

U.S. Department of Education

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

RECOMMENDATION PAGE

1. **Agency:** Southern Association Of Colleges and Schools (1952/2006)
(The dates provided are the date of initial listing as a recognized agency and the date of the agency's last grant of recognition.)

2. **Action Item:** Petition for Continued Recognition

3. **Current Scope of Recognition:** The accreditation and preaccreditation ("Candidate for Accreditation") of degree-granting institutions of higher education in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia, including distance education programs offered at those institutions.

4. **Requested Scope of Recognition:** The accreditation and preaccreditation ("Candidate for Accreditation") of degree-granting institutions of higher education in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia, including the accreditation of programs offered via distance and correspondence education within these institutions. This recognition extends to the SACSCOC Board of Trustees and the Appeals Committee of the College Delegate Assembly on cases of initial candidacy or initial accreditation and for continued accreditation or candidacy.

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

6. **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.

Revise the agency's official scope of recognition as requested.

Require the agency to comply with the information requests listed in the analysis of third-party comments, within a timeframe specified by staff and consistent with statutory and regulatory deadlines.

7. **Issues or Problems:** The agency must demonstrate that it consistently applies its Federal Requirement 4.1 so that an assessment regarding compliance with the standard is clearly assessed in accord with its written criterion (§602.16(a)(1)(i)).

The agency must provide evidence that it consistently and effectively applies its curricula standard, specifically with regard to its application of Core Requirement 2.7.3 (§602.16(a)(1)(ii)).

The agency must provide evidence of the application of its new guidance under FR 4.1 resulting in a detailed written report that assesses an institution's performance with respect to student achievement (§602.17(f)).

The agency must provide evidence that its substantive changes are approved by its decision-making body (§602.22(a)(2)(ix-x)).

EXECUTIVE SUMMARY

PART I: GENERAL INFORMATION ABOUT THE AGENCY

The Southern Association of Colleges and Schools, Commission on Colleges (SACS or Commission), is a regional institutional accreditor. SACS accredits or preaccredits ("Candidate for Accreditation") 807 degree-granting institutions of higher education in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia, including distance and correspondence education programs offered at those institutions.

Over 98% of the 807 institutions accredited by the Commission rely on the agency's continued recognition by the U.S. Department of Education for access to Title IV, HEA programs.

Recognition History

SACS appeared on the initial list of nationally recognized accrediting agencies published by the U.S. Office of Education in 1952. The agency's recognition has been periodically reviewed and continued recognition has been granted after each review.

When SACS last came before the National Advisory Committee on Institutional Quality and Integrity (NACIQI) for a full review in June 2006, the agency was granted continued recognition for a period of five years and was required to submit an interim report on several sections of the Secretary's criteria. Both the Department staff and the NACIQI recommended that the Secretary accept the agency's interim report in June 2008.

Shortly after the June 2008 NACIQI meeting, the Higher Education Opportunity Act of 2008 (HEOA) was passed, which contained a number of provisions related to accrediting agency recognition that were effective upon enactment. The changes included, among others, a reconstitution of the NACIQI. As a consequence, all NACIQI meetings were held in abeyance pending reconstitution of the Committee and the Department's issuance of final regulations in accordance with the HEOA, which were effective July 1, 2010. The agency's petition for continued recognition is the subject of this analysis.

PART II: SUMMARY OF FINDINGS

§602.16 Accreditation and preaccreditation standards

(a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if -

- (1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:**

(i) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.

The agency has identified four standards under which it evaluates student achievement. Standard 2.5 assesses the institution's institutional effectiveness program of planning and evaluation, to ensure that it is ongoing, integrated, and research-based. The reaffirmation reports provided (Exhibits 51 and 55) evidence that evaluators evaluate an institution's approach to institutional assessment as a way of assessing whether an institution is effectively meeting its mission, and as an institution-wide effort to improve student achievement.

Comprehensive Standard 3.3.1 drills down further to evaluate how an institution is achieving its expected outcomes in several areas to include educational programs, and student learning outcomes. It appears that the institution submits its documentation for compliance by way of the agency's "compliance certification," at which point a paper review is conducted by the off-site committee, and further verified by the on-site committee. Department staff observed an agency's site visit to an institution on November 15-17, 2011, where evaluators explicitly requested and analyzed further documentation from the institution under this standard and evaluated student learning outcome data that the institution provided, against the outcomes the institution identified. The reaffirmation reports provided also evidence that evaluators assessed the institution under this standard.

Comprehensive Standard 3.5.1 requires institutions to identify college-level general education competencies and the extent to which students have attained them. As evidenced by the compliance certifications provided, institutions are required to provide extensive and thorough information defining appropriate goals of its general education program, as well as measurements to ensure that students have attained those competencies. As evidenced by the reaffirmation

report (Exhibit 51), evaluators assess the appropriateness of the measures used by the institution to assess the competencies it has identified, and whether such competencies are appropriate to the goals of the general education program and consistent with principles of good practice.

Federal Requirement 4.1, as further explicated in the agency's "supplemental interpretation" for that criterion, requires institutions to document success in all education programs with respect to student achievement consistent with institutional mission using a "broad range of appropriate indicators." The reaffirmation reports provided evidence that the reaffirmation committee reviewed the findings of the off-site and on-site committees to find that the institutions documented evidence of the collection and use of student achievement data. However, it is not clear from the reaffirmation reports whether there is a consistent assessment of the "appropriateness" of the institution's selected criteria, as well as a determination of whether the institution generates and uses data that demonstrates improvement of student achievement. One reaffirmation report (Exhibit 55) provides examples of the appropriateness of an institution's use of student achievement, while two other reports (Exhibits 51 and 49) suggest that an evaluation of the appropriateness of an institution's use of student achievement was conducted by the on-site evaluation team, but does not provide sufficient detail of such assessment in accord with the requirements under the agency's criterion and of this section. Among the reaffirmation reports provided, there is not a consistent assessment regarding whether an institution's established goals with respect to student achievement are of sufficient rigor to meet the agency's expectations.

While the agency's written student achievement standard appears to be comprehensive in scope and appropriate for the diverse institutions it accredits, the agency must ensure that it consistently applies its Federal Requirement 4.1 so that an assessment regarding compliance with the standard is clearly assessed in accord with its written criterion.

Staff determination: The agency does not meet the requirements of this section. The agency must demonstrate that it consistently applies its Federal Requirement 4.1 so that an assessment regarding compliance with the standard is clearly assessed in accord with its written criterion.

Analyst Remarks to Response:

The agency has addressed the inconsistent application of its student achievement standard under FR 4.1 by providing further written guidance to its off-site and on-site committees, and institutions via its resource manual. The agency has specified language and expectations for compliance under the respective section to clarify that evaluators must review the appropriateness of institutionally-identified student achievement criteria, with respect to an institution's mission, as well as the institution's expected thresholds of achievement.

Additionally, the agency has provided samples of reaffirmation reports that

provide the level of detail the agency expects as a consistent outcome in its forthcoming reaffirmation reports after implementation of its clarifying guidance. One report cites a recommendation because the institution has not specified criteria against which achievement indicators are to be evaluated, and another report provides an analysis of the licensure pass rates at an institution for multiple programs, as well as a finding that the discussion of student success on licensure exams provided by the institution was acceptable. The report also provided a discussion of the appropriateness of the completion rates for multiple programs and included questions regarding employment rates left by the off-site committee, which were subsequently clarified by the on-site committee.

However, the agency must provide evidence of its consistent application of FR 4.1 by providing a larger sample of site visit reports to the Department that demonstrate effective implementation of its new guidance.

Staff determination: The agency does not meet the requirements of this section. The agency must demonstrate that it consistently applies its Federal Requirement 4.1 so that an assessment regarding compliance with the standard is clearly assessed in accord with its written criterion.

(a)(1)(ii) Curricula.

The agency has several criteria to assess curricula which are embedded throughout the agency's accreditation standards. Such criteria assess, for example, whether an institution's degree programs are coherent and compatible with an institution's mission; the rigor of the general education program and the attainment of general education competencies; the rigor of post-baccalaureate programs; and the content for the graduate curricula.

The agency provided reaffirmation reports that demonstrate it assesses institutions under each of these criteria in accord with the agency's guidelines and supplemental interpretation, except for the agency's curricula standard under Core Requirement 2.7.3. For example, the agency assessed whether the institution defined and published requirements for its undergraduate programs, as well as whether the institution's requirements conform with commonly accepted standards and practices. The agency also demonstrates that it assessed the content and rigor of the institution's graduate degree requirements.

However, it is not clear whether the agency consistently evaluates institutions in accord with their Core Requirement 2.7.3; specifically, it is not clear whether evaluators consistently assess whether credit hours that constitute the general education program at an institution are, "drawn from and include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics," and that "the courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession," in accord with the agency's written criteria.

For example, while it appears that evaluators made such an assessment in one case (Exhibit 55), two other reaffirmation reports (Exhibit 48 and 49) are silent on this issue. A fourth report (Exhibit 51) states that the off-site committee could not confirm whether the institution met the criterion above.

The agency's consistent assessment under Core Requirement 2.7.3 is salient because the agency was found out of compliance under this section in September 2011 (attached below) after Department staff conducted a review of the agency's application of its curricula requirement following a complaint. The agency submitted its response and remedy to the finding of non-compliance on January 9, 2012 (attached below).

Department staff does not find the agency's response to conduct a records check during its site visit to be an effective remedy to the agency's finding of non-compliance. Rather, as stated here and in the September 2011 letter, the agency must demonstrate that it effectively and consistently applies its curricula standard in the case of Core Requirement 2.7.3 by ensuring that it consistently reviews an institution's general education courses. Though the agency states in its response that the agency's current process is for the off-site committee to conduct a paper review of the general education program, it is not evident that off-site evaluators consistently review courses for compliance under Core Requirement 2.7.3. An effective proactive remedy, for example, might be to ensure that evaluators are adequately trained on the consistent application of this criterion, and that the agency publishes guidance that clearly states its expectations that evaluators assess and make a determination regarding the general education courses at an institution in accord with the agency's standard. The conduct of a student records check to verify whether a student's transcript is in accord with Core Requirement 2.7.3 is a reactive, rather than proactive approach to ensure that institutions are accountable to the agency's curricula standard.

Staff determination: The agency does not meet the requirements of this standard. The agency must provide evidence that it consistently and effectively applies its curricula standard, specifically with regard to its application of Core Requirement 2.7.3.

Analyst Remarks to Response:

The agency has adopted multiple measures to ensure consistency in its application of CR 2.7.3, to include clarifications in its written guidance to evaluators and institutions, strengthened training for committee chairs, and an amended template evaluation sheet for its evaluators. All of the written guidance reflects the need for evaluators to verify an institution's compliance under CR 2.7.3, in accord with the agency's interpretation. However, the agency must also provide evidence of the effective and consistent implementation of its new guidance and training by providing a sample of team reports that assess compliance under CR 2.7.3.

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

The agency must provide evidence that it consistently and effectively applies its curricula standard, specifically with regard to its application of Core Requirement 2.7.3

§602.17 Application of standards in reaching an accrediting decision.

The agency must have effective mechanisms for evaluating an institution's or program's compliance with the agency's standards before reaching a decision to accredit or preaccredit the institution or program. The agency meets this requirement if the agency demonstrates that it--

(f) Provides the institution or program with a detailed written report that assesses--

(1) The institution's or program's compliance with the agency's standards, including areas needing improvement; and

(2) The institution's or program's performance with respect to student achievement;

and

The agency provides the institution with a detailed written report that assesses an institution's compliance with the agency's standards, including areas needing improvement; and an institution's performance with respect to student achievement, by issuance of its reaffirmation report. The reaffirmation report is a detailed standard-by-standard report that assesses the institution's compliance with each of the agency's criteria. However, as detailed in the staff analysis under section 602.16(a)(1)(i), the reports provided by the agency are deficient in fleshing out a compliance determination in accordance with the agency's student achievement standard. Therefore, the agency's report to the institution on its performance with respect to student achievement is also deficient in that it does not fully assess the institution's performance with respect to student achievement.

Staff determination: The agency does not meet the requirements of this section. The agency must provide more detail in its written report assessing an institution's performance with respect to student achievement.

Analyst Remarks to Response:

The agency has addressed the inconsistent application of its student achievement standard under FR 4.1 by providing further written guidance to its off-site and on-site committees, and institutions via its resource manual. The agency has specified language and expectations for compliance under the respective section to clarify that evaluators must review the appropriateness of institutionally-identified student achievement criteria, with respect to an institution's mission, as well as the institution's expected thresholds of achievement, which the agency expects will provide the requisite detail under subsection (2) of this section. The agency must also provide evidence of its

implementation of its clarified guidance.

Staff determination: The agency does not meet the requirements of this section. The agency must provide evidence of the application of its new guidance under FR 4.1 resulting in a detailed written report that assesses an institution's performance with respect to student achievement.

§602.22 Substantive change.

(ix) The acquisition of any other institution or any program or location of another institution.

(x) The addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.

The agency's substantive change policies and procedures include the types of substantive changes described under this section. However, the agency has not provided examples of substantive change approvals applicable under this section, or state that it has not had an opportunity to apply its substantive change policy in the cases of subsections (ix) and (x) above.

Staff determination: The agency does not meet the requirements of this section. The agency must provide evidence of its application of its substantive change policy.

Analyst Remarks to Response:

The agency has stated in its narrative that it has not had occasion to apply its policy on subsection (x) under this section. The agency has provided a copy of an approval under subsection (ix) of this section, but the approval appears to have been granted at the staff level of the agency. As an accreditation decision affecting an institution's scope of accreditation, the Department's substantive change provisions require approval by the agency's decision-making body.

Staff determination: The agency does not meet the requirements of this section. The agency must provide evidence that its substantive changes are approved by its decision-making body.

PART III: THIRD PARTY COMMENTS

Staff Analysis of 3rd Party Written Comments

The Department has received seven third-party comments (two comments are from the same commenter and address the same issue); six comments pertain to the agency's accreditation of and processing of complaints against an institution (Alabama A&M University or AAMU). The six comments allege non-compliance with several areas of the Secretary's criteria, to include: section 602.15(a)(6)(v), and the agency's attendant conflict-of-interest policy for staff; and sections of the criteria having to do with the agency's application of standards; monitoring and reevaluation of institutions; enforcement of standards; review of standards; and substantive change provisions. Two comments also allege that SACS was remiss in applying its principle of integrity in the case of AAMU.

In its response, SACS provided detailed information regarding its review of AAMU. The current status of the multiple complaints the agency has received regarding AAMU, (and that are the subject of the third party comments), is that the institution's monitoring report outlining its response on two outstanding issues, is scheduled for a review at the agency's June 2012 meeting. Complainants have also availed themselves of an appeal to the Commission's Chair regarding the handling of their complaints by agency staff. The result of the appeal to the Commission's Chair was issued on April 18, subsequent to the agency's submission of its response to the draft staff analysis. Therefore, many of the issues presented by third-party commenters were, at the time of this review, still pending review by the agency.

Based on the agency's response and Department staff's review of the materials, Department staff raises concerns and questions in the following areas:

1) Third party commenters allege that SACS did not properly cite the institution for being out of compliance with the agency's principle of integrity. Department staff questions whether, subsequent to the September 2011 special committee visit when the team determined compliance with the agency's principle, but noted areas where communication and the provision of materials could have been improved, there has been a secondary review of the institution under the agency's principle of integrity in light of commenters' concerns with the President's alleged mischaracterization of AAMU's accreditation status in January 2012. Additionally, did the agency provide for the public correction of incorrect or misleading information the institution allegedly released about its accreditation status, the contents of reports of on-site reviews, and the agency's accrediting actions with respect to the institution as required under section 602.23(e)?

2) One commenter alleged violations of conflict of interest when the agency's President accepted an invitation to be the institution's commencement speaker in December 2010. The agency's staff response to the Commission Chair (Appendix I) indicates that, no Commission policies preclude the President from speaking at any events of any of its members. Department staff requests further clarification regarding the President's decision to serve as a commencement speaker in light of the agency's conflict of interest policy for staff. Specifically,

Department staff requests further information on whether an honorarium or other payment was received in exchange for such services, and whether or not the agency's President recused herself from review of complaints pertaining to AAMU.

3) The agency has provided a detailed response indicating it had followed its complaint procedures and timeframes for review of the complaints submitted against AAMU. As described in the agency's staff response to the Chair of the Commission (Appendix I), the agency's response to complainants were sometimes delayed. The agency states that it received, and continued to receive, voluminous and sometimes repetitive complaints regarding the institution which placed a heavy burden on processing the complaints by agency staff. Agency staff also acknowledged that staff turnover may have contributed to an oversight in providing a courtesy communication to the complainants regarding the status of the complaints. What measures, if any, has the agency adopted to ensure a continuance of operations in the case of staff turnover?

4) Department staff requests all information pertaining to the resolution of the complaints described by the third party commenters, including the Commission's review of the institution's monitoring report in June 2012, and the April 2012 Executive Council's review of materials requested by the Commission's Chair.

The seventh third-party comment is unrelated to the other six and pertains to general concerns against the agency having to do with administrative and financial resources, training of evaluators, collection of job placement data, faculty standards, inconsistency in reviews, monitoring, and review of standards.

The agency has provided a response to the third party comment refuting many of the commenter's concerns as factual errors and unsupported by documentation. Indeed, the commenter refers to transcripts from the agency's review for continued recognition in 2006, after which the agency had made substantial changes to conform with appropriate sections of the Secretary's criteria. Some of the commenter's concerns are addressed by the findings of this staff analysis, to include concerns regarding the application of the agency's student achievement standard, the provision of a detailed written report that assesses an institution's performance with respect to student achievement, and the codification of a process to evaluate a pattern of student complaints as part of its review of an institution's record of student complaints. In its response, the agency addressed the commenter's concerns regarding its faculty standard, evaluator training, monitoring, review of standards, and third-party comment procedures, to include a description of the changes the agency has made to its operations since 2006, as well as to clarify the agency's current procedures.

However, one issue raised by the third party commenter, and in light of the other concerns cited by commenters here, pertains to the agency's administrative capacity, particularly with regard to the processing of complaints. The agency has described in its response the increased allocation of staff and resources directed to its accreditation review process since 2005. Has the agency taken

measures to reallocate resources to its review process for complaints, in light of the experiences presented by third-party commenters here?

Agency Response to 3rd Party Comments

See attachments for response and accompanying documents.