

<b>Name:</b> National Association Of Schools Of Theatre, Commission on Accreditation	<b>Meeting Date:</b> 07/31/2019	<b>Response Submit Date:</b> 05/31/2019	<b>Status:</b> Final Review	<b>Type:</b> Renewal Petition
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## U.S. Department of Education

Staff Report

to the

Senior Department Official

on

Recognition Compliance Issues

## Recommendation Page

1. **Agency:** National Association Of Schools Of Theatre, Commission on Accreditation
2. **Action Item:** Renewal Petition
3. **Current Scope of Recognition:** The accreditation throughout the United States of freestanding institutions that offer theatre and theatre-related programs (both degree and non-degree-granting), including those offered via distance education.
4. **Requested Scope of Recognition:** Same as above.
5. **Date of Advisory Committee Meeting:** July 31, 2019
6. **Staff Recommendation:** Continue the agency's recognition as a nationally recognized accrediting agency at this time, and require the agency to come into compliance within 12 months with the criterion listed below and submit a compliance report due 30 days thereafter that demonstrates the agency's compliance.
7. **Issues or Problems:** It does not appear that the agency meets the following sections of the Secretary's Criteria for Recognition. These issues are summarized below and discussed in detail under the Summary of Findings section. -- The agency must amend its continuous deferral policy to clarify that probation is not a possible action after an institution has been deferred past the timelines described in this criterion for non-compliance with its standards. Additionally, the agency must clarify its Appendix III.G. to state that the agency cannot exceed the timelines found in Appendix III.G. for an institution that continues to be non-compliant with any standard unless a good cause extension has been granted. [§602.20(a)]

## Executive Summary

### **Part I: General Information About The Agency**

The National Association of Schools of Theatre (NAST) Commission on Accreditation accredits freestanding institutions of theatre and theatre-related programs (both degree and non-degree granting), including those offered via distance education. The Secretary's recognition of the agency's accreditation of freestanding institutions that offer theatre and theatre-related programs enables those institutions to establish eligibility to receive Federal student assistance funding under Title IV of the Higher Education Act of 1965, as amended (Title IV).

#### **Recognition History**

The NAST Commission on Accreditation was granted initial recognition in 1982 and has been periodically reviewed for renewal of recognition since that time. The agency's most recent petition for recognition was received in 2014 and recognition was renewed until 2019. The agency submitted a petition for renewal of recognition for the July, 2019 NACIQI meeting, and that petition is the subject of this analysis.

### **Part II: Summary Of Findings**

#### **602.15(a)(2) Competency of Representatives**

**(2) Competent and knowledgeable individuals, qualified by education and experience in their own right and trained by the agency on their responsibilities, as appropriate for their roles, regarding the agency's standards, policies, and procedures, to conduct its on-site evaluations, apply or establish its policies, and make its**

**accrediting and preaccrediting decisions, including, if applicable to the agency's scope, their responsibilities regarding distance education and correspondence education;**

The agency provided documentation of the portions of its bylaws and its handbook addressing the minimum requirements and process for selecting individuals for the executive committee, along with biographical information about the individuals currently filling these positions.

The agency also provided information regarding selection to the commission, along with biographical information about the individuals currently filling those positions.

The agency provided documentation of training provided to its commission members and evaluators. This included its orientation and briefing materials and manual for commission members, as well as documentation of training for new board members and briefings for evaluators.

The agency provided sample resumes for new evaluators, and a list of institutions to be visited. The agency's handbook includes a description of the minimum qualifications and selection process for evaluators, as well.

The agency provided documentation of its policies related to appeals panels, and noted that none have been convened during the accreditation period. The agency noted that it does not maintain an appeals panel pool, since appeals are rare, but will follow the policies and procedures in the agency's handbook if the need arises.

**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for members of the commission on accreditation, the board of directors, and the two public members who serve on both. The agency also provided via email the attached document below, which includes additional resumes for the Board of Directors. The resumes reflect appropriate qualifications for the agency roles.

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**602.15(a)(5) Public Representatives**

**(5) Representatives of the public on all decision-making bodies; and**

The agency provided its criteria for public members. The agency provided its handbook to demonstrate the agency's requirements regarding the participation of public members on all decision making bodies. The agency provided the names of the current members of the commission and the board of directors to demonstrate the inclusion of public members meeting the agency's criteria in this area. The agency provided biographical information about these two public members, as well.

The agency's policies require, and its current composition includes that two out of fifteen members of the Commission on accreditation be public members. The policies regarding the board of directors also require that two members be public members. The agency's policies regarding appeals committees include that one out of three to five appeals members be public members. The agency has not convened an appeals panel during this accreditation period.

**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided redacted resumes for its two public members, who serve on both the Board of Directors and the Commission on Accreditation. The presence of these public members results in the agency having at least one public member for each seven members of the Board or Commission.

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**602.15(a)(6) Conflict of Interest**

**(6) Clear and effective controls against conflicts of interest, or the appearance of conflicts of interest, by the agency's--**

**(i) Board members;**

**(ii) Commissioners;**

**(iii) Evaluation team members;**

**(iv) Consultants;**

**(v) Administrative staff; and**

**(vi) Other agency representatives; and**

The agency provided its conflict of interest policies in several areas. The agency provided policies regarding conflict of interest for agency staff, for commissioners, for visiting evaluators, and for Board of Director or Executive Committee members.

The agency provided documentation of its implementation of conflict of interest policies for visiting evaluators. This included initial communications with potential site visitors reminding them of conflict of interest policies and follow up emails in this area. As well, Department staff observed several verbal reminders during a commission meeting to visiting evaluators that they could not initiate motions regarding institutions or programs for which they had served as an evaluator, which constituted a verbal reminder of conflict of interest policies for visiting evaluators.

The agency's policy includes that members of the Board of Directors or Executive Committee identify areas where there could be a conflict of interest and that these members not be present or participate in issues where the conflict of interest exists. The NAST Handbook notes that these activities should be recorded in the minutes of meetings of the Board or Executive Committee. The agency also noted that invited appeals committee members shall be asked to consider whether a conflict of interest or the appearance of a conflict of interest exists, and noted that if there is a conflict of interest, that person may not serve on the appeals committee. The agency has not had an appeals panel convened during the accreditation period. The agency's Commissioners Manual (exhibit 96) states the requirement that all commissioners should declare their conflicts of interest as they appear, and notes several types of conflict of interest that should be avoided.

However, the agency did not provide documentation of implementation of conflict of interest policies for any agency activities other than verbal reminders to site visit evaluation visitors, as noted above. The agency did not provide meeting minutes for Board of Director or Executive Committee meetings to document implementation of conflict of interest policies for those meetings. The agency stated in a April 8th, 2019 communication, attached below, that a briefing took place regarding conflict of interest at the beginning of the commission meeting on March 23rd, 2019

The agency must provide documentation of the implementation of its conflict of interest policies. The documentation should include signed attestations from all commissioners, administrative staff involved in accreditation activities, and the executive committee, as well as representative sample signed attestations from site team members

**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided recent signed conflict of interest statements from a selection of visiting evaluators as well as all NAST agency staff, the members of the Board of Directors, and the members of the Commission on Accreditation.

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**602.16(a)(1)(i) Student Achievement**

**(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 provided information regarding its standards for student achievement along with sample and completed institutional self-study documents, visiting site team reports, commission action letters, and institutional responses to commission action letters for what appears to be two institutions. The agency's standards, as found in the NAST Handbook, require that institutions should include information about the competency development expected of students in their curriculum and syllabi, including information

about which elements of the curriculum are designed to develop each competency, and information about the evaluation mechanisms that are in place at the institution. NAST's Handbook describes requirements related to evaluation, which include that regular, systematic attention shall be given to evaluating the learning achievement of students and that individual evaluations shall be analyzed and organized to produce an overall picture of the extent to which educational and artistic purposes of the theatre unit are being attained. The NAST Handbook describes several of the broad range of evaluation techniques available to theatre units, such as juries, critiques, course-specific and comprehensive examinations, institutional reviews, peer reviews, and the performance of graduates in various settings. The agency's narrative noted that freestanding institutions are required to have systems for requesting and compiling occupational information from graduates, and for considering the compiled information in efforts to improve. Two "Comprehensive Review Dossier" documents were provided, which included institutional self-studies and visiting team evaluations in this area.

Dossier 1 included detailed curricula and student learning objectives; however, documentation of evaluative practices was limited. There appeared to be a section about employment history of graduates, but it is heavily redacted and it is not possible to determine what the source of this document is or what information it contains.

The visiting team for this school noted that they observed four classes, reviewed student transcripts for match with curricular requirements, and observed a play.

For dossier 2, the site visit reports provided documentation of review of sample transcripts or evaluation forms for students, as well as review of performances which exhibited student competencies. As with dossier 1, this dossier included a site visit report that discussed review of student transcripts, review of curricular standards for student learning objectives, and described visiting student classes and watching a student production. This dossier also included detailed student evaluations and described performative evaluations that are conducted at the end of different stages of the program.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self-study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

Since the agency allows institutions to establish their own student achievement standards, the agency has not explained how it determines or evaluates whether an institution's student achievement standards are sufficiently rigorous as required by regulation. Furthermore, the site visit reports do not indicate the role of each member. The Department is unable to determine the composition of each site visit team, therefore the agency has not demonstrated that it includes an academic and an administrator representative on each team. For each submitted site visit report, the agency must identify the roles of each site team member for each institution.

Note: FOIA Exemption (b)(6) permits the government to withhold all information about individuals in "personnel and medical files and similar files" when the disclosure of such information "would constitute a clearly unwarranted invasion of personal privacy." OGC has determined that the institution of higher education is not an individual, so this FOIA exemption does not apply to the names of institutions.

#### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency referred to the required competencies established for each type of theatre program as established in the NAST handbook. The agency described the continuous feedback mechanisms required for theatre and noted that the agency requires implementation of in-depth and multi-faceted evaluation mechanisms. The agency noted that institutional evaluations require evaluators to review student performance and the quality of student work in each area or major.

Additionally, the agency provided the resumes of visiting evaluators for both of the institutions for which a full-cycle of documentation was provided, demonstrating expertise in both administrative and academic areas present on each evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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#### **602.16(a)(1)(ii) Curricula**

##### **(a)(1)(ii) Curricula.**

The agency's standards for curriculum as found in the NAST Handbook require theatre units to publish detailed information about the course of study, including the method of delivery, required competencies, time and work commitments involved, etc. The agency provided self-studies from two institutions which included comprehensive information about the curriculum, including competencies to

be developed and activities and forms of progress expected from students. The agency provided site visit reports which documented review of these institutions in this area. However, the site visit reports were heavily redacted and it could not be determined if the appropriate expertise was present at the site visit.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

Furthermore, the site visit reports do not indicate the role of each member. The Department is unable to determine the composition of each team, therefore the agency has not demonstrated that it includes an academic and an administrator representative. For each submitted site visit report, the agency must identify the roles of each site team member for each institution.

Note: FOIA Exemption (b)(6) permits the government to withhold all information about individuals in "personnel and medical files and similar files" when the disclosure of such information "would constitute a clearly unwarranted invasion of personal privacy." OGC has determined that the institution of higher education is not an individual, so this FOIA exemption does not apply to the names of institutions.

#### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team.

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Additionally, the agency provided the resumes of visiting evaluators for both of the institutions for which a full-cycle of documentation was provided, demonstrating expertise in both administrative and academic areas present on each evaluation team. The agency provided DAPIP ID numbers to identify institutions and demonstrate the documentation is related and regarding the same institution.

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#### **602.16(a)(1)(iii) Faculty**

##### **(a)(1)(iii) Faculty.**

The agency provided its Handbook to document faculty standards, which include requirements regarding student/staff ratio, faculty qualifications, faculty course load, and faculty involvement in the development of the artistic program for the institution. The agency documented implementation of these standards through two self-study reports and site visit reports, which detail information about faculty involvement at each institution and document how each institution meets the agency's standards in this area.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

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#### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review

documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify institutions and demonstrate the documentation is related and regarding the same institution.

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### **602.16(a)(1)(iv) Facilities/Equipment/Supplies**

#### **(a)(1)(iv) Facilities, equipment, and supplies.**

The agency's standards address requirements related to facilities, equipment, technology, space, the number of rehearsal, performance, and classroom spaces, and the provision of information related to health and safety within the theatre context. The agency's Handbook also addresses the requirement for library, learning and information resources necessary to fill the purposes of the theatre unit. The agency provided two comprehensive dossiers to document self-studies and site visit reports reviewing each theatre unit in this area, and the agency's procedures for a site visit report, which documents the requirement for site visitors to review each theatre unit in these areas.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

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Note: FOIA Exemption (b)(6) permits the government to withhold all information about individuals in "personnel and medical files and similar files" when the disclosure of such information "would constitute a clearly unwarranted invasion of personal privacy." OGC has determined that the institution of higher education is not an individual, so this FOIA exemption does not apply to the names of institutions.

#### **Analyst Remarks to Response :**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution. These resumes demonstrate both academic and administrative experience on the evaluation team.

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### **602.16(a)(1)(v) Student Complaints**

#### **(a)(1)(v) Fiscal and administrative capacity as appropriate to the specified scale of operations.**

The agency's Handbook includes standards related to the fiscal and administrative capacity of institutions. The agency's standards include requirements related to the adequacy of financial resources and longevity of financial support and budget allocations from year to year. NAST requires each institution to publish all regulations and policies related to tuition, fees, and other charges, and to develop a tuition refund policy that is equitable to both the institution and the student. NAST documented its standards related to the maintenance of financial records and accounting practices, including requirements regarding the frequency of audits. The agency provided two comprehensive dossiers to document self-studies and site visit reports reviewing each theatre unit in this area, and the agency's procedures for a site visit report, including audit information and documentation of review of fiscal information.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

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**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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**602.16(a)(1)(vi) Fiscal/Administrative Capacity**

**(a)(1)(vi) Student support services.**

The agency listed several areas in which its standards address student services. The agency provided a self-study template, which asks institutions to address advisement of students in the areas of program content, program completion, careers or future studies, and theatre-specific student services associated with individual students' programs. In addition to advisement, the agency's standards require that an institution seek out student views and judgments in those matters in which students have a direct and reasonable interest. The agency's standards require that institutions must provide student services consistent with their mission, goals, and objectives. The agency requires that student services be organized and managed by individuals with appropriate training, experience, and abilities, that all types of services shall be available to students, and that the institutions must provide an orientation program that acquaints incoming students with student services. The standards require that institutions provide or facilitate access to education and counseling, to include personal, social, vocational and financial issues and the professional care associated with the maintenance of physical and mental health.

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**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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**602.16(a)(1)(vii) Student Support Services**

**(a)(1)(vii) Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising.**

The agency provided documentation of its standards related to recruiting, admission, academic calendars, catalogs, publications, and advertising. The agency's standards H and I address these areas, with requirements related to publication about information relevant to these areas and around the practices of recruiting and admitting appropriate students to a program. The agency provided two full-cycle review dossiers to demonstrate review by the agency in each area, with each dossier including self-studies, site visit reports, commission decisions, and other appropriate documentation. However, due to heavy redactions, it could not be

determined that the site visit review met the agency's standards.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

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In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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**602.16(a)(1)(viii) Recruiting & Other Practices**

**(a)(1)(viii) Measures of program length and the objectives of the degrees or credentials offered.**

The agency provided documentation of its standards in this area, with standards addressing several issues around credit hours, including matching credit hour requirements to program length and type, publication of information around credit hour requirements, and requirements related to transfer of credit. The agency provided documents to demonstrate review of two institutions in this area; however, due to heavy redactions, it was not possible to determine if these documents showed implementation of the agency's policies under this criterion.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

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In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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**602.16(a)(1)(ix) Program Length**

**(a)(1)(ix) Record of student complaints received by, or available to, the agency.**

The agency's policies and procedures include information about processes for handling complaints received by the agency about an institution or program, and the agency's narrative stated that none of its accredited institutions have been the subject of a formal complaint process in the past five years.

The agency provided its standards of accreditation, which addresses institutional student complaint policies under Section 1. G. 8 Complaints. The agency's standards require that the institution maintain policies concerning student responsibilities and rights, including complaint procedures. The agency's policy includes that these policies must be clearly stated, well-publicized, readily available, and administered fairly and consistently. NAST's procedures for visiting evaluators states that the evaluator should evaluate the institution's student complaint policy and effectiveness with regard to its application and effectiveness.

The agency provided two dossiers documenting full cycle reviews of two institutions. The self-studies in each dossier addressed student complaints. One institution provided expansions to its student complaint policies; another discussed the types of complaints it typically received and how those are typically resolved. The site visit reports for each institution documented a review of the institution's student complaint policies and evaluation of the familiarity of this policy to students through discussion with students. However, it wasn't possible to determine if the site visit team had the appropriate expertise on it due to heavy redactions.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

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#### **602.16(a)(1)(x) Title IV Responsibilities**

**(a)(1)(x) Record of compliance with the institution's program responsibilities under Title IV of the Act, based on the most recent student loan default rate data provided by the Secretary, the results of financial or compliance audits, program reviews, and any other information that the Secretary may provide to the agency; and**

The agency provided evidence of its standards, policies and procedures in relation to Title IV program responsibilities for freestanding institutions of higher education, in addition to two sample dossiers including documentation of review of freestanding institutions in this area, and its supplemental annual report form, which is required for freestanding institutions. The agency's policies include that freestanding institutions must submit financial information annually to the agency, including tuition and fee schedules, a summary of the institution's involvement with Federal and state student loan and grant programs, and an annual audited financial statement, as well as additional information relevant to this criterion. '

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

Furthermore, the site visit reports do not indicate the role of each member. The Department is unable to determine the composition of each team, therefore the agency has not demonstrated that it includes an academic and an administrator representative. For

each submitted site visit report, the agency must identify the roles of each site team member for each institution.

Note: FOIA Exemption (b)(6) permits the government to withhold all information about individuals in "personnel and medical files and similar files" when the disclosure of such information "would constitute a clearly unwarranted invasion of personal privacy." OGC has determined that the institution of higher education is not an individual, so this FOIA exemption does not apply to the names of institutions.

**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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**602.17(a) Mission & Objectives**

**(a) Evaluates whether an institution or program--**

- (1) Maintains clearly specified educational objectives that are consistent with its mission and appropriate in light of the degrees or certificates awarded;**
- (2) Is successful in achieving its stated objectives; and**
- (3) Maintains degree and certificate requirements that at least conform to commonly accepted standards;**

The agency provided its standards regarding institutional purpose statements, which include requirements as well as guidelines and recommendations. The standards in this area are categorized by degree level and require institutions or programs to have purpose statements that are appropriate to the level of education and their placement (if applicable) in a larger institution. The agency provided its manual for commission readers, which instructs readers to respect local purposes and achievements, with guidance for readers on how to respect institutional goals, objectives, and achievements. The agency also provided its Rules of Practice and Procedure, and its Procedures for the Self Study document, which demonstrates its process for collecting information about institutional mission as part of its accrediting activities. The full-cycle dossiers provided for two institutions provide some evidence of assessment by the agency in this area, with completed self-studies and site visit reports documenting review in this area. However, due to heavy redactions, it is not possible to determine if the site visits documented had the required composition for review. '

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self- study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID

Furthermore, the site visit reports do not indicate the role of each member. The Department is unable to determine the composition of each team, therefore the agency has not demonstrated that it includes an academic and an administrator representative. For each submitted site visit report, the agency must identify the roles of each site team member for each institution.

Note: FOIA Exemption (b)(6) permits the government to withhold all information about individuals in "personnel and medical files and similar files" when the disclosure of such information "would constitute a clearly unwarranted invasion of personal privacy." OGC has determined that the institution of higher education is not an individual, so this FOIA exemption does not apply to the names of institutions.

**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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## **602.17(f) Report on Compliance & Student Achievement**

**(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 noted that during each full cycle review, each institution receives a site visit report and a commission decision letter, each of which comments upon the institution's compliance with agency standards and upon the institution's performance with respect to student achievement. The agency provided two dossiers documenting institutional self-studies, site visit reports, and commission decision letters showing communications with the institutions in these areas.

It is important to note that the agency's practice of redacting the name of the institution described in the petition narrative hinders staff analysis for agency compliance with the requirements of the section and prevents Department staff from conducting certain checks and comparisons during the analysis (such as determining if the self-study and the team report are actually for the same institution or if the institution being evaluated is listed on the agency's accredited schools list). The agency must attempt to provide this needed information for a compliance determination. If the agency does not wish to include the name of the institution, it could use another identifier, such as the schools OPE ID.

Furthermore, the site visit reports do not indicate the role of each member. The Department is unable to determine the composition of each team, therefore the agency has not demonstrated that it includes an academic and an administrator representative. For each submitted site visit report, the agency must identify the roles of each site team member for each institution.

Note: FOIA Exemption (b)(6) permits the government to withhold all information about individuals in "personnel and medical files and similar files" when the disclosure of such information "would constitute a clearly unwarranted invasion of personal privacy." OGC has determined that the institution of higher education is not an individual, so this FOIA exemption does not apply to the names of institutions.

### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided resumes for the evaluation teams for the two sets of institutional review documents submitted. These resumes demonstrate both academic and administrative experience on the evaluation team. The agency provided DAPIP ID and OPE ID numbers to identify the documentation used for the full cycle review and the evaluators in order to demonstrate that the documentation is related and regarding the same institution.

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## **602.19(b) Monitoring**

**(b) The agency must demonstrate it has, and effectively applies, a set of monitoring and evaluation approaches that enables the agency to identify problems with an institution's or program's continued compliance with agency standards and that takes into account institutional or program strengths and stability. 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.**

The agency described several mechanisms used for monitoring institutions. The agency requires all institutions to submit a HEADS data survey, which includes information about enrollment and the characteristics of the faculty and student population at each institution, as well as graduation information. All institutions also submit a yearly Accreditation Audit and Affirmation Statement. Freestanding institutions are required to include a Supplemental Annual Report, which includes financial information, including a yearly audit, as well as information on graduate occupation in the field. Institutions must submit substantive change information as per the agency's policies.

Due to heavy redactions, it isn't clear that the monitoring documentation provided by the agency are from institutions within the scope of the agency's recognition. At least one of the submitted HEADS forms appears to be from an institution not within the agency's scope of recognition.

### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided the HEADS data survey form and supplemental annual report forms for the two institutions for which a set of review cycle documents was provided. The HEADS form provides information about the number

of enrollees and graduates in each program, the faculty for each program, and budget information. The supplemental annual forms provide additional information such as the submission of yearly audits and information about each school's participation in Title IV programs.

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### **602.20(a) Enforcement Timelines**

**(a) If the agency's review of an institution or program under any standard indicates that the institution or program is not in compliance with that standard, the agency must--**

**(1) Immediately initiate adverse action against the institution or program; or**

**(2) Require the institution or program to take appropriate action to bring itself into compliance with the agency's standards within a time period that must not exceed--**

**(i) Twelve months, if the program, or the longest program offered by the institution, is less than one year in length;**

**(ii) Eighteen months, if the program, or the longest program offered by the institution, is at least one year, but less than two years, in length; or**

**(iii) Two years, if the program, or the longest program offered by the institution, is at least two years in length.**

The agency describes its deferral policy, which appears to be applied in several ways. As discussed in exhibit 144 (in the agency's policy for continued deferrals) the document reads, "in the accreditation process, the Commission finds a situation in which an institution cannot be given initial accreditation or renewal of accreditation on the basis of evidence presented. This may be because the institution already does not meet the standards as outlined in the NAST Handbook, or because the institution does not appear to meet the standards as outlined in the NAST Handbook, or because sufficient information has not been provided". This language is problematic and would seem to indicate the agency is deferring action on a known and acknowledge noncompliant issue, with no public notification. It is unclear as to whether the agency's policy on deferrals actually allows a known and acknowledged noncompliant issue to exist, with no action, no public notification, and possibly exceed the enforcement timelines allowed by this criterion. The agency's policy also provides for the option to place an institution on probation after the second consecutive deferral, which is also a concern. It is also unclear as to when the agency starts the clock initiating the enforcement timelines required by this criterion relative to its deferral policies.

In addition, the Guidelines for interpreting the continuous deferral policy (Exhibit 57 Appendix III.G.) stipulates that, "normally" the total time for demonstrating compliance shall not exceed the timeframes in this section of the Secretary's criteria. This statement makes the agency's policy noncompliant.

It is not clear why the agency would defer action in circumstances when it has found an institution out of compliance with one or more of its standards. In accordance with the Secretary's Criteria for Recognition, an agency is required to take immediate adverse action, or give the institution a specific timeframe for coming into compliance. The agency must amend its policy to state that the enforcement timelines required by this criterion will not be exceeded. As discussed previously, the agency's current policy states that normally the timelines will not be exceeded. The agency must also ensure that when it is determined that an institution is noncompliant the required timelines are initiated. The agency cannot defer action when it has determined that an institution is noncompliant with its standards. This must be reflected in the agency's policy and procedures.

### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency's narrative stated that "Deferral" is defined by the agency as an action taken by the Commission which indicates that at least one issue of apparent non-compliance exists. The agency also stated that should the institution exceed the provisions of either the continuous deferral policy or the Appendix III.G., a negative action will result.

However, currently the continuous deferral policy allows probation as a possible action after two deferrals, and probation is not a

negative action. The agency's narrative states that the timelines cannot be exceeded, but the agency has separately stated that deferral periods are always one year for this agency, since the commission meets yearly. Therefore, allowing probation after a second consecutive deferral will exceed the timelines allowed in Appendix III.G., bringing these two policies into conflict with one another. If an institution has not demonstrated full compliance with the standards after two consecutive deferrals, or after the end of the timelines described in Appendix III.G., whichever happens earlier, the agency's policies must require either a negative action or an extension for good cause. Currently, the continuous deferral policy allows probation in that circumstance.

The agency also stated that the qualifying language found in the NAST handbook (which states that "normally" an institution is required to follow the timelines found in Appendix III.G.) is included to refer to situations where the timelines are extended for good cause. However, the wording of this policy does not clearly state that the only exception to the timelines described in Appendix III.G. would be in cases of a good cause extension.

The agency must amend its continuous deferral policy to clarify that probation is not a possible action after an institution has been deferred past the timelines described in this criterion for non-compliance with its standards. Additionally, the agency must clarify its Appendix III.G. to state that the agency cannot exceed the timelines found in Appendix III.G. for an institution that continues to be non-compliant with any standard unless a good cause extension has been granted.

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### **602.23(a) Public Information**

**(a) The agency must maintain and make available to the public written materials describing--**

- (1) Each type of accreditation and preaccreditation it grants;**
- (2) The procedures that institutions or programs must follow in applying for accreditation or preaccreditation;**
- (3) The standards and procedures it uses to determine whether to grant, reaffirm, reinstate, restrict, deny, revoke, terminate, or take any other action related to each type of accreditation and preaccreditation that the agency grants;**
- (4) The institutions and programs that the agency currently accredits or preaccredits and, for each institution and program, the year the agency will next review or reconsider it for accreditation or preaccreditation; and**
- (5) The names, academic and professional qualifications, and relevant employment and organizational affiliations of--**
  - (i) The members of the agency's policy and decision-making bodies; and**
  - (ii) The agency's principal administrative staff.**

The agency's website states:

"NAST is recognized by the U.S. Secretary of Education as the institutional and specialized accrediting body for the field of theatre. This recognition enables NAST to function as a gatekeeper for the purpose of Title IV funding eligibility for independent schools of theatre not otherwise institutionally accredited."

The agency's scope of recognition by the Secretary must be presented accurately on the website. The agency's current scope of recognition is:

"Scope of recognition: the accreditation throughout the United States of freestanding institutions that offer theatre and theatre-related programs (both degree and non-degree-granting), including those offered via distance education."

### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency has stated that it has adjusted its website to reflect its current scope of recognition from the Secretary.

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## **Part III: Third Party Comments**

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