Executive Summary

PART I: GENERAL INFORMATION ABOUT THE AGENCY

The Montessori Accreditation Council for Teacher Education (MACTE) is a national programmatic and institutional accreditor. The agency currently accredits 103 freestanding institutions, and 13 programs affiliated with a college or university, located throughout the United States.

Three of the freestanding institutions (one in Montana and two in Florida) include a substantial distance education component. All three of those institutions also require their students to attend at least 120 hours of residential instruction at their respective institutions in compliance with MACTE policies.

The agency's recognition enables its institutions to establish eligibility to receive Federal student assistance funding under Title IV of the Higher Education Act of 1965, as amended (Title IV). MACTE serves as the Title IV gatekeeper for four of the freestanding institutions that the agency accredits. (The three institutions with a substantial distance education component do not participate in Title IV programs.)

Recognition History

The Secretary of Education first recognized MACTE in 1995. Since that time, the Secretary periodically reviewed the agency and granted continued recognition. The last review of the agency took place at the December 2015 meeting of the National Advisory Committee on Institutional Quality and Integrity (NACIQI). After that review, the Department extended the agency's previous grant of recognition and required a compliance report on the three issues cited in the staff analysis. The first issue was regarding on-site verification and assessment of benchmarks and standards, the second issue was regarding effective monitoring activities, and the third was regarding a clear written policy and definition for granting a "good cause" extension. All issues have been reviewed and the agency has met these requirements.

As part of its evaluation of the agency’s current compliance report, Department staff reviewed the agency’s narrative and supporting documentation. The Department received no written complaints regarding MACTE during this review period and there were no third-party comments.

PART II: SUMMARY OF FINDINGS

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--
The institution’s or program’s compliance with the agency’s standards, including areas needing improvement; and

The institution’s or program’s performance with respect to student achievement; and

Previous Issue: The Department found that the agency needed to provide documentation informing the program with clear assessment benchmarks and standards for the program’s performance with respect to student achievement. The Department also found that the agency needed to provide documentation that the On-Site Verification Team (OSTV) was trained on verifying the consistency and accuracy of student achievement data reported by the program.

Current Review: The agency has provided sample documentation of the graduation rate benchmarks (Ex. 20) and the requirement (Ex. 4) for an on-site review of attendance records, graduation rates, employer surveys, placement rates. In addition, the agency also provided documentation of OSVT training guidelines (Ex. 10) with instruction on how to verify consistency and accuracy of reported student achievement data including, review of reported data, inspection of program files and records, interviews with program participants, faculty, and administrators.

The On-Site Visit Guidelines are provided sample documentation (Ex. 16) of the agency's requirement for the Team to review records and assessment documents to meet agency standards. However, during the On-Site Visit to the sample program, the criteria were not met. Therefore, the agency has provided follow up sample documents to demonstrate the agency's response to the program (Ex. 13) and accreditation decisions based on the review (Ex. 12).

The agency has met this requirement based on documentation of assessment standards and for verification of graduate and placement rates and the overall review of the OSVT for accrediting decisions.

Analyst Remarks to Response:
The agency has provided sufficient documentation to meet this requirement. Agency provided documentation of assessment standards and for verification of graduate and placement rates and the overall review of the OSVT for accrediting decisions as required for this criterion.

602.19 Monitoring and reevaluation of accredited institutions and programs.

These approaches must include periodic reports, and collection and analysis of key data and indicators, identified by the agency, including, but not limited to, fiscal information and measures of student achievement, consistent with the provisions of §602.16(f). This provision does not require institutions or programs to provide annual reports on each specific accreditation criterion.

Previous Issue: The Department found that the agency needed to present evidence of effectively monitoring a program for continued compliance through the period of accreditation. Specifically, MACTE needed to show how it flagged discrepancies and followed up with the program as a result of compliance problems identified in a monitoring activity.

Current Review: As found in 602.17(f), the agency discussed in the narrative and provided documentation (Ex. 4) that it monitors programs throughout the accreditation period and how it uses student achievement data and financial information to assess continued compliance.

MACTE provided sample documents of an instance where it identified compliance problems during a program’s On Site Verification Report for renewal of accreditation, the program’s response and action items for compliance, and the written notice of non-compliance (Ex. 12) including a timeline to make corrections and the potential adverse action if the program does not correct the problems. The agency conducted program monitoring activities including requiring the program to submit a Narrative Explanation and Improvement Plan within three months of receiving the written notice; identifying indicators and contributors for graduate and placement rates below the 70% threshold; and imposing a two-year deadline for program improvement.

The agency has noted that, although the 70% threshold is at risk for smaller programs (less than ten students), all but twelve of 124 accredited programs were above the graduation rate benchmark and all had 100% placement/employment rates during this reporting period.

The agency also discusses monitoring activities in the narrative and includes benchmarks for student achievement and provides documentation of an Annual Report (Ex. 19) to demonstrate the continued use of the student achievement data and financial
information for reevaluation on an annual basis.

**Analyst Remarks to Response:**
The agency did not need to respond to this section because it met the requirement for monitoring programs throughout an accreditation period. As noted in the Analyst Remarks, the agency also uses student achievement data and financial information to assess compliance.

### 602.20 Enforcement of standards

**Previous Issue:** The Department found that the agency needed to have a clear written policy for extending the period for coming into full compliance with an agency standard when a program had been cited for being in non-compliance, but failed to come into compliance within a specified time period. The Department also found that the agency needed to define specific reasons for granting a "good cause" extension for coming into compliance.

**Current Review:** The agency has provided documentation (Ex. 21) of a program's opportunity to request a good cause when found not in compliance. The standard notes that an extension may be granted for up to one year due to "catastrophic circumstances."

In addition, the agency's Guide to Accreditation (Ex. 21) notes the policy for requesting an extension, the standard time period, and immediate adverse action for not meeting the agency's standard for compliance within the extension deadline. Program requests for an extension are reviewed case-by-case and is documented with a remediation plan.

However, the agency has not provided narrative or documentation of an appropriate aspects or factors for allowing a program an extension to bring itself into compliance with the specified time period. The agency should also provide narrative or documentation that includes the limits on frequency, and provisions for monitoring extensions that have been granted.

**Analyst Remarks to Response:**
The agency has provided sufficient documentation, such as a letter of request for an extension for accreditation renewal and agency decision letters, to demonstrate enforcement of action to meet this requirement. As noted in the narrative, the agency has standards for programs found not in compliance during the pre-accreditation stage where they are, or can be, granted extensions during which time there are remediation and follow-up site visits for a period of not more than two years depending on the length of the certification program. Programs in the renewal of accreditation stage are granted extensions for good cause, also for a period of not more than two years based on the length of the certification program. In any case, the good cause extension period will not exceed two years. As part of the draft staff analysis, the Department reviewed the agency's documentation (Ex. 21 – Guide to Accreditation) and identified the policy for a program to request an extension for good cause, however, there were no examples of catastrophic circumstances as noted in the Guide which would allow a program to immediately determine eligibility for an extension. However, after reviewing documentation showing that the agency implemented its policy by considering a program making good progress toward demonstrating compliance (Ex. 22) but, due to circumstances acceptable to the agency as defined in the policy, was granted a good cause extension (Ex. 23). In addition, Department staff also discussed the agency's policy relative to the agency's accreditation of free-standing institutions which are not included in a college/university. The loss of staff or hospitalization of the program's director could result in significant loss of personnel enabled to complete the compliance report and is an appropriate "catastrophic circumstance." The Department has reviewed the agency's additional documentation and considered the agency's policy and practice reasonable and acceptable.

**PART III: THIRD PARTY COMMENTS**
The Department did not receive any written third - party comments regarding this agency.