chair should send to the Commission office an electronic copy (single, searchable pdf file) of the confidential recommendation. (For the content of this document, the chair is referred to Chapter VI of this manual which addresses the team's recommendation.)

In addition, the chair should send a copy of the final confidential recommendation to each of the visiting team members stressing its confidential nature. This communication should not be sent to the institution.

## Institution's Response to the Team Report

Upon receipt of the team report, the Commission will acknowledge it and request the institution, through its president, to provide a formal written response. This response is the institution's candid response to the final evaluation report. It should include any events occurring subsequent to the team's visit that impact the report's content or conclusions, as well as any differences in interpretation. The response is addressed to the Commission and, along with the self-study document and the team report, it becomes part of the record considered by the Commission before it acts. No standard length has been established for the institutional response to the team report, but experience suggests that a maximum of five or six pages should be sufficient.

Upon receipt of the response in the Commission office, a copy is mailed to the team chair.

## **Commission Meeting and Action**

The Commission will invite the president of the visited institution to attend the meeting during which its accreditation status is considered. At the meeting, the president is asked to make a brief statement, provide information about any relevant new activities at the institution, and respond to additional questions.

The team chair will also be asked to attend the Commission meeting at which the institution will be discussed. Visiting team reports are scheduled for review and discussion by the Commission at one of its regular meetings during the year: March or April for fall site visits; September or November for spring site visits. Seventy-five minutes are normally reserved for each review, and the Commission has found that the presence and contributions of the team chair are vital to these discussions. (If special circumstances prevent a chair from being present to discuss the review with the Commission, the staff will arrange for another member of the team to be present as a replacement.)

The members of the Commission will have reviewed the self-study (or focused evaluation report), the team report, the institution's response to the team report, and the team's confidential recommendation. Two Commission members, designated as primary reviewers, begin the discussion with the president. Upon conclusion of the discussion, the Commission will formulate its recommendation regarding the accreditation status of the institution under consideration. The president of the institution will be notified by letter of the decision; copies of this letter will also be sent to all members of the visiting team. Included in the letter will be the institution's accreditation status, timing of its next evaluation visit, and any additional reporting requirements set by the Commission.

After the chair has attended the Commission meeting, the responsibilities of the team chair have been fully discharged and all materials related to the review should be destroyed. Any questions an institution may have thereafter about any part of the evaluation process should be directed to the Commission office.



## Emergencies

If emergencies arise at any time during their assignment or if the team encounters serious unanticipated events, chairs should telephone a staff member at once:

*Barbara E. Brittingham, President  
Direct office phone: 781-425-7747  
Home phone: 617-285-9065  
email: [bbrittingham@neche.org](mailto:bbrittingham@neche.org)*

*Patricia M. O'Brien, Senior Vice President  
Direct office phone: 781-425-7712  
Home phone: 617-389-8271  
email: [pobrien@neche.org](mailto:pobrien@neche.org)*

*Paula A. Harbecke, Vice President  
Direct office phone: 781-425-7754  
Home phone: 617-523-1213  
email: [pharbecke@neche.org](mailto:pharbecke@neche.org)*

NECHE Office phone: 781-425-7785, Burlington, MA

## A WORD OF THANKS

*The New England Commission of Higher Education values your assistance and expresses in advance its gratitude to chairs for the time and energy they will give to the demanding work of chairing an evaluation team and to team members for their time and energy in forwarding the Commission's work.*





# Appendices



## *APPENDICES*

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## Policy on Conflict of Interest

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In carrying out its accreditation responsibilities, the Commission on Institutions of Higher Education seeks to ensure that its decisions are based solely on the application of professional judgment to the information resulting from its processes. Therefore, it seeks to avoid both the reality and the appearance of conflict of interest. For purposes of this policy statement, conflict of interest is defined as:

a circumstance in which an individual's capacity to make an impartial or unbiased accreditation decision may be affected because of a prior, current, or anticipated institutional affiliation(s), other significant relationship(s), or association(s) with the institution under review.

The following examples are meant to be illustrative.

**Affiliation:**

employee, board member, appointee, consultant, former student, or graduate;

**Other Significant Relationships:**

affiliation with another institution in the same system of public higher education, or founded by the same religious order;

affiliation with another institution which is a member of a consortium or has a substantial cooperative or contractual arrangement with the institution under review;

affiliation with an institution competing directly with the institution under review;

having a close relative or partner affiliated with the institution under review;

former employee, or, within the past ten years, seriously considered candidate for a position;

stockholder or other financial interest in an institution or corporation owning an institution;

**Other Associations:**

knowledge or personal interest concerning the institution under review from whatever source, including competitive geographical proximity, which might prejudice decision making.

**Commissioners.** Commission members are committed to full disclosure and restraint in any institutional consideration involving a conflict of interest. Members of the Commission absent themselves from deliberations or votes on decisions regarding institutions with which they are affiliated. They do not participate in discussions or vote on decisions on institutions to which they have acted as consultants or with which they have relationships or other associations where they have, or where it would reasonably appear they have, a conflict of interest. Commissioners who are uncertain regarding the possible appearance or reality of conflict of interest shall seek the advice of the Commission chair. At the request of the Commission chair, the Commission

can determine the question by vote. In general, however, if there is any doubt on the part of a Commissioner, it should be resolved by the Commissioner refraining from any discussion or action relating to the institution under review.

Commissioners may offer to their own institutions advice on Commission procedures and expectations. However, during their service on the Commission and for one year following the completion of their term, Commissioners may not serve as consultants, paid or otherwise, on matters related to regional accreditation for other institutions affiliated or potentially affiliated with the Commission.

**Evaluation Team Members.** Accreditation is a process of peer review. In that regard, the Commission must balance two important priorities: identifying potential evaluators from peer institutions (including, sometimes, competitors), and avoiding evaluators who have, or appear to have, a conflict of interest in participating in a specific institutional review. This balance is sought through consultation with the individuals and the institutions involved. The Commission recognizes that it is not possible to be aware of all circumstances where a conflict, or the appearance of a conflict, may exist. Therefore, institutions are asked to review proposed evaluation teams and bring to the attention of the Commission any conflicts of interest or the appearance of such. Individuals invited to participate in the evaluative process are asked to decline serving in the review of an institution where they have, or where it might reasonably appear that they have, a conflict of interest.

In addition, an evaluator refrains from serving as a consultant, paid or otherwise, or seeking employment with institutions reviewed for at least one year following Commission action on the institution. Questions regarding the application of this policy should be directed to the Commission's staff.

**Commission Staff.** The Commission staff is responsible for managing the accreditation process and for ensuring that all policies and procedures are carried out reliably and fairly. The staff does not engage in the evaluation of institutions, nor does it take overt responsibility for operating the accreditation process at individual institutions. However, it is responsible for providing guidance on request and is otherwise involved in developing and providing services to assist institutions in structuring their own use of accreditation procedures and for assisting evaluators, including team chairs, in preparation for their assignments.

This policy also applies to members of appeals panels, consultants hired to work for the Commission, and other representatives of the Commission.

*June 1994  
September 2001  
November 2003  
September 2010  
November 2012  
April 2013*



New England Commission of Higher Education

3 Burlington Woods Drive, Suite 100, Burlington, MA 01803-4514

Tel: 781-425-7785 | Fax: 781-425-1001 | www.neche.org

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## Expectations of Peer Evaluators

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The New England Commission of Higher Education (NECHE) seeks to ensure its member institutions and members of the public that its decisions are based solely on the application of professional and impartial judgment. As defined in the Commission's *Policy on Conflict of Interest*, individuals invited to participate in the evaluative process are asked to decline serving in the review of an institution when they have, or when it might reasonably appear that they have, a conflict of interest. Peer Evaluators, as representatives of the Commission, are expected to carry out their responsibilities with the highest level of integrity and professionalism in accordance with the guidelines below.

When representing the Commission in an accreditation evaluation, Peer Evaluators are expected to:

1. Conduct themselves with integrity and professionalism and abide by all applicable Commission policies.
2. Fulfill all responsibilities related to the review by preparing in advance, reviewing Commission policies and procedures, participating in training, responding to requests in a timely manner, meeting established deadlines, and taking part in all evaluation activities.
3. Regard all institutional representatives, fellow peer evaluators, and Commission staff with courtesy and respect.
4. Avoid representing individual interests that conflict or compete with a fair and objective review of an institution.
5. Other than meals and lodging provided during the campus visit, decline all gifts, incentives, compensation, or anything of value from any institution under review unless nominal in nature (less than \$10 fair market value per person).
6. Submit for reimbursement an accurate reporting of all professional expenses incurred during an evaluation within two weeks following the review. Personal expenses and alcohol are not reimbursable.
7. Protect and keep confidential information received through the institutional review process.
8. Refrain from using the review process for personal gain, including the establishment of an employment or consulting relationship, for at least one year following the Commission's final action on the institution.

July 2015







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## Procedures for the Substantive Change Evaluation Visit

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Commission policy and federal guidelines stipulate that certain types of substantive change require a visit to assess implementation. These include, but are not limited to: moving to the higher degree, establishing a branch campus or additional instructional location, establishing an overseas location, moving to a new location, and undergoing a change in control. The substantive change evaluation provides a means of monitoring the institution's capacity to implement the change at an acceptable level of quality. When the Commission requires a substantive change evaluation, the institution prepares an update on its implementation of the change, and a small team visits the institution to validate the information provided in the update, evaluate the institution's success in implementing the substantive change, and report its findings and recommendations to the Commission. The Commission considers the institutional update, the team report and confidential recommendation, and the institution's response to the team report and takes action.

### **Notification to the Institution**

Several months before the visit, the Commission President sends a reminder to the institution about the upcoming evaluation and works with the chief executive officer on the selection of dates for the visit. Typically, visits to assess a move to the higher degree are two days in length, while visits to assess new U.S. locations may be accomplished in a single day. Depending on the circumstances, such visits may run from morning to night or from noon to noon, in cases where an off-campus location offers evening programming. Visits overseas are typically two days in length, excluding travel time.

The Commission staff selects a prospective team to conduct the evaluation and requests the chief executive officer's comments on the proposed team before appointing its members. The size of the team, typically one to three persons, reflects the complexity of the change, based on Commission experience. When the team is complete, the institution and team members are informed, and appropriate evaluator materials are sent to the team from the Commission office.

### **Arrangements for the Team Visit**

Upon receipt of the team list, the institution contacts the team chairperson/evaluator to discuss the schedule for the visit, accommodations (if needed), and other arrangements. The institution notifies each team member directly about accommodations and communicates with the team chairperson about all other matters related to the visit. The institution arranges to have all hotel accommodations and meals, if possible, billed directly to the institution. After the visit, the Commission bills the institution for the team members' out-of-pocket expenses, primarily travel costs. Reimbursement should be made directly and promptly to the team. In keeping with Association policy, the Commission office bills the institution for the substantive change evaluation fee.

## **Materials**

At least four weeks in advance of the evaluation visit, the institution sends to the visitor(s) a copy of its original substantive change proposal, together with an update regarding steps taken to implement the proposal and any other new information it believes useful. At the same time, the institution sends an electronic copy (single, searchable pdf file) and four (4) paper copies of these same materials to the offices of the Commission.

The update should reflect and assess the institution's experience in implementing the substantive change and should address any areas of emphasis identified by the Commission in its letter approving the institution's plans. Relevant enrollment and financial information should be included. The institution is also asked to include information about its plans for continued implementation of the substantive change under review as well as its plans, if any, for additional substantive changes. Attention should be given to the institution's capacity to implement these plans.

The update should include a cover page with the institution's name and location, the date, and a brief summary of the subject(s) of the report. The update should be single-spaced, printed on both sides of the paper, and neither stapled nor bound. Please do not use three-ring binders or elaborate printing options.

An institution scheduled for a substantive change evaluation is urged to contact Commission staff for assistance in developing its update and making preparations for the evaluation.

## **Conduct of the Visit**

During the on-site evaluation, the visitor(s) meet with institutional representatives who can provide information about the implementation of the substantive change under review. Depending upon the circumstances, these include, but are not limited to: the chief executive officer, chief academic officer, off-campus location site coordinator, faculty, staff, students, and members of the governing board. Depending on the circumstances, visits to assess implementation of off-campus locations may not involve a visit to the institution's main campus. The visit may conclude with a meeting between the team chairperson/evaluator and the institution's chief executive officer to review the major findings of the evaluation.

For most substantive change evaluations, a preliminary visit by the team chairperson/evaluator is unnecessary. However, regular communication by phone should be initiated by the institution, and the chairperson/evaluator should feel free to contact the institution to discuss arrangements in detail or to request additional materials if team members see a need for them.

## **Preparation of the Evaluation Report**

Within a month of the visit, the team/evaluator prepares a narrative report of no more than 5-6 pages that describes the institution's success in implementing the substantive change under review, with particular attention to any areas identified for emphasis by the Commission. The report should conclude with a list of identified strengths and concerns related to the institution's implementation of the substantive change.

The institution is provided an opportunity to review a draft of the evaluation report for factual accuracy and to write a substantive response to the team report.

## **Team's Confidential Recommendation to the Commission**

In keeping with Commission procedures, the team/evaluator develops a confidential recommendation based upon its findings in evaluating the substantive change. The recommendation should contain the following elements:

1. The team's recommendation on whether the substantive change should be included in the institution's accreditation.
2. The team's recommendation on the timing and content of any follow-up reporting on the implementation of the substantive change. A recommendation for subsequent progress reports

related to the substantive change is advisable if the team concludes that further monitoring of the specific situation is necessary.

3. The rationale for the recommendations. Reasons should be given in narrative form for both components of the recommendation.

Four (4) paper copies and an electronic copy (single, searchable pdf file) of the team's report and the team's recommendation should be submitted to the Commission office.

**Commission Action**

The team report and confidential recommendation, along with the institutional materials and response, are considered by the Commission at its earliest possible meeting. Typically, the institutional chief executive officer and team chairperson/evaluator are not requested to attend the meeting when the substantive change evaluation is reviewed. The institution and team member(s) are informed of the Commission's action shortly after the meeting.

*July 2009*  
*Editorial Revisions March 2014 June 2015*





## CHAIRS' CHECKLIST

*Revised August 2018*

### UPON ACCEPTANCE OF ASSIGNMENT

- Review Summary of Accreditation Process (*See also Evaluation Manual [EM]*).
- Review materials in green folder to become familiar with nature and history of institution and purpose of visit (folder includes last comprehensive and any subsequent evaluation reports, notification letters, and history sheet).
- Review Commission's *Standards for Accreditation* and relevant policy statements (also in green folder).

### PRIOR TO TEAM VISIT

- SET UP PRELIMINARY VISIT** (*See also EM; Visiting Team Resource Guide*)
  - Contact institution's executive officer to arrange visit. (*Sample letter/email provided.*)
  - Contact Commission Staff to review areas of Commission emphasis and other issues to be discussed during preliminary visit, including visits to off-campus sites and review of distance and/or correspondence education programs, if any.
- PRELIMINARY VISIT**
  - Review self-study and team composition with institution's executive officer and other major administrators.
  - Discuss any areas of emphasis identified by the Commission to be addressed in the self-study.
  - Discuss housing, technology needs, team workroom, transportation, and other logistical arrangements.
  - Designate contact person, plan visit, draft appointment schedule, including plans for "open" meetings.
  - With executive officer, discuss arrangements for meeting with governing board and format for exit report.
  - When relevant, contact central/system office, parent company, or other related entity.
  - When relevant, arrange for means to review distance education programs, correspondence education programs, visits to branch campuses and/or additional instructional locations. These may take place during the dates of the visit or at other times, depending upon the location and number of sites to be visited.
  - Share observations from preliminary visit with Commission staff.
  - Confirm arrangements with institution. (*Sample letter/email provided.*)
- COMMUNICATION WITH THE TEAM** (*See also EM; Visiting Team Resources Guide*)
  - Communicate with team members when final team is confirmed.
  - Prepare the Evaluation Preference Form with specific team assignments, including the review of the institution's award of credit and, when relevant, distance and correspondence education programs, off-campus sites, and other areas of emphasis identified by the Commission.
  - Schedule conference call with team members one month before the visit.
  - Confirm specific team assignments and review campus visit logistics. Set initial meeting time and place. (*Sample letter/email provided.*)
- FINAL PREPARATIONS FOR THE CAMPUS VISIT** (*See also EM; Visiting Team Resources Guide*)
  - Review expectations resulting from preliminary visit and finalize preparations for campus visit.
  - Review material from the Commission office.
  - Review catalogue and self-study (with special attention to Data First and E-series forms). Identify any areas needing further attention and assign or assume responsibility.

## DURING THE VISIT

- INITIAL TEAM MEETING** (See also *EM; Visiting Team Resources Guide*)
  - Perform introductions, review assignments (primary, secondary responsibilities).
  - Confirm writing assignments, deadlines, format. Emphasize *Standards*, need for documentation, confidentiality.
  - Explain role of observer(s), when relevant.
  - Exchange impressions gathered from self-study and, when relevant, visits to off-campus location(s).
  - Finalize housekeeping details (daily schedule, meetings, meals, transportation).
- MEETING(S) WITH INSTITUTIONAL EXECUTIVE OFFICER**
  - Remind that Preface Page to the Team Report needs to be completed by institution (Template sent in advance).
  - Finalize protocol for exit report.
  - Periodic check-in regarding progress of visit.
- SECOND TEAM MEETING** (See also *EM*)
  - Review team findings, relative to *Standards*.
  - Based on findings, make needed schedule revisions for the next day.
  - Remind team members to note in report narrative standard-specific strengths and concerns.
  - Start reaching consensus on a list of the institution-wide strengths and concerns.
- FINAL TEAM MEETING** (See also *EM*)
  - Achieve consensus on institution-wide strengths and concerns.
  - Achieve consensus of team's confidential recommendation to the Commission.
  - Review schedule for receiving report chapter drafts and reviewing draft report.
- PREPARE FOR EXIT REPORT** (See also *EM*)
  - Summarize team's major findings.
  - Collect draft report chapters from team members.
- CONDUCT EXIT REPORT**

## AFTER THE VISIT

- PREPARE AND CIRCULATE DRAFT OF REPORT TO TEAM MEMBERS AND COMMISSION STAFF WITHIN FOUR WEEKS** (See also *EM; Visiting Team Resources Guide*). Check draft for:
  - Cover page (Template provided)
  - Preface Page to the Team Report completed by the institution (Template provided)
  - A chapter for each of the nine *Standards* (comprehensive) or for each area of emphasis (focused)
  - Discussion of:
    - Commission requested areas of emphasis
    - Data First and E-series (Making Assessment Explicit) forms
    - Assessment of student learning, including institution's standard of achievement and measures of student success
    - Credit award policy as part of Standard 4, Integrity in the Award of Academic Credit (documenting syllabi review and analysis)
    - Transfer policy and articulation agreements
    - When appropriate, off-campus locations, distance education and/or correspondence education, including process for verifying distance education and correspondence education students
  - Affirmation of Compliance with Federal Regulations Relating to Title IV Summary
  - Report summary and list of institutional strengths and concerns
- SEND REVISED DRAFT TO INSTITUTION'S EXECUTIVE OFFICER FOR CORRECTION OF FACTUAL ERRORS WITHIN SIX WEEKS** (See also *EM; sample letter/email provided*).
- SEND FINAL REPORT TO INSTITUTION WITH DIRECTIONS FOR DUPLICATION AND DISSEMINATION WITHIN TEN WEEKS** (See also *EM; sample letter/email provided*).
- SEND CONFIDENTIAL RECOMMENDATION TO COMMISSION PRESIDENT AND TEAM MEMBERS** (See also *EM; template provided*).
- SEND CONFIDENTIAL ASSESSMENT OF TEAM MEMBERS TO COMMISSION OFFICE** (See also *EM*).
- PREPARE FOR AND PARTICIPATE IN COMMISSION'S REVIEW OF INSTITUTION DURING SEMESTER FOLLOWING VISIT** (See also *EM*).




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## Guidelines for the Review of Off-Campus and Distance Education Programming during a Comprehensive Evaluation

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Commission policy requires that an institution's off-campus programs and distance education programming be reviewed as part of its comprehensive evaluation. This requirement applies to:

- any instructional site other than the main campus at which at least 50 percent of an educational program is offered;
- Title IV-eligible certificate programs and degree programs for which students may earn 50 percent or more of the credits for the program through technologically mediated instruction; and
- degree completion programs offered on-line.

The institution is expected to appropriately address its off-campus activities and distance education programming in its self-study.

A representative sample of the institution's branch campuses and additional instructional locations will be visited as a part of each comprehensive evaluation. Arrangements for the review of off-campus sites and distance education programming should be made during the chair's preliminary visit to the campus. Visits to off-campus sites can take place during the comprehensive visit or at other times, depending upon the location and number of sites to be visited. It is preferable to complete visits to off-campus sites before or during the comprehensive visit. Evaluators will want an opportunity to speak with faculty and students at the site, as well as to review the resources available at the site. It will also be important for evaluators to assess the capacity of the institution to administer its off-campus sites and distance education programs.

Commission's staff, in consultation with the institution and the team chair, will review the number, enrollments, and geographic distribution of the institution's off-campus locations and determine an appropriate representative sample. If an institution has two or more off-campus locations, no fewer than two sites will be visited. If an institution has off-campus locations in states other than that of the main campus, at least one out-of-state campus will be visited. If the institution has off-campus locations outside the United States, at least one overseas campus will be visited.

Evaluators who visit an institution that offers distance education are encouraged to review the C-RAC Guidelines for the Evaluation of Distance Education (On-line Learning).

In keeping with federal requirements, evaluators who visit an institution that offers distance education programs are asked to verify that the institution: (1) has in place effective procedures through which to ensure that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit; (2) makes clear in writing that these processes protect student privacy; and (3) notifies students at the time of registration and enrollment of any projected additional student charges associated with the verification procedures.

Through its review of the institution's off-campus and distance education programs, the Commission seeks assurance that these programs fulfill the *Standards for Accreditation*, specifically that:

- Off-campus and distance education programs are consistent with the mission and educational objectives of the institution.



- Planning for off-campus and distance education programs is integrated into the regular planning processes of the institution.
- Operation of off-campus and distance education programming is incorporated into the governance system of the institution.
- The institution's academic unit exercises oversight of off-campus and distance education programs, ensuring both the rigor of the program and the quality of instruction.
- Courses and programs offered at off-campus locations and via distance education maintain the same academic standards as those offered on the main campus.
- Students enrolled at off-campus sites or in distance education programs have adequate access to student services, including financial aid, academic advising, course registration, and career and placement counseling.
- The institution provides sufficient resources – financial, human, physical, and technological – to support its off-campus and distance education programs.
- Students enrolled at off-campus sites or in distance education programs have adequate access to and make effective use of learning resources, including library, information resources, laboratories, and equipment.
- The institution evaluates the educational effectiveness of each off-campus and distance education program, including assessment of student learning outcomes, student retention, and student and faculty satisfaction, to ensure comparability to campus-based programs.
- Publications and advertising for off-campus and distance education programs are accurate and contain necessary information such as the program's goals, requirements, academic calendar, and faculty.
- Contractual relationships and arrangements with consortial partners, if any, are clear and guarantee that the institution maintains direct and sole responsibility for the academic quality of all aspects of off-campus and distance education programs. Such arrangements are periodically reviewed, and the written agreements provide for appropriate exit strategies to protect students, should the arrangement be terminated. Where the institution has entered into contractual relationships involving credits and degrees, it has obtained Commission approval for the substantive change per the eponymous policy.

*August 26, 2004*

*July, 2009*

*Editorial changes July 2016*



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## Guidelines for Visiting Institutions Abroad and Overseas Instructional Locations

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The following guidelines are to assist team members traveling to conduct an evaluation visit of an institution or instructional location outside the United States on behalf of the Commission on Institutions of Higher Education.

### Travel Arrangements

A point of contact at the host institution is identified early on in the process to assist team members with the logistics related to the visit.

Team members have the option to make their own travel arrangements and then to request reimbursement after the visit has been conducted. Such arrangements should be made far enough in advance to take advantage of more reasonably priced fares. Alternatively, it is possible for the team member to work through the host institution to arrange travel and ticket purchase. Team members are expected to travel at coach rate fares, except as provided below.

It is recommended that team members on international visits arrive the day prior to the visit to have some time to adjust to the time difference and, because of flight schedules, to depart the day following visit. Lodging is covered by the host institution for this entire period (e.g., from Saturday night through Wednesday night for comprehensive evaluations scheduled for Sunday afternoon through Wednesday noon).

Team members may choose to extend the trip on either end at their own expense. While a family member or friend may join the team member before or after the site visit, they should not be present during the days when the review is scheduled.

Team members may be authorized business class travel should the total travel time in each direction exceed 14 hours (in line with federal government travel regulations), assuming the most efficient travel time and transfer time between connecting flights. Should business class be authorized, team members will be informed in advance of making travel arrangements. Questions about travel should be directed to Paula Harbecke at <[pharbecke@neche.org](mailto:pharbecke@neche.org)> or 781-425-7754.

### Expense Reimbursement

NEASC provides insurance for team members travelling internationally that offers a death benefit and coverage for accidental dismemberment and paralysis, emergency evacuation, total disability, rehabilitation, and repatriation. Should a team member elect to purchase reasonable additional coverage available through most travel agents, the cost of the add-on insurance policy is reimbursable.

Within one week following the campus visit, evaluators should complete and sign the NEASC expense voucher form, mailing it along with all supporting receipts and documentation to the NEASC Office. Commission staff will review and approve the expenses incurred during the site visit and NEASC will directly reimburse each team member. The host institution will then be billed for total team expenses incurred.

*July, 2012*  
*September, 2013*



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## State Department of Higher Education Observers of Evaluation Teams

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The Commission has over the years maintained a good working relationship with the higher education departments in the states that comprise the New England region. It wishes to continue these relations without compromising its independence as a non-governmental agency. State approval of institutions in some New England states is contemporaneous with and/or dependent upon Commission accreditation.

Each year after the schedule of comprehensive evaluation visits is prepared, Commission staff notify the departments of higher education in each New England state. In turn, they may identify a staff member to accompany the evaluation team. The observer is of considerable value to the team as a source of information about the state's system of higher education, its resources, constraints, and plans.

In order to avoid confusion or misunderstanding about the role and responsibilities of an observer from a state department of education, the Commission has established the following procedures.

1. Before the visit, the institution provides the observer with the same self-study materials as those sent to the visiting team, and the team chair makes available necessary information about the schedule and other arrangements for the visit. The Commission provides a copy of its policies and procedures to the observer.
2. The observer may attend the team orientation session and other team meetings and may accompany team members on their interviews with various institutional groups. It is understood, however, that the institution, team chair, or any team member may decline to have the observer present at specific interviews or meetings where the presence of an observer could adversely affect the productivity of the meeting.
3. The observer is not present for the team's deliberations regarding its recommendations, nor does the observer receive a copy of the team report or participate in its preparation.
4. The institution is not responsible for any hotel, food, transportation or other expenses of the observer.

March, 2014






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## Policy on Credits and Degrees

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The purposes of this policy are to provide guidance to institutions and evaluation teams on the Commission's expectations regarding credits and degrees and to set forth the federal regulations regarding the award of credit.

### Background

The credit system was invented in New England, originally as a way to provide students with the opportunity to elect certain courses as part of their overall degree which had previously consisted of a fully required curriculum. Created to support academic innovation, the academic credit has provided the basis to measure the amount of engaged learning time expected of a typical student enrolled not only in traditional classroom settings but also laboratories, studios, internships and other experiential learning, and most recently distance learning. Students, institutions, employers, and others rely on the common currency of academic credit to support a wide range of desirable functions, including the transfer of students from one institution to another, study abroad programs, formalized recognition of certain forms and quality of non-collegiate study, inter-institutional cooperation on academic programs, and the orderly consideration of students applying to study at the higher degree. For several decades, the federal government has relied on credits as a measure of student academic engagement as a basis of awarding financial aid.

When applying the definition of the credit hour below, other considerations may also be relevant. For example, some institutions may require more academic time than the norms defined below, and such expectations are typical at the graduate level. Also, the Commission's Standards and practices welcome perceptive and imaginative innovation aimed at increasing the effectiveness of higher education, measuring student achievement directly rather than relying on academic engaged time. As stated in the Preamble to the *Standards for Accreditation*, "The institution whose policies, practices, or resources differ significantly from those described in the Standards for Accreditation must demonstrate that these are appropriate to higher education, consistent with the institution's mission and purposes, and effective in meeting the intent of the Commission's Standards."

### Federal Definition and Commission Review of the Credit Hour

As an accreditor recognized by the U.S. Secretary of Education, the Commission is obliged to follow federal law and regulations pertinent to that recognition.

Federal regulation defines a credit hour as an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutional established equivalence that reasonably approximates not less than –

- (1) One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or

trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or

- (2) At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

By federal regulation, at the time of the Comprehensive Evaluation, the Commission will review the institution's policies and procedures for determining the credit hours that the institution awards for courses and programs and how those policies and procedures are applied to the institution's programs and coursework. As part of its review, using sampling or other methods, the Commission must make a reasonable determination of whether the institution's assignment of credit hours conforms to commonly accepted practice in higher education. If, following this institutional review process, the Commission finds systematic non-compliance with this policy or significant noncompliance regarding one or more programs at the institution, the Commission is obliged to promptly notify the Secretary of Education.

### **Degrees**

The Commission's expectations are based on common institutional practice in New England and are consistent with practices of regionally accredited institutions elsewhere in the United States and with the Commission's Standard on *The Academic Program*: "The institution's degrees and other forms of academic recognition are appropriately named, following practices common to American higher education in terms of both length and content of the programs" (4.29).

#### **Undergraduate degrees:**

**A.A., A.S., etc.:** An undergraduate degree normally representing the equivalent of two academic years of full-time study (and requiring a minimum of 60 semester credits) or its equivalent in depth and quality of experience. The A.S. usually implies more applied orientation and the A.A. more liberal education orientation, although these distinctions are not always clear.

**B.A., B.S., etc.:** An undergraduate degree normally representing about four academic years (and requiring a minimum of 120 semester or 180 quarter units) of full-time study. The distinctions between the B.S. and the B.A. are similar to those between the A.S. and the A.A.

**Graduate Degrees:** Graduate degrees include a significant component of coursework in addition to any supervised research or practice.

**M.A., M.S.:** A first graduate degree, representing at least one year of post-baccalaureate study (requiring a minimum of 30 semester or 45 quarter units). The distinctions between M.A. and M.S. are similar to those between B.A. and B.S. and A.A. and A.S. Some M.A. and M.S. degrees are merely continuations at a higher level of undergraduate work without basic change in character. Others emphasize some research that may lead to doctoral work.

**M.B.A., M.Div., M.F.A., M.P.A., M.S.W., etc.:** Professional degrees normally requiring two or more years of full-time study. Extensive undergraduate preparation in the field may reduce the length of study to one year.

**Pharm.D., D.P.T., Au.D., etc.<sup>1</sup>:** Entry level clinical practice degrees normally requiring three years more full-time study than a baccalaureate.

**Ed. D., Psy.D., D.B.A., etc.<sup>1</sup>:** Degrees with emphasis on professional knowledge. These degrees normally require a baccalaureate for entry and three or more years of prescribed postgraduate work.

**M.D., J.D., D.D.S., etc.:** First professional degrees, generally requiring a baccalaureate degree for admission and three or more years of prescribed postgraduate work.

**Ph.D.<sup>1</sup>:** The standard research-oriented degree which indicates that the recipient has done, and is prepared to do, original research in a major discipline. The Ph.D. requires a baccalaureate degree or higher for admission and usually requires three years or more of postgraduate work including an original research dissertation.<sup>2</sup>

**Joint, Dual or Concurrent Degrees<sup>3</sup>:** While the nomenclature for various arrangements in which students study simultaneously from or for two degree programs is not entirely consistent among institutions, the definitions below will be used by the Commission for purposes of consistency:

**Joint degree:** A single degree awarded by two institutions.

**Dual or concurrent degrees:** Two degrees, awarded by one or two institutions to students who have been admitted to each degree program, based on the normal qualifications. At the undergraduate level, students must typically take the equivalent of a full year of study beyond the first baccalaureate degree to earn the second degree. At the graduate level, enrollment in a dual or concurrent degree program typically results in a reduction in time, for example, a reduction in total time of a semester for two degrees which if taken separately would require four years of full-time study.

**Terms of Study:**

**Quarter:** A calendar of ten weeks of instructional time or its equivalent.

**Semester:** A calendar 15 weeks of instructional time or its equivalent in effort.

*Effective July 1, 2011  
Editorial changes July 2016  
Editorial changes October 2017*

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<sup>1</sup>Normally, doctoral degrees represent a minimum of 64 credits beyond the bachelor's degree. Requirements vary by field, with some areas having requirements of specialized or professional accreditors. Students in some doctoral programs progress by examination, dissertation defense, and/or field or clinical work in addition to credit requirements.

<sup>2</sup>The initiation of the Ph.D. is considered a substantive change.

<sup>3</sup>Institutions considering joint, dual, or concurrent degrees should consult the Commission's Policy on Substantive Change.







## Range and Meaning of Commission Actions Affecting Institutional Status

Actions taken by the Commission on Institutions of Higher Education relative to the status of institutions affiliated or seeking affiliation are based on the application of the Commission's criteria in its evaluative processes. These criteria include the *Requirements of Affiliation*, which must be met by institutions seeking or wishing to maintain candidate status or accreditation, the evaluative *Criteria for Candidacy*, which must be satisfied by institutions seeking or wishing to maintain candidate for accreditation status, and the *Standards for Accreditation*, which must be met by institutions seeking or wishing to maintain accreditation. In addition, affiliated institutions are expected to adhere to those Commission policies affecting institutional conduct.

The processes by which the criteria are applied typically begin with the institution's preparation of a report that demonstrates it meets the *Requirements of Affiliation* and is therefore eligible to apply for candidacy. Upon determination by the Commission of the institution's eligibility, the institution prepares a self-study. The institution is then evaluated by a team of peers that reports its findings to the Commission. Action establishing an institution's status is taken by the Commission upon consideration of the institutional and team reports. Further information on the Commission's usual evaluative processes is included in the Review of Institutional Status section of this policy.

**In extraordinary circumstances, the Commission may take an action affecting institutional status apart from its usual evaluative processes. However, in such situations procedural fairness is maintained.**

The Commission's Policy on Notification of Actions Affecting the Accreditation Status of Affiliated Institutions and Providing Other Information specifies how information regarding accreditation decisions is shared with the federal government, state agencies, the public, and others.

### Range and Meaning of Actions

Institutions Seeking Candidacy Status:

*Candidacy Status* - The Commission decides that an institution should be granted candidacy status when it is found that the institution meets the *Requirements of Affiliation* and the evaluative *Criteria for Candidacy*. While candidacy is a status of affiliation, it is not accreditation, nor does it assure eventual accreditation. Rather, it indicates that the institution has achieved initial recognition and that it is progressing toward accreditation. Once granted candidacy, an institution may remain in that status no longer than five years. The continued

compliance of a candidate institution with the Commission's criteria and its progress toward accreditation are determined by means of a biennial evaluation during the period of candidacy. The effective date of candidacy is established by the Commission in keeping with federal regulations.<sup>1</sup>

*Deferment of Action* - Action on an institution's application for candidacy will be deferred when the Commission judges that it has insufficient data on which to base a final decision. In such cases, action is tabled until a specified time, but in no case longer than two years from the date of the Commission action. In the interim, the institution is required to submit a report and/or host a visit by Commission representatives.

*Denial of Candidacy Status* - The Commission will deny candidacy status when it finds that an applying institution does not meet the *Requirements of Affiliation* and/or the evaluative *Criteria for Candidacy*. Prior to taking the action to deny, the Commission will provide an opportunity for the institution to show cause why the decision to deny candidacy status should not be made. The burden of proof shall rest with the institution. If an action to deny candidacy is taken, the institution may appeal this action under the relevant policies and procedures.

*Continuation in Candidacy Status* - An institution is continued in candidacy status when it is determined through the biennial evaluation or other Commission review that it continues to meet the *Requirements of Affiliation* and the evaluative *Criteria for Candidacy* and demonstrates that it is making satisfactory progress toward accreditation.

*Withdrawal of Candidacy Status* - When it determines that a candidate institution no longer meets the *Requirements of Affiliation* and/or the evaluative *Criteria for Candidacy*, the Commission will withdraw candidacy status. Prior to withdrawing candidacy status, the Commission will provide an opportunity for the institution to show cause why the action should not be taken. Normally this opportunity will be scheduled for the next Commission meeting but in no case longer than two Commission meetings. The burden of proof shall rest with the institution. Institutions may appeal the withdrawal of candidacy under the relevant policies and procedures. Until final action is taken on the appeal, the institution's candidate status is unaffected. Institutions that lose candidacy status and subsequently seek affiliation must complete the entire process required of any applying institution as prescribed by the policies and procedures of the Commission.

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<sup>1</sup> In June 2017, the U.S. Department of Education stipulated that the effective date of candidacy be established as the date of the Commission's decision.

## **Institutions Seeking Initial Accreditation:**

*Initial Accreditation* - The Commission decides that an institution seeking accreditation should be granted that status when it is found that the institution meets the *Requirements of Affiliation* and the *Standards for Accreditation*. The effective date of initial accreditation is established by the Commission in keeping with federal regulations.<sup>2</sup>

*Deferment of Action* - Action on an institution's application for accreditation will be deferred when the Commission judges that it has insufficient data on which to base a final decision.

Action may also be deferred when it is found that an institution seeking accreditation meets most, but not all, of the *Standards for Accreditation*, the identified deficiencies having the capability of being rapidly remedied.

In cases of deferral, action is tabled until a specified time, normally until the next Commission meeting, but in no case to exceed two Commission meetings from the time of the Commission action, the institution being required in the interim to submit a report and/or host a visit by Commission representatives. If the Commission has reason to believe that the institution may fail to meet one or more *Standards for Accreditation*, it will ask the institution to show cause why it should not be denied accreditation.

*Denial of Initial Accreditation* - When the Commission finds that an institution seeking initial accreditation does not meet the *Standards for Accreditation* and that the deficiencies are such as not to be capable of being rapidly remedied, the Commission will deny initial accreditation. When the applying institution is otherwise in good standing as a candidate, it will be continued in that status up to the maximum allowable time as a candidate. However, if it is also determined that the institution no longer meets the *Requirements of Affiliation* and/or the evaluative *Criteria for Candidacy*, the Commission will withdraw candidacy. Prior to taking an action to deny initial accreditation or to withdraw candidacy, the Commission will provide an opportunity for the institution to show cause why the action should not be taken. Normally this opportunity will be scheduled for the next Commission meeting but in no case longer than two Commission meetings. The burden of proof shall rest with the institution. Institutions may appeal the denial of accreditation or the withdrawal of candidacy under relevant policies and procedures. Until final action is taken on the appeal, the institution's status is unaffected. Institutions denied accreditation and continued in candidacy must subsequently seek accreditation in keeping with the policies and procedures of the Commission. If the institution's candidacy is withdrawn and it subsequently seeks affiliation, it must complete the entire process required of applying institutions as prescribed by the policies and procedures of the Commission.

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<sup>2</sup> In June 2017, the U.S. Department of Education stipulated that the effective date of initial accreditation be established as the date of the Commission's decision.

## **Institutions Seeking Continued Accreditation:**

*Continued Accreditation* - An institution is continued in accreditation by the Commission when it is found that the institution continues to meet the *Standards for Accreditation*. Institutions whose accreditation has been re-affirmed normally undergo comprehensive re-evaluation for continued accreditation on a decennial cycle, though the length of time between visits may be modified to reflect institutional circumstances, in keeping with the Policy on Periodic Review.

*Deferment of Action* - Action on continuing an institution's accreditation may be deferred when the Commission judges that it has insufficient data on which to base a decision. In such cases, action is tabled until a specified time, normally until the next Commission meeting, but in no case to exceed two years from the date of the Commission action. In the interim, the institution is required to submit a report and/or host a visit by Commission representatives. If the Commission has reason to believe that the institution may fail to meet one or more *Standards for Accreditation*, it will ask the institution to show cause why it should not be put on probation or have its accreditation withdrawn.

*Probation Status* - When the Commission finds that an institution fails to meet one or more *Standards for Accreditation* and/or other policies, the Commission will withdraw accreditation (see below) or place the institution on probation. In such situations, the Commission will place an institution on probation if it determines that the failure to meet one or more Standards represents a condition that can be remedied by the institution within the time period allowed.

Prior to placing an institution on probation, having determined that there is reason to believe that the institution may not meet one or more of the *Standards for Accreditation*, the Commission will provide an opportunity for the institution to show cause why the action should not be taken. Normally this opportunity will be scheduled for the next Commission meeting but in no case longer than two Commission meetings. The burden of proof shall rest with the institution. Institutions may appeal the probation action under relevant policies and procedures. Until the appeals process is completed, the institution's status is unaffected. If the institution loses the appeal, the effective date of probation is the date of the Commission action.

An institution on probation must bring itself into compliance with the Commission's Standards within a time period specified by the Commission; failure to do so will result in the withdrawal of accreditation. Institutions for which the longest degree program is at least two years will have a maximum period of two years to come into compliance with Commission Standards; institutions for which the longest degree program is at least one year but less than two years will have a maximum of eighteen months. In placing an institution on probation, the Commission may specify a shorter period of time during which the institution must demonstrate it has come into compliance with the Standards or face the loss of its accreditation.

Institutions on probation are subject to special scrutiny by the Commission which may include the submission of specified reports and hosting visiting teams. If conditions at the institution worsen significantly during the period of probation, the Commission may take

an action withdrawing accreditation. If the institution on probation does not come into compliance with the Standards during the specified time period, the Commission will withdraw accreditation unless the Commission, for good cause, extends the period for achieving compliance.

Probation is a public status indicated in any publication by the Commission or NEASC or communication about the affected institution. The Commission will provide the reasons for probationary status as well as plans to monitor the institution. An institution on probation is obliged to disclose its status as well as the availability of additional information on its probationary status to prospective students, those currently enrolled, and the public, on its website, in its catalog, and in recruitment materials.

*Withdrawal of Accreditation* - The Commission will withdraw the accreditation of an institution on probation if at the end of the specified time period, but not to exceed two years, the institution has not come into compliance with the Commission's Standards unless extended for good cause. The Commission may also withdraw the accreditation of an institution not on probation if it finds that the institution is not meeting one or more *Standards for Accreditation* and that this non-compliance is fundamental to the institution's integrity or its ability to come into compliance within the two-year period.

For institutions not on probation, if the Commission has reason to believe that the institution may fail to meet one or more *Standards for Accreditation* prior to taking the action to withdraw accreditation, the Commission will provide an opportunity for the institution to show cause why the decision to withdraw accreditation should not be made. The burden of proof shall rest with the institution. Institutions may appeal this action under relevant policies and procedures. Until final action is taken on the appeal, the institution's status is unaffected. Institutions that lose accreditation and subsequently seek affiliation must satisfactorily complete the entire process for applying institutions as required by the policies and procedures of the Commission.

## **Review of Institutional Status**

In keeping with the policy on *Periodic Review*, all accredited institutions must undergo comprehensive evaluations, preceded by institutional self-study, at least once every ten years. Institutions granted initial accreditation are required to undergo a comprehensive evaluation within five years. Within these limits, the period of time between comprehensive evaluations is determined individually on the basis of institutional circumstances. In establishing the future evaluation schedule for an institution, the Commission takes into consideration such things as the degree of prospective institutional change and its effect on the institution's compliance with the criteria for accreditation, and the pervasiveness of concerns about compliance with those criteria.

Between comprehensive evaluations, the Commission may require reports and/or evaluations focused on specified items. All institutions on a ten-year evaluation cycle must submit during the fifth-year an interim report which provides an overview of the institution in its current state of development, major changes occurring since the previous evaluation, and a response to concerns and recommendations resulting from the last evaluation.

Every candidate or accredited institution is also required to submit an Annual Report, which updates the Commission on key variables and provides the institution an opportunity to forecast anticipated requests for Substantive Changes.

Institutions may also be asked to submit other reports on specified topics. Such reports, which may be accompanied by a visit, may reflect the institution's commitment to address important issues raised during, for example, a comprehensive evaluation. They may also reflect an expression of the Commission's concern regarding specified institutional conditions related to the *Standards for Accreditation* and/or other policies. The report provides an opportunity for the institution to inform the Commission of action taken to address the areas specified. Other circumstances that would result in the Commission's requiring a report include the need for additional information, as in the case of a deferral of action, and the need to monitor anticipated significant institutional developments. When external validation of the report's content is believed necessary, the report is followed by an evaluation visit to the campus by a small number of Commission representatives.

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## Policy on the Status of Probation

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Probation is a public status signifying that the New England Commission of Higher Education has found that the institution fails to meet one or more *Standards for Accreditation* and that the Commission believes the problems can be remedied within a specified time period not to exceed two years.

An institution is placed on probation by action of the Commission. Prior to taking this action, having determined there is reason to believe that the institution may not meet one or more of the *Standards for Accreditation*, the Commission will provide an opportunity for the institution to show cause why it should not be placed on probation. Failing to show cause, the institution may appeal the Commission's action, in keeping with established procedures. In the show-cause opportunity and any appeal, the burden of proof shall rest with the institution. Until final action is taken on the appeal, the institution's status is unaffected. If the institution appeals and the appeal is denied, probation is effective from the date of the Commission action.

The Commission makes probation public when the decision is final (i.e., when the institution does not appeal or when the appeals process is completed and the decision is upheld). The Commission, at its discretion, may make probation public before the decision is final or the appeal is completed. In so doing, the Commission will provide information about the appeal process.

An institution on probation must take appropriate action to bring itself into compliance with the Commission's Standards within a time period specified by the Commission. Institutions for which the longest degree program is at least two years will have a maximum period of two years to come into compliance with Commission Standards; institutions for which the longest degree program is at least one year but less than two years will have a maximum of eighteen months. In placing an institution on probation, the Commission may specify a shorter period of time during which the institution must demonstrate it has come into compliance with the Standards or face the loss of its accreditation. If the institution does not come into compliance within the specified time period, the Commission will withdraw accreditation unless the Commission, for good cause, extends the period for achieving compliance. Institutions that come into compliance within the time period specified will be removed from probation.

An institution holding probationary status is subject to close scrutiny by the Commission to assess its efforts in remedying those concerns which led to probation. Should the Commission find that conditions have deteriorated to the extent that the institution cannot come into compliance within the specified period, it will take an action withdrawing accreditation unless the Commission, for good cause, extends the period for achieving compliance.



Probation is a public status indicated in any Commission publication or communication about the affected institution. Within 30 days of the final decision to place an institution on probation, the Commission will notify the U.S. Secretary of Education, appropriate state agencies, and appropriate accrediting agencies of this decision. The Commission will also provide on its website and in its relevant publications notice of the availability of a statement regarding the institution's probationary status as well as a plan to monitor the institution. This statement will be developed by the Commission in consultation with the institution. However, the Commission reserves the right to make final determination as to its nature and content.

An institution on probation is obliged to disclose its status as well as the availability of additional information on its probationary status to prospective students, those currently enrolled, and the public, on its website, in its catalog, and in all recruitment materials. The following statement is to be used:

\_\_\_\_\_ College/University is accredited on probation by the New England Commission of Higher Education, effective \_\_\_\_\_, because the Commission finds that the institution is in danger of losing its accreditation because it is not in compliance with the Standards for Accreditation. Of concern are accreditation standard(s) \_\_\_\_\_. A statement providing further information about the probationary status is available on the website of the New England Commission of Higher Education (<https://neche.org>).

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