

U.S. Department of Education

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

RECOMMENDATION PAGE

1. **Agency:** Puerto Rico State Agency for the Approval of Public Postsecondary Vocational, Technical Institutions and Programs (1983/2006)

(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. **Scope of Recognition:** State agency for the approval of public postsecondary vocational education.

4. **Date of Advisory Committee Meeting:** June, 2012

5. **Staff Recommendation:** Continue the agency's 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.

6. **Issues or Problems:** The agency must clarify its credit hour policy and its requirements for measurement of certificate programs. The agency still must describe and document the process it uses for approving programs at the associate degree level and certificate level, including not only how it establishes and evaluates the credit/clock hour requirements for the two types of programs, but also the process it uses for evaluating and approving proposed course requirements related to the two types of programs. ED staff emphasizes that the requirements of this section pertain to the agency's pre-approval process, rather than to the evaluation of programs that have already been approved and implemented. [603.24(a)(1)(iii)]

The agency must provide evidence of adequate funding to reimburse the expenses of its on-site evaluators. [603.24(a)(2)(ii)]

More information is still needed regarding how the site visitors are chosen, how long and how often they may serve, and how often they are trained and retrained. [603.24(a)(2)(iii)(A)]

More information is needed regarding the specific qualifications of the agency's seven consultants and how they are trained in agency processes and procedures. [603.24(a)(2)(iii)(B)]

More information is needed regarding the selection, terms, and training of the members of the agency's Advisory Board and Advisory Commission. More information is also needed regarding the authority of the Advisory Commission and the revisions to the agency's documents regarding the approval process, including the documents that are being revised, why they are being revised, and how their revision impacts the approval process. [603.24(a)(2)(iii)(C)]

The agency must more clearly define approval status, to include granting, reaffirming, revoking, denying, and reinstating approval status, and also describe in detail its procedures for granting, reaffirming, revoking, denying, and reinstating approval status. These definitions and processes must be in written (i.e., published) form and readily available to the agency's institutions, agency representatives, and the public. [603.24(a)(3)(i)]

The agency must amend its procedures to require that the self-study steering committee include the participation of the institution's governing body, and other appropriate constituencies and must provide evidence that it has amended its policies to require student participation on the committee. [603.24(a)(3)(ii)(A)]

The agency must provide a sample (complete) site team report, which follows the format described in the agency's materials, as well as more information on the qualifications of the on-site reviewers, as noted previously under 603.24(a)(2)(iii)(A). [603.24(a)(3)(ii)(B)]

The agency must provide additional information and documentation regarding the nature of its review cycle. [603.24(a)(3)(iii)]

The agency must amend its Advisory Commission bylaws to require the representation from public employment services and employers, employees, postsecondary vocational educators, students, and the general public, including minority groups, on its Advisory Commission. [603.24(b)(1)(i)]

The agency must document that it has an established procedure for notifying the public and other interested parties regarding proposed changes to its standards, as well as an established procedure for

allowing public comment prior to any changes being made to the standards. This process should be published in the agency's procedures manual. [603.24(b)(1)(iii)]

The agency must provide additional information as to how it reviews the information specified in its annual reports, including any benchmarks that the agency has established, as well as enforcement measures the agency takes based upon the annual reports. [603.24(b)(1)(iv)]

The agency must provide information and documentation as to how its pre-accreditation process encourages experimental and innovative programming at its institutions. [603.24(b)(1)(v)]

The agency must describe (and document) the process whereby a final decision is reached regarding the approval/accreditation of a program or institution. [603.24(b)(1)(vi)]

The agency must demonstrate that it has a formal process whereby it undertakes a review of its standards, policies, and procedures on a regular basis, soliciting feedback from appropriate constituent groups, including students and the public. [603.24(b)(1)(vii)]

The agency must provide more information and documentation as to how its decision-making body reviews the on-site review team's report, as well as other pertinent information, and makes an independent judgment of the quality of an institution or program. It must also provide information about how it guards against conflicts of interest involving an institution. [603.24(b)(1)(viii)]

The agency must still provide documentation of its review of an actual complaint to demonstrate that it follows its published procedures. [603.24(b)(1)(ix)]

The agency must provide information and documentation as to how it makes a report of its operations and a list of its approved institutions/programs available to the public via its web site since it lists this as its primary means of communicating this information. [603.24(b)(1)(x)]

The agency does not meet the requirements of this section. If the agency chooses to use an annual report as its means of requiring its institutions/programs to report on changes instituted to determine continued compliance with standards or regulations, then it should expand the scope of its report to require the submission of such information, rather than only using the report to collect outcomes data. The agency must address its requirements regarding special reports (presumably reports regarding substantive changes) in its procedures manual. The agency must provide information and documentation

regarding the special reports it requires. The agency must establish the dates covered by its annual report, as well as its submission deadline, in its procedures manual and should also provide the annual report form in the manual in order for institutions/programs to be aware of the report requirements on an ongoing basis. The agency must clarify how previous corrective actions (previous review findings or previous annual report findings) are to be addressed in the annual report or whether they are to be reported on in some other manner. The agency must also provide documentation related to corrective actions it has taken in response to information that was provided in its annual and special reports. [603.24(b)(1)(xi)]

The agency must document that it has established collegial relationships with counterpart agencies, either on the mainland or in PR, in order to confer, on a regular basis, about methods and techniques used by the agencies in addressing the agencies' similar responsibilities. [603.24(b)(1)(xii)]

The agency must submit further information about its requirements for on-site visit reports and documentation of an on-site review team report that is in accord with those requirements. [603.24(b)(2)(i)]

The agency must submit documentation of an on-site review team report. [603.24(b)(2)(ii)]

The agency must provide additional documentation regarding the institution's opportunity to comment upon the written report and to file supplemental materials pertinent to the facts and conclusions in the written report of the visiting team before the agency takes action on that report. [603.24(b)(2)(iii)]

The agency must document that it has procedures in place to provide the chief executive officer of the institution with a specific statement of reasons for any adverse action, and notice of the right to appeal such action before an appeal body designated for that purpose. It must also provide documentation demonstrating application of its procedures, or indicate it has not had an opportunity to apply them. [603.24(b)(2)(iv)]

The agency must document that it publishes rules of procedure regarding appeals related to adverse actions. [603.24(b)(2)(v)]

The agency must document that it continues the approval status of the institution or program pending disposition of an appeal and that this requirement is addressed in its procedures manual. [603.24(b)(2)(vi)]

The agency must document that it furnishes the chief executive officer of the institution or program with a written decision of the appeal body including a statement of its reasons for the decision and that this

requirement is addressed in its procedures manual. [603.24(b)(2)(vii)]

The agency must still provide evidence that it has and effectively applies policies and procedures for the review and determination of the reliability and accuracy of an institution's credit hour assignments. [603.24(c)(1)]

The agency must still provide evidence that it has and effectively applies policies and procedures for the review and determination of the reliability and accuracy of an institution's credit hour assignments. [603.24(c)(2)]

The agency must develop and demonstrate that it effectively applies policies related to credit hour review and their enforcement. [603.24(c)(3)]

As noted previously, the agency must develop and effectively apply policies related to credit hour review, enforcement and notification that include the requirement to notify the Department of any systemic noncompliance with the agency's credit hour policies on credit hour assignment. [603.24(c)(4)]

The agency must provide documentation regarding its requirements specifically related to promoting a well-defined set of ethical standards governing institutional or programmatic practices, including recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services. [603.24(d)(1)]

The agency must describe and document how it maintains appropriate review in relation to the ethical practices of each approved institution or program related to recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services. [603.24(d)(2)]

EXECUTIVE SUMMARY

PART I: GENERAL INFORMATION ABOUT THE AGENCY

The Puerto Rico State Agency for the Approval of Public Postsecondary Vocational, Technical Institutions and Programs (PRSAA) is the state agency in Puerto Rico for accrediting public postsecondary vocational education programs and institutions in the Commonwealth of Puerto Rico. The agency currently accredits programs located in seven vocational technical schools located in Puerto Rico, with one institution awaiting approval.

The agency approves institutions and programs in public postsecondary institutions that are legally authorized to offer postsecondary programs that have been operating for a minimum of two years. These institutions and programs award both Associate Degrees and Certificates, and admit as regular students only individuals with a high school diploma or its equivalent or who are above the compulsory school age to attend high school, which in Puerto Rico is 16 years of age.

Recognition History

The PRSAA was granted authority to approve public postsecondary vocational technical education institutions and programs in Puerto Rico in 1982 by Puerto Rico's Secretary of Education. The agency was granted initial recognition as a state approval agency by the U.S. Secretary of Education in 1983 and has received continued recognition since that time.

The agency was most recently reviewed at the Fall 2007 NACIQI meeting. Following that meeting, the Secretary concurred with the Committee's recommendation and granted the agency continued recognition for the maximum period of four years, with an interim report due by December 2008 addressing one finding. The agency submitted its interim report as requested, but the report was not considered since the NACIQI was not meeting at that time.

When the Committee reconvened in Fall 2010, it was decided by Department staff that the agency's interim report would not be reviewed as scheduled, due to the pending backlog of agencies with more serious issues. As a result, the agency was instead requested to submit a full petition for consideration at the current meeting.

PART II: SUMMARY OF FINDINGS

§603.24 Criteria for State agencies

The following are the criteria which the Secretary of Education will utilize in designating a State agency as a reliable authority to assess the quality of public postsecondary vocational education in its respective State.

(iii) Delineates the process by which it differentiates among and approves programs of varying levels.

The narrative for this section appears to indicate that the agency accredits both associate degree programs and certificate programs. However, no information has been provided regarding the certificate programs that the agency accredits. Neither does the agency's evaluation manual, submitted as documentation (Exhibit 20), indicate that the agency has separate approval processes tailored to the differences between these two different types of programs.

The agency states in its narrative that the "main difference, among others" in the approval process for the two types of programs lies in its new credit hour definition policy (Exhibit 26). The policy itself is very confusing. It defines a credit hour as not less than 1 hour of faculty instruction and two hours of outside student work for approximately 15 weeks. It then states that the work shall be carried out for a semester or a quarter or 10 to 12 weeks or the equivalent. It then specifies that the formula for a semester hour must include 37.5 clock hours of instruction, that the formula for a quarter hour must also include 37.5 clock hours of instruction, then states that the formula for a semester hour must include at least 25 hours of instruction. It is unclear why there are two different requirements for a semester hour, nor is it clear why the same formula is used (in one case) for both a semester hour and for a quarter hour.

In addition to the apparent discrepancies in the way the credit hour policy is written, it is also unclear how the policy may be interpreted as documenting that the agency has a program approval process in place that differentiates between associate degree programs and certificate programs. Presumably, associate degree programs have credit hour requirements and certificate programs have clock hour requirements, but no information is provided regarding the minimum credit hour or clock requirements for the two types of programs. Furthermore, no information is provided as to the process the agency uses to evaluate or approve proposed course requirements related to either type of program.

Staff determination: The agency does not meet the requirements of this section. The agency should clarify its credit hour policy. It must also describe and document the process it uses for approving programs at the associate degree level and the certificate level, including not only how it establishes and evaluates the credit/clock hour requirements for the two types of programs, but also the

process it uses for evaluating and approving proposed course requirements related to the two types of programs.

Analyst Remarks to Response:

In its response, the agency clarified its credit hour policy and submitted a revised Policy for the Definition of Credit Hours. The revised policy defines a credit hour as being equal to 37.5 hours of classroom instruction and outside work, including laboratory work, internships, and community service. There must be two hours of outside work for every hour of direct in-class faculty instruction for each week of the semester. While the agency’s basic definition of a credit hour is in accord with the regulatory definition in 34 CFR 600.2, it does not distinguish between semester hour and quarter hour credits nor specify the minimum number of weeks for each. In addition, it does not address how non-classroom instruction (laboratory work, internship, etc) is to be evaluated for equivalency to the basic definition. Furthermore, it includes a concept (37.5 clock hours of instruction is equal to a semester hour) that is applicable only to clock hour/credit hour conversion.

It is not clear whether the agency requires that certificate programs be measured in clock hours or credit hours, based upon the information provided.

The agency states in its response that the evaluation process for both degree and certificate programs are the same, but this appears to refer to the on-site evaluation process once a program is operational, rather than the approval process for reviewing/approving courses in a particular program prior to the program's establishment.

Staff determination: The agency does not meet the requirements of this section. The agency must clarify its credit hour policy and its requirements for measurement of certificate programs. The agency still must describe and document the process it uses for approving programs at the associate degree level and certificate level, including not only how it establishes and evaluates the credit/clock hour requirements for the two types of programs, but also the process it uses for evaluating and approving proposed course requirements related to the two types of programs. ED staff emphasizes that the requirements of this section pertain to the agency's pre-approval process, rather than to the evaluation of programs that have already been approved and implemented.

(ii) Receives adequate and timely financial support, as shown by its appropriations, to carry out its operations;

The agency provided copies of its budgets for the past two years. The unit's budget was virtually identical for the two years. However, the agency did see a \$10,000 increase in the area of membership fees and subscriptions from 2009-2010 to 2010-2011. Overall, the budget appears adequate to cover the agency's ongoing operations. However, the agency states under 603.24(a)(2)(iii)(A) that it needs additional funding to pay for the lodging, transportation, and bonuses of its on-site evaluators.

Staff determination: The agency does not meet the requirements of this section. The agency must provide evidence of adequate funding to reimburse the expenses of its on-site evaluators.

Analyst Remarks to Response:

In its response, the agency stated that it will request additional funds in its 2012-2013 budget to cover expenses for on-site evaluators. However, it appears that this request has not yet been approved, and no new documentation was provided.

Staff determination: The agency does not meet the requirements of this section. The agency must provide evidence of adequate funding to reimburse the expenses of its on-site evaluators.

(A) to participate on visiting teams,

The agency provided a directory of over 90 individuals (listed as evaluators) (Exhibit 7) who are school directors, postsecondary educators, university professors, and industry and labor professionals who, according to the agency's narrative:

- participate on visiting teams
- engage in consultative services for the approval process
- serve on decision-making bodies
- make revisions of the agency's documents regarding the approval process

It is unclear from either the narrative or the directory, however, how many of these people actually serve as site team representatives and how many might serve in the other capacities listed in the narrative. The agency's Evaluation Committee Manual (exhibit 20) lists the criteria for selection of members of the evaluation committee, and references required training. However, it is unclear how site team members apply or are chosen, how long and how often they serve, or how often they are trained or retrained.

Staff determination: The agency does not meet the requirements of this section. More information is needed regarding the size of the agency's site visit pool, as well as how site visitors are chosen, how long and how often they may serve, the nature of the training they receive, and how often they are trained and retrained.

Analyst Remarks to Response:

In its response, the agency clarified that the directory that was originally submitted lists its current site team evaluator pool, which includes approximately 80 potential site visitors from a variety of professional categories. The agency stated that the site visitor pool is reexamined periodically and that outreach efforts are made to recruit new members as needed. The agency provided a copy of the presentation that is used to train new site team members. Although the agency provided some additional information, it did not address all of the issues raised in the draft analysis.

Staff determination: The agency does not meet the requirements of this section. More information is still needed regarding how the site visitors are chosen, how long and how often they may serve, and how often they are retrained.

(B) to engage in consultative services for the evaluation and approval process, and

As noted in the previous section, the agency provided a directory of over 90 individuals, listed as evaluators, who are school directors, postsecondary educators, university professors, and industry and labor professionals who:

- participate on visiting teams
- engage in consultative services for the approval process
- serve on decision-making bodies
- make revisions of the agency's documents regarding the approval process

It is unclear from either the narrative or the directory, however, how many of the people listed in the resources directory as evaluators serve as consultants for the agency. It is also unclear how such consultants apply or are chosen, what types of services they provide, or how they are trained.

Staff determination: The agency does not meet the requirements of this section. More information and documentation is needed regarding the size of the agency's consultant pool, as well as how consultants apply or are chosen, what types of services they provide, and how they are trained.

Analyst Remarks to Response:

In its response, the agency provided a list of seven individuals who are identified by the agency to serve as technical consultants on a voluntary basis in areas related to program evaluation and trends in accreditation processes. No information was provided as to their specific qualifications or training.

Staff determination: The agency does not meet the requirements of this section. More information is needed regarding the specific qualifications of the agency's seven consultants and how they are trained in agency processes and

procedures.

(C) to serve on decision-making bodies.

As noted previously, the agency provided a directory of over 90 individuals, listed as evaluators, who are school directors, postsecondary educators, university professors, and industry and labor professionals who, according to the agency's narrative:

- participate on visiting teams
- engage in consultative services for the approval process
- serve on decision-making bodies
- make revisions of the agency's documents regarding the approval process

The information provided in the agency's narrative would appear to indicate that members of the agency's decision-making body should appear on the resource directory list referenced above. However, three of the five names provided on a list of advisory board members (Exhibit 23) do not appear to be listed in the agency's resource directory.

It is unclear from either the narrative or the directory how members of the agency's advisory board apply or are chosen, how long they may serve, or how often they are trained or retrained. Further, since the agency lists this group as an "advisory" board, it is unclear whether this group is truly a decision-making body, or if it instead provides recommendations that may be overturned by the state agency or another entity.

The Norms and Procedures Manual (Exhibit 20, p. 5) states that the agency "shall report the findings and recommendations [of annual follow-up visits] to the Advisory Board for the approval of those institutions and programs whose quality of educational services comply with the norms and requirements . . ." The agency provided copies of "referendums" (Exhibit 9) that appear to list corrective actions that will be required of schools that have recently undergone site reviews. There is a block on each form for the five advisory board members' signatures. However, it is unclear where the motions originated (with agency staff or with the on-site review team), whether there has been (or will be) be any board discussion of the motions, whether signatures constitute votes, or what impact these motions will have on the schools' accreditation status. In short, it is unclear from either the narrative or the documentation how the agency's advisory board operates or whether it is truly a decision-making body. Much more information is needed in this area.

ED staff also notes that the agency's narrative states that some of the members of its resource directory make revisions of the agency's documents regarding the approval process. More information is needed as to the documents that are being revised, why they are being revised, and how their revision impacts the approval process.

Staff determination: The agency does not meet the requirements of this section. More information is needed regarding the selection, terms, training, and role of the agency's advisory board and whether the board functions as the agency's decision-making body. More information is also needed regarding the revisions to the agency's documents regarding the approval process, including the documents that are being revised, why they are being revised, and how their revision impacts the approval process.

Analyst Remarks to Response:

In its response to this criterion and to 603.24(a)(3)(i), the agency clarified that its Advisory Board is the body tasked with analyzing the site team reports and taking accreditation actions and that the Advisory Commission assists in developing norms, standards, procedures, etc. It is not clear whether the Advisory Commission is a decision-making body. The agency provided its "decision-making bodies directory" (as an unnumbered exhibit), which is a list of 13 individuals, who appear qualified by virtue of their education and place of work. Five hold doctorates, and the rest hold master's degrees. Most are employed at universities. However, no information was provided as to the members' selection, terms, or training. Nor is it clear that all 13 individuals currently serve in decision-making capacities, since the narrative states that each body consists of five members. From other documentation provided, it is possible to identify the five members of the Advisory Board; however, it is not clear which individuals serve on the Advisory Commission.

The additional information related to processes and procedures requested in the draft staff analysis was not provided.

Staff determination: The agency does not meet the requirements of this section. More information is needed regarding the selection, terms, and training of the members of the agency's Advisory Board and Advisory Commission. More information is also needed regarding the authority of the Advisory Commission and the revisions to the agency's documents regarding the approval process, including the documents that are being revised, why they are being revised, and how their revision impacts the approval process.

(i) Maintains clear definitions of approval status and has developed written procedures for granting, reaffirming, revoking, denying, and reinstating approval status:

The agency briefly describes the approval process (p. 4, Instruction Manual) within its Norms and Procedures Manual (Exhibit 16). However, the manual merely states that the agency "makes the final decision to affirm, reaffirm, revoke, deny, or reinstate the approval process" without describing the agency's procedures for making these final decisions. There is no mention of a

decision-making body; rather the description indicates that the recommendations are submitted “for the consideration of the Director of the Agency”.

The agency has a list of Definitions of Terms (pp. 20-21, Instruction Manual) within its Norms and Procedures Manual. The terms include a very brief definition of "approval" but do not clearly specify what constitutes approval, nor do they define the various types/stages of approval status (granting, reaffirming, revoking, denying, and reinstating approval status).

Staff determination: The agency does not meet the requirements of this section. The agency must more clearly define approval status, to include granting, reaffirming, revoking, denying, and reinstating approval status, and also describe in detail its procedures for granting, reaffirming, revoking, denying, and reinstating approval status.

Analyst Remarks to Response:

The agency notes in its response narrative that it "briefly" describes the approval process in its Instruction Manual and instead provides training to evaluators, institutions, and program staff to provide the information required under this section (while evaluator training materials were provided - exhibit 43 - no training materials were provided for the other groups). This is not sufficient. The agency is required to maintain clear definitions and written (ED staff emphasizes "written") procedures as to the accreditation process.

Included with its response, the agency provided a diagram outlining the steps in the approval process, a page describing a "revised" approval process to be included in its Instruction Manual, and an additional copy of the Instruction Manual originally included as part of its Exhibit 16 Norms and Procedures Manual. While the agency's response narrative provides some additional information as to its procedures and definitions related to approval status, there is still no indication that these requirements are published (written) in the agency's manuals. It is not enough for the agency to provide training sessions on these key definitions and processes. The agency must provide documentation that they are written and readily available in published form.

Staff determination: The agency does not meet the requirements of this section. The agency must clearly define approval status, to include granting, reaffirming, revoking, denying, and reinstating approval status and also clearly describe its procedures for granting, reaffirming, revoking, denying, and reinstating approval status. These definitions and processes must be in written (i.e., published) form and readily available to the agency's institutions, agency representatives, and the public.

(A) Self-analysis shall be a qualitative assessment of the strengths and limitations of the instructional program, including the achievement of institutional or program objectives, and should involve a representative portion of the institution's administrative staff, teaching faculty, students, governing body, and other appropriate constituencies.

The agency provided the self-evaluation of one of its accredited institutions (Exhibit 25), which constitutes the core of the self-study. The self-evaluation is a narrative wherein the institution identifies its strengths, weaknesses, and improvement plan for each of the criteria and sub-criteria. There is also a list of required documentation included in the agency's Instructional Manual, indicating that the self-study does entail a qualitative assessment of the program and its objectives.

The agency's approval process, as described in its Instruction Manual (p. 4), within its Norms and Procedures Manual, specifies that the institution's self-study steering committee should not exceed five members and should include members of the administration, student support services, and the postsecondary faculty. No requirement is made regarding the participation of students, the institution's governing body, or other appropriate constituencies. ED staff notes that an attendance list from one institution's steering committee orientation in fact included seven attendees. It appears that those attendees included representatives from admissions/registration, the library, and various program areas.

Staff determination: The agency does not meet the requirements of this section. The agency must amend its procedures to require that the self-study steering committee include the participation of students, the institution's governing body, and other appropriate constituencies.

Analyst Remarks to Response:

In its response, the agency states that it will amend its policies to require student participation on the steering committee that prepares an institution's application (self-study) and provided a copy of the revised process as it will appear in the Instruction Manual. However, the agency failed to address the requirement for representation of the institution's governing body and other appropriate constituencies on the steering committee.

Staff determination: The agency does not meet the requirements of this section. The agency must amend its procedures to require that the self-study steering committee include the participation of the institution's governing body and other appropriate constituencies and must provide evidence that it has amended its policies to require student participation on the committee.

(B) The visiting team, which includes qualified examiners other than agency staff, reviews instructional content, methods and resources, administrative management, student services, and facilities. It prepares written reports and recommendations for use by the State agency.

The agency's Evaluation Committee Manual (Exhibit 20) includes detailed instructions on developing the report and templates for site reviewers to use while on-site (pp 18-43), which provide a basis for the team's discussion and which the team leader uses to write the final report. The process, as described in the Instruction Manual (p 2) (part two of Exhibit 16) includes the award of points for several criteria in the areas of Administrative Performance, Program Performance and General Education Courses, and an overall quantitative rating as a percentage. The process appears to be sufficiently comprehensive to yield a detailed and informative final report. The agency has established a minimum acceptable rating of 70%. However, the agency did not provide any final team reports, in the format described in the Instruction Manual, as evidence.

As noted in a previous section, insufficient information has been provided regarding the qualifications and selection of on-site review team members. No information was provided in the agency's instruction manual regarding the composition of the on-site review team, size of the team, team assignments, typical length of review, etc. ED staff notes that an agenda was provided for a two-day on-site review (Exhibit 22). It is unclear if this is typical of the length of reviews. A list of "possible" on-site evaluators was provided (in hard copy, and uploaded by staff into the system), but this appears to be list notifying an institution of possible reviewers, perhaps for purposes of noting any conflicts of interest, and does not seem to indicate the composition of the final review team for the institution.

Staff determination: The agency does not meet the requirements of this section. The agency must provide a sample team evaluation report and more detailed information regarding the on-site review process, including the qualifications and selection of on-site reviewers, the typical size of review teams and their review assignments, and the length of the on-site reviews.

Analyst Remarks to Response:

In its response, the agency clarified that site visits typically last at least two to three days, or longer if necessary, and that the site visit team consists of at least six evaluators to review administrative areas, plus additional site evaluators who are assigned to review each program area. A sample list of seventeen on-site evaluators (six administrative, 11 programmatic) was provided for a Manati on-site visit that took place in March 2010. A site visit report for the Manati visit was previously provided and addressed strengths, weaknesses, and improvement plans for various administrative criteria, as well as for one program leading to an Associate Degree in Business Administration. However, it does not follow the format described in the Instruction Manual. Furthermore, this would

not appear to be a complete site visit report, since an evaluation of only one program was provided, whereas 11 program areas were assigned on the roster of on-site reviewers.

Staff determination: The agency does not meet the requirements of this section. The agency must provide a sample (complete) site team report, which follows the format described in the agency's materials, as well as more information on the qualifications of the on-site reviewers, as noted previously under 603.24(a)(2)(iii)(A).

(iii) Reevaluates at reasonable and regularly scheduled intervals institutions or programs which it has approved.

The agency states that it reviews its institutions on a four-year cycle. However, the extent of the reevaluation review does not make clear whether it is a comprehensive review or is a follow-up with the institution/program regarding its improvement plan. The follow-up visit report provided (Exhibit 11) does not constitute a report of a comprehensive review. As documentation, the agency provided an evaluation calendar for 2009-2010 that lists all eight of its technical institutes. The approval dates and due dates for the institutions all fall within the four-year timeframe. However, it is not clear what "due date" actually means.

It appears that self-studies are being submitted up to a year after the specified due date, and site visits are scheduled between two and seven years out from the "approval date." No information is provided as to when approval actions take place following the site visits. In some instances, follow-up visits are listed as taking place prior to the site visit, which is confusing. More information is needed about the agency's review schedule.

Furthermore, it appears that individual programs within the institutions are on differing review cycles and that the institutions are not reviewed as a whole. ED staff notes that the agency's Instruction Manual (p. 2) within its Norms and Procedures Manual (Exhibit 16), states that "When performing an on site visit, to only one program, the evaluator may, as part of the process, visit those administrative performance areas that he/she deems important and make the corresponding recommendations." This raises the question of whether all administrative areas are ever reviewed in total, which is troubling. More information is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional information regarding the nature of its reevaluation reviews and its review cycle, as well as information on whether its institutions, including administrative areas, are reviewed as a whole.

Analyst Remarks to Response:

In its response, the agency provided a graphic showing the seven steps that comprise a review cycle, from the organization of a steering committee to the due date for beginning the next review. The agency clarified that the scheduled four-year reviews are comprehensive reviews, covering administrative, programmatic, and general curriculum areas. However, the agency also stated that individual programs may be on different evaluation cycles if they are new programs or are on improvement plans due to compliance issues discovered during the course of a comprehensive review. It is unclear to ED staff if these programs are, in effect, undertaking interim reports in such instances and then re-enter the regular review cycle at the time of the institution's next comprehensive review. Additional clarification is needed in this area.

The agency stated that institutions are on a four-year comprehensive review cycle, but offered no explanation as to the discrepancies on its review schedule that were identified in the draft staff analysis. More information is needed documenting that the agency is following its four-year cycle, as the materials provided originally do not support this.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional information and documentation regarding the nature of its review cycle.

(i) Has an advisory body which provides for representation from public employment services and employers, employees, postsecondary vocational educators, students, and the general public, including minority groups. Among its functions, this structure provides counsel to the State agency relating to the development of standards, operating procedures and policy, and interprets the educational needs and manpower projections of the State's public postsecondary vocational education system;

The agency states in its narrative that it has both an Advisory Board (which “sees the evaluation report”) and an Advisory Commission (which “reviews its criteria”). However, as noted under 603.24(a)(2)(iii)(C), it is not clear if the Advisory Board is an advisory body or the agency's decision-making body. More information is needed as to the functions of this group.

The agency provided a list of members of its Advisory Commission (Exhibit 35) indicating which group each represents (public employment services, employer, postsecondary occupational education, general public, and public university). It appears that this is the advisory body required by this section of the criteria. However, its membership does not provide for representation from all groups specified in the criterion; specifically, students and employees are not represented. Nor is it clear that minority groups are represented, as required.

The agency provided a copy of the Act creating the “Technological-Occupational

Education System of the Commonwealth of Puerto Rico” (Exhibit 1), which also established an advisory committee “attached to the Office of the Governor”. However, there is nothing in this document about the duties and functions of this committee, how committee members are appointed, or the length of terms, nor do the agency’s materials contain such information about this body.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional information and documentation as to the duties and functions of its Advisory Board and Advisory Commission and provide documentation demonstrating that the roles and functions of the two bodies are clearly set forth in its policies/procedures. It must also document that its policies require the representation of public employment services and employers, employees, postsecondary vocational educators, students, and the general public, including minority groups, on its advisory body (Advisory Board or Commission, as appropriate) as specified under this section.

Analyst Remarks to Response:

The agency's narrative indicates that the group it refers to as its "Advisory Board" is the agency's decision-making body. The advisory body referred to under the requirements of this section would seem to be the agency's Advisory Commission. The agency provided a copy of its commission by-laws, although it did not provide information regarding the commission's composition in its narrative. The bylaws indicate that eligibility is based upon the member's educational background, work experience, and postsecondary knowledge. The commission is comprised of five members who serve two-year terms. The commission will meet at least every two months and offer assistance to the agency regarding the revision of norms and standards, agency procedures, and regulations.

The bylaws do not address this section's requirements regarding the composition of the advisory body. The agency must amend its bylaws to address the requirements of this section.

Staff determination: The agency does not meet the requirements of this section. The agency must amend its Advisory Commission bylaws to require the representation from public employment services and employers, employees, postsecondary vocational educators, students, and the general public, including minority groups, on its Advisory Commission.

(iii) Provides advance public notice of proposed or revised standards or regulations through its regular channels of communications, supplemented, if necessary, with direct communication to inform interested members of the affected community. In addition, it provides such persons the opportunity to comment on the standards or regulations prior to their adoption;

ED staff is unable to locate in the agency's Norms and Procedure Manual any established procedure for providing public notice regarding the agency's standards review process. The page referenced by the agency merely states that the agency reports about any revisions of its criteria, norms, and policies. The other documentation provided by the agency (Exhibit 32) is a letter requesting that the recipient (executive director, General Board of Education) offer recommendations and comments on, as well as revisions to, several guides used during the evaluation process. This is insufficient evidence to demonstrate that the agency seeks wide input on its proposed or revised standards or regulations. More information is needed regarding the agency's established procedures in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it has an established procedure for notifying the public and other interested parties regarding proposed changes to its standards, as well as an established procedure for allowing public comment prior to any changes being made to the standards.

Analyst Remarks to Response:

In its response, the agency provided information on how its standards are implemented, but provided no information on how proposed standards are developed or modified with input from the community.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it has an established procedure for notifying the public and other interested parties regarding proposed changes to the standards, as well as an established procedure for allowing public comment prior to any changes being made to the standards. This process should be published in the agency's procedures manual.

(iv) Secures sufficient qualitative information regarding the applicant institution or program to enable the institution or program to demonstrate that it has an ongoing program of evaluation of outputs consistent with its educational goals.

The agency provided a sample annual report for a program at one of its institutions. While the annual report format does not include any qualitative information on the institution's program of evaluation of outputs, it does require reporting of quantitative information on program length and credits awarded, enrollment, retention and completion rates, and employment rates. However, the report also specifies that information should be provided regarding pass rates for the program's final exam, if applicable. That information was not provided for the associate degree program, for which such reporting would seem to be applicable. The agency's standard 1.3 – Information System – stipulates

benchmark retention and employment rates of 70% (Exhibit 20, p 6); however, the evaluation committee training slides (Exhibit 17) state that every program must maintain retention rate of no less than 65% and placement rate of no less than 70%. The agency needs to clarify its requirements regarding retention rates.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional information as to how it reviews the information specified in its annual reports, including any benchmarks that the agency has established, as well as enforcement measures the agency takes based upon the annual reports.

Analyst Remarks to Response:

The agency states in its response that it is in the process of revising its annual report form. No information was provided as to how the agency reviews the information in its annual reports, the apparent discrepancy in benchmarks, or enforcement actions the agency takes based upon the annual reports.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional information as to how it reviews the information specified in its annual reports, including any benchmarks that the agency has established, as well as enforcement measures the agency takes based upon the annual reports.

(v) Encourages experimental and innovative programs to the extent that these are conceived and implemented in a manner which ensures the quality and integrity of the institution or program;

The agency did not describe how it encourages experimental or innovative programming. As documentation, the agency provided a letter noting that an aviation program established in 1952 and whose certification was "in peril" would be moved to an airport to encourage real world experience, another letter expressing concern that pharmacy courses would be eliminated if not accredited, and another letter indicating a school director's interest in converting unspecified high school programs to postsecondary level programs. No information was provided regarding steps the agency is taking to encourage its institutions to venture into experimental or innovative programming. For instance, the agency might supply information regarding innovative programs that have been designed or substantially modified to provide job training in emerging or evolving employment fields.

Staff determination: The agency does not meet the requirements of this section. The agency must provide information and documentation as to how it encourages experimental and innovative programming at its institutions.

Analyst Remarks to Response:

In its response, the agency states that it has established a pre-accreditation function for new programs that are being initiated by institutions. It is possible that the agency uses pre-accreditation as an expedited process for program approval and that pre-accredited programs get special monitoring, but more information is needed regarding this process. The agency also states in its narrative that this is not currently addressed in its procedures manual. The agency does state that each institution has an advisory committee that offers recommendations on emerging occupational fields.

Staff determination: The agency does not meet the requirements of this section. The agency must provide information and documentation as to how its pre-accreditation process encourages experimental and innovative programming at its institutions.

(vi) Demonstrates that it approves only those institutions or programs which meet its published standards; that its standards, policies, and procedures are fairly applied; and that its evaluations are conducted and decisions are rendered under conditions that assure an impartial and objective judgment;

The agency's narrative did not adequately describe its decision-making body's review and approval process. As documentation, the agency provided a copy of its slides for training evaluation committee members. The presentation addressed the stages of the approval process, including the institution's application, self-study, and on-site review, and the on-site review team's report. The presentation did not provide any information on the final decision-making process at the agency level. More information is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must describe the process whereby a final decision is reached regarding the approval/accreditation of a program or institution.

Analyst Remarks to Response:

In its response, the agency provided a graphic outlining the steps in its decision-making process, as well as a blank Referendum form that is apparently used by the agency's decision making body (the Advisory Board) to indicate the number of years of accreditation being granted to an institution or program, and a brief statement of any conditions placed upon the institution/program. The agency did not provide information (documentation) on its final decision-making process at the agency level. Staff would like to emphasize that the agency must provide documentation regarding actual accrediting decisions that the Advisory Board has made in the past, both in terms of positive and negative accreditation decisions, in order to demonstrate compliance with the requirements of this

section.

Staff determination: The agency does not meet the requirements of this section. The agency must describe (and document) the process whereby a final decision is reached regarding the approval accreditation of a program or institution.

(vii) Regularly reviews its standards, policies and procedures in order that the evaluative process shall support constructive analysis, emphasize factors of critical importance, and reflect the educational and training needs of the students;

The agency did not provide any information or documentation regarding the most recent review of its standards.

Staff determination: The agency does not meet the requirements of this section. The agency must demonstrate that it has a formal process whereby it undertakes a review of its standards, policies, and procedures on a regular basis, soliciting feedback from appropriate constituent groups, including students and the public.

Analyst Remarks to Response:

In its response, the agency provided a copy of its Advisory Commission bylaws and stated that the commission is "one" of the bodies involved in standards review. Chapter III., Article 1.b. of the bylaws does state that the commission will offer assistance to the agency in the revision of norms and standards. However, the agency did not provide any information regarding a regular, formal standards review process, to include information on how often such a process is undertaken, how recently its standards have been reviewed, who was involved in the review, etc. Staff emphasizes that the agency is expected to have a written standards review process that is undertaken on a regular basis with input from all appropriate constituencies and that is described in its norms and procedures manual.

Staff determination: The agency does not meet the requirements of this section. The agency must demonstrate that it has a formal process whereby it undertakes a review of its standards, policies, and procedures on a regular basis, soliciting feedback from appropriate constituent groups, including students and the public.

(viii) Performs no function that would be inconsistent with the formation of an independent judgment of the quality of an educational institution or program;

As noted in previous sections, a great deal more information and documentation is needed regarding the agency's decision-making process. The agency notes in its narrative that it notifies its institutions regarding decisions made by its Evaluation Committee. However, it is ED staff's understanding that the Evaluation Committee is, in fact, the on-site review team and is not the agency's final decision-making body. No information or documentation was provided regarding the final decision-making process at the agency level, as opposed to the on-site review team's report and recommendations. Much additional information is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must provide more information and documentation as to how its decision-making body reviews the on-site review team's report, as well as other pertinent information, and makes an independent judgment of the quality of an institution or program.

Analyst Remarks to Response:

In its response, the agency provided a one-page graphic outlining the steps in the approval process, as well as a copy of the bylaws for its Advisory Board, which is the agency's decision-making body. Both documents are quite brief. No detailed information is provided as to the possible actions that may be taken by the board. No examples were provided of discussion and actions that have been taken by the board in the process of rendering accreditation decisions. The bylaws do not define conflicts of interest or contain a detailed conflict of interest policy. They stipulate that "Members of this Board can't have interest or conduct activities that are in conflict with the goals and purposes of the Agency." Conflicts of interest involving an institution are not addressed. More information is still needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must provide more information and documentation as to how its decision-making body reviews the on-site review team's report, as well as other pertinent information, and makes an independent judgment of the quality of an institution or program. It must also provide information about how it guards against conflicts of interest involving an institution.

(ix) Has written procedures for the review of complaints pertaining to institutional or program quality as these relate to the agency's standards, and demonstrates that such procedures are adequate to provide timely treatment of such complaints in a manner fair and equitable to the complainant and to the institution or program;

The agency has a detailed complaint procedure, which is published in its Norms and Procedures Manual (pp 11-13). The procedure includes time limits for acknowledging receipt of the complaint by the agency (20 days), for implementation of any corrective actions (60 days), for notification following any necessary hearings (90 days), and for requests for reconsideration (20 days). However, the agency did not provide any documentation of its review of a complaint.

Staff determination: The agency does not meet the requirements of this section. The agency must provide documentation of its review of a complaint demonstrating that it follows its published procedures.

Analyst Remarks to Response:

In its response, the agency reiterated that it has a complaint procedure, but did not provide any documentation (examples) of how it has handled any complaints in accordance with its procedure.

Staff determination: The agency does not meet the requirements of this section. The agency still must provide documentation of its review of an actual complaint to demonstrate that it follows its published complaint procedures.

(x) Annually makes available to the public (A) its policies for approval, (B) reports of its operations, and (C) list of institutions or programs which it has approved;

The agency provided a copy of its Norms and Procedures Manual, which provides a list of its current policies. The agency also provided a "To Whom It May Concern" letter (exhibit 4) listing the programs available at each of its approved institutions. It appears that this letter was prepared for purposes of the ED review, however, it is unclear how this information is disseminated to the public. The agency states that it prepares an annual report, but this report is listed as being "In Progress" and no earlier report was provided. The agency further states that in the future the information required under this section will be provided on the agency web site, but this site is apparently not yet available.

Staff determination: The agency does not meet the requirements of this section. The agency must provide information and documentation as to how it makes a report of its operations and a list of its approved institutions/programs available to the public on an annual basis.

Analyst Remarks to Response:

The agency stated in its response that it is relying upon its web site to provide the annual information required under this section. ED staff was unable to access the agency's web page using the URL provided. The agency states that information is also available through its office and provided the director's mailing address and telephone number.

Staff determination: The agency does not meet the requirements of this section. The agency must provide documentation as to how it makes a report of its operations and a list of its approved institutions/programs available to the public via its web site since it lists this as its primary means of communicating this information.

(xi) Requires each approved school or program to report on changes instituted to determine continue compliance with standards or regulations;

The agency's annual report requirements are listed in its Norms and Procedures Manual (pp. 8-9). The manual specifies that institutions must submit annual reports noting "progress made in the implementation of the recommendations for the correction of findings identified in the previous evaluations" as well as any substantial changes, if applicable. The manual specifies that any corrective actions resulting from the agency's evaluation of an annual report shall be implemented within 60 days, with a possible additional 60 day grace period. After that time, the agency will provide recommendations to its Advisory Board for action. Clarification is needed regarding "the correction of findings identified in the previous evaluations." It is not clear to ED staff whether these are findings from the previous year's annual report or from the institution's/program's last review cycle. In either case, it appears that time limits for correcting such findings might be exceeded.

The annual report requires only minimal information regarding various outcomes data. The report form, in its current version, does not adequately require each approved school or program to report on changes instituted to determine continued compliance with standards or regulations.

A September 10, 2010 cover letter to an institution states that the agency decided to ask for the report in September "this year" in order to allow more time for the collection of annual report information. The report was then due on October 29, 2010. The apparent variability in requesting the report raises questions regarding the implementation of a consistent reporting period. It is unclear whether the information required in the report changes from year to year and why an institution would not already be aware of the information that it should be collected in order to respond to a report that is required on an ongoing basis. Clarification is needed regarding the standard reporting period, as this was not addressed in the agency's procedures.

The agency notes in its narrative that if changes (presumably substantive

changes) are made during an academic year, the institution must report those changes to the agency, which may trigger an on-site visit. However, these special reports are not mentioned in the agency's procedures manual, which instead specifies that substantive changes are to be noted in the annual report.

The sample completed annual report that was provided (Exhibit 14) is for a program, rather than an institution, and does not include any information about the institution's (or program's) progress in addressing previously-identified deficiencies. No documentation was provided as to any follow-up actions the agency took in regard to problems raised in any annual reports or special reports. Additional documentation is needed in these areas.

Staff determination: The agency does not meet the requirements of this section. If the agency chooses to use an annual report as its means of requiring its institutions/programs to report on changes instituted to determine continue compliance with standards or regulations, then it should expand the scope of its report to require the submission of such information, rather than only using the report to collect outcomes data.

The agency must address its requirements regarding special reports (presumably reports regarding substantive changes) in its procedures manual. The agency must provide information and documentation regarding the special reports it requires.

The agency must establish the dates covered by its annual report, as well as its submission deadline, in its procedures manual and should also provide the annual report form in the manual in order for institutions/programs to be aware of the report requirements on an ongoing basis. The agency must clarify which previous corrective actions (previous review findings or previous annual report findings) are to be addressed in the annual report.

The agency must also provide documentation related to corrective actions it has taken in response to information that was provided in its annual and special reports.

Analyst Remarks to Response:

The agency's response refers to the reporting requirements listed on pp. 8-9 of its Norms and Procedures Manual. The manual and the response are both confusing in that they appear to tie compliance reporting (i.e., those institutions that are being required to report on progress related to findings) and substantive change reporting together, with only institutions that are subject to compliance reports being required to report substantive changes. The agency states in its narrative that this type of reporting will no longer have to be done annually, yet also states that such reports must be submitted by June 30 of the current academic year, presumably annually. The agency also states that it will design a report format to collect uniform data. It is unclear to ED staff if this means that the agency is developing a new annual report form that all institutions/programs will have to use to submit annual data, or if the agency is no longer requiring

annual reports. Additional clarification is needed as to the agency's reporting requirements, as requested in the draft staff analysis.

Staff determination: The agency does not meet the requirements of this section. If the agency chooses to use an annual report as its means of requiring its institutions/programs to report on changes instituted to determine continue compliance with standards or regulations, then it should expand the scope of its report to require the submission of such information, rather than only using the report to collect outcomes data.

The agency must address its requirements regarding special reports (presumably reports regarding substantive changes) in its procedures manual. The agency must provide information and documentation regarding the special reports it requires.

The agency must establish the dates covered by its annual report, as well as its submission deadline, in its procedures manual and should also provide the annual report form in the manual in order for institutions/programs to be aware of the report requirements on an ongoing basis. The agency must clarify how previous corrective actions (previous review findings or previous annual report findings) are to be addressed in the annual report or whether they are to be reported on in some other manner.

The agency must also provide documentation related to corrective actions it has taken in response to information that was provided in its annual and special reports.

(xii) Confers regularly with counterpart agencies that have similar responsibilities in other and neighboring States about methods and techniques that may be used to meet those responsibilities.

The agency states in its narrative that it confers with other agencies. As documentation, it submitted copies of November 2011 form letters sent to four ED-recognized accrediting agencies and two ED-recognized state approval agencies erroneously stating that the PR agency had recently been granted renewed recognition by ED and asking for "any materials, publications, or suggestions" that the agency receiving the letter might share. The letter also notes that the PR agency is including some of its guidelines for the receiving agency's use.

The agency also included a cover letter that was sent to the General Board of Education in PR stating that it was sending the board several (apparently unsolicited) guides that it uses and instructing the board to "revise them and offer your recommendations" to the state agency.

The letters sent by the agency in anticipation of its upcoming ED review do not

meet the requirements of this section. The intent of this section is that an agency confer (that is, speak) regularly (on an ongoing basis) with other agencies in order to share information, ideas, procedures, etc. Sending a letter soliciting materials, or sending a letter disseminating materials, does not constitute conferring with other agencies in order to share ideas about meeting similar responsibilities. Staff further notes that this type of dialogue would have undoubtedly have been helpful to the agency in preparing its current petition.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it has established collegial relationships with counterpart agencies, either on the mainland or in PR, in order to confer, on a regular basis, about methods and techniques used by the agencies in addressing the agencies' similar responsibilities.

Analyst Remarks to Response:

No additional information was provided. In its response, the agency again referred to the letters referenced in its original narrative. ED staff again notes that these letters do not meet the requirements of this section.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it has established collegial relationships with counterpart agencies, either on the mainland or in PR, in order to confer, on a regular basis, about methods and techniques used by the agencies in addressing the agencies' similar responsibilities.

(i) Provides for adequate discussion during the on-site visit between the visiting team and the faculty, administrative staff, students, and other appropriate persons;

The agency's very brief narrative states that interviews and discussions are an important part of the on-site review. The agency's Evaluation Manual, within its Norms and Procedures Manual, describes the functions of the Evaluation Committee (on-site review team) on pp. 7-8. Section 2 addresses the team's functions while at the institution. Section 2.1 specifies that there be "a conscious investigation of the strengths and areas that require improvement" at the institution. However, this section of the guide does not require discussion during the on-site visit between the visiting team and the faculty, administrative staff, students, and other appropriate persons.

The agency's Evaluation Committee Manual (p. 10) specifies that the on-site review team will interview the director of the institution and the institution's self-study steering committee. It also specifies group and individual evaluation interviews on this page, but does not specify who will be interviewed.

A sample agenda for an on-site visit (Exhibit 22) seems to indicate that the team

will meet with the institution's director, the steering committee, administrative personnel, and a teacher "if necessary." This agenda also indicates that the team will visit classrooms, as well as making calls to employers and graduates.

Staff determination: The agency does not meet the requirements of this section. The agency must amend its Evaluation Manual to specify discussion during the on-site visit between the visiting team and the faculty, administrative staff, students, and other appropriate persons.

Analyst Remarks to Response:

In its response, the agency states that it is in the process of revising the procedures in its Instruction Manual (contained within its Norms and Procedures Manual) in order to comply with the requirements of this section. Documentation, in the form of a revised version of the manual and a site review schedule, is requested.

Staff determination: The agency does not meet the requirements of this section. The agency must provide documentation that it has amended its Instruction Manual to specify discussion during the on-site visit between the visiting team and the faculty, administrative staff, students, and other appropriate persons.

(ii) Furnishes as a result of the evaluation visit, a written report to the institution or program commenting on areas of strength, areas needing improvement, and, when appropriate, suggesting means of improvement and including specific areas, if any, where the institution or program may not be in compliance with the agency's standards;

The agency's Evaluation Committee Manual, within its Norms and Procedures Manual, specifies that each on-site review team member will prepare an individual written report of findings, including strengths, weaknesses, and recommendations, and submit this report, with supporting documentation, to the team leader prior to leaving the institution. The team leader is then responsible for preparing the final report and presenting it to the state agency within 30 days of the on-site review. However, it is not clear that the documentation submitted (Exhibit 25) is of an on-site report of the evaluation team or of an institutional self-evaluation since this same documentation was submitted for 603.24(a)(3)(ii)(A).

Staff determination: The agency does not meet the requirements of this section. The agency must submit documentation of an on-site review team report.

Analyst Remarks to Response:

In its response, the agency states that it has submitted a sample on-site review report for a review that took place at the Manati campus in 2010. However, the report is not in accord with the directions and format contained in the Evaluation Committee Manual. The manual prescribes a format for reporting on strengths, weaknesses and recommendations and assigning a quantitative score to each component evaluated and an overall score. The report that was provided lists strengths, weaknesses and improvement plan without any numerical score. In addition, as noted in a previous section, the report includes only one program area, when earlier narrative would seem to indicate that 11 program areas were reviewed. The agency must clarify its requirements for its on-site visit reports and submit a complete on-site review report, that is in accord with those requirements, as documentation of its compliance with the requirements of this section.

Staff determination: The agency does not meet the requirements of this section. The agency must submit further information about its requirements for on-site visit reports and documentation of an on-site review team report that is in accord with those requirements.

(iii) Provides the chief executive officer of the institution program with opportunity to comment upon the written report and to file supplemental materials pertinent to the facts and conclusions in the written report of the visiting team before the agency takes action on the report;

The agency states in its narrative that it sends the final on-site review team report to the institution for "reactions." It is not clear from the narrative what timelines are associated with sending the report to the institution, nor how much time the institution has to submit its response. While the narrative indicates that the chief executive officer of the institution has an opportunity to comment upon the written report and to file supplemental materials pertinent to the facts and conclusions in the written report of the visiting team before the agency takes action on the report, no supporting documentation was provided.

The requirements described in the agency's narrative do not appear to be addressed in either its Norms and Procedures Manual, nor in its Evaluation Committee Manual. The committee manual specifies that the on-site review team leader will submit the final on-site review report to the agency within 30 days. However, no information is provided regarding the agency's submission of the report to the institution. The agency's procedures manual specifies (p. 8) that the agency will analyze the report and make a final decision. No mention is made of allowing the institution any response to the on-site review team's report prior to consideration by the agency.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional information and documentation regarding the institution's opportunity to comment upon the written report and to file

supplemental materials pertinent to the facts and conclusions in the written report of the visiting team before the agency takes action on the report.

Analyst Remarks to Response:

In its response, the agency clarified that the on-site team leader has 30 days to submit the on-site review report to the agency, that the agency has 15 days to submit the report to the institution, and that the institution then has 15 days in which to respond to the report.

However, the agency did not provide any documentation in the form of transmittals (cover letter with instructions, copy of a report, response from an institution, etc.) of a report to a school, as was originally requested.

Staff determination: The agency does not meet the requirements of this section. The agency must provide additional documentation regarding the institution's opportunity to comment upon the written report and to file supplemental materials pertinent to the facts and conclusions in the written report of the visiting team before the agency takes action on that report.

(iv) Provides the chief executive officer of the institution with a specific statement of reasons for any adverse action, and notice of the right to appeal such action before an appeal body designated for that purpose;

ED staff is unable to locate a section in the agency's Norms and Procedures Manual where the requirements of this section are addressed. The manual does include information regarding grievance procedures and appeals (pp. 10-13), but these procedures are related to complaints, not to appeals related to adverse actions taken against institutions/programs by the state agency. More information is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must demonstrate that it has procedures in place to provide the chief executive officer of the institution with a specific statement of reasons for any adverse action, and notice of the right to appeal such action before an appeal body designated for that purpose.

Analyst Remarks to Response:

The agency states that it is in the process of amending its Norms and Procedures Manual to reflect the requirements of this section. The agency must submit documentation, in the form of its revised manual, after the changes become final.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it has procedures in place to provide the chief

executive officer of the institution with a specific statement of reasons for any adverse action, and notice of the right to appeal such action before an appeal body designated for that purpose. It must also provide documentation demonstrating application of its procedures, or indicate it has not had an opportunity to apply them.

(v) Publishes rules of procedure regarding appeals;

As noted in the previous section, the agency's published grievance and appeals procedures (Norms and Procedures Manual, pp. 10-12) appear related to complaints, not adverse actions. More information and documentation is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it publishes rules of procedure regarding appeals related to adverse actions.

Analyst Remarks to Response:

As noted in the previous section, the agency is in the process of updating its procedures manual to reflect the requirements of this section. ED staff notes that the agency's new procedures should conform to commonly accepted practices (for instance, they should define the bases for an appeal, make clear that the appeal decision has to be made on the record with no new evidence presented, etc.).

Staff determination: The agency does not meet the requirements of this section. The agency must document that it publishes rules of procedure regarding appeals related to adverse actions.

(vi) Continues the approval status of the institution or program pending disposition of an appeal;

Procedures for continuing the approval status of the institution or program pending disposition of an appeal do not appear to be addressed in the agency's Norms and Procedures Manual. More information is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it continues the approval status of the institution or program pending disposition of an appeal and that this requirement is addressed in its procedures manual.

Analyst Remarks to Response:

As noted in the previous sections, the agency is in the process of amending its procedures manual to reflect the requirements of this section. The draft procedures provided by the agency do allow for continuing the approval status of the institution or program pending disposition of an appeal.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it continues the approval status of the institution or program pending disposition of an appeal and that this requirement is addressed in its revised procedures manual.

(vii) Furnishes the chief executive officer of the institution or program with a written decision of the appeal body including a statement of its reasons therefor.

The requirement that the agency furnish the chief executive officer of the institution or program with a written decision of the appeal body including a statement of its reasons for the decision does not appear to be addressed in the agency's procedures manual. More information is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it furnishes the chief executive officer of the institution or program with a written decision of the appeal body including a statement of its reasons for the decision and that this requirement is addressed in its procedures manual.

Analyst Remarks to Response:

As noted in previous sections, the agency is in the process of amending its appeals procedures and revising its procedures manual in order to meet the requirements of this section. The draft procedures provided by the agency require that the agency furnish the chief executive officer of the institution or program with a written decision of the appeal body, but do not specify that a statement of its reasons for the decision will be included.

Staff determination: The agency does not meet the requirements of this section. The agency must document that it furnishes the chief executive officer of the institution or program with a written decision of the appeal body, including a statement of its reasons for the decision and that this requirement is addressed in its procedures manual.

(1) The State agency meets this requirement if--

(i) It reviews the institution's--

- (A) Policies and procedures for determining the credit hours, as defined in 34 CFR 600.2, that the institution awards for courses and programs; and
- (B) The application of the institution's policies and procedures to its programs and coursework; and

(ii) Makes a reasonable determination of whether the institution's assignment of credit hours conforms to commonly accepted practice in higher education.

Problems with the agency's policy for defining credit hours were noted previously under 603.24(a)(1)(iii). Clarification is needed in this area. The agency does not have written policies that require it to conduct an effective review and evaluation of the reliability and accuracy of the institution's assignment of credit hours. The review is required to include an assessment of an institution's policies and procedures for determining credit hours and the institution's application of its policies. The agency is required to make a determination whether the institution's assignment of credit hours conforms to commonly accepted practices. The agency is to have a methodology for conducting its evaluation.

Staff determination: The agency does not meet the requirements of this section. The agency must clarify its policy for defining credit hours. In addition, the agency must provide evidence that it has and effectively applies policies and procedures for the review and determination of the reliability and accuracy of an institution's credit hour assignments.

Analyst Remarks to Response:

In its response, the agency submitted its revised Policy for the Definition of Credit Hours. The policy provides information on the definition of a credit hour, the accrediting agency's responsibilities, the methodology for credit hour calculation, and institutional applicability. As discussed under 603.24(a)(1)(iii), the definition of a credit hour in the revised policy is problematic. This section of the federal regulations requires that the state agency review the institution's policies and procedures for determining credit hours, including the institution's application of those policies and procedures, and that the state agency then make a determination of whether the institution's assignment of credit hours follows commonly accepted practices. The agency's revised policy states under a paragraph on Accrediting Agency Responsibilities that the agency "will require an effective review and evaluation of the reliability and accuracy of the institution's assignment of credit hours" but does not describe any procedures for how the agency will do this. Much more information is needed regarding the agency's procedures in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must still provide evidence that it has and effectively applies policies and procedures for the review and determination of the reliability and accuracy of

an institution's credit hour assignments.

(2) In reviewing and evaluating an institution's policies and procedures for determining credit hour assignments, a State agency may use sampling or other methods in evaluation, sufficient to comply with paragraph (c)(1)(i)(B) of this section.

As noted above, the agency does not have policies and procedures for reviewing an institution's processes for assigning credit hours. The agency notes in its narrative that it plans to amend its evaluation guide to include information about reviewing credit hour assignments.

Staff determination: The agency does not meet the requirements of this section. It must provide evidence that it has and effectively applies policies and procedures for the review and determination of the reliability and accuracy of an institution's credit hour assignments.

Analyst Remarks to Response:

As noted in the previous section, the agency has not provided sufficient information or documentation regarding its policies and procedures for determining credit hour assignments.

Staff determination: The agency does not meet the requirements of this section. The agency must still provide evidence that it has and effectively applies policies and procedures for the review and determination of the reliability and accuracy of an institution's credit hour assignments.

(3) The State agency must take such actions that it deems appropriate to address any deficiencies that it identifies at an institution as part of its reviews and evaluations under paragraph (c)(1)(i) and (ii) of this section, as it does in relation to other deficiencies it may identify, subject to the requirements of this part.

The agency did not provide information about the types of actions it takes when it concludes that an institution's policies and procedures for determining credit hour assignments are deficient. It appears from the narrative that the agency has not yet evaluated any of its institution's assignment of credit hours.

Staff determination: The agency does not meet the requirements of this section. The agency must develop and demonstrate that it effectively applies policies related to credit hour review and their enforcement.

Analyst Remarks to Response:

As noted in previous sections, the agency has not sufficiently demonstrated that it has policies and procedures for evaluating its institutions' application of the credit hour requirements. More information is needed on the agency's policies and procedures related to this requirement. It is unclear why the agency submitted a list of consultants in its response to this section, or what role these consultants might play in taking agency action against institutional deficiencies regarding credit hour review.

Staff determination: The agency does not meet the requirements of this section. The agency must develop and demonstrate that it effectively applies policies related to credit hour review and their enforcement.

(4) If, following the institutional review process under this paragraph (c), the agency finds systemic noncompliance with the agency's policies or significant noncompliance regarding one or more programs at the institution, the agency must promptly notify the Secretary.

The agency does not have any policies requiring it to notify the Department of any systemic noncompliance with the agency's credit hour policies on credit hour assignment.

Staff determination: The agency does not meet the requirements of this section. The agency must develop and effectively apply policies related to credit hour review, enforcement and notification that include the requirement to notify the Department of any systemic noncompliance with the agency's credit hour policies on credit hour assignment.

Analyst Remarks to Response:

In its response, the agency briefly outlined steps it would take to review and evaluate the reliability and accuracy of an institution's assignment of credit hours. The agency is encouraged to greatly elaborate upon these procedures and then formalize them by including them in a further revised Policy for the Definition of Credit Hours that it incorporated into its Norms and Procedures Manual. The agency also states in its narrative that it will notify the Secretary of institutional noncompliance discovered during its credit hour evaluations. However, this requirement must also be formalized by inclusion in the agency's revised policy.

Staff determination: The agency does not meet the requirements of this section. As noted previously, the agency must develop and effectively apply policies related to credit hour review, enforcement, and notification that include the requirement to notify the Department of any systemic noncompliance with the agency's credit hour policies on credit hour assignment.

(1) Promotes a well-defined set of ethical standards governing institutional or programmatic practices, including recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services;

Neither the agency's Norms and Procedures Manual, nor its Evaluation Committee Manual, appear to contain any requirements specifically related to promoting a well-defined set of ethical standards governing institutional or programmatic practices, including recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services. More information and documentation is needed in this area.

Staff determination: The agency does not meet the requirements of this section. The agency must provide more information and documentation regarding its requirements specifically related to promoting a well-defined set of ethical standards governing institutional or programmatic practices, including recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services.

Analyst Remarks to Response:

The agency stated that it is in the process of revising its standards to address the requirements of this section. The agency must demonstrate that its standards have been revised and published for use by its programs and institutions.

Staff determination: The agency does not meet the requirements of this section. The agency must provide documentation regarding its requirements specifically related to promoting a well-defined set of ethical standards governing institutional or programmatic practices, including recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services.

(2) Maintains appropriate review in relation to the ethical practices of each approved institution or program.

As noted in the previous section, the agency's procedures manual does not appear to include and requirements specifically related to promoting a well-defined set of ethical standards governing institutional or programmatic practices, including recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services. As a result, it does not appear that these areas are specifically examined by the agency during the course of the on-site review or in the agency's required annual reports.

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

The agency must describe and document how it maintains appropriate review in relation to the ethical practices of each approved institution or program related to recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services.

Analyst Remarks to Response:

As noted in the previous section, the agency states that it is in the process of revising its standards to promote an ethical set of standards. The agency states in its attachment that review requirements related to the revised standards will be included in its Evaluation Committee Manual and other documents, as well. The agency must document that it has revised and published its standards, updated related documents, and demonstrate that it is maintaining an appropriate review in relation to the ethical practices of each approved institution or program.

Staff determination: The agency does not meet the requirements of this section. The agency must describe and document how it maintains appropriate review in relation to the ethical practices of each approved institution or program related to recruitment, advertising, transcripts, fair and equitable student tuition refunds, and student placement services.

PART III: THIRD PARTY COMMENTS

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