ABHE
Commision on Accreditation

2022
COMMISSION ON ACCREDITATION
EVALUATION TEAM HANDBOOK

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Appendices

(with hyperlinks)

1. Introduction

The *Commission on Accreditation Manual* (*COA Manual*) details ABHE Standards, policies, and procedures for ABHE accreditation. The Evaluation Team Handbook supplements the COA Manual by providing guidance specific to the process and preparations for Team Evaluators. A team evaluator will need both the COA Manual and the Evaluation Team Handbook in preparation for a Team Visit.

The Evaluation Team Handbook is designed to address the following:
1. Understanding of the Evaluation Process
2. Responsibilities of the Evaluation Team
3. Elements of note during the preparation, on-site, report writing, and concluding phases of the Evaluation Visit

The *Evaluation Team Handbook* is periodically updated by the COA staff. Please refer to the Commission website at https://www.abhe.org/accreditation/accreditation-documents/ to ensure you are using the most recent handbook. The COA staff welcomes feedback on the handbook. Suggestions and questions may be emailed to coa@abhe.org.

> *A Commission of not less than fourteen (14) or more than twenty-two (22) Commissioners, comprised as follows: twelve (12) to eighteen (18) elected from among COA accredited institutions, including representation among appropriately qualified administrators and appropriately qualified academicians; and two (2) to four (4) appointed public representatives, one of which may be a student representative from a COA accredited institution and the others not associated with a COA accredited, candidate, or applicant institution. Representatives of COA accredited institutions will constitute not less than 3/4 of total Commissioners. Public members will represent at least 1/7 of the Commission.*
>
> *A listing of current Commissioners is available at www.abhe.org/accreditation/accreditation-leadership*

Definitions

The Association
The Association for Biblical Higher Education (ABHE) is a non-profit, voluntary, organization of institutions that seeks to advance quality in biblical higher education for Kingdom impact through accreditation of, and services for, institutions and programs of biblical higher education within Canada, the United States, and related territories.

The Commission on Accreditation
All decisions regarding the accreditation of an institution are made by the ABHE Commission on Accreditation. Decisions concerning the status of an institution (applicant, candidate, initial accreditation, and reaffirmation of accreditation) are generally made at the February Commission meeting only. Institutional representatives are required to meet with the Commission when decisions concerning candidate status, initial accreditation, or sanction are made. An institution being reviewed for reaffirmation of accreditation may request to send representatives to meet with the Commission, but representatives are not required to meet with the Commission.

Accreditation
Accreditation is a voluntary process by which an institution evaluates its educational activities and seeks an independent judgment to confirm that it is substantially achieving its objectives and is generally equal in quality to comparable institutions.

An accredited institution, therefore, is deserving of public trust, having been judged by a recognized, authoritative third party as demonstrating characteristics indicative of quality and

integrity. Moreover, it has been judged that these characteristics are present in sufficient strength to indicate that the institution can be reasonably expected to continue to exhibit quality and integrity in the future.

The accreditation process seeks not only to document an institution's present quality and integrity, but to also foster excellence.

Types of Accreditation

Institutional Accreditation
Granted to an institution of biblical higher education that affirms in writing the ABHE Tenets of Faith and demonstrates that it is substantially achieving and can be reasonably expected to continue to achieve its mission and the ABHE Institutional Accreditation Standards. The institution must also demonstrate its commitment to ongoing institutional development.

Programmatic Accreditation
Granted to programs of biblical higher education at institutions whose missions include programs outside the scope of biblical higher education. Programs must demonstrate that they are substantially achieving and can be reasonably expected to continue to achieve their mission and the ABHE Programmatic Accreditation Standards. Institutions must affirm in writing the ABHE Tenets of Faith. In Canada, the institution must present evidence of appropriate governmental approval, prior institutional accreditation with ABHE, or a formal affiliation with a recognized Canadian University. In the United States, the institution must hold institutional accreditation with a recognized accrediting body. Programs of biblical higher education lead to credentials in biblical and theological studies as well as specific ministry related careers.

Institutional Accreditation

The ABHE Commission on Accreditation's process of accreditation involves three stages whereby institutions proceed from applicant to candidate and finally to accredited status. A detailed description of the accreditation process may be found in the policies and procedures section of the Commission on Accreditation *COA Manual*.

Applicant Status is a COA pre-membership status granted to those institutions that meet the COA's Conditions of Eligibility and that possess such qualities as might provide a basis for achieving candidate status within a maximum of five years. Applicant institutions are required to submit annual reports demonstrating progress toward candidate status. During Year 3, an institutional self-study (including a compliance document, assessment plan, institutional improvement plan, and supporting documents) are submitted to the COA for review prior to an evaluation team visit to assess the institutional readiness for candidate status.

Candidate Status is a preaccredited status granted to those institutions that show promise of achieving accreditation within a maximum of five years. Candidate institutions are required to submit annual progress reports demonstrating progress toward accreditation. During Year 3, self-study materials are submitted to the COA for review prior to an evaluation team visit to assess the institution's readiness for initial accreditation.

Accredited status is granted to those institutions that substantially meet or exceed the COA's Institutional Accreditation Standards and give evidence of continuous improvement. During Year 5 of initial accreditation, an institutional self-study is submitted to the COA office prior to an evaluation team visit to consider reaffirmation of the institution's accreditation. Once reaffirmed, the institution will repeat the reaffirmation process every ten years.

Differences between Programmatic and Institutional Accreditation Reviews

	Institutional Accreditation	Programmatic Accreditation
Applicant Status	Maximum of 5 years	Not Applicable
Self-Study/Team Visit for Candidate Status	Required	Not Applicable
Candidate Status	Maximum of 5 years	Not Applicable
Self-Study/Team Visit for Initial Accreditation	Required	Required
Self-Study/Team Visit for Reaffirmation	Required	Required
Self-Study Documents	1. Statistical Abstract 2. Compliance Document including regulatory requirements evaluation 3. Institutional Assessment Plan 4. Institutional Improvement Plan	1. Statistical Abstract 2. Compliance Document 3. Assessment Plan 4. Improvement Plan
Standards to Address	Institutional Accreditation Standards	Programmatic Accreditation Standards
Evaluation Team Size	5 evaluators (administrative, academic, student services, resources/finances, faculty/library) + 1 COA staff	3 evaluators (administrative, academic, practitioner) + 1 COA staff
Length of Team Visit	3 days (2.5 days on campus)	2 days (1.5 days on campus)
Initial Accreditation	5 years	10 years
Reaffirmation of Accreditation	10 years	10 years

2. Understanding the Evaluation Process

Evaluation Process Overview

Every institution is to be systematically engaged in the self-study process, continually monitoring every aspect of its operation in order to analyze its effectiveness, both in light of its own stated mission and objectives and in the context of the ***Standards for Accreditation****.* An institution seeking candidate status will draw together its analysis in self-study materials to document that the institution is **adequately** achieving its mission and objectives and is in adequate compliance with the Commission's Standards. An institution seeking accredited status or reaffirmation of accreditation will draw together its analysis in self-study materials to document that the institution is achieving its mission and objectives and that it is in **substantial** compliance with the Commission's Standards. The institution will produce five primary documents:
1. Statistical Abstract
2. Compliance Document with Regulatory Requirements Evaluation*
3. Institutional Assessment Plan
4. Institutional Improvement Plan
5. Exhibits File (or include at the end of the Compliance Document)
   * Note: The Regulatory Requirements Evaluation is not required for Programmatic Accreditation.

A team of evaluators appointed by the Commission staff will review the self-study materials prior to visiting the campus. Once on campus, the team will gather information about the institution and summarize its findings in a written team report. This report will assess the institution's demonstrated achievement of the *Standards for Accreditation* and set forth standard-related recommendations for improvement. The report will reflect the team's review of the institution's compliance with all Title IV eligibility-related standards (if applicable). The team will also formulate an official, confidential recommendation for Commission action. After reviewing this report, the institution will provide a formal, written response to the team visit report (RVR).

The Commission on Accreditation will consider each of these documents: (1) the Institutional Assessment Plan, (2) the Compliance Document, (3) an Institutional Improvement Plan, (4) the team report, and (5) the RVR, together with the team's accreditation recommendation. Institutional representatives will appear before the Commission (optional for reaffirmation visits) in order to clarify any matters of concern, answer Commissioner questions, and describe any significant events that have taken place since the team visit. The Commission will then take official action regarding the institution's accreditation status.

Accreditation Terminology

Evaluation team reports generate conclusions expressed as commendations, suggestions, and/or recommendations. Such conclusions may also be expressed in the communication of Commission on Accreditation actions. These terms are defined as follows:

Commendations – qualities of exceptional excellence or unusual progress

Suggestions – matters of professional advice or counsel in areas unrelated to compliance with ABHE Standards. Suggestions may be ignored or accepted at an institution's option.

Recommendations – issues of compliance with ABHE Standards for Accreditation. Institutions/programs are required to respond to recommendations by taking corrective action to achieve or improve compliance within a specified time frame.

Policy on Composition of Evaluation Teams

There are two types of evaluation team visits—comprehensive and focused. A comprehensive team visit, including a review of institutional compliance with all standards, is conducted when an institution is considered for candidate status, accredited status, or reaffirmation of accreditation. The Commission on Accreditation (COA) may call for a focused team visit to review compliance with selected standards when an institution is placed on sanction, continued on sanction, or experiences significant changes that raise questions about institutional compliance with specific standards.

Composition of an Evaluation Team
The selection of evaluation team members is based upon competence as documented by professional credentials, experience and expertise in a particular area, and performance on previous evaluation teams, or based on the recommendation of a respected reference. There must be no conflict of interest between the evaluator and the institution to be visited as detailed in the Policy on Conflicts of Interest.

The team should contain only one person from a given institution and no more than two people from institutions of the same denomination. Evaluation teams will include representation from appropriately qualified administrators and academicians. ABHE staff members are not eligible for service as a team evaluator. Current Commissioners are limited to serving on one evaluation team per year and must recuse themselves from any discussion of that institution at COA meetings.

A comprehensive evaluation team for review for candidate status or initial accreditation is typically composed of five members, although larger or smaller teams may be assigned. A comprehensive evaluation team for reaffirmation of accreditation may include fewer evaluators when the institution has not experienced significant changes since the last comprehensive visit or had notable concerns expressed by the COA since the last comprehensive visit. Regardless of the number of evaluators, a comprehensive visit will include a review of all standards; however, a reaffirmation visit may focus on areas of COA concern and include evaluators with specialized expertise in those areas. The composition and size of teams may vary, depending upon the level of education offered and complexity of the institution. In some instances, a smaller on-site evaluation team may be supplemented by additional off-site evaluators with specialized expertise.

A focused visit team is normally composed of two or three members with specialized expertise related to the areas of specific concern.

A minimum of half of the evaluators on a team must be current or recent employees of a COA accredited institution. Other evaluators (public, retired, etc.) may serve on a team provided they have completed the appropriate ABHE Team Evaluator training within the last three years and have the appropriate professional qualifications.

At least one evaluator on a team to an institution offering programs via distance education will have three years of experience working with students at a distance in a postsecondary institution. For an evaluation team to an institution offering graduate programs, the academic evaluator and at least one other evaluator on the team must have an earned doctoral degree and three years of experience in a postsecondary institution that offers graduate study.

A visit for candidate status or initial accreditation will typically include a credentialed librarian as the faculty/library evaluator, whereas these areas may be evaluated by an academic or faculty evaluator in reaffirmation visits.

ABHE does not participate in joint or coordinated accreditation visits with other accrediting bodies. Concurrent visits are possible, and common documentation may be submitted to both accrediting teams where appropriate; however, the ABHE evaluation team will function as an independent review entity reflecting the same composition and responsibilities of an ABHE evaluation team not engaged in a concurrent visit.

Teams for programmatic accreditation visits will typically have two or three members who meet the qualifications listed above. One of the evaluators must be a practitioner in the field of the education being evaluated. Another must be an educator from an ABHE accredited institution. Team members will be selected with sensitivity to the nature of the programs being evaluated (Refer to Policy on Procedures for Programmatic Visits).

When developing the evaluator pool and constructing evaluation teams, the COA Executive Director should be sensitive to representation from diverse perspectives.

Qualifications of Team Evaluators

Administrative Evaluator: Minimum of three years of experience in program or institutional leadership as a senior administrator (e.g., CEO, executive vice president, chief academic officer, division director, institutional effectiveness/assessment director, or other cabinet-level administrator) in a postsecondary institution or similar nonprofit organization, or a graduate degree* in an appropriate academic or professional discipline, plus completion of ABHE evaluation team training, including the units for an administrative evaluator, distance education, and graduate education.

Academic Evaluator: Minimum of three years of experience as an educator engaged in academic leadership (e.g., provost, academic dean, assistant provost/dean, academic division director, program director, registrar) in a postsecondary institution, or a graduate degree* in an appropriate academic or professional discipline (doctorate required for evaluation of graduate programs), plus completion of ABHE evaluation team training, including the units for an academic evaluator, distance education, and graduate education.

Student Services Evaluator: Minimum of three years of experience in student development, student life, student support services, or student ministry leadership in a postsecondary institution, an appropriate academic or professional degree, or a qualified student at a COA accredited institution, plus completion of ABHE evaluation team training, including the units for a student services evaluator, distance education, and graduate education. A student is considered qualified if he or she meets the professional qualifications associated with this evaluator role (e.g., minimum of three years of experience in student development, student life, or student support services, or student ministry leadership in a postsecondary education).

Resources Evaluator: Minimum of three years of experience in resource development or finance in a postsecondary institution or similar nonprofit organization or an appropriate academic or professional degree, plus completion of ABHE evaluation team training, including the units for a resources evaluator, distance education, and graduate education.

Library Evaluator: Minimum of three years of experience in librarianship in a postsecondary institution or a library science degree (e.g., MLS/MLIS), plus completion of ABHE evaluation team training, including the units for the faculty/library evaluator role, distance education, and graduate education.

Faculty Evaluator: Minimum of three years of teaching or research experience in a postsecondary institution or a graduate degree* in an appropriate academic or professional discipline, plus completion of ABHE evaluation team training, including the units for the faculty/library evaluator role, distance education, and graduate education.

Assessment Evaluator: Minimum of three years of experience in assessment of student learning, institutional effectiveness, and/or planning in a postsecondary institution or a graduate degree* in an appropriate academic or professional discipline, plus completion of ABHE evaluation team training, including the units for the administrator and academic evaluator role, distance education, and graduate education.

*Three years of experience and a graduate degree preferred.

Designation Categories for Evaluators

Administrator: An individual currently or recently engaged in a significant manner in program or institutional administration at the postsecondary level.

Academic: An individual currently or recently engaged in a significant manner in postsecondary teaching and/or research (including learning resource and research support, and/or curriculum development).

Public: An individual who does not reflect the characteristics of administrator or academic above but has the professional qualifications and experience to serve as an evaluator and has completed the ABHE evaluation team training related to the respective evaluator role.

Selection of the Team Chair
The team chair will be free from potential conflict of interest, have completed at least three successful experiences as an evaluator and have completed the ABHE training unit for evaluation team chairs. Typically, the chair will be a senior administrator of a COA accredited institution.

Institution's Right to Review
The institution to be evaluated has the right to review the names of proposed team members and to request the replacement of any proposed member that it feels would have a bias or conflict of interest in evaluating the institution.

COA Staff Representative
A member of the COA professional staff typically accompanies a comprehensive evaluation team as an observer and procedural guide to review requirements but does not participate in the evaluative judgments of the team. The staff member also reviews the evaluation team report for completeness and ensure the submission of the report in the appropriate format.

Representative from the State/Province
A representative from the respective state or province higher education department may elect to serve as an observer of the team visit.
Observer

With consent of the COA Executive Director and the institution being evaluated, an observer from another ABHE institution preparing for an evaluation team visit, a sister accrediting agency, or an educational researcher may accompany the team as an observer. The observer will have access to team materials and discussion but will not participate in the evaluation of the institution and is responsible for all travel expenses related to observing the visit (including onsite hotel and meals). Typically, not more than one observer may accompany an evaluation team.

Canadian Institutions
Insofar as possible, Canadian institutions should be evaluated by Canadian evaluators.

Evaluation Team Expenses
Within the context of constructing a quality evaluation team, the COA will make every effort to minimize evaluation team travel expenses. The institution being evaluated is responsible for all travel expenses of evaluators and the accompanying COA staff representative. If the state or province requires payment of expenses for an official observer, the institution is responsible for those expenses as well.

3. <u>Responsibilities of the Evaluation Team</u>

<u>Evaluator Responsibilities</u>

The evaluation team verifies the validity of the institution's self-study materials, assures that mechanisms for continual self-assessment are functioning, and gathers information on an institution-wide basis, by means of data research and interviews, to determine whether the institution is fulfilling the Principle of Accreditation (i.e., whether the Institution is achieving its own stated mission and objectives, whether it is complying with the *Standards for Accreditation*, and whether it can be reasonably expected to continue to do both in the future). On the basis of its evaluation, the team makes a recommendation to the Commission regarding the granting of candidate status, accredited status, or the reaffirmation of accreditation.

An evaluator is expected to be:

- *Objective*. The institution is to be evaluated solely in light of its stated mission and objectives and the Commission on Accreditation's *Standards for Accreditation*. It is not, in any way, to be evaluated in light of the team member's own institution or personal beliefs/experiences.
- *Ethical.* An evaluator is dealing with confidential information and should exercise the utmost caution and integrity in handling this information. (See <u>Appendix 4.b</u> A Decalogue for the Accreditation Team).
- *Accurate*. Assessment and evaluation should be based solely on the *Standards for Accreditation* and ABHE Commission policies. Recommendations must be so referenced and based upon documented evidence.
- *Constructive.* The Commission on Accreditation is not a policing agency. The Commission's goal for the accreditation process is to assure and improve the overall quality of the institution. An evaluator must make clear that any advice/suggestion offered is strictly personal and does not necessarily reflect the opinion of the Association or the Commission on Accreditation.

<u>Financial Responsibilities</u>

Evaluation team members should be economically responsible when making arrangements for team visits. Flights should be booked 30-45 days before the visit. Evaluators are not required to travel abnormal schedules to achieve the lowest airfare, but coach/main cabin fares that accommodate the required arrival/departure times are expected. If there is significant savings using a "layover," most institutions are willing to cover the additional hospitality expense; however, this must be specifically verified with the host institution. To receive mileage reimbursement when traveling by car, submit a printed airfare quote from 30-45 days prior to the visit, along with your travel expenses. The mileage reimbursement cannot exceed that printed airfare quote. The Commission does not permit evaluators to reimburse a car rental or upgraded airline class. Be conscious of the institution by limiting the cost of extras and seek their consent for exceptions. Excessive expenditures will not be reimbursed.

Evaluators may extend travel for personal reasons, but additional expenses for personal travel will not be reimbursed. If a spouse or family member is traveling with the evaluator, only expenses related to the evaluator's travel will be reimbursed. The spouse/family member is not to attend team or institutional meetings.

Standards for Review and Assignments

While the team makes collective conclusions and decisions, one team member will be assigned as the primary investigator relative to each of the Standards. The general assignments are as follows:

Evaluator Assignments	Institutional Evaluation	Programmatic Evaluation
Administrative	Standards 4, 5	Standards 1, 2, 3, 5, 6
Academic	Standards 1, 2, 11	Standards 7, 8, 9, 10, 11
Resources	Standards 3, 6	
Student Services	Standards 7, 8	
Faculty/Library	Standards 9, 10	

For programmatic accreditation reviews, a ministry practitioner related to the fields of study covered by the programs to be examined will also serve on the evaluation team. The practitioner evaluator does not have a formal position with an ABHE institution and brings a perspective of the field to professional program reviews. The practitioner evaluator may provide input regarding any of the areas reviewed.

Evaluators summarize their findings in a report that commends the institution in areas where it excels, lends counsel by making suggestions for improvement in non-Standards related areas, and makes Standards-referenced recommendations needing attention.

Near the close of the visit, each evaluator presents his or her report, summarizing the findings in their area of responsibility. The team has responsibility to finalize a list of commendations, suggestions, recommendations, and an overall accreditation recommendation.

Commission Staff Representative Responsibilities

The Commission Staff Representative (CSR) that accompanies an evaluation visit team is present to ensure the review is conducted in accordance with ABHE Commission policies, and to provide advice to team members where clarification concerning ABHE Standards, policies, and procedures may be needed. The CSR is not an additional team evaluator but serves as a Commission office resource to the team members during the visit. This includes, but is not limited to, the following:
- Assisting and advising the Team Chair concerning logistics for the visit
- Assisting the Team Chair with team orientation
- Ensuring that Standards and Policies are properly interpreted and consistently applied
- Assisting team members with questions concerning standards (including essential elements) and policies
- Assisting new evaluators with standard wording as needed
- Serving as a resource for clarification of institutional information
- Attending and participating in Executive Sessions to ensure that both process and the report product are in harmony with Commission policies
- Accompanying the Team Chair to the pre-exit interview visit with the President.
- Addressing procedural questions at the end of the Exit Interview
- Reviewing the final team report for clarity, completeness, proper format, and address of regulatory requirements
- Submitting the final report to the ABHE Commission office

4. Getting Ready for the Evaluation Visit

Process for Evaluation Material Distribution

ABHE informs selected evaluators once they indicate an ability to serve on a Team and the Team Roster is developed. During this time period, the team members and institutional personnel should review the roster in light of potential conflicts of interests. The Commission Office asks that the team members confirm with the team chair the Standards that he/she is to evaluate, since academic experience or institutional circumstances may warrant special arrangements.

The latest Commission publications (Evaluation Team Handbook, Self-Study Guide, Commission on Accreditation Manual, etc.) are available through www.abhe.org or OneDrive. Each member should access the general Commission documents (ABHE Resources folder) once they are assigned to a team.

Approximately eight weeks prior to the Team Visit, institutional documents will be made available in OneDrive. These documents will include the Statistical Abstract, the Compliance Document including Regulatory Requirements Evaluation, the Institutional Assessment Plan, the Institutional Improvement Plan, and institutional history and other pertinent documents. If a document is missing, the team member should immediately contact coa@abhe.org or the team chair.

Team members should always feel free to ask the ABHE Commission staff for more visit orientation or other details in addition to these resources. Further summarization is provided in the Team Chair Role and Responsibilities and Evaluator Guidelines **(**Appendices 3.a and 4.a**).**

Visit Preparation

Evaluator Worksheets
ABHE provides *Evaluator Worksheets* to assist in preparation and review during the visit (available in OneDrive in ABHE Resources folder). For each of the Commission's Standards and its related Essential Elements, the Worksheets provide opportunity for the evaluator to make notes regarding their impression of the self-study materials and their observations regarding the institution's achievement of the Standards. These notes can be of significant assistance later in preparing the written report. Notes can be made digitally or by writing on printed copies but are to be destroyed after the visit is concluded. Evaluators should begin a rough draft of the narrative for their assigned area(s) after they have conducted a full review of all institutional documents. Many Team Chairs desire to have evaluators have a rough draft of each Standard completed before Team members arrive on site for the Visit.

5. During the Evaluation Visit

Evaluation visits for Institutional Accreditation are normally 2.5 days in length. Evaluation visits for Programmatic Accreditation are normally 1.5 days in length.

Typical Evaluation Team Visit Schedule

Team members should consult with the Team Chair for the visit schedule. Chairs are at liberty to modify the schedule to fit the needs of the team and the Institution. The following is a typical schedule for an institutional accreditation visit.

Tues-Thurs Visit	Activity
Monday	Team arrives, executive session orientation (team only), dinner with institution
Tuesday	Team arrives on campus in morning, orientation to work room, finalize interview schedule, begin interviews, review documents and files
Tuesday evening	Team group dinner on own, executive session to review initial findings, plan adjustments for 2nd day of visit, writing in rooms
Wednesday	Follow-up interviews, review of documents and files, writing in work room
Wednesday evening	Team group dinner on own, executive session to review findings, formulate initial commendations, suggestions, recommendations, writing in rooms
Thursday morning	Team travels to campus, final executive session in work room, Team Chair and CSR meet with President, team meets with administration for exit interview, team departs for airport

Executive Sessions

There are usually four executive sessions (all team members and CSR)**:**
1. Orientation
   Team members should plan their travel so that they arrive by 5pm for the Team Orientation Session. Generally, this meeting works best if it occurs in the meeting room at the hotel. The Orientation Session consists of:
   a. Prayer
   b. Review by the Chair and/or the CSR of the purpose of the visit (specifically addressing the overall team role in the accreditation process and the "Principle of Accreditation") as well as the individual roles of evaluators.
   c. Presentation by the Team members of their analysis of the Institution's self-study materials, especially as they relate to their areas of responsibility. Preliminary impressions will be discussed in order to identify specific concerns that must be resolved during the visit.
   d. Review of the schedule (including adjustments in appointments and interviews).
   e. Reminder that Team members should present the Team Chair with a written draft of their findings by the end of Day 2. These written drafts can be developed by using the corresponding *Worksheets (in OneDrive, ABHE Resources Folder)* and Evaluation Visit Report guidelines found in Section 6 of this handbook.
2. End of Day One
   a. Team discusses major issues: validation of self-study claims, achievement of ABHE Standards/Essential Elements.

     b. Review specific areas that surfaced during the first day of meetings and interviews needing special examination on Day Two.

     c. Discuss areas that might impact multiple evaluators/Standards. It is important to share findings that may need to be investigated by more than one evaluator.

     d. Chair confirms the schedule of activities for Day Two including interviews/adjustments and the team meeting at the end of the day.

3. End of Day Two

     a. Each team member briefly reports findings.

     b. Team reviews proposed Commendations, Suggestions, and Recommendations.

     c. Other needed group processes as determined by the team chair or members.

     d. Identify any follow-up interviews needed before Exit Interview

4. Final Team Meeting (usually on the morning of Day 3)

     a. Finalize all Commendations, Suggestions, and Recommendations. Recommendations must be undergirded with factual support and be referenced to specific Standards and Essential Elements.

     b. Determine the degree to which the institution's mission and objectives are being achieved, and the conclusion regarding the institution's overall achievement of the *Standards for Accreditation.*

     c. Reach a consensus regarding the overall accreditation recommendation that will be forwarded to the Commission on Accreditation. The Chair will review the Range of Team Recommendations available (see <u>Appendix 7</u>) and then guide the discussion to a final decision.

     d. Determine if team members are participating verbally in the exit interview. The Chair will discuss the method and sequence of the process.

     e. Remind each team member that he/she is required to provide the Team Chair with an *electronic copy* of his/her section of the evaluation report **before** departure from the Institution.

     f. Have the Chair clarify matters relating to travel vouchers, Chair evaluation which will be emailed, and submission of the Team Report to the ABHE office within 10 business days.

<u>Institution Hosts Five Group Meetings</u>

1. Meal with Institutional Administrators

Prior to the visit, the Chief Executive Officer or the institution's visit coordinator should arrange for the team and the institution administration to meet over a meal at the beginning of the visit. During this meal, team members will sit with their counterparts from the institution and seek to establish a cordial relationship. Prior to the meal, the Chief Executive Officer will give a brief welcome to the team and introduce the members of his or her administration.

The Team Chair will, in turn, introduce each team member, identifying their area of evaluation. The Chair will seek to:

     a. Establish a positive atmosphere for the visit by emphasizing that the purpose of the evaluation visit is to validate the institution's own self-study materials. The team's goal is to provide an outside perspective to assist the institution in its efforts to determine its strengths and weaknesses in achieving its goals and objectives. To do this, the team will carefully review the institution's mechanisms for collecting data, making decisions based on the evidence, and planning to address identified issues. The team will assess the extent to which desirable processes have been institutionalized. The

ultimate goal is to enhance the quality of the institution and assess its fulfillment of ABHE Standards for Accreditation.
   b. Apprise institutional personnel of the accelerated pace at which the visit will necessarily be conducted, so that all personnel will be prepared for a period of intensive activity. Interviews should be directed and efficient, and documentation should be readily available.
   c. Clarify the visit schedule, including the time and format for the meetings with faculty, board, and students.
   d. Field questions from administrators.

2. **Meeting with the Institution's Governing Board (usually luncheon)**

The meeting with members of the institutional board affords an opportunity to discuss board structure, functions, achievements, and involvement in long-range planning. It also provides a time to reemphasize the board's responsibility to support the institution.

The seating arrangement should provide for optimum interaction between the board and team members. Administrators should not be present for the meeting. Although the Chief Executive Officer may make appropriate introductions at the beginning of the meeting, the CEO should then be excused.

Following introductions, the Team Chair should assume responsibility for brief remarks regarding the purpose of accreditation and the focus of the visit. Team members will then have opportunity to question board members. Board members can, in turn, ask questions of team members.

3. **Meeting with Students (usually luncheon)**

An informal meal between some team members and students provides the opportunity to gather student perceptions of institutional effectiveness, academic rigor, and quality of preparation. Administrators should not be present for this meeting.

Team members not scheduled for meetings should feel at liberty to sit with random students and staff during lunch times to gather perspective as well.

4. **Meeting with the Public**

ABHE publishes the date and purpose of team visits on its website. Further, the institution is required to announce the ABHE review on its own website using the Public Notice found in the COA Manual along with the date, location, and time. Members of the public are invited to submit written comments regarding the institution and, if desired, to meet with team members during the visit. The team chair, working with the institution, will ensure that there is a time in the schedule for the public to meet with representatives of the visiting team. This meeting should be an open forum without institutional representatives present.
Team representative(s) should give notice at the outset that they will control the nature, location, and timing of the meeting. Depending on the number of people participating, the amount of time a particular individual is given to speak will be strictly limited (3-5 minutes). Team members should make it clear that they are meeting with members of the public to listen, not to solve an individual's or group's problem(s). The team will not share its impressions regarding the institution with the public at this meeting.

5. Meeting with Faculty

This established meeting allows for the instructional faculty to engage evaluators in a discussion over their participation in the life and impact of the institution. Administrators should not be present for this meeting.

Researching Institutional Documents

One desired product of an evaluator's advanced visit preparations is a listing of additional documents that will be needed to verify the claims made in the self-study materials. This list should be sent to the Team Chair prior to the visit so documents can either be uploaded to OneDrive by the institution or available in the workroom. Upon arrival at the workroom, the evaluator will verify that the documents are present or available in OneDrive (see Appendix 1). In the case of missing documents, the administrator in charge of that area should be approached with a request to supply them.

Some documents may require only a random perusal; others may need to be examined in depth. Sufficient time should be allowed for this activity. Any concerns should be identified. Time should be reserved for any subsequent interviews needed in order to clarify questions generated by the review of the documents. Institutional documents should be examined in the work room or a private setting and treated with confidentiality and care.

Interviewing Institutional Personnel

Types of Interviews

There are two general types of interviews—group interviews and individual interviews. A group interview involves one or more team members interviewing a group of people. Most interviews are individual. It is not uncommon for a single person to be interviewed by more than one team member. The strength of having a given individual interviewed by two or more team members is that it provides distinct perspectives on information that may be discussed during the executive sessions. Group interviews are particularly beneficial when interviewing students, faculty, or board members.

Classroom visits have only limited value. Yet, team members should try to briefly visit one or two classes in order to assist in forming an overall impression of the instruction offered. If the institution offers online courses, these should be "visited" as well to evaluate the quality and quantity of faculty/student and student/student interaction (must be regular and substantive). Faculty members should have been advised beforehand that visits will be brief and are not to be acknowledged.

Determining the Interview List

The evaluation team determines who needs to be interviewed. Requests for interviews (group and individual) should be submitted to the institution's liaison through the Team Chair prior to the team's arrival. Where the need for additional interviews arises during the visit, these should be coordinated as soon as possible through the Team Chair.

In scheduling the interviews, allowance should be made for an examination of relevant records available on campus. Insights gained from the records are likely to suggest additional questions to be asked during the interviews.

Suggestions for Effective Interviewing

Since time is of the essence questions should be prepared in advance, be based upon the evaluator's prior research, and relate to a desired end. This requires considerable forethought. Careful notes must be taken in order to accurately record responses. It is often desirable to informally rephrase the response in order to verify its accuracy with the person being interviewed.

An evaluator should keep the following in mind when interviewing:
1. Do not ask questions that can be answered with a "yes" or "no" response. Rather, ask interviewee(s) to describe, illustrate, or document.
2. Never ask salary-related questions in a group interview.
3. Whenever possible, ask the same question(s) of more than one person. This allows for, not only comparison of answers, but possible insight into varying perspectives. Of course, it is essential to maintain the confidentiality of each respondent.
4. Ask a few questions to verify factual data.
5. If necessary, ask for clarification.
6. Keep the interview focused.
7. If a particular response doesn't really get to the heart of what you are looking for, follow-up with additional questions. Tactfully pursue an issue until you are satisfied.
8. When examining systems and processes, consider answers through a grid that asks "What can go wrong?" "Would the structure operate smoothly with a different set of players?"
9. Identify the mechanisms in place to foster systematic examination and ongoing improvement in a particular area
10. Probe potential problem areas with "what if" questions.

Exit Interview

The exit interview provides the team an opportunity to present its conclusions to the Chief Executive Officer and those the CEO wishes to be present. The Chair may choose to present the team's conclusion or designate individual team members to present the findings for his or her particular area of responsibility.

A typical exit interview agenda might be the following:
1. Opening remarks by the Team Chair:
   a. Expression of gratitude for hospitality during the visit
   b. Explanation of how the team will present its findings
      i. Individual team members or the Chair will read the team's commendations, suggestions, and recommendations.
      ii. No discussion will be offered at this time regarding suggestions and formal recommendations.
      iii. Questions for clarification will be entertained. These should be directed to the Team Chair.
2. Presentation of commendations, suggestions, and recommendations

3. Closing remarks by the Commission staff representative:
    a. The Team will depart the institution immediately after the exit interview
    b. The Team's work is done with the completion of the report—team members should not be contacted by the institution for comment on evaluation areas
    c. A draft of the report will be immediately circulated to the team members. Within one week of the report's receipt, factual errors should be sent to the chair. The goal is that, **within two (2) weeks of the visit**, the documented Final Report will be sent to the ABHE Commission Office for final distribution to the institution (accompanied by pertinent instructions).
4. Closing remarks by the Chief Executive Officer.

IMPORTANT: *The overall team recommendation to the Commission on Accreditation is not to be discussed with the institution's officials.*

The Chief Executive Officer should be informed that the team report should arrive in approximately three to four weeks. The Chief Executive Officer should be advised that, after careful study of the Report, the Institution will be expected to formulate an official response to be submitted to the Commission office by the date specified. In case of candidacy or initial accreditation, institution representatives will have opportunity to appear personally before the Commission on Accreditation to provide any additional information and to answer any questions that the Commission members may have. This privilege is optional for reaffirmation visits.

6. Evaluation Visit Report

Team Responsibility

Each evaluator is required to provide the Team Chair with a written draft that summarizes the findings for his or her area of responsibility. This draft is due to the Chair by the end of the visit (or earlier, if requested by the Chair). Although the bulk of the writing should be completed during the evening of Day 2, it may be necessary to continue writing during the morning of Day 3 after any final interviews or research have been conducted.

Decisions of the Team

Each team member will present to the team his or her proposed commendations, suggestions, and recommendations. These are to be discussed and approved by the team.

Commendations – qualities of exceptional excellence or unusual progress.

Suggestions – matters of professional advice or counsel in areas unrelated to compliance with ABHE Standards. Suggestions may be ignored or accepted at an institution's option.

Recommendations – issues of compliance with ABHE Standards for Accreditation. Institutions/programs are required to respond to recommendations by taking corrective action to achieve or improve compliance within a specified time frame.

Overall Team Recommendation form to the COA - as a group, the team will complete a brief Team Recommendation form with an accreditation recommendation according to the Range of Motions **(Appendix 7)**, which will be forwarded to the Commission. The Team Chair will guide the members through the process of making its decision and provide specific instructions regarding wording of the statement. ***Because this recommendation may not necessarily be adopted by the COA, it is imperative that it be held in confidence and <u>not</u> be communicated to the institution.*** It is possible that the institution's written response to the team report, together with corrective actions taken prior to its appearance before the Commission, will influence the ultimate decision. The Commission also needs to assure consistency and reliability in its decisions.

Organization

During the team orientation session, the Chair should explain his/her preference regarding writing style, voice, and presentation of the commendations, suggestions, and recommendations.

Each section of the <u>evaluator's report</u> should be brief, thorough, and written in essay form. Evaluators should provide written, analytical comments for each Essential Element within the area of examination within their jurisdiction. An evaluative analysis of the institution's achievement of the Standards will be given, followed as applicable by any statements of commendation, suggestion, or recommendation presented in bold type. The standard and essential elements will be noted on recommendations. Length should not exceed 1 to 2 pages per Standard with no subsections and 2 to 3 pages per Standard with multiple subsections.

Form and Style

The final evaluation visit report should be submitted electronically to the CSR in Word format, rarely in excess of 30-35 pages.

Special Concerns to Note

1. In crafting the summaries of commendations, suggestions, and recommendations, statements should be written in parallel form.
2. Refrain from naming individuals in the report. Refer to title or office only.
3. Offer neither praise nor blame towards individuals.
4. Avoid lavish praise or harsh criticism. Be factual. Avoid emotional overtones.
5. Avoid taking a position on accreditation offered by other agencies.
6. Focus on the *Standards for Accreditation* and the associated *Essential Elements.* Do not advocate personal theories or positions.
7. Avoid revealing the team's accreditation recommendation to the institution.

7. Concluding the Evaluation Visit

<u>Team Chair Tasks</u>

Prepare a Draft of the Evaluation Visit Report
The Team Chair is responsible for the final team report. While he or she should circulate a rough draft among team members for additional comment or correction, the compilation of final team report is the responsibility of the Team Chair. The Chair may compose and edit it as he or she sees fit, yet in accordance with the guidelines set herein. The Chair will send a copy of the report to each team member requesting him or her to note any factual errors or misrepresentations of intent. Be sure to complete the Regulatory Requirements Evaluation section (**see** <u>Appendix 2</u>).

Prepare a Team Recommendation Form
The Team Chair is also responsible to word the official <u>Team Recommendation</u> form (see OneDrive ABHE Resources folder) summarizing the overall recommendation of the team to the Commission on Accreditation. *IMPORTANT: Under no circumstances is the overall team recommendation regarding the accrediting decision to be discussed with the institution's officials.*

Submit the Report to your Commission Staff Representative
It is extremely important that the final Team Report and official Team Recommendation form be submitted to the assigned Commission staff representative within ***10 days*** of the visit. These documents will be reviewed for adherence to the team guidelines and grammatical accuracy and then forwarded to the institution and Commission on Accreditation.

Complete an Assessment of each Evaluator and Standard(s) in your role
You will be emailed an assessment. These confidential assessments are an important element in strengthening future teams and evaluating Standard revisions.

Submit the Travel Expense Voucher and Receipts
Within ***two weeks***, the team members will submit a *Travel Expense Voucher* (OneDrive ABHE Resources folder*)* along with digital copies of all receipts to the COA bookkeeper (<u>sarah.starks@abhe.org</u>).

You may not be reimbursed for your expenses if we do not receive your Travel Expense Voucher within the two-week timeframe as we desire to invoice the institution in a timely manner.

All self-study materials should be left at the institution and/or removed from any digital device. Any worksheets should be destroyed at the conclusion of the Team Visit.

<u>Evaluator Tasks</u>

Review the Draft Evaluation Visit Report
When the Team Chair forwards a draft of the Final Report to Team members to note any factual errors or misrepresentations of intent comment, it is imperative to give this high priority so the final report is submitted by the Chair within two (2) weeks after the conclusion of the Team Visit.

Complete an Assessment of the Team Chair and Standard(s) in your role
You will be emailed an assessment evaluation of the Team Chair. These confidential assessments are an important element in strengthening future teams and evaluating Standard revisions.

Submit the Travel Expense Voucher and Receipts
Within *two weeks*, team members will submit a *Travel Expense Voucher* (OneDrive ABHE Resources folder*)* along with digital copies of all receipts to the COA bookkeeper (sarah.starks@abhe.org).

You may not be reimbursed for your expenses if we do not receive your Travel Expense Voucher within the two-week timeframe as we desire to invoice the institution in a timely manner.

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Appendix 1
Sources for Documenting Compliance with ABHE Standards

Sources typically used as evidence for documenting compliance with the ABHE Standards for Accreditation are offered below. In general, institutions that meet the Standards for Accreditation will meet the Conditions of Eligibility, since the Conditions are presumed as a foundation for the Standards.

Conditions of Eligibility

1. **Tenets of Faith**
   Board Notes, Copy of signed Tenets of Faith

2. **Nonprofit Status**
   Status Letter confirming 501(c)3 status

3. **Authorized**
   Charter, Articles of Incorporation, governmental certificate or letter (authorization to grant degrees, certificates)

4. **Institutional mission**
   Constitution, academic catalog, website, board minutes (adoption)

5. **Governance**
   Bylaws, roster of board members (minimum 5), denominational authorization (if applicable)

6. **Chief executive officer**
   Bylaws, board policy, contract, job description, evidence of limited non-institutional commitments, budget

7. **Catalog**
   Academic catalog (cite pages for each required element)

8. **Assessment and public accountability**
   Website (outcomes page—graduation and placement rates)

9. **Learning resources**
   Library collection analysis by subject, comparison to syllabus bibliographies or ABHE Library Guidelines, database listings, agreements with other libraries

10. **Faculty qualifications**
    Faculty roster by program (1 qualified faculty overseeing every program/major offered)

11. **Academic programs**
    Academic catalog, program outlines

12. **Biblical/theological studies**

Academic catalog, program outlines (must show hours in Bible/theology for each undergraduate program)

13. **General studies**
Academic catalog, program outlines (must show hours in general studies for each undergraduate program)

14. **Ministry formation program**
Academic catalog, ministry formation handbook, records (what percentage of students participated in last 3 years)

15. **Student body**
Registrar's report (enrollment for last 3 years)

16. **Program completion**
Registrar's reports (number of graduates in recent years), graduation records

17. **Admissions policy**
Academic catalog (admissions section)

18. **Institutional stability and capacity**
Registrar's reports, board tenure, administrative tenure, faculty tenure, financial statements (documents demonstrating limited fluctuations)

19. **Financial base**
Financial statements, opinioned external financial audits (last 3 years)

20. **Income allocation**
Budget (showing distribution between educational operations, public service, auxiliary businesses)

21. **Annual audit**
Complete annual, independent, opinioned external financial audit reports with management letters (last 3 years)

22. **Agency disclosure**

23. **Compliance**

24. **Public disclosure**
Letter signed by the CEO affirming each of these three statements and confirming board resolution to support

25. **Arbitration**
Arbitration form signed by CEO

Institutional Accreditation Standards

Standard 1: Mission, Goals and Objectives

Charter, Constitution, 501(c)(3) notice, opinioned audits, state/provincial authorization certificate, academic catalog, institutional website. Institutional, program, and learning objectives should be located in Catalog and on website.

Standard 2: Assessment and Planning

Chief Executive Officer's Office
   Reports to the Board from all areas of the institution
   Reports to a Board of Advisors
   Reports to the State in which the institution is located
   Publications distributed to donors regarding institutional finances
Business Office
   Annual external financial audits
   Quarterly reports to the Board
   Budget reports to administrators throughout the year
Academic Office
   Dean's reports to the Chief Executive Officer
   Faculty rosters with qualifications for course assignments
Student Life Office
   Dean's reports to the Chief Executive Officer
   Minutes from Student Government Association
Development Office
   Analysis of Donors in the institution's donor development program
   Reports of major institutional development events
Registrar's Office
   Enrollment information from each year (FTE, Headcount, total credits)
   Number of hours taught by faculty each semester
   Class schedules and course enrollment statistics for recent semesters
Institutional Effectiveness Office
   Department goals and assessment reports
   Assessment survey data
      ABHE Bible Content Examination results
      National Survey of Student Engagement results
      Student Satisfaction Inventory results (Noel-Levitz)
      Collegiate Assessment of Academic Proficiency results (ACT)
      Best Christian Workplaces Engagement Survey results
      Alumni survey results
Website/Outcomes results
   Mission specific outcome results, graduation rates, placement/employment rates, student learning outcomes, institutional effectiveness/organizational operation(s) outcomes

Standard 3: Institutional Integrity

Academic catalog, employee handbook, faculty handbook, student handbook, library handbook, website (grievance & discipline policies, hiring/dismissal policies, conflict of interest policies, copyright/intellectual property policies)

Recruitment and promotional materials
Representation of accreditation status
Financial audit reports
Grievance/complaint records

Standard 4: Authority and Governance

Constitution and Bylaws, board manual, board conflict of interest policy, board minutes, board roster, board committee rosters, board diversity/professional experience analysis, and organizational chart

Standard 5: Administration

Administrative Council/Administrative Officers
(Senior administration, e.g., Chief Executive Officer, Executive VP, Chief Academic Officer, Chief Student Development Officer, Chief Financial Officer, Chief Development Officer)

Bylaws, organizational chart, administrative roster, position descriptions, vitae, administrative/faculty/staff handbooks, council minutes (frequency, purview)

Administrative records
Records policy, location & security of board minutes, faculty minutes, personnel files, student files, audited financial statements, academic catalogs, student directories, annual reports of various departments

Standard 6: Institutional Resources

6a. Human Resources

Personnel files, administrative/staff handbook, faculty handbook, organizational chart, position descriptions, salary schedule, work schedule, meeting agendas/minutes, record of development activities, insurance policies, personnel satisfaction surveys

6b. Financial Resources

Financial management: Bylaws, organizational chart (purchasing, collections, budgetary control, payments, bookkeeping, student financial accounts, financial reports under CFO), board manual (investment policy), board minutes (investment controls), operations satisfaction surveys

Board oversight: Bylaws, legal documents, board manual (business management policies, budget authorization, development authorization, board policies on bonds, annuities, investments, debt, property controls), board minutes (implementation of policies)

Internal controls: Administrative manual, procedures manual, reporting structure, cash disbursement protection, mail/receipt procedures
Accounting: Audited financial statements, chart of accounts, restricted funds, transfer policies, general ledger entries
Budgeting: Administrative manual, procedures manual, participants roster, budget development calendar, administrative council & board minutes (approval)
Business records: Administrative manual, records policies, records retention & security, schedule of insurance policies, schedule of student financial aid

disbursements, budget reports, audited financial statements, collection policies, history of write-offs

6c. Physical Resources

Master plan, facilities analysis (size, function, furnishings), facilities usage analysis, maintenance schedules, department staffing rosters, position descriptions, property appraisals, insurance policies with adequate coverage, fire inspections, fire-resistant records storage, emergency preparedness plan, equipment inventory, facilities satisfaction surveys, ADA compliance reports

6d. Technological Resources

Equipment inventory, technology needs analysis, technology use logs, network statistics, maintenance schedules, department staffing rosters, position descriptions, cybersecurity policies, budget allocation, student/staff orientation schedules, training resources

Standard 7: Enrollment Management

7a. Recruitment

Enrollment management plan, website, promotional materials, form letters, events schedule, tracking records, results analyses

7b. Admissions

Academic catalog (admission section), Enrollment management plan, website, admissions criteria (academic & spiritual), admissions policies, sample admissions checklist, ability to benefit policy, special student classification, student files, admissions testing requirements, admissions testing results, transfer policy, transfer evaluation criteria, sample transfer evaluations, ability to benefit policy (students who are provisionally admitted), ability to benefit testing requirements & results, articulation agreements, sample validation of transfer work from unaccredited institutions

7c. Student Financial Services

Academic catalog, student handbook, refund policies, financial aid handbook/policies, scholarship award records, scholarship committee minutes, federal financial aid audits, federal financial aid notification letters, financial counseling information, financial assistance policies, write-off records

7d. Retention

Academic catalog (graduation requirements, admissions & placement testing, services for at-risk students), student handbook, academic advising manual, placement tests & results, degree audits, at-risk tracking forms, retention reports, assessment data regarding retention services effectiveness

Standard 8: Student Services

Student development

Academic catalog, student handbook (philosophy, objectives), department organizational chart, spiritual formation expectations (chapel, personal devotions, spiritual growth), lifestyle standards, schedule of activities, student satisfaction surveys

Personal counseling

Student handbook, counseling handbook, resident director/assistant handbook, department organizational chart, services inventory, referral list, counselor credentials, referral statistics, emergency protocols

Discipline and formal grievance

Academic catalog (grievance policy), student handbook (spiritual/relational expectations), discipline and restoration protocols, grievance committee organization, record of formal grievances & results, security of records

Student orientation

Student handbook, orientation schedule (college life, campus orientation, academic procedures & regulations, placement testing, community life & residence hall living, registration procedures, advising, faculty interaction, chapel, social/recreational activities, health services, financial services, local community, student employment), results of student orientation evaluations

Student organizations

Student handbook, student government charter, student organizations policies, record of student organizations, record of input from student organizations into institutional planning, communications regarding student organizations, faculty handbook (faculty advisors)

Housing

Student handbook (options & policies), department organizational chart, responsibility roster, availability postings, health and safety reports

Food services

Student handbook, employee handbook, food services contract, department organizational chart, sample menus, record of inspections, nutritional information, student satisfaction surveys

Health services

Student handbook, description of available services (on-campus, nearby), medical examination policy, referral protocols, emergency response protocols, records of health service use, transportation options

Intercollegiate athletics

Student handbook, athletic handbook, participation requirement, administrative oversight, budget information, form letters, promotion, record of awards

Placement services

Academic catalog, student handbook, website, placement rates, placement guides, career information, skills inventories and testing, postings for opportunities, resume and interview services, placement rates

Standard 9: Faculty

Faculty qualifications

Faculty roster listing all courses assigned and qualifications (graduate degrees, concentration or credits in discipline), statement of faith policy/signed statements, faculty evaluations, official transcripts, professional vitae, professional development record, publication record

Faculty appointment and workload
Faculty handbook, board manual, appointment policy, designations for faculty status (appropriate persons), tenure policy, record of search procedures with engagement of appropriate administrative and academic personnel in interviews, faculty files (signed faculty contracts), academic freedom policy, recent schedules, workload studies, adjustments for administrative duties, overload policy, student to faculty ratio, percentage of instruction by fulltime faculty, faculty satisfaction surveys, student/advising satisfaction surveys

Faculty welfare
Salary scale, faculty contracts, personnel budget, benefits schedule, professional development budget, record of professional development activities, grievance policy, grievance records

Faculty organization
Bylaws, faculty handbook (provisions for faculty governance), chief academic officer position description, faculty position descriptions, standing committee assignments, faculty minutes, committee minutes

Standard 10: Library and Other Learning Resources

Library organization, objectives, and budget
Library handbook, goals/objectives, librarian's annual reports, organizational chart, library personnel position descriptions, library personnel vitae, assessment data, library strategic plan, faculty minutes (librarian involvement), budget policy (control by library director), itemized budget, itemized expenditures, library as a percentage of total unrestricted operations expenditures (3-5 years)

Library collection
Acquisition policy, collection analysis reports, collection development plan, library committee minutes, weeding policy and records, circulation statistics, shelf list, card catalog/software, subscription records, database records, agreements with other libraries, collection analysis reports, breakdown per discipline and major, analysis of resources secured by agreements with other libraries

Library services
Library handbook, orientation outlines/handouts, descriptions of services, computer tutorials, interlibrary loan contracts and use analysis, information literacy program, assessment of information literacy program

Standard 11: Academic Programs

11a. Curriculum

Academic catalog, program goals/objectives, outcomes assessment data, curriculum analysis (biblical/theological studies, general studies, professional studies), faculty minutes (curriculum review), complete syllabi, course paper/project samples, evaluation rubrics, integration analysis, course sequencing, breadth of disciplines for general studies, internship assessments (analysis of rigor), employment/placement statistics, graduate admission statistics

11b. Ministry Formation Program

Academic catalog, student ministries handbook, ministry formation philosophy statement and objectives, ministry formation committee minutes and roster, graduation requirements, organizational chart, director position description, director

vita, student records, ministry formation syllabi, assessment rubrics, assessment instruments, assessment results and analysis, strategic plan

11c. Academic Pattern and Procedures

Academic catalog, organizational chart (faculty organization), credit hour definition, course syllabi (calculation of academic engagement time), academic calendar, course schedules, student records, security protocols/policies

11d. Alternative Academic Patterns

List of all off-campus sites and course offerings and enrollments, distance education/online course offerings and enrollments, correspondence education course offerings and enrollments, organizational chart, director/staff position descriptions, director/staff vitae, description of support services for off-campus, online, correspondence courses, faculty credentials, course syllabi, admissions requirements, off-campus facility/technology inventories, learning management system features, evidence of faculty-student interaction, assessment comparisons between alterative course outcomes and traditional course outcomes

Appendix 2
Regulatory Requirements Evaluation

*Please provide a yes/no assessment and a succinct explanation
for that conclusion in the boxes below.*

1. Mission and Objectives (Standard 1): Does the institution maintain clearly specified educational objectives that are consistent with its written mission, appropriate in light of the degrees or certificates awarded, and successfully achieved? (Determination should be based on the appropriateness and rigor of indicators of success in relation to the institutional mission, reliable assessment data, and evidence of achievement of educational objectives.)	Yes/No
Rationale for this conclusion:	
2. Student Achievement (Standard 2): Is success in student achievement in relation to the institution's mission adequately achieved and appropriate results made available to the public? (Determination should be based on indicators of student achievement established by the institution, including graduation and placement rates, as appropriate.)	Yes/No
Rationale for this conclusion:	
3. Recruiting and Admissions Practices, Academic Calendars, Catalogs, Publications, Grading, and Advertising (Standards 3, 7, 11c): Does the institution maintain and follow satisfactory policies regarding advertising and publications (including catalogs and academic calendars), recruitment, admissions, enrollment, and student grading to maintain accurate and timely information and consistent, ethical practices?	Yes/No
Rationale for this conclusion:	
4. Facilities, Equipment, Supplies (Standard 6): Does the institution maintain sufficient resources to achieve its institutional and program objectives appropriate to all levels of study offered (e.g., undergraduate, graduate) and all delivery methods employed (e.g., traditional on-campus, off-campus locations, distance education)?	Yes/No
Rationale for this conclusion:	
5. Fiscal and Administrative Capacity (Standards 5, 6): Does the institution have fiscal and administrative capacity appropriate to the scale of operations, including professional competence and budgetary planning that evidences fulfillment of institutional goals and financial stability?	Yes/No
Rationale for this conclusion:	
6. Transfer of Credit (Standard 7b): Does the institution publicly disclose its criteria regarding the transfer of credit earned at another institution of higher education?	Yes/No
Rationale for this conclusion:	

7. Title IV Compliance (Standard 7c): If the institution participates in Title IV programs of the Higher Education Act, is the institution free from deficiencies in program responsibilities under Title IV or does the institution demonstrate timely response in addressing deficiencies (based on the most recent student loan default rate data, results of financial or compliance audits, program reviews, and communications from the U.S. Department of Education)?	Yes/No
Rationale for this conclusion:	
8. Student Support Services (Standard 8): Does the institution have student support services appropriate to the student population served, program levels offered (e.g., undergraduate, graduate), and delivery methods employed (e.g., traditional on-campus, off-campus locations, distance education), including appropriate academic advising, financial services, counseling, and confidential records systems?	Yes/No
Rationale for this conclusion:	
9. Record of Student Complaints (Standard 8): Does the institution maintain a record of formal student complaints, and is the institution free from a pattern of student complaints that brings into question the institution's fulfillment of ABHE Standards? (Complaints since the last ABHE comprehensive review should be examined.)	Yes/No
Rationale for this conclusion:	
10. Faculty (Standard 9a): Do faculty have the documented competence and appropriate knowledge and skills to provide effective instruction in the courses they teach?	Yes/No
Rationale for this conclusion:	
11. Curricula (Standard 11a): Are all curricular programs consistent with ABHE Standards, including appropriate rigor for the level of study offered (e.g., undergraduate, graduate) and consistent quality across all delivery methods employed (e.g., traditional on-campus, off-campus locations, distance education)?	Yes/No
Rationale for this conclusion:	
12. Program Length and Program Objectives (Standard 11a, 11c): Are program requirements, length, and objectives published and consistent with the degrees and credentials offered, do degree and certificate requirements conform to commonly accepted higher education standards, and are students held to approved program requirements?	Yes/No
Rationale for this conclusion:	
13. Credit Hour Policies (Standard 11c): Is the institution's definition of a credit hour consistent with the ABHE definition of a credit hour, and does the institution's assignment of credit hours conforms to commonly accepted practice in higher education (sampling may be used to determine this)?	Yes/No
Rationale for this conclusion:	

14. **Student Verification in Distance or Correspondence Courses (Standard 11d):** If the institution offers distance or correspondence courses, does it have appropriate processes in place to verify that the student who registers for the course is the same student who participates in and completes the course or program and receives the academic credit (e.g., secure login/password, proctored examinations, or identification verification technologies), protects student privacy, and communicates accurately requirements and any additional costs related to verification of student identity at the time of registration or enrollment?	Yes/No
Rationale for this conclusion:	

Appendix 3.a
Team Chair

Evaluation Team Chair Roles and Responsibilities

Role of Team Chair
The Chair functions as the Liaison between the Institution and the team members.

Responsibilities of Team Chair
The Team Chair is responsible for leading all team meetings, serving as spokesman for the group, co-editing and approving the final team report, assessing the contribution of evaluators, and forwarding all pertinent documents to the Commission Staff Representative.

Prior to the Visit

With Institution: Communicate with the Institutional Liaison and the CEO to establish communication protocols and work on logistics.
- Confirm the dates and length of visit. The institutional visit is 2.5 days. The team members need lodging the evening prior to the institutional visit. If you as Team Chair plan to stay an extra evening, communicate this also.
- Confirm purpose of the visit (i.e. accreditation, candidate, initial accreditation, reaffirmation, or focus)
- Acquire airport code, ground transportation, housing arrangements, and meal information, and communicate any special provisions that are needed.
- Verify that workrooms on campus and at hotel have been reserved
- Confirm materials will be available in the workroom for evaluator research
- Confirm a specific time and place for a joint meeting between Visiting Team and Institutional Administration (often over a meal) at the beginning of the visit.
- Confirm appropriate dress for campus culture.

With Team:
- Secure Team Information (example in Appendix):
- Contact numbers and emails
- Special accommodations (dietary, housing, etc.)
- Professional experience
- Travel information
- With CSR: The Chair should copy the Commission Staff Representative into all emails sent to the institution and to the evaluation team members.

Communicate To Team:
- Airport to travel to/from—arrive by 5:00 pm the day prior to the institutional visit for team meetings; depart campus no earlier than 12:00 Noon on the last day of the institutional visit (\3 nights/4 days on location).
- Ground transportation provisions
- Hotel accommodations with specifics
- Appropriate team attire for campus culture
- Tentative schedule during your visit (especially the time and location of the first meeting)

Materials to review and with which to be familiar (confirm access to OneDrive):
- Self-Study documents
- Documents from COA Office (including Institutional History with recent Commission actions Letters)
- Standards for Accreditation and Conditions of Eligibility
- COA Manual
- Evaluator Worksheets
- Regulatory Requirements
- Team Roster
- Conflict of Interest signed and sent to COA

General:
- Retain a running list of important elements and questions
- Ask Team members who they wish to meet with and schedule those meetings with the Liaison (should occur no later than one week before the Team Visit)
- Start the Team Report before you arrive on site
  - Certain elements can be written ahead of visit with information derived from Institutional History, Institutional Catalog and Website
- Read and respond to communication from the team, the Institution, and the COA office

During the Visit
- Be prepared to adjust the schedule
- Use the Commission Staff Representative (CSR) as a resource/support
- Be familiar with the entire Self-Study and not just specific areas of responsibility for evaluation.
- Keep a "big picture" view of the overall Report in addition to specific areas of responsibility. Help frame terminology/adherence to the Standards
- Lead Team to develop overall recommendation, NOT shared outside of the Team.
- Remind the Institution that the Visiting Team does not make judgments, but only reports to the Commission that which was verified from the Self-Study.
- Conduct the President's Meeting and the Exit Interview (with the CSR)
- Inform the Institution of the Team's Commendations, Suggestions and Recommendations.
- Leave Institutional materials at the Institution (for confidentiality) and destroy any electronic components once the final report is submitted to the Commission.
- Collect each evaluator's Team Report BEFORE those individuals leave the Visit site

Post-Team Departure

In preparing the Team Report and Team Recommendation form, thoroughly consult and follow the instructions and procedures outlined in the *Evaluation Team Handbook*, the Standards for Accreditation, and the policies outlined in the *COA Manual.* If you have questions or need guidance in interpreting and following procedures, please contact the Commission Staff Representative for assistance in advance of deadlines.

- Team Report is to be submitted to CSR within 10 days after the close of the visit. Do *not* convert the document to PDF.
- Be certain every Essential Element is addressed, including designation of each Element identified in a parenthetical note (ex: EE 1, EE 2, etc).

- Ensure that all Recommendations directly reference the *Standards for Accreditation* and are not based upon individual opinion.
- Be certain ALL the Regulatory Requirements are answered AND that a rationale has been provided for that respective answer
- Plan to edit each member's report into one readable document.
- Assure that the overall Team Recommendation is clearly based upon the "Principle of Accreditation."
- Send documents to Team members with clear a deadline to respond.
- We strongly encourage you to STAY an extra day to finish the Team Report (just let the institution know to add a day onto reservation).
- Remind all team members to remove all digital documents pertaining to the Institution.
- Team Member Evaluations will be sent out by COA office several weeks after the visit.
- Be certain to complete Travel Expense Voucher and send to COA@abhe.org.

Appendix 3.b
Sample Email to Evaluators

Date:

To: Evaluator

From: Team Chair

Subject: Upcoming Evaluation Visit

It is a privilege to serve with you on the ABHE Commission on Accreditation visit to (institution) on (date). I would like for us to share a little about ourselves before we meet. Please fill out the Personal Data Form.

Please thoroughly read through the current *Evaluation Team Handbook*. Also, please examine the specific sections of the *Standards* and *Essential Elements* that pertain to your areas of responsibility. These items are outlined for you in the Evaluation Team Handbook, the *Evaluator Worksheet*, and the policies and procedures in the current *ABHE COA Manual*.

[IF KNOWN, please include in the email]…Plan to arrive at (hotel) by (time, date). Reservations have been made for you by the institution. If you are traveling by air, please let me know your flight information. Our initial team meeting will begin at (time) at the hotel.

If you have any questions, please do not hesitate to reach out.

Thank you for participating on this team. Please join me in praying for travel safety and that the evaluation visit will be truly beneficial to the institution.

Sincerely,

Team Chair

Appendix 3.c
Sample Personal Data Form

Name:

Current Position:

E-mail Address:

Cell Phone:

Family Profile:

Education/Ordination:

Professional Experience:

Ministry Experience:

Prior Evaluation Team Experience:

List any food or dietary needs that could be relevant to our visit:

Getting to know you better (interesting bit of background, personal interests/hobbies, life mission/purpose, areas of gifting):

Appendix 3.d
Checklist for Evaluation Team Visits
(for institutional use – provided to teams as reference)

Communication with Team Chair Begins
1. **Review the Team Roster**
   a. Confirm that all information is correct and that to the best of your knowledge the evaluators do not have a conflict of interest in evaluating your institution.
   b. Please notify the ABHE office immediately if a conflict of interest is identified.
2. **Appoint a Visit Coordinator**
   a. In charge of team visit arrangements, keeps the President and Team Chair informed and serves as a logistics coordinator for the team.
   b. The Coordinator will need to be "on call" throughout the visit and should be accessible to team members by cell phone and email.
3. **Provide airport information**

Eight to Twelve Weeks Before the Visit
1. **Book hotel rooms and a hotel meeting room**
   a. Separate rooms with bath and workspace for each member of the Evaluation Team at a business-class hotel (or equivalent) near the college. Exceptions must be approved by the Commission Office.
   b. The hotel should offer food service or be adjacent to a restaurant for meals.
   c. A private meeting room for confidential discussions with a conference table and chairs for 6-7 people.
   d. A printer or printer access (500+ pages) should also be available in or near the conference room.
   e. Internet access should be available in the conference room and guest rooms.
   f. All hotel bills should be directly assumed by the institution—evaluators should not be expected to pay for their own lodging and seek reimbursement.
   g. If an observer accompanies your team, the observer is responsible for all of his or her expenses. As a courtesy, it would be helpful to coordinate hotel arrangements on behalf of the observer at the same hotel.
2. **Reserve a meeting/work room for the team at the institution**
   a. Evaluators' exclusive use throughout the visit.
   b. The room should be secure (locked), sound resistant, and supplied as follows:
      1. Internet access with computer, printer and shredder
      2. A tech support person available to assist team members as needed
      3. Campus phone and directory
      4. Supply of paper, pens, pencils, highlighters
      5. Sufficient table or desk space to spread out material and prepare reports
      6. Snacks and beverages in or near the work room are appreciated.
3. **Submit an electronic copy of your five (5) Self-Study documents** to coa@abhe.org:
   a. If the file size exceeds 30 MB, please split the file into 30 MB segments or zip the file for easy email transmission.
   b. In PDF or Word format, with Exhibits (Appendices).
   c. The five (5) self-study documents:
      1. Compliance Document (with Regulatory Requirements Evaluation)
      2. Institutional Assessment Plan
      3. Institutional Improvement Plan

4.   Statistical Abstract
5.   Exhibits (Numbered: EX1, EX2, EX3)
d.   Name the five documents as follows:
     2022.SS Institution Name (State) Statistical Abstract
e.   Please do not use an online repository, as ABHE needs to receive all of the self-study documents in electronic form to store for 19 years for the USDE.
     Documents must be received at <u>coa@abhe.org</u> no later than eight (8) weeks before the visit.
4.   **Arrange for local transportation**
     Secure ground transportation for the team. Please note that the Evaluation Team will not be driving rented vehicles without full insurance coverage (including medical) so as to avoid liability concerns. All bills for local transportation expenses should be directly assumed by the institution unless otherwise specified.

Four to Six Weeks Before the Visit
1.   **General**
     a.   The Team Chair will advise what interviews will need to be scheduled.
     b.   Consult with the Team Chair if the initial meeting with the administration will be the first morning of the visit or over dinner the night before the campus visit begins.
     c.   The team will want to have meals in the college dining room or workroom (for lunch) and near the hotel (for dinner).
     d.   Generally, the team will meet by themselves for dinner meals and confidential dialogue on the first and second full days of the visit.
     e.   The Team Chair will provide additional guidance on scheduling and preferences.
     f.   A campus map with identified lodging, dining, and meeting locations is appreciated.
     g.   The Visit Coordinator should consult with the Team Chair concerning evaluator arrival times, departure times, and transportation needs.
2.   **Post notice of ABHE visit on the institution's website**
     a.   At least <u>60 days prior</u> to the visit, a notice should be posted.
     b.   See the *Policy on Public Notification of Comprehensive Visit* in the <u>COA Manual</u> for the required wording.
3.   **Arrange a meeting for the public who requests a face-to-face audience with the team**
4.   **Communicate to your institution**
     a.   Ensure that students, staff, administrators, faculty, and board members understand the purpose and agenda of the visit.
     b.   Campus life, atmosphere, and activity ought to be as normal and typical as possible.
     c.   Team members will interview most administrators and a select number of full-and/or part-time faculty, staff, students, student council, and board members.
     d.   Schedules should be made as flexible as possible on the days of the visit.
     e.   Interviewees should be encouraged to be candid.
     f.   No evening activities should be planned for the team.
     g.   Unrelated conversations and distractions should be kept to a minimum.
     h.   Some evaluators may observe chapel or other activities but team members will not be able to participate in campus activities.
     i.   Team members will want to visit a few classes and would appreciate that
          i.   No tests are scheduled during the visit
          ii. An empty chair is available near the door
          iii. No special reference be made to team members

One to Two Weeks Before the Visit
1. Travel logistics confirmed with Team Chair
   a. Confirm arrival and departure times for all team members.
   b. Provide cell phone number(s) of the individual(s) who will pick team up from the airport.
   c. Communicate where you will meet team members at the airport.
2. Arrange or confirm interviews
   a. The Team Chair will communicate a tentative schedule of group and individual interviews
   b. Consult with the Team Chair if there are unforeseen constraints or issues

Two Days Prior to the Visit
Stock the team work room **(**Consult with the Team Chair to see which items may be needed in the team work room and which may be accessed in administrative offices). Included may be the following items:

   a. A directory of the materials available, indicating their locations (e.g., official records, minutes, handbooks, etc.)
   b. An up-to-date organizational chart
   c. Class schedules for the current year and previous two years
   d. Program outlines and syllabi/course outlines for each course in the curriculum (should include the course title, description, objectives, content, materials, learning experiences, requirements, and bibliography)
   e. Academic catalogs, publicity materials, institutional periodicals, promotional brochures
   f. Policy manuals, such as handbooks for board, faculty, staff, students, library, student ministries, Student Council Constitution, and Alumni Constitution
   g. Audited financial statements for the last three fiscal years
   h. Budgets (revenue and expense) for the last three fiscal years
   i. Registrar reports (enrollment data) for the last three academic years
   j. Enrollment plan and projections
   k. Faculty rosters for the past three years showing all courses taught by each faculty member and faculty qualifications for teaching those courses
   l. Campus maps

During the Visit
1. Arrange for a campus tour, if so desired
2. Arrange for faculty, staff, and students to wear name tags, if they will interact with the team
3. Arrange for "runners" to be on call to secure any additional materials the team may need or to escort team members to interviews if locations may not be easy to find.
4. Have interview groups ready to meet with team members at appointed times
5. Arrange for airport transportation immediately following the exit interview on the final day of the visit (typically 10:30-11:00 am)

After the Visit
1. The ABHE Commission Office will email the Evaluation Visit Report (EVR) to the President and Accreditation Liaison approximately 30 days after the visit.
2. Send a copy of the report to the Chair of the Board of Control.
3. Write the Response to the Visit Report (RVR) addressing the Evaluation Team's Recommendations. Do not address Team Suggestions in the Response. The Response should not exceed 25 pages, not counting appendices or exhibits (typically 1-2 pages per

recommendation). See the Self-Study Guide for information on developing the Response report.

4. Submit the Response to the Visit Report (PDF or Word format) to coa@abhe.org **no later than six (6) weeks after the team report is received if you have a fall visit, or no later than September 15 for a spring visit**. For large files, please zip the documents.

5. For institutions being considered for candidacy or initial accreditation, the president and two additional representatives, one of which may be a member of the board, will be expected to appear before the Commission on Accreditation at its February meeting to provide additional information and respond to questions.

6. Institutions being considered for reaffirmation are not required to send representatives but may request to do so by notifying the Commission office in writing, at least 60 days before the meeting.

Other Logistics to Note
1. ABHE will invoice the institution for the Evaluation Team Visit fee in advance of the visit.
2. Travel expenses for evaluators will be submitted to ABHE, and ABHE will invoice the institution for those expenses after the visit. Evaluators do not submit receipts directly to the institution for reimbursement. Institutions will only receive a total charge for travel reimbursements and not an itemized list.
3. Where feasible, the institution should assume payment of all local meals. Direct billing or a pre-paid Visa/MasterCard for team use are good alternatives.
4. Evaluators are from peer institutions and graciously serve as volunteers without compensation or honorarium. An institution is at liberty to show appreciation through comfortable hospitality, but appreciation cannot be in the form of money or expensive gifts. A "goodie bag" of snacks and beverages in the hotel room to make the stay pleasant is quite appropriate. Institutions may give team members an appreciation memento of the trip (e.g., portfolio, shirt, book, coffee cup, etc.); however, the fair market value of such gifts should not exceed $50 (US).

Typical Evaluation Team Visit Schedule
Consult with the Team Chair for your visit schedule. Chairs are at liberty to modify the schedule to fit the needs of the team and institution. The following is only a typical schedule.

Tues-Thurs Visit	Activity
Monday	Team arrives, team only orientation, dinner with college administrators
Tuesday	Team on campus in morning, orientation to work room, finalize interview schedule, interviews, review documents
Tuesday evening	Team group dinner to review initial findings, plan for 2nd day, writing in rooms
Wednesday	Follow-up interviews, review of documents, writing in work room
Wednesday evening	Team group dinner to review findings, formulate initial commendations, suggestions and recommendations. Writing in rooms.
Thursday morning	Team travels to campus, final executive session in work room, Team Chair and CSR meets with President, Team meets with institutional personnel for exit interview, team departs for airport

Appendix 4.a
Evaluator Guidelines

Please be familiar with the specific Institutional data enclosed with these guidelines and be thoroughly familiar with all institutional documents. Before and during the visit, please refer to the resources made available through the ABHE Commission office, especially the current *Evaluation Team Handbook* and the ABHE*COA Manual at https://www.abhe.org/accreditation/accreditation-documents/*. These resources review the nature and purpose for evaluation visits and discuss how they fit into the overall process of accreditation. Please confirm your specific assignment with your team chair prior to the visit. *Note that your team chair may modify your assignment due to the nature of the visit or according to your expertise*.

Please communicate with the team chair to finalize details regarding lodging, transportation, arrival, and departure times. When making travel arrangements, it is best for Team members to arrive in the host location no later than 5:00 p.m. on the day prior to the Team Visit and depart from the host location no earlier than 12:00 p.m. on the last day of the Team Visit unless your Team Chair instructs otherwise.

Self-study documents will be accessible through the OneDrive link. These documents should be destroyed and all digital copies of documents should be removed after the submission of the Final Report. *Please leave all self-study materials with the institution at the conclusion of the visit*.

Team Report

- The Team chair will submit the entire report to the CSR within **10 days** of the conclusion of the evaluation. Please be prompt in your responses to the chair as it pertains to the final stages of editing the report.

Report Procedures

- If you have questions or need guidance in interpreting and following procedures, please contact the Team Chair for assistance in advance of deadlines.
- In preparing the Team Report and Team Recommendation form, the Team Chair should thoroughly consult and follow the instructions and procedures outlined in the *Evaluation Team Handbook,* and the ABHE Standards and the policies outlined in the *COA Manual.*
- Ensure that all recommendations directly reference the *Standards* and *Essential Elements*
- Ensure that all sections of the *Regulatory Requirements Evaluation* applicable to your area of responsibility have been completed.
- Ensure that the list of documents reviewed, and individuals/groups (by title only) interviewed has been completed.

Evaluator Worksheets

- Destroy all paper documents and remove all digital documents pertaining to the Institution at the end of the Team Visit.

Confidential Assessments

- **Complete** your *ABHE Confidential Assessment* of the team chair (emailed).

<u>Travel Expense Voucher</u>

- Submit a **completed** <u>*Travel Expense Voucher*</u> within two (2) weeks after the conclusion of the Evaluation Team visit, located in OneDrive ABHE Resources folder. All scanned receipts should be sent to the Commission Bookkeeper at ABHE (<u>sarah.starks@abhe.org</u>).

- Evaluators may not be reimbursed for expenses if the COA Office does not receive the Travel Expense Voucher within the two-week timeframe. The COA Office desires to invoice the institution in a timely manner.

Appendix 4.b
Decalogue for the Accreditation Team
By Hector Lee
Professor Emeritus, Sonoma State University

1. **Don't Snitch**. A team member often learns private matters about an institution that an outsider has no business knowing; he is privy to "classified" information. Don't "tell tales" or talk about the weaknesses of an institution after the visit.

2. **Don't Steal Apples**. A team member often discovers promising personnel that he would like to recruit for his own institution. Don't take advantage of the opportunity afforded by your position on the team to lure good teachers away from the institution you are visiting.

3. **Don't Be on the Take.** A team member is often tempted to accept small favors, services, or gifts from the institution being visited. Don't accept, or even suggest, that you would like to have a sample of wares of an institution's book it published, a product produced, or a service performed by the institution visited.

4. **Don't Be a Candidate.** A team member might see an opportunity to suggest himself for a consultantship, a temporary job, or a permanent position with the institution he is visiting. Don't apply or suggest your availability until after your report has been filed.

5. **Don't Be a Nit-Picker.** A team member often sees small problems that can be solved by attention to minor details. Don't use the accreditation report as a means for affecting minor reforms.

6. **Don't Shoot Small Game with a Big Gun.** A team member often finds that a small, weak, or marginal institution is completely at his mercy. Don't be sadistic or use the power of accreditation to deal heavily with or injure an institution that may need help more than punishment.

7. **Don't Be a Bleeding Heart.** A team member with "do-good" impulses may be blinded by good intentions and try to play the role of savior for an institution that may not deserve to be saved. Don't compound weakness by sentimental generosity in the hope that a school's problems will go away if ignored or treated with unwarranted optimism.

8. **Don't Push Dope.** A team member often sees an opportunity to recommend his own personal theories, philosophies, or techniques as the solution to an institution's problems. Don't force an institution to adopt measures that are likely to be altered or reversed by a subsequent team.

9. **Don't Shoot Poison Darts**. A team member may be tempted to" tip off' the administration to suspected treachery or to warn one faction on a campus of hidden enemies. Don't poison the minds of the staff or reveal suspicions to the administration; there are more wholesome ways to alert an administration to hidden tensions.

10. **Don't Worship Sacred Cows.** A team member in awe of a large and powerful institution may be reluctant to criticize an obvious problem in some department. Don't overlook weakness because the institution has a great reputation.

Appendix 5
Observer Guidelines

Occasionally, observers from provincial or state agencies, recognizing bodies, denominational organizations, sister accrediting bodies, or member colleges seek to accompany evaluation teams. With the permission of the host institution, team chair, and Executive Director or Associate Director, a representative of an institution preparing to host a team visit or other entity may accompany an evaluation team as an observer. Observers are responsible for payment of their own travel, lodging, and meal expenses.

Purpose

Observers are permitted under the following circumstances:
- To evaluate the effectiveness of ABHE's team visit process by a regulatory agency.
- To provide opportunity to external agencies and organizations to become acquainted with ABHE's accrediting process.
- To provide training opportunities for potential evaluators and team chairs.
- To facilitate preparations for institutional self-study and team visit for institutions soon to host their own evaluation visit.

Conditions

Permission for observers may be granted subject to the following conditions:
- Approval of the Executive Director/Associate Director, the host institution, and the team chair.
- Expenses in connection with the observation visit will be borne entirely by the observer or their institution/agency.
- The number of added observers does not negatively influence the function of the evaluation team (usually no more than one observer per team).
- Institutions cannot decline observers from state/province or regulatory agencies.

Guidelines

Observer participation will conform to the following guidelines:
- Observers will be permitted to participate in all evaluation team meetings, except where the team chair declares an exception due to confidentiality.
- Observers must agree to conduct themselves as observers of—not participants in—evaluation team reviews and deliberations.
- Observers will be granted the same access as evaluation team members to evaluation team training and orientation materials, institutional self-study materials, and other relevant institutional documents.
- Observers must agree not to interfere in any way with evaluation team members in conducting their reviews and exercising their assessment responsibilities.
- Observers must agree to, and sign, a confidentiality agreement, concerning all written materials, interviews of institutional personnel, and review of institutional records and self-study documents according to the provisions of ABHE's *Policy on Confidentiality*.

Procedure

To observe an evaluation visit, the following procedures should be followed:

- The individual should submit a written request to the Commission Office at coa@abhe.org, indicating a desire to serve as an observer, and affirming a commitment to abide by the provisions and limitations of the above conditions, including the responsibility to bear all observer expenses. Representatives of recognizing bodies must present evidence confirming their status with the recognizing agency.
- Upon receipt of a satisfactory request, the Executive Director or Associate Director will secure agreement from the Chief Executive Officer of the institution to be visited and the evaluation team chair.
- The Executive Director or Associate Director will notify the Chief Executive Officer of the host institution, and the evaluation team chair of the agreement of all parties to include an evaluation team visit observer.
- The observer will sign and submit the Confidentiality Agreement (see below), and it will be placed on file in the Commission Office.
- The team chair and host institution will include the observer in all pre-visit communication and arrangements.

www.abhe.org

Confidentiality Agreement
For Observers Accompanying
Evaluation Teams

All materials, discussions, activities, and decisions relative to all phases of the accreditation review process must remain confidential. Institutional documents are the property of the institution being evaluated and may not be retained, copied, modified, or used for any commercial, non-profit, or personal purposes without the written permission of the document owner.

All evaluation materials used in the review must be destroyed in a secure manner (shredded) at the conclusion of the evaluation visit. Observers may not keep personal copies of institutional review materials. Observers may not share observations that would reveal the comments or conclusions of the evaluation team concerning the institution reviewed, or information provided by the institution that would not be publicly accessible. All elements of ABHE's accreditation process are to be treated in a professional and confidential manner.

As an Observer accompanying an ABHE Evaluation Visit Team, I understand and agree to the terms of this Confidentiality Agreement.

_____

Institution Being Visited (and State/Province)   Dates of Team Visit

_____   _____   _____

Observer's Printed Name   Observer's Signature   Date

Appendix 6

SAMPLE ONLY: Secure current form OneDrive link ABHE Resources folder

Travel Expense Voucher 2022

Complete and return with receipts to sarah.starks@abhe.org within 2 weeks of the visit.

Name: _____
Date: _____
Institution being Evaluated: _____
Dates of Evaluation Visit: _____

Expenses	Amount	Mileage**
Airfare		
Checked Bag		
Airport Parking		
Auto rental		
Fuel		
Tolls, Taxis, etc.		
Auto Travel *(# of miles in last column)*	$0.00	
Lodging		
Meals		
Tips		
Other		
Total Due	**$0.00**	

**Reimbursement should not exceed airfare quote

2022 Mileage Rate

$0.625

*All amounts must be in U.S. Dollars.

Please make check payable to: _____

Address: _____

_____

Signature: _____

ABHE Commission on Accreditation

ABHE Approval _____

Appendix 7
Range of Evaluation Team Recommendations

Evaluation Teams make observations and recommendations to the Commission on Accreditation concerning the institution's fulfillment of the ABHE Standards for Accreditation. The institution has opportunity to provide additional information, clarification, or steps taken to improve fulfillment of the Standards prior to the Commission's decision. Only the Commission on Accreditation is empowered to make judgments with regard to compliance/non-compliance with the Standards and/or decisions concerning changes in accreditation status. Evaluation Teams recommend action to the Commission and may include suggestions for follow-up reporting or focused visits. The Team's recommendation should be patterned after the range of customary recommendations below.

For all recommendations that have concerns or deficiencies, list the relevant Standard and Essential Element and the specific deficiency.

Recommendations to defer candidate status or initial accreditation are not applicable if the institution will be five years from the granting of their current status when the Commission makes its decision.

Institutional Accreditation

1. **Evaluation visit for candidate status**

   a. Recommend that the Commission grant candidate status to [institution].
   b. Recommend that the Commission grant candidate status to [institution] with concern for the following:
   c. Recommend that the Commission grant candidate status to [institution] and require a progress report within [one year OR two years] addressing the following concerns:
   d. Recommend that the Commission grant candidate status to [institution] and require a focused team visit within one year to examine progress in addressing the following concerns:
   e. Recommend that the Commission defer action on candidate status for [institution] pending receipt of …
   f. Recommend that the Commission defer action on candidate status for [institution] for one year and require a special progress report before reconsideration addressing the following concerns:
   g. Recommend that the Commission defer action on candidate status for [institution] for one year and require a focused team visit before reconsideration examining the following concerns:
   h. Recommend that the Commission deny candidate status to [institution] in light of the institution's failure to demonstrate satisfaction of the following Standards:

2. **Evaluation visit for initial accreditation**

   a. Recommend that the Commission grant initial accreditation to [institution].
   b. Recommend that the Commission grant initial accreditation to [institution] with concern for the following:
   c. Recommend that the Commission grant initial accreditation to [institution] and require a progress report within [one year OR two years] addressing the following concerns:

d. Recommend that the Commission grant initial accreditation to [institution] and require a focused team visit within one year to examine progress in addressing the following concerns:

e. Recommend that the Commission defer action on initial accreditation for [institution] pending receipt of …

f. Recommend that the Commission defer action on initial accreditation for [institution] for one year and require a special progress report before reconsideration addressing the following concerns:

g. Recommend that the Commission defer action on initial accreditation for [institution] for one year and require a focused team visit before reconsideration examining the following concerns:

h. Recommend that the Commission deny initial accreditation to [institution] in light of the institution's failure to demonstrate satisfaction of the following Standards:

3. **Evaluation visit for reaffirmation of accreditation**

a. Recommend that the Commission grant reaffirmation of accreditation to [institution].

b. Recommend that the Commission grant reaffirmation of accreditation to [institution] with concern for the following:

c. Recommend that the Commission grant reaffirmation of accreditation to [institution] and require a progress report within [one year OR two years] addressing the following concerns:

d. Recommend that the Commission grant reaffirmation of accreditation to [institution] and require a focused team visit within one year to examine progress in addressing the following concerns:

e. Recommend that the Commission continue the accreditation of [institution] and defer action on reaffirmation of accreditation pending receipt of …

f. Recommend that the Commission continue the accreditation of [institution], place the institution on **warning** for one year, and require a [special progress report OR focused team visit] addressing the following concerns:

g. Recommend that the Commission continue the accreditation of [institution], place institution on **probation** for one year, and require a focused team visit in light of the institution's failure to demonstrate satisfaction of the following Standards:

h. Recommend that the Commission order that [institution] **show cause why its accreditation be continued** in light of the institution's failure to demonstrate satisfaction of the following Standards:

i. Recommend that the Commission **withdraw** the accreditation of [institution] in light of the institution's failure to demonstrate satisfaction of the following Standards:

4. **Focused visits (substantive change, special review)**

a. Recommend that the Commission approve the progress observed at [institution].

b. Recommend that the Commission approve the progress observed at [institution] and require a special progress report within [one year OR two years] addressing the following concerns:

c. Recommend that the Commission disapprove the progress observed at [institution] and require a [special progress report OR subsequent focused team visit] within one year to examine progress in addressing the following concerns:

d. Recommend that the Commission continue the accreditation of [institution], place the institution on **warning** for one year, and require a [special progress report OR subsequent focused team visit] addressing the following concerns:

e. Recommend that the Commission continue the accreditation of [institution], place the institution on **probation** for one year, and require a focused team visit in light of the institution's failure to demonstrate satisfaction of the following Standards:

f. Recommend that the Commission order that [institution] **show cause why its accreditation be continued** in light of the institution's failure to demonstrate satisfaction of the following Standards:

g. Recommend that the Commission **withdraw** the accreditation of [institution] in light of the institution's failure to demonstrate satisfaction of the following Standards:

5. **Focused visits (financial exigency)**

   a. Recommend that the Commission approve the progress observed at [institution].

   b. Recommend that the Commission approve the progress observed at [institution] and require a special progress report, including a financial recovery plan, within [one year OR two years] addressing the following concerns:

   c. Recommend that the Commission disapprove the progress observed at [institution] and require a [special progress report with a financial recovery plan OR subsequent focused team visit] within one year to examine progress in addressing the following concerns:

   d. Recommend that the Commission continue the accreditation of [institution], place the institution on **warning** for one year, and require a [special progress report OR subsequent focused team visit] addressing the following concerns:

   e. Recommend that the Commission continue the accreditation of [institution], place the institution on **probation** for one year, and require a focused team visit in light of the institution's failure to demonstrate satisfaction of the following Standards:

   f. Recommend that the Commission order that [institution] **show cause why its accreditation be continued** in light of the institution's failure to demonstrate satisfaction of the following Standards:

   g. Recommend that the Commission **withdraw** the accreditation of [institution] in light of the institution's failure to demonstrate satisfaction of the following Standards:

Programmatic Accreditation

1. **Evaluation visit for initial programmatic accreditation**

   a. Recommend that the Commission grant programmatic accreditation to the following program(s) of [institution]:

   b. Recommend that the Commission grant programmatic accreditation to the program(s) of [institution] listed below with concern for the following:
   List of affected programs:

   c. Recommend that the Commission grant programmatic accreditation to the program(s) of [institution] listed below, and require a progress report within [one year OR two years] addressing the following concerns:
   List of affected programs:

   d. Recommend that the Commission grant programmatic accreditation to the program(s) of [institution] listed below, and require a focused team visit within one year to examine progress in addressing the following concerns:
   List of affected programs:

   e. Recommend that the Commission defer action on programmatic accreditation for the program(s) of [institution] listed below, pending receipt of …
   List of affected programs:

f. Recommend that the Commission defer action for one year on programmatic accreditation for the program(s) of [institution] listed below and require a special progress report before reconsideration addressing the following concerns:
List of affected programs:

g. Recommend that the Commission defer action for one year on programmatic accreditation for the program(s) of [institution] listed below and require a focused team visit before reconsideration examining the following concerns:
List of affected programs:

h. Recommend that the Commission deny programmatic accreditation to the program(s) of [institution] listed below in light of the institution's failure to demonstrate satisfaction of the following Standards:
List of affected programs:

2. **Evaluation visit for reaffirmation of accreditation**

a. Recommend that the Commission grant reaffirmation of programmatic accreditation to the following program(s) of [institution]:

b. Recommend that the Commission grant reaffirmation of programmatic accreditation to program(s) of [institution] listed below with concern for the following:
List of affected programs:

c. Recommend that the Commission grant reaffirmation of programmatic accreditation to program(s) of [institution] listed below and require a progress report within [one year OR two years] addressing the following concerns:
List of affected programs:

d. Recommend that the Commission grant reaffirmation of programmatic accreditation to the program(s) of [institution] listed below and require a focused team visit within one year to examine progress in addressing the following concerns:
List of affected programs:

e. Recommend that the Commission continue the programmatic accreditation of the program(s) of [institution] listed below and defer action on reaffirmation of accreditation pending receipt of …
List of affected programs:

f. Recommend that the Commission continue the programmatic accreditation of the program(s) of [institution] listed below, place the program(s) on **warning** for one year, and require a [special progress report OR focused team visit] addressing the following concerns:
List of affected programs:

g. Recommend that the Commission continue the programmatic accreditation of the program(s) of [institution] listed below, place the program(s) on **probation** for one year, and require a focused team visit in light of the institution's failure to demonstrate satisfaction of the following Standards:
List of affected programs:

h. Recommend that the Commission order that [institution] **show cause why the programmatic accreditation of the program(s) listed below be continued** in light of the institution's failure to demonstrate satisfaction of the following Standards:
List of affected programs:

i. Recommend that the Commission **withdraw** the programmatic accreditation of the program(s) of [institution] listed below in light of the institution's failure to demonstrate satisfaction of the following Standards:
List of affected programs:

3. **Focused visits**

   a. Recommend that the Commission approve the progress observed for the program(s) at [institution] listed below.
   List of affected programs:

   b. Recommend that the Commission approve the progress observed for the program(s) at [institution] listed below and require a special progress report within [one year <u>OR</u> two years] addressing the following concerns:
   List of affected programs:

   c. Recommend that the Commission disapprove the progress observed for program(s) at [institution] listed below and require a [special progress report <u>OR</u> subsequent focused team visit] within one year to examine progress in addressing the following concerns:
   List of affected programs:

   d. Recommend that the Commission continue the programmatic accreditation of the program(s) at [institution] listed below, place the program(s) on **warning** for one year, and require a [special progress report <u>OR</u> subsequent focused team visit] addressing the following concerns:
   List of affected programs:

   e. Recommend that the Commission continue the programmatic accreditation of the program(s) of [institution] listed below, place the institution on **probation** for one year, and require a focused team visit in light of the institution's failure to demonstrate satisfaction of the following Standards:
   List of affected programs:

   f. Recommend that the Commission order that [institution] **show cause why the programmatic accreditation of the program(s) listed below be continued** in light of the institution's failure to demonstrate satisfaction of the following Standards:
   List of affected programs:

   g. Recommend that the Commission **withdraw** the programmatic accreditation of the program(s) of [institution] listed below in light of the institution's failure to demonstrate satisfaction of the following Standards:
   List of affected programs: