

U.S. Department of Education

**Staff Report
to the
Senior Department Official
on
Recognition Compliance Issues**

RECOMMENDATION PAGE

1. **Agency:** Joint Review Committee On Education In Radiologic Technology (1957/2006)
(The dates provided are the date of initial listing as a recognized agency and the date of the agency's last grant of recognition.)
2. **Action Item:** Petition for Continued Recognition
3. **Current Scope of Recognition:** The accreditation of education programs in radiography, magnetic resonance, radiation therapy, and medical dosimetry, including those offered via distance education, at the certificate, associate, and baccalaureate levels.
4. **Requested Scope of Recognition:** Same as above.
5. **Date of Advisory Committee Meeting:** December, 2011
6. **Staff Recommendation:** Continue the agency's current recognition and require the agency to come into compliance within 12 months, and submit a compliance report that demonstrates the agency's compliance with the issues identified below.
7. **Issues or Problems:**
 - The agency must demonstrate that its appeals panel members are qualified for their role [§602.15(a)(2)].
 - The agency must demonstrate that its appeals panel includes both educators and practitioners [§602.15(a)(4)].
 - The agency must demonstrate effective application of its new review and approval procedures of substantive changes for free-standing programs. The agency must also demonstrate that approval by the

recognized decision-making body is required before a substantive change is included in the free-standing program's grant of accreditation [§602.22(a)(1)].

- The agency must amend its policy to clearly require a new comprehensive evaluation of a program in response to the extensive substantive change conditions or circumstances as defined by the agency [§602.22(a)(3)].
- The agency must provide documentation of the review and evaluation of programs using the revised public disclosure policy [§602.23(e)].
- The agency must revise its policy to require the submission of a teach-out plan for the specific events required by this section [§602.24(c)(1)].
- The agency must demonstrate that it has procedures in place for the review of teach-out plans to ensure for the equitable treatment of students [§602.24(c)(2)].
- The agency must demonstrate that it has procedures and agency-developed criteria in place for the review of teach-out agreements as required by this section [§602.24(c)(5)].
- The agency must provide documentation to demonstrate that the agency does not grant initial or renewal of accreditation to a program that is subject to a negative action by another body as required by this section, or indicate that it has not had the opportunity to do so [§602.28(b)].
- The agency must provide documentation to demonstrate that the agency initiates a review of a program when the agency learns that the program is subject to an adverse action by another body, as listed in this section [§602.28(d)].

EXECUTIVE SUMMARY

PART I: GENERAL INFORMATION ABOUT THE AGENCY

The Joint Review Committee on Education in Radiologic Technology (JRCERT) is both a programmatic and institutional accrediting agency for radiography, magnetic resonance, radiation therapy, and medical dosimetry.

The agency was established as a joint effort of the American Society of Radiologic Technologists (ASRT) and the American Medical Association's Council on Medical Education and Hospitals. In 1976, these organizations delegated responsibility for allied health educational accreditation to the Committee on Allied Health Education and Accreditation (CAHEA), the umbrella agency that encompassed JRCERT. When CAHEA dissolved in 1994, JRCERT became an autonomous accrediting agency with responsibility for the accreditation of radiography and radiation therapy education programs.

The agency accredits programs of higher education that are based in hospitals and medical centers, and accreditation of those programs (technically, the hospitals and medical centers offering those programs) is a required element enabling them to establish eligibility to participate in programs under Title IV of the Higher Education Act, as amended (HEA). Consequently, the agency must meet the requirements under the separate and independent provisions of the Secretary's criteria, or must seek and receive a waiver of those requirements.

JRCERT currently accredits 734 programs in 49 states, the District of Columbia, and Puerto Rico. Of these 734 programs, approximately 200 are housed in institutions not accredited by other national accrediting agencies recognized by the Secretary. Approximately 37 of these programs participate in the Title IV funding program.

In conjunction with the current review of the agency for continued recognition, Department staff reviewed the agency's petition, supporting documentation, observed an eMeeting of the agency's board of directors on August 2, 2011, and observed a meeting of the agency's board of directors meeting on October 14, 2011.

Recognition History

The U.S. Commissioner of Education first recognized JRCERT in 1957 (in cooperation with CAHEA) for its accreditation of radiologic technologist programs. Recognition for its accreditation of radiation therapy technologist programs was extended in 1973. The agency has continued to receive renewal of recognition since that time.

After the June 2006 meeting of the National Advisory Committee on Institutional Quality and Integrity (Committee), the Secretary renewed the recognition of the JRCERT for a period of five years, revised the language of its existing scope, granted an expansion of scope to include medical dosimetry, and deferred a decision on including distance education in the agency's scope of recognition until the agency could demonstrate that it has and applies clear written policies, procedures, and interpretive criteria in comprehensive evaluations of programs offered by distance education.

The agency submitted additional information in June 2007 on its evaluation of programs offered via distance education. After the December 2007 meeting of the National Advisory Committee on Institutional Quality and Integrity (Committee), the Secretary granted an expansion of scope to include programs offered via distance education.

PART II: SUMMARY OF FINDINGS

§602.15 Administrative and fiscal responsibilities

The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition.

The agency meets this requirement if the agency demonstrates that--

(a) The agency has--

(2) Competent and knowledgeable individuals, qualified by education and experience in their own right and trained by the agency on their responsibilities, as appropriate for their roles, regarding the agency's standards, policies, and procedures, to conduct its on-site evaluations, apply or establish its policies, and make its accrediting and preaccrediting decisions, including, if applicable to the agency's scope, their responsibilities regarding distance education and correspondence education;

Board of directors: The board of directors is both the policy- and decision-making body of the agency. The agency's bylaws specifically define the qualifications of each seat on the board of directors, thus ensuring that it includes academicians, administrators, educators, practitioners, and public members. However, the agency did not provide any documentation to demonstrate that each director met the qualifications of his/her seat.

The agency demonstrated that it provides training to directors regarding their role and responsibilities, as well as the standards, policies, and procedures of the agency. As indicated in the narrative and documentation, this training is accomplished through an orientation with the chief executive officer, review of the agency's board of directors manual, mentoring with a current director, attendance at a board meeting and accreditation seminar, and observation of on-site evaluations. However, the agency has not demonstrated that its directors are specifically trained on their responsibilities regarding programs offered via distance education.

Appeals panel members: The agency did not provide any information or documentation concerning the qualifications, selection, and training of appeals panel members.

Site visitors: The agency has a list of minimum qualifications, which include specific credentials and professional experience, for site visitors and requests information about those qualifications on its site visitor application (in Section 602.15(a)(3)). The qualification requirements include education and/or experience as an administrator or educator, and provides the agency's definition of a practitioner.

The agency demonstrated that it provides comprehensive and ongoing training to site visitors regarding their role and responsibilities, as well as the standards, policies, and procedures of the agency. This training is accomplished through attendance at a site visitor training workshop, observation of a site visit, and participation in a training webinar. The agency also has a comprehensive evaluation process for site visitors, to include the evaluation by other site visit team members and the visited programs. The agency provided documentation that site visitor evaluations are reviewed by the board of directors annually for re-appointment.

With regards to distance education, the agency states that it specifically recruits individuals with that experience as site visitors and assigns them to review those programs. In addition, the agency provides specific training to all site visitors on its standards and expectations for distance education programs. Although the agency provided a blank site visitor application and a completed site visitor information update form indicating distance education experience, the agency did not provide evidence of distance education expertise nor of what qualifications are required to be a distance education site visitor for the agency.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that its board of directors are qualified for their role, and trained on their responsibilities regarding distance education programs. The agency must also demonstrate that its site visitors are qualified to evaluate distance education programs. It must demonstrate that appeals panel members are qualified and trained, as required by this section.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency demonstrated via curricula vitae that its directors are qualified by education and experience for their role, and provided documentation that each director met the qualification of his/her seat. The agency also demonstrated that its directors are specifically trained on their responsibilities regarding programs offered via distance education, which is accomplished via regular and on-going in-service training sessions. Department staff observed the distance education in-service training session at the October 14, 2011, board of directors meeting.

Although the agency provided its policy (10.100) and additional information and documentation regarding the appeals panel composition, selection process, and training (in this section and in Section 602.25(f)), the agency did not provide documentation to demonstrate that the appeals panel members are qualified for their role, such as curricula vitae for current appeals panel members.

With regards to distance education, the agency provided the updated policy regarding site visitor qualifications, to include specific requirements to be qualified as a distance education site visitor. The agency also provided a completed and newly implemented site visitor application and resume in this section, as well as evidence of a site visit conducted by qualified individuals (in Section 602.16(b) & (c)) to demonstrate distance education expertise on its site

visit teams.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that its appeals panel members are qualified for their role.

(4) Educators and practitioners on its evaluation, policy, and decision-making bodies, if the agency accredits programs or single-purpose institutions that prepare students for a specific profession;

Although the agency states that it meets this section of the Secretary's Criteria, it has not provided sufficient information or documentation to demonstrate compliance.

Specifically, the agency provided a list of the current board of directors, however, it is not clear that there are both educators and practitioners included. The list does not indicate the seat on the board of directors for each individual, and no other documentation was provided to demonstrate representation by educators and practitioners personnel, as required by the agency's bylaws.

Although the agency provided the policy relating to the appeals panel composition in Section 602.15(a)(4), the agency has not demonstrated that its appeals panel includes both educators and practitioners, if the agency is serving as a programmatic accreditor for the program under appeal.

In regards to site visitors, the agency included the required qualifications, to include experience as an educator and/or practitioner, in Section 602.15(a)(2). The agency provided documentation, via its listing of site visitors, that its site visitor pool includes both educators and practitioners. Although the agency provided site visit planning documentation, it is not clear how the agency ensures representation by both educators and practitioners during an on-site evaluation, if the agency is serving as a programmatic accreditor for the program under review.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that its board of directors, site visitors, and appeals bodies include both educators and practitioners.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided a list of the current board of directors, noting educator and practitioner personnel represented, and the curricula vitae to document that experience. Although the current board membership fulfills the representative categories required by regulation, the agency has assigned more than one category or role to each director. The Department expects that one director fulfills one category or role at a time except under unusual circumstances.

In regards to the appeals panel composition, the agency provided the revised policy to clearly require both educator and practitioner representation, if the agency is serving as a programmatic accreditor for the program under appeal. However, the agency did not provide documentation to demonstrate that its appeals panel includes members from the appropriate categories, such as curricula vitae for current appeals panel members.

The agency also demonstrated that its site visit teams for programs include both educator and practitioner representation. Specifically, the agency provided the Accreditation Services Coordinator Procedure Manual which includes the requirement of both educator and practitioner representatives on its site visit teams. The agency also provided documentation to demonstrate that its site visitor pool includes members from the appropriate categories. In Section 602.17(c), the agency provided documentation to demonstrate that its site visit teams includes members from the appropriate categories.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that its appeals panel includes both educators and practitioners.

§602.22 Substantive change.

(a) If the agency accredits institutions, it must maintain adequate substantive change policies that ensure that any substantive change to the educational mission, program, or programs of an institution after the agency has accredited or preaccredited the institution does not adversely affect the capacity of the institution to continue to meet the agency's standards. The agency meets this requirement if--

(1) The agency requires the institution to obtain the agency's approval of the substantive change before the agency includes the change in the scope of accreditation or preaccreditation it previously granted to the institution; and

The agency provided its written policies and procedures (11.400) regarding substantive changes, which appear to be applicable to all programs and not solely freestanding programs.

The policy does not require a program to obtain the agency's (decision-making body's) prior approval of a substantive change. In addition, the policy and procedures do not provide the agency with the option to deny a substantive change should it determine that the proposed substantive change would adversely affect the capacity of the program to continue to meet the agency's standards. Instead, the procedures only provide the agency the options of maintaining the current accreditation status or initiating the accreditation process

prior to the expiration of the grant of accreditation.

The agency's procedures also are not comprehensive nor detailed as to the agency's expectation for submitting notification of a substantive change. And, the documentation did not demonstrate that the agency has clearly defined the review process and consistently followed procedures in this area.

The agency did not provide any examples to verify the process for review and approval of a variety of substantive change types to demonstrate compliance with this section.

Staff determination: The agency does not meet the requirements of this section. It must amend and clarify its substantive change policies and procedures to reflect that decisions made by the recognized decision-making body are required before the change is included in the program's grant of accreditation, and demonstrate effective application of its review and approval procedures.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided its revised substantive change policy and procedures. The revised policy requires a program to obtain the agency's approval of a substantive change prior to implementation, with the exception of a change of ownership, and provides the agency the option to approve or deny a proposed substantive change. The agency also provided documentation that it has notified its membership of this policy change.

However, the agency did not provide information or documentation that the agency has procedures concerning substantive changes that are comprehensive and detailed. Although the agency provided substantive change examples (in this section and Section 602.22(a)(2)(i-vii)), those examples are from the previous substantive change policy and procedures, and do not demonstrate that the agency has a clearly defined review process to ensure that procedures are consistently followed.

In addition, the examples provided do not demonstrate that the agency (decision-making body) provides that approval prior to inclusion in the program's previously granted scope of accreditation, even though the revised substantive change policy requires it. Specifically, those examples indicate that agency staff is granting the initial approval of the substantive change and the board is only reviewing the accreditation status in light of the substantive change(s).

Staff determination: The agency does not meet the requirements of this section. It must demonstrate effective application of its new review and approval procedures of substantive changes for free-standing programs. The agency must also demonstrate that approval by the recognized decision-making body is required before a substantive change is included in the free-standing program's grant of accreditation.

(3) The agency's substantive change policy must define when the changes made or proposed by an institution are or would be sufficiently extensive to require the agency to conduct a new comprehensive evaluation of that institution.

The agency's written substantive change policy (11.400) provides for the determination that a comprehensive evaluation of a program is warranted. However, the agency has not clearly identified what conditions or circumstances would suggest that the program would require a new review and grant of accreditation. In addition, the agency did not provide any documentation that this policy has been implemented.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that it has defined when the changes made or proposed by a program are or would be sufficiently extensive to require the agency to conduct a new comprehensive evaluation of that program, and provide evidence of policy implementation.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided its revised policy to include its requirement for a comprehensive on-site review. The revised policy clearly identifies the extensive substantive change conditions or circumstances that suggest that a program would require a new on-site review. However, it is unclear whether the agency requires a full comprehensive evaluation (i.e. self-study, on-site review, and new grant of accreditation), as required by this section of the criteria.

The agency indicated that it has not had an opportunity to enforce this policy, and therefore could not provide documentation of its implementation.

Staff determination: The agency does not meet the requirements of this section. It must amend its policy to clearly require a new comprehensive evaluation of a program in response to the extensive substantive change conditions or circumstances as defined by the agency.

§602.23 Operating procedures all agencies must have.

(e) The accrediting agency must provide for the public correction of incorrect or misleading information an accredited or preaccredited institution or program releases about—

(1) The accreditation or preaccreditation status of the institution or program;

(2) The contents of reports of on-site reviews; and

(3) The agency's accrediting or preaccrediting actions with respect to the institution or program.

The agency requires the accurate disclosure of program information with its Standard One, and provided documentation of review of that Standard by the agency. What is not clear is that the agency has policies and procedures regarding its responsibility to provide for the public correction of incorrect or misleading information. The agency must have policies and procedures in place to provide for public correction when it finds that a program releases incorrect or misleading information, and demonstrate enforcement of those policies and procedures.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that it has public correction policies and procedures that meet the requirements of this section, and must provided evidence of enforcement of those policies and procedures.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided its revised public disclosure policy. The policy now includes the requirement that if a program elects to publicly disclose information covered by this section of the criteria, the information must be accurate, and requires the public correction of any incorrect or misleading information. As this policy is new, the agency could not provide documentation of implementation. It is reasonable to expect that the agency may be able to document its application of this revised policy in the upcoming year.

Staff determination: The agency does not meet the requirements of this section. It must provide documentation of the review and evaluation of programs using the revised public disclosure policy.

§602.24 Additional procedures certain institutional accreditors must have.

If the agency is an institutional accrediting agency and its accreditation or preaccreditation enables those institutions to obtain eligibility to participate in Title IV, HEA programs, the agency must demonstrate that it has established and uses all of the following procedures:

(c) Teach-out plans and agreements.

(1) The agency must require an institution it accredits or preaccredits to submit a teach-out plan to the agency for approval upon the occurrence of any of the following events:

(i) The Secretary notifies the agency that the Secretary has initiated an

emergency action against an institution, in accordance with section 487(c)(1)(G) of the HEA, or an action to limit, suspend, or terminate an institution participating in any title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA, and that a teach-out plan is required.

(ii) The agency acts to withdraw, terminate, or suspend the accreditation or preaccreditation of the institution.

(iii) The institution notifies the agency that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program.

(iv) A State licensing or authorizing agency notifies the agency that an institution's license or legal authorization to provide an educational program has been or will be revoked.

The agency provided its policies and procedures (12.200) regarding teach-out agreements, which includes the specific events required by this section. It does not appear that the agency has any policies or procedures regarding the requirement to submit teach-out plans.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that it has policies and procedures in place to require the submission of a teach-out plan for the specific events required by this section.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency revised its policy to include teach-out plans. However, the revised policy does not include all of the specific events to trigger the submission of a teach-out plan as required by this section. Specifically, the policy does not require a teach-out plan to be submitted when the Secretary notifies the agency that the Secretary has initiated an emergency action against an institution, OR an action to limit, suspend, or terminate an institution participating in any Title IV funding program and that a teach-out plan is required. While the agency has correctly identified actions to limit, suspend, or terminate participation in Title IV funding programs, the requirement also includes emergency actions that may include withholding funds from the institution or its students and withdrawing the institution's authority to obligate funds under any program under this title, if the Secretary—

(i) receives information, determined by the Secretary to be reliable, that the institution is violating any provision of this title, any regulation prescribed under this title, or any applicable special arrangement, agreement, or limitation,

(ii) determines that immediate action is necessary to prevent misuse of Federal funds, and

(iii) determines that the likelihood of loss outweighs the importance of applying the procedures for an adverse action.

The agency indicated that it has not had an opportunity to require the

submission of a teach-out plan.

Staff determination: The agency does not meet the requirements of this section. It must revise its policy to require the submission of a teach-out plan for the specific events required by this section.

(2) The agency must evaluate the teach-out plan to ensure it provides for the equitable treatment of students under criteria established by the agency, specifies additional charges, if any, and provides for notification to the students of any additional charges.

The agency provided its policies and procedures (12.200) regarding teach-out agreements. However, the agency has not demonstrated that it has procedures and agency-developed criteria in place for the review of teach out plans. Procedures are expected to include, for example, guidance to the program on what is to be included in the plan, and agency-developed criteria by which it reviews and approves the plan - only after assessing the viability of the plan with regard to providing equitable treatment of students, any additional charges projected, and the plans to provide notification to the students of those charges.

In addition, the agency did not provide any documentation to demonstrate the review of a teach-out plan to ensure the equitable treatment of students under criteria established by the agency, nor indicate that it has not had the opportunity to apply this policy.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that it has procedures and agency-developed criteria in place for the review of teach-out plans, and provide any documentation to demonstrate the review of a teach-out plan to ensure the equitable treatment of students under criteria established by the agency.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency revised its teach-out policies to require that JRCERT review the plan to ensure the equitable treatment of students as required by this section.

Although the agency indicated that it has not had an opportunity to evaluate a teach-out plan, the agency still has not demonstrated that it has procedures in place for the review of teach-out plans, should the agency need to apply the policy in the future.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that it has procedures in place for the review of teach-out plans to ensure for the equitable treatment of students.

(5) The agency must require an institution it accredits or preaccredits that enters into a teach-out agreement, either on its own or at the request of the agency, with another institution to submit that teach-out agreement to the agency for approval. The agency may approve the teach-out agreement only if the agreement is between institutions that are accredited or preaccredited by a nationally recognized accrediting agency, is consistent with applicable standards and regulations, and provides for the equitable treatment of students by ensuring that--

(i) The teach-out institution has the necessary experience, resources, and support services to--

(A) Provide an educational program that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the institution that is ceasing operations either entirely or at one of its locations; and

(B) Remain stable, carry out its mission, and meet all obligations to existing students; and

(ii) The teach-out institution demonstrates that it can provide students access to the program and services without requiring them to move or travel substantial distances and that it will provide students with information about additional charges, if any.

The agency's teach-out agreement policies (12.200) state that a program must submit a teach-out agreement for approval and that JRCERT will review and approve a teach-out agreement using the criteria regarding the equitable treatment of students, as required by this section.

Currently, the agency's policy states that it will approve teach-out agreements between programs that are "accredited by an agency recognized by the United States Department of Education or the Council for Higher Education or equivalent". This section of the criteria is directed specifically toward gatekeepers for Title IV purposes; the term "nationally recognized accrediting agency" is, therefore, defined as one that is recognized by the U.S. Department of Education. Teach-out agreements with a program that may have accreditation by an accreditor recognized by another organization, but not a USDE-recognized accreditor, cannot be accepted. The agency must limit its approval to only agreements between programs that are accredited or preaccredited by a USDE-recognized accrediting agency, as required by this section.

Although the agency indicated in Section 602.24(c)(1) that it has not had the occasion to apply its teach-out agreement policy, it did not provide evidence that the agency has specific protocols in place to review and approve a teach-out

agreement against agency-established criteria, should the agency need to apply the policy in the future. For example, the agency has not addressed how it will assess the stability and ability of the teach-out program to meet its obligations with the expansion of its delivery.

Staff determination: The agency does not meet the requirements of this section. It must amend its teach-out agreement policy to only include the approval of an agreement between programs that are accredited or preaccredited by a USDE-recognized accrediting agency, as required by this section. In addition, the agency must provide documentation of its review and approval process for teach-out agreements.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency revised its teach-out policies to only include the approval of a teach-out agreement between programs that are accredited or preaccredited by a U.S. Department of Education-recognized accrediting agency.

Although the agency indicated that it has not had an opportunity to evaluate a teach-out agreement, the agency still has not demonstrated that it has procedures and agency-developed criteria in place for the review of teach-out agreements in accordance with this section, should the agency need to apply the policy in the future.

Staff determination: The agency does not meet the requirements of this section. It must demonstrate that it has procedures and agency-developed criteria in place for the review of teach-out agreements as required by this section.

§602.28 Regard for decisions of States and other accrediting agencies.

(b) Except as provided in paragraph (c) of this section, the agency may not grant initial or renewed accreditation or preaccreditation to an institution, or a program offered by an institution, if the agency knows, or has reasonable cause to know, that the institution is the subject of--

(1) A pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State;

(2) A decision by a recognized agency to deny accreditation or preaccreditation;

(3) A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; or

(4) Probation or an equivalent status imposed by a recognized agency.

The agency's policy (11.800) does not allow it to renew the accreditation of a program that is subject to a negative action by another body.

The policy includes the requirements of this section that it will not grant renewed accreditation to a program that is subject to pending action brought by a State agency to suspend, revoke, withdraw, or terminate the program's legal authority to provide postsecondary education in the State; a pending action brought by a recognized accrediting agency to suspend, revoke, or terminate the program's accreditation or preaccreditation; or probation or an equivalent status imposed by a recognized agency.

However, the policy does not state that the agency will not renew accreditation to a program that has been denied accreditation by a recognized agency or denied legal authority by a State agency. In addition, the policy does not state that the agency will not grant initial accreditation to a program subject to any negative action defined by this section by another agency (State or accrediting).

In addition, the agency did not provide any examples to demonstrate compliance with this section, or indicate that it has not had the opportunity to do so.

Staff determination: The agency does not meet the requirements of this section. It must amend its policy to clearly state that agency will not grant initial accreditation to a program subject to a negative action by another agency (State or accrediting), nor renew accreditation to a program that has been denied accreditation by a recognized agency or denied legal authority by a State agency. It must also provide documentation to demonstrate that the agency does not grant initial or renewed accreditation to a program that is subject to a negative action by another body as required by this section, or indicate that it has not had the opportunity to do so.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency revised its policy regarding the negative actions of State agencies and other accrediting agencies to include all the requirements of this section. Specifically, the policy now states that JRCERT will not renew accreditation to a program that has been denied accreditation by a recognized accrediting agency or denied legal authority by a State agency, and will not grant initial accreditation to a program subject to any negative action by a State or accrediting agency. The agency may choose to grant initial or renewal of accreditation after review of a program that is the subject of a probationary action, as noted in Section 602.28(c).

Although the agency provided an example of notification of a pending decision by a recognized agency to deny accreditation and JRCERT's response, this documentation does not demonstrate that the agency does not grant initial or renewed accreditation to a program that is subject to a negative action by another body as required by this section.

Staff determination: The agency does not meet the requirements of this section.

It must provide documentation to demonstrate that the agency does not grant initial or renewal of accreditation to a program that is subject to a negative action by another body as required by this section, or indicate that it has not had the opportunity to do so.

(d) If the agency learns that an institution it accredits or preaccredits, or an institution that offers a program it accredits or preaccredits, is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, the agency must promptly review its accreditation or preaccreditation of the institution or program to determine if it should also take adverse action or place the institution or program on probation or show cause.

The agency's policy (11.800) requires it to initiate a review of a program when the agency learns that the program is subject to an adverse action by another body, as listed in this section. The agency needs to provide evidence of its application of this policy, or indicate that it has not had occasion to apply it.

Staff determination: The agency does not meet the requirements of this section. It must provide evidence of its application of this policy, or indicate that it has not had occasion to apply it.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency stated that it has not had the opportunity to implement its policy to initiate a review of a program when the agency learns that the program is subject to an adverse action by another body, as listed in this section.

However, the agency provided documentation of a program subject to an adverse action by a recognized agency and JRCERT's response in Section 602.28(b). Although JRCERT contacted the program regarding the adverse action, the documentation in this example does not demonstrate that the agency initiated a review of the program when the agency learned that the program was subject to an adverse action by another accrediting agency.

Staff determination: The agency does not meet the requirements of this section. It must provide documentation to demonstrate that the agency initiates a review of a program when the agency learns that the program is subject to an adverse action by another body, as listed in this section.

PART III: THIRD PARTY COMMENTS

The Department did not receive any written third-party comments regarding this agency.