Discussion of Proposed Handbook Changes
January 2016

Overview

This item presents revisions to Chapter 1-4, 6, 8, 9, and 15 of the *Accreditation Handbook* for COA consideration and discussion. The proposed revisions would ensure that the *Handbook* better reflects the newly strengthened and streamlined accreditation process.

Background

During the past year, the Commission has engaged in work to strengthen and streamline the accreditation system. As a result, the *Accreditation Handbook* will need to be revised to reflect new terminology and to align with the new accreditation process. Several items pertaining to strengthening and streamlining the accreditation system have come before the COA during 2015. The proposed changes to the *Accreditation Handbook* reflect the policies adopted by the Commission, the anticipated changes to the *Accreditation Framework*, and input from the COA.

Staff Recommendation

This item is for information and discussion only.

Proposed Handbook Changes

The *Accreditation Handbook* is a reference document that is used by many individuals involved in the Commission's accreditation process. This is the first of several agenda items that will be brought forward regarding proposed *Accreditation Handbook* changes. As revisions are proposed for additional chapters, they will be brought forward for COA approval.

The following proposed revisions are recommended in order to update and clarify the information as it relates to strengthening and streamlining the accreditation system. Full text of the chapters with "tracked changes" are also included in the appendix.

The proposed changes, summarized by chapter, are listed below:

<u>Chapter One: Responsibilities of the Commission and the Committee on Accreditation</u>

- Added information regarding Cost Recovery Fees
- Language change to reflect data reporting rather than Biennial Reports and Program Review rather than Program Assessment

<u>Chapter Two: Standards in Accreditation</u>

- Added information about Preconditions
- Clarified information about Standards Revision process in Option 1 and Section III

- Added language to require an alignment matrix for Option Two National or Professional Program Standards and provides information that the COA could deny use of National or Professional Standards

Chapter Three: Institutional and Program Approval

- Retitled to Institutional and Program Approval and Status Change
- Section I (p 1-8): Rewritten to reflect the more robust Initial Institutional Approval adopted by the Commission; new language to include multi-step process for IIA (prerequisites, eligibility, alignment with standards, provisional approval, full approval)
- Section II Language added to more specifically describe the steps needed for Initial Program Approval; Additional language describing the need for volunteer reviewers
- Clarifies appeal process
- Section III Language revised to reflect new accreditation system
- Language added to clarify re-activation process

Chapter Four: The Accreditation Cycle

- Significant changes throughout to align with the newly strengthened and streamlined accreditation system

Chapter Six: Program Assessment

- Significant Changes throughout to align with the newly strengthened and streamlined accreditation system. (these changes were presented in agenda item 15)

Chapter Eight: Accreditation Decisions: Options and Implications

- Minor language revisions to align with the newly strengthened and streamlined accreditation system

Chapter Nine: Activities during the Seventh Year of the Accreditation Cycle

- Deletion of reference to Biennial Report

Chapter Fifteen: The Accreditation Revisit

- Reorganizes Introduction for clarity
- Clarifies who is on revisit team
- Provides additional information about addressing stipulations in preparation for revisit
- Clarifies that institutions may choose to address all standards during a revisit in addition to those with stipulations.
- Language added to reflect the potential for differentiated frequency in site visits as a result of Commission policy strengthening and streamlining the accreditation process.

Next Steps

Based on COA discussion at this meeting, staff will bring back another agenda item reflecting the COA's discussion for further consideration and possible adoption.

Staff will also bring forward remaining *Accreditation Handbook* chapters for discussion.

Appendix

Chapter One:
Responsibilities of the Commission on Teacher Credentialing and the Committee on Accreditation

Introduction

The Commission on Teacher Credentialing (Commission) is responsible for ensuring that educators for California's public schools – from preschool through high school and adult education – are prepared in rigorous, high quality programs. The major purpose of the agency is to serve as a state standards board for educator preparation for the California public schools, the licensing and credentialing of professional educators in California, the enforcement of professional practices, and the discipline of California credential holders. The Commission works in tandem with its appointed committee of professional educators, the Committee on Accreditation (COA), to implement California's accreditation system for educator preparation. Each of these bodies has specific responsibilities outlined in California law (California Ed Code sections 44000-44393), the California Code of Regulations, Title 5 CCR Sections 80000-80690.1, and further delineated in the *Accreditation Framework* (Attachment G).

The Commission establishes policy related to accreditation and the COA implements the policies. The statutes that distinguish the roles and responsibilities of these two bodies are found in California Education Code, Sections 44370 through 44374. These provisions, further, govern the *Accreditation Framework* and guided the development of this *Handbook*.

This chapter identifies the specific duties of each body that relate directly to the professional accreditation process. Institutions that prepare educators or that wish to add new credential programs under the *Accreditation Framework* should read this chapter.

I. Responsibilities of the Commission on Teacher Credentialing

The following list identifies duties and responsibilities of the Commission that are related to the initial approval and accreditation of educator preparation programs.

A. Adoption and Modification of the *Accreditation Framework*. The Commission has the authority and responsibility to adopt an *Accreditation Framework*, "which sets forth the policies of the Commission regarding the accreditation of educator preparation in California" (Education Code Section 44372(a)). The *Accreditation Framework* is found in Appendix G. The Commission may modify the *Framework* in accordance with Section 8 of the *Framework*.

B. Establishing and Modifying Standards for Educator Preparation. Pursuant to Education Code Section 44372(b), the Commission has the authority and responsibility to establish and modify standards for educator preparation in California.

C. Providing Initial Approval of Institutions. In accordance with Education Code Sections 44227(a) and 44372(c) and Section Two of this *Framework*, the Commission determines

the eligibility of an institution that applies for initial accreditation and that has not previously prepared educators for state certification in California. The Commission approves institutions that meet its adopted criteria adopted for that purpose. Institutional approval by the Commission establishes the eligibility of an institution to submit specific program proposals to the COA.

D. Hearing and Resolving Accreditation Appeals. The Commission hears appeals of accreditation decisions, which must be based on evidence that accreditation procedures or decisions were "arbitrary, capricious, unfair, or contrary to the policies of the Commission or the procedural guidelines of the COA" (Education Code Section 44374(e)). The Commission resolves each appeal, and the Executive Director communicates the Commission's decision to the COA, the accreditation team, and the affected institution. The Appeal Procedures are found in Chapter Seven of this *Handbook*.

E. Appointments to the Committee on Accreditation. Pursuant to Education Code 44372(d) and Section 2 of this *Framework*, the Commission appoints members and alternate members of the COA for specific terms. The Commission selects the COA members and alternate members from nominees submitted by the Nominating Panel. The Commission ensures the COA is professionally distinguished and balanced in its composition but does not appoint members to represent particular institutions, organizations, or constituencies.

F. Addressing Issues, and Referring Concerns, Related to Accreditation. The Commission considers issues and concerns related to accreditation. Issues may be identified by Commission members, the COA, postsecondary institutions, the Commission's staff, or other concerned individuals or organizations. At its discretion, the Commission may refer accreditation issues and concerns to the COA for examination and response.

G. Reviewing Annual Reports by the Committee on Accreditation. The Commission reviews *Annual Accreditation Reports* submitted by the COA. *Annual Accreditation Reports* include information about the process of the accreditation process, findings from accreditation site visits, and the outcome of COA deliberations.

H. Annual Allocation of Resources for Accreditation Operations. The Commission annually allocates resources for accreditation operations to implement the *Accreditation Framework.* Consistent with the Commission's general practice, staff assignments to accreditation operations are made by the Executive Director, in accordance with state budgets, laws, and regulations.

Pursuant to *Education Code* 44374.5, the Commission implements a fair and consistent fee policy that is reviewed periodically. The Annual Accreditation fee is composed of two parts: 1) an institution fee based on the average number of recommendations over the past 3 years and 2) a program fee based on the number and type of Commission-approved educator preparation programs offered by the institution.

There is also a Cost Recovery Plan for selected accreditation activities. These fees include an Initial Institutional Approval fee, an Initial Program fee that is dependent on the number of standards in the program, late program submission fees, and fees for Full Program reviews when the Program Review documents were not complete.

I. Jointly Sponsoring an External Evaluation of Accreditation Policies and Practices. The Commission shares responsibility with the COA for the design and implementation of a comprehensive evaluation of the accreditation process, including policies, ~~biennial reports~~data reporting requirements, program ~~assessment~~review, site visits, training of Board of Institutional Review (BIR) members, and selection of an external evaluator to conduct the evaluation, pursuant to Section 8 of the *Framework*.

II. Responsibilities of the Committee on Accreditation

The following list identifies duties and responsibilities of the COA that are related to the initial approval and continuing accreditation of educator preparation programs.

A. Determining Comparability of Standards. In accordance with Section Three of the *Framework*, the COA determines whether standards submitted by institutions under Option Two (National or Professional Program Standards) provide a level of program quality comparable to standards adopted by the Commission under Option One (California Program Standards). If the COA determines that the proposed standards are collectively comparable in breadth and depth to the Commission-adopted standards, the COA may approve the proposed standards as program standards in California.

B. Providing Initial Accreditation of Programs. The COA reviews proposals for the initial program review (IPR) submitted by institutions that have been determined eligible by the CTC. In accordance with Section Three of the *Framework*, new programs of educator preparation may be submitted under Options One (California Program Standards), Two (National or Professional Program Standards), or Three (Experimental Program Standards). If the COA determines that a program meets all applicable standards, the COA grants initial accreditation to the program.

C. Continuing Accreditation Decisions. After reviewing the recommendations of accreditation teams, the COA makes decisions about the continuing accreditation of educator preparation institutions and programs, consistent with Section Six of the *Framework*. Pertaining to each institution, the COA makes one of three decisions: Accreditation, Accreditation with Stipulations, or Denial of Accreditation.

D. Developing Accreditation Procedures. Consistent with the terms of Section Six, the COA recommends appropriate guidelines for self-study reports and other accreditation materials and exhibits to be prepared by institutions. The COA also adopts guidelines for accreditation team reports, which emphasize the use of narrative, qualitative explanations of team recommendations. The COA may provide additional guidance to institutions,

teams, and the Executive Director regarding accreditation visit procedures. The procedural guidelines of the COA are published by the CTC in this *Accreditation Handbook.*

E. Monitoring the Accreditation System. The COA monitors the performance of accreditation teams and oversees other activities associated with the accreditation system.

F. Submitting Annual Reports, Recommendations and Responses to the Commission. Each year, the COA presents its *Annual Accreditation Report* to the Commission. The *Annual Accreditation Report* includes standard information about the dimensions and results of the accreditation process. The COA also advises the Commission about policy changes to improve the quality and integrity of the accreditation process.

G. Holding Meetings in Public Sessions. The COA conducts its business and makes its decisions in meetings that are open to the public, except as provided by statute.

H. Jointly Sponsoring an External Evaluation of Accreditation Policies and Practices. The COA shares responsibility with the Commission for the design and implementation of a comprehensive evaluation of the accreditation process, including policies, ~~the biennial reports~~data reporting, program ~~assessment~~review, site visits, training of Board of Institutional Review (BIR) members, and the selection of an external evaluator to conduct an evaluation, pursuant to Section 8 of the *Framework*.

Chapter Two:
Standards in Accreditation

Introduction

This chapter describes the role of the Preconditions, Common Standards, and Program Standards in the Commission on Teacher Credentialing (Commission) accreditation system. The chapter also discusses how standards are developed, how standards are revised, and how institutions and other program sponsors are affected when standards are revised. Institutions[1] that prepare educators and Board of Institutional Review (BIR) members will be interested in this chapter.

I. Preconditions, Common and Program Standards

There are foundational requirements that institutions and credential programs that prepare professional educators in California are expected to address at all times: 1) Preconditions, 2) Common Standards, and 3) Program Standards.

A. Preconditions are requirements grounded in statute, regulations and/or Commission policy. Programs must provide a response to each precondition and include appropriate supporting evidence and/or documentation.

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B. Common Standards address aspects of program quality that should be common across all educator preparation programs in an institution. This category includes standards relevant to the institution's overall vision for, and leadership of, educator preparation programs within its organization. The Common Standards also embody expectations about the distribution of resources across different programs, the quality of faculty, and the adequacy of admissions and advising procedures. An institution provides documentation describing how it responds to each Common Standard, including information about individual programs when necessary

~~B.~~**C. Program Standards** address the quality of program features that are specific to a credential. These include assessments, curriculum, field experiences, and the knowledge and skills to be demonstrated by candidates in the specific credential area. There are three program standards options available to institutions intending to offer an educator preparation program. The institution must select the type of program standards it will use to seek initial program approval and future program accreditation. This selection will also guide the assignment and orientation of program reviewers. Once a program standard option has been chosen, the institution must respond to each standard in the selected option by providing program-specific information for review by the program reviewers. Institutions may select from the following options for program-specific standards.

[1] "Institutions" will be used to refer to all institutions or other entities that sponsor educator preparation programs.

- **Option 1. California Program Standards.** The Commission empanels experts from colleges, universities and local education authorities (LEAs) to develop standards for specific credential programs. These panels are guided by current research findings pertinent to that credential, the California K-12 academic content standards and most current edition of the curriculum frameworks. They also consider standards developed by appropriate national and statewide professional organizations. If the national or professional standards are found to be appropriate for California, the panel may recommend that the Commission adopt them in lieu of developing new standards or revising the Commission's existing standards. After reviewing the recommendations of advisory panels and other experts, the Commission adopts California Program Standards for the initial and continuing accreditation of credential preparation programs. When revised program standards are adopted, institutions offering programs aligned to the former standards must be aligned to the revised standards within a timeline set by the Commission. Staff provides information and technical assistance regarding transitioning to new standards, including a timeline to institutions sponsoring the affected programs. ~~will be given instructions about when they must bring their current program into alignment with the revised standards.~~

- **Option Two. National or Professional Program Standards.** California institutions may propose to use program standards that have been developed by national or state professional organizations. These standards must be approved for use by the Committee on Accreditation (COA) to the extent that the proposed standards are comparable to those adopted by the Commission under Option One (California Program Standards). The analysis of comparability between national and California standards can be performed by the institution prior to submitting a request to the COA, by the national or professional organization, or by Commission staff following a request to use the National or Professional Standards. Such a proposal may be submitted to the COA with a statement of the institution's reasons for requesting this option and a copy of the proposed national or professional program standards.

  If the COA determines that the proposed standards are comparable to the California Program Standards, the COA will approve the proposed standards for use as program standards in the initial and continuing accreditation of the credential program. If the COA determines that the requested standards do not adequately address one or more aspects of the California Standards (Common and/or Program), the COA may approve the requested standards but also require the institution to address the additional aspects found in the California Standards. An institution would be required to submit an alignment matrix that provides any information not included in the national program standards. The COA could also determine that the national or professional standards are not appropriate and deny their use for initial and ongoing accreditation purposes.

- **Option Three. Experimental Program Standards**. For initial accreditation, an institution may present an experimental program proposal that meets the Experimental Program Standards adopted by the CTC pursuant to *Education Code* Section 44273. The Experimental Program Standards were designed to facilitate the development of innovative programs that are likely to expand the knowledge base about effective educator preparation practices. Experimental programs must have a research component to allow the investigation of focused research questions about key aspects of educator preparation. For a copy of the Experimental Program Standards and additional information about this option, see the CTC's website at http://www.ctc.ca.gov/educator-prep/STDS-prep-program.html In addition to a research focus, experimental program proposals must ensure that candidates completing the experimental program would possess the same knowledge and skills required by the Commission-adopted California Program Standards (Option One) for the same credential. Approved experimental programs must report findings related to their research component on a biennial basis to the Commission. Upon consultation with the institution and with the COA, the COA retains the authority to determine whether the findings support continuance of the experimental program under the experimental standards. ~~For a copy of the Experimental Program Standards and additional information about this option, see the CTC's website at http://www.ctc.ca.gov/educator-prep/STDS-prep-program.html~~.

II. Process of Program Standards Development and Revision

The initial development of the Preconditions, Common and Program Standards utilizes panels of experts in educator preparation and from among practicing educators from colleges, universities, school districts and other educational entities. The panel members use information from current, respected research in the relevant areas, California's adopted K-12 academic content standards, and current curriculum frameworks to craft standards that ensure that credential holders would be able to work effectively with California's highly diverse students and families. As appropriate, the panel also reviews standards developed by national and statewide professional organizations.

The CTC adopts, and will continue to modify as necessary, a schedule for the regular review and revision of all adopted standards. The CTC follows established procedures for the use of expert panels, stakeholder comment, and field review to develop and revise standards. For information on the schedule of standards review and revision, please consult the CTC's Accreditation web page, http://www.ctc.ca.gov/educator-prep/program-accred.html. h

III. Requirements for Institutions When Standards are Revised

Institutions with educator preparation programs aligned to previous standards will be required to update their program documents to reflect any newly adopted standards depending on the institution's location within the seven year accreditation cycle. As each set of program standards is updated, specific directions will be provided to institutions about the transition requirements and timeline in which they must update their program and program documents. At

the time of adoption, the Commission will determine whether the ~~minor~~ changes are significant and warrant institutions being required to update their documents for a review process outside of the regularly scheduled accreditation activities or minor and ~~will be made to the standards, and the CTC may~~ allow institutions to update their documents before the next accreditation activity. ~~At other times, when the revised standards are significantly different from the previous standards, institutions may be required to update their documents for a review process outside of the regularly scheduled accreditation activities.~~

Chapter Three
Institutional and Program Approval and Change of Status

Introduction

This chapter describes the processes by which an institution gains initial institutional approval from the Commission that allows the institution to propose specific credential preparation programs for approval by the COA. This chapter also provides information about the different status options that a program might have, such as being approved, inactive, discontinued, or withdrawn.

I. Initial Institutional Approval

According to the *Accreditation Framework* (Section 1-C-1), the CTC is responsible for determining the eligibility of a postsecondary education institution, local education agency (LEA), or other entity that is not currently approved to prepare educators for California's public schools. These institutions must submit an application to the Commission for initial institutional eligibility to submit programs. ~~that applies for initial accreditation and that has not previously prepared educators for state certification in California. The following procedures apply to those institutions:~~

The Initial Institutional Approval process has been organized into three sequential requirements

I) Completion of the prerequisites;
II) Successful completion of all eligibility requirements; and
III) Alignment to the Applicable Standards and Preconditions.

Commission action after completion of the first two parts determines if an institution is eligible to continue with Part III of Initial Institutional Approval.

PART I – Prerequisites

Prerequisite 1
Regional Accreditation and Academic Credit

Institutions interested in seeking Initial Institutional Approval must identify which of the following applies to their institution.

☐ The institution is accredited by the Western Association of Schools and Colleges or another of the six regional accrediting associations. A copy of a letter from the accrediting association must be hyperlinked as verification.

- ☐ The institution is a public school, school district, or county office and has received approval of sponsorship from the agency's governing board. Verification must be submitted in the form of a letter or board minutes signed by the superintendent or CEO of the agency.
- ☐ The institution is neither of the above and is preparing to offer STEM (Science, Technology, Engineering and Math) programs pursuant to SBX5 1 (Chap. 2, Stats. of 2010). Additional requirements are necessary for institutions applying under this category *(See http://www.ctc.ca.gov/educator-prep/SBX5-1.html)*

Prerequisite 2
Accreditation 101 - Expectations and Responsibilities for Commission Approved Institutions

Prior to accepting an application for initial institutional approval, the Commission requires that the institution send a team to Accreditation 101, a professional training that provides information regarding eligibility and outlines the expectations and responsibilities of Commission-approved program sponsors including reporting requirements, applicable program standards, annual accreditation fees, credential recommendation and student record responsibilities, and other expectations for Commission approved institutions that sponsor educator preparation in California.

Required attendees include:

- Unit Head
- Fiscal Officer or designee
- Directors of Proposed Program(s)
- Partner Employing Organization or Educational Entity
- Other participants deemed necessary by the institution

All travel expenses for attending Accreditation 101 are borne by the institution.

PART II – Eligibility Criteria

Responses to Eligibility Criteria (see below) will be brought before the Commission for consideration and a determination of approval or denial. A finding of approval will allow an institution to move forward to Part III of the Initial Institutional Process. The determination of the Commission is binding and final. Entities that are found to be ineligible may reapply at such a time when there have been adequate changes to the institutional structure to meet the requirements. Reconsideration of an entity that has been denied eligibility will be at the sole discretion of the Commission.

Criterion 1
Responsibility and Authority

Institutions seeking Initial Institutional Approval must:

a) Identify the position within the organizational structure that is responsible for ongoing oversight of all educator preparation programs offered by the entity including educator preparation programs offered by extension divisions.
b) Identify the individual who will coordinate each educator preparation program sponsored by the entity. Provide a description of the reporting relationship between this person(s) and (a). If a reporting relationship is indirect, describe the levels of authority and responsibility for each educator preparation program.
c) Provide an organizational chart for the institution as well as the division(s) within the institution responsible for the oversight of educator preparation programs; include any parent organization, outside organization(s), or partner(s) who will be involved in the oversight of the educator preparation unit and/or responsible for program delivery.
d) Provide policies to ensure that duties regarding credential recommendations are not delegated to persons other than employees of the Commission approved institution.
e) Provide assurance that individuals identified as responsible for credential recommendations will participate in Commission training related to the recommendation process.

Criterion 2
Mission and Vision

To be granted initial institutional accreditation, an institution must:

- provide its mission and vision related to educator preparation
- confirm that the mission and vision will be published on the website and in institutional documents provided to candidates

Criterion 3
Lawful Practices

To be granted initial institutional accreditation, a program of professional preparation must be proposed and operated by an entity that makes all personnel decisions without unlawful discrimination. The entity must provide written policy as verification that decisions regarding the admission, retention or graduation of students, and all personnel decisions regarding the employment, retention or promotion of employees are made without unlawful discrimination.

Criterion 4
Commission Assurances and Compliance

To be granted Initial Institutional Approval, the initial program proposal must include the following assurances:

a) That there will be compliance with all preconditions required for the initial program(s) the institution would like to propose (General and program specific preconditions for proposed programs must accompany this document)
b) Provide assurance that all required reports to the Commission including but not limited to data reports and accreditation documents, will be submitted by the Commission approved entity for all educator preparation programs offered including extension divisions.
c) That the sponsor will cooperate in an evaluation of the program by an external team or a monitoring of the program by a Commission staff member.
d) That the sponsor will participate fully in the Commission's accreditation system and adhere to submission timelines.
e) That once a candidate is accepted and enrolled in the educator preparation program, the sponsor must offer the approved program, meeting the adopted standards, until the candidate;
   i. Completes the program;
   ii. Withdraws from the program;
   iii. Is dropped from the program;
   iv. Is admitted to another approved program to complete the requirements, with minimal disruption, for the authorization in the event the program closes. In this event, an individual transition plan would need to be developed with each candidate.

Criterion 5
Requests for Data

An institution seeking Initial Institutional Approval must identify a qualified officer responsible for reporting and responding to all requests from the Commission within the specified timeframes for data including, but not limited to:

a) program enrollments
b) program completers
c) examination results
d) state and federal reporting
e) candidate competence
f) organizational effectiveness data
g) other data as indicated by the Commission

Criterion 6
Veracity in all Claims and Documentation Submitted

To be granted Initial Institution Approval, the institutional leadership (Dean or Superintendent) must positively affirm the veracity of all statements and documentation submitted to the Commission. Evidence of a lack of veracity is cause for denial of initial institutional accreditation.

Criterion 7
Grievance Process.

To be granted Initial Institution Approval, the sponsor must:

a) Provide a clearly delineated grievance process for candidates and applicants.
b) Demonstrate that information pertaining to the grievance process is accessible to all candidates and applicants.
c) Provide documentation that candidates have been informed of the grievance process and that the process has been followed.

Criterion 8
Communication and Information

To be granted Initial Institution Approval, the sponsor must provide a plan for communicating and informing the public about the institution and the educator preparation programs. The plan must demonstrate that:

a) The institution will create and maintain a website that includes information about the institution and all approved educator preparation programs. The website must be easily accessible to the public and must not require login information (access codes/password) in order to obtain basic information about the institution's programs and requirements as listed in (b).
b) The institution will make public information about its mission, governance and administration, admission procedures, and information about all Commission approved educator preparation programs.
c) Information will be made available through various means of communication including but not limited to website, institutional catalog, and admission material.

Criterion 9
Student Records Management, Access, and Security

To be granted Initial Institution Approval, the sponsor must demonstrate that it will maintain and retain student records. Institutions seeking Initial Institutional Approval will provide verification that:

a) Candidates will have access to and be provided with transcripts and/or other documents for the purpose of verifying academic units and program completion.
b) All candidate records will be maintained at the main institutional site or central location (paper or digital copies).
c) Records will be kept securely in locked cabinets or on a secure server located in a room not accessible by the public.
d) Candidates will be provided with transcript and/or other documents for the purpose of verifying academic units or program completion.

Criterion 10

History of Prior Experience and Effectiveness in Educator Preparation

Institutions seeking Initial Institutional Approval must have sponsored an educator preparation program leading to licensure, or participated as a partner in any educator preparation programs and/or programs focused on K-12 public education and provide history related to that experience. CTC staff reserve the right to conduct Google/Nexus searches regarding the institution, governing board and administration. Institutions must submit:

a) History related to its prior experience preparing, training and supporting educators within California or in other states
b) A list of all states and/or countries in which the institution is currently operating and the status of the institution's approval in each of those locations
c) Retention and completion data in educator preparation programs or other programs when educator preparation data are not available.
d) Proof of third party notification enlisting comments to be sent to: xxxapproval@ctc.ca.gov

Criterion 11

Capacity and Resources

To be granted Initial Institution Approval, an institution must submit a Capacity and Resources plan providing evidence about how it will sustain the educator preparation program(s) through a 2 – 3 year provisional approval (if granted) at a minimum. An institution's Capacity and Resource plan must include:

- Copy of the most recent audited budget for the institution
- A proposed operational budget for the educational unit
- Information about instructional and support personnel for the educational unit
- Evidence of K-12 partnerships for the purposes of providing fieldwork
- Information about facilities and/or digital learning platforms
- A plan to teach out candidates if, for some reason, the institution is unable to continue providing educator preparation program(s)

Criterion 12
Disclosure

Institutions must disclose:

- Information regarding the proposed delivery model (online, in person, hybrid, etc.)
- All locations of the proposed educator preparation programs including satellite campuses.
- Any outside organizations (those individuals not formally employed by the institution seeking Initial Institutional Approval) that will be providing any direct educational services as all or part of the proposed programs.

PART III – Alignment with all Applicable Standards and Preconditions

Once an institution seeking Initial Institutional Approval receives Commission approval for Eligibility following Part II, EligibilityCriteria, the institution may continue in the Initial Institutional Approval process by submitting the following:

1)Common Standards - Common Standards reflect aspects of program quality that are the same for all credential programs, regardless of type of program. The program sponsor must respond to each Common Standard by providing information and supporting documentation that is inclusive of all credential programs to be offered by the institution. An institution's responses are reviewed by Commission staff and must be aligned to the Common Standards before Initial Institutional Approval can be brought before the Commission for consideration.

2)All General and Program Specific Preconditions – Preconditions are statements of Commission policy or state statute. An institution's responses are reviewed and must be in compliance with the general and program specific preconditions before the initial Institutional Approval can be brought before the Commission for consideration.

3)Program Standards Document – A document addressing the specific credential program standards for which the institution seeks to initially offer must be submitted before the institution's application for Initial Institutional Approval is brought to the Commission for consideration.

Commission Approval

Once an institution has satisfied Parts I, II, and III of the Initial Institutional Approval process, the institution's application will again be brought before the Commission for its consideration and a determination regarding Initial Institutional Approval will be made.

Provisional Approval

If the Commission approves the new institution, it would be allowed to operate under *Provisional Approval*. The provisional timeframe will be determined by the Commission and will span two to three years, in accordance with the program's design. At a minimum of two years, this timeframe will be adequate for at least an initial group of candidates to complete the program thereby allowing for data to be collected to determine the institution's effectiveness in educator preparation. No additional programs will be approved during this period.

Full Approval

Full Approval will be determined by the Commission based on the following information:

1. Analysis of data collected during the 2-3 year provisional time period
2. Recommendation of site team as a result of a focused site visit conducted at the conclusion of the Provisional Approval. Any expenses incurred during the focused site visit are the responsibility of the institution seeking full approval.

~~**A.** The institution prepares a complete program proposal, responding to all preconditions, Common Standards and appropriate program standards. The proposal will be considered the application for accreditation as well as the application for credential preparation program approval.~~

~~**B.** Initial Accreditation is a two-stage process:~~

~~**1.** The proposal will be reviewed for compliance with the appropriate institutional preconditions and for alignment with the Common Standards, both of which can be found at http://www.ctc.ca.gov/educator-prep/program-standards.html.~~

~~**2.** If the proposal meets the CTC's eligibility requirements as judged by trained reviewers, the institution will be recommended for initial institutional approval to the CTC which will consider the recommendation and take action.~~

~~**3.**~~**1.**~~If the CTC acts favorably on the proposal, the proposal will be forwarded to the COA for program accreditation action according to adopted procedures~~.

~~**C.**~~ Once granted full approval, the institution will then come be required to meet the continuing accreditation procedures adopted by the COA.

II. Initial Approval of Programs

According to the *Accreditation Framework* (Section 2-A-2), the COA is responsible for granting initial approval to new programs of educator preparation. If the COA determines that a program meets all applicable standards, the COA grants initial approval to the program. New credential program proposals by eligible institutions must fulfill preconditions established by state law and theCommission. They must also fulfill the Common Standards and one of the program standards options listed in Section Three of the *Framework*: OptionOne, California Program Standards; Option Two, National or Professional Program Standards; or Option Three, Experimental Program Standards.

Section 4-C of the *Framework* contains the Policies for Initial Program Approval. Prior to being presented to the COA for action, new programs proposed by eligible institutions must go through Initial Program Review (IPR). During IPR, new program proposals are reviewed by panels of external experts, and as appropriate by Commission staff with expertise in the credential area. During IPR, new programs are reviewed in relation to the Preconditions, Common Standards or Common Standards Addendum and the selected program standards. The COA considers recommendations by the external review panels and Commission staff when deciding on the ~~accreditation~~ approval of each proposed program.

An institution that selects National or Professional Program Standards (Option Two) should consult the chapter on National or Professional Standards for appropriate procedures. The acceptability of the standards must be approved before the institution prepares a program proposal. An institution may choose to submit a program that meets the Experimental Program Standards (Option Three). See Section Three of the Framework for additional information.
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Program Submission and Implementation: Basic Steps in the Accreditation of New Programs

There are four steps that an approved institution must follow when submitting a program proposal.

1. **Intent to Submit Form**
   An Intent to Submit an Educator Preparation Program form must be submitted 60 days prior to the date when the institution expects to submit its proposal for initial institutional program approval.
2. **Review the IPR Submission and Formatting Guidelines *prior*** to document preparation.
3. **Document Preparation and Submission**
   The documents that must be submitted include:
   a. Transmittal Cover Sheet
   b. IPR Institutional Verification Form
   c. Preconditions
   d. Common Standards or Common Standards Addendum - All currently approved program sponsors submitting new program proposals need to submit either a Common Standards document responding to the 2015 Common Standards or a Common Standards Addendum. A Common Standards Addendum is a shorted response to the Common Standards and is available to only those institutions that have already responded to the 2015 Common Standards either through a recent accreditation visit or previous proposal for a new program. If you have any questions about which document is needed, please contact the Commission at IPR@ctc.ca.gov.

~~a.~~e. Program Standards – New programs must provide a full narrative response to the relative program standards. The program documentation must describe how the institution will meet the appropriate program standards and include links to necessary evidence (such as course syllabi, handbooks, evaluation forms) to support the narrative description. All Educator Preparation Program standards can be found on the Commission's standards web page http://www.ctc.ca.gov/educator-prep/program-standards.html.

4. **Submit payment of Cost Recovery fees.**

For information regarding this, please refer to the Commission website at http://www.ctc.ca.gov/educator-prep/fees.html

There are several steps that must be followed by the Commission, its staff, and the COA during the process of reviewing proposals from institutions and agencies wishing to sponsor educator preparation programs.

~~**1. Preliminary Staff Review**~~

~~Before submitting program proposals for formal review and initial accreditation, institutions are encouraged to request preliminary reviews of *draft* proposals by the CTC's professional staff. The purpose of these reviews is to assist institutions in developing programs that are consistent with the intent and scope of the standards, and that will be logical and clear to the external reviewers. Program proposals may be submitted for preliminary staff review at any time. Institutions are encouraged to discuss the potential timeframe for such a review with CTC staff. Preliminary review is voluntary.~~

1~~2~~. Review of Preconditions

Preconditions are requirements necessary to operate an educator preparation program leading to an credential in California. They are grounded Education Code and regulations and do not involve issues of program quality. An institution's response to the preconditions is reviewed by the Commission's professional staff. If staff determines that the program complies with the requirements of state laws and administrative regulations, the program is eligible for a further review of the standards by staff or a review panel. If the program does not comply with the preconditions, the proposal is returned to the institution with specific information about the lack of compliance. Such a program may be resubmitted once the compliance issues have been resolved.

2~~3~~. Initial Program Review (IPR)

Unlike the preconditions, the Common Standards and program standards address issues of program quality and effectiveness. The institution's response to the Common Standards (full narrative or Common Standards Addendum as appropriate) and program standards are reviewed by panel of experts in the field of preparation or by Commission staff. During the Initial Program Review process, there is opportunity for institutional representatives to confer with staff consultants to answer questions or clarify issues that may arise.

Because the review process depends entirely on the participation of experts from the field, the review process can be quite lengthy, especially for lower incidence programs. The Commission asks that each institution identify a minimum of one faculty member for each program it intends to offer that will be available to be trained and participate in Initial Program Review. This ensures that the review process occurs as quickly as possible. It is highly recommended that institutions volunteer to review documents *prior* to submission of their own proposal in order to gain the most in-depth understanding of the entire IPR process.

3. COA Action If staff or the review panel determines that a proposed program fulfills the standards, the program is recommended for initial approval by the COA at one of its regular meetings. Action by the COA is communicated to the institution in writing.

If staff or the review panel determines that the program does not meet the standards, the proposal is returned to the institution with an explanation of the findings. Specific reasons for the decision are communicated to the institution. Representatives of the institution can obtain information and assistance from Commission staff. After changes have been made in the program, the proposal may be submitted for re-consideration.

Appeal of an Adverse Decision

There are two levels of appeal of an adverse decision. The first is an appeal of a decision by Commission staff, or its review panel, that the preconditions or relevant program standards were not satisfied and that the proposal should not be forwarded to the COA for action. This appeal is directed to the COA.

The second is an appeal of an adverse decision by the COA. This appeal is directed to the Executive Director of the Commission.

If the staff or review panel does not recommend that a program be submitted for approval by the COA,, the institution may submit a formal request to the Administrator of Accrediation to place that program on the agenda of the COA for consideration at least 30

days prior to its next regularly scheduled meeting. In so doing, the institution must provide the following information:

- The original program proposal and the rationale for the adverse decision provided by the Commission's staff or review panel.

- Copies of any responses by the institution to requests for additional information from Commission's staff or review panel, including a copy of any resubmitted proposal (if it was resubmitted).

- A rationale for the institution's request.

The COA will review the information and do one of the following:

- Grant initial approval to the program.

- Request a new review of the institution's program proposal by a different Commission staff member or a different review panel.

- Deny initial approval to the program.

Appeals to the Executive Director will only be considered on the grounds that the decision of the COA was arbitrary, capricious, unfair, or contrary to the policies of the *Accreditation Framework* or the procedural guidelines of the COA and must be submitted within twenty business days of the COA's decision to deny initial approval with appropriate evidence of such. (Information related to the quality of the program that was not previously presented to the CTC's staff or the review panel may not be considered by the CTC.) The Executive Director will determine whether the evidence submitted by the institution responds to the criteria for appeal. If it does, the Executive Director will forward the appeal to the Commission. If it does not, the institution will be notified of the decision and provided with information describing how the information does not respond to the criteria. The institution will be given ten business days to re-submit the appeal to the Executive Director.

The appeal, if forwarded to the Commission by the Executive Director, will be heard before the Educator Preparation Committee during a regularly scheduled Commission meeting.. The Educator Preparation Committee will consider the written evidence provided by the institution and a written response from the COA. In resolving the appeal, the Commision will take

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.one of the following actions:

- Sustain the decision of the COA to deny initial approval to the program.
- Overturn the decision of the COA and grant initial approval to the program.

The Executive Director communicates the Commission's decision to the COA and the institution.

III. Program Status for Approved Programs

Once a program has been accredited by the COA, it will be considered an approved program. As conditions change, however, it is sometimes necessary for programs to be granted either the inactive status or to be withdrawn by the institution. Institutions are responsible to initiate either a change from approved-active to approved-inactive or withdrawn.

The chart below illustrates the operational differences in the three possible status options followed by more specific information on each.

Institution/Program Sponsor	**Program Approval Status**		
	Withdrawn	**Inactive**	**Active**
May Accept New Candidates	No	No	Yes
May Recommend Candidates for a Credential	Only those already in the program	Only those already in the program	Yes
Participates in Data Reporting Requirements	No	Modified	Yes
Participates in Program Review	No	Modified	Yes
Participates in Site Visit	No	Modified	Yes
How to Request Reinstatement	New Program Document Submitted and reviewed by panel members	Letter to the COA Requesting Re-activation*	NA

*See a description of the re-activation process below. If the Commission adopted revised program standards or if new regulations were enacted while the program is in inactive status, a new program document will be required to re-activate a program.

Approved Programs

Approved Program Sponsors Authorized to Offer California Credentials

Approved programs participate in all activities in the accreditation cycle in accordance with their assigned cohort. The accreditation cycle takes seven years to complete and all

activities are essential for on-going accreditation of all approved programs. The cycle of activities is consistent with the premise that credential preparation programs engage in annual data collection and analyses to guide program improvement.

An approved educator preparation program will be identified as such on the Commission's web page and may be identified as approved on the sponsor's web page, if applicable.

- All approved programs will participate in the Commission's accreditation system, in the assigned cohort.
- ~~In the first, third, and fifth years of the accreditation cycle the programs will submit Biennial Reports.~~Annual data collection, analysis, and submission is required.
- In the first and fourth year of the accreditation cycle, programs will submit ~~Program Assessment documents~~ responses to Preconditions.
- In the fifth year of the accreditation cycle, programs will submit their Program Review Documents and responses to Common Standards
- In the sixth year of the accreditation cycle, programs will participate in the Site Visit activities.
- In the seventh year of the accreditation cycle, programs will participate in the 7th Year Follow-up activities as determined by the COA.

Newly Approved Program Sponsors Authorized to Offer California Credentials
Once an institution and its programs have gained initial approval, the institution will be assigned to an accreditation cohort. Depending upon the results of the focused site visit during provisional approval, the Administrator of Accreditation will determine where in the cycle is the most appropriate placement.

Inactive Program
An institution or program sponsor may decide to declare a program that has been previously approved by the Commission as 'inactive.'.The following procedures must be followed:

- The program must have 15 or fewer candidates when it requests inactive status
- The institution or program sponsor notifies the Administrator of Accreditation of its intention to declare the program inactive. The program can be deemed inactive when it no longer accepts new candidates into the program and then is recognized only to exist to complete the program for current candidates.
- The notification to the Administrator must include the anticipated date that the inactive status will begin (i.e. the date from which candidates will no longer be admitted to the program). This date must be no more than six months from the date of notification.

- Candidates already admitted to the program are notified in writing by the institution or program sponsor that the program is being declared inactive.
- The institution assists enrolled candidates in planning for the completion of their program. A plan regarding how current candidates will complete the program must accompany the inactive request.
- The institution or program sponsor determines a date by which all enrolled candidates will be able to finish the program, not to exceed a maximum of one year after the anticipated completion date.
- Following the date after which all current candidates will able to complete the program, as determined by the institution, the program may no longer operate and the institution may no longer recommend candidates for the credential until such a time as the program is re-activated. The program will not be listed on the CTC's public web page for approved programs. The program will appear as inactive in the Credential Information Guide (CIG) web page (http://134.186.81.79/fmi/xsl/CIG_apm/PPPM_all.xsl).
- An inactive program will be included in accreditation activities in a modified manner as determined by the ~~COA~~ Administrator of Accreditation.
- An inactive program may be re-activated only when the institution submits a request to the COA and the COA has taken action to reactive the program. If the program standards under which the program was approved have been modified, the institution or program sponsor must address the updated standards before the program may be re-activated.
- An inactive program may stay on inactive status for no longer than 5 years; after which, the program sponsor should determine whether the program should be withdrawn permanently or reactivated. If no action is taken, the Commission will withdraw the program.

Re-activating an Approved Inactive Educator Preparation Program

An Inactive program cannot be re-activated until the Committee on Accreditation (COA) takes action at a regularly scheduled meeting. The program seeking re-activiation must adhere to the following procedures:

- Submit a letter requesting re-activation to the COA indicating the requested date of re-activation, why re-activation is ~~begin~~ being requested and if changes have been made to the program
- Submit all necessary supporting documentation. The type of documentation will vary depending on a number of factors including, but not limited to, the length of time the program has been inactive, personnel changes and curricular changes. The institution will need to contact the Administrator of Accreditation to determine what documentation will be necessary.

Once all requested documentation has been reviewed and approved by Commission staff, the request for re-activation is placed on the COA for final approval agenda at the next regularly scheduled meeting. If approved, the re-activated educator preparation program may, according to their approved activation date:

- Accept candidates to the credential program
- Begin operating the credential program
- Recommend completers for the appropriate credential

Withdrawal of Credential Programs

An institution may decide to withdraw a program that has been previously approved by the Commission. The withdrawal of a program formalizes that it is no longer part of the institution's accredited program offerings and, from the Commission's perspective, no longer part of the accreditation system. Once a program is withdrawn, it must wait two years after the last candidate has completed the program before it can apply to become reaccredited. In order to withdraw a program, the following procedures must be followed:

- The institution notifies the Administrator of Accreditation of its intention to withdraw the program when the current candidates complete the program.
- Candidates already admitted to the program are notified in writing by the institution that the program is being withdrawn. The institution determines a date by which all enrolled candidates will be able to finish the program. The institution assists enrolled candidates in planning for the completion of their program. The institution files the list of candidates and date of their program completion with the Commission.

- Following the date determined by the institution after which ~~candidates will no longer be enrolled (as determined by the institution)~~ all enrolled candidates have completed the program, the program may no longer operate and the institution may no longer recommend candidates for the credential.

- A program being withdrawn will not be included in any continuing accreditation visits while candidates are finishing the program, provided that the Administrator of Accreditation was notified of the institutional intent to withdraw the program at least one year before the continuing accreditation Site Visit.

- A withdrawn program may be re-accredited only when the institution submits a new proposal for initial program approval (IPR) and is approved by the COA ~~From the date in which candidates were no longer admitted to the program,~~ Withdrawn ~~the~~ institutions must wait at least two years after the last candidate has completed the program before requesting re-accreditation of the program.

Discontinuation of Credential Programs

When an institution is required by the COA to discontinue a credential program, the following procedures must be followed:

- Within 60 days of action by the COA, the institution must file, with the Administrator of Accreditation, the institution's plan for program discontinuation.

- Candidates are no longer admitted to the program once the institution is required to discontinue the program.

- Candidates already admitted to the program are notified in writing by the institution that the program is being discontinued. The institution determines a date by which all enrolled candidates will be able to finish the program. The institution helps candidates plan for completion of their program by helping them complete their program at the institution where they are currently enrolled or at another institution. The institution files the list of candidates and dates of program completion with the CTC.

- Following the date after which all enrolled candidates have completed the program,~~the institution will no longer enroll candidates (as determined by the institution~~), the program may no longer operate, and the institution may not recommend candidates for the credential.

A discontinued program may be re-accredited only when the institution submits a new proposal for initial program review (IPR) The institution must wait at least two years after all candidates have completed the program ~~the date of discontinuation~~ before requesting re-accreditation.

Institutional Closure

When an institution withdraws its last program, it loses approval as an accredited institution. It must wait two years from the date of all candidates having completed the program ~~submitting the withdrawal~~ before applying for approval once again and complete the Initial Institutional Approval process.

Chapter Four
The Accreditation Cycle

Introduction

This chapter provides an overview of the accreditation cycle which is comprised of ~~three~~ several major activities. These activities and their purpose are briefly described below. In the following chapters each activity is reviewed in more detail. The underlying expectation of the accreditation process is that all accredited credential programs are implementing programs that are aligned to the Commission's adopted standards and are engaged in continuous, on-going collection of data about candidate competence and program effectiveness, are analyzing the data, and are using the results to make programmatic improvements. Taken as a whole, the elements of the accreditation cycle prepare the institution and the accreditation review team to identify an institution's strengths and any areas needing improvement.

I. Purpose

The overarching goal of the accreditation system is to ensure that educator preparation programs are aligned with the Preconditions, Common Standards and all relevant Program Standards which require, among other things, that institutions develop comprehensive data collection systems to support continuous program improvement and to demonstrate candidates' knowledge and skills for educating and supporting all students in meeting the state-adopted academic standards. The graphic in Figure 1 emphasizes the continuous nature of the accreditation system.

Four primary purposes are achieved through the accreditation system. First, the process creates a mechanism by which educator preparation programs, their institutions, and the COA are held accountable to the public and to the education profession. Through participation in the accreditation process, educator preparation programs document their adherence to educator preparation standards and their use of data for on-going analyses of program effectiveness. Second, the cycle supports institutions' adherence to appropriate program standards, generally the CTC-adopted teacher preparation standards. Third, by requiring institutions to use data to identify areas needing improvement, the accreditation process helps ensure high quality educator preparation programs. Fourth, the accreditation cycle encourages institutions to create and utilize systematic and comprehensive evaluation processes to ensure their candidates are well qualified for teaching or specialist services credentials and that their programs are providing the rigorous content and pedagogical preparation new teachers and other educators need to be successful.

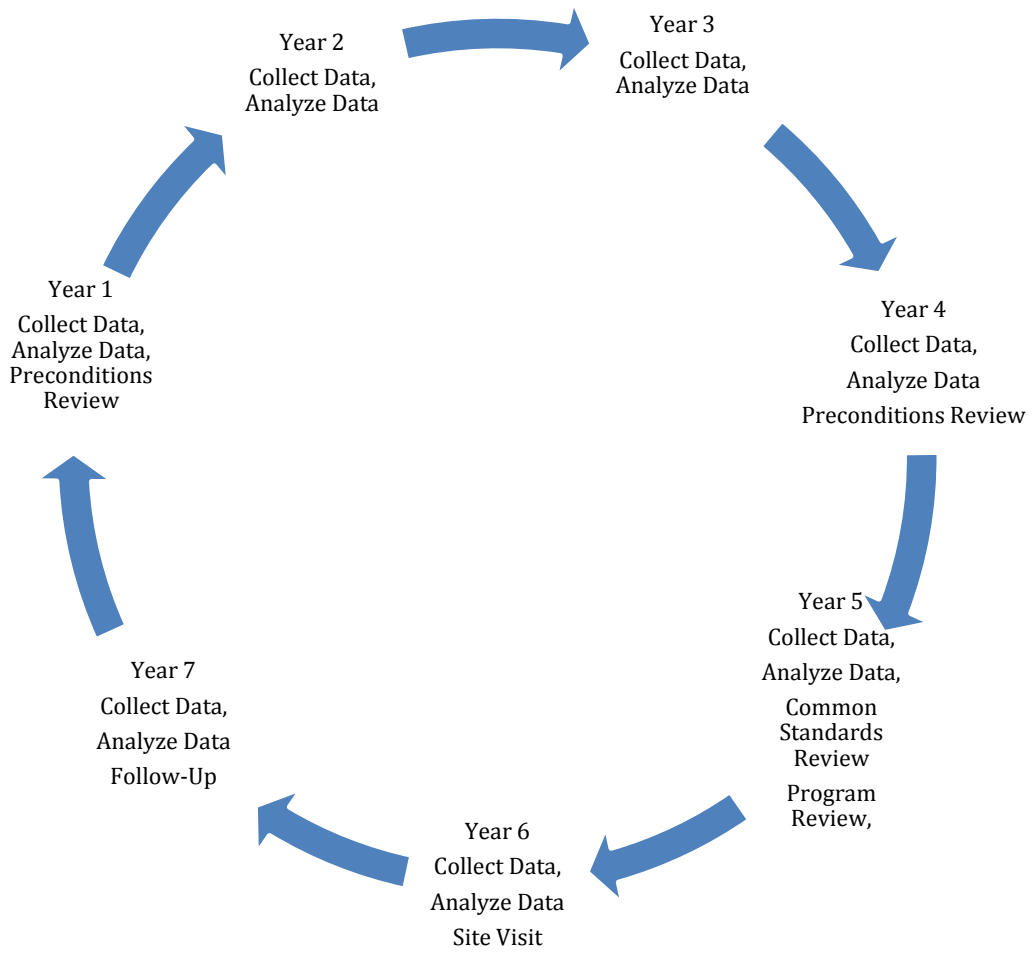
II. Overview

The accreditation process is a seven-year cycle of activities. Figure 1, below, illustrates the accreditation cycle of activities. These activities ~~are the biennial reports, program assessment and the site visit~~ include annual data analysis, preconditions review, common standards review, program review, ~~and~~ the site visit , and seventh-year follow up activities. Each educator preparation institution has been assigned to a cohort. Each cohort is on a

specific seven-year cycle. ~~Table 1, at the end of this chapter, is a generic cohort chart for a cohort that is in Year 1 and is completing Year 1 activities~~. A list of Cohort assignments as well as summaries of accreditation activities (cohort maps) for each cohort can be found at <Link> Institutions are, therefore, at different points in the accreditation cycle, depending on their assigned cohort. The cohort model distributes the workload of the Commission, its staff, and the Board of Institutional Review (BIR) members, which is composed of trained education professionals who review program documents and conduct the accreditation site visits. A brief overview of each activity will be provided here. For a full description and guidance on preparing for each activity, please see the appropriate chapters.

Figure 1 Accreditation cycle of activities

CHART OF ACCREDITATION CYCLE



Biennial Reports**Annual Data Analysis***

Biennial reports are submitted to the CTC every two to three years. The purposes of annual data analysisthe reports are is to ensure that institutions are collecting and analyzing candidate and program data on a regular basis and that program improvement activities are being identified based on the results of the analysies. Institutions prepare the biennial reports by collecting and analyzing two to three years of candidate and program data. Submissions occur following years one, three, and five. Each institution identifies one of three due dates on which its submission will be due: August 15, September 15, or October 15.

Data and analysis collected by an institution will be reported annually, and uploaded to the Commission data warehouse. Each program analyzes their data and identifies program strengths and concerns in regard to candidate competence and program effectiveness briefly describes its programs, the number of candidates in each program, the types of programs it runs, and to determine if any programmatic changes are needed. that have occurred since the last accreditation activity. Each program separately reports candidate and program effectiveness data by presenting the data, analyzing the data, and identifying program strengths and concerns. Subsequent biennial reports analysis will give the institution an opportunity to report on changes that were implemented as a result of the prior biennial report.analysis.

Preconditions Review

During Year One and Year Four of the accreditation cycle institutions must respond to all relevant preconditions which are grounded in statute regulations and/or Commission policy, for each approved program.

Common Standards and Program Assessment Review

During Year Five of the accreditation cycle institutions must respond to the Common Standards and complete the Program Review. Program ReviewAssessment is the activity during which key program documents are reviewed to determine whether the educator preparation program appears to be aligned to program standards. This activity begins in the fourth year of the accreditation cycle and may require 12-15 months to complete depending on the reviewers' need for more information from the institution.

During an institution's Program ReviewAssessment year, each of its educator preparation programs submit documents demonstrating how the program meets the relevant program standards. If the program is transitioning to newly adopted standards, it may submit a transition plan (see Chapter Six for more information). The Pprogram Review includes: document has three parts.

- Part One is a narrative describing how the program is meeting each program standard.
- Part Two includes course of study and key assignments/assessments that provide the documentation to support the narrative in Part One.
- Part Three describes the procedures used to measure candidate competence* and program effectiveness as measured against appropriate standards, including

~~documentation that those measures are administered in a consistent and equitable manner. Information from Part Three supports the program's Biennial Reports.~~
~~**For Tier II educator preparation programs candidate competence refers to a candidate's growth in competence while enrolled in the Tier II program.*~~

a. **Submission of Program Documents**. An Institution/program sponsor submits required documentation including, but not limited to, the key categories: Program Description, Organizational Structure, Qualifications of Faculty and Instructional Personnel, Course Sequence, Course Matrix, Fieldwork and Clinical Practice. Additional documentation may be required specific to each credential area.

b. **Review of Program Document and Preliminary Report of Findings**. Trained members of the Board of Institutional Reviewers serve as readers and consider all information and determine "preliminary findings" for all program standards. Documents will be reviewed once with feedback in the form of the Preliminary Report of Findings provided to the institution. An institution may prepare an addendum based upon the preliminary findings and make the addendum available to the site visit team prior the accreditation site visit.

c. **Use of Results**. The Preliminary Report of Findings provides a basis for an accreditation site visit team's review of the program's implementation in year s~~S~~ix. Findings will be used to determine the type, size and complexity of the programs to be reviewed and the structure, size and expertise of the site visit review team to be selected.

~~Each program at an institution may determine when to submit its document during the Program Assessment window (*see Commission's website for due dates*).~~

~~Pairs of trained BIR members review program documents to .determine whether each program is preliminarily aligned with program standards or whether more information is needed to make that determination. Following each round of reviews, the feedback form, the Preliminary Report of Findings, is sent to the program. The Preliminary Report describes which standards are preliminarily aligned with standards and identifies what additional information is needed to make a preliminary determination of other program standards. Institutions are encouraged to provide additional information, if requested, so that the Program Assessment process can be completed in advance of the Site Visit. Results of the process are used to determine the configuration of the site visit team. For example, if reviewers have determined that additional information is still needed before a program can be found to be preliminarily aligned, an additional person might be assigned to that institution's site visit team who can focus on the program that didn't complete Program Assessment.~~

Site Visit

The Site Visit takes place in year six of the accreditation cycle. The site visit allows a BIR team to consolidate and verify information from the institution's annual data analysis,~~Biennial Reports~~ Preconditions, Common Standards, and the Program Review~~Assessment~~ processes for the purpose of making findings about the extent to which an institution and its programs meet the Preconditions, Common Standards and Program

Standards and to generate an accreditation recommendation. The team performs interviews with samples of stakeholders from each of an institution's programs and completes limited document reviews to confirm or refute information from the other sources. The team also examines evidence about the institution's policies and practices as they impact educator preparation programs. Based upon the findings of ~~all three~~ these activities, an accreditation recommendation is made to the COA.

Institutions are assigned a state consultant approximately one year in advance of the site visit in order to help them prepare for the visit. The Administrator of Accreditation works with each institution to establish the visit dates, site team size and configuration. During this time, the institution prepares electronic copies of all its documentation which can be accessed by the entire site visit team. ~~both its Preconditions Report (which describes the institution's context and describes how it satisfies program preconditions) and its Site Visit Documentation, which describes how it satisfies the Common Standards. These documents are sent in advance of the Site Visit to all team members.~~

Follow Up

In year seven of the accreditation cycle, institutions provide follow up information from the site visit findings to the COA per the COA's accreditation decision.

III. Cohort Activities

All approved educator preparation sponsors are assigned to one of seven cohorts. Each institution can determine its cohort assignment by consulting the CTC's webpage. The information will be found at <link>. ~~Table 1, below, illustrates the accreditation tasks associated with each year in the cycle. To identify the cohort assignment of an institution, use the link below the table which takes one to the main accreditation webpage. At the bottom of the page is a link to an alphabetized list of institutional assignments to cohorts. Above that link are links to each cohort.~~

~~Table 1. Sample of one cohort's cycle of accreditation activities. Each cohort started its cycle in a different year to spread out the work of CTC staff.~~

~~**Academic Year (AY)**~~	~~**2007-08**~~	~~**2008-09**~~	~~**2009-10**~~	~~**2010-11**~~	~~**2011-12**~~	~~**2012-13**~~	~~**2013-14**~~
~~**Cycle Year**~~	~~1~~	~~2~~	~~3~~	~~4~~	~~5~~	~~6~~	~~7~~
~~**Institutional Activity**~~	~~Institutional Data Collection~~ ~~**Biennial Report**~~	~~Institutional Data Collection~~	~~Institutional Data Collection~~ ~~**Biennial Report**~~	~~Institutional Data Collection~~ ~~**Program Assessment**~~	~~Institutional Data Collection~~ ~~**Biennial Report**~~	~~Institutional Data Collection~~ ~~**Site Visit**~~	~~Institutional Data Collection~~ ~~Site Visit follow-up~~
~~**Due to CTC**~~	~~Biennial Report (Data for Academic Years 6, 7, and 1)~~	~~Nothing~~	~~Biennial Report (Data for Academic Years 2 and 3)~~	~~Program Assessment~~	~~Biennial Report (Data for Academic Year 4 and 5)~~	~~Preconditions Report~~ ~~Common Standards Self-Study~~	~~7th Year Follow Up Report, if applicable~~
~~**Due dates**~~	~~15th of Aug., Oct. or Dec. of Academic Year 2~~	~~None~~	~~15th of Aug., Sept., or Oct., of Academic Year 4~~	~~Oct., Nov., or Dec. of Academic Year 4~~	~~15th of Aug. or Oct. of Academic Year 6[1]~~	~~6-12 months before visit~~ ~~2 months before visit~~	~~Up to 1 Year after Site Visit, if applicable~~
~~**COA/CTC Feedback What & when**~~	~~-CTC Staff feedback due -~~ ~~Aug: 8-10 weeks~~ ~~Oct: 10-12 weeks~~ ~~Dec: 12-16 weeks~~	~~None~~	~~-CTC Staff feedback due -~~ ~~Aug: 8-10 weeks~~ ~~Sept: 10-12 weeks~~ ~~Oct: 12-16 weeks~~	~~Preliminary findings on each program and all standards by Jan. of Year 5~~	~~-CTC Staff feedback due -~~ ~~Aug: 6-8 weeks~~ ~~Oct: 6-8 weeks~~	~~Accreditation decision made by COA~~	~~COA Review of 7th Year Report and a Revised Accreditation decision, if applicable~~

~~*Italics = COA/NCATE Joint Visit (F= Fall Semester; S= Spring Semester)*~~

~~Each institution can determine its cohort assignment by consulting the CTC's webpage. The information will be found at http://www.ctc.ca.gov/educator-prep/program-accred.html.~~

~~[1] CTC staff strongly encourage institutions to submit the Third Year Biennial Report on the August or September due dates to maximize the timeframe between Biennial Report and Program Assessment submissions.~~

Chapter Eight
Accreditation Decisions: Options and Implications

Introduction

This chapter presents the accreditation decision options that are available for accreditation teams to recommend to the COA and for the COA to render. In addition, this chapter explains the implications of each of the possible accreditation decisions. This chapter is intended for use by institutions, team members, team leads, and the COA.

I. Accreditation Decision Options

At the conclusion of the site visit, the accreditation review team makes a recommendation about the accreditation status of the institution. This recommendation is included in the team report and must be supported by the team's findings on standards. The COA, after reviewing the team report and hearing from the team lead, consultant, and institutional representatives, adopts the team report and renders an accreditation decision. The possible options for accreditation decisions are as follows:

- Accreditation
- Accreditation with Stipulations
- Accreditation with Major Stipulations
- Accreditation with Probationary Stipulations
- Denial of Accreditation

~~Below are definitions for each of the accreditation decisions followed by the operational implications of each of the options.~~ When the COA reviews a team's accreditation report, they will consider two types of standards findings identified by the team. The first ~~will be~~are shown as Common Standards or program standards that are "not met" or that are "met with concerns."
The second type of findings ~~will be~~are ~~shown as~~ statements ("stipulations") that describe what an institution must do to meet a standard that is substantially "not met" and that, because of its significant impact on the quality of candidate preparation, prevents the institution from being recommended for accreditation. The stipulations are conditions that must be satisfied before the COA can consider granting an accreditation decision of *Accreditation.* Table 1 identifies the possible follow-up activities that may be required in the COA's accreditation decision.

Below are definitions for each of the accreditation decisions followed by the operational implications of each of the options.

Accreditation

The recommendation of *Accreditation* means that the accreditation team verified that the institution and its programs, when judged as a whole, met or exceeded the CTC's adopted Common Standards and program standards applicable to the institution. The institution (including its credential programs) is judged to be effective in preparing educators and is demonstrating overall quality in its programs and general operations. The status of *Accreditation* can be achieved even if one or two common standards were identified as "met with concerns" or one or more areas of concern were identified within its credential programs.

Operational Implications

An institution that receives the status of *Accreditation* **must**:

- Participate in the accreditation activities required of its assigned cohort, which are Annual Data Review/Analysis, Preconditions Review, Common Standards Review, Program Review, ~~Biennial Reports, Program Assessment,~~ and Site Visits (see Table 1).
- Respond to all concerns identified in the adopted accreditation team report or specified in the COA action. This follow-up may take place in the ~~Biennial Report~~ Annual Data Review or in a seventh year follow-up report, as determined by the COA.
- Abide by all CTC and state regulations.

An institution that receives the status of *Accreditation* **may:**

- Continue all accredited credential programs and propose new credential programs to the COA at any time.
- Indicate in all publications and documents that it is accredited by the CTC.

The COA will note the accreditation status in the Committee's annual report to the CTC. The report of the accreditation team and the action taken by the COA will be posted on the CTC's website.

Table 1: Requirements the COA may impose as follow-up activities

Institution Actions Following an Accreditation Site Visit	**Accreditation (✓ Indicates a possible follow-up activity)**				**No Accreditation**
	Accreditation	**with Stipulations**	**with Major Stipulations**	**with Probationary Stipulations**	**Denial of Accreditation**
No required follow-up beyond the routine accreditation activities, i.e. ~~Biennial Reports~~ Annual Data Analysis and Program Review~~Assessment~~.	✓				
Submit ***Seventh Year Follow-up Report*** addressing all identified area(s) of concern and/or questions.	~~✓~~				
Submit ***Seventh Year Follow-up Report*** addressing all stipulation(s), identified area(s) of concern and/or questions.		✓	✓	✓	
Provide addendum to ~~Biennial Report and~~ Program Review ~~Assessment~~ documents addressing all stipulation(s), identified area(s) of concern and/or questions.			✓	✓	

Institution Actions Following an Accreditation Site Visit	Accreditation (✓ Indicates a possible follow-up activity)				No Accreditation
	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations	Denial of Accreditation
Submit periodic Follow-up Reports (30 days, 90 days, as determined by the COA) to ensure that appropriate action is being taken in a timely manner.	✓	✓	✓	✓	
Re-visit by CTC staff and team lead.	✓				
Re-visit by CTC staff, team lead, and 1 or more team members.		✓	✓	✓	
Institution notifies all current and prospective candidates of the institution's accreditation status.			✓	✓	✓
Institution is prohibited from accepting new candidates in one or more programs until the stipulations have been removed.			✓	✓	
Institution is prohibited from proposing new programs until the stipulations have been removed.		✓	✓	✓	
If a stipulation is included that requires closure of a program, the institution must wait a minimum of two years to submit new educator preparation program proposal for Initial Program Review of the same credential type.		✓	✓	✓	

Accreditation: Accreditation with Stipulations

The recommendation of *Accreditation with Stipulations* means that the accreditation team, at the site visit, verified that the institution and some of its programs have "not met" or "met with concerns" some common standards and/or program standards, applicable to the institution, and that action is required to address these deficiencies. The institution is judged to be generally effective in preparing educators and in its general operations apart from the identified areas of concern. The concerns or problems identified are confined to specific issues that minimally impact the quality of the program received by candidates or completers.

Operational Implications

An institution that receives the status of *Accreditation with Stipulations* **must:**

- Participate in the accreditation activities required of its assigned cohort, which are Annual Data Review/Analysis, Preconditions Review, Common Standards Review,~~Biennial Reports,~~ Program Review ~~Assessment~~, and Site Visits.
- Respond to all concerns identified in the adopted accreditation team report and all stipulations specified in the COA action, and submit, within one year, a written seventh year report with appropriate documentation that demonstrates how all concerns and stipulations have been addressed.
- Abide by all CTC and state regulations.

An institution that receives the accreditation status of *Accreditation with Stipulations* **may**:

- Continue all accredited credential programs and propose new credential programs to the COA at any time.
- Indicate in all publications and documents that it is accredited by the CTC.

The COA will note the accreditation status in the Committee's annual report to the CTC. The report of the accreditation team and the action taken by the COA will be posted on the CTC's website.

Removal of Stipulations

The institution must respond to all concerns identified in the adopted accreditation team report and all stipulations placed on it by action of the COA. This is done by preparing a written seventh year report for submission to the assigned state consultant within one calendar year of the visit. The seventh year report must contain documentation demonstrating that all concerns and stipulations have been addressed. Typically, the state consultant, in consultation with the team lead assigned to the original visit, will review the report, ensure that all instances of deficiencies have been addressed in the institution's response, analyze progress made by the institution in meeting any standards that do not appear to be fully addressed in the report, and make a recommendation to the COA regarding the removal of the stipulations. In rare instances, the COA may require a revisit by the state consultant or the team lead.

The COA may act to remove the stipulations and change the status of the institution from *Accreditation with Stipulations* to *Accreditation*.

The COA will note the change in accreditation status in the Committee's annual report to the CTC. The report and the action taken by the COA will be posted on the CTC's website.

Accreditation with Closure of Individual Programs Stipulations may not be removed. Institutions must wait a minimum of two years before submitting a proposal for Initial Program Review of the same credential type.

Accreditation with Major Stipulations

The recommendation of *Accreditation with Major Stipulations* means that the accreditation team concluded that the institution and some of its programs have "not met" or "met with concerns"

multiple standards in the common standards, and/or program standards applicable to the institution, or that the team found areas of concern (such as matters of curriculum, field experience, or candidate competence) that impact, or are likely to impact, the preparation of credential program candidates. The team identified issues that impinge on the ability of the institution to deliver high quality, effective programs. The review team may have found that some of the institution's credential programs are of high quality and are effective in preparing educators or that the general operations of the institution are adequate, but the team concluded that these areas of quality do not outweigh the identified areas of concern.

Operational Implications

An institution receiving a recommendation of *Accreditation with Major Stipulations* **must**:

- Participate in the accreditation activities as required of its assigned cohort, which are Annual Data Review/Analysis, Preconditions Review, Common Standards Review, ~~Biennial Reports,~~ Program Review ~~Assessment~~, and Site Visits.
- Respond to all concerns identified in the adopted accreditation team report and all stipulations specified in the COA action, and submit, within one year, a written seventh year report with appropriate documentation that demonstrates how all concerns and stipulations have been addressed.
- Prepare for a focused revisit by the team lead and consultant and, as required, members of the accreditation team.
- Work with the state consultant to plan the revisit that will address the concerns contained in the adopted team report and the stipulations placed upon it by the COA action.
- *Depending on the particular stipulations placed on the institution, the COA will determine whether new programs may be proposed to the COA.*
- Abide by all CTC and state regulations.

An institution receiving a recommendation of *Accreditation with Major Stipulations* **may**:

- Continue all accredited credential programs.
- Indicate in all publications and documents that it is accredited by the CTC.
- Be required to notify students of its accreditation status. The COA will determine whether student notification is required, and if so, whether all students or only students in particular credential programs are to be notified.
- Submit periodic reports if required by the COA accreditation action.

Removal of Stipulations

The institution must respond to all concerns identified in the adopted accreditation team report and all stipulations placed on it by action of the COA. This is done by preparing a written seventh year report for submission to the state consultant within one calendar year of the visit. The seventh year report must contain documentation demonstrating that all concerns and stipulations have been addressed. Typically, the consultant, in consultation with the team lead assigned to the original visit, will review the report, determine whether all instances of deficiencies have been addressed

in the institution's response, and analyze progress made by the institution in meeting any standards that do not appear to be fully addressed in the report.

The institution must also work with its state consultant to plan the revisit that will provide an opportunity for the consultant and team lead to confirm that changes identified in the 7th year report are being implemented at the institution and that the institution has adequately addressed the concerns identified in the adopted accreditation report and the stipulations placed upon the institution by the action of the COA. The report of the revisit team will be submitted to, and acted upon by, the COA within one calendar year of the original visit.

The COA will review the revisit report and determine whether all stipulations and concerns have been addressed. If the COA determines that all stipulations and concerns have been corrected, the COA will act to remove the stipulations and change the status of the institution from *Accreditation with Major Stipulations* to *Accreditation*. If the COA grants the institution *Accreditation*, the institution will be permitted to continue all accredited credential programs and to propose new credential programs to the COA at any time. The revisit report of the team, the action of the COA to remove the stipulations, and the new accreditation decision will be posted on the CTC's website. The institution may then notify its constituency of its change of accreditation status as appropriate.

In the event the COA determines that the institution has not made significant progress on resolving the stipulations as evidenced in the 7th year report or verified by the state consultant and team lead at the revisit, the institution will be brought back to the COA for consideration of *Accreditation with Probationary Stipulations* or *Denial of Accreditation*.

On some occasions, significant progress may have been made, but additional time beyond one calendar year is needed for the institution to remedy all of the identified deficiencies. If this is the case, the COA may continue the current stipulations or adopt revised stipulations. When the COA adopts revised stipulations, it will do so as an *Accreditation with Stipulations* decision. In the same action, the COA will specify the amount of additional time the institution will have to address the remaining stipulations. In such cases, the COA may determine appropriate follow-up by the institution and a timeline for COA action to remove the remaining stipulations and concerns.

Accreditation with Closure of Individual Programs Stipulations may not be removed. Institutions must wait a minimum of two years before submitting a proposal for Initial Program Review of the same credential type.

Accreditation with Probationary Stipulations

The recommendation of *Accreditation with Probationary Stipulations* indicates that an accreditation team identified serious and pervasive deficiencies in the institution's implementation of the Common Standards and program standards applicable to the institution, or that the team found areas of concern (such as matters of curriculum, field experience, or candidate competence) that substantially impact the preparation of credential program candidates. The team identified issues that prevent the institution from delivering high quality, effective programs. The review team may have found that some of the institution's credential programs are effective in preparing

educators and/or that its general operations are adequate, but the team determined that these areas of quality clearly do not outweigh the identified areas of concern.

Operational Implications

An institution receiving a recommendation of *Accreditation with Probationary Stipulations* **must:**

- Participate in the accreditation activities as required of its assigned cohort, which are Annual Data Review/Analysis, Preconditions Review, Common Standards Review,~~Biennial Reports,~~ Program Review~~Assessment~~, and Site Visits.
- Respond to all concerns identified in the adopted accreditation team report and all stipulations specified in the COA action, and submit, within one year, a written seventh year report with appropriate documentation that demonstrates how all concerns and stipulations have been addressed.
- Prepare for a focused revisit by the team lead and consultant and, as required, members of the accreditation team.
- Abide by all CTC and state regulations.
- Notify all students in all credential programs in writing of its accreditation status.
- Submit an action plan describing the institution's plan to address the stipulations and concerns.
- Provide updates at specified intervals, as determined by the COA.

An institution receiving a recommendation of *Accreditation with Probationary Stipulations* is permitted to continue all accredited credential programs for a period of one calendar year, although the COA may place limitations on particular programs. The institution **may not**:

- Propose new programs of professional preparation or expand existing programs.

An institution receiving a recommendation of *Accreditation with Probationary Stipulations* **may**:

- Continue all accredited credential programs for a period of one calendar year, although the COA may place limitations on particular programs.
- Be required to demonstrate to the COA satisfactory progress in addressing particular areas of interest, whether identified as stipulations or concerns, prior to one calendar year. This will be determined by the COA in its accreditation action.

The COA will note the accreditation status of the institution in the Committee's annual report to the CTC and the accreditation team report, as well as the action taken by the COA, will be posted on the CTC's website.

Removal of Stipulations

The institution must respond to all concerns identified in the adopted accreditation team report and all stipulations placed on it by action of the COA. This is done by preparing a written seventh year report for submission to the state consultant within one calendar year of the visit. The seventh year report must contain documentation demonstrating that all concerns and stipulations have been addressed. Typically, the state consultant, in consultation with the team lead assigned to the original visit, will review the report, determine whether all instances of deficiencies appear to have

been addressed in the institution's response, and analyze progress made by the institution in meeting any standards not fully addressed in the report.

The institution must also work with its state consultant to plan the revisit that will provide an opportunity for the state consultant and team lead to confirm that changes identified in the 7th year report are being implemented at the institution and that the institution has adequately addressed the concerns identified in the adopted accreditation report and the stipulations placed upon the institution by the action of the COA. The report of the revisit team will be submitted to, and acted upon by the COA within one calendar year of the original visit.

The COA will review the revisit report and determine whether all stipulations and concerns have been addressed. If the COA determines that all stipulations and concerns have been corrected, the COA will act to remove the stipulations and change the status of the institution from *Accreditation with Probationary Stipulations* to *Accreditation*. If the COA grants the institution *Accreditation,* the institution will be permitted to continue all accredited credential programs and to propose new credential programs to the COA at any time. The revisit report of the team, the action of the COA to remove the stipulations, and the new accreditation decision will be posted on the CTC's website. The institution may then notify its constituency of its change of accreditation status as appropriate.

In the event that the revisit team determines that the institution has not made significant progress in addressing the stipulations according to the timeline set by the COA, a recommendation of *Denial of Accreditation* will be made to the COA.

On some occasions, significant progress may have been made, but additional time beyond one calendar year is needed for the institution to remedy all of the identified deficiencies. If this is the case, the COA may continue the current stipulations or adopt revised stipulations. When the COA adopts revised stipulations, it will do so as an *Accreditation with Stipulations* decision. In the same action, the COA will specify the amount of additional time the institution will have to address the remaining stipulations. In such cases, the COA may determine appropriate follow up by the institution and a timeline for COA action to remove the remaining stipulations and concerns.

Accreditation with Closure of Individual Programs Stipulations may not be removed. Institutions must wait a minimum of two years before submitting a proposal for Initial Program Review of the same credential type.

Closure of an Individual Program

In some instances the review team found that a specific credential program does not meet more than one-half of the standards and determined that the program be closed.

An institution receiving a recommendation of *Accreditation with Stipulations, Accreditation with Major Stipulations or Accreditation with Probationary Stipulations* that includes a stipulation that the institution close a credential program **must**:

- Take immediate steps to close the identified program at the end of the semester or quarter in which the COA decision occurs.

- Announce that it has had its accreditation for the identified educator preparation program denied. All students enrolled in the program must be notified within 10 days of COA action that the COA has acted to require closure of the program and that the program will terminate at the end of the semester, quarter, or within 3 months of when the COA decision occurs, as determined by the COA. The Commission must receive a copy of this correspondence.
- File a plan of discontinuation of the identified program within 30 days of the COA's decision. The plan must give information and assurances regarding the institution's efforts to place currently enrolled students in other credential programs to provide adequate assistance to permit students to complete their particular credential program.
- Upon the effective date of the closure of the credential program, as determined by the COA, the institution will remove from all institutional materials and website any statements that indicate that the program is accredited by the Commission.
- The action of the COA and the closure of the program will be posted on the Commission's website.
- Once the program has closed, an update must be provided to the COA at its next regularly scheduled meeting.
- The institution would not be eligible to re-apply for accreditation of the closed credential program for a minimum of two years after which the institution must submit a new program proposal and adhere to the review process for a new educator preparation program including all applicable fees.
- In situations where the COA has acted to close a program and the timeframe for doing so is subsequent to the end of the fiscal year, the institution will not be charged an annual accreditation fee for the program into the new fiscal year.

An institution receiving a recommendation of *Accreditation with Stipulations, Accreditation with Major Stipulations or Accreditation with Probationary Stipulations* that includes a stipulation that the institution close a credential program **may**:

- Continue all accredited credential programs with the exception of the specific credential program that must be closed.

Denial of Accreditation

Part 1: General Definitions, Parameters, and Operational Implications for Denial of Accreditation

The COA can deny accreditation upon either an initial visit or a revisit to an institution. Although a recommendation of Denial of Accreditation typically comes after a finding of probationary status at an initial visit and after the institution has been provided with an opportunity to institute improvements a review team can recommend Denial of Accreditation at **any time** if the situation warrants the finding in accordance with this section of the Handbook.

a) Initial Visits

A COA decision of Denial of Accreditation upon an initial visit means that extremely serious and pervasive issues exist at an institution. In these instances, the COA has determined that it is highly unlikely that the issues and concerns identified by a review team and COA can be successfully

addressed and rectified in a timely manner. The particular facts, the leadership and/or the infrastructure indicate that a significant amount of time and work must be devoted should the institution choose to address the identified issues during which time it is not prudent to have candidates enrolled in the credential program.

Parameters to be Used in Considering a Team Recommendation of Denial of Accreditation at an initial site visit

If on an initial site visit, the review team's findings are more serious than what is defined in the Accreditation with Probationary Stipulation section above, the review team may consider Denial of Accreditation at an initial site visit. These findings might include:

- Significant misrepresentations that were apparently intentionally made to the site visit team and/or in the documents presented to the site visit team
- The institution qualifies for the ruling of Probationary Stipulations in the table General Guidance for Initial Site Visit Team Recommendations (based upon the number of standards unmet), but the team feels that candidates and/or students in the K-12 classroom are possibly being harmed or a disservice is being done to them due to the degree to which those standards are not being met. The degree of harm makes the determination "denial" instead of "probationary".
- The institution has blatantly and systematically disregarded the policies and processes of the Commission on Teacher Credentialing regarding credential program approval, credential program implementation, and candidate completion, establishing a pattern of disregard.
- The institution is routinely credentialing candidates who were clearly not meeting all credential requirements
- An overwhelming number of the standards were found to be not met, suggesting that candidates are not able to acquire the knowledge, skills, and abilities required in the standards.

b) Revisits

If an accreditation team, upon conducting a revisit to an institution that received major or probationary stipulations, finds that the stipulations have not been adequately addressed or remediated, or determines that significant and sufficient progress has not been made towards addressing the stipulations. If an accreditation team finds that: (a) sufficient progress has been made, and/or (b) special circumstances described by the institution justify a delay, the COA may, if requested by the institution, permit an additional period of time for the institution to remedy its severe deficiencies. If the COA votes to deny accreditation, all credential programs must close at the end of the semester or quarter in which the decision has taken place. In addition, the institution's institutional approval ceases to be valid at that time and the institution will no longer be a CTC approved credential program sponsor.

<u>Operational Implications (for either Initial Visits or Revisits)</u>

An institution receiving *Denial of Accreditation* **must**:

- Take immediate steps to close <u>all</u> credential programs at the end of the semester or quarter in which the COA decision occurs.

- Announce that it has had its accreditation for educator preparation denied. All students enrolled in all credential programs must be notified within 10 days of Commission action that accreditation has been denied and that all credential programs will end at the end of the semester, quarter, or within 3 months of when the COA decision occurs. The Commission must receive a copy of this correspondence.
- File a plan of discontinuation within 90 days of the COA's decision. The plan must give information and assurances regarding the institution's efforts to place currently enrolled students in other credential programs to provide adequate assistance to permit students to complete their particular credential programs.
- Upon the effective date of the closure of credential programs, as determined by the COA, remove from all institutional materials and website any statements that indicate that its credential programs are accredited by the CTC.

The revisit report of the team, the action of the COA, and the new accreditation decision will be posted on the CTC's website.

Furthermore, an institution receiving a *Denial of Accreditation* would be prohibited from re-applying for institutional approval for a minimum of two years.

Part II: Procedures to Be Used by COA Regarding Denial of Accreditation

Revisits

Denial of Accreditation after a **revisit** by a site visit team requires a simple majority vote by the COA.

Initial Visits

A Denial of Accreditation after an **initial site** visit requires a 2/3 majority vote of COA members present at the meeting. In determining a decision of Denial of Accreditation after an **initial** site visit, the COA will employ the following protocol:

- The COA takes action at a regularly scheduled meeting (via a 2/3 vote) to deny accreditation.
- Subsequent to the COA vote to deny accreditation, the COA **may** send a focused site visit team (2 or more experienced staff or BIR members) to revisit the institution to verify the initial findings or outline additional information that may influence the COA's decision/vote and to work with the institution to identify possible next steps for the institution.
- If a focused site visit team has been convened, the COA revisits its decision at the next regularly scheduled COA meeting after receiving focused site visit team report.

Process of Re-applying for Initial Institutional Accreditation

If the institution were to desire to provide educator preparation programs at a future date, it would be required to make a formal application to the CTC for initial institutional approval. This would include the submission of a complete self-study report including responses to the preconditions, common standards, and program standards. The self-study must show clearly how the institution attended to all problems noted in the accreditation team revisit report that resulted in *Denial of Accreditation*. The CTC would make a decision on the status of the institution and would be made

aware of the previous action of Denial of Accreditation by the COA. If the CTC grants initial institutional approval to the institution, the COA would review, and if appropriate, approve its programs. An accreditation site visit would be scheduled within two years to ensure the newly approved programs adhere to the Common and all program standards.

II. Guidance for the Team Recommendation

The site visit team must use its collective professional judgment to reach an accreditation recommendation for an institution. The site visit team's recommendation for an accreditation decision is a holistic decision based on the common standard findings, and on the number and severity of "Met with Concerns" or "Not Met" findings for the specific programs offered at the institution.

The COA makes one accreditation decision for the institution and all of its approved educator preparation programs. This accreditation decision reflects, to a great degree, the team's findings on the Common Standards. However, if one or more programs are found to have significant issues, it is likely that one or more related common standards will reflect findings of "Met with Concerns" or "Not Met." If a specific program is determined to have significant concerns that are not reflected in the Common Standards or in other education preparation programs at the institution, the team has the option of making an accreditation decision with the added stipulation that the specific program be closed.

The table below provides general guidance to site visit teams as they discuss which accreditation recommendation is appropriate for the institution.

General Guidance for Initial Site Visit Team Recommendations*

Common Standards Less than Fully Met		Range of Accreditation Recommendations				Denial of Accreditation
# Met with Concerns	# Not Met	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations	
0	0	•				Used only in extreme situations in accordance with the provisions in this *Handbook*
1-2	0	●———	———●			
1-2	1-2		●———	———●		
1-2	3-4			●———	———●	
3-4	0		●———	———●		
3-4	1-2		●———	———	———●	
3-4	3-4			●———	———●	
3-4	5+				•	
5+	0-2			●———	———●	
5+	3+				•	

Closure of an Individual Program	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations	Denial of Accreditation
More than one-half of program standards Not Met		●———	———	———●	

* *Findings on program standards must be considered by the team in making the accreditation recommendation, and those findings play an integral role in helping the team reach consensus on its recommendation.*

When teams are deliberating about the accreditation recommendation, they must consider the findings on the common standards, as well as the number and severity of standard findings for the programs. The table identifies the range of likely accreditation recommendations for an institution based on the number of common standards that are "Met with Concerns" or "Not Met." If an institution has only a couple of common standards found to be "Met with Concerns" or "Not Met," then the accreditation recommendation would likely be *Accreditation* or *Accreditation with Stipulations* which are on the left side of the range shown on the table. If, on the other hand, there are a number of common standards found to be "Met with Concerns" or "Not Met," then the team's accreditation recommendation would likely be in the middle or towards the right side of the range identified above.

In its determination of an appropriate accreditation recommendation, the accreditation team must also take into consideration the number of educator preparation programs an institution offers. If an institution offers a small number of programs, then a small number of program standards found to be less than fully met becomes significant. On the other hand, if an institution offers a large number of programs, then a few program standards found to be less than fully met might not be as significant a factor in the accreditation recommendation.

The information provided in the table is only a general reference tool for teams as they consider the impact of the findings on all common and program standards to determine an accreditation recommendation. It does not replace the critically important professional judgment that team members bring to discussions about the *degree* to which an institution and its programs align with the adopted standards. Similarly, it does not replace the team's assessment of the strengths and weaknesses of an institution and its programs, nor of the team's judgment about the impact of the institution on candidates or the quality of the institution's offerings. By the end of the site visit, team members have a great deal of information about an institution, its unique characteristics, and the quality of its programs. That knowledge, as supported by evidence, is used by the team to generate and justify an accreditation recommendation.

In like fashion, the table serves as a reference tool for the COA which must consider information from the accreditation report, the team lead, and the institution to render a single accreditation decision. The table is not a substitute for the professional judgment and experience of the COA members nor is it a substitute for the deliberations that take place at the COA meeting where the accreditation report is presented.

Chapter Nine
Activities during the Seventh Year of the Accreditation Cycle

Introduction

Once an accreditation decision has been made by the COA, institutions still have an on-going responsibility to attend to accreditation matters in the 7th year of the accreditation cycle. Depending on the accreditation decision, these activities can range from simply continuing routine accreditation activities, such as collection and analysis of candidate and program data, to major revisions of programs to bring them into alignment with state-adopted standards. The specific activities will depend upon the issues identified by the review team and the accreditation decision rendered by the COA. Many, but not all, institutions will be required to submit a seventh year report. This chapter clarifies the expectations for the seventh year of the cycle and the seventh year reporting requirement.

I. Accreditation Decisions and Consequent Institution Activities

As described in the previous chapter, the COA can make one of five accreditation decisions. These include the following:

- Accreditation
- Accreditation with Stipulations
- Accreditation with Major Stipulations
- Accreditation with Probationary Stipulations
- Denial of Accreditation

The previous chapter delineated the operational implications for each of the possible accreditation decisions. The table below summarizes some, but not all, of the required activities for each of the various accreditation decisions. The previous chapter should be consulted for specific information about the definition and operational implications of each accreditation decision. Ultimately, the specific actions required of any given institution in the seventh year will be set forth in the action taken by the COA.

Expectations for All Institutions in the Seventh Year of the Cycle

Underlying the various major components of the current accreditation system is the expectation that all institutions will be vigilant in addressing issues of program quality on an on-going basis. In the current system, this expectation does not cease with the completion of the site visit in the sixth year. On the contrary, the seventh year of the cycle is critical to the achievement of the purposes of accreditation (ensuring accountability, ensuring quality programs, adherence to standards, and fostering program improvement). Not only does the current system require that the institution act in a timely manner to address issues identified during the accreditation review, it assumes that all institutions engage in on-going program improvement that does not begin nor end with the site visit, regardless of the accreditation status of the institution.

For institutions for which stipulations were determined, action must be taken to address the stipulations in one calendar year. For this reason, the activities undertaken in the seventh year are particularly critical. Institutions with Major Stipulations or Probationary Stipulations that do not sufficiently address the stipulations could be faced with Denial of Accreditation.

The table below summarizes the expectations related to the seventh year of the accreditation cycle. More detailed information follows.

Table 1: Accreditation Decisions and Consequent Institution Activities

Institution Actions Following an Accreditation Site Visit	**Accreditation**			
	Accreditation	**with Stipulations**	**with Major Stipulations**	**with Probationary Stipulations**
No required follow-up beyond the routine accreditation activities, i.e. ~~Biennial Reports and Program Assessment.~~Data collection and analysis	✓			
Submit ***SeventhYear Follow-up Report*** addressing all identified area(s) of concern and/or questions.	✓			
Submit ***SeventhYear Follow-up Report*** addressing all stipulation(s), identified area(s) of concern and/or questions.		✓	✓	✓
Submit **periodic Follow-up Reports** (30 days, 90 days, as determined by the COA) to ensure that appropriate action is being taken in a timely manner.			✓	✓
Report on the stipulation(s) through the next accreditation cycle's activities.			✓	✓
Re-visit by CTC staff and team leader.		✓	✓	✓
Re-visit by CTC staff, team leader, and 1 or more team members.			✓	✓

Institution Actions Following an Accreditation Site Visit	Accreditation			
	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations
Institution notifies all current and prospective candidates of the institution's accreditation status.			✓	✓
Institution is prohibited from accepting new candidates in one or more programs until the stipulation(s) has been met.				✓
Institution is prohibited from proposing new programs until the stipulation has been met.				✓
After a two-year hiatus, an institution must file for Initial Institutional Approval				

✓ *Possible follow-up activity*

All Institutions in the Seventh Year

Institutional follow-up is required of all approved institutions in the seventh year of the cycle, although a follow-up *report* is not necessarily required of all institutions. In the seventh year of the cycle, all institutions are expected to address issues raised during the accreditation process by the review teams and the COA. This means taking action within the policies and procedures of the institution to rectify and/or address issues related to CTC adopted standards. If an institution has no specific issues identified by the review teams and all standards were found to be met, it is expected that institutional personnel will continue to review candidate assessment data and available program effectiveness data with the objective of program improvement.

Accreditation

The revised *Accreditation Framework* provides the COA with the flexibility to require follow-up regardless of the accreditation decision, including "accreditation." The COA may require institutions with "accreditation" to provide a follow-up report that addresses how the institution is addressing standards "not met" or "met with concerns," and the progress being made to address any other issues raised in the report or raised during the presentation to COA. The COA has broad flexibility to request a follow-up report on any topic or issue identified in the accreditation report. The COA may require that the information requested be provided ~~either~~ in the form of a seventh year report~~, or be included as part of the institution's next biennial report if the type of information desired is consistent with the purpose of biennial reports and if the COA determines the timing to be sufficient~~. If follow-up reporting is required, the COA must specify this in the action taken at the time of the accreditation decision.

If the COA does not specify the need for a seventh year report from the institution receiving a decision of accreditation, then the institution, at a minimum, should participate in routine accreditation activities such as collection, analysis, and program improvement activities related to candidate assessment data and program effectiveness.

Accreditation with Stipulations

Any institution granted "Accreditation with Stipulations" must complete a seventh year report as part of the accreditation review process. This report should address the action taken by the institution to address any stipulations as well as the standards determined by the review team to be "not met" or "met with concerns." In addition, the COA may require that the seventh year report address any other issue identified in the team report or raised during COA deliberations. All institutions with Accreditation with Stipulations must continue to work with a CTC consultant during the seventh year. In cases where the determination of Accreditation with Stipulations has been rendered, the COA will indicate whether the process for removal of stipulations includes a revisit to the institution.

No Revisit Required

In the cases where a revisit was determined unnecessary by COA, the consultant, and in some cases the team leader, will review the responses provided in the seventh year report by the institution. These responses will be summarized in an agenda item for the COA to consider in making its determination as to whether or not sufficient progress has been made to remove the stipulations. COA considers the recommendation of the CTC consultant and, if appropriate, the team leader in determining the removal of the stipulations at a regularly scheduled meeting. Institutional representatives should attend the meeting to ensure all questions and concerns of COA are addressed at the meeting as the members consider the removal of stipulations.

Required Revisit

If a site visit has been deemed necessary by the COA, it will be scheduled for approximately one year after the original site visit. The institution should continue working with a CTC staff consultant to plan for the revisit and to ensure common understanding of what is expected to be addressed at the revisit. If COA has determined a revisit or a focused site visit is necessary, the seventh year report will be provided to the review team to help the team's assessment of the progress being made in addressing the findings of the review. The CTC consultant will work with the institution to determine the specific revisit needs as directed by the COA action and help guide the institution in determining the type of evidence and progress expected at the time of the site visit.

Upon the conclusion of the revisit, the revisit team will determine whether those standards deemed "not met" or "met with concerns" are now found to be met. A report of the revisit team will be provided to the COA and the COA, at one of its regularly scheduled public meetings, will discuss with the staff consultant, team lead, and institutional representatives the progress made in addressing the standards. If it is determined that sufficient progress has been made in meeting the standards, then the COA will remove the stipulations. If sufficient progress has not been made, the COA may change the accreditation decision

and/or may impose additional stipulations with new timelines and expectations for compliance with the state adopted educator preparation standards.

Accreditation with Major Stipulations

Any institution granted "Accreditation with Major Stipulations" must complete a seventh year report as part of the accreditation review process. This report should address the action taken by the institution to address any stipulations as well as the standards determined by the review team to be "not met" or "met with concerns". In addition, the COA may require that the seventh year report address any other issue identified in the team report or raised during COA deliberations. This report will be used by the revisit team, along with any information collected during the revisit, to determine the progress being made in meeting the standards.

Required Revisit

In nearly all cases of Accreditation with Major Stipulations, a revisit to the institution will be required. This revisit should take place approximately one year after the original site visit. The COA will indicate in its action whether the revisit will be conducted by a CTC consultant and team lead, or with a full team. The size of the revisit team will largely depend on the number and type of stipulations and the number and type of programs with areas of concern identified.

During this seventh year, the institution should continue working with its CTC consultant to plan for the revisit and to ensure common understanding of what is expected to be addressed at the revisit. A seventh year report must be provided by the institution which will, in turn, be provided to the review team to help the team's assessment of the progress being made in addressing the findings of the review. The CTC consultant will work with the institution to determine the specific revisit needs as directed by the COA decision and help guide the institution in determining the type of evidence and progress expected at the time of the site visit.

Upon the conclusion of the revisit, the revisit team will determine whether those standards deemed "not met" or "met with concerns" are now fully met. A report of the revisit team will be provided to the COA and the COA, at one of its regularly scheduled public meetings, will discuss with the staff consultant, team lead, and institutional representatives the progress made in addressing the standards. If it is determined that sufficient progress has been made in meeting the standards, then the COA may remove the stipulations. If sufficient progress has not been made, the COA may adopt a decision of Denial of Accreditation. If, in some cases, it determines that some progress has been made and it is appropriate to allow additional time for the institution to address the remaining stipulations, the COA could change the accreditation decision and/or may impose additional stipulations with new timelines and expectations for compliance with the state adopted educator preparation standards.

Accreditation with Probationary Stipulations

Like Accreditation with Stipulations and Accreditation with Major Stipulations, an institution given Accreditation with Probationary Stipulations is required to submit a

seventh year report to document how it has addressed all stipulations. However, numerous additional requirements are imposed on an institution with Accreditation with Probationary Stipulations during that seventh year of the cycle.

Plan to Address Stipulations
A determination of Accreditation with Probationary Stipulations requires that the institution submit an action plan describing the steps the institution will take to address the stipulations and provide updates at specified intervals, as determined by the COA. The COA determines the timeline for submitting the plan, but typically the plan must be submitted either 60 or 90 days after the COA meeting in which the COA has made the determination of Probationary Stipulations. The CTC staff consultant and the Administrator of Accreditation determine the sufficiency of the plan and provide updates to the COA as appropriate.

Revisit
A revisit is required for any institution with Accreditation with Probationary Stipulations. This revisit should take place approximately one year after the original site visit. During the seventh year, the institution should continue working with its CTC staff consultant to plan for the revisit and to ensure common understanding of what is expected to be addressed at the revisit. A seventh year report must be provided by the institution which will, in turn, be provided to the review team to help the team's assessment of the progress being made in addressing the findings of the review. The CTC consultant will work with the institution to determine the specific revisit needs as directed by the COA action and help guide the institution in determining the type of evidence and progress expected at the time of the site visit.

The team leader, team members, and staff consultant will participate in the revisit and provide a report to the COA about the progress that has been made in addressing standards. The report will include an updated decision on standards findings. COA will make a determination whether sufficient progress has been made to remove the stipulations and change the accreditation decision. If COA determines that sufficient progress has not been made, it could act to Deny Accreditation.

If, in some cases, it determines that some progress has been made and it is appropriate to allow additional time for the institution to address the remaining stipulations, the COA could change the accreditation decision and/or may impose additional stipulations with new timelines and expectations for compliance with the state adopted educator preparation standards.

Denial of Accreditation
If after a revisit, the COA determines that sufficient progress has not been made, the COA could recommend *Denial of Accreditation.*

The COA can deny accreditation upon either an initial visit or a revisit to an institution. Although a recommendation of Denial of Accreditation typically comes after a finding of probationary status at an initial visit and after the institution has been provided with an

opportunity to institute improvements a review team can recommend Denial of Accreditation at **any time** if the situation warrants the finding in accordance with Chapter 8 of the Handbook.

Furthermore, an institution receiving a *Denial of Accreditation* would be prohibited from re-applying for institutional approval for a minimum of two years.

Institutional Requirement for seventh Year Report

The following chart clarifies which institutions are required to submit a seventh year report to the COA. Please note that the chart below only addresses the seventh year report, it does not list the numerous other possible requirements and limitations placed upon an institution as a result of a particular accreditation decision.

Accreditation Decision and Requirements for Submitting seventh Year Report

Activity	**Accreditation**	**Accreditation with Stipulations**	**Accreditation with Major and Probationary Stipulations**
Report Submitted to CTC	COA discretion	Yes	Yes
Type of Report	One of ~~three~~ two options as determined by COA: 1) No report 2) seventh Year Report 3) ~~Biennial Report~~	Seventh Year Report	Seventh Year Report
To be addressed in Report	(If required by COA) ∗ Standards Not Met (if applicable) ∗ Standards Met with Concerns (if applicable) Any other areas included in COA action at the time the accreditation decision is made.	∗ All Stipulations ∗ Standards Not Met (if applicable) ∗ Standards Met with Concerns (if applicable) Any other areas included in COA action at the time the accreditation decision is made.	∗ All Stipulations ∗ Standards Not Met (if applicable) ∗ Standards Met with Concerns (if applicable) Any other areas included in COA action at the time the accreditation decision is made.
Review Process	CTC staff reviews. Reports to COA that areas to be addressed were appropriately addressed in report.	If no revisit required, CTC staff reviews and reports progress made to COA. If revisit required, revisit review team reviews report, along with information collected during the revisit to	Revisit team reviews report along with information collected during the revisit to determine whether progress has been made in meeting standards. Revisit team makes findings on standards in light of this

Activity	Accreditation	Accreditation with Stipulations	Accreditation with Major and Probationary Stipulations
		determine whether progress has been made in meeting standards. In both cases, progress is reported to COA to determine whether to remove stipulations and change accreditation decision.	new information and COA determines whether to remove stipulations and change accreditation decision.

Chapter Fifteen
The Accreditation Revisit

Introduction

The initial site visit team is required to come to standard findings for each Common Standard and Program Standard and to recommend an accreditation status to the COA. Sometimes, the team identifies one or more elements of a standard that are not met while the rest of the standard is met. Depending on the centrality of that element to providing strong preparation for educators, the standard can be found to be Met, Met with Concerns, or Not Met. Once the standards findings are decided, the team is guided by Table 1 in Chapter Nine of the Accreditation Handbook to develop an accreditation recommendation and, if appropriate, draft stipulations. The stipulations might include the recommendation that quarterly progress reports, a report after one year, and/or a revisit are appropriate. If there are significant standard findings that prevent the COA from granting full accreditation to the institution, the actions that must be taken by the institution are identified as stipulations. Stipulations describe the specific actions an institution must take to remove a finding that prevents the institution from gaining full accreditation.

A *revisit* is an accreditation visit that is conducted as a result of action taken by the COA to ensure that the institution has fully addressed the stipulations placed upon it by the COA. The purpose of a revisit is to allow an approved institution receiving stipulations following an accreditation site visit the opportunity to demonstrate to a review team that it has modified its practices or corrected its deficiencies such that the revisit team can find the Common or Program S~~s~~tandard or S~~s~~tandards applicable to the stipulations that were less than fully met to now be met. As a result, the revisit team would recommend to the COA the removal of those stipulations. An institution revisit must occur during the year following the initial accreditation site visit. A revisit will be conducted only if the COA has indicated a revisit is necessary.

~~The initial site visit team is required to come to standard findings for each Common Standard and Pprogram standard and to recommend an accreditation status to the COA. Sometimes, the team identifies one or more elements of a standard that are not met while the rest of the standard is met. Depending on the centrality of that element to providing strong preparation for educators, the standard can be found to be Met, Met with Concerns, or Not Met. Once the standards findings are decided, the team is guided by Table 1 in Chapter Nine of the Accreditation Handbook to develop an accreditation recommendation and, if appropriate, draft stipulations. The stipulations might include the recommendation that quarterly progress reports, a report after one year, and/or a revisit are appropriate. If there are significant standard findings that prevent the COA from granting full accreditation to the institution, the actions that must be taken by the institution are identified as stipulations. Stipulations describe the specific actions an institution must take to remove a finding that prevents the institution from gaining full accreditation.~~

Who Participates in the Revisit?

If the COA has taken action that includes stipulations and determined that a revisit ~~that~~ should take place within one year of its action, generally, at a minimum, the team lead from the initial visit and the ~~CTC~~ Commission consultant will comprise ~~be the team members who return for~~ the revisit team. However, the size and composition of the team will depend upon the number of findings and breadth of programs impacted. If appropriate, the size of the team that returns to the institution may be larger than simply the team lead and consultant. If not explicit in the COA action, the determination of the number of reviewers for any given site visit will be made by the Administrator of Accreditation who may consult with the team lead and then make that determination based on the number and nature of the stipulations to be addressed. The Administrator of Accreditation may determine that a different team lead and/or consultant should serve as the team lead and/or consultant for the revisit. Unlike during initial site visits when the ~~CTC~~ Commission consultant plays only a facilitative role, during revisits the consultant may participate in interviews, document reviews, and discussions that lead to standards findings and to an accreditation recommendation. If additional reviewers are used beyond the team lead, these individuals should be Board of Institutional Review (BIR) trained. For joint national/state revisits, the national accrediting body typically sends new reviewers, while the ~~CTC~~ Commission team lead and consultants are usually from among those who were part of ~~the same as with~~ the initial visit.

Who Makes Preparations for the Revisit?

As with the initial site visit, the ~~CTC~~ Commission consultant is responsible for working with the institution on the logistics of the revisit. The institution is responsible for logistics for the visit such as identifying the hotel, ensuring transportation for the team, arranging for meals, obtaining a team meeting room, and developing an interview schedule. However, unlike initial site visits, typically there is no contract developed for the hotel and meals costs which means that revisit team members pay out of pocket for meals and lodging and then request that those costs be reimbursed.

What Preparations Are Required?

Unlike the initial accreditation site visit, there are no program review documents ~~program assessment findings, biennial reports, or program summaries~~ to guide the revisit team. Rather, the revisit is focused on the accreditation determination, stipulations placed on the institution by the COA, documentation noting what actions the institution has taken to address the stipulations, any appropriate and relevant data available, and the accreditation decision letter sent to the institution.

During the year between the COA's original decision and the revisit, the institution takes action to address the concerns raised in the report and by the COA. On occasion, the institution may also be required to prepare quarterly progress reports that are submitted to the consultant and the COA. In preparing for the revisit, the institution is guided by the consultant in focusing on the documentation and evidence which address the issues identified by the initial site visit team. In addition, when a revisit is required, the institution must prepare a document that describes, issue by issue, the steps the institution has taken to ameliorate concerns identified by the initial team's findings that it believes address the findings and stipulations. (See the end of this chapter for a

template for the institution response to stipulations.) The COA's decision defines the scope of the visit and who should be interviewed by the revisit team. As for all site visits, the interview schedule forms the backbone of the visit. For revisits, only individuals who can specifically address changes the institution has made in response to the stipulations are included in the interview schedule. Similarly, only documentation and evidence that clarify how the institution has addressed the stipulations are reviewed during the revisit. The institution prepares documents and provides evidence, ~~such as through~~including interviews with various staff/faculty and constituents, that address specifically each stipulation the COA placed on the institution and the standards aligned with those stipulations. Consequently, a revisit is shorter than the initial site visit usually lasting only 1 ~~½~~ to 2 days.

What is the Focus of the Revisit?

~~It cannot be overstated that t~~The intent of a revisit is to focus on the stipulations placed on the institution. This includes the standard elements (Common or Program Standards) found to be less than fully met during the initial accreditation site visit that are *related to the stipulations.* Stipulations generally describe the activity or activities the institution must complete in order to meet the standard(s) that prevented the institution from gaining full accreditation. The stipulations guide the institution in its remediation efforts and the team in examining and weighing the evidence. The standard of evidence for a revisit is the same as that for an initial site visit. BIR members are trained to recognize evidence sufficient to document that an institution is meeting a standard.

What is the Relationship Between Stipulations and Standards Decisions in Revisits?

It is important to emphasize that the focus of the visit is to ensure that all stipulations have been addressed. In doing so, standards decisions related to the stipulations should be determined by the revisit team. However, standards not related to the stipulations do not necessarily need to be addressed at the time of the revisit. ~~It is advisable that the institution address them but it is not a requirement for removal of stipulations.~~ The team lead and consultant should clarify this with the institution prior to the site revisit. Institutions may choose to address all standards less than fully met regardless of whether they are related to the stipulations. Whether or not evidence on all standards are submitted and reviewed should be discussed by the team lead, consultant, and institution prior to the site visit.

What is the Outcome of a Revisit?

At multiple times during the revisit, team members will share their observations and concerns with the institution. During the revisit, team members will assess the progress made by the institution to address the stipulation and make findings (met, met with concern, or not met) for all standards applicable to the specific stipulation(s) placed upon the institution. Finally, the revisit team will agree on an accreditation recommendation to present to the COA. At times, the team may find that not all issues from the initial visit have been sufficiently addressed. In those cases, the team can recommend maintaining stipulations, identify another set of draft stipulations for the COA's consideration, or recommend the institution be given more time. Additional time is only recommended if ~~it~~ the institution had made significant progress toward addressing the

stipulations but the team determines that more time ~~was~~ is necessary to fully address the concerns of the original site visit team and the COA.

If the revisit team finds that the situation has either deteriorated or that the institution has made little to no progress, it may recommend a more serious accreditation recommendation, including Denial of Accreditation.

~~CTC Consultants assigned to revisits will make available to BIR members on~~ ~~T~~the revisit team will report ~~a template for the revisit report~~their findings to the COA.

What Further Action can be Taken Beyond Removal of Stipulations?

If the COA determines that stipulations should be removed, it may also determine whether there is any specific follow up necessary after removal of stipulations. For instance, the COA may require that the institution report on the progress of addressing one or more of the areas identified in the stipulations in their next regularly scheduled ~~biennial report~~accreditation activity to ensure the corrective action or improvements are maintained over time. Additionally, the COA may ~~request another site visit for the institution, prior to the next regularly scheduled site visit~~determine that the institution be placed on a shortened cycle for site visits. For example, the COA could require a site visit from an institution at a 2 or 3 year interval after the revisit, as opposed to waiting 6 years. This could necessitate a change in ~~color~~accreditation cohort to facilitate a change in the institution's accreditation cycle.

~~Template for Response by Institution to Stipulations~~
~~(Optional)~~

~~Institution Name~~
~~Institutional Response to Stipulations and Program Issues~~

~~Date: _____~~

~~Stipulation ___.~~ ***~~Common Standard ___: _____~~***	
~~*Provide statement from the Common Standard that the stipulation relates to.*~~	
~~Rationale:~~	**~~Action take to date:~~**
~~*Provide statement(s) from the accreditation report that refer(s) to the reason for the stipulation.*~~	**~~Evidence to support the actions taken to date:~~**
~~Stipulation ___.~~ ***~~Common Standard ___: _____~~***	
~~*Provide statement from the Common Standard that the stipulation relates to.*~~	
~~Rationale:~~	**~~Update:~~**
~~*Provide statement(s) from the accreditation report that refer(s) to the reason for the stipulation.*~~	
~~Program Name~~ ***~~Program Standard ___: _____~~***	
~~Findings on Standards:~~	**~~Update:~~**
~~*Provide statement(s) from the accreditation report that refer(s) to the reason for the stipulation.*~~	
~~Program Name~~ ***~~Program Standard ___: _____~~***	
~~Rationale:~~	**~~Update:~~**
~~*Provide statement(s) from the accreditation report that refer(s) to the reason for the stipulation.*~~	