PROPOSED CHANGES

Policy on Complaints Against an Institution or Accredited Program

Key to Changes: ~~Delete~~, Add

EXPLANATION: Changes are designed to further align with U.S. Department of Education guidance on institutional complaints and to clarify and streamline the COA complaint process.

Purpose and Limitations

The ABHE Commission on Accreditation (COA) values reports from students, employees, or other interested parties concerning institutions that are perceived to be significantly out of compliance with ABHE Standards, policies, or procedures. The purpose of such notification is to address compliance with ~~the standards~~ ABHE Standards, policies, and procedures. The COA will review complaints regarding institutional or program compliance in a timely, fair, and equitable manner.

ABHE Commission on Accreditation is not a regulatory agency, and its authority is limited to actions related to accreditation review and recognition, to which an institution submits voluntarily. The COA will only consider complaints that evidence significant noncompliance with ABHE Standards, policies, or procedures for ABHE applicant, candidate, or accredited institutions. If an institution is found out of compliance with ABHE Standards, policy, or procedures, the COA will take appropriate action as needed.

The COA ~~will~~ does not mediate disputes between individuals and member institutions or review individual cases of admission; granting or transferability of credits; grades and application of academic policies; fees ~~or other financial matters~~ and student financial aid; ~~disciplinary matters,~~ student discipline; faculty or staff appointments, promotion, tenure, contractual rights and obligations, and dismissals or similar matters; personal comments; or administrative decisions. The COA also will not serve as a grievance panel when the outcome of institutional grievance or appeal processes is unsatisfactory to the complainant. The COA will not seek damages or restitution on behalf of the complainant and will not accept statements that include profanity or defamatory comments. ~~If an institution is found out of compliance with ABHE standards, policy, or procedures, the COA will take appropriate action as needed.~~

~~Where a complaint may be addressed through institutional grievance processes, the COA requires evidence that all institutional grievance and appeal processes have been fulfilled and that noncompliance with ABHE Standards, policies, or procedures continues after the grievance or appeal process has been completed. The COA will not act on a complaint under litigation or criminal investigation until such action (and appeal, if applicable) has been completed; however, if there is credible evidence that the institution is systemically out of compliance with ABHE~~

~~Standards, the COA may consider such evidence apart from disputed allegations. The Commission will not make judgments concerning the legality of an action.~~

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The COA considers only recent events in complaints. One of the following must apply for ABHE to act on the complaint: (1) the event(s) occurred less than two years ago, (2) grievance/appeal was exhausted less than one year ago, or (3) litigation/legal proceedings (and appeal) were final less than one year ago.

Where a complaint may be addressed through institutional grievance processes, the COA requires evidence that all institutional grievance and appeal processes have been fulfilled and that noncompliance with ABHE Standards, policies, or procedures continues after the grievance or appeal process has been completed. The COA will not act on a complaint under litigation or criminal investigation until such action (and appeal, if applicable) has been completed; however, if there is credible evidence that the institution is systemically out of compliance with ABHE Standards, the COA may consider such evidence apart from disputed allegations. The Commission will not make judgments concerning the legality of an action.

Institutional Responsibilities

ABHE Standards require that institutions have published procedures for addressing formal student complaints and grievances and that there be equitable and consistent treatment of employees and students consistent with published policies (see Standard 3, Essential Elements 2, 4; Standard 8, Essential Element 8). The institution must maintain a record of formal complaints since its last decennial review and make those available to visiting teams during evaluations.

Furthermore, institutions may not take retaliatory action against any individual who has filed a complaint with the COA. Institutions are expected to cooperate fully with any investigation of complaints, and any allegation of retaliatory action will be subject to investigation by the COA as a breach of Standard 3 (Integrity).

Complaint Process

The Complaint Form and Policy are available at www.abhe.org/accreditation/accreditation-documents/. Complaints and supporting documentation ~~must~~ should be submitted in writing to the COA Executive Director via email at coa@abhe.org or by U.S. mail to at 5850 T.G. Lee Blvd., Suite 130, Orlando, FL 32822. ~~Complaints will be processed by the COA staff in accordance with the *Policy on Complaints Against an Institution or Accredited Program*.~~

~~A copy of the complaint and related documentation will be furnished to the institution, and the institution will have the right to provide a response before the complaint is reviewed by the appropriate subcommittee of the COA. Any directive by the complainant to conceal identities or information from the institution will be disregarded. The complainant should not reveal any fact or opinion that the complainant does not want to be shared with the institution. All individuals named as complainants must affirm by signature their support of the complaint (i.e., one individual cannot sign on behalf of other complainants).~~
~~Occasionally, the COA or its staff receives anonymous complaints or media reports regarding an institution that holds standing with the COA. While anonymous complaints and media reports are reported to the appropriate subcommittee of the COA, in the absence of a pattern of such complaints, no action is taken unless directed by the subcommittee.~~

~~All complaints are reported to the appropriate subcommittee at the next scheduled meeting after processing. Where there is a pattern of complaints, the COA may take whatever action it deems appropriate, including no immediate action, requiring progress reports, conducting focused visits, or imposing sanctions.~~

It is the responsibility of the complainant to (1) ~~identify which ABHE Standards/Essential Elements, policies, or procedures have been violated (see the *Commission on Accreditation Manual* at https://www.abhe.org/accreditation/accreditation-documents for details)~~ state the nature of the complaint as succinctly and clearly as possible, (2) ~~clearly and succinctly describe how the institution has failed to satisfy ABHE requirements~~ describe the details of the complaint in clear language, including the timeline of events, ~~and~~ (3) ~~document through evidence that compliance failures have occurred~~ describe all steps taken to resolve the complaint, including institutional grievance and appeals processes, and (4) list all documents submitted supporting the complaint. The COA does not investigate undocumented allegations unless there is a pattern of noncompliance on record. Supporting evidence should be provided to support all statements material to the complaint. The COA is also not obligated to receive additional documentation from the complainant after the initial submission of the complaint.

A copy of the complaint and related documentation will be furnished to the institution, and the institution will have the right to provide a response before the complaint is reviewed by the appropriate subcommittee of the COA.

Complainants may request that contact information and other personally identifiable information on the complaint form be removed prior to submission to the institution. The COA will not remove personally identifiable information from supporting documentation submitted with the form. Complainants should remove such information, as deemed necessary, prior to submission of the complaint to the COA. Even if such a request is made, the COA cannot guarantee anonymity throughout the process.

All complaints are reported to the appropriate subcommittee at the next scheduled meeting after processing. Where there is a pattern of complaints, the COA may take whatever action it deems

appropriate, including no immediate action, requiring progress reports, conducting focused visits, or imposing sanctions.

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~~**All complaints must be submitted using the Complaint Form available at https://www.abhe.org/accreditation/accreditation-documents.**~~

~~**Level One**~~ **Complaint Procedures**

1. When an inquiry or notice of intent to file a complaint is received by the COA Office, the complainant is provided a copy of the *Policy on Complaints Against an Institution or Accredited Program* and a copy of the Complaint Form within 10 working days.

2. When a documented complaint is received, the COA Executive Director or Director's designee will review the documentation within ~~60~~ 30 calendar days to determine that the ~~following: (1) the complainant has clearly identified the ABHE standards/essential elements, policies, or procedures that the institution has violated; (2) the complainant has clearly and succinctly identified how the institution has violated standards, policies, or procedures; (3) the complainant has documented with evidence noncompliance with ABHE standards, policies, or procedures; (4) the complainant has documented that institutional grievance and/or appeal procedures have been exhausted or affirms that institutional grievance and/or appeal procedures are not available to the complainant~~; to the complainant: (1) clearly states the nature of the complaint, (2) describes the details of the complaint in clear language, including the timeline of events, (3) describes all steps taken to resolve the complaint, including institutional grievance and appeals processes (or affirmed that institutional grievance and/or appeal procedures were not available, (4) provides supporting evidence for the complaint, (5) affirms that the incident(s) leading to the complaint are not currently under litigation or criminal investigation; and (6) has (have) signed the complaint. ~~(Note: electronic copies are preferred for all materials.)~~ If any of these is not appropriately documented, the complainant will be notified of the deficiency and be given 30 days to resubmit the complaint. (Note: digital copies are preferred for all materials.) If the COA Executive Director or designee's review determines that the complaint does not relate to the institution's compliance with Standards or policies, or the complaint is not sufficiently documented to make such a determination or pursue further review, Commission staff will notify the complainant, and the complaint will be closed.

3. ~~The~~ When satisfactorily documented, the COA Executive Director or Director's designee will notify the chief executive officer of the institution against which the complaint and supporting documentation has been directed. The chief executive officer and board chair will receive a

copy of the complaint, and the institution will be requested to ~~reply~~ respond to the complaint in writing within thirty (30) days of the date of notification. Evidence should be provided to support all statements material to the complaint response. (Note: digital copies are preferred for all materials.)

4. ~~When satisfactorily documented,~~ When steps 1-3 above are complete, the complaint will be placed on the ~~appropriate subcommittee agenda~~ Commission agenda for review and determination regarding the complaint.~~: Committee on Progress Reports and Substantive Change for accredited institutions, Committee on Applicant and Candidate Status for applicant and candidate institutions, or Committee on Financial Exigency for complaints relating primarily to financial matters.~~

5. Both parties will be notified within 30 calendar days after the effective date of the ~~subcommittee decision~~ Commission determination regarding the complaint.~~, and parties have 30 calendar days to accept or reject the decision. If one or both parties are dissatisfied with the decision, the complaint may be advanced to a Level Two Complaint.~~ Commission decisions, communicated by Commission staff to the complainant and the institution, are final.

~~**Level Two Complaint**~~

~~1. When a complaint is advanced to Level Two, the COA Executive Director or Director's designee will begin arrangements for a hearing panel within 30 calendar days of notification. The panel will be composed of five persons, three of whom will be appointed by the COA Executive Director from among current or former Commissioners (not on the committee in Level One) and/or senior team evaluators. The Executive Director will select one of the three to be the chair of the hearing panel. Both the institution and the complainants will be offered an opportunity to nominate one panelist each to represent their respective interests. In order to be confirmed, the nominated panelists must **agree to sign the confidentiality agreement attached to this policy.** The panel will assemble at the ABHE Office in Orlando, FL on a mutually agreed upon date. If agreement on a date cannot be achieved, the chair will pick a date reflecting majority acceptability.~~

~~2. The panel will conduct a special meeting for the purpose of reviewing the complaint. The panel chair will conduct the meeting and will have the power to limit the testimony of any witnesses. Each party to the complaint may be represented at the hearing by whomsoever it chooses. The party requesting the hearing will pay the filing fee and post the bond for the hearing (see below).~~

~~3. Upon the conclusion of a hearing between the complainant and the institution, the hearing panel may choose to:~~

~~(a) issue a final disposition to both parties and notify the COA of its decision; or~~

(b) require a focused evaluation team visit to review the allegations of the complainant. The visit will be conducted by a team of three experienced evaluators from ABHE-accredited institutions/programs assigned by the COA Executive Director or Director's designee. The institution has the right to reject any member of the proposed evaluation team if a conflict of interest is identified.

The evaluation team will review the complaint prior to the visit. The purpose of the focused visit is to investigate the allegations of the complaint and assess whether or not the institution is in substantial compliance with ABHE standards, policies, and procedures in the specific area of the complaint.

The team may also make inquiry of the complainant regarding the facts, nature, and records related to the complaint. The evaluation team will advise the hearing panel of its findings. The hearing panel will take final action upon receipt of the recommendations of the team.

The hearing panel may require an institution to take corrective steps. The hearing panel will establish the deadline for corrective action and forward the panel's decision and the evaluation team report to the appropriate subcommittee of the COA for monitoring and verification of fulfillment.

4. The COA may, at its discretion, publish the findings and decision of a hearing panel via the COA website.
5. Failure to follow the recommendations of the hearing panel will cause that institution or program to be reviewed by the COA regarding the institution or program's accredited status. Upon completion of all phases of the complaint review process, the hearing panel action will be considered final for both parties.

Costs for a Hearing Panel

When special hearings are requested or an evaluation team visit is required by a hearing panel, all related costs are to be borne by the party determined to be at fault by the hearing panel. The party requesting the hearing will be required to pay a $500 nonrefundable filing fee and post a $5,000 bond with the COA pending a decision regarding the complaint. Should an institution or program be found at fault in a complaint, it will be required to reimburse the complainant for all expenses in the processing of the complaint. Should an institution or program not be found at fault in a complaint, the complainant will be required to reimburse the institution for all expenses in the processing of the complaint. When the fault cannot be clearly determined, the costs will be assessed at the discretion of the hearing panel.

~~Confidentiality Agreement for Complaint Hearing Panels~~

~~Introduction~~

~~The ABHE Commission on Accreditation Policy for dealing with complaints against institutions or programs that hold status with the COA provides two levels of review. The second level provides for a hearing by a five-member panel. Each party to the complaint has the prerogative of nominating one member of the hearing panel. For service on the panel, the nominated individual must agree to abide by the confidentiality agreement described below. Failure to enter into the confidentiality agreement will result in a declaration that the nominated individual is ineligible for service on the panel and result in the loss of the nominating party's ability to recommend a person for panel service. Should this occur, the COA Executive Director will appoint a panelist to fill the vacancy created. Should it be found that a panelist who has entered into this agreement has violated this confidentiality policy, the violator will be subject to legal action.~~

~~Matters that are Confidential~~

~~ABHE has a general statement regarding confidentiality. The materials described by this policy are to be treated as confidential. These materials include self-study materials, evaluation documents, progress reports, institutional financial documents, minutes relating to COA decisions regarding the Institution, and action letters communicating COA decisions regarding the institution. Additionally, correspondence, testimony, and related materials developed in efforts to implement each step of this complaint policy will be regarded as confidential. Such materials will be released only on a "need to know" basis, but the institution will have the right to make public its own documents. It can also permit panelists to exercise the prerogative of making documents under its control public. The complainants will also have similar powers to those reserved for institutions to control access to materials related to their complaint.~~

~~Agreement Confirmed~~

~~As a panelist serving on a hearing panel related to the complaint process, I agree to abide by the terms of this agreement.~~

~~SIGNATURE~~	~~PRINTED NAME~~	~~DATE~~

Adopted October 1982; Revised October 1997, November 2007, February 2011, November 2011, June 2017, Proposed April 2024