Final Report

Submitted to:

The California Commission on Teacher Credentialing

Evaluation of the *Accreditation Framework* Policies and Procedures

Submitted by:

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Executive Summary

States ensure the quality of their K-12 teachers and other educators through two mechanisms: licensure of individuals and accreditation of the training programs that prepare these individuals. Accreditation is an assurance of excellence in the preparation of professional educators and an indirect check on quality. Accreditation can be done either by some branch of the state or federal government or by a professional organization. In California, the California Commission on Teacher Credentialing (CCTC) does both accreditation and certification, and candidates for credentials must be recommended by the CCTC - accredited educator preparation programs for their licenses to be granted by the Commission's credentialing arm. These two processes have distinct objectives but serve a common set of purposes and function as an integrated system.

History of Accreditation Framework

The California teacher accountability debate and reform of the 1980s was intended to produce stronger educator preparation programs. In developing new standards for approving educator preparation programs, the CCTC recognized the need for a strong accreditation system that was aligned with current research on educator preparation and would overcome the shortcomings of the previous system. As a result of this need, Senate Bill 148 by Senator Marian Bergeson (Chapter 1455, Statutes of 1988) was passed in California, and the *Accreditation Framework* was prepared pursuant to that bill. In May of 1993, the Commission adopted the *Accreditation Framework* for subsequent implementation under Senate Bill 655 (Bergeson, Chapter 426, Statutes of 1993), which went into effect in January of 1994.

Before adopting the *Framework*, the Commission relied upon practitioners and other experts to review credential preparation programs within an institution independent of one another, measuring these programs for compliance with a list of expectations. Failure to meet all of the criteria could result in the probation or denial of a program's approval status with the CCTC. Under the *Framework*, programs are still evaluated by peer experts, but the recommendations for accreditation of the institution and all of its programs (the unit) are made to the Commission's Committee on Accreditation (COA) by the accreditation team that conducts the site visit. The COA reviews the recommendations of the accreditation team and then decides the accreditation status of the unit as a whole, not for individual programs. Failure of one program could threaten the accreditation status of the entire educational unit.

The *Accreditation Framework* addresses the accreditation processes and procedures to be followed by colleges and universities that prepare teachers and other educators for professional state certification in California. In the introduction to the *Accreditation Framework,* prepared by the Accreditation Advisory Council and the Professional

Services Division of the Commission on Teacher Credentialing, the Commission identifies the goals or purposes of the new professional accreditation and certification system, as well as the key attributes of accreditation in a certification system. The four purposes are:

1. Assure the public, the students, and the profession that California's future educators have access to excellence in foundational studies, specialized preparation, and professional practica, and that these components of educator preparation are oriented to the needs of future elementary and secondary students.

2. Ensure that all future educators have actually acquired those abilities and perspectives essential for service in public schools.

3. Assure that the preparation of future educators is appropriate for the assignments made in public schools.

4. Contribute to broader efforts to enhance the personal stature and professional standing of all members of the education profession.

The seven Attributes of Accreditation are:

1. Orientation to Educational Quality—This new system of accreditation focuses on the educational *quality* of educator preparation in colleges and university. The use of standards in defining educational quality is intended to avoid purely technical or operational aspects of educator preparation and emphasize the decisions of trained reviewers as to the level of quality[1] demonstrated by a particular institution or program.

2. Professional Character—The expertise and experience of those who create accreditation standards, conduct accreditation reviews, and made accreditation decisions must be credible to the general public and the education profession. Professional educators must be involved in every phase of the accreditation process and must hold themselves and their peers accountable for the quality of professional education. In each step of the accreditation process, decisions should emerge from consultation and consensus among professional participants.

3. Breadth and Flexibility—In a society as diverse as California, universities and colleges must be creative and responsive to met changing educational and social needs. High quality accreditation processes must celebrate such differences and foster multiple means to agree-upon ends. Broad domains of educator preparation describing levels of quality can clarify meaning without making standards restrictive.

[1] In addition to quality standards, accreditation systems often include requirements for compliance, which are usually more technically focused than the standards. Often called "preconditions," these compliance requirements are appropriate secondary elements of an accreditation system.

The training of those who conduct such accreditation reviews emphasizes this orientation toward breadth and flexibility.

4. Intensity—The accreditation process must provide trained reviewers with sufficient breadth and depth of information to make reliable decisions about quality. The scope should be comprehensive and the information generated by the review process should be sufficient to yield reliable judgments and conclusions. The focus of the process must be on the key elements of educational quality and the standards used must encompass the critical dimensions of educator preparation. Sufficient essential information must be available to those who conduct accreditation reviews so that their decisions are based on verifiable data.

5. Integration with the Certification System—Accreditation processes must be linked to the state certification system by acknowledging state licensure requirements and state-mandated professional roles and responsibilities. Attention to specialized preparation for particular credentials is a critical aspect of high quality accreditation.

6. Contributions to Improved Preparation—Accreditation standards, reviews, and decisions must also contribute to improvements in the preparation of educators. For that to occur, accreditation reviews must note weaknesses, as well as strengths and provide institutions with clear understandings of accreditation standards. The real value in accreditation lies in the opportunity to engage in professional and institutional growth through consultation and analysis from respected professional peers. Over time, the Commission should reexamine its accreditation policies to determine whether substantive improvements are actual bi-products of those policies.

7. Efficiency and Cost Effectiveness—An accreditation system should fulfill its purposes efficiently and cost effectively. Review processes, decision procedures, and reporting mechanisms must be streamlined and economical. The effort to contain costs must neither come at the expense of fairness and rigor nor shout it impose undue burdens on the institutions being reviewed.

The Commission has delegated oversight of the accreditation system to the Committee on Accreditation. This Committee is charged with deciding on the continuing accreditation of educator preparation institutions and programs, deciding on the initial accreditation of programs submitted by eligible institutions, and determining the comparability of national or alternative program standards with California standards of educator preparation. The accreditation process and procedures are designed to assure the public and the Legislature that educator programs are effectively training school personnel to function in the credential areas for which they are being prepared.

The accreditation system emphasizes participation of professional educators in the development of accreditation policies and procedures, the conduct of institutional reviews, and the determination of accreditation decisions. The twelve-member Committee on Accreditation (COA) consists of six representatives from postsecondary education and six K-12 practitioners who embody the expertise, experience, and commitment envisioned by the architects of the *Accreditation Framework*. The COA

developed criteria for selecting the pool of professional educators known as the Board of Institutional Reviewers (BIR), who, with substantial training, conduct accreditation visits and make recommendations regarding institutional accreditation to the Committee on Accreditation.

To help institutions prepare for these accreditation visits and to assist BIR members in conducting the visits, the Committee on Accreditation developed and periodically revises the *Accreditation Handbook.* This *Handbook* is used by accreditation teams (K-12 and IHE individuals sent out to visit institutions every 5-7 years to assess how well the institution's programs are meeting various sets of standards (common standards and program standards) at that one moment in time.

The *Accreditation Handbook* is used by institutional representatives to help them prepare for the accreditation visit. The *Handbook* explains the requirements and expectations of the accreditation system outlined in the *Framework*; describes the accreditation options regarding national accreditation in lieu of state accreditation; and the use of individual program standards other than California's for institutions of higher education as they prepare for initial and continuing accreditation. The *Handbook* also describes the one accreditation decision made for the entire institution rather than the separate decisions made for each program.

A central aspect of California's efforts to improve the quality of educators and educator preparation programs is that they take place at a time both when instructional tasks have become more complex and when the state is facing substantial shortages of qualified personnel. What this means is that the accreditation system must balance demands for increased educator *quality* with the competing demand to significantly increase the *quantity* of practicing teachers and other personnel.

Analytical Framework Model

The design and processes of the CCTC *Accreditation Framework* must be placed in the context of the broader educational reform movement. To do this, we conducted a review of the literature and found that student learning, teacher quality, professional preparation, and accreditation of professional preparation programs are inextricably linked. The *Framework* procedures for accrediting educator preparation programs incorporate and reflect the Attributes of Accreditation. The seven attributes guide a model of accreditation that features seven fundamental components, and describe a system that:

1. Is standards-based

2. Has an institutional focus

3. Is directed by peer review

4. Seeks self-reflection on internal improvement

5. Uses site visits of peers to gather data and make judgments

6. Involves regular review cycles

7. Emphasizes current quality rather than quality over time

Through this accreditation process, the CCTC accredits 92 institutions of higher education and school districts that prepare and recommend professional educators for the following credential areas:

Basic Teaching Credentials
- Multiple Subject
- Single Subject

Specialist Teaching Credentials
- Education Specialist (Special Education)
- Reading/Language Arts Specialist

- Early Childhood Specialist
- Agricultural Specialist
- Adapted Physical Education

Services Credentials
- Clinical Rehabilitative Services
- Health Services (School Nurse)
- Library Media Services
- Pupil Personnel Services
- Administrative Services

Designated Subjects
- Adult Education
- Vocational Education
- Supervision & Coordination

The architects of the *Accreditation Framework* envisioned this process as one that would provide opportunities for institutions of higher education to engage in productive reflection about their educator programs as they prepare educators for today's classrooms and schools.

The Framework Evaluation

The criteria for evaluating the accreditation system was clearly defined by the CCTC in the *Accreditation Framework* and called for a comprehensive evaluation design that included input from the Commission and the COA, in consultation with educational institutions and stakeholders and provided the CCTC with early and ongoing data and suggestions for possible modifications in the policies and procedures presented in the *Accreditation Framework* and *Accreditation Handbook*. Toward this end, the American Institutes for Research (AIR) produced the Year One Report that provided the CCTC

with a formative review of baseline documents, observations and interviews, and presented preliminary and emerging themes.

This final report—the second and final report in this three-year study to evaluate the *Framework*—drew upon the following documents: the *Accreditation Framework*, *Accreditation Handbook*, Preliminary Reports and Institutional Self-studies, Accreditation Team Reports, COA Annual Accreditation Reports, and CCTC/COA meeting minutes. In addition, the report draws upon 2000-2002 accreditation site visits where AIR evaluators interviewed and surveyed key stakeholders of the accreditation process, observed COA new member orientation, BIR training, and various other related activities. The project was carried out in two phases: Phase I was exploratory work to identify emerging themes from baseline data collected during year one; Phase II was the data collection phase which included, attendance at CCTC/COA meetings, interviews and surveys distributed to BIR members, and representatives from Institutions of Higher Education and district staff personnel; and site visits to twelve of the CCTC scheduled accreditation site visits during 2000-2002. Additionally, 147 interviews were conducted with individuals from these constituent groups: past and present COA members; CCTC consultants; accreditation team leaders, cluster leaders and team members, deans, department chairs, faculty, and other institutional representatives; as well as other key individuals involved in the accreditation process. Survey respondents include: 238 BIR members, 196 institutional representatives, and 103 district staff.

Summary of Findings

The following is a summary of the key findings regarding the implementation of the policies and procedures found in the *Accreditation Framework* and *Accreditation Handbook*, the preparation of the BIR for site visits, and our assessment of the question of whether the current process allows for a fair and productive review that supports program and institutional improvement by the four research questions.
Key findings regarding the implementation of the *Accreditation Framework* are presented here grouped by research question.

Question 1—Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?

- The CCTC's process, as dictated by the *Accreditation Framework*, is based upon high standards that reflect the theoretical and practical goals and direction of the various subsets of the education profession. With the implementation of the Teaching Performance Assessment (TPA), based upon the SB2042 Teaching Performance Expectations, the CCTC is moving even more closely toward the performance outcomes that have become prevalent within the profession.

- The CCTC's partnership with National Council for Accreditation of Teacher Education (NCATE) reflects a strong commitment to assist California institutions seeking national accreditation. This commitment is reflected in the recently

renegotiated partnership between the Commission and the National Council. Challenges to implementing this partnership include issues of alignment between CCTC and NCATE standards and the subjective personal interaction between state and national teams in data collection and decision-making.

Question 2—Do BIR members feel adequately prepared for their role as peer reviewers to achieve the goals of the system? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?

- Peer review through site visits by the BIR is highly valued by both IHE representatives and BIR members. Using peers at the K-12 and IHE levels to judge whether and to what degree programs have met the standards is a core element of the *Accreditation Framework*.

- The criteria for team selection are critical to the validity of the accreditation review process, and the *Framework* is clear about these criteria in terms of team size, expertise, and diversity. However, the unavailability of BIR members and/or the unavoidable loss of team members at the last minute may result in a team with one or more members who are poorly and/or insufficiently prepared. This could result in team members who are unable to effectively fulfill their responsibilities in the CCTC's accreditation process, reduce the effectiveness of the team as a whole, and interfere with the CCTC's ability to meet *Framework* requirements regarding the criteria for team selection.

Question 3— Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?

- The intensity and brevity of the accreditation visit is a significant factor in respondents' perceptions of the CCTC accreditation process. IHE representatives, team members and CCTC staff report that the process leaves them physically and mentally exhausted.

- The frequency of the accreditation cycle – occurring approximately every five to seven years – is a significant element in the Commission's system of accreditation, and exists to ensure that institutions maintain quality.

Question 4—What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement?

- Although time-consuming, the process of self-reflection to prepare the institutional self-study is highly valued by IHE representatives and seen as one of the chief benefits of the accreditation process.

- The quality of the data available for use by teams making judgments about institutions' performance against the standards can vary significantly, and this

variation affects the validity of those decisions and the teams' overall recommendations to the Committee on Accreditation

- The accreditation team report is the key piece of data the COA uses to make its decision on an institution's accreditation status. However, the various parts of the report can vary substantially in quality, interfering with the Committee's ability to make its decisions with full confidence in the team's recommendations. The intensity of the accreditation visit often results in conditions that are not conducive to the production of high quality team reports. In addition, IHE representatives are often unprepared for the presentation of their institution's report before the COA, or feel unable to prepare themselves for the interview before the committee.

- The *Accreditation Framework* purposefully ignores past institutional performance against the standards in its accreditation visits; yet the addition of this historical perspective could lead to a deeper, more effective measurement of institutional improvement over time.

Recommendations and Conclusions

Below we answer the four research questions, presenting our main conclusions and recommendations, along with some suggestions for the CCTC's consideration.

Question 1—Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?

Regarding Standards, we recommend that the CCTC:

- Standardize the processes related to transitions to new standards through new language in the *Accreditation Handbook*.

We also suggest that the CCTC:

- Review need for maintaining Option 3, General Program Standards.
- Attempt to standardize the formats for documentation required of IHEs, specifically for the self-study report.
- Begin a dialogue with IHEs regarding appropriateness of standards for non-traditional models or programs as to whether they consider the standards as they currently exist to be appropriate and valid measures of quality of their institutions.

Regarding Training and Orientation, we recommend that the CCTC:

- Provide more and ongoing orientation for COA members.
- Provide more training and professional development to CCTC staff than is currently available to them.
- Include a historical perspective of past performance in the accreditation process into team and COA decision-making considerations.

We also suggest that the CCTC:

- Amend the *Framework* to allow for greater sanctions to be placed upon low performing programs.
- The "Concerns" part of the team report needs to be reconsidered by the COA and the format for the report should be revised so the team members will clearly understand the expectations of the COA for the report.

Question 2—Do BIR members feel adequately prepared for their role as peer reviewers to achieve the goals of the system? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?

Regarding the preparedness of peer reviewers, we recommend that the CCTC:

- Strengthen team training, particularly in the areas of interviewing.
- Intensify the orientation of accreditation teams.
- Evaluate BIR members' skills post-visit and provide feedback.

We also suggest that the CCTC:

- Adopt better technology to allow CCTC staff to more effectively recruit team members.

Question 3— Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?

Regarding the opportunity to provide information for a fair and productive review, we recommend that the CCTC:

- Standardize the formats for documentation required of IHEs specifically regarding standards for the self-study report.
- Provide more and better orientation for institutions new to accreditation.
- Encourage IHEs to develop electronic documents rooms in addition to better organized, hard-copy documents rooms.
- Conduct candidate interviews when students are available.
- Develop annual surveys for newly credentialed individuals and their employers to provide an additional source of objective data to inform the accreditation system.

Question 4—What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement?

Regarding the review process supporting program and institutional improvement, we recommend that the CCTC:

- Offer more assistance in the development of self-study documents.

- Alter the Framework to allow IHEs to provide data about program improvement over time.

Conclusion

The overall sentiment of stakeholders is that the peer review of education preparation programs effectively serves the goals and objectives of accreditation as identified by the process and procedures in the *Accreditation Framework* and *Handbook.* Even though the process of preparing for accreditation is long and arduous, it provides IHEs an invaluable opportunity to self-examine their programs and practices to allow them to identify weaknesses and improve their programs through a self-reflective process. The process allows the accreditation team of peers to make an informed assessment of the educator preparation programs from the self-study documentation and on-site review, and to produce a report and recommendations for the COA's consideration.

Chapter 1: Introduction

California's Model of Professional Accreditation in Educator Preparation

In 1993, the California Commission on Teacher Credentialing (CCTC) adopted a new *Accreditation Framework* for institutions operating educator preparation programs in the state. Four years later CCTC's Committee on Accreditation (COA) began full implementation of the framework, and in 2000 the CCTC contracted with the American Institutes for Research (AIR) to conduct an evaluation of the resulting process and system. The specific charge to AIR was to address the following four central questions:

1. Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?

2. Does the Board of Institutional Reviewers feel adequately prepared to engage in accreditation reviews? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?

3. Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?

4. What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement?

In this final report, we present the key findings and recommendations regarding the implementation of the *Accreditation Framework* and its accompanying procedure manual, the *Accreditation Handbook*, over the course of three years, 2000-2003. We begin in Chapter 1 by placing California's accreditation efforts in the context of the broader education reform movement and by delineating the central components and assumptions of the CCTC model. Chapter 2 then outlines our evaluation design and methodology, followed by a presentation of findings in Chapter 3. In the final chapter, we return to answer the four research questions, presenting our main conclusions and recommendations to the Commission.

Teacher Quality, Professional Preparation, and Accreditation

To understand the design and processes of the CCTC *Accreditation Framework*, we must first understand the central argument on which they are based: that student learning, teacher quality, professional preparation, and accreditation of professional preparation programs are inextricably linked. That argument finds considerable support in education research and the professional teaching movement. Below, we review the elements of this argument.

Teacher quality

For the past two decades, policy makers, educators, and the general public have been engaged in a national education reform effort centered on improving the academic performance of American students and preparing them to be productive citizens of the 21st Century. These efforts have taken various forms, but the most frequently drawn conclusion is that no policy or program can bring about the desired improvements in schools without also attending to the quality of teaching delivered in the classroom. Improving teacher quality has thus become a central theme of education reform in this country, becoming most recently manifest in the federal requirement that states ensure a "qualified teacher" in every classroom (No Child Left Behind Act of 2001).

This focus on teacher quality is hardly surprising. One of the most consistent findings of decades of educational research is that student achievement is dependent on the curriculum to which those students are exposed (Dottin) and the quality of teachers who instruct them (Ferguson and others). The importance of deep teacher knowledge and skills has been further underscored by many states' adoption of more challenging standards for K-12 students and by the institution of accountability measures for meeting those standards. Representing a fundamental shift in what students learn and how they are taught, standards-based reforms generate new expectations for teachers' classroom behaviors and teacher-student relationships, as well as for student performance (Bybee, 1993; National Council for Teachers of Mathematics, 1991; National Research Council, 1996; Webb & Romberg, 1994). Indeed, none of the instructionally-based reforms will succeed without good teachers who are immersed in their subjects and who know how to foster both basic skills and advanced thinking and problem solving among their students (Brophy & Good, 1986; Good & Brophy, 1997; National Commission on Teaching and America's Future, 1996). Unfortunately, too many of our current teachers lack the depth of knowledge required to meet these expectations (Cohen, 1990; Elmore & Consortium for Policy Research in Education, 1996; Elmore, Peterson, & McCarthy, 1996; Grant, Peterson, & Shojgreen-Downer, 1996; Sizer, 1992; Muncey & McQuillan, 1996). Hence, the call for improved teacher quality.

Professional preparation

While the centrality of teacher quality has become universally accepted, exactly what constitutes quality and how to achieve it are more controversial. Schulman, (1987) outlines seven types of knowledge essential for successful teaching. Other researchers and educators emphasize at minimum a combination of content knowledge and pedagogical skill. Recent analyses of the National Assessment of Educational Progress (NAEP), for example, find that "students whose teachers have majored in mathematics or

mathematics education, who have had more pre- or in-service training in how to work with diverse student populations and more training in how to develop higher-order thinking skills, and who engage in more hands-on learning do better on the NAEP mathematics assessments" (Darling-Hammond, 2000). Similarly, students whose teachers have majored in science or science education and who have had more pre- or in-service training in how to develop laboratory skills and who engage in more hands-on learning do better on the NAEP science assessments (Wenglinsky, 2000). Citing numerous studies, Darling-Hammond (2002) concludes that "content knowledge in combination with content pedagogical knowledge—that is, knowledge about how to teach the content— together with student teaching…appear to make contributions to student learning that exceed the contributions of either component individually" (Darling Hammond, 2001, p.18).

Current views of teacher quality are manifested in the movement to professionalize teaching through the adoption and enforcement of standards of professional practice. The National Board for Professional Teaching Standards (NBPTS) is probably the best known example of this trend, having developed standards and performance assessments to denote "accomplished teaching" in numerous fields. Over 10,000 teachers nationwide have achieved the prestigious NBPTS certification, many of them earning additional compensation in recognition of this imprimatur of quality. Meanwhile, the Interstate New Teacher Assessment and Support Consortium (INTASC) has developed similar standards for beginning teachers, which are being incorporated into credentialing programs in many states.

While NBPTS standards conspicuously omit any reference to graduation from a program of teacher preparation, most advocates of teacher professionalism note the vital role of formal professional preparation. For example, a study conducted by ETS on 270,000 teacher candidates who took the Praxis I and Praxis II exams from 1995-1997 found that graduates of National Council for Accreditation of Teacher Education (NCATE) accredited colleges of education passed the Praxis subject matter tests for teacher licensing at a significantly higher rate than did graduates of unaccredited programs, boosting their chances of passing the examination by nearly 10 percent (Gitomer, Latham, and Zimek, 1999).

Accreditation

Accreditation is the primary means that states have for ensuring the quality of teacher preparation programs. Levin (1980) sums up the role of accreditation thus:

> (The) facts that we expect the schools to provide benefits to society that go beyond the sum of those conferred upon individual students, that it is difficult for many students and their parents to judge certain aspects of teacher proficiency, and that teachers cannot be instantaneously dismissed, mean that somehow the state must be concerned about the quality of teaching. It cannot be left only to the individual judgments of students and their parents or the educational administrators who are vested with managing the schools on behalf of society. The purpose of certification of teachers and accreditation of the programs in which they

> received their training is to provide information on whether teachers possess the minimum proficiencies that are required from the teaching function (Levin, 1980, p. 7).

The literature on teacher preparation program accreditation supports this view, addressing the contribution that an accreditation system makes to the professionalization of teacher preparation and education in general, as well as the degree to which a strong accreditation system contributes to the larger school reform movement dedicated to improving student achievement and performance. Accreditation of teacher preparation programs is increasingly seen as an important and necessary element in strengthening the training of teachers and ultimately in improving the quality of teaching and student learning. The relationship between school reform and higher education accreditation is noted in *A License to Teach, Raising Standards for Teaching*, by Darling-Hammond, et al., Gallagher and Bailey's edited volume on *The Politics of Teacher Education Reform*, and David Angus's history of teacher credentialing. Darling-Hammond, Symms, and Bailey also address the larger issue of professionalism and professionalization in education, and especially the role standards and accreditation play in strengthening the teaching profession as a profession. All three strongly argue that for education to adequately and effectively function as a profession, education needs strong standards that promote accountability, effective teacher preparation that is carefully regulated by the profession through accreditation, and valid assessments of teacher knowledge, skill and abilities.

The existing literature contains strong arguments that accreditation can and should be a key component of a professional process of credentialing teachers, along with the subject matter competency verification (through exam or course work), pedagogical competence verification, and a supervised practicum. The California system combines a system of individual teacher certification, licensure, and accreditation. The professional accreditation and state certification processes have distinct objectives, yet serve as a set of overarching purposes to assure the public, the students, and the profession that future educators have access to excellence in general education; ensure that future educators have acquired abilities and perspectives that are essential for fulfilling specified professional responsibilities; verify and assure the appropriateness of specialized preparation and attainment; and enhance the personal stature and professional standing of teachers and other educators as members of a profession.

An accreditation system that contributes to, rather than hinders or undermines, professionalism in teacher preparation should theoretically produce stronger teachers who will have the knowledge, skills, and abilities to enable their students to be successful in meeting the state's K-12 academic standards. Accreditation provides general assurance of programmatic competence and effectiveness.

Accreditation in the California Context: Competing Demands for Quantity and Quality

CCTC's *Accreditation Framework* reflects the emphasis on professional preparation and the role of accreditation discussed above. At the same time, the framework reflects and must respond to the particular conditions in California, and any serious attempt to

understand its implementation and impact must do so in light of those conditions. A central aspect of California's efforts to improve the quality of teachers and teacher preparation programs is that they take place at a time both when instructional tasks have become more complex and when the state is facing substantial shortages of credentialed personnel. What this means is that the accreditation system must balance demands for increased teacher *quality* with the competing demand to significantly increase the *quantity* of practicing teachers.

The greater complexity of the instructional demand mentioned above derives in part from the growing diversity of the student population–particularly the large influx of immigrants who differ in their linguistic and cultural backgrounds from the majority of practicing teachers and the entrenched culture of American schooling. In addition, California policymakers have also reacted to lagging achievement results by instituting a range of educational initiatives that have had a strong impact on schools throughout the state. The class-size reduction initiative was the most significant in the mid-1990's. The latter part of the decade was peppered with initiatives focused on reading instruction, accountability, and English language development for second language learners. In addition, a number of state programs provided funds for professional development initiatives—a result of the growing recognition that increasing teacher quality was a key to increasing student achievement. The most instructionally significant component of the California reform initiatives during the last decade, however, was the adoption of a set of rigorous standards for what children should know and be able to do across the content areas. These standards have become part of a system that holds schools, teachers, and students accountable for results. Within such a policy environment, it is easy to understand how state procedures for teacher certification and teacher program accreditation drew increasing attention. It is clearly essential that when a school system ratchets up its standards of accountability, that standards for teacher preparation and performance must demonstrate concomitant rigor.

This is no easy task when districts are having difficulty finding qualified teachers. The shortage of classroom teachers results from a combination of a significant growth in student enrollment (increased by 21 percent over last decade, in large part due to immigration), the implementation of the class-size reduction initiative, and regular retirement and attrition. Analysts expect the demand for teachers to continue to grow as student enrollment is projected to peak in 2006-7 and teacher retirement percentages increase as well.

An associated issue is the lack of fully prepared teachers in California classrooms. "The number of classroom teachers in the state without full credentials—underprepared teachers—has actually increased over the past four years, although it has leveled off as a proportion of the population of teachers at about 14 percent" (Shields, et al., 2001). This fact has produced a crisis in teacher preparation institutions in California as they struggle to meet commitments made to increase the flow of teachers into the profession. The higher education community, for example, made commitments to increase the production of teacher candidates, which in turn, has placed great strain and responsibility on these institutions of higher education. The California State University System's Board of Trustees, in particular, committed itself in 1998 to increase the number of credential

candidates by 25 percent, and State policymakers earmarked $18 million to support this effort. The higher education community also agreed to create more flexibility within traditional programs in response to both consumer demand on the part of their candidates and pressures from the State.

As a result of the coupled demands for quality and quantity in California's teaching force, the state's system of teacher preparation has had to undergo rapid change to meet the changing needs of teacher candidates. Multiple routes into the profession have been devised. The CSU Presidents' Commission on Teacher Preparation and K-18 Education, for example, adopted *CSU's Commitment to Prepare High Quality Teachers,* with the primary goal to make CSU as "user-friendly" as possible. This user-friendliness includes the development of internship programs for candidates who meet subject matter requirements but have not completed pedagogical training, the establishment of satellite campuses and use of district facilities to bring instruction closer to teaching candidates, and the holding of classes in the evenings after school hours and on weekends. In addition, the Commission on Teacher Credentialing approved the initiation of so-called "blended programs"—teacher education programs that allow prospective teachers to earn an undergraduate degree and a teaching credential in four years. "The purposeful blending of opportunities to learn content and the skills needed to teach that content, early and regular field experiences through which students are able to understand the demands of the profession, and structured opportunities to reflect on those experiences are all meant to prepare stronger teacher candidates" (Shields, et al., 2001). The proliferation of multiple routes into the teaching profession along with efforts to make programs more flexible and responsive and to provide high-quality clinical experiences have redefined teacher preparation programs and their relationships with districts and schools. These changes and the initiation of a range of new policies have presented new challenges in the procedures used to accredit teacher education programs.

While these efforts to introduce more flexibility into the delivery of teacher training services to address the teacher shortage reflects a politically and economically sensitive credentialing system, there remains the question of the quality of these newly prepared teachers. This issue of quality is of paramount importance in the process of accreditation and is a central goal of the CCTC Framework.

Adoption of the Accreditation Framework

The CCTC began its implementation of the *Accreditation Framework* on the eve of the changes described. On the one hand, the Framework may be seen as an extension of earlier efforts to improve teacher education in the state. "California, like many other states, engaged in a somewhat connected set of reform efforts during the decade of the 1980s intended to produce stronger teacher-education programs and, in turn, stronger schools" (Tierney, 1993). On the other hand, the new framework is an "acknowledgement that earlier notions of quality control in credential programs were clearly inadequate and required significant change" (Tierney, 1993, p. 61). Tierney concluded from his four-year review of California teacher education programs that "some of the on-going weaknesses lie in the ability of the faculty to adapt to rapidly-changing circumstances, and in some structural weaknesses identified in the current program-

review process" (Tierney, 1993, p. 69). Like Myers, Tierney also emphasized the need for program faculty to engage in serious reflective practice about their own work.

Recognizing the need for a strong accreditation system aligned with current research on teacher preparation and designed to overcome shortcomings of the previous system, the California State Legislature passed Senate Bill 148, and the CCTC prepared the *Accreditation Framework* pursuant to that bill. On May 7, 1993, the Commission adopted the *Accreditation Framework* for subsequent implementation under Senate Bill 655, which became effective on January 1, 1994. This policy framework emphasizes the professional character of accreditation in education—that is, that professionals have a responsibility to hold their peers accountable for established standards. In the introduction to the *Accreditation Framework*, the Commission identifies the goals or purposes of the system as well as the seven key attributes of effective accreditation. These seven Attributes of Accreditation are its orientation to educational quality, its professional character, its breadth and flexibility, its intensity, its integration with the certification system, its contributions to improved preparation, and its efficiency and cost effectiveness. The procedures for accrediting teacher preparation programs are to incorporate and reflect these attributes.

The accreditation procedures included the establishment of a special committee of the CCTC known as the Committee on Accreditation (COA) to focus solely on implementing the accreditation system. The functions of the COA are to determine comparability of national or program standards; review proposals for the initial accreditation of programs; make decisions about the continuing accreditation of educator preparation institutions and programs; recommend appropriate guidelines for self-study reports; monitor the performance of accreditation teams; report annually to the Commission; and conduct business and makes decisions in meetings open to the public. This Committee, with input from multiple stakeholders, a) developed and adopted the *Accreditation Handbook*, b) established the Board of Institutional Review (BIR) whose members conduct the peer review evaluations and recommend accreditation actions to the COA, c) set up the training for BIR members, and d) set up a schedule of implementation in which virtually all teacher preparation institutions were reviewed and accredited for the first time between 1996 and 2002. The Framework Analysis as shown in Appendix A, delineates the specific tasks and procedures outlined in the *Accreditation Framework* and indicates whether the AIR team was able to confirm their completion. Chapter 2 discusses in greater detail our activities related to the Framework analysis.

Although much of the CCTC's work in the area of accreditation falls under the jurisdiction of the COA, the Commission has reserved for itself certain key responsibilities, one at the beginning and the other at the end of the accreditation process. First, the Commission is responsible for determining the eligibility of an institution that has not previously been approved to recommend candidates for credentials. When such an IHE meets certain criteria, the Commission grants the institution the status of initial accreditation, allowing the IHE to submit specific credential program proposals to the COA. In addition, the Commission has the an important responsibility in relation to the accreditation process to adopt an *Accreditation Framework* that sets forth the policies of the Commission regarding the accreditation of educator preparation in California in

accordance to the Education Code. The Commission may modify the *Framework* in accordance with Section 8 of the *Framework*.

Second, the Commission hears appeals of the COA's accreditation decisions. The basis for such appeals is evidence that the accreditation decision or procedures were arbitrary, capricious, unfair, or otherwise contrary to the policies of the Commission or the procedural guidelines of the COA. Through its involvement in these two key functions, the Commission seeks to ensure the integrity of the process as described by the *Accreditation Framework*. Below, we consider these procedures from the broader perspective of the overall model of accreditation they represent.

California's Model of Accreditation in Teacher Preparation

The *Framework* and its *Handbook* incorporate numerous procedures and requirements, as exhibited in the Framework Analysis matrix included in Appendix A and discussed further later in the report. For analytical purposes, we have synthesized these processes and requirements into a more general model of accreditation with seven fundamental elements. We outline these elements below and then use their structure for our findings and discussion in Chapter 3. The procedural steps of CCTC's accreditation process are:

- Educator preparation programs operate on a 5-7 year review cycle.
- The first step of the accreditation process is the development by the IHE of the precondition report and a self-study document, which through consultation with CCTC staff, responds to certain sets of standards for all credentials offered by the educator preparation program.
- Once the institution has satisfactorily met certain specified preconditions and completed its self-study, small teams of peer experts (BIR members), representing higher education and K-12 education, visit the IHE for a 3-day site visit to verify that the institution is indeed meeting the standards in the ways it describes in the self-study.
- During this visit, the team conducts extensive interviews with a wide range of constituencies and reviews documents. At end of three days, the team writes a report summarizing its findings and making a recommendation to the Committee on Accreditation as to what it believes the accreditation status of the institution as a whole should be. This report is also presented to the IHE at the end of the site visit.
- The visiting team's report is presented to the COA at the next scheduled meeting. At this meeting, representatives of the accreditation team, usually the team leader, the IHE, and the CCTC staff consultant who facilitated the visit respond to questions from the Committee. At this meeting the COA decides on what the institution's accreditation status should be based on the recommendation of the accreditation team.

- The institution's status is to be reviewed again in 5-7 years, following the same procedures or procedures revised by the COA in the interim.

Our analytic model focuses on actual design features of the California system rather than the qualities that those features are intended to reflect. Approaching the analysis in this way allows us to consider the assumptions (theory of action) underlying CCTC's model of accreditation and to distinguish findings that pertain only to implementation and those that may have implication for the fundamental design elements of the system.

The seven elements of CCTC's model of accreditation are:

1. Standards-based
2. Institutional Focus
3. Professional Judgment and Peer Review
4. Internal Self-study
5. External Review
6. Regular Review Cycles
7. Emphasis on Current Quality rather than Over Time

Each of these seven elements of the CCTC model are now discussed.

Accreditation is Standards-based

Consistent with current trends in educational improvement and accountability in K-12, as well as trends for teacher credentialing and licensing, CCTC has delineated a set of professionally derived and supported common and program standards to define quality in educator preparation programs. All accreditation decisions are to be based on whether an institution has met these statewide standards. In the CCTC model, the common standards relate to aspects of program quality such as overall leadership and institutional climate, and features that are common to all programs such as resources, faculty, admissions, advice and assistance, and IHE-district coordination. Program standards focus on the quality of specific program features such as program design, curriculum, field experience and knowledge and skills to be demonstrated by candidates in the specific credential area. Currently, given the time constraints under which teams operate, team members do not verify candidate competence through classroom observations of practice. Instead, information related to candidate competence is gathered through interviews with candidates and supervisors as well as reviews of documentation, including written evidence of competence.

Until recently accreditation decisions have focused almost entirely on inputs and processes. With the new Multiple and Single Subject Credential Program standards, the Teaching Performance Expectations (TPE) and the Teacher Performance Assessments

(TPA), the CCTC accreditation process will begin to place even greater emphasis on outcome measures that are more closely incorporated into the evaluation process (see chapter 4) (i.e., measures of what graduates of the programs know and are able to do and evidence that students actually graduate from the programs having met those standards). These new developments are part of the SB 2042 standards for multiple and single subject credentials, to which the CCTC is currently transitioning, and do not affect other credential standards. This increased orientation toward outcome standards in some credential areas is a design feature to which we will return in our conclusions and recommendations chapter.

Assumptions underlying use of standards:

CCTC's use of standards as the basis for accreditation rests on several key assumptions about how standards operate to foster improvement:

- *The standards represent a valid definition of quality for programs of teacher preparation*. The validity of the standards themselves, of course, is critical in any standards-based system. With respect to CCTC accreditation, one aspect of validity would be that institutions meeting those standards would be more likely to produce candidates worthy of receiving a California teaching credential than would institutions not meeting those standards. While the AIR evaluation was not charged with validating the standards themselves, our findings on the ways in which they are implemented can have implications for the validity in practice.

- *The standards are sufficiently flexible to be useful across differing programs and institutions and sufficiently clear to be readily interpreted and evaluated.* This is particularly important, given the multiple routes and variation in California's programs discussed above.

- *Use of standards will draw attention of the institutions and the system to issues of educational quality and will provide a basis for improvement goals and targets.* Institutions are expected to seek programmatic improvement within the context of meeting the standards. The standards are to provide a guide for institutions self-evaluating for the sake of programmatic improvement.

- *Use of common standards across institutions, when backed by evidence of institutional practice, will foster fairness and equity in the evaluation system.* Realization of this fairness, of course, rests on a corollary assumption of reliability in the evidence and judgments across reviewers and institutions.

Institutional Focus

The accreditation decision targets the institutional unit (e.g., school of education) rather than individual programs within that unit. This primary focus on unit rather than program accreditation represents a major shift in the approach of the *Accreditation Framework* and previous practice in California. Prior systems approved individual programs. Assumptions underlying institution accreditation follow:

- *This approach will foster greater coherence and collaboration as programs work together to ensure the common accreditation that will affect them all.* The emphasis on coherence and collaboration is well founded in research on organizational effectiveness and improvement. It is also consistent with trends in accreditation practice. NCATE, for example, requires institutions to develop a "conceptual framework" reflecting the common vision of the education school or department as a whole. The assumption is that institutions that are more coherent in their approaches to teacher education will be more effective in their results and are more likely to improve over time.

- *Evaluating the unit will also streamline the accreditation process and be more efficient and cost effective*. Cost efficiency is one of the attributes of effective accreditation outlined by the framework.

- *It will be possible and feasible to combine information and judgments about the institutional unit as a whole with those of individual programs* in such a way as to come to a valid summary judgment about the quality of the institutional unit.

Professional Judgment and Peer Review

Professional peer review lies at the heart of all aspects of the accreditation process. Accreditation in California is a professionally-based process that relies on the professional knowledge, responsibility, and judgment of K-12 and IHE educators–from the inception of the standards through all parts of the review and decision process. Moreover, the relevant "peers" for this process include professionals from both the K-12 side of the fence (the "consumers" of the products of teacher preparation programs) and the Institutions of Higher Education (the "producers" of teacher candidates). This is true in all the relevant bodies: CCTC, its Committee on Accreditation (COA), and the Board of Institutional Review (BIR). Underlying assumptions are that:

- *Educator preparation is a field of study that requires specialized knowledge and expertise*. Educators will be more able to validly judge the quality of teacher preparation programs than lay individuals.

- *K-12 and IHE educators bring to the table different types of knowledge and expertise*, both of which are necessary for valid assessments of the teacher preparation institutions. Moreover, both types of professionals will have sufficient opportunity to bring their expertise to bear on the process and its results.

- *The individual professionals involved in the process will have the requisite knowledge and skills*, not only of education in general but of specific fields and of the accreditation standards and processes to collect and interpret information on program and institutional quality. That expertise is to be ensured through appropriate recruitment, selection, and training of COA and BIR members.

Internal Self-study

The accreditation process incorporates avenues for institutions to engage in internal data collection and self-reflection, guided by the accreditation standards. One of

Tierney's (1992) observations about teacher preparation programs in California was that they often failed to engage in the professional reflection necessary for improvement of the work. The self-study required by the CCTC Framework is intended to foster this self-reflection as a mechanism for program improvement. Assumptions underlying self-study are that:

- *The process of self-reflection will encourage attention to the standards and instructional quality.* Attention is a critical condition for organizational learning to occur.

- *IHE faculty will have the ability to collect and interpret the necessary data for self-review.* One issue here is that of resources, including time, to collect the data and conduct the internal review. Another issue is whether the IHE faculty will have the knowledge base required to interpret the data in a valid and useful manner.

- *The data and conclusions of the self-review will contribute to internal organizational learning and professional development, thus fostering continuous improvement in the institution.* The very process of self-review is intended as a means of building capacity and collaboration in the organization and engendering on-going habits of reflective practice.

- *The data and conclusions will also contribute to the external review process, adding to the validity and comprehensiveness of the information on which the review panel makes its judgment.* One purpose of conducting the self-review immediately prior to the external review is to provide information necessary for the latter process.

External Review

The primary basis for the external review and judgment is the on-site visit evaluation by the peer review team. The peer review site visit, conducted by a team selected from the Board of Institutional Reviewers (BIR), lies at the heart of the CCTC accreditation process. As such, it was a focal point for much of AIR's data collection. Again, several key assumptions underlie this central element of the model:

- *The site visit will allow for the comprehensive collection of data not available from documents prepared by the institution or others.* Interviews of stakeholders (students, faculty, K-12 administrators) and reviews of supporting evidence are intended to provide information from a range of perspectives, which can then be triangulated for a more robust assessment of institutional quality.

- *Team selection will be appropriate to the institutional context and will yield a collective body with the range of expertise required for sound professional judgment of institutional quality.* The diversity of the teams is designed to ensure that collectively the reviewers will have the requisite knowledge to judge both the cross-program core standards and the program-specific standards as well.

- *The process of deliberation on site will allow for necessary moderation of varying evidence sources and judgments contributed by individual team members.* The

synthesis and final evaluation of the information takes place through a process of collective discussion and consensus building.

- *Guidance from the CCTC consultant will assist in a fair and valid application of the accreditation standards to the evidence collected and adherence to proper procedures.* While not a member of the team, the CCTC consultant is assumed to provide for greater consistency and comparability across accreditation reviews by ensuring a consistent interpretation of the Framework, standards, and procedures.

- *The recommendation of the site-visit team will be further validated through the presentation to and judgment of the COA, which is independent of the team, and, the right of appeal to the CCTC.* Again, the intention here is to ensure fairness and comparability across reviews.

Regular Review Cycles

The accreditation process occurs in regular, and fairly frequent, cycles for all institutions. The intent is that all institutions must be re-accredited on a similar 5-7 year cycle. Several assumptions underlie this design feature:

- *Quality is fleeting*. Organizations change and external conditions change, making an evaluation of quality at one point in time potentially obsolete in another. The assurance of quality requires a process that is able to capture and respond to these changes.

- *Fairness requires that the cycles be basically the same for all institutions.* The CCTC process makes no distinction among institutions in the scheduling of the full review, although those units that have received stipulations on their accreditations are more frequently monitored for their compliance with those stipulations.

- *Accreditation implies actually meeting standards, not simply making progress.* Although the reviews are to be regular and periodic, the judgments are not based on evaluations of progress but rather on evaluation of meeting the standards at a particular point in time.

Emphasis on Current Quality rather than Over Time

The accreditation process seeks to take a "snap-shot" of an institution's performance at one particular moment in time in the accreditation cycle. It purposefully does not take into account past team recommendations or CCTC or COA accreditation decisions. Accreditation is based on quality at a given point in time. Assumptions underlying current quality are that:

- *Periodic review should help to engender habits of self- reflection and continuous improvement*.

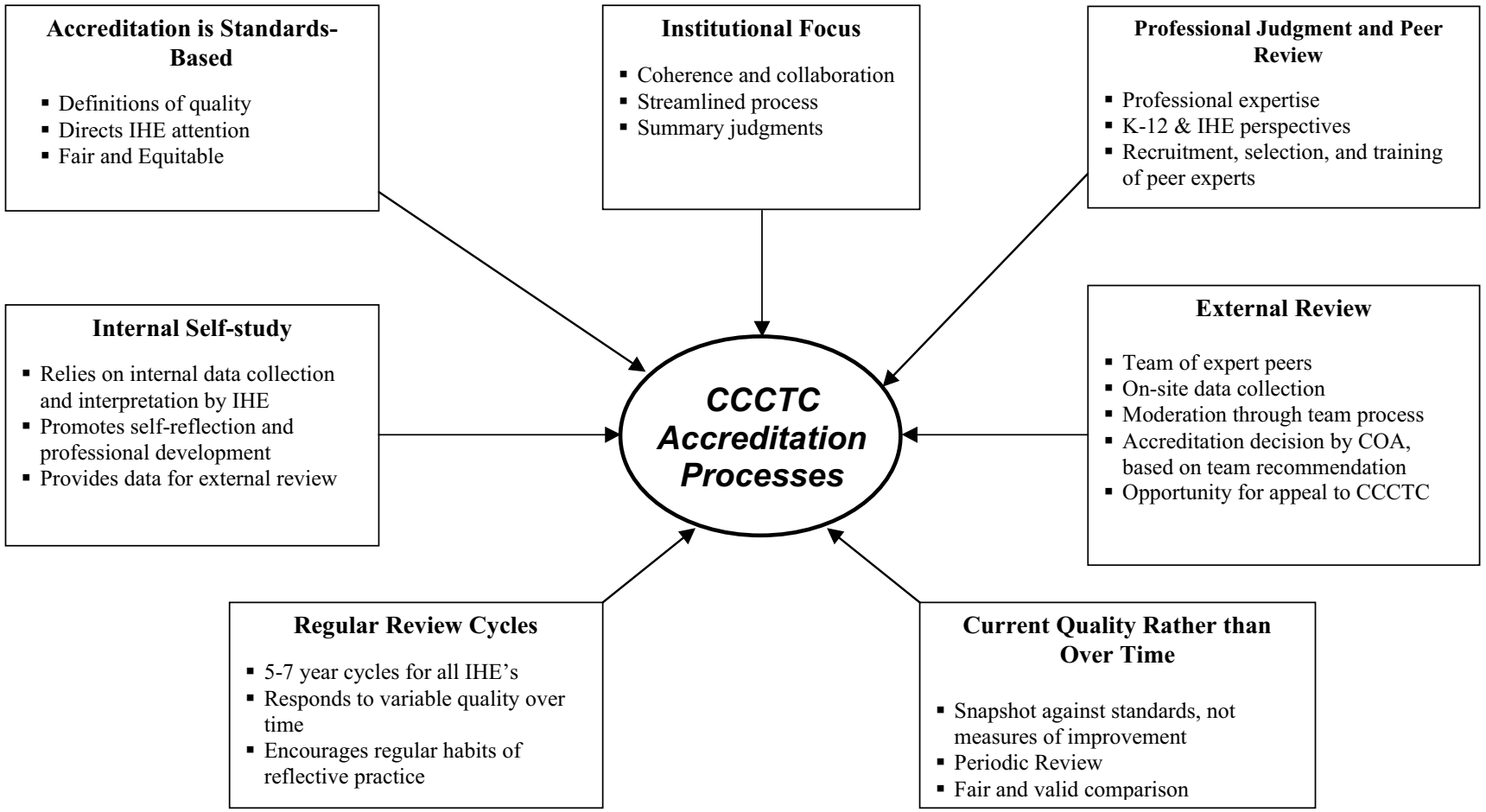
- *The lack of a historical perspective is fairer to institutions.* Institutions should be evaluated on their current state of quality, not past weaknesses or strengths.

- *A fair and valid comparison of institutional performance over time is not possible since standards change.* There is no assurance that an IHE will use the same sets of standards from one accreditation visit to another.

Taken together these elements provide a model of the key design features of the CCTC accreditation system addressed in this evaluation. While the seven features do not delineate all the specifics of the system, they do provide substantive guidance for an investigation of its implementation and the impact of that implementation on the quality of the information obtained and the judgments rendered. Such was the CCTC's charge to AIR in this evaluation study. In addition, an analysis based on these key features will allow us to distinguish between implementation constraints that might be easily addressed within the context of the current system and more substantial revisions to the system itself that CCTC might want to consider. We address both types of possible refinements in the concluding chapter of this report.

A graphic representation of the analytic model is presented in Figure 1. CCTC Framework: Analytical Model that follows.

Figure 1. CCTC Framework: Analytical Model



Evaluation in an Environment of Change

We want to stress one further issue in this study before proceeding to a discussion of our methodology and findings. As is true in many cases of educational reform, changes in the policy environment or other external conditions often complicate implementation of the reforms and interpretation of their effects. During the course of the Framework's implementation and even during the three years of this evaluation, very significant changes occurred in the policy landscape that have important implications for accreditation in California. Two of these stand out most clearly.

Change in credentialing and preparation standards in California

During the time of AIR's evaluation of the implementation of the *Accreditation Framework*, the CCTC embarked on an ambitious restructuring of the paths to obtaining its basic credentials. With the passage of Senate Bill 2042 (Alpert, Mazzoni, Chapter 548, Statutes of 1998), the standards for the Multiple Subjects and Single Subjects credentials underwent substantial change, and the Commission also created new standards for subject matter preparation and induction. While transitioning from one set of standards to another occurs regularly at the CCTC, the implementation of the 2042 system marked a significant turning point in the work of the Commission. Specifically the new legislation seeks to integrate the three stages of educator development – subject matter preparation, professional preparation, and initial teaching experience or induction – into what the CCTC calls "a continuum of learning." Furthermore, SB2042 affects virtually every institution of higher education that prepares professional educators in California, since all recommend candidates for multiple subject (MS) or single subject (SS) credentials, or both. Under SB2042, as outlined in a *Plan for the Implementation of Standards of Program Quality and Effectiveness in Elementary Subject Matter Preparation and Professional Teacher Preparation Pursuant to SB2042,* and adopted by the Commission on September 6, 2001, all MS and SS programs will have to be approved under the new system by January 1, 2004. IHEs that chose to enter this new world of standards before it was actually mandated were known as "early adopters," and Spring 2002 was the first time in which accreditation teams reviewed these early adopter institutions' multiple and single subject credential programs using the 2042 standards as their measuring tool. These new standards require IHEs to respond to every element within a standard as well as to the standard itself, whereas the previous set of California program standards for teacher preparation allowed IHEs more leeway in how it considered the various factors making up a standard. In addition to these new requirements, IHEs were required to establish new programs for preparing teachers to teach reading, and simultaneously with the first use of the 2042 standards in accreditation, the CCTC reviewed institutions' performance on its reading standards.

Increased movement toward performance-based accountability

Performance-based accountability, which is fast becoming the dominant paradigm in K-12 accountability systems, is also making its way into higher education in general and teacher preparation in particular. On the federal front, the Higher Education Act of 1998 (Title II) signaled the government's intent to improve teacher preparation through strict accountability measures and public disclosure of teacher test results. In California,

almost simultaneously, state policy makers developed their own plan to redesign the teacher licensing system, with performance assessments and mandatory completion of a formal induction system (Shields, et al., 2001). This plan was conceptualized between 1995 and 1997 and was realized in law in 1998 with the passage of Senate Bill 2042.

Moreover, not only policy makers but also professional educators themselves are calling for greater attention to student performance as part of evaluating and accrediting teacher education programs and institutions. Arthur Wise and Jane Leibbrand, for example, have noted that teacher education is in the midst of a shift toward a performance-oriented system of teacher training and induction that is anchored by accreditation of preparation programs. They argue that beginning in 1987, NCATE's standards began to focus on the knowledge base of teachers, and since the 1995 redesign, to emphasize performance. NCATE now requires teacher preparation programs to continually monitor and evaluate the progress of candidates throughout their training and to use performance assessments a part of that evaluation.

Emerson Elliott, the director of NCATE's New Professional Teacher Standards Development Project in 1997, outlined the goals of that project as: (1) to strengthen the accreditation process to increase the probability that candidates master content knowledge and the means to teach that content knowledge; (2) to judge program quality primarily on the basis of performance of candidates and institutions; and (3) to make accreditation compatible with INTASC standards for initial teacher licensure and NBPTS standards for advanced teacher certification, as well as with content standards for K-12 students. Elliott argues that in a performance-based accreditation system, standards would not describe programs, but rather knowledge, skills, and dispositions candidates should acquire. Performance-based standards would also describe expectations of institutions where their actions could make a significant contribution to the performance of their candidates. These expectations include using information about candidate progress to inform the IHE's own internal reflection and improvement efforts; faculty modeling teaching and learning behavior expected of candidates; developing disciplinary content and pedagogy collaboratively between education and liberal arts faculties; and training teachers in the goals of the teacher preparation unit.

Given the confluence of national and professional trends toward performance-based accountability, it is not surprising that SB 2042 calls for the CCTC to incorporate results of the Teaching Performance Assessment into both the credentialing and accreditation processes. To do so would represent a substantial shift from the current heavy reliance on input standards in the *Accreditation Framework*. We return to the implications of this trend and the recent legislation in our conclusion and recommendations in Chapter 4 of this report.

We now turn, in Chapter 2, to a review of the design and methodology used in this evaluation study.

Chapter 2: Study Design and Methodology

In the request for proposal (RFP) issued by the CCTC, the purpose of this evaluation was defined as:

> An evaluation of the *Accreditation Framework* policies and procedures to determine how well the Framework actually works for all stakeholders to assess whether the Framework actually provides assurances that future California educators have access to excellent professional education and are in fact acquiring the abilities and perspectives they need to work in California schools.

Evaluation Plan

The AIR evaluation of the *Accreditation Framework* policies and procedures had to meet the following objectives as stated in the RFP: provide to the CCTC early and ongoing data and suggestions for possible modifications in policies and procedures presented in the *Accreditation Framework* and *Accreditation Handbook;* conduct a comprehensive evaluation of the development, implementation, utility, and efficiency of the policies and procedures used during accreditation visits conducted during this evaluation; complete a study of the Board of Institutional Reviewers that would incorporate information about its composition, training, assignments, and procedures; and report on initial observations and suggestions for modifications to the *Framework* policies and procedures as well as report summative findings and useful recommendations.

The criteria for evaluating the Accreditation System is clearly defined by the CCTC and articulated in the *Framework,* Section 8, *Evaluation and Modification of the Framework*. It calls for a comprehensive evaluation design that includes input from the Commission and the COA, in consultation with educational institutions.

AIR's approach to this evaluation was designed with the research questions presented in the RFP to ensure that the results would be an accurate reflection that the Accreditation System is working and would provide useful information to the Committee on Accreditation and the CCTC.

The four research questions as stated in Chapter 1; the goals, purposes and functions of accreditation; the seven Attributes of Excellence; and the guiding questions identified in the RFP served as the basis for determining what information to collect and evidence to compile during the data collection. The data sources used to help answer these questions are drawn from all data collection efforts undertaken during the study and are described in this chapter.

First-year activities

Collected and reviewed documentation

Documents and electronic files available from the CCTC were collected, organized, reviewed, and catalogued into an electronic database for ease in searching and retrieval of information. Documents reviewed included: *Accreditation Framework*, *Accreditation Handbook*, Preliminary Reports and Institutional Self-studies, Accreditation Team Reports, COA Annual Accreditation Reports, CCTC/COA meeting minutes, and Comparability Studies, as available.

Observed accreditation visit

To gather first-hand knowledge of the accreditation process and gain a better understanding of the COA accreditation process and procedures, AIR observed its first accreditation visit in May 2000. The experience gained from this visit helped refine the protocols for future case study site visits during Phase II data collection activities.

Observed COA new member orientation

AIR evaluators attended the new COA member orientation meeting held in August of 2000. This meeting allowed the evaluation team to observe first-hand the kind of information about policies and procedures that are provided to new COA members.

Developed 40 site visit profiles

Profiles for all accreditation visits conducted since the implementation of the *Accreditation Framework* in 1997 were developed to establish context for the use of the Framework and procedures during the early years of implementation. These profiles included an overview of the teams' accreditation recommendations, the COA's decisions, information about the initial accreditation visits, and summaries of the team's recommendations and stipulations for common and program standards, institutional responses to stipulations, and revisit activities, if applicable. These profiles were summarized into 2-3 pages and included as part of the Year One Report.

Interviewed key informants to complete site visit profiles

Interviews were conducted to gain a better understanding of the accreditation visits and documented site visit profiles. Using semi-structured interview protocols, AIR asked interviewees to describe their role in the accreditation visit and answer a series of questions about that particular visit (e.g., CCTC staff consultants, team leaders or team members, institutional representatives). To gain a deeper understanding of visits, AIR supplemented the profiles by conducting telephone interviews with a minimum of three key stakeholders from each visit.

Analyzed the Accreditation Framework

The AIR evaluation team conducted a preliminary analysis of the *Accreditation Framework* to determine questions that needed to be addressed for each component of the *Framework* and to identify which document(s) could be used to answer the question.

Comments were included, to elaborate a point as needed. For example, for the guideline, "Allocate Resources Annually for Accreditation Operations," one of the corresponding questions used to guide our analysis was "Does the Executive Director, in accordance with state budgets, laws and regulations, make staff assignments to accreditation operations?" The objective was to answer all questions identified in the matrix. The matrix would indicate in the Yes/No/Not Observed/Did Not Evaluate column whether the question was successfully answered. If it was not, the comments would show explain why.

Developed databases of 1997-2000 site visits

The first database developed was the Document Review Database designed to organize and synthesize information found in the review of accreditation documents for site visits occurring between 1997 and 2000. The second database was the BIR Profile Database, which contained contact information for BIR members. This latter database would later be used to send out the BIR survey to BIR constituents.

Observed COA meetings

AIR staff attended all Committee on Accreditation meetings at which accreditation teams presented their recommendations to the COA. Attending these meetings allowed us to witness the Committee's decision-making process and observe the interaction between IHE, COA, and the BIR members.

Other activities included gathering specific information about the team of reviewers—their training, selection, and engagement in the accreditation procedures—as well as how the state process is integrated with the NCATE process.

First-year findings (Themes, Issues, and Recommendations)

AIR's review of documents, observations of accreditation site visits and Committee meetings, and interviews with key stakeholders provided us with a wealth of information and resulted in the identification of a set of preliminary themes and issues which were presented in the Year One Report. If we had accumulated enough evidence to support a particular construct, we identified the construct or pattern as a *theme*—that is supported by multiple forms of evidence. If, however, a construct surfaced, but we did not yet have enough evidence that would allow us to identify it confidently as an emerging theme, we identified it as an *issue*—worthy of consideration and in need of additional investigation.

Based on the small number of interviews conducted at the time the Year One Report was produced, the themes and issues were not to be considered as findings, but rather would serve as features of the program that would be confirmed with further analyses from both qualitative or quantitative data collection efforts during the second phase of the study or that we would dismiss as constructs with insufficient basis. In addition, the themes were identified *a priori* of a set of data collection activities that would include conducting a second round of site visits, the administration of surveys to various constituent groups, and a wide range of stakeholder interviews from which additional themes could likely

emerge through subsequent data collection activities. What follows is a summary of the themes, issues, and initial recommendations presented in the Year One Report.

Emerging themes from first year report

Use of Standards — Institutions must meet two categories of accreditation standards: Common Standards (these reflect aspects of program quality that are the same for all credential programs) and Program Standards (these relate to the quality of programs that are specific to a credential area). Institutions can select from five program options by which they will be evaluated: 1) California, 2) National or Professional, 3) General, those included in the *Accreditation Framework*, 4) Experimental, or 5) Alternative. These options provide a measure of flexibility, but also add a degree of complexity to the process. Additional complexities arise when an institution writes to an old standard while being evaluated under a new or revised standard.

Roles and Relationships of COA and CCTC — The function, membership and appointment of the COA are set forth in the Education Code. While the responsibilities of each group are fairly well delineated in the *Accreditation Framework*, this relationship does not seem to have been fully distinguished in practice. The level of involvement of the Commission with the COA and the nature of the ongoing relationship are not clear.

Decision-making Process — We noted that the site visit reports provide fairly limited information about how recommendations are decided regarding the accreditation of an institution and about the stipulations that may or may not be assigned and qualified. For example, the impact the professional comments section of the report plays in the process of making the accreditation decision is not clear.

Implementation of Team Approach in Site Visits — We observed the use of a team approach as a key aspect of the accreditation site visits, as are procedures used to accredit California institutions. Preliminary evidence suggests that the dynamics of the site visit—meetings, deliberations, and interactions—are highly dependent on the composition of the team and that the team leader is a critical player in determining that interplay.

Distinction between Stipulations — The decision-making process calls for deciding between technical and substantive stipulations. We noted that the process resulted in less than a full understanding of the distinction between technical and substantive stipulations, how decisions are made for each category, and the relation of one set of stipulations to another.

Issues

Our exploratory work during the first year identified five issues that we explored further during Phase II:

1. Integration with NCATE – explore the collaborative process and how joint accreditation visits between CCTC and NCATE are conducted;

2. Training of Accreditation Teams – identify through interviews or surveys how BIR members are trained to make evaluative judgments about the adequacy of a program they are reviewing;

3. Makeup and Diversity of COA Committee and Accreditation Teams –explore the operationalization of the stated requirements in Section 2B of the Framework with regard to the balance in composition;

4. Distribution of Accreditation Outcomes—assess how accreditation procedures play out across the range of institutions (i.e., UC, CSU and private); and

5. Clarity and Efficiency of Communication – examine how new standards are disseminated and integrated in the accreditation procedures.

Initial Recommendations

The Year One Report noted the following three recommendations:

Clarification of standards—A notable finding of our review of documentation and initial interviews revealed a prevailing difficulty in discerning the standards by which an institution is being evaluated. Our recommendation is that the information about standards be located and labeled clearly as associated with specific programs within an institution using consistent terminology and numbering systems.

Development of Reports—We recommended that clearer guidelines be given to institution representatives developing self-studies or accreditation reports, and that accreditation team members be reviewed to determine how to accommodate the lack of consistency and transparency in documents related to the site visits.

Documentation and Recordkeeping— The challenge of identifying, locating, and retrieving the relevant documents from the Commission led us to recommend that recordkeeping and document maintenance procedures at the CCTC be reviewed and revised to ensure that all materials could be easily located, checked out as needed, and returned.

Phase II—Revised Study Design and Procedures

The study design as initially proposed was revised after Phase I of the evaluation, with these guiding principles: assurance that survey or interview constituents would respond only to relevant questions, and data collection instruments would be tied to the research questions and the analysis of the *Accreditation Framework*. The revised study design reflected decisions made about the content of various data collection instruments, clearly identified who should be interviewed and who should be surveyed, and specified the number of respondents desired relative to the universe available, if known. The revised research design matrix presented in Appendix B identifies the research questions and

shows which sources of evidence (documents or respondent group) from which this data would be collected.

In developing the redesign during Phase II, our primary goal was to collect information from key stakeholders only once, if possible, using one of the following data collection options: face-to-face interviews, telephone interviews, or surveys. However, this strategy was not always possible to maintain when we weighed the desire to gather information for a variety of purposes from groups of varying size. For example, we wanted to interview key accreditation team members who participated in site visits to gain perspective on that particular visit. But these team members could also have received a BIR survey through which we asked a wider range of questions to the universe of BIR members. Our goal was to capture the data necessary to better understand the process, experiences, and impressions of the participants for *one* specific accreditation visit.

Refinement of Data Collection Procedures

To enable collection of richer data, the data collection schemes, procedures and instruments were modified after the 2000-2001 round of site visits. For example, we intended to survey the BIR membership during the summer of 2001. Upon learning that the CCTC intended to conduct its yearly survey of BIR members about their availability for 2001-2002 accreditation visits, it was jointly decided that the two data collection efforts would be combined. As a result, the distribution of the BIR survey occurred, in the late fall of 2001. Other design changes included strategies such as exchanging interviews for surveys or adjusting a sampling approach that also delayed implementation. The intent was to reduce the burden placed upon a respondent as well as the level of effort required to complete the survey and follow up with non-respondents.

Revised Sampling Frame

AIR originally intended to collect data from a large number of participants playing a wide variety of roles in the accreditation process. However, we found that to collect data from these groups in the manner we originally proposed was in some cases not cost effective and would not produce the kind of data we were seeking in an efficient manner. Our original proposal called for interviews with a sample of half of the 12 institutions scheduled for review. However, we ended up interviewing representatives from all 12 institutions of higher education (IHEs) visited per year rather than 12 during the two-year period. Participant groups for the surveys would be sampled from 100 percent of the institutions being reviewed, with equal numbers of case-study and non-case study institutional participants. There would be a 100 percent census survey of the BIR members.

Since it was not feasible to survey all faculty for both rounds of site visits, we developed a meaningful sampling frame to ensure that the results would represent a range of respondents. We had more control over interviews than for surveys as participation in surveys is private and relatively anonymous. Participation in both surveys and interviews was, of course, voluntary and disclaimer statements were included at the beginning of the surveys to inform respondents. The response rates for surveys administered are presented

later in this report. No one invited to be interviewed from any of the stakeholder groups declined to participate.

In 2001-2002 we sent surveys to the known universe of IHE and district staff representatives who came into contact with the accreditation team. Initially, the sampling was attempted through the collection of faculty rosters through IHE websites. In 2000-2001, all faculty on the IHE faculty roster received an IHE survey, unless there were more than 25 names on the list; in that case, only the first 25 faculty on the IHE list received surveys. The methodology used in 2001-2002 fell short of allowing us to accurately and clearly identify which faculty were actually interviewed by the team and thus participated in the accreditation process.

Based on the experience with the district staff survey, in 2001-2002 we sent surveys to all faculty and district staff named on the interview schedules developed for the accreditation visit. If it was known that a particular individual did not have contact with the accreditation team (e.g., due to a canceled interview), then a survey was not sent to that individual. Graduates were surveyed using the District Staff survey instrument if they could be identified through the interview schedule.

Analysis of Accreditation Framework/Handbook

Work on the analysis of the *Accreditation Framework* during Phase I was exploratory in nature and revolved around the collection, inventorying, and review of documents related to site visits conducted over a three-year period following the implementation of the *Accreditation Framework* and Handbook procedures. The initial work on this effort included in the Year One Report presented some preliminary analysis and initial recommendations. To guide the analysis, we continued to develop the matrix by answering questions through analysis of documentation.

Since then, we have augmented the analysis to include information collected through attendance at COA and CCTC meetings, review of accreditation documents, observations of the accreditation process at 12 case site visits, and interviews and surveys with key constituents involved in the accreditation process. We have consequently added several components to our *Accreditation Framework* analysis. All questions included in the *Framework* were answered with either a "yes", "no", "not observed", or "not evaluated." If we respond "not observed," we may have learned about the process from stakeholder interviews or document review but we did not observe it ourselves. When we indicate that we did "not evaluate" we mean that we did not find sufficient information to made a determination about that particular question. In both of these instances, the comments section was further augmented to more thoroughly document what we learned about each topic and identified any additional data sources we investigated. For the categories where we could not conclusively answer "yes" we added a qualifier after the word "yes."

Case Studies

Timing of the accreditation visit depended upon the schedule set by the CCTC. During the first round of site visits, AIR maintained the distinction between data collected concurrently and retrospectively as detailed in our proposal. As previously stated, after the first site visit in November 2000, a joint COA/NCATE visit, we revised not only the procedures established for observing the site visit and collecting case study information, but also revised our timeline for conducting on-site interviews with IHE or accreditation team members. Follow-up telephone interviews were to be conducted soon after the site visit to maximize recollection of events that occurred with individual participants of the site visit as needed. The primary difference was it would no longer be possible to interview key stakeholders during or at the end of the site visit. Thus, our data collection efforts abandoned the distinction between retrospective and concurrent site visits because we found it not to be helpful in our data collection or analysis. To review the complete accreditation cycle, AIR evaluators also attended all of the COA meetings at which the Committee reviewed team reports for all institutions visited.

To ensure consistency of site visit procedures, we developed a detailed training guide and provided training to each observer prior to their first visit. The training guide used by AIR evaluators is included in Appendix C. An interview protocol was developed and after each site visit, there was a formal debriefing with project staff to discuss the dynamics of the visit, how the accreditation process flowed throughout the visit with the AIR evaluators, and how well AIR procedures and data collection instruments worked. Feedback from the debriefing sessions informed revisions of future data collection activities and helped make further refinements to our procedures and data collection instruments.

Criteria for Selecting Case Studies

All institutions up for accreditation (including revisits) each year were considered as a potential case study sites. To ensure that a diverse group of institutions were represented in the case studies, AIR identified salient information from the *Framework* and developed criteria for selecting institutions to site visit. Table 1 identifies the criteria used to select case study site visits.

Table 1. Criteria for Selecting Institutions to Site Visit

Geographic Location	Equal representation from northern and southern California was preferred
Type of institution	One institution from the following types: CSU, UC, public, private, alternative philosophy
Institutional size and number of programs under review	Size of education department and range of programs under review, how many programs will be reviewed
Kind of programs being reviewed	Special education, reading, CLAD, BCLAD, etc.
Type of accreditation visit	COA revisit, joint COA-NCATE visit

Experience of the CCTC consultant	Diversity in level of experience as a consultant on the team
Standards and program options	Experimental standards, national standards, California program standards

These criteria were used to select half of the CCTC scheduled accreditation visits for our observation case study visits. After the first round of site visits, we again reviewed our data collection procedures with CCTC staff and IHE representatives. Based on their feedback, we further modified our data collection procedures because attempting to conduct interviews during the visit was disruptive. Therefore, we abandoned that practice in favor of simply observing the accreditation process. When possible, informal interviews were conducted with CCTC staff and team members in between their interviews and during meals when the team was not meeting. Overall, CCTC accreditation teams visited 25 institutions during years 2000-2001 and 2001-2002, of which eight were joint CCTC/NCATE accreditation visits.

The revised sampling frame identified the four respondent categories to be interviewed as: consultants; accreditation team leaders and cluster leaders accreditation team members; deans, department chairs, institutional representatives, and faculty. Table 2 shows the number of interviews conducted at each institution, by the four categories across all case study sites during 2000-2002. To more easily identify those institutions AIR evaluators observed the accreditation process, they are identified in the table by **bold-face** type. Although only one "official" consultant on the visit, there was a "consultant in training" so at one institution two consultants interviewed for a total of 26 interviews (this number is not representative of the number of individuals interviewed as consultants served on more than one accreditation visit). Consultants and team leaders were always interviewed at each site (except for one institution that was revisited in 2002). For larger accreditation teams, cluster leaders were also interviewed. Any cell that contains three asterisks (***) indicates that information from these respondents was collected via the BIR survey. Overall 133 interviews were conducted. The last site visit in the first round of site visits was UC Davis. We also collected survey data from respondents *across* all accreditation site visits during (2000-2002) using the BIR survey, the IHE survey (a survey of university faculty), and the District Staff survey (a survey of district personnel, including graduates). Survey administration will be discussed later in this chapter.

Table 2. Participant Interviews Conducted 2000-2002

		Respondent Group				
Institution	**Type of Visit**	**Consultants**	**Accreditation Team Leaders & Cluster Leaders**	**Accreditation Team Members**	**Deans, Department Chairs, Institutional Representatives, Faculty**	**Count**
National Hispanic University (Pilot Site)	**Concurrent**	**1**	**1**	**2**	**1**	**5**
CSU, Bakersfield	Retrospective	1	***	***	2	3
CSU, Fullerton	**Concurrent**	**2**	**4**	**10**	**8**	**24**
Claremont Graduate University	Retrospective	1	1	***	2	**4**
CSU, Long Beach	Retrospective	1	***	***	2	3
Hope International University	Retrospective	1	1	2	2	6
Azusa Pacific University	Retrospective	1	***	***	2	3
La Sierra University	**Concurrent**	**1**	**1**	**4**	**2**	**8**
UC San Diego	**Concurrent**	**1**	**1**	**3**	**1**	**6**
New College of California	Retrospective	1	1	0	2	4
Pacific Oaks College (initial visit)	**Concurrent**	**1**	**2**	**4**	**5**	**12**
UC Irvine	Retrospective	1	***	***	1	2
UC Davis	**Concurrent**	**1**	**1**		**8**	**12**
CSU Stanislaus	**Case study**	**1**	**1**	***	**1**	**3**
Bethany College	Non-Case Study	1	1	***	1	3
Mount St. Mary's College	Non-Case Study	1	1	***	1	3
Humboldt State	**Case study**	**1**	**1**	***	**1**	**3**
University of San Diego	Non-Case Study	1	1	***	1	3
University of Redlands	Non-Case Study	1	1	***	1	3
University of San Francisco	**Case study**	**1**	**1**	***	**1**	**3**
CSU Hayward	**Case study**	**1**	**1**	***	**2**	**4**
CSU San Bernardino	Non-Case Study	1	1	***	1	3
Pacific Oaks College (revisit 2002)	Case Study	0	0	***	0	0
Cal Poly Pomona	Non-Case Study	1	1	***	1	3
Stanford University	**Case study**	**1**	**1**	***	**1**	**3**
National University	**Case study**	**1**	**5**	***	**1**	**7**
Total		*26*	*29*	*27*	*51*	*133*

* Concurrent—Data collection took place during the site visit.
** Retrospective—Data collection began during visit but continued after site visit as needed
*** Case study—AIR evaluators observed site visit.
**** Non-Case Study—AIR evaluators did not observe site visit.

The large number of interviews conducted with accreditation team members at Fullerton (10 of the 27 interviewed in this category) was the result of our original study design that called for data to be collected concurrently. However, based on feedback from the COTR,

CCTC staff, and institutional representatives it was concluded that attempting to conduct interviews during the accreditation visit, or even in the days directly after was not feasible, was too burdensome, and added another layer of stress that affected the accreditation process. As a result, we revised our data collection procedures, timelines, and the number of interviews we expected to conduct at each site. The interviews conducted across the remaining sites reflect the changes in the revised study plan.

The reason for five accreditation team interviews at National University is because this was a multi-site visit. Interviews with site leaders were conducted at each of the regional campuses visited by the AIR evaluators (San Jose and Sacramento); team activities at Southern CA campuses were observed through the team's teleconferences held throughout the visit.

Across stakeholder groups, the number of retrospective site visit interviews ranged between two and six; while for concurrent site visits (excluding Fullerton) the number of interviews ranged between five and twelve. For case study and non-case site visits, the average number of interviews across sites was ten; at other sites the number of interviews is fairly consistent at three per site; except one site that had four interviews. However, at a large multi-site IHE (National University), AIR evaluators interviewed accreditation team leaders at each of the locations observed, thus there were a higher number in this category. The interview protocols used to conduct these interviews are included in Appendix D. These include: Interview Questions for CCTC Consultants (initial and revised versions); Interview Questions for Accreditation Team Members (team leaders, cluster leaders, team members, cluster members); Interview Questions for Institutional Representatives (initial and revised version) for Coordinators, Program Directors, Deans, and Faculty; Interview Questions for Master Teachers, Field Work Supervisors, Principals and District Staff; Interview Questions for Credential Candidates and Graduates; and Interview Questions for Committee on Accreditation members. To understand which interview protocols were no longer used because surveys were used to collect data for the same constituent group, refer to the revised study design that describes these changes.

Survey Development and Administration

AIR surveyed three distinct groups: CCTC Board of Institutional Reviewers (BIR), individuals who go on accreditation site visits; IHE (Institution of Higher Education) cohorts from institutions that were visited and participated as respondents in accreditation site visits (e.g., program directors, deans, and faculty; and District staff who include employers, field work supervisors, and graduates).

AIR followed a rigorous approach to survey development. Most of the questions in the content area included on the surveys have Likert scales that allow respondents to indicate the degree to which they agree or disagree to statements or questions. Questions that elicit demographic data include ones about individuals' backgrounds and professional roles. At the end of the surveys, there are open-ended questions that allow us to collect additional qualitative data about the respondent' experiences and attitudes about the

accreditation process. All instruments and procedures were pilot tested. Based on feedback from the pilot test both instruments and procedures were revised and finalized. To minimize burden on respondents, all hardcopy surveys sent included a self addressed, stamped envelope for the respondent to return the completed survey. AIR developed three surveys as described below.

Maintaining Respondent Confidentiality

An important consideration for any data collection effort is maintaining confidentiality of respondent data. For this study, it was particularly important to protect participant confidentiality, because for some stakeholder groups there was a relatively small number of potential survey respondents and interviewees. To ensure confidentiality, AIR evaluators were careful to explain to respondents how the information and data provided would be used. We stressed to respondents that no identifying information would be reported back to the CCTC about any individual or institution response they provided, except in an aggregate form as presented in this report. The only information that would be reported to the CCTC was the contact information respondents provided in Part I of the BIR Survey that asked about a BIR member's availability for upcoming accreditation visits. This information was gathered yearly by the CCTC. This year it was collected as part of the AIR evaluation and reported to the CCTC for their planning and staffing of teams for accreditation site visits during the Spring 2002.

Every effort was made to establish procedures to protect the confidentiality of participants and to maintain the security of the materials and data, which included the use of unique ID numbers and procedures for following up with BIR survey non-respondents. To the extent possible, our data collection procedures made every effort to avoid asking the same respondents to respond to more than one instrument. However, it is unavoidable in cases where a person responded to the BIR survey and was also a key IHE stakeholder to be interviewed as part of the accreditation site visit. For each of the different data collection methods, we developed administration protocols, and pilot tested both the instruments and procedures. Feedback from the pilot test of the web-based BIR survey was especially critical to verify the technical ease with which the survey could be completed and the clarity of the questions. This test of the data collection procedures proved helpful in clarifying and streamlining our approach, instruments, and methodology.

Survey Instruments

Board of Institutional Reviewers (BIR) Survey

The Board of Institutional Reviewers (BIR) survey was to be completed by the entire universe of BIR members during the latter part of 2001. The BIR survey was created as two distinct parts: Part I: CCTC Survey Contact Information and Availability, Part II: AIR Survey. The information respondents provided and updated in the first part would be provided to the CCTC to assist them in determining who was available to staff accreditation site visits. BIR members were also asked to provide information about their credential and expertise. The availability of this information in electronic database would

allow the CCTC to quickly identify pools of team members who met specific criteria for a particular site visit. Part II asked BIR members to answer questions about their background and experience, training, and past accreditation visits. Other general questions were asked as well as five open-ended questions.

As a starting point for identifying this group, the CCTC provided AIR with a FileMaker Pro file that contained contact information for all BIR members. AIR, like the CCTC, wanted to make more extensive use of e-mail as the preferred method of communication with BIR members, so this electronic data file facilitated sending e-mails to inform BIR members of the availability of this survey on a secure Web site. Although the file contained 347 individuals, it lacked current contact information for 22 of these individuals, leaving 325 individuals as the universe of possible BIR respondents to whom we could send surveys. E-mail messages were sent to this group, along with a letter from the accreditation administrator, notifying these BIR members about the evaluation study and survey they were asked to complete.

The e-mail provided a URL that allowed respondents to visit the secure Web site created specifically for the project directly from their browser, learn as much about the study as they desired, and access the survey. From this initial group, about a dozen e-mails were returned undeliverable. For these undeliverable e-mails we attempted to obtain current contact information so we could resend to the current address. When completing the survey, respondents could send an e-mail requesting technical help or asking content questions. Requests for paper copies of the survey were sent via regular mail. The questions on this survey were designed to ask the BIR member about his or her direct experience in the CCTC's accreditation process. Therefore, inactive BIR members only had to respond to the questions about their availability and credential background, since they could not report on their site visit.

It is the experience of electronic survey developers that most responses to an electronic survey occur within 48 hours of its receipt. Accordingly, a week after the first e-mails were sent to participants about the web-based survey, a follow-up e-mail message was sent to all individuals who had not yet responded. To maximize response rates, we sent a series of reminder notices and letters (via e-mail and US Postal Service) to encourage respondents to complete the survey. All remaining non-respondents were sent a third reminder in the form of a hard-copy memorandum from the CCTC.

As the BIR surveys were returned, they were logged in daily to prevent these respondents from being bothered with follow-up requests to complete their surveys. Data on completed questionnaires were checked for errors, missing data, and items with more than one option checked (applies only to paper copy). Open-ended responses were sanitized, so the respondent or the respondent's institution could not be identified, then coded so that they could be quantified.

It is important to note that unlike for the BIR survey where non-respondents were followed up to ensure a reasonable response rate (72 percent), for both the IHE and DS surveys, because of budgetary constraints it was not possible to conduct any follow up

with non-respondents. Had follow up been possible, our response rates for these groups would likely have been higher. The response rate for the IHE survey is 24 percent while the DS survey response rate is 14 percent. The authors want to caution the reader that these low response rates do not allow for methodologically sound analyses, as statements made by these respondents cannot be generalized to the group as a whole. However, as we did not want to discard the value of the qualitative responses to the open-ended questions asked of these constituents, the information from these questions was coded and quantified and then presented anecdotally in this report. We felt this perspective was important since it mirrored some of the same concerns expressed by respondents of the BIR survey, suggesting that a correlation may have evolved if a more substantial response rate had been achieved for either the IHE or DS surveys

Out of the 325 possible BIR members, 238 respondents completed BIR surveys for a response rate of 72 percent.

IHE Faculty Survey

The survey of Institutions of Higher Education (IHE Survey) representatives was administered to individuals involved in the accreditation process, such as deans, program directors, department chairs, credential analysts, faculty (both full time and adjunct), and other individuals involved in coordinating the visit and/or preparing the institutional preliminary report and Institutional Self-Study reports. The survey, which was distributed in hard copy through the U. S. Postal Service, asked participants questions about their most recent accreditation experience, their views of the management of the visit to their institution, and their attitudes toward the Commission's attributes of accreditation.

The IHE survey was mailed to 806 individuals; larger programs were sent between 50 to 60 surveys, medium programs were sent between 25-35 surveys, while the smaller programs were sent no more than 10 surveys. Most, if not all, faculty and administrators in an institution's teacher preparation program, who had any involvement with the accreditation visit, were contacted to complete this survey as described in the revised sampling plan. As previously noted, budgetary constraints prevented follow-up with IHE and DS survey respondents. The survey asked respondents questions regarding the extent to which they felt prepared for the site visit; their thoughts about the team structure, size, expertise, and organization; the accreditation review, adequacy of standards, and attributes, as well as five open-ended questions, which we later quantified.

The IHE survey asked questions about respondents' position and experiences with the CCTC accreditation process. Using 3- and 5-point Likert scales, respondents were asked how prepared they felt for the CCTC site visit; their impressions of the overall CCTC team structure, size, expertise, and organization; about the preparedness of the CCTC team for conducting the accreditation review; about the adequacy of standards for assessing their program; and about the attributes of accreditation in the accreditation process. Respondents were also asked five open-ended questions:

1. What one thing you would change about the current CCTC system?

2. What do you find "most" effective about the current CCTC accreditation process?

3. What do you find "least" effective about the current CCTC accreditation process?

4. Do you think you are better served with the *Accreditation Framework*?

5. Is there anything you would like to add that was not asked on this survey?

Of the over 800 IHE surveys sent, 196 surveys were completed and returned for a 24 percent response rate. The 196 respondents represent the following positions: 29 adjunct faculty, 34 administrators, 95 ladder-rank, and 38 individuals from the other category and represent 26 different institutions (15 other institutions were not counted as they did not provide information about their affiliation). The highest number of respondents from a single institution is 19; the lowest is 1. Of the 196 respondents, 124 stated they had participated in other accreditation visits prior to this year's visit by the CCTC, and of the 55 that responded to this question, only 18 indicated that it had been with a CCTC accreditation visit. Of the 196 faculty respondents to the IHE survey 170 wrote open-ended comments.

District Staff Survey

The District Staff (DS) survey was distributed to graduates, master teachers and employers of candidates at institutions accredited in 2000-2001 and 2001-2002. These respondents were identified through the site visit interview schedules to assure that only those individuals contacted by the accreditation team were asked to answer questions. The survey, sent as hard copy, asked respondents about their participation in the accreditation visit. As with the IHE survey, budget constraints prevented follow up with individuals who did not complete the District Staff Survey.

The DS survey asked questions about respondents' position in the school or district and whether they were interviewed by the CCTC team; their impressions about the relationship between IHE and school or district; when the respondent was first contacted about being interviewed or visited by the CCTC accreditation team; and impressions about the accreditation team member who interviewed them. Respondents were also asked three open-ended questions:

1. What do you think was "most" effective about the CCTC accreditation interview and/or site visit to your school or district?

2. What do you think was "least" effective about the CCTC accreditation interview and/or site visit to your school or district?

3. Is there anything you would like to add that was not asked on this survey?

Overall, 712 district staff surveys were sent across both years of data collection, and for the second round, respondents were directly tied to those interviewed during the accreditation visit. Overall, of the 712 district staff surveys sent, 103 surveys were completed for a 14 percent response rate. The two categories with the highest response

rates were for the school principal (39 respondents) and elementary school teacher (35 respondents). Of the 103 district staff respondents 96 wrote open-ended comments.

As noted previously, because of low response rates from both the IHE and DS surveys, these data were not analyzed. However, in order not to lose the richness of the data provided in the open-ended questions from these constituent groups, we coded and quantified responses that asked these individuals what they thought was "most effective" and "least effective" about the current CCTC accreditation process. Faculty and district staff alike wrote most comments about "external review" about "peer review" second, and "standards-based" third. The least commented-on category was "current quality rather than over time" which received comments only from faculty respondents. In order to triangulate information from all constituent groups it is important to include information from these constituent groups, so anecdotal information from these open-ended questions are included in the findings chapter along with BIR, interview, and observation results.

Copies of the three survey instruments and cover letter used with each survey are included in Appendix E. For the Board of Institution Reviewers (BIR) survey we include the hardcopy version of the survey; which was developed to closely resemble the Web-based version of the survey. The Institution of Higher Education (IHE) and the District Staff (DS) surveys were administered during two 2000-2001 and 2001-2002 and are identical in content. The only difference is that the cover changes in color in order to facilitate the ease in identification and more easily differentiate between the 2000-2001 and the 2001-2002 versions of the survey for data entry.

Database Development

Throughout the entire project, efforts were made to obtain from the CCTC all relevant documents and electronic files that would aid AIR in the evaluation of the *Accreditation Framework*. Toward this end, AIR gathered an extensive inventory of CCTC documents that were used for a variety of purposes throughout the project, for example, self-study reports for accreditation site visits, and COA and CCTC meeting minutes. Information captured from these sources was stored in electronic files.

Document Review Database

This database captures information from key documents including, but not limited to: 1) institutional self-studies, preliminary reports, and pre-condition reports, 2) accreditation team reports, 3) COA Annual Report to the CCTC, 4) CCTC and COA meeting minutes, and 5) *Accreditation Framework* and Handbook. The database was designed to allow us to capture key information about each site visit, and to organize and synthesize information about accreditation decisions from all institutions visited between 1997 and 2002 for 61 plus institutions.

Key pieces of information for the Document Review Database were captured from the accreditation team reports. Examples of questions we tried to answer were: the relationship between the accreditation recommendation and the number of strengths and

concerns identified by common or program standard; whether the number of met or not met decisions for standards had an overall impact on the accreditation decision; whether different standard options the institution chooses to have its programs measured against impact the size of the team; and the relationship between the number of concerns and/or professional comments made and the accreditation recommendation. This database also provided a summary of accreditation decisions as shown in Table 3.

Table 3. Accreditation Decisions Across IHEs (1997-2002)

Accreditation Decision	CSU	UC	Other	Totals
Accreditation	5	9	15	29
Accreditation with technical stipulations	6	1	10	17
Accreditation with substantive stipulations	7	0	8	15
Accreditation with probationary stipulations	0	0	0	0
Denial of accreditation.	0	0	0	0
Total	18	10	33	61*

*The total across the three categories is only 61 because one report had incomplete data.

When we compared the accreditation decisions across the 61 institutions to the number of common standards and program standards that were met or not met, we found it difficult to establish a relationship. Two-thirds of the 29 institutional reports with "accreditation" recommendation decisions were easy to interpret as all common and program standards were noted as being fully met. However, the remaining one-third of the reports showed variation from at least one common standard noted as "not met" to as many as three program standards found to be "met minimally," "not fully met," or "met minimally with qualitative concerns," yet the same accreditation decision was reached.

For the 17 institutions receiving "accreditation with technical stipulations" we found anywhere from two to seven program standards listed to be met minimally with qualitative concerns. Similarly for the 15 institutions receiving "accreditation with substantive stipulations" we found as few as four common standards met minimally to a high of at least five program standards across several programs met minimally with qualitative concerns.

Profile Development Database

The data used to develop the Document Review Database was also used to write profiles of the Institutions of Higher Education (IHE) that had their teacher preparation programs accredited by the Committee on Accreditation. These profiles were written to help analyze and compare the accreditation process across institutions. The 12 new profiles for site visits in 2001-2002 differ from the set of 40 profiles written for the Year One Report in a number of ways. The new profiles are written using fieldwork observations on accreditation visits and interviews conducted during or after the visit, while profiles of institutions not visited by AIR staff relied upon in-depth telephone interviews with

consultants and key institutional representatives. In all of the profiles, notes from COA meetings at which those institutions' visit reports were discussed were used, along with the team reports. The profiles focus on both the process of accreditation—from team visit to Committee on Accreditation decision—and on the visit itself. Everyone interviewed, either on-site during an observed visit or afterward in a retrospective interview, was assured confidentiality.

Site Profiles

For each of the accreditation site visits conducted under the *Accreditation Framework*, we developed site profiles that included the following information about:

1. Latest accreditation visit, including team recommendation;

2. Initial accreditation visit, includes some background about previous visit and information about current team makeup, documents reviewed, number of interviews conducted, and team recommendation;

3. Common standards and specifics about which were and were not met;

4. Program standards and specifics about which were and were not met; and

5. Institution's response to any stipulations in the teams recommendation report and progress made by the institution in removing stipulations noted by the accreditation team.

Initially, AIR proposed to expand the profiles to include more in-depth descriptive information and analyses, including: comparison of the site visit reports; the *Accreditation Framework* and *Handbook* to determine adherence to prescribed procedures; focus and intent of the consultant's section of the site visit report; comparison across sites of report content; similarities and differences in prescribed procedures; analysis of documents created by each institution; number of interviews conducted by size, type of institution, composition of teams, and program type; in-depth analytical and inferential analyses about each visit; and expansion of questions for the telephone interviews with CCTC consultants, team leaders, team members, and institutional staff. After further examination of the documents to be used and consultation with the project COTR, it was jointly decided that any further development of the profiles would not be as beneficial as initially envisioned and therefore, no additional work would be done on this effort.

Other Data Collection Activities

Interviews with COA Members

To better understand the role of the COA, as well as the process by which its members are selected, we conducted interviews with several COA members in 2001 and 2002. The purpose of these interviews was to obtain background and contextual information about the development of the framework. Interview information was captured electronically to enable searching to conduct qualitative analysis of the data. Each interview conducted was transcribed. These electronically transcribed interviews were used to summarize the qualitative data presented in this evaluation.

We first interviewed those members who were not new to the Committee in the fall of 2001. Then, as newly appointed members gained more experience, they were interviewed about their service on the Committee. In total, 14 past and present COA members were interviewed, responding to questions about the COA appointment process, the *Accreditation Framework*, COA-BIR relations, and their decision-making processes. In addition we interviewed key stakeholders for case study visits and profile development as well as key individuals recommended to us by the COTR. Table 4. Summary of Interviews by Stakeholder Group, 2000-2002, shows the number of interviews conducted by the four key categories.

Table 4. Summary of Interviews by Stakeholder Group, 2000-2002

Category	Interviews Conducted
CCTC Consultant*	26
COA members (past and present)	14
IHE stakeholders	51
Accreditation Team (Leaders & Members)	56
Total	147

*This number is not representative of the number of individuals interviewed as consultants served on more than one accreditation visit.

Attendance at State Meetings

Each month for much of the last two years of the evaluation, we attended CCTC meetings in Sacramento to observe the process at various stages as well as COA meetings at which accreditation visit reports were up for consideration by the Committee. In addition, AIR staff observed two COA new member orientations and attended two BIR training sessions.

Data Analysis

Upon return of surveys, completed instruments were checked for accuracy and completeness. Surveys were reviewed to ensure that skip patterns were followed correctly and that only a single response was given to each item. “Other (please specify)” items in which only a single response was requested were reviewed and coded back into pre-

existing categories whenever possible. Open-ended responses were coded and quantified. Research assistants entered survey data for the IHE and DS into Excel spreadsheets and conducted 100 percent verification of all data. Data anomalies were resolved, a SAS data file was prepared, frequencies were run, and data inconsistencies were checked against hard copy to permit resolution of problems.

Data for the BIR survey were entered into the Web form, then downloaded into SAS for further cleaning and analysis. Careful efforts were undertaken to verify that duplicated records were eradicated (those people that had trouble on the web version completed a hard copy version of the survey form). We also went through each item, checked the coding, made sure skip patterns were correct, and if not, we went back to the original data entry to try to resolve any discrepancies (i.e., that the data entered was not "out of bounds" with what the possible answer choices were). Then we created breakout groups, combining data from respondents who were reported as being UC, CSU and Private school faculty under "IHE" and anyone who was part of a district, school, or county office of education was included under the "K-12" category. Then we recoded data for those who answered "other" and "retired", whenever possible, by going back to the original BIR database and using their employment records to divide respondents into one of the appropriate categories.

In the next chapter we present our findings from the data collection effort including interviews, surveys, and site observations.

Chapter 3: Findings

The purpose of this study was to evaluate the process and procedures of the *Accreditation Framework* and Handbook as discussed in the previous chapters. This chapter addresses the extent to which these processes and procedures were implemented and presents our findings grouped by the elements of the analytical model we describe in Chapter 1. The seven elements are: 1) use of standards, 2) institutional focus, 3) peer review, 4) self-reflection on internal improvement, 5) site visit, 6) frequency of review, and 7) current quality rather than over time. For each element we discuss how the CCTC implemented the Framework model and present testimony from interviews and surveys of key stakeholders, and observations of site visits conducted over a two-year period, as well as information gained from reviewing documents. Some of the findings are quantifiable and in those cases we provide percentages of respondents by category type along with reporting on a particular process or procedure.

More specifically, we discuss the findings from interviews conducted with key stakeholders across all accreditation site visits conducted by the CCTC during 2000 - 2002. At 12 of these site visits, AIR evaluators were on hand to observe the accreditation team throughout the site visit. The remaining 12 sites are what we call "non-case study" visits, meaning these did not include the observation component that "case study" visits did. For non-case study sites we also interviewed respondents by telephone as soon after the accreditation site visit as possible.

The findings presented here are also based on the 133 accreditation participant interviews across the four interview categories during the period 2002-2002, 14 interviews with COA members—past and present, 238 respondents to the BIR survey (57 percent were IHE respondents and 43 percent were K-12 respondents), 196 IHE survey respondents, and 103 District Staff survey respondents. We also observed COA meetings, and reviewed documents, observations and document reviews, which also contributed evidence to our findings.

Accreditation is Standards-based

The *Accreditation Framework* has clearly stated policies regarding the quality and review of teacher training units and credential programs against specific common and program standards. Specifically, Attribute 1 "Orientation to Quality," of the Seven Essential Attributes of Accreditation focuses on the educational quality of educator preparation. It states that accreditation standards should describe acceptable "levels of quality" and not focus purely on technical or operational aspects of educator preparation. Another component is the requirement for compliance that is addressed in the precondition report the institution prepares prior to the site visit. Clear evidence of the process' orientation toward standards is found in the *Accreditation Framework* and Handbook, and in the

institutional self-study reports, which are the institution's responses to the sets of standards against which they have chosen to be measured.

The characteristics and assumptions of standards-based accreditation, as described in Chapter 1, rests on the notion of quality, validity, and flexibility. The Framework includes a process that is clearly focused on specific standards for reviewing educator preparation units and credential programs. The CCTC offers five program standard options: California Program Standards (which most IHEs use for their basic credentials), national or professional standards, general standards, experimental standards, and alternative standards. These options give IHEs a great amount of choice and flexibility in selecting sets of standards from which to respond for their programmatic review. The fact that most institutions do not take advantage of the full range of options available to them was noted in this study, but the specific reasons for institutions' choices were not investigated.

The training for new BIR members, which AIR observed on two occasions, devotes a good amount of time to discussing both common and program standards, including small group discussions and analysis of common standards. Likewise, during the observations at the 12 site visits, we saw team members go about the task of determining if an institution operated a program that met levels of quality as described in the *Framework*.

IHE respondents in general have a favorable view of the CCTC standards and consider them to be rigorous and effective measures of quality. Representatives at 26 institutions were invited to complete IHE surveys. The 170 out of 196 total faculty respondents to the IHE Survey who wrote open-ended comments made 33 comments about standards, 22 of these comments were positive or neutral about standards. The 11 negative comments expressed the view that the CCTC's standards are prescriptive and stifle creativity and innovation in the methodologies of preparing educators. When asked what they considered to be the most effective thing about the CCTC's accreditation process, four of the 33 respondents volunteered that they considered the standards to be the most effective thing. Respondent concerns about standards revolved around issues of clarity, consistency, and fairness of multiple interpretations of instructions; appropriateness of alternative instructions; and worries and confusion regarding CCTC instructions to the 2042 standards.

While the process is clearly oriented toward quality, accreditation teams are not always approaching it from the same playing field as was observed during site visits. Some team members are not as well prepared for the task because they may not have adequate examples, indicators or definitions to assist them in making a decision about quality of the program, which introduces a subjective element to a process. Below we list some of this testimony.

- **Some respondents identified a disconnect between the language of the standards and the team's judgment of institutional performance against those standards.**

Among respondents from institutions visited in 2001, the main issue related to the CCTC standards was the possibility of different interpretations of the standards. Individuals at

three of the 12 institutions (two non-case study sites, one case study site) expressed the view that the language of the standards was too vague and allowed too wide a variety of interpretations and emphases on the part of teams and IHE representatives. Based on interviews conducted in 2002, IHE representatives continued to express concerns about vagueness of the standards, while others believed that the standards for at least one credential program were out of date with recent scholarship and discouraged rather than rewarded innovation.

An example of this issue of different interpretations is that two of the 24 IHEs accredited in the past two years (both non-case study sites) have been cited by teams as failing to meet Common Standard 3 (Faculty) for lacking a diverse faculty. One of these IHEs was also found not to have met Common Standard 1 (Institutional Leadership) for this same reason. However, the language of Common Standard 3 states that faculty reflect and are knowledgeable about cultural, ethnic, and gender diversity."[1] The term "reflects" is an important part of the standard and could lead a team to make these kinds of decisions.

In interviews, representatives of these IHEs disagreed with the findings on the Faculty common standard and objected to the teams' suggestions that a lack of diversity among their faculty meant that they had not fully met the standard. We are not aware that either institution formally objected to the COA, or that they appealed the team recommendation or the COA decision on their accreditation statuses of "Accreditation with Substantive Stipulations" and "Accreditation with Technical Stipulations."

These different interpretations point to possible shortcomings in the language of the Standards that can result in inconsistent understanding by consultants and program sponsors as to the interpretation and application of the standard. The consultant and IHE should spend time during the planning phase to examine the standards during their pre-visit meetings. Further, consultants should routinely review with team members at the beginning of a site visit the applicability of the standards, especially for newer team members.

Furthermore, state law now makes it illegal to use race or gender as a criteria in decision-making in the public sector, meaning that not only can universities *not* use race or gender as a factor in hiring, but the CCTC cannot write diversity into its standards without being vulnerable to legal challenge.

While this example focuses on the findings at only two institutions out of 24, it is still worth noting given the nature of the findings. Negative findings on Common Standards

[1] The full language of Common Standard 3, Faculty, is: "Qualified persons are hired and assigned to teach all courses and supervise all field experiences in each credential preparation program. Faculty reflect and are knowledgeable about cultural, ethnic, and gender diversity. The institution provides support for faculty development, and recognizes and rewards outstanding teaching. The institution regularly evaluates the performance of course instructors and field supervisors, and retains in credential programs only those individuals who are consistently effective."

are considered by IHEs to be more serious than those on program standards because the Common Standards address literally issues common to the unit and all of its programs. IHEs are highly sensitive to negative findings on Common Standards 1 and 3 in particular because these standards speak to core elements of an institution, its administration and faculty. Therefore, team findings on these standards carry great weight with IHEs.

With this example, there are two issues that the CCTC may need to consider. One is that given the current legal climate in the state in regards to affirmative action, the CCTC and teams could be vulnerable to charges by IHEs of imposing personal values on IHEs in accreditation reviews and of attempting to write diversity into its standards. The other issue is the question of the lack of consistency in terms of teams' findings on these standards; in the case of one IHE only Standard 3 was found less than fully met; in the case of the other, a different team found both Standard 1 and Standard 3 less than fully met for the same issue, a lack of an ethnically diverse faculty. One IHE representative from a 2001 non-case study site who has also served on CCTC teams commented on "how important it is to have a team that can look at the standards but know that there is more than one way to measure a program's quality against [the] standards". This respondent expressed the concern that in some cases teams crossed the line between using the standards to measure the quality of a program and judging the *method* by which a program seeks to meet the standards. The Framework is explicit in the Third Attribute of Accreditation, Breadth and Flexibility, that institutions must have the freedom to meet the standards in their own ways and that teams may not favor or penalize one method of educator preparation over others.

Two other IHE representatives from institutions accredited in 2001 and 2002 (one a case study site, the other a non-case study site) also expressed the view that their programs were found to be lacking against the standards only because team members disagreed with program philosophy and practices, and that the findings on those programs' performance against the standards would have been different if different team members had reviewed the programs. The subjective nature of the reviews, due to the fact that different teams visit institutions, causes IHEs to be concerned about the fair and consistent application of the standards across institutions. Another 2002 case study site representative also voiced the opinion that while she thought the CCTC's standards were rigorous and of high quality, they also tend to encourage "check-list" thinking on the part of team members, in reference to the CCTC's old compliance model for accreditation. The alleged subjective nature of the standards is of concern, especially with the implementation of the 2042 standards. Some IHE representatives remain concerned that the new 2042 standards are increasingly prescriptive with the standards' required elements and violate their academic freedom, allowed under the Framework, to design and implement their programs as they believe is best. It is important to note that these concerns were expressed by a small handful of respondents and that we have no way to test the reliability of their judgments or opinions.

- **The growth of non-traditional institutions and programs raised questions of whether the current set of options for program standards adequately meets the**

needs of IHEs and whether the standards themselves are appropriate benchmarks for non-traditional institutions.

The first question is simpler to address. The five options of program standards – California, national or professional, general, alternative and experimental – give IHEs great freedom of choice, but few take advantage of many of these options. Except for a few specialized programs, such as school nursing and speech therapy, most credential programs are reviewed using the California program standards. Only two institutions have written alternative standards that have been approved by the COA, and IHEs infrequently design an experimental program. Despite the infrequent use of these options, it is still worth keeping some, if not all, of these options. This will be discussed further in the recommendations section.

The question of whether the Commission's standards themselves are valid measures of programmatic quality at alternative institutions is much more challenging but is becoming increasingly important as the number of these institutions grows. This past year, the CCTC reviewed an alternative institution with the largest teacher preparation program in the state, and within the next few years the Commission is scheduled to visit other similar institutions. While the number of these IHEs is small, the fact that these institutions train large numbers of California teachers prompts us to ask whether the CCTC's standards are appropriate and valid measures of quality at these institutions, given that they were developed for traditional IHEs using an academic model of service delivery. BIR members involved in visiting a non-traditional IHE expressed concern that this institution, when measured against the CCTC's standards, failed to perform satisfactorily, yet the team believed they found clear evidence of programmatic quality. These team members did not believe that the standards were the best measure of quality of this institution. The appropriateness of reviewing these institutions against standards developed for traditional IHEs using an academic – vs. corporate or business – model needs to be considered by the Commission when granting initial accreditation to such institutions and when these IHEs submit program proposals to the COA.

- **The transition process to the 2042 program standards generated confusion and stress on the part of some institutions.**

While the CCTC is in a state of almost constant transition from one set of standards to another for programs, discussion of the implementation of the 2042 Standards is necessary given the impact these new standards are having on institutions. Unlike sets of standards for some specialized credentials, such as School Social Work, the 2042 Standards impact virtually every institution preparing teachers because they address the basic credentials of multiple and single subject. The CCTC acknowledged the significance of the 2042 changes when it implemented the Early Adopter program and offered financial incentives and assistance for institutions to respond to the new standards sooner, rather than later. Also, the change from "factors to consider" to "required elements" has affected the decision-making process of accreditation teams, which makes the 2042 Standards worth the extra attention it is receiving here.

In 2000-2001, IHE respondents reported their anticipation and concerns about the 2042 Standards, which at that point had been approved but not yet implemented. These concerns focused on the amount of time and effort institutions would need to devote to rewrite their basic credential program documents.

In this first year of CCTC reviews of IHEs under the 2042 Standards, university representatives began alternately warning and complaining to the COA about the amount of work involved in preparing documents for accreditation review in the new credentialing system. In 2002, if an IHE recommending candidates for Multiple Subject, Pupil Personnel Services, Special Education, and Educational Administration was reviewed for accreditation, there were potentially two new sets of standards to which the IHE would have to respond: 2042 Standards for the Multiple Subject credential, adopted in 2001 and the new PPS standards adopted in late 2000, along with the existing sets of program standards for Special Education and Educational Administration.

More than one IHE representative appearing before the COA this past spring commented upon the sense of increasing burden that IHEs have in simply preparing all of the required documentation for accreditation, in addition to redesigning their programs to meet the 2042 standards for teacher preparation, subject matter preparation, and induction.

Also, one CCTC staff member voiced concern that in the future more team members could be needed in the basic credential cluster to review using 2042 Standards, and the required elements, which are "mini standards." On the other hand, one BIR member visiting a non-case study site expressed the view that reviewing Multiple and Single Subject credential programs under 2042 was actually easier than expected because the close relationship among elements within a standard allowed for the application of evidence for one element to another. Whether evaluating programs using the 2042 required elements would be faster and easier or slower and more difficult still remains to be determined, and it could be that the standards facilitate review in some cases and hinder it in others.

Although not part of the original scope of this project, once the 2042 standards were implemented and became part of the accreditation process, they became part of our review process. Several factors complicated our review of the impact of the 2042 program during the accreditation process. The IHEs reviewed under 2042 standards in the spring of 2002 faced the situation of being reviewed for accreditation before their program documents had been reviewed and approved by the 2042 panel and before they were able to accept students into their new programs. In fact, it was possible for accreditation teams and the 2042 panel to express concerns about totally different aspects of a program. It was also possible for an early adopter to be accredited by the COA but not have its program approved by the 2042 panel until later.

Furthermore, at one institution, the IHE became an early adopter so late they were not able to receive the early adopter grant but were still allowed to write their program documents to the new standards in order to avoid having to write new program documents for the 2042 panel after the accreditation visit. There is a question of whether the IHE should have been discouraged from pursuing this option, given the fact that it had new leadership

and a program with enough problems that the team ended up recommending accreditation with substantive stipulations.

Several IHE representatives at early adopter institutions reported confusion about how to prepare for their accreditation visits using the new standards. One non-case study site respondent reported initial confusion and difficulty in finding exactly which sets of standards to write to because her IHE was responding to the 2042 Standards for MS and SS, as well as other program standards. Nearly all of the IHEs visited in 2002 reported difficulty in getting clear, consistent information about how to handle 2042's replacement of the CLAD Emphasis add-on program with the new requirements that program sponsors infuse preparation to teach English learners into all MS and SS programs. There has been much confusion among consultants and program sponsors about 2042's relationship to CLAD because preparation to teach English Learners is supposed to be infused into all programmatic elements, not separated into a distinct certificate, (i.e., CLAD.) Sources of this confusion come from related contextual issues: (a) CLAD Emphasis was an add on, not part of the basic credential; (b) most single subject candidates did not previously add the CLAD Emphasis to their programs and for them the infusion of ELL instructions into their programs was a significant change; and (c) district intern programs by law could not offer the CLAD Emphasis, so candidates seeking this emphasis did all the coursework needed, applied for a basic multiple or single subject credential, and then immediately afterwards applied for a CLAD Certificate, a certification pathway primarily intended for experienced teachers. The legislation requiring this change was AB 1059 (Ducheny, Chapter 711, Statutes 1999) and not 2042, which preceded it by a year.

At one case study site, there was confusion and debate between the CCTC and the institution about whether it was possible to be an early adopter but not be reviewed by the accreditation team against the 2042 Standards. That this was an option was not clear to other IHEs who were also early adopters. This case study site argued that it was illogical to be reviewed for accreditation against standards for programs that had not yet been approved through the Commissions initial program review process.

Another IHE representative from a non-case study site expressed the view that CCTC consultants and other staff are less secure with 2042 and could not easily and quickly answer questions about the new standards and their impact on the accreditation process. As with any new process, this initial apparent lack of familiarity and security on the part of CCTC staff contributed to the level of anxiety on the part of IHEs transitioning to the 2042 system in Spring 2002.

The CCTC appears to have a well-established and well-functioning transition process to move institutions from one set of standards to another, with sufficient flexibility to allow an IHE in Spring of 2002 to be visited by accreditation teams before their multiple and single subject program had been reviewed by the 2042 panel. Based on field observations there continues to be confusion on the part of institutions about the transition to 2042 and the process does not appear as streamlined as it could be.

- **Most respondents have a positive outlook on the implementation of the 2042 standards, but some are concerned about what they perceive as increasing prescriptiveness and inflexibility in the new standards.**

In addition to the confusion and anxiety about the implementation of new program standards, there is a sense among some IHEs that the 2042 standards are more prescriptive than the previous version of the California Program Standards for Multiple and Single Subjects. Some respondents believe the standards contain a level of specificity that interferes with an IHEs' ability to implement their programs as they believe is best. This notion of academic freedom is an essential element of the *Accreditation Framework*.

Two IHE representatives from a case study site made this comment about the 2042 Standards. Whether it is correct or not, there is a perception among some in the field that much of the driving force behind the new standards comes from outside the CCTC, particularly the State Board of Education, and these respondents are concerned about people outside of education politicizing teacher preparation. They are also concerned that this external political pressure is compromising the Framework's clear commitment to academic freedom in Attribute 3, Breadth and Flexibility.

- **Some IHE staff reported challenges with the coordination of NCATE and CCTC standards, which COA and CCTC have already begun addressing.**

Last year, the alignment of CCTC and NCATE standards was more of an issue for IHEs because NCATE was still in the process of implementing its new NCATE 2000 Standards, and most institutions being accredited under both processes faced the challenge of preparing a self-study report that responded to the standards of both agencies. In 2001, the preparation for, and coordination of, merged CCTC-NCATE visits began to be more efficient due to new flexibility introduced into the California-NCATE partnership. One institution was given the option in the early spring of 2001 to pilot writing to the six NCATE 2000 Standards in lieu of responding to the eight CCTC Common Standards. This visit was successful, and in the fall of 2001 another institution hosted a merged visit with the approved option of responding to the NCATE Common Standards. This option appears to be making the preparation for merged CCTC-NCATE visits more efficient for institutions.

IHE representatives at one case study site seeking NCATE accreditation this year reported that exercising the option of writing to the NCATE Standards greatly facilitated their planning for the visit; difficulties, however, arose with the process of writing the team report. Although the COA approved the team's use of the NCATE team report format, the report that the BIR team submitted to the COA used NCATE language and not CCTC language regarding some of the standards, which confused some members of the COA at the meeting at which this report was presented. For some NCATE standards, both fully and minimally met, the team added stipulations. In the collective mind of the CCTC team this was valid because the IHE wrote to the NCATE Standards and so should have been held accountable to those standards, not the CCTC Common Standards.

However, within the California process, there is no option of designating a standard "met with stipulations," as the team wrote in its finding on some of the standards. In the cases where a standard was found to be *met minimally with a stipulation*, CCTC staff changed the team report to be *met minimally with qualitative concerns* when it developed the report into an agenda item for the COA. But in one instance, for NCATE Standard 5 (CCTC Common Standard 3), Faculty, the team found that the standard was *met but with a stipulation*. CCTC staff chose not to change this finding and brought the question of the proper designation to the Committee at its January 2002 meeting as an in-folder agenda item that explained staff changes and the rationale behind those changes. At that meeting the COA voted to remove the stipulation from the finding on that standard because the team did not follow the CCTC Handbook in its decision-making or report writing processes.

The COA expressed concern that the team was asking it to judge the IHE's accreditation status against NCATE standards rather than the CCTC standards, which the Committee was not prepared to do. In addition, COA members were concerned about how the CCTC staff had changed the report, between the time when the team submitted the report to the IHE at the end of the visit and when the report was presented as an agenda item to the COA. As a result of these discussions, the COA indicated how it wanted to deal with the differential language between the two sets of standards in future reports, Teams on merged CCTC-NCATE visits have become more attentive to using the proper language for each type of report, and this problem has not occurred on subsequent merged visits.

How to reconcile reports written to NCATE Standards (as approved by the COA) and the application of COA decision-making rules needs to be further addressed by the COA. Further, issues that disrupt the process, such as the need to refine a report after the visit, would be resolved with more explicit direction on how the two processes articulate.

There is also the problem that some BIR members who serve on these new merged visits are not as familiar with the NCATE Standards as they are with the CCTC's Common Standards, and this can allow the opinions and judgments of NCATE team members to drive the decision-making process in state team discussions. On all of the case study merged site visits in 2002, AIR's evaluation team observed BIR team members to demonstrate confusion between the two sets of standards in merged team discussions, and those who were not serving on the Common Standards cluster often lacked written descriptions of the NCATE standards.

BIR members are expected to find evidence and come to judgments regarding standards; yet if they do not know and understand completely the standards with which they are working, the validity of their judgments can be called into question. Those opinions and judgments of NCATE team members might be correct; however it is the responsibility of BIR members to evaluate an IHE for the CCTC. Staff has acknowledged that BIR members typically contribute more to the NCATE process in their information gathering on merged visits than NCATE members contribute to the state process. This was also observed during the three CCTC-NCATE visits that were case study sites in 2001-2002.

The BIR is responsible for the state accreditation process; NCATE team members are responsible for their process.

These findings on issues related to standards support a positive conclusion to Research Question #1, "Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?" The development of standards and the process by which institutions self-evaluate their programs against these standards, as well as the means by which teams use the standards to judge the quality of IHEs' programs, are all detailed in the *Accreditation Framework* and Handbook as observed during site visits.

Institutional Focus

The assumptions about the process and value of focusing on the institution as the unit of accreditation rather than program accreditation identified in Chapter 1 can be summarized as: fostering greater coherence and collaboration, streamlining the accreditation approach, and allowing for a combination of information and judgments among program representatives.

The notion of institutional accreditation is a key component of the *Accreditation Framework*. Under the old program approval system, the Commission, which made accreditation decisions, had the option to shut down weak programs or put them on probation. The CCTC still has the option of denying accreditation and now has the "probation" category. Although the intention of the shift from program to unit accreditation was to emphasize the concept that an institution is only as strong as its weaker programs, the result has been that team members are reportedly reluctant to use the full range of options and penalize the entire IHE for one or two weak programs because of the concern that a single program weakness could affect the perceived value of other programs and of the institution as a whole. Since the adoption of the Framework, no institution has been denied accreditation, nor has any institution been granted Accreditation with Probationary Stipulations since the COA approved the addition of that option in 2001. One institution visited in 2001 that was granted Accreditation with Substantive Stipulations, nearly lost its accreditation status after failing to meet all of the stipulations by the time of the revisit. However, the COA chose to postpone action and allowed a second revisit, after which the team recommended, and the COA decided, on the status of accreditation. In another instance, also in 2001, the COA considered rejecting the team's recommendation of Accreditation with Substantive Stipulations and imposing Probationary Stipulations, but ultimately chose to accept the team's recommendation. As one case study team member commented about the old model of program approval vs. the current unit accreditation process: "It bothers me that you have to do an institutional broad accreditation or not accreditation, because what happens is you go into a school and you find 4 of the 5 programs are exemplary and the 5th is awful but you can't shut the one down because of the others. That takes a powerful weapon out of the hands of the team. If you could judge it separately you could put [it] on probation. There are always some strengths there, you're kind of torn. I think you would see some programs on probation if

you didn't have to put the whole institution on probation." There are benefits as well as trade-offs to the current system to be able to use the full range of options to evaluate these programs. We will discuss this notion further in the conclusions and recommendations chapter.

Peer Review

Peer review focuses on the team and the implementation of the team approach, preparation of and quality of peer review teams' experience and training, as well as issues surrounding the site visit—for example team data collection activities and the team report. The issues raised in this section address three key research questions: Question #2: Does the Board of Institutional Reviewers feel adequately prepared to engage in accreditation reviews? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?, Question #3: Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?, and Question #4: What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement? It appears from the evidence that the findings in this theme answer these research questions in the affirmative: IHEs value the peer aspect of the accreditation process, and BIR members report feeling prepared and capable of effectively evaluating the quality, credibility and efficiency of institutions' programs. We have found, however, possible problems in regards to team composition and the desire of some BIR members for more training.

- **BIR members and IHE representatives consider accreditation team service to be a powerful professional experience, and IHEs highly value receiving feedback from peers.**

In response to the question, "What do you think is most effective about the current CCTC accreditation process," the BIR survey data for members and team/cluster leaders regarding the assessment of role clarity and preparation shows overwhelmingly that leaders and members felt that their roles on the accreditation team were clear and that they felt prepared. Respondents were only slightly less inclined to see the other members as prepared.

To triangulate with a more robust source of data, we also included IHE open-ended responses. IHE survey respondents commented on peer review more often than any other item. Out of 196 survey respondents, 170 wrote open-ended comments about peer review, and of those, 35 IHEs noted peer review and the strength of the teams that visited their campuses. In every interview, when asked the question, What is your view of the quality, preparedness and thoroughness of the team that visited your campus? IHE respondents voiced favorable reports of the teams, even in instances in which the institution experienced a difficult visit and received an accreditation decision with stipulations. Although some IHE representatives commented unfavorably on individual team members, they uniformly praised their teams as a whole. The feedback teams provide institutions in

the form of the team report is an essential tool IHE representatives use to support program and institutional improvement in response to Research Question #4: What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement? IHE representatives uniformly reported in interviews their intention to use the team report as a tool to guide them in reviewing their programs and devising ways of improving them after the visit.

When we asked BIR respondents about role clarity and preparedness for the accreditation visit (question 16), the overwhelming response from team members and team leaders was positive on both aspects (only slight difference between team leader and cluster leader in that team leader's seem to be a little more critical than cluster leaders, but no significant differences between the two groups). Table 5 shows the specific breakdown for each of the three parts to this question: role clarity, preparedness for role, and adequacy of other team members (team members 103; leaders 61). The response rate for the BIR survey is 72 percent.

Table 5. Assessment of role clarity and preparation

	Members				Leaders			
	Agree	Somewhat Agree	Cumulative Agree	Mean (SD)	Agree	Somewhat Agree	Cumulative Agree	Mean (SD)
Role on team clear (as member or leader)	81.4	12.8	94.2	1.25 (.59)	85.3	13.1	98.4	1.16 (.42)
I felt adequately prepared for my responsibilities	77.0	18.3	95.3	1.29 (.59)	85.3	13.1	98.4	1.16 (.42)
Other team members adequately prepared	73.0	20.2	93.2	1.34 (.64)	60.7	38.0	98.7	1.41 (.53)

*Numbers presented in table are percentages.

Also, team leaders and cluster leaders overwhelmingly agree (90 percent agree; 10 percent somewhat agree) that the process "allowed [us] to develop a report that is well-grounded in evidence."

- **The selection of site visit team members sometimes included inexperienced and unknowledgeable members resulting in teams that are less than optimal.**

The same concerns raised about teams in 2000-2001 were expressed by team members involved in accreditation visits this past year. This year at least two IHEs made specific complaints to the CCTC about team members who were offensive, ineffective, appeared biased, or had poor interviewing styles. AIR evaluators observed the latter situation on several different occasions while on site visits. More seriously, there was a complaint about a member of the reading study team who appeared to be ignorant of SB 2042, the set of standards the team member was supposed to be using to evaluate the IHE's compliance with the reading standards. On a positive note, there were fewer complaints this year than

last year about inexperienced team members, although this year's teams had more new members. Of the 170 IHE Survey respondents who wrote open-ended comments, 75 comments were about teams and team members. Of those 75 comments, only 15 were negative, stating that team members were unprepared, biased, and/or late and ineffective in their evaluation of the institution's programs. IHE respondents made 19 comments of unqualified praise to the teams that visited those institutions. Institutions value the peer review process that comes with accreditation.

The ability of Commission staff to recruit complete teams and allow those teams enough time to adequately prepare for a visit is impacted by the accreditation visit schedule. Recognizing that limitations on both the IHE and the CCTC will impact the visit schedule, some attention needs to be given to future site visit scheduling. Table 6 shows that of the 13 site visits scheduled in 2000-2001, there were three instances in which multiple visits were scheduled, one of those 3-day periods had four simultaneous site visits occurring at the same time. Of the 12 institutions visited in 2001-2002, there were three instances in which multiple visits were scheduled simultaneously. Besides stretching thin the resources of CCTC consultants, compressing the time frame in which accreditation visits occur can make it more challenging for CCTC staff to recruit team members. The CCTC could explore alternatives for opening up the window for scheduling site visits as discussed in Chapter 4 (e.g., spreading out dates of site visits and increasing BIR pool.)

Table 6. Site Visit Schedule for 2000-2002

Year	***Institution***
May 15-16, 2000	National Hispanic University
Nov 11-15, 2000	CSU, Bakersfield
Nov 11-15, 2000	CSU, Fullerton
Mar 4-7, 2001	Claremont Graduate University
Mar 31-Apr 4, 2001	CSU, Long Beach
Apr 1-4, 2001	Hope International University
Apr 21-25, 2001	Azusa Pacific University
Apr 22-25, 2001	La Sierra University
Apr 29-May 2, 2001	UC San Diego
May 6-9, 2001	New College of California
May 6-9, 2001	Pacific Oaks College
May 6-9, 2001	UC Irvine
May 6-9, 2001	UC Davis
Nov 3-7, 2002	CSU, Stanislaus
March 3-6, 2002	Bethany College
March 24-27, 2002	Mount St. Mary's College
April 14-17, 2002	Humboldt State
April 14-17, 2002	University of San Diego
April 21-24, 2002	University of Redlands
April 21-24, 2002	University of San Francisco
April 27-May 5, 2002	CSU, Hayward

May 4-8, 2002	CSU, San Bernardino
May 5-8, 2002	Cal Poly Pomona
May 11-15, 2002	Stanford University
May 19-22, 2002	National University

Revisit to Pacific Oaks College in 2002 is not listed on the schedule.

- **The process of team selection by CCTC staff is difficult, unevenly implemented, and may be biased.**

The way teams are currently formed is that CCTC consultants meet as a group with the COA Administrator, usually in the fall, and discuss which experienced BIR members would be well-suited to serve on which accreditation visits scheduled for the upcoming year. Potential issues involving the visit in relation to the size and composition of the team are also discussed. Consultants then recruit their team leaders. Once the team leaders are selected, the COA Administrator and CCTC staff recruit the rest of the team members in the late fall or early winter.

One problem we encountered with the selection process is that it is on the one hand very informal and on the other hand, team members need to have the specific expertise and experience necessary in relation to the institutional context. Although new team members are being continually added to the BIR, and consultants along with team leaders evaluate accreditation team members, we saw little or no further training or feedback to team members who do not perform satisfactorily so they are informally blacklisted from serving again. Virtually all institutions prefer having team leaders from like institutions, and the COA Administrator, who is responsible for the recruitment of teams, works to ensure that team leaders do come from IHEs similar to the ones they are reviewing.

The BIR survey showed that approximately 76 percent of respondents report having agreed to be a team member at least once. This is a substantial percentage of the membership of the BIR. The affiliation of respondents for the BIR survey and percent of respondents by affiliation are included in Table 7. As this table shows, the affiliation with the highest respondent percent (43.3) is school district, the second highest is the California State University with (25.2), and third is private institutions of higher education (22.7). Respondents included in the other category did not provide affiliation information and we were unable to determine their affiliation from other data sources so they could not be categorized.

Table 7. BIR respondent rate by respondent type

Affiliation of Respondent	Percent
School District	43.3
Private IHE	22.7
University of California	5.0
California State University	25.2
Retired	0.4
Other	3.4

Total N=238	

- **The size and expertise of accreditation teams do not always meet the CCTC guidelines for accreditation teams.**

The *Framework* is clear about the criteria for team size, expertise, and diversity as it is critical to the validity of the accreditation review process. However, the unavailability of BIR members and/or the unavoidable loss of team members at the last minute may result in a team with one or more members who are poorly and/or insufficiently prepared. This could result in team members who are unable to effectively fulfill their responsibilities in the CCTC's accreditation process, reduce the effectiveness of the team as a whole, and interfere with the CCTC's ability to meet the *Framework's* requirements regarding the criteria for team selection.

The Framework gives general guidelines about the size and composition of the team based on the size and number of credential programs an institution has, and the CCTC and the institution reach a signed agreement about the size and make-up of the team. Furthermore, IHEs have some input about team members selected for visits in the form of the opportunity to object to members who have potential conflicts of interest. However, when IHE representatives were asked in interviews, "What input did you have in the selection of the Team Leader? And "in the selection of the team members?" respondents overwhelmingly responded, "none." Of the 24 institutions accredited between 2000-2002, only seven representatives we interviewed (one from each of the institutions) noted that they were given the opportunity to object to team members, and two IHEs reported that they had no input and believed that that they should have. This problem is easily rectified by having consultants inform IHEs of their rights and responsibilities in organizing teams for accreditation visits.

The question of whether teams have the required expertise is more serious. In 2001-2002, the Commission staff experienced difficulty in recruiting team members, especially those from K-12. K-12 BIR members reported that school and district administrators were increasingly unwilling to release them to serve on accreditation teams, especially in the spring, when state testing in elementary and secondary schools occurs, even though the CCTC reimburses the district for the cost of the substitute teacher. Of the case study sites this year, four of the six teams were missing one or more members and did not have replacements. Of the non-case study sites, two teams were missing members. Some of these missing team members had to drop off their teams at the last minute, usually due to family emergencies or serious health problems The potential for unexpected absences or unfilled team positions exists every year; the challenge CCTC staff faced in creating teams in 2002 was that these unforeseeable and unpreventable absences occurred more often this year than in past years. In one case this past spring, the difficulty in getting team members resulted in a team member who had a potential conflict of interest with the IHE who nonetheless was asked to serve on the team. Neither the consultant nor the team leader was aware of the team member's relationship with the university until IHE raised the issue at the Sunday evening dinner hosted by the institution. After consultation with the IHE staff, the consultant and team leader decided to dismiss the team member to avoid the

appearance of a conflict of interest. However, this left the team short-handed. The team member had volunteered the potential conflict to the CCTC staff when recruited but was told that this was not a problem. At three institutions this year (two non-case study sites, one case study site), and two last year (one case study site, one non-case study site), consultants conducted interviews and gathered data that missing team members would have done, a practice some IHEs consider inappropriate.

In short, BIR members' lack of availability (for whatever reason) meant that in several instances teams were short of needed members; had last minute replacements who were sometimes unprepared or did not possess the appropriate expertise, or might not have experienced the benefits of BIR training.

While team members deal admirably with the loss or absence of colleagues, incomplete teams or ones with new or unprepared members, these losses can cause a ripple effect that impacts the entire visit. A team with missing members results in changes needing to be made to the interview schedule, which creates much last minute work not only for the institution already operating under a great deal of pressure and stress but also for the consultant and team leader who must work at making the adjustments. A short-handed team, of course, also means fewer people to evaluate an IHE's programs, as well as people without needed expertise reviewing programs. In addition, if a missing team member was to have reviewed a credential area outside of the basic cluster, then IHE representatives have the added worry that the team members reviewing their less common programs are not really qualified to do so. Possible strategies for improving team selection will be discussed in the Conclusion/Recommendations section.

Members who join a team late operate at a disadvantage in that they have not had the same amount of time to review program documents and prepare for the visit as their colleagues. This problem is compounded if the team member is new to the CCTC's accreditation process and is experiencing his/her first visit. In one of the 12 visits AIR observed, on a 19-member team, seven team members were on their first visit, and one of these had been recruited at the last minute and had not experienced BIR training. Two other team members were also last minute replacements and encountered the documents for the programs they were to be reviewing the first night of the visit.

On another large team at a case study multi-site campus, eight of the 41-team positions were not filled or had unforeseeable losses of team members just before the visit leaving a team of only 33 members. One BIR member commented that when there is only one team member reviewing a program, this member is placed under great pressure, and faces suspicion of bias because of the lack of other evaluators contributing their evidence, insights, and judgments about the program.

Ironically, CCTC staff has noted that in recent years, IHEs have begun to complain about the size of teams visiting their campuses, despite their having come to a joint agreement with the Commission about team size. Of the 12 case study visits conducted, team size ranged from a high of 33 members for a multi-site visit, (not a merged CCTC-NCATE visit) to a low of 3 members for a revisit. The average team size of a joint CCTC-NCATE

visit was between 12-18 members (four of whom were NCATE members). From our observations during site visits, IHEs are somewhat overwhelmed with the logistics of dealing with a large team. The opposite can also be true for institutions with multiple locations with teams that cannot cover all of the locations.

- **BIR members generally viewed their training positively, but there is also a general sense that training needs to be expanded, provide greater depth, and address more concerns.**

Overwhelmingly, the data from the BIR survey show that while both K-12 and IHE representatives feel that the training is satisfactory, they would like more of it. One new BIR member who went on a visit last year expressed the desire for more discussion of the team decision-making and report writing processes, while another commented on the need for more specific orientation to the 2042 Standards now that they are being used in reviews. A third BIR member recommended that BIR training be on-going, every few years, not one-time only (the yearly BIR training is for new BIR members), as it is now. This suggestion is particularly important now that IHEs are implementing 2042; even experienced team members would benefit from a more intensive orientation to the new standards than simply the first evening of a visit. This same BIR member also proposed that the CCTC host regular regional training workshops to keep team members current on new standards, procedures, and regulations.

This suggestion is especially worth considering with the 2042 Standards being implemented over the next three years. At one early adopter (non-case study) site visited this spring, IHE representatives did not believe that all team members were fully versed in the new standards and knew how to evaluate a program using them.

However, since 2001, we have been concerned that training for BIR members appeared to be applied inconsistently, sometimes happened "on site" during a visit rather than before or at the annual 3-day CCTC team member training, and tended to be general rather than specific as to how to gather information and make decisions about standards and program performance. These concerns remain. Training of team members needs to be divided into two areas: the annual training seminar for new BIR members, and the orientation that teams receive on the first day of a visit, which is usually on Sunday afternoon.

The annual BIR training typically occurs in January, before the majority of accreditation visits are held. At last year's training session in January 2002, the vast majority (close to 70 percent) of the approximately 50 attendees were representatives of higher education, many of them from IHEs scheduled to be visited either this past year or next year. In these cases, would-be BIR members appeared more interested in gaining information to help their institutions prepare for their accreditation visits than in learning how to evaluate a teacher education program. The fact that more IHE representatives than K-12 representatives sought out BIR training is significant if the BIR is to continue to represent both constituencies. A lack of a sufficient pool of trained K-12 BIR members will continue to hamper the ability of CCTC staff to put together balanced teams, as required by the

Framework. The BIR training workshop in 2001 was only partially observed, and so we cannot comment on the make-up of the attendees at that year's seminar.

The annual three-day training seminar focused on explaining the accreditation process, discussions of how to gather and evaluate data about program performance against the standards, and role-playing scenarios of interviewing and simulated accreditation decision-making.

The other type of training teams receive occurs at the beginning of an accreditation visit, Sunday afternoon. From our observations, these orientations are inconsistent, sometimes inadequate, and need to be more in-depth and more specific to the various issues involved in reviewing a particular IHE. At large multi-site institutions, some teams are receiving additional training on Sunday to address how to evaluate the quality of the regional centers. This appears valuable and necessary, and something that might also benefit all site visit teams.

Approximately seven people trained in January 2002 were new team members on observed visits last spring. On the visits we observed, it was clear that many team members, especially new team members, lacked adequate training in interviewing, which is the primary method of information gathering on accreditation visits.

The BIR survey shows that 94 percent of the respondents have participated in training, not including those in the "other" category. Further, we found no difference between IHE and K-12 respondents. Approximately 25 percent of these received their most recent training in 2000-2001. (Survey did not include 2002 option.) Of those responding to the question about their role in their most recent site visit team, 37 percent (N=165) said that they served as either a team leader (12 percent) or cluster leader (25 percent).

Observations at the 12 case study sites found that the majority of interviewers we observed during individual or group interviews were well-prepared, had clear direction, asked relevant questions, and showed a high level of understanding of their purpose as members in a group of evaluators. Others, however, asked few, non-directed questions that were superficial in nature and/or were closed-ended (i.e., "yes/no") questions that yielded little information of substance. We also observed that teams typically receive little to no orientation or assistance in developing questions for interviews. On visits lead by one consultant, teams received copies of questions as a starting point from which to develop their own questions. Other consultants do not provide guidance in this area.

Of the 30 team members for whom interviews were observed in 2002, only three instances were witnessed in which team members gave interviewees assurance of confidentiality (and two of these team members were new and untrained). This failure to inform interviewees of the confidentiality of their conversations with team members occurred in both interviews with individuals and with groups of students. Furthermore, not all consultants remind their teams of the importance of the confidentiality notice. Only one consultant out of five visits observed in 2002 reminded team members of the importance of informing respondents of their rights to confidentiality.

The tables below show that while the vast majority either agreed or somewhat agreed that the BIR training prepared them to make judgments or serve as leaders, they are less strong in their agreement on this aspect of their preparation.

Table 8 shows the level of agreement by accreditation team members as to how effectively the BIR training prepared them for the site visit. The percent agreement with means is shown on a Likert scale of 1-4; the higher means indicate less agreement. Almost 77 percent (98 survey respondents) of the accreditation team members who responded to this question agree that BIR training prepared them to make judgments about stipulations and concerns.

Table 8. Member BIR training

	Members				
	Agree	**Somewhat Agree**	**Somewhat Disagree**	**Disagree**	**Mean (SD)**
BIR training prepared me to make judgments about stipulations and concerns.	76.5	19.4	3.0	1.0	1.29 (.57)
(Members N = 98)					

*Numbers presented in table are percentages.

Table 9 shows how BIR training prepared accreditation team leaders to make judgments about stipulations and concerns and how adequately these team leaders and cluster leaders felt. Of the 60 respondents, more than half (52 percent) stated they felt prepared to make judgments, and 60 percent of those who served as leaders felt prepared as a team leader/cluster leader.

Table 9. BIR Training of Leaders

	Leaders				
	Agree	**Somewhat Agree**	**Somewhat Disagree**	**Disagree**	**Mean (SD)**
BIR training prepared me to make judgments about stipulations and concerns.	51.7	41.7	5.0	1.7	1.57 (67)
BIR training adequately prepared me to be a team leader/cluster leader.	60.0	35.0	1.7	3.3	1.48 (.70)
(Leaders N = 60)					

*Numbers presented in table are percentages.

These results from the BIR Survey provide strong evidence to support the notion that BIR training does indeed prepare accreditation team members for their roles in response to Research Question #2, "Does the Board of Institutional Reviewers feel adequately prepared to engage in accreditation reviews? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?" The answer to this question appears to be "yes."

- **Variability occurred in how activities and procedures, as prescribed in the Framework, are carried out as part of the accreditation process.**

Last year, we observed some variations in how and when consultants prepared for visits, primarily in pre-visit meetings and review of pre-condition and self-study reports. These variations continue, reflecting the fact that consultants have other responsibilities as well as their own style in supervising accreditation visits. That these variations exist is of concern because they are counter to the direction of the *Framework*, which is written into state law and exists to ensure that the legally prescribed process of accreditation occurs.

In one favorable deviation, we noted at two case study sites in 2002 that consultants are holding the mid-visit status report earlier, often Tuesday morning instead of Tuesday afternoon; this gives the IHE additional time to respond to questions, schedule more interviews, and produce more documentation.

This past year, three IHEs (two non-case study sites, one case study site) responding to the 2042 Standards were very late in getting program documents to the team--in two instances, as late as two weeks before the visit—Thus not meeting the requirement of the Framework (*Section 6: Continuing Accreditation Policies, B2 Institutional Self-Study Report*) that self-study materials must be finished and distributed 60 working days before the visit. The Framework goes on to say that the institution should mail sufficient copies of the self-study report to the team leader and the consultant, and in turn the team leader and consultant distribute copies of the self-study to team members. Yet we found that IHEs routinely miss the 60-day deadline to the CCTC and that in order to save time IHEs are asked to mail the self-study reports directly to the team members.

Likewise, the Framework (*Section 6: Continuing Accreditation Policies, B1Preliminary Report*) is very specific about when the Preliminary Report is to be submitted. We were only able to review a handful of these documents, yet information gathered in the field found that these reports were not always submitted within the timeline as stated in the *Framework*.

Submitting documents late is problematic because it does not give team members adequate time to review program documents before the visit and thus be well prepared for the review. IHEs need to be held to a strict deadline for submission of their self-study to ensure team members enough time to prepare themselves. To allow an institution to submit its materials a few weeks before the visit ultimately does the IHE a disservice by having it be reviewed by a less-than fully prepared team. Firmer enforcement of deadlines would serve to make the accreditation process function more smoothly and according to legal mandates.

- **IHE familiarity with accreditation process varies across institutions.**

When an IHE's leadership is familiar and experienced with the CCTC accreditation process, either through having done it before or having served on a team, visits tend to be smooth and well organized. Lack of experience greatly interferes with an IHE's ability to respond effectively and efficiently to issues that emerge during the accreditation process.

One non-case study IHE visited in 2001 was going through the CCTC accreditation process for the first time; its lack of familiarity with the state's process hindered its ability to be prepared for the visit. In addition, the institution's representatives mistakenly believed that the consultant and team leader were to serve as advocates for them at the COA meeting rather than outside evaluators; this misperception caused misunderstandings and a sense of betrayal on the part of IHE representatives at the COA meeting. A similar misunderstanding occurred with another IHE representative from a non-case study site new to the CCTC accreditation process; the IHE staff member was unhappy that the consultant did not praise his programs, when the IHE had in fact received substantive stipulations and had had a difficult visit. IHEs that are experienced with the accreditation process, and have leaders who have served on teams usually have successful or at least smooth visits. One IHE representative who has been involved in accreditation for many years proposed that the Commission require IHE leadership to go on a visit as a team member before hosting a visit. Several IHEs had a similar idea and sent faculty or administrators to the CCTC's 2002 BIR training to prepare for visits or revisits.

Self-reflection for internal improvement

- **Most university personnel view CCTC standards as useful tools against which to evaluate their programs, but they also find this self-study to be arduous and time-consuming.**

All of the IHE representatives interviewed for this evaluation were asked to describe the process by which they wrote their self-studies and to evaluate the efficacy of that process. In 2001, respondents from all 12 institutions visited by the CCTC commented on the amount of time and effort required to self-evaluate and write program documents for accreditation review. Yet these IHE representatives also commented on the high value they place on the opportunity for collective reflection on the quality of their programs.

This past year, IHE staff echoed these same comments. All interviewees noted the amount of time required to prepare the documentation for accreditation, and the value that came from the self-reflection needed to respond to the standards. In the IHE survey, some respondents also commented on the process of self-reflection required to prepare the institutional self-study. Of the 170 IHE respondents who provided open-ended comments, 52 responded to question 12, "what do you think is most effective about the current CCTC accreditation process," by referencing either the Self-Study itself or the process of reflection and discussion that IHEs go through to prepare for the accreditation visit. Furthermore, in response to question 14, "Do you think you are better served with the *Accreditation Framework*," 26 respondents referred to self-reflection for the purpose of improvement as a positive benefit of the Framework and the process it governs.

Four out of 103 (less than 1 percent) District Staff Survey respondents volunteered that the opportunity for "self-reflection was the most effective thing about the Commission's accreditation process." Although this number is small, this perspective is important and is still valuable because district staff was not asked about self-reflection in the survey and most district staff are not involved in IHE's efforts to develop self-studies.

Some respondents also posed suggestions for how to improve the process of self-study. One 2002 case study site respondent interviewed suggested that IHEs could be required to submit their self-study documents several months before an accreditation visit to allow more time for a careful review and feedback from CCTC staff. Another respondent also proposed this idea, adding the belief that CCTC consultants need to advise their IHEs more thoroughly and more often about the institution's preparation of its accreditation visit documents. This interviewee also believed that documents such as the Preliminary Report and Self-Study could be more standardized to assist IHEs in efficient writing.

The self-reflection an IHE goes through to prepare itself for accreditation is substantial, and is a key piece of evidence that addresses two of the research questions, Research Question #1, "Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?" and Research Question #4: "What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement?" All institutional representatives interviewed reported using the self-study process and the accreditation team recommendation report as tools to improve their programs. The team report in particular is viewed by IHEs as a lever with which to gain greater support for programmatic change within their institutions. Therefore, it appears that accreditation and the information

provided as a result of the team's visit are being used to support program and institutional improvement.

Site visit--implementation of a team approach in accreditation

At the heart of the *Accreditation Framework* and the CCTC's accreditation process lies the use of teams on site visits to gather the information necessary to determine whether an institution's programs are both meeting the standards (both common and program) and are of high quality. The *Framework* and the Handbook identify specific policies and procedures to be followed in the use of teams in the CCTC's accreditation process.

The themes and issues identified in our Year One Report continue to be raised by constituent respondents. In 2000-2001 we again observed that the dynamics of the site visit are highly dependent upon the composition of the team and that the team leader and consultant are critical players in determining that interplay. How the visit is conducted and how well it proceeds continues to depend upon the preparation and guidance provided by the consultant and the team leader, as well as the experience, preparation, and perspectives of team members.

- **Assignments of inexperienced consultants can be a barrier to a successful accreditation visit.**

Visits that are perceived by CCTC staff as being potentially difficult or politically sensitive are typically assigned to more experienced consultants. Smaller, less problematic, less prestigious IHEs are assigned to whichever consultants are available, and often are assigned to newer, less experienced consultants. But smaller institutions often have difficulties due to their size, new program staff, and lack of resources that can challenge a less experienced consultant. Many of these IHEs are also religious or private colleges and lack the resources of CSU or UC campuses. For example, two institutions that nearly lost their accreditation status due to weak programs and poorly organized visits in the past two years had consultants who were doing their first visits on their own. In the past two years there has been only one instance of a new consultant being sent to a large public institution. There is an annual balancing act that takes place between composition and experience of the available consultant workforce and the number and type of accreditation visits to be scheduled during a particular year. Further, adjustments in consultant assignments are sometimes made because of CCTC staff changes. These issues will be addressed in the Conclusion/Recommendations section.

- **There is a continued lack of understanding about how to properly develop the interview schedule for use by team members on site.**

The difficulties in designing an effective interview schedule continue to be observed and reported in interviews, especially for those new to the accreditation process. Small institutions in particular struggle with the interview schedule. In 2002, the problem of team members dropping out at the last minute, or of team slots not being filled early

enough caused IHEs many problems with the interview schedule, since the schedule is tailored to fit each cluster member.

In addition to the changes that had to be made to the interview schedule in the eight cases of team changes, three of the 12 IHEs visited (two non-case study sites and one case study site) this year were late in developing their interview schedules and this resulted in poorly developed schedules (i.e., interviewees were assigned to inappropriate interviewers.) This was a serious issue with the case study site, which did not have enough interviews for an institution of its size for the team to adequately gather enough evidence to make a fair assessment of the IHE's programs. This situation can be an important threat to validity. Our observations found that IHE staff, especially those new to the accreditation process, were confused and unclear about developing the interview schedule. Likewise, open-ended comments made by IHE respondents also made reference to this confusion.

On a positive note, one small IHE (a non-case study site) was able to develop a strong interview schedule, primarily because the institution had staff who were BIR members and thus experienced with the CCTC accreditation process. This experience meant that the IHE knew what the team wanted and needed and in what format, so the schedule and the visit were well planned. Another non-case study institution used an Access database of students and staff, which allowed the coordinator to easily select potential interviewees and replace them if unavailable.

Without a well-developed interview schedule, the team is limited in its ability to focus on data collection when valuable time is spent trying to rectify schedule conflicts rather than collect data to help formulate the team's judgments and recommendations. Further, a shallow or incomplete interview schedule threatens the validity of the team's recommendation and of the Committee on Accreditation's decision because neither the recommendation nor the decision can be made with confidence if the team is unable to effectively and efficiently collect the data it needs to make decisions about the institution's performance against the standards. Teams need to be able to efficiently interview all of the necessary constituencies to thoroughly evaluate an institution's programs. This issue will be covered further in the recommendations section.

- **The quality of data used to make decisions varies greatly.**

The quality of the data available to teams to base their decisions upon vary greatly. In 2000-2001, this was not recognized as an issue. But of the IHEs visited in 2001-2002, four case study sites and two non-case study sites had well organized and complete documents rooms, which facilitated the team's research, while two case study sites and two non-case study sites had poorly organized and incomplete documents rooms. For the latter institutions, this meant that team members had difficulty in obtaining needed data efficiently. The possible need for additional data was anticipated in the *Accreditation Framework* by giving the team an opportunity to request additional data during the mid-visit status report. In almost all cases in 2000-2002, teams requested additional documentation during the mid-visit status report.

In 2002 one case study site created an electronic documents room in addition to a hard-copy paper area on campus, which allowed team members to review materials at their leisure from the hotel while they were discussing or writing their report. Another 2002 case study site simply allowed team members to take documents with them back to the hotel, which team members appreciated.

The quality of data available to the team is also related to the breadth and depth of the interview schedule, as previously noted, as well as to the quality of the questions teams ask in their interviews. The strength or weakness of teams' interview questions is related to both individual interview skill and the orientation teams receive the first evening of the visit.

- **Length of the site visit is critical to meeting the objectives of the visit.**

Virtually everyone interviewed over the past two years has commented on the intensity of the CCTC's accreditation process. As one BIR member visiting a case study site noted, the amount of time available for information gathering on a visit is really only two days (Monday and Tuesday), which gives teams very little time to adequately evaluate the quality of an IHE's programs. And the length of the visit is the same regardless of whether an IHE has 2 credential programs or 12. One exception is for a multi-site institution and for an NCATE-CCTC merged visit. Depending on the size and scope of the sites throughout the state, the visit may be extended for a day or the team may be increased in size, or both. In the case of a merged visit, the team leader and members of the Common Standards Cluster begin on Saturday, which is the normal day for an NCATE visit to begin.

Only in the case of one institution, visited in 2002, was the time of the visit extended, by a day and a half, and that was because the IHE has 26 campuses across the state, not because it has the most credential programs to review. Yet the growing number of universities that use satellite campuses to provide distance learning to bring classes to students (vs. requiring students to come to the campus for classes) has added a new burden on teams reviewing these ever more dispersed IHEs.

While there is general resistance on the part of both BIR members and IHEs to extend the visit past Wednesday, two consultants have proposed lengthening the time at the beginning of the visit, either starting on Saturday or earlier on Sunday, to give CCTC staff more time to orient teams to particular issues likely to emerge on the visit and to give teams more time to review documents. Arriving earlier mimics the NCATE process, in which teams arrive on Saturday and spend all of Sunday reviewing documents and discussing findings before beginning interviews on Monday. In addition, respondents from three institutions (two non-case study sites, one case study site) noted that with the rise of intern and pre-internship programs, many credential candidates do not attend classes during the day, but instead are working in the classroom, and so are not available to be interviewed by teams who are on campus only during the day. One non-case study IHE visited in 2001 no longer even offers classes during the day, and most other institutions hold the majority of their courses after 4 p.m.

Some respondents to the IHE Survey open-ended questions also voiced a desire for more time during the visit. Of the 170 respondents who wrote open-ended comments, 15 people noted the time frame, all in favor of extending the amount of time available for interviews and for the visit itself. Within this group, three noted the issue of the availability of their students (or lack thereof) and the prevalence of evening classes.
n and schedules as problematic.

Table 10 and Table 11 provide member and leader assessment of site visit logistics based on BIR survey respondents. The items are consistent with our findings in the interviews and site visit observations. While the majority find the time of the site visit to be adequate, the level of agreement is less strong than on other indicators. In addition, there is a clear minority sentiment that the scheduling and time allotments were inadequate. However, 12 to 15 percent see adequate time to synthesize information and schedules as problematic.

Table 10 . Member Assessment of selected site visit logistical issues

	Team Members				
	Agree	**Somewhat Agree**	**Somewhat Disagree**	**Disagree**	**Mean (SD)**
Schedule easy to follow	66.0	26.2	6.8	1.0	1.43 (.67)
Adequate time during visit to review documents	52.0	33.0	11.0 15%	4.0	1.67 (.83)
Adequate time to formulate interview questions	58.3	28.1	12.6 14%	1.0	1.56 (.75)
Adequate time to synthesize info for final report	52.5	35.6	11.012%	1.0	1.60 (.72)
(Members N = 100-103)					

*Numbers presented in table are percentages

Table 11 . Leader Assessment of selected site visit logistical issues

	Team Leaders				
	Agree	**Somewhat Agree**	**Somewhat Disagree**	**Disagree**	**Mean (SD)**
Schedule easy to follow	47.5	41.0	11.5	0.0	1.64 (.68)
Adequate time during visit to review documents	47.5	31.2	14.8	6.7	1.80 (.93)
Adequate time to formulate interview questions	58.3	33.3	6.7	1.7	1.52 (.70)
Adequate time to synthesize info for final report	44.3	45.9	6.6	3.3	1.69 (.74)
(Leaders N = 60-61)					

*Numbers presented in table are percentages

- **Orientation of accreditation teams varies greatly across visits.**

The orientation that teams receive Sunday afternoon or evening at the beginning of an accreditation visit varies greatly, depending on who is the consultant. All of the consultants observed on case study visits discussed the roles and responsibilities of the team, the team leader and CCTC staff, covered the procedures in the Handbook, noted the standards to be used in the review, and went over the visit and interview schedules. However, the thoroughness of this orientation depended on the experience and style of the individual consultant. The fact that each consultant has his or her own style can greatly impact the visit. Some consultants are "by the (Hand)book," providing careful and thorough orientation to their teams. Others are more casual, and tend to leave responsibility in the hands of the team leader, only stepping in when problems arise. These variations raise questions of consistency in the implementation of the processes and procedures as outlined in the *Framework*.

CCTC Integration with NCATE

- **There was general agreement that conducting merged visits was a good idea.**

In 2000-2001, many respondents—both at IHEs and on accreditation review teams—reported that the idea of coordinating CCTC and NCATE visits was a good one. Staff from several institutions reported that there was close work between the CCTC and NCATE teams, with the two chairs conducting interviews together, a process they found to be very effective. While a combined visit meant that the visiting team was significantly larger, this allowed for more interviews to be conducted in which individual achievements could be acknowledged. NCATE-accredited IHEs visited in 2001-2002 continued to express support for conducting merged visits.

- **Some concerns were expressed related to merged visits, particularly in relation to NCATE.**

Last year, respondents participating in CCTC-NCATE merged visits expressed concern about parochialism of some NCATE team members and reported personality conflicts, especially with NCATE co-chairs. Unhappiness was also expressed with the NCATE process and how it was implemented in California.

These concerns were echoed among respondents again this past year. Of the five IHEs that experienced merged visits in 2001-2002, two (one a case study site, one a non-case study site) experienced personality conflicts between CCTC and NCATE team members that interfered with the cohesion of the two teams. In both instances, NCATE chairs sought to transform the merged visit into a NCATE-solo visit by dominating team discussions, directing team discussions to NCATE standards and ignoring CCTC standards, and by having separate NCATE team meetings, in violation of the partnership agreement. On these two merged visits, NCATE team members repeatedly changed the interview schedule, missing scheduled interviews and passing on interviews to BIR members.

On one of these merged visit, the lack of inter-team conflict reportedly was due primarily to the NCATE co-chair who had led NCATE solo and merged CCTC-NCATE visits to

California before and so was familiar and experienced with the California accreditation process and the state-national partnership.

Criticisms about NCATE members' alleged unwillingness to work with BIR members emerged also in the IHE Survey open-ended questions. Of the 29 comments made about NCATE, 12 were negative, criticizing what the respondents' perceived as a lack of preparation, knowledge, and experience of NCATE members in evaluating California programs. Another criticism of NCATE was that its team members sometimes refused to collaborate with BIR members and insisted on working alone, against the spirit of the concept of a merged visit. One IHE respondent from an NCATE-accredited institution said flatly, "We don't need NCATE in California."

One BIR member who has served on several merged teams voiced the opinion that many NCATE team members are not strong writers (because team members are not expected to write a report on-site in the NCATE process and are chosen to serve on teams more for political reasons than for reasons of quality as evaluators). This BIR member noted that he is also a member of the NCATE Board of Examiners due to the influence of his dean.

A new theme that has emerged from observations of three merged visits this past year is that joint CCTC-NCATE visits have an extra layer of complexity because of the merged nature of the visit. Therefore, these IHEs tend to get more experienced consultants than other IHEs just being reviewed by the CCTC. It is logical that larger and more complex visits should have more experienced consultants; however, this also means that these staff members are not available to assist with other IHEs that could benefit from their experience.

Decision-making processes

Over the past two years, we have identified five issues related to decision-making and report writing through data collection procedures that focused primarily on the key process of the COA using reports to make accreditation decisions.

- **A majority of the respondents commented that the quality of the team reports and the language used in them was a key determinant of accreditation decisions.**

COA members all acknowledged their dependency on the team reports; besides a brief interview with the visiting consultant, team leader and institutional representatives at meetings, Committee members have no other means of gaining information about the quality of an institution's programs outside of the team report. Observations of the Committee meetings at which team reports are presented found that COA members carefully read the team reports prior to the meeting and then asked probing, often very specific questions, about various points that were unclear to them in the body of the reports. COA members also regularly voiced the desire for more background information about the programs at the IHE; they especially desire demographic information about the size of the program and number of graduates.

- **The team reports are produced under stressful conditions, which impacts their quality.**

The process of writing the team report continues to be subject to the influence of a variety of factors that impacts the quality of these reports. These factors include: 1) lack of adequate training or knowledge and experience of some team members; 2) technology, especially computer problems; 3) concessions to fatigue, group dynamics, or limited time.

We have already noted the impact that new, untrained and/or inexperienced team members can have on a visit in our discussion of teams. Unprepared team members are unable to effectively contribute to the writing of the team report, and this shifts the burden to the rest of the team.

Long hours, late nights, and fatigue are standard fare on an accreditation visit. Every site visit AIR observed over two years involved late night writing by teams; working until after midnight is not uncommon. Team members and consultants report feeling exhausted by the last day of the visit, and fatigue and the stress of producing a high-stakes document on a tight deadline is a constant factor in the production of teams' reports.

A positive change this year, as compared with last year, was that most visits did not experience serious computer problems that interfered with the writing of the team report. There was one significant exception to this at a case study site, in which the CCTC staff and team repeatedly had to request computers and technical support at the team's hotel throughout the visit, and what was provided was inadequate and incompetent. In one notorious incident, IHE staff disconnected a computer of a team member while he was writing a section of the report by literally pulling the plug out of the wall. This IHE had led the CCTC to believe that it had adequate technology to support the team in its work, and it did not.

- **The writing quality of reports is inconsistent, a factor that often results in reports that are difficult to interpret.**

The quality of the writing of reports continues to vary. One report this past year was so poorly written by the team that the consultant had to in effect rewrite considerable portions of the report and then seek approval and confirmation of the rewritten report from the team after the visit but before the COA meeting. In another instance at a case study site, confusion on the part of the team about using NCATE language in the CCTC report on a merged visit resulted in CCTC staff changing some language on findings on standards and bringing this issue to the attention of the Committee for its judgment. At least one COA member has noticed teams' increasing tendency to note concerns in the language of the findings on standards as the COA expects or in Professional Comments, rather than as separate Concerns Noted, and views this as a problem. However, consultants and Committee members also report that the quality of team reports has improved due to the critiques and comments COA members make about the reports presented to them.

In addition, AIR evaluators observed over the course of two years what appears to be a fundamental disagreement among COA and BIR members and within the COA as to whether the judgment "met minimally with concerns" means that a standard has been met or not met. This disagreement has resulted in great team uncertainty about how to proceed with concerns and how to phrase findings on minimally met standards when writing reports.

- **Role of consultant in team decision-making is seen as facilitating.**

A new issue that has emerged is the influence of consultants on teams in decision-making and when and whether this influence crosses the line from facilitation and support to inappropriate influence. During site visits conducted in 2001-2002, consultants were observed facilitating team discussions and guiding the team decision-making process, a key aspect of their job. In many instances, this facilitation involved consultants reminding teams of the language of the standards or the procedures in the *Accreditation Handbook*, activities that are wholly appropriate and assist teams in making strong, evidence-based decisions and writing a persuasive, accurate report that facilitates the process.

There appears, however, to also exist the potential for consultants to wield greater and perhaps less appropriate influence over teams' decision-making and report writing processes. This potential stems from disagreement about the presentation of concerns in the team report and past COA actions.

When the COA adopted the Accreditation Team Report format in 1996, it directed teams to provide specific narrative related to the findings on standards for any standard that was less than fully met and place that in a rationale statement about the standard. The COA also made allowance for teams to note particular strengths or to indicate any concerns that did not rise to the level of finding a standard less than fully met. Since that time, the "Concerns" section of the team report has been an ongoing source of misunderstanding and tension between teams and the COA. Team members have not always provided sufficient context about concerns they noted and why the standards should still be met, or they repeated concerns related to the finding on the standard. For their part, subsequent members of the COA have not understood or known the reasoning behind the original team report format.

These misunderstanding culminated in COA actions in regards to the team reports for two institutions – in which the team recommendation was not adopted in the first case and stipulations were proposed that were not recommended by the team and not adopted by the COA in the second. These misunderstandings had far-reaching and no doubt unexpected consequences on the decision-making dynamics of accreditation teams.

In five of the 12 cases we observed, the worry about COA interpretations on the part of both teams and consultants influenced how and where concerns about program quality and IHE ability to fully meet standards were noted in the report. Observed teams were aware and highly sensitive to the COA actions in regard to the team reports and sought to make decisions and craft report language in such ways as to prevent future Committee rejection of team recommendations.

Furthermore, Consultants routinely counsel teams as to how to phrase accreditation findings in the team report to avoid potential probing or challenges by the COA. As team leaders and members are not accreditation experts, this guidance in the choice of terminology and phrasing can result in a more clearly written report, avoiding potential probing or challenges by the COA based on language use alone. The purpose of the guidance is to help the team make its meaning clear to the COA and provide the necessary context and basis for decisions on standards and recommendations of accreditation status. However, consultants' reminders of past COA actions rejecting team recommendations and of their labeling the "Concerns Noted" section of the report a "minefield" only adds to teams' anxieties about the report and their interactions with the COA.

Presentation of recommendation report before the Committee on Accreditation

In the Year 1 Report, we noted that the final stage in the accreditation process is when the Committee on Accreditation is presented the team's report on its findings for a particular institution and asked to vote on the recommendation of the team. The meetings at which team reports are presented to the COA and the Committee's discussions and decisions about team recommendations are all conducted completely in public. The COA has no legal closed session procedures. What is critical at this meeting is how well the recommendation report informs the COA members of what is taking place at the institution.

- **Some IHE representatives do not feel prepared for the presentation of the team report before the COA.**

One new issue that has emerged from interviews with IHE representatives is the preparedness for the presentation of the team report to the COA. This issue is directly related to Research Question 3, "Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?" The answer to this question of whether or not an IHE staff member felt prepared for their interview before the Committee is inter-related to their experience level with the CCTC accreditation process. Of the 24 IHEs visited between 2000-2002, three had representatives who reported feeling very unprepared and unsure of what to expect from the meeting. One respondent from a non-case study site commented that it was difficult to prepare for the meeting because the COA "can pick any tiny piece (from the team report) and grill you." One IHE representative, also from a non-case study site who had never appeared before the Committee, echoed this sentiment, saying, "I didn't know they were going to grill us, and start pulling things apart…. If I had been a shy and retiring type, I would probably have buckled up and cried."

IHE confusion and frustration caused by reading study in 2002

Virtually all IHEs visited in 2002 that had teams with a reading member experienced frustration due to the internal confusion at the CCTC as to the role and responsibilities of this new member. Initially, the reading study was to be separate but then it was decided to make the reading member part of the accreditation team. Two IHEs (both non-case study sites) felt they received additional scrutiny because of the reading agendas of the reading team members. At one of these institutions, the IHE claimed that it would have implemented elements of 2042 earlier if the program director had known that the reading member would be part of the team. At two IHEs (one a case study, the other a non-case study), representatives expressed the view that the reading team members were prescriptive in terms of curriculum and had an agenda. One IHE respondent noted that the CCTC already approved the institution's reading curricula when it approved the reading program, and so considered the reading study to be more about the politics of California's "reading wars" than about evaluating the quality of the institution's reading curriculum and instruction.

Another IHE representative from a case study site reported that after the CCTC changed its mind about having the reading member be part of the team, no one thought how this extra team member could impact the review and the overall accreditation recommendation. In three instances this year, the reading member added concerns to the report, which had the potential of affecting the recommendation and COA decision.

These findings related to the site visits related to Research Questions #2: Does the Board of Institutional Reviewers feel adequately prepared to engage in accreditation reviews? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?, and Research Question #3: Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?

Frequency of Review

We have no significant findings that fall within this theme, beyond the fact that many IHEs see the time and effort of preparing for accreditation to be a cost of business they would reduce if they could. The 2042 program standards for the multiple and single subject credentials clearly are directing both IHEs and the CCTC toward using outcome-oriented measures to evaluate program quality and individual candidate competence. With data coming from the TPA and other outcomes measures, the CCTC and IHEs can begin the process of external evaluation and self-evaluation, possibly on a more frequent basis than the accreditation review cycle. There is a balance to be found between constant evaluation and constant reporting and infrequent or no evaluation and reporting. IHEs and the CCTC need effective, efficient evaluation and reporting of data measuring performance outcomes. While we are not suggesting that the CCTC change the time frame of 5-7 years for the accreditation cycle, we are suggesting that in the interim between visits, institutions could be annually or biannually reporting on various outcomes that they believe effectively measure the performance of their programs and candidates. The

CCTC's role should be to assist IHEs with developing the capacity to monitor program quality using outcome measures.

The frequency of review is directly related to Research Question #1: "Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system? Regular evaluation of institutions assures a continual flow of information between IHEs and the CCTC, which contributes to the goals, purposes and functions of the *Accreditation Framework*."

This theme also addresses Research Question #3: "Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?" The evidence of the findings indicate that not only do IHEs feel they have "ample opportunity to provide the information necessary for a fair and productive review," but some institutions believe that they do not need to be reviewed as frequently as they currently are.

Current quality rather than over time

Our evaluation found that the *Accreditation Framework* prescribes a model of accreditation that measures an institution's performance against standards at one particular moment in time in the accreditation cycle. Previous performance, team findings on standards, and accreditation decisions are not taken into account from one accreditation visit into another. Our observations found that teams are specifically not advised as to the COA's previous accreditation decision for an IHE when they arrive on campus, and the COA is also not advised of prior Committee discussions or decisions regarding an institution. This conceptual element in the *Accreditation Framework* is distinctly different from that in the NCATE model of accreditation, which does take into account prior team findings and National Council judgments of an institution. The pros and cons of such a model element will be discussed in our Recommendations chapter.

CCTC staff report sharing the philosophy that their responsibility is to assist IHEs in improving their teacher preparation programs, rather than simply penalize weak institutions by denying them accreditation. They seek a thorough and deep review of the quality of institutions' programs. In this way, they seek to provide a type of technical assistance to institutions to help them improve their educator preparation programs. Yet, not taking into account a program sponsor's past performance may thwart this penetrating evaluation. To truly assist an institution in improving its program, one needs to consider how it has performed in the past and measure that progress – or lack thereof – over time.

Taking past accreditation decisions into account would allow teams and the COA to reward and recognize IHEs that have made significant progress over the course of 5-10 years, while determining which institutions continue to struggle to achieve minimum levels of adequacy in their programs. These data would further support the COA when it

sought to deny accreditation to these weak institutions. For example, two of the case study sites in 2002 had received substantive stipulations on their previous accreditation visits. On these latest visits, the IHEs received full accreditation, and great praise from their visiting teams. By taking a historical view of the improvement these institutions had made in the relatively short period of time in one accreditation cycle, the COA and CCTC could have demonstrated how accreditation influences program quality. In order to build capacity for improvement and greater accountability, the accreditation model should include a historical perspective rather than a snapshot approach. That is, the CCTC needs to ask, Should institutions that continue to receive "substantive stipulations" be in the business of preparing educators?

Other Findings

Below are two additional findings that reflect the political landscape of the CCTC accreditation process. They are the:

Relationship between BIR, CCTC and IHE's

Over the past two years, AIR has commented on several themes related to the relationship between the Commission and the Committee on Accreditation, and the dichotomy between what is described in the *Accreditation Framework* and the reality of practice. Here are some observations:

- Distinctions in the roles and responsibilities of each group are not clear to all participants, to IHE representatives or BIR members.
- Questions were raised as to whether the knowledge and experience of the decision-makers are adequate to the task.
- Evidence of tensions among the key players appear to clearly affects the accreditation process.
- Disagreement among COA and BIR members as to whether the judgment "met minimally with concerns" means that a standard has been met or not met, leading to team uncertainty about how to phrase findings on minimally met standards.

These themes continue to appear in discussions with key constituencies, and in some areas, have become more prominent. The lack of awareness of the distinction in the roles and responsibilities of the CCTC, the COA, and the BIR continues to be an issue as respondents repeatedly confuse the activities of these three bodies in the accreditation process, despite the fact that the activities, roles, and responsibilities of each are clearly delineated in the *Framework* and *Handbook*. The lack of communication between the CCTC and the COA also continues to be an issue, despite a continued desire on the part of COA members to have a closer and more collaborative working relationship with the CCTC. Although there was discussion last year about a meeting of COA and Commission

members, to our knowledge such a meeting never occurred. In addition, the desire for a closer relationship between the Committee and Commission appears to be one sided, only on the part of the COA. CCTC members have expressed little to no interest in meeting or working with COA members, although some Commission members occasionally voice unhappiness with their lack of control over the accreditation process.

AIR evaluators received positive feedback about improved communication between the COA and some BIR members, which was attributed to meetings held between Committee members and BIR team leaders the past two years.

IHE representatives continue to voice concerns about the qualifications and ability of K-12 members to participate in the accreditation process as both team members and Committee members. While everyone agrees that elementary and secondary education is the ultimate institutional beneficiary of accreditation, there is still the view that K-12 members are at a disadvantage in their ability to fully participate in the process. It has been observed on accreditation visits and at COA meetings over the past two years that K-12 representatives ask fewer questions, defer more to their higher education colleagues, take longer to understand and feel comfortable with the accreditation process, and are less often placed in positions of authority and responsibility on visits, such as team leaders and cluster leaders.

The CCTC has taken concrete steps to address past problems of tension among groups within the accreditation process. Yet unfortunately, in some cases, tension has continued. As mentioned above, meetings between the COA and BIR team leaders have resulted in an improvement in the relationship between the accrediting body and its investigative arm, the BIR is improving slowly. Further, the actions sometimes taken by the COA in an effort to avoid being a "rubber stamp" have caused the tensions to deepen between itself and IHEs. Specifically, the COA's actions in regard to two institutions in 1999 and 2000—continue to haunt the accreditation process. In one instance, the Committee rejected the team's recommendation of accreditation with technical stipulations and changed the decision to accreditation with substantive stipulations; in the other, the COA attempted, unsuccessfully, to add a stipulation to the accreditation decision. In addition, the COA has made the submission of additional "voluntary" reports describing plans for, or progress toward, improvement an informal stipulation in its accreditation decisions for five institutions accredited two years ago. These reports cannot be required of the institutions because the CCTC's attorney judged that the COA may not add stipulations to a team's recommendations. Yet the potential for coercion can exist because these Committee requests are made at the public meetings when the IHE's accreditation recommendation is up for discussion by the COA. As of this point in time, no institution has refused to agree to the writing of a voluntary report when the COA has asked for one.

The Committee's insistence two years ago on attempting to extend its authority beyond that which is stated in the Framework and Handbook through its requests for "voluntary" reports worries IHE members on and off the Committee, according to statements made during COA meetings and in interviews. On all of the site visits observed in 2002, team members displayed hyper-sensitivity to the power and authority of the COA to reject the

team's recommendations to the point that concern about potential Committee actions is interfering with teams' decision-making processes. This situation will be discussed further in the section regarding the use of team visits in accreditation.

A new theme related to the issue of tension between core constituencies has emerged, and that is the process by which COA members are selected. Every COA member for the past two years has commented about their discomfort in their interview with the CCTC to serve on the Committee. Terms used to describe the nomination interview include "scary," "awkward" and "disconcerting." COA members describe an interview environment seemingly intended to intimidate and disturb potential COA members; no COA member reported thinking that he or she interviewed well, and many reported being surprised that they were selected to serve on the Committee. Many COA members reported still not knowing why they – and not others – were appointed, given their lack of security as to their interview performance.

Clarity and efficiency of communication from CCTC to institutions

The importance of clear and timely communication between the CCTC and COA and IHEs is critical. This continues to be an issue, and with the implementation of several new sets of standards, including the 2042 Standards, an even more pressing one.

- **IHEs greatly value the CCTC staff who serve as accreditation visit consultants.**

All of the IHE representatives interviewed had positive comments about their consultants, and consider them to be hard working, dedicated, competent, qualified individuals who play an essential role in the accreditation process. IHE respondents simply want more of their consultants' time more often, a desire they recognize is not necessarily realistic, given the competing demands on CCTC staff's time.

- **IHE representatives commented on the need to receive information in a more timely way.**

IHE representatives continue to report having difficulty getting information in a timely manner from consultants. This was especially of concern to IHEs responding to the new 2042 standards for the first time this spring. One IHE representative from a non-case study site suggested that the CCTC could develop a website with Frequently Asked Questions about visit planning, the standards, and accreditation, and sample responses to standards to help guide IHEs looking for information. This respondent voiced the opinion that continual advising by CCTC staff would be more valuable than consultation every five-to seven years.

Three non-case study sites visited in 2000-2001, one 2002 non-case study site, and one 2002 case study site reported having difficulty getting timely information from their consultants. Three of these IHEs had new consultants and their representatives speculated that the lag time between question and answer was due to the fact that less experienced consultants often needed to verify information with more senior staff before they

responded to the institutions. In addition, two institutions (both case study sites) visited this year reported that some of their documents submitted to the CCTC were lost in the mail and this caused further delays in their preparation because they had to resubmit documents to the consultants.

IHE representatives believe that the difficulty in getting information from consultants in a timely manner is due to the fact that consultants are overworked and do not have enough time to devote to accreditation issues, something that some consultants acknowledge.

Summary

Here we summarize the main findings in this chapter:

- The CCTC's process, as dictated by the *Accreditation Framework*, is based upon high standards that reflect the theoretical and practical goals and direction of the various subsets of the education profession. With the implementation of the Teaching Performance Assessment (TPA), based upon the SB2042 Teaching Performance Expectations, the CCTC is moving even more closely toward the performance outcomes that have become prevalent within the profession.

- The CCTC's partnership with National Council for Accreditation of Teacher Education (NCATE) reflects a strong commitment to assist California institutions seeking national accreditation. This commitment is reflected in the recently renegotiated partnership between the Commission and the National Council. Challenges to implementing this partnership include issues of alignment between CCTC and NCATE standards and the subjective personal interaction between state and national teams in data collection and decision-making.

- Peer review through site visits by the BIR is highly valued by both IHE representatives and BIR members. Using peers at the K-12 and IHE levels to judge whether and to what degree programs have met the standards is a core element of the *Accreditation Framework*.

- The criteria for team selection are critical to the validity of the accreditation review process, and the *Framework* is clear about these criteria in terms of team size, expertise, and diversity. However, the unavailability of BIR members and/or the unavoidable loss of team members at the last minute may result in a team with one or more members who are poorly and/or insufficiently prepared. This could result in team members who are unable to effectively fulfill their responsibilities in the CCTC's accreditation process, reduce the effectiveness of the team as a whole, and interfere with the CCTC's ability to meet *Framework* requirements regarding the criteria for team selection.

- Variations in the use of some aspects of the *Framework* and the *Handbook*, particularly in the area of document preparation, are increasingly common, and can hinder the efficient planning of accreditation visits.

- The accreditation backgrounds of institutional leadership is a significant factor in determining the success of an accreditation visit in terms of hosting a smooth visit with few logistical problems. The problems of late self-studies, poorly designed interview schedules, incomplete documents rooms, and other logistical problems diminish with institutional experience with accreditation.

- Although time-consuming, the process of self-reflection to prepare the institutional self-study is highly valued by IHE representatives and seen as one of the chief benefits of the accreditation process.

- The intensity and brevity of the accreditation visit is a significant factor in respondents' perceptions of the CCTC accreditation process. IHE representatives, team members and CCTC staff report that the process leaves them physically and mentally exhausted.

- The quality of the data available for use by teams making judgments about institutions' performance against the standards can vary significantly, and this variation affects the validity of those decisions and the teams' overall recommendations to the Committee on Accreditation

- The accreditation team report is the key piece of data the COA uses to make its decision on an institution's accreditation status. However, the various parts of the report can vary substantially in quality, interfering with the Committee's ability to make its decisions with full confidence in the team's recommendations. The intensity of the accreditation visit often results in conditions that are not conducive to the production of high quality team reports. In addition, IHE representatives are often unprepared for the presentation of their institution's report before the COA, or feel unable to prepare themselves for the interview before the committee.

- The concern that teams exhibit about possible COA reaction to their recommendation reports is unproductive.

- The 2002 reading study produced additional stress to institutions preparing for accreditation visits due to initial internal debate within the CCTC about how to implement the study.

- The frequency of the accreditation cycle – occurring approximately every five to seven years – is a significant element in the Commission's system of accreditation, and exists to ensure that institutions maintain quality.

- The *Accreditation Framework* purposefully ignores past institutional performance against the standards in its accreditation visits; yet the addition of this historical perspective could lead to a deeper, more effective measurement of institutional improvement over time.

- There continues to be discrepancies in experience and "learning curve" between K-12 and IHE members of the COA and to a lesser extent, the BIR. K-12 members join the accreditation process at a disadvantage because accreditation does not occur at their professional level.

- Communication between the COA and the BIR has improved in both frequency and quality, which contributes to better team reports and understanding between the Committee and its investigative arm.

- IHEs continue to have difficulty in getting necessary information in a timely fashion to assist them in their preparation for accreditation. This is due to the great time demands placed upon CCTC staff.

Chapter 4: Conclusions and Recommendations

This chapter discusses our findings about the policies and procedures found in the *Accreditation Framework* and *Handbook*, the preparation of the BIR for site visits, and our assessment of the question of whether the current process allows for a fair and productive review that supports program and institutional improvement. In the previous chapter we addressed four research questions, as presented in Chapter 1, that guided our methodology of data collection, as described in Chapter 2 of this report. The research questions are:

1. Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?

2. Does the Board of Institutional Reviewers feel adequately prepared to engage in accreditation reviews? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?

3. Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?

4. What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement?

The first research question actually has two aspects. The first aspect involves an assessment of whether the policies and procedures of the *Accreditation Framework* and Handbook are consistent with the avowed goals, purposes, and functions of a professional accreditation system. In chapter 1 of this report, we outlined the main components of the CCTC's model of accreditation, which we find to be consistent with the current literature and trends in professional accreditation in a number of important respects. First, the system is standards-based. Reliance on professionally-created standards is the preferred practice in accountability and accreditation systems nationally; as such standards are believed to represent the best means of ensuring quality and consistency across institutions. Our data indicate that the CCTC's common and program standards are indeed at the heart of all aspects of the accreditation system, from the design and implementation of the self-study to the site visits and subsequent recommendations to the COA. Moreover, the impending incorporation of teacher performance data is reflective of current trends toward results-based evaluation and decision-making. The second aspect

focuses on the institution as the unit of accreditation is also consistent with other accreditation systems (such as NCATE) and with the research literature on the importance of overall organizational coherence and capacity for ensuring high performance and organizational improvement. The incorporation of both internal (self-study) and external (site visit) review is supported by the literature on organizational change and improvement, while the use of K-12 and IHE peers to make the necessary judgments helps to ensure that 1) data are interpreted by those with the requisite knowledge, and 2) the system is cognizant of "client" (i.e., K-12) needs and perspectives. Checks and balances are provided by the relationships among the relevant bodies (CCTC, COA, and BIR) and the appeals process, while dynamism is maintained through periodic review. We find the model, by design, therefore, to be consistent with the goals of quality and improvement in teacher education.

The second aspect of the question focuses specifically on the kind and quality of the information actually provided through the implementation of the system. At the heart of this question lie the twin issues of validity and reliability. While standards help to ensure that the information used for accreditation decisions is valid and professionally defensible, and while the training of peer reviewers and application of the same standards across institutions helps to ensure reliability, our evaluation detected several patterns in implementation and practice of the system that could threaten the validity and reliability of the information collected and judgments made as described in the findings chapter and occur primarily in the implementation level of accreditation, in the areas of the organization of accreditation teams and the site visit. In response to Research Questions2 and 3, we turn to the preparedness of accreditation professionals (BIR, CCTC and COA) to collect and interpret information in a valid and reliable manner. Question 3 then addresses threats to validity and reliability at the IHE level; Question 4 looks at evidence of improvement.

Question 1—Are the policies and procedures outlined in the *Accreditation Framework* and *Accreditation Handbook* and implemented since 1997 yielding the kind of information that is in keeping with the avowed goals, purposes and functions of a professional accreditation system?

As already noted, the *Accreditation Framework* and *Accreditation Handbook* clearly articulate the principles and goals of the accreditation process and very carefully detail a process that focuses on standards (common and program) that peer review teams use to evaluate teacher training units and credential programs. The process is clearly oriented toward quality, as specified by the First Attribute of Accreditation—and has a procedures manual, the *Accreditation Handbook*, that details roles, responsibilities and methods of conducting accreditation in California. The accreditation process identifies two types of standards that must be met. First, Common Standards relate to aspects of institutional quality such as overall leadership and climate, and features that are common to all programs such as resources, admissions, advice and assistance, and IHE-district coordination. Second, the CCTC's Program Standards focus on the quality of specific

program features such as curriculum, field experience, and knowledge and skills to be demonstrated by candidates in the specific credential area.

The accreditation process as described in the *Accreditation Framework* and *Accreditation Handbook* is yielding the kind of information that allows the established goals, attributes, and objectives to be implemented in accordance with the CCTC's Attributes of Accreditation. What is important in this system is validity and reliability that is achieved through the standards. The standards need to provide a consistent level of quality across institutions; the Attributes of Accreditation allow and encourage institutional and programmatic diversity in design and implementation, yet the Framework expects comparable levels of quality among institutions. The standards are key to this validity because they are the measurement tool used to evaluate and make decisions about program quality. Further, while the accreditation process has not been validated, the CCTC's standards have been through a legally acceptable validation process. However, when processes and procedures are not carried out in accordance with the guidelines set forth in the framework, as evaluators observed in the field, it poses threats to the validity and reliability of the entire system.

Recommendations and suggestions related to Question 1 are grouped into the following categories: standards, training and orientation, and focus of accreditation.

Standards

Recommendation: Standardize the processes related to transitions to new standards through new language in the *Accreditation Handbook*.

The process by which the Commission usually transitions programs from one set of standards to another is clear and effective and well grounded in research using technical experts in the field. However, in the case of the 2042 program standards for multiple and single subject programs, we believe it would have been more appropriate to have had the 2042 panel review the institutions' programs *prior* to the visits by the accreditation teams, in accordance with the CCTC's transition process. In the case of the 2042 standards, the lack of clarity about the function of the review panel, the role of accreditation teams and the Committee on Accreditation created great confusion on the part of IHEs, which could have been avoided by not allowing an institution to be visited until the panel had reviewed and the COA had approved its new multiple and/or single subject programs.

The following are topics that came up during the course of our evaluation. They warrant consideration not necessarily as recommendations but more as suggestions for the CCTC's consideration.

Suggestion: Consider whether existing standards are appropriate measures for non-traditional IHEs.

This suggestion to consider is in direct response to our findings about the appropriateness of the standards for some alternative institutions. We propose that the CCTC should begin a dialogue with IHEs about non-traditional models or programs, asking whether these institutions consider the standards as they currently exist to be appropriate and valid measures of quality of their programs and of their institutions overall. Questions to consider in these discussions include the one posed above; whether it is the standards that need to be changed, new ones developed for such IHEs, or whether the institutions' models are inappropriate for educator preparation in California.

AIR has observed that the Commission appears to feel obligated to accredit every institution that seeks to train educators in California, and thus approaches accreditation from a perspective of providing institutions with technical assistance to achieve this goal. We would remind the CCTC that according to the Framework, it is the obligation of institutions to meet the Commission's standards. If an institution's model of service delivery makes it a poor fit for the CCTC's standards, then perhaps that is an institution that should not be accredited.

The CCTC has already begun to consider some of these questions with its pilot project involving out-of-state institutions, and for that we commend the Commission. Continued consideration and discussion of these issues could be fruitful to all parties involved in accreditation.

Suggestion: Review need for maintaining Options 3, General Program Standards.

It is under the program standards that the CCTC allows institutions to select from five program specific standard options: California Program Standards (Option 1), National or Professional Program Standards (Option 2), General Program Standards (Option 3), Experimental Program Standards (Option 4), and Alternative Program Standards (Option 5). Credential programs at an institution can select different options of standards against which they will be evaluated. The option selected guides the on-site orientation of the accreditation team members and the review of the specific program. The five program-specific standards options give IHEs greater flexibility in selecting a set of standards that best suit their needs and to which they respond in their programmatic review. However, we found that most institutions do not take advantage of the full range of program standards options available to them under the *Accreditation Framework*. This may be due, in part, to the similarity of teacher preparation programs across the state as well as the added burden associated with responding to either the alternative or experimental program options.

Since virtually all programs respond to and are reviewed against the California Program Standards, we suggest that Option 3, General Program Standards be reviewed for possible elimination on the grounds of little use. Although few IHEs design alternative or experimental standards (Options 4 and 5), we do not recommend

that these be eliminated because these options allow innovation and institutional self-expression, qualities institutions value. The National and Professional Standards option (Option 2) is particularly important for specialized programs and allows them to participate fully in their professions, and so therefore should be maintained.

Training and Orientation

The orientation and preparedness of the Committee on Accreditation are essential elements in assuring that the CCTC's accreditation process is yielding the kind of information that is in accordance with the professional goals, purposes and functions of the Framework. An unprepared decision-making body jeopardizes the validity of the panel's decisions and calls into question the professional basis of the accreditation process. The assurance that all of the members of the COA are well prepared to make judgments as to the accreditation status of institutions that come before them is critical to the Committee's ability to hold institutions accountable for the professional quality of their educator preparation programs. With deeper and ongoing orientation of Committee members, the CCTC could place stronger sanctions on weaker programs within institutions that are nonetheless meeting the standards with greater justification and less concern about legal challenge. Further, more extensive professional development for CCTC consultants would enable staff to better support institutions and the COA in navigating the accreditation process.

Recommendation: Provide more and ongoing orientation for COA members.

The COA as a body of leading educators brings extensive expertise to bear on professional judgments regarding quality issues and concerns in the field of educator preparation. These professionals have a responsibility to hold their peers accountable for the standards as set out by the Framework.

COA members recommend doing more simulations, having more examples of potential situations, having to observe a visit before joining the COA, and having ongoing orientation to enable them to more effectively fulfill their role as decision-makers in the Commission's accreditation process. COA K-12 members continue to report feeling disadvantaged, especially in issues of vocabulary, and in their lack of knowledge about accreditation and the CCTC process when they first join the Committee. Likewise, K-12 accreditation team members who had been on previous site visits did not voice the same concern; however those new to the accreditation process and interviewed as part of the site visits shared the same concerns as COA K-12 members.

Recommendation: Provide more training and professional development to CCTC staff than is currently available to them.

The accreditation process described in the Framework and Handbook, as observed by AIR, is yielding the kind of information that allows the established goals, attributes, and objectives to be carried out. It is our opinion that the process would further benefit

if CCTC staff had more time allocated to carry out their accreditation activities. It was frequently observed by AIR that CCTC staff are clearly overburdened with the amount of work they have to do for accreditation, which is not their only responsibility within the Commission's scope of activities. Perhaps administrative staff could be assigned to assist with routine administrative tasks during the accreditation process.

More professional development could make facilitating accreditation visits easier if the CCTC is unable to devote more staff resources to accreditation. Consultants report having little formal training beyond shadowing more experienced consultants and helping with the planning of large visits. But since newer consultants often go on visits to smaller schools on their own, they are not trained on how to deal with the issues that are special or unique to those IHEs. A more formalized apprentice system could be developed, in which consultants observe and assist with more than one or two visits before they are assigned to be the chief consultant for an institution.

More extensive consultant training could focus more specifically on: 1) developing a clear understanding of the standards and their nuances; 2) supporting the development of clear, concise documents; 3) communicating clearly and in a more timely manner with institutions; and 4) controlling the site visit process.

In addition, CCTC staff would value a Consultant Handbook, similar to the *Accreditation Handbook*.

With the 2042 standards now being implemented, consultants report desiring more training and orientation about how to assist teams using these new standards in accreditation review. Early adopter IHEs also reported wanting the security of knowing that their consultants have a strong understanding of SB 2042 and how the new credentialing system impacts the accreditation process.

Focus of Accreditation

The focus of accreditation on the institutional unit instead of the program within the unit is a key component of the Commission's model of accreditation, and the shift from program to unit accreditation with the adoption of the Framework was not taken lightly. Unit accreditation clearly provides the Commission with key information that reflects the values and goals of the *Accreditation Framework*.

There are clearly positive benefits of the current model of unit accreditation. Chief among them is the greater degree of collaboration among programs that unit accreditation requires. The individual programmatic freedom that prevailed under the model of program accreditation cannot survive when a unit stands or falls together under one accreditation decision. Unit administrators must find more equitable funding mechanisms for all programs in order to meet the mandates of Common Standard 2 (Resources), and institutional leadership is more likely to consider "big picture" issues, see inter-relationships among program elements, and communicate

more frequently and at a deeper level with program administrators and faculty both within and without the unit. This is particularly the case when programs fall outside of the traditional department or college of education, such as speech and hearing and school nursing.

All of these factors benefit the institution, its faculty and staff, and candidates. Yet there is one unintended consequence of the *Framework's* shift from program to unit accreditation, and that is the weakening of accountability for ineffective programs. Since the adoption of the *Framework*, teams have been unwilling to recommend denial of accreditation or recommend probationary stipulations for entire units based on the poor performance of one or two programs, while under the previous model, weak programs were routinely put on probation or denied approval. Weak programs are, in effect, able to hide behind the unit accreditation decision and, to some extent, escape serious sanction. In the movement for accountability and an outcomes-oriented system, this becomes intolerable. The full range of sanctions -- including denial – must be used in order for both reward and penalty to have true meaning.

Recommendation: Include a historical perspective of past performance in the accreditation process into team and COA decision-making considerations.

One critical piece of information that the CCTC does not include in its review of institution's credential programs is past performance. Yet we see this as a component that would further enhance the accreditation process. CCTC staff report sharing the philosophy that their responsibility is to assist IHEs in improving their teacher preparation programs, rather than simply penalize weak institutions by denying them accreditation. The Commission seeks a thorough and deep review of the quality of the institutions' programs, yet a more penetrating measurement of quality would be more easily accomplished if the process took into account an IHE's past performance. To truly assist an institution in improving its program, one needs to consider how the IHE has performed in the past and measure that progress – or lack thereof – over time.

Taking past accreditation decisions into account would allow teams and the COA to reward and recognize IHEs that have made significant progress over the course of 5-10 years, while determining which institutions continue to struggle to achieve minimum levels of adequacy in their programs. This data would further support the COA when it sought to deny accreditation to these weak institutions. For example, two of the case study sites in 2002 had received substantive stipulations on their previous accreditation visits. On these latest visits, the IHEs received full accreditation, and great praise from their visiting teams. By taking a historical view of the improvement these institutions had made in the relatively short period of time of one accreditation cycle, the COA and CCTC could have emphasized the great achievement these IHEs had made. Likewise, an institution that received substantive

stipulations in the past and received the same decision last year should be challenged about its capacity to properly and effectively train educators.

Furthermore, taking a historical perspective allows for greater accountability to be built into the accreditation model. With the implementation of the TPA, the CCTC will soon be able to consider quantitative data about a candidate's performance on assessment as well as past accreditation judgments.

In order to build capacity for improvement and greater accountability, the accreditation model should include a historical perspective rather than a snapshot approach. That is, asking the question, should institutions that continue to receive "substantive stipulations" be in the business of training teachers?

Suggestion: Amend the Framework to allow for greater sanctions to be placed upon low performing programs.

We believe it is possible for the Commission to maintain its model of unit accreditation while simultaneously placing low performing programs on probation or granting other specific stipulations on certain programs. With the addition of taking a historical perspective on institutional and programmatic performance against certain outcome measures, such as the TPA, it would become possible for the Commission to reward institutions that have made steady improvement while penalizing programs, and institutions, that continue to fail to meet standards.

Suggestion: Alter the format of the team report in the area of "Concerns Noted."

The "Concerns" part of the report needs to be reconsidered by the COA and the format for the report should be revised so the team members will clearly understand the expectations of the COA for the report.

Question 2— Do BIR members feel adequately prepared for their role as peer reviewers to achieve the goals of the system? Do they believe that the policies and procedures under which they are operating enable them to achieve the goals of the system?

The BIR survey respondents best address this research question, with added testimony gathered from our observations of accreditation site visits. Our findings show that overall, BIR members felt that they were adequately prepared for their roles on the team. However, case study site observations have lead to the following recommendations regarding improved technology to allow more effective and efficient recruitment of BIR members for accreditation teams, and more training, orientation and performance evaluation of team members.

Recommendation: Strengthen team training, particularly in the areas of interviewing.

Observations of one dozen accreditation visits over the past two years show that team training needs to be strengthened, particularly in the area of interviewing. Interviewing is a skill that needs to be developed and one that few team members have an opportunity to develop in their regular professional lives. The structure of an accreditation visit, with team members individually and in pairs interviewing IHE representatives and then coming together for group discussions results in the CCTC staff consultant only being able to evaluate the quality of team member's discussion and decision-making skills, not their interviewing abilities. Consultants cannot assume that team members know how to effectively gather information through interviews, and since consultants do not observe interviews, they cannot judge the quality of a team member's interviewing skills, only the person's writing skills or decision-making and interpersonal styles. A team member who the consultant deems competent based on team meetings during a visit could be a less than adequate interviewer. CCTC consultants should be able to review and evaluate all aspects of a team member's performance, and then to provide constructive feedback to the team member as to how to improve, either during the visit or for future visits

Significant weaknesses in team members' interviewing skills were regularly observed during the site visits and included consistent failure to notify respondents of the confidentiality of accreditation interviews; asking closed (vs. open-ended) questions; asking leading rather than neutral questions; advising IHE representatives about how to change their programs; and failing to prepare questions in advance and then modify them as needed.

The Framework gives the COA the opportunity to differentiate in the training needs of new and returning team members; however, the COA has not done this. Fulfilling this aspect of the Framework (see Section 5, Continuing Accreditation Teams, C. Training and Orientation of Accreditation Teams, 1. Team Training) would allow the COA to tailor training workshops to meet the diverse needs of the BIR. For instance, with the implementation of new standards, such as 2042, various groups within the BIR, such as team leaders, could receive special orientation and preparation for leading a visit using the new standards.

The improvement of the CCTC's training of team members should be multifold. First, training should not be simply an annual one-time event. If a team member's interviewing skills are found to be weak, the consultant could recommend that the reviewer attend a workshop specifically devoted to interviewing for accreditation visits. Additionally, training needs to be ongoing for all BIR members, not simply for new reviewers; and for greater convenience, training could be held multiple times of the year, in different parts of the state, and would be differentiated for team members based upon their experience, professional backgrounds, and anticipated roles on teams and CCTC needs. Training workshops should be held at a minimum of twice a

year, once in the fall before the November visits, and in the early winter before the spring visits to ensure that new team members have an opportunity to be trained before participating in a review.

In consideration of current budget constraints, workshops could also be held regionally, to better ensure that all BIR members who desire training could more easily obtain it without the burden of having to travel to Sacramento. In addition, training could be customized to meet the specific and varied needs of different types of BIR members and video taped for BIR members to view. Training for reviewers new to the BIR could be differentiated from that of professional development for team leaders or reviewers of, for example, administrative services credential programs. Furthermore, training could also be targeted to focus on one or two specific activities engaged in during an accreditation visit, such as interviewing or document review. To recapitulate, training should be:

- Held more than once a year
- Held regionally in different parts of the state, not only Sacramento
- Differentiated by type of BIR member participating
- Differentiated by accreditation visit activity

Recommendation: Intensify the orientation of accreditation teams.

Consultants need to completely and thoroughly cover all aspects of the principles and procedures of an accreditation visit while on site, and especially discuss the standards that are to be used by the team to guide their data collection and decision-making about the quality of the IHE's programs. In addition to emphasizing the importance of team members informing their interviewees of the confidentiality of their interviews, consultants also need to regularly caution team members against making suggestions to IHE representatives about how the institution's program could or should operate or discussing how team member's program operates during interviews. Consultants uniformly need to remind team members that they are not to instruct IHE representatives *how* they are to meet the standards, only determine whether they are meeting the standards.

On merged CCTC-NCATE visits, all BIR members need specific orientation to the NCATE 2000 standards, covering their similarities and differences from the CCTC Common Standards, to enable all team members, not simply those on the Common Standards cluster, to effectively gather and triangulate data using the NCATE standards as a measuring tool.

A key concept that needs to be reinforced in all BIR training and team orientation is the necessity of notifying all respondents of the confidentiality of the team's data

collection. It is not enough for team members to keep information private and confidential; IHE constituents must be assured of this at the beginning of every interview. Confidentiality is especially important when evidence is being triangulated through a series of interviews.

Recommendation: Evaluate BIR members' skills post-visit and provide feedback.

The CCTC routinely evaluates each BIR member by asking the team leader and consultant to evaluate members of the team after the visit. In addition, CCTC staff seeks feedback from IHE representatives on the quality of the team members who visited their campus. Although this practice is consistently followed, some additional components could be added to provide an even deeper level of feedback than currently available. Also, receiving less than positive feedback about a team member could perhaps be used to identify some underlying reasons why things did not go as expected on the visit.

Observations during site visits found that many team members believed they were performing adequately when in fact there were deficiencies in some aspects of their performance. Team members would benefit from some type of feedback of their accreditation-related skills and performance that would enable them to improve for future visits.

Suggestion: Adopt better technology to allow CCTC staff to more effectively recruit team members.

The process of recruiting team members for accreditation visits could be helped with the use of a database that could be easily searched using specific criteria. The updated contact information, credentials held, and areas of expertise that BIR members were asked to complete was made available to the CCTC for use in making future team member selections. The availability of these and other data in a searchable file could facilitate searching by credential type, area of expertise, and availability date. In addition, the greater distribution of accreditation visits in late winter and spring, vs. clustering them in April and May, could allow more BIR members the opportunity to serve on teams. Recruitment of new team members could also be done at BIR training sessions when enthusiasm for accreditation service is high.

Question 3— Do those from institutions of higher education and their graduates who have been involved in accreditation reviews feel that the system allows them ample opportunity to provide the information necessary for a fair and productive review?

For the most part, IHE respondents report that they believe the Commission's accreditation process allows them ample opportunity to provide the information necessary for a fair and productive review of their credential programs. We make the

following recommendations that if implemented, would further facilitate the ability of institutions to provide the CCTC with this critical information. These recommendations include providing more orientation for institutions new to accreditation to enable them to more effectively prepare for their visits, and encouraging IHEs to develop electronic as well as hard copy documents rooms that would both facilitate team research and provide greater opportunities for institutions to conduct reflective self-evaluation. Furthermore, the scheduling of candidate interviews when more students are available would allow teams and indirectly, institutions, to gain the rich perspectives of students.

Threats to the validity of the accreditation process on the part of institutions include: failure to understand and effectively participate in the accreditation process, and being inadequately or ineffectively prepared for the visit due to scheduling problems, weak interview schedules (either due to internal reasons or late scheduled team members), being late with self-study documents and other legally required documentation, and poorly designed documents rooms.

Recommendation: Develop annual surveys for newly credentialed individuals and their employers to provide an additional source of objective data to inform the accreditation system.

As a way of providing the CCTC with on-going feedback and information, we recommend the use of a survey to collect data from both newly credentialed individuals and their employers. These individuals could be asked a variety of questions, using a Likert scale, about a variety of aspects of the accreditation system. These surveys could be conducted as frequently as necessary and would provide the COA and the Commission with useful and objective data that would inform the accreditation system.

Recommendation: Standardize the formats for documentation required of IHEs, specifically regarding standards for the self-study report.

A notable finding of our review of documentation and interviews conducted revealed a prevailing difficulty in discerning the standards by which an institution is being evaluated. The standards are often not clearly specified in the self-study reports, and are identified in a way that is less than obvious (using numbers only, varying labels and descriptions). It is also inconsistent as to where this information will occur—within a preliminary report, self-study, or other location. Put succinctly, this essential information is not easy to find and when found, not easy to interpret or apply. It is also difficult to find the particular rationale that an institution used to exercise one of the options under program standards

The information about standards should be located and labeled clearly as associated with specific programs within an institution using consistent terminology and numbering systems. For example, in the accreditation reports, the credential

programs for which an institution is seeking accreditation should be listed. It would make it easier on the team member and add clarity to also indicate the standards against which each program will be evaluated. This would be true for other documentation as well. We further recommend that the contextual information be identified, e.g., the rationale for choosing standards and the credential programs with which they are to be associated.

Recommendation: Provide more and better orientation for institutions new to accreditation.

IHE's familiarity and experience with the CCTC accreditation process can have a great impact on the success of the institution's visit. Therefore, institutions new to the accreditation process or IHEs with new leadership need extra training and assistance to prepare for their accreditation visit.

Recommendation: Encourage IHEs to develop electronic documents rooms in addition to better-organized, hard-copy documents rooms.

In this age of the Internet, more institutions should be encouraged to follow the example of one institution that created a secure electronic documents room in addition to its hard-copy documents room. This allowed team members to review materials at their leisure from the hotel while they were discussing or writing their report

One benefit of an electronic documents room is that team members could begin to prepare earlier for the visit. They could also correspond by email, telephone or Internet chat with other members in their clusters, begin to write questions, and divide up responsibilities for information gathering significantly before the visit. This type of virtual cluster meetings could also foster team building even before members meet each other the first day of the visit. Even if IHEs did not establish electronic documents rooms, but prepared their documents by the 60-weekday deadline, team members could discuss their areas of responsibility ahead of time vs. waiting until the visit had begun. These pre-visit discussions could contribute to a deeper, more thorough and efficient review process.

Besides advising IHEs on how to create an interview schedule, the CCTC needs to provide institutions with more guidance as to how to organize a documents room that facilitates rather than hinders team research. IHEs should be provided lists of materials that need to be in the documents room and there should be consequences factored into the team recommendation for IHEs that do not comply. Teams are on campus for a very short time; time spent requesting documents that should be readily available in the documents room is time wasted.

Recommendation: Conduct candidate interviews when students are available.

The CCTC needs to consider seriously the possibility of conducting some student interviews in the evening or on the weekend in order to have full access to this important constituency. IHEs have altered their delivery of educational services to meet the needs of their students; the CCTC should consider amending its practices to meet the reality of instructional schedules of its constituency.

Question 4— What evidence is there that the accreditation review process and the information provided through the review is being used to support program and institutional improvement?

Some of the points mentioned in the conclusions for Research Questions 1-3 could also be applicable as conclusions to this question.

It is clear from interviews that institutional representatives use both the process of creating the institutional self-study and the feedback from the accreditation team to improve their programs. Institutional representatives report in interviews that they take the team comments seriously and begin to respond to suggestions and criticisms immediately after receiving the team report, often even before the COA has acted on the team's recommendations. In fact, self-reflection about their programs and the feedback from peers are two of the aspects of the Framework that institutions value the most about the CCTC's accreditation process. Further, IHEs are required to respond to stipulations placed on their accreditation status by the COA within one year or face losing their accreditation.

We offer several recommendations that if implemented would aid institutions to more effectively use the accreditation process and the information provided through that review to improve their programs. As valuable as self-reflection is, it can be costly in time and human resources. IHEs often need assistance in engaging in this valuable exercise in an efficient fashion. Furthermore, institutions would increase the value of their self-study if they included a historical perspective into their evaluation. Data considered within a historical context would greatly contribute to institutions' ability to improve their programs.

Recommendation: Offer more assistance in the development of self-study documents.

The COA is charged with facilitating the development of institutional self-studies by IHEs (see Section 6, Continuing Accreditation Policies, A. *Accreditation Handbook*, 2. Guidelines for Institutional Self-Study Reports). While CCTC staff consultants do provide technical assistance in preparing documents, the continuing difficulty of some, particularly small, institutions in writing their self-studies indicates that IHEs are either not aware of this aspect of the Framework or are not taking advantage of the expertise available to them.

The CCTC could offer document writing workshops for IHEs preparing for accreditation visits. This seminar could feature discussions of state requirements for the preliminary and self-study reports, examples of high quality documentation from other IHEs, and advice and assistance in preparing a documents room.

The *Framework* specifies that it is the responsibility of the CCTC staff consultant to distribute copies of the self-study report to team members once the documents are

completed (no less than 60 weekdays before the visit0. It has been observed that on many visits, the self-study documents are not available by this 60 weekday deadline (which is actually 12 weeks before the visit, excluding weekends), and that the responsibility of distributing the self-study materials to the accreditation team members has shifted from the CCTC staff consultant to the IHE being visited.

Recommendation: Alter the Framework to allow IHEs to provide data about program improvement over time.

As previously noted, if the accreditation review process entailed a historical rather than a snapshot perspective, it would encourage a more iterative program review rather than an accreditation-driven program review. Currently, the lack of a historical perspective on programmatic change makes it difficult for IHEs to determine whether and how their programs are improving.

Conclusion

The scope of the conclusions and recommendations presented in this report are based on data collected from constituents involved in the accreditation process. The overall sentiment of stakeholders is that the peer review of education preparation programs according to the *Accreditation Framework* effectively serves the goals and objectives of accreditation as identified by the process and procedures outlined in the *Accreditation Framework* and Handbook. Even though the process of preparing for accreditation is long and arduous, it provides IHEs an invaluable opportunity to self-examine their programs and practices to allow them to identify weaknesses and improve their programs through a self-reflective process. The process allows a group of peers who make up the accreditation team the opportunity to make an informed assessment of the program(s) from the self-study documentation and an intensive on-site review that is then summarized into a report and presented to the COA for their consideration of the accreditation team's recommendation.

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