Open Forum on Accreditation:
Why Now, Why Bother, Why Me?

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Why Now?
Our story thus far...
• Successful Focused Visit in 2005
• Successful Self-Study with Comprehensive Visit in 2011
• Albuquerque Site Visit in 2012
• Change in Criteria & Process in 2012
• Choice of Pathway
Under the old system called PEAQ (Program to Evaluate and Advance Quality)...

• Basic Components
  – Criteria for minimum standards of institutional quality
  – Self-Study
  – External Review
    • Visiting Team, Site Visit

• 10 Year Cycle and Timeline

• Distribution of Workload
# New Model

## Pathways for Reaffirmation of Accreditation*

<table>
<thead>
<tr>
<th>A</th>
<th>Pathways for Maintaining Accreditation</th>
<th>STANDARD PATHWAY</th>
<th>OPEN PATHWAY</th>
<th>AQIP PATHWAY</th>
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</thead>
</table>
| B | Who Participates                        | • Required for all institutions granted initial accreditation through the first ten years  
   • All accredited institutions that are not eligible for the other pathways  
   • Institutions that choose this pathway | All eligible institutions that elect to use this pathway | All eligible institutions that elect to use this pathway |
| C | How Pathway Assures Compliance with Criteria, Federal Requirements, Other Commission Policies | • Ten-year cycle  
   • Assurance Review and Comprehensive Evaluation with visit in Years 4 and 10 | Institutional Update Filing and Analysis | • Seven-year cycle  
   • Periodic Systems Appraisals and Quality Checkup Visit |
|   |                                         | • May require interim reports and focused visits  
   • Follows standard Commission policies and practices on institutional change | • May require interim reports  
   • Follows standard Commission policies and practices on institutional change | • May require interim reports and focused visits  
   • Follows standard Commission policies and practices on institutional change |
| D | How Pathway Encourages Improvement      | Improvement is aligned with Assurance Argument | Quality Initiative between Years 5-9  
   • Initiative approval at launch of Initiative  
   • Report review at conclusion (no visit) | Improvement-focused Action Projects and Strategy Forums |
| E | Role of Peer Reviewers                  | Corps of trained and experienced professionals serve as peer reviewers and decision makers in these processes |
Why Open Pathways?

• Note, not every institution is eligible. You must be...
  o Accredited for at least 10 yrs
  o Not undergone change of control, structure, organization in last 5 years
  o No extensive history of commission monitoring, multiple focused visits
  o Not undergoing dynamic change in enrollment, student body, open/closing of multiple locations,
  o No significant commission concerns (e.g., ongoing leadership turnover, extensive review by government agency; problematic patterns in financial, nonfinancial indicators
Open Pathways Reflects a Different Philosophy

• Multiple ‘contacts’ during 10 year cycle
• All pathways use same (but revised) criteria, but Open Pathways assumes compliance, putting the emphasis on advancement
• Requires substantive institutional change effort
• Requires annual institutional updates
• Could involve external monitoring or consignment to Standard Pathway
• Electronic submission of materials via a standardized template
• Shorter narratives, greater emphasis on evidence, 1 picture
Master Chart of the Open Pathway Ten-Year Cycle

This chart outlines the cycle for the major components of the Open Pathway—Assurance and Improvement. The chart does not reflect any monitoring that may be required by some component of the Assurance Review, by Commission policy, or by institutional change requests.

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<th>Year 4</th>
<th>Year 5</th>
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<th>Year 8</th>
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<td>Year 6</td>
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<td>Year 8</td>
<td>Year 9</td>
<td>Assurance Filing (Assurance Argument and Evidence File); Federal Compliance Requirements*</td>
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<tr>
<td>Commission Decision-Making</td>
<td>Action to Accept Assurance Review*</td>
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Key

- Yellow: Documents filed electronically by the institution
- Pink: Action does not include a visit
- Blue: Review includes a visit
- Blue: Commission actions

Notes

1. The chart applies to institutions eligible for the Open Pathway (see page 3).
2. Some institutions may also file materials for multi-campus review.
3. The chart may require a visit to explore uncertainties in evidence that cannot be resolved at a distance.
4. Certain team recommendations may require IAC action.
5. Action on the Year 10 review will also determine the institution's future Pathway eligibility.
Why Bother?

What are the benefits?
Who cares?
What is at stake?
Why worry?
What are the benefits of accreditation?

• Public certification of institutional quality and promise of continuing quality
  • Assurances for governing bodies (trustees, state and federal government), peer/aspirant institutions, parents, students, employers, graduate schools

• Institutional, peer control over the definition of quality, process of demonstrating it

• Opportunities and incentives for institutional benchmarking, self-improvement
Who Cares?
(the stakeholders)
Who cares?
A bit more about who cares...and why!
What is at stake?

• Increasing competition for scarce resources...
  o Well-prepared students
  o (Eligibility to receive) Title IV funds (federal financial aid)

• Definition of institutional quality, success; process of demonstrating it

• Reputation; allocation of institutional time and resources
  • consequences of focused visits, monitoring reports, failure to meet criteria....
What is at stake?

If we don’t define educational quality, others will...
(and accreditation is how we ‘push back’ or resist those efforts)
How to measure quality?
Voluntary accreditation puts this in our hands!

Colleges Need to Measure Quality Based on What Students Learn, Lumina Leader Says

Presidents Favor Accreditation and Graduation Rates to Measure Quality
Why worry? (...didn’t we breeze through our last accreditation visit?)

The 2011/2012 Re-accreditation “After Party”
Why Worry?

New Criteria

The Criteria for Accreditation
(with proposed changes to the Assumed Practices and Obligations of Affiliation)

On February 24, 2012, the HLC Board of Trustees adopted new Criteria for Accreditation, Assumed Practices, and Obligations of Affiliation. The final versions appear in this booklet. They are effective for all institutions as of January 1, 2013.

In the past the Criteria for Accreditation had been reviewed in their entirety every five years. Beginning this year, the Board will consider adjustments to the Criteria, including the Assumed Practices, annually, usually with first reading in February and second reading in June.

Based on comments received from institutions and peer reviewers, certain Assumed Practices appeared to raise implementation questions. The Board considered these comments at its meeting on February 21-22 and accepted them on first reading. The proposed changes to the Assumed Practices that appear in this document. The Board also accepted for the first time a change to Institutional Obligation 13. The Commission invites comments on these changes before the Board takes final action at its meeting on June 27-28, 2013. Comments can be sent to policycompliance@hlc.org. Comments on these policies are due by May 6, 2013.

The New Criteria: An Overview

In its review of institutions, the Higher Learning Commission seeks a culture of aspiration and continual improvement rather than mere achievement of minimum requirements. It also seeks to acknowledge the great diversity of its member institutions. For these reasons it uses the term “criteria” rather than “standards.”

Prior to admission to candidacy for accreditation and again in applying for initial accreditation, an institution demonstrates that it meets the Commission’s Eligibility Requirements. The Eligibility Requirements and process for seeking status are available in a separate document.

The accreditation process is governed by the Criteria for Accreditation. Within the Criteria there are Criterion Statements and Core Components that ensure institutional effectiveness. Underlying the Criteria and Core Components is a set of assumptions shared by the community of practice within higher education and made explicit in the section on Assumed Practices.

Finally, the Commission articulates the requirement that they abide by Commission policies.

Guiding Values

The Criteria for Accreditation reflect a set of guiding values for institutional accreditation. The Commission articulates these guiding values so as to offer a better understanding of the Criteria and the intentions that underlie them. Institutions are not expected to address these values, they are offered as explanation.

The Criteria for Accreditation and Core Components

The Criteria are designed to seek evidence of continual improvement and aspiration on the part of member institutions rather than to define minimum qualifications. Each Criterion begins with a broad statement of Commission expectations related to the Criterion. The Core Components identify areas of particular focus within the Criterion. Some of these Core Components are further elaborated or explicated in sub-components. The sub-components are not comprehensive: they elaborate certain aspects of the Core Component that the Commission seeks to ensure are not overlooked, but they do not fully constitute the Component. Some of the Core Components do not have sub-components because such elaboration has not appeared necessary. An institution provides evidence with regard to those sub-components of the Core Components that are relevant to
The New Criteria

• What is different? (some examples)
  • Primacy of educational responsibilities over other interests
  • Accurate, full, consistent disclosure of information to students, the public, others
  • Systematic performance documentation and improvement
  • Use of assessment to improve student learning
  • Co-curricular programs appropriate to the institution, the mission, and its students
  • Student retention, persistence, and completion
  • Effective advising, preparation, and placement of students
The New Criteria

• What are they?
  
  • Criterion One. Mission: budgeting and planning align with mission, attention to diversity, commitment to the public good
  
  • Criterion Two. Ethical and Responsible Conduct: integrity, fair and ethical policies and procedures, clear representation to others, commitment to freedom of expression
  
  • Criterion Three. Teaching and Learning – Quality, Resources, and Support: appropriate degree programs, articulated learning outcomes, instructors and staff are accessible, support for learning and effective teaching, co-curricular programs that contribute to the educational experience (Inputs)
The New Criteria

• What are they?

• Criterion Four. Teaching and Learning – Evaluation and Improvement: regular program review, institution evaluates the success of its graduates, improvement through ongoing assessment for curricular and co-curricular programs, ongoing attention to retention, persistence and completion (Outputs)

• Criterion Five. Resources, Planning, and Institutional Effectiveness: sufficiency of resources, governance and administrative structure, systematic and integrated planning, improved performance
Why Me?
What should I care?
What does this have to do with me?
Why Me?

• Because our accreditors require institution-wide involvement
  ◦ Meeting criteria demands evidence from all major divisions of the College

• Because assessing and using information about what students are learning demands input and involvement from
  ◦ Academic disciplines and programs (including the Core Curriculum program)
  ◦ Mission and Student Affairs units and programs

• New Component of Open Pathways: The Quality Initiative
Assessment of Student Learning Outcomes and You!

More than simply number-crunching!

• What do we expect our students to know, to be able to do, and to believe or value?

• How will we assess whether they do....?

• Are they doing well enough? Not well enough? Better than well enough?

• How could we improve things if they are not doing well enough, or barely well enough?

• Were our efforts to improve things successful?

Your help is valuable in answering any or all of these questions!
Stages in the “Lifespan” of Assessment Activities

“Infancy” (Core Curriculum)
- Develop Goals and Objectives
- Audit ‘Curriculum’
  - Where/how do we teach or provide instruction that addresses these?
- Plan, Develop, Select Assessment Methods
  - Assignments, “Tests”, Rubrics, Portfolios

“Adolescence”
- Assess, gather data concerning what students know, can do, and believe or value

“Maturity” (AA & MSA Programs)
- Interpreting, using assessment data to improve programs; assessing effects of attempts to “close the loop”
Why Me?

What is a Quality Initiative... and what does it have to do me?
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<td>Quality Initiative Proposal Filed (window of opportunity to submit)</td>
<td>Quality Initiative Proposal Reviewed</td>
<td>Quality Initiative Report Filed</td>
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- **Medium Blue** review includes a visit
- **Deep Blue** Commission actions

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Quality Initiative

• Requirements
  o Sufficient scope and significance
  o Clarity of purpose and goals
  o Evidence of Commitment to/Capacity for Accomplishing the Initiative
  o Appropriate Timeline

• Possible Topics?
  o Technology
  o Retention
  o Diversity

• How Can you Help?
Looking Ahead

• What’s next?
• When will these milestones occur?
• How can I help?
Timeline: The Big Picture

- Assurance Review
  - Fall 2015
- Quality Initiative Proposed/Accepted
  - Fall 2016
- Quality Initiative Submitted/Reviewed
  - By Fall 2019
- Assurance Review, Comprehensive Evaluation, Site Visit
  - Fall 2021
Timeline: Preparation for the First Milestone

**Fall 2013**
- Open Forum
- Move Existing Evidence to Online
- Curriculum Audit Core Program
- Other Programs ‘Close the Loop’

**Spring 2014**
- Appoint Criterion Chairs
- Jeff, Ray, Chairs attend HLC mtg
- Chairs Recruit Team
- Begin Core Assessment
- Others Close Loop

**Summer 2014**
- Chairs, Team, Ray draft Assurance Argument; Identify Gaps in Evidence

**Fall-Spring 2014-15**
- Chairs, Team, Ray Gather Additional Evidence; Revise Assurance Argument
- Continue Assessment of Core Curriculum and Closing Loop

**Fall 2015**
- Assurance Argument Completed
- Evidence “Unlocked” and Reviewed by HLC

Timeline: Preparation for the First Milestone
How can you help?

• You should **know**...
  o What “Open Pathways” is, when the major milestones occur, and how you can contribute
  o Why accreditation matters; what is at stake

• You should **do** the following:
  o Attend, or at least attend to, future accreditation events, publications, presentations
  o Meet with colleagues in your program to discuss your assessment findings and to plan ways to use the information to improve your program
  o Assist in implementing your programs efforts to improve student learning and/or to assess the effects of such efforts
  o (If teaching core curriculum courses)...participate in efforts to plan and assess core program

• You should **believe**...
  o That your input is valuable and that the effort is worthy of some of your time and energy
Want to Know More?

- Higher Learning Commission Home
- Open Pathways Model
- Criteria for Accreditation