# Discussion of CAEP Related Issues June 2019

#### Overview

This item presents an update on the Council for the Accreditation of Educator Preparation (CAEP) from information gathered at the most recent NASDTEC Conference held in Denver in June 2019. This agenda item also reports on the study that California commissioned to align the CBEST scores to the nationally normed assessments required by CAEP to address CAEP Standard 3.2.

#### Recommendation

Staff recommends the Committee discuss the questions in the item and provide guidance to staff.

#### **Background**

CAEP is a national accreditor for educator preparation entities. California has had a state partnership agreement with CAEP since 2015 and the first joint Commission-CAEP site visit was held in March 2019. The CAEP Accreditation decision is distinct from the Commission's and will take place in October 2019.

CAEP was initially recognized by the <u>Council for Higher Education</u> (CHEA) in 2014 and the recognition was renewed in 2019. CHEA is the agency responsible for recognizing all major accrediting bodies in the U.S. CHEA updated its recognition standards in January 2019 and the changes most pertinent to CAEP are identified below. The language in bold identifies the newer concepts in the CHEA standards:

- 10F. Promotes Academic Quality and Advances Student Achievement. To be recognized, the accrediting organization provides evidence that it **implements and enforces its standards, policies or procedures which:** [F] Encourage and assist institutions and programs in ongoing improvement of academic quality and performance, including a commitment to **flexibility** and appropriate **innovation** in promoting academic quality.
- 11A1. Demonstrates **Public Accountability** for Performance and Transparency. [A] The accrediting organization implements and enforces standards, policies or procedures that: [1] Inform the public of the reason(s) for the accrediting organization's accreditation actions (i.e., decision made by the accrediting organization, as the result of an institution or program review to **grant**, **reaffirm**, **deny**, **withdraw or defer accreditation**, **or award candidacy or pre-accreditation**, **or to impose notice**, **warning**, **show cause or probation status**) in a timely and readily accessible manner, including the institutional or program comments if any.
- 12J. Sustains an effective accreditation structure and organization. To be recognized, the accrediting organization demonstrates that it: [J] Assures procedural **due process** in accreditation activities, including, without limitation, (1) publication of an **appeals policy** that informs the institution or program of the process to be used and actions that may be taken (i.e., the grounds for appeal, the process by which the appeal will be conducted and heard by individuals independent of the body that made the decision to deny or remove accreditation and any costs associated with an appeal) and (2) an effectively administered **conflict of interest policy** that covers all accrediting

organization staff, site visitors and members of accreditation-recommending and decision- making bodies.

CAEP is working with CHEA to provide information that addresses these new required elements by CHEA.

Appendix A provides information on the responsibilities of the CAEP site visit team and the CAEP boards as well as the possible accreditation decisions and consequences of the decisions. Appendix B provides information on the number of nationwide CAEP site visits each semester, the stipulations placed on the educator preparation programs (EPPs), and the Areas for Improvement (AFIs) placed on EPPs.

#### **CAEP Use of Stipulations and Areas for Improvement (AFIs)**

Staff reminds the Committee CAEP accreditation reports include both Areas for Improvement (AFIs) and Stipulations. Definitions from the <u>CAEP Accreditation Handbook</u> are provided here for the Committee's reference:

#### Stipulation

An identification by the Accreditation Council that describes one or more systemic concerns or serious deficiencies in evidence for a CAEP Standard and/or component that must be remedied in order to continue accreditation. The site team report recommends stipulations based on their review of self-study report evidence, and Accreditation Initial Panels make a determination that is confirmed or amended by the Joint Panel and the full Council. Failure to correct the condition leading to stipulation results in Probation, Revocation, or Denial of accreditation, as determined by the Accreditation Council. Stipulations contrast with areas for improvement (AFIs), which identify less serious deficiencies in evidence.

# Areas for Improvement (AFI)

AFIs indicate areas which must be improved by the time of the next accreditation visit. Progress reports on remediation of AFIs are submitted as part of the Annual Report. AFIs not remediated by a subsequent accreditation visit may become stipulations.

Defined for site visitors as in Accreditation Handbook 2016 as:

"A single AFI is usually not of sufficient severity that it leads to an unmet standard. However, a combination of AFIs may lead the site visit team to recommend a stipulation or the Accreditation Council to determine a stipulation is warranted. Areas for Improvement should be remediated by the next accreditation cycle and progress toward improvement is reported annually through the annual report process."

<u>Appendix C</u> provides sample CAEP stipulations that have been placed on institutions over the past two years while <u>Appendix D</u> provides sample AFIs that have been placed on institutions over the past two years.

#### **CBEST Study**

CAEP Standard 3.2 requires institutions seeking CAEP accreditation to show that the group average performance of their enrolled candidates is in the top 50% of those assessed on nationally normed assessments at either admission or at some other time prior to candidate

completion. Many states use candidate SAT or ACT scores for this nationally normed assessment. However, CAEP allows states to petition for the use of a valid and reliable substantially equivalent alternative assessment of academic achievement on a case by case basis. The Commission worked with <a href="Evaluation System group of Pearson">Evaluation System group of Pearson</a> to conduct an <a href="equivalency study">equivalency study</a> of CBEST scores with SAT scores to identify the CBEST scores that define a candidate as in the top 50% of the national SAT scores. The study was accepted by CAEP as an alternative assessment of academic achievement in March 2019 and is identified on the CAEP website as <a href="mailto:one of the methods an institution may use to demonstrate that it is meeting CAEP Standard 3.2">Evaluation SAT scores</a> one of the methods an institution may use to demonstrate that it is meeting CAEP Standard 3.2.

## California's State Partnership Agreement with CAEP

The first state partnership agreement between the Commission and CAEP was signed in <u>April 2015</u>. Initially, the agreement was designed to be in effect from December 2014 through November 2021. Now, CAEP has decided that 7-year agreements are not acceptable, and plans to ask states to renegotiate agreements on a three or four year cycle. Therefore, California will need to begin this process with CAEP.

As part of the development of the new state partnership agreement, staff suggests that the Committee revisit some of the aspects that were included in the original state partnership agreement. Currently, California hosts joint Commission-CAEP accreditation visits. CAEP has slightly different standards for initial teacher preparation programs and what CAEP considers to be <u>Advanced Programs</u>. California's Common Standards apply to all institutions that sponsor educator preparation. Below are some areas staff believes that the Committee should discuss prior to drafting a new state partnership agreement.

## Reconsideration of Joint Visits to Concurrent Visits

Staff suggests that since the CAEP Standards and accreditation processes are not closely aligned with the Commission's standards and processes, that it might be appropriate to consider concurrent site visits, rather than joint site visits for California institutions seeking CAEP accreditation.

## Confirmation of CAEP Options for Reviewing Programs

CAEP allows options for reviewing programs. They are state program review, CAEP program review, or review by Specialty Professional Associations. The current agreement with CAEP requires all California institutions to complete California's Program Review process and staff suggests that this remain the case in the new agreement. Historically the Committee has felt that all California programs must be reviewed against the Commission-adopted program standards and to accomplish this, the programs need to complete the Program Review process.

Number of CAEP Team Members for CAEP from California appointed by the Commission California has always identified a Co-Chair for joint Commission-CAEP accreditation teams and placed two California members on the CAEP portion of the site visit team. Initially, CAEP was placing 3-4 national visitors on the CAEP portion of the team, which with the addition of the two California members provided sufficient team members to review and address the five CAEP Standards. Beginning with the 2019-20 site visits, CAEP is reviewing the advanced programs as well as the initial teacher preparation programs during site visits, CAEP will be placing at least one additional team member on the CAEP portion of the team.

Staff suggests that it might be appropriate for the Commission to place only one California member on the CAEP portion of the team. The California member that was previously placed on the CAEP portion of the team would instead be placed on the Commission portion of the team to allow additional focus on the significant components of the Commission's Common Standard concepts that are not addressed by CAEP standards.

#### **Questions to Discuss**

- 1. Is the Committee be supportive of staff talking with institutions and CAEP about moving from joint accreditation site visits to concurrent site visits?
- 2. Is the Committee supportive of continuing to require California institutions to participate in the Commission's Program Review process?
- 3. Is the Committee supportive of staff talking with CAEP about placing only one California member on the CAEP portion of the site visit team?

## **Next Steps**

Based on the Committee's discussion, staff will work with staff at CAEP and bring additional updates to the Committee at future meetings.

#### Appendix A

#### **CAEP Data Gathering and Decision Structure**

Site Visit Team: Participates in the off-site review and the physical site visit. Reviews

evidence and makes recommendations on Areas for Improvement (AFIs)

and Stipulations

Accreditation Council: Responsible for making accreditation decisions for institutions. Meets

two times a year (October and April). The Council has two panels, Panel A and Panel B. One panel has primary responsibility for each institution but both panels come to consensus on decision. Primary panel reads the Self-Study, the team's initial feedback, the institution's addendum, the team's report, rejoinder, and team's response to the rejoinder. The Chair of the

Council organizes and leads the meetings but does not vote on

Accreditation decisions. Council nominates a Vice Chair and the Vice

Chair votes on items.

Board of Directors: Meets two times a year (June and December). Board makes all policy

decisions. The Chair of the Accreditation Council is on the Board. The Vice Chair of the Council attends Board meetings but does not have a

vote on the board.

#### **CAEP Accreditation Decisions**

#### Accreditation

- May include Areas for Improvement (AFIs) report on each AFI on each annual report
- 7 years

#### Accreditation with Stipulation

- Only focuses on the standard(s) with stipulation(s)
- 2 year term followed by virtual visit where team reviews evidence submitted and makes recommendation about stipulation being met

#### **Probation**

- Not meeting one standard
- Followed by physical site visit team to review evidence, make recommendation to Accreditation Council to determine standard is met
- 2 year term

#### **Denial of Accreditation**

Not meeting more than one CAEP standard

# Appendix B Recent CAEP Accreditation Decisions

# **Number of Stipulations by CAEP Standard**

Spring 2017-Spring 2019

, 5	Spring 2019	Fall 2018	Spring 2018	Fall 2017	Spring 2017	
Number of Educator Preparation Programs (EPPs) Hosting Visits	44	56	49	55	48	
EPPs with Stipulations	9	14	14	9	11	
1: Content and Pedagogical Knowledge	3	3	0	0	3	
2: Clinical Partnerships and Practice	6	5	2	0	1	
3: Candidate Quality, Recruitment, and Selectivity	4	9	3	0	0	
4: Program Impact	10	8	3	3	4	
5: Provider Quality, Continuous Improvement, and Capacity	11	18	21	12	3	
Total	34	43	29	15	11	

# **Number of AFIs by CAEP Standard and Component**

Spring 2019, 27 EPPs received AFIs out of 44 site visits

		Components of the CAEP Standards						
CAEP Standards	Total	1	2	3	4	5	6	
1: Content and Pedagogical Knowledge	8	1	3	1	1	1	-	
2: Clinical Partnerships and Practice	16	2	7	4	-	-	-	
3: Candidate Quality, Recruitment, and Selectivity	20	10	2	1	1	1	1	
4: Program Impact	21	7	3	3	4	-	-	
5: Provider Quality, Continuous Improvement, and Capacity	37	4	14	6	3	6	-	

## **Appendix C**

#### **Sample CAEP Stipulations**

- The EPP does not demonstrate that clinical experiences before student teaching are of sufficient depth and breadth to demonstrate impact on all student learning (Component 2.1)
- No plan was provided for co-selection and evaluation of school based and EPP clinical faculty is limited or absent. (Component 2.2)
- No plan was provided for the co-selection and evaluation of school based and EPP clinical faculty is limited or absent. (Component 2.2)
- The EPP does not provide a recruitment plan. (Component 3.1)
- The EPP provided no evidence that candidates understand ethics, professional standards, laws and policies. (Component 3.6)
- The EPP did not provide evidence or sufficient plans across all indicators of completers' impact on P-12 student learning or structured and validated completer/employer surveys to document program effectiveness. (Standard 4)
- The EPP has no plans for demonstrating program impact measures. (Standard 4)
- The EPP does not have a quality assurance system that is comprised of multiple measures that systematically monitor candidate progress and provider's operational effectiveness. (Component 5.1)
- There is little evidence that the EPP maintains a quality assurance system comprised of valid and reliable data (including evidence of completers' impact on P-12 learners) or regularly and systematically assesses performance for continuous improvement to inform, modify, and evaluate EPP effectiveness. (Component 5.1)
- There is little evidence that at least 50% of EPP-created assessments in the quality assurance system are scored at the minimal level of sufficiency as defined by the CAEP Assessment Evaluation Rubric. (Component 5.2)
- The EPP did not provide sufficient evidence that their quality assurance system relies on relevant, verifiable, representative, cumulative and actionable measures, and produces empirical evidence that interpretations of data are valid and consistent. (Component 5.2)
- The EPP neither regularly nor systematically reviews EPP performance, tracks results over time, nor does it use results to improve EPP elements and processes. (Component 5.3)
- The EPP does not have a plan to regularly and systematically assess performance against its goals and relevant standards, track results over time, test innovations and the effects of selection criteria on subsequent progress and completion, and use results to improve program elements and processes. (Component 5.3)
- The EPP did not provide a plan to measure completer impact that is summarized, externally benchmarked, analyzed, shared widely, and acted upon in decision-making related to programs, resource allocation, and future direction. (Component 5.4)

## Appendix D

#### Sample AFIs

- 1. Lesson Plan template lacks a rubric and hence no data to support the tracking of candidates' performance. (Component 1.1, Fall 2017 SV)
- 2. The curriculum is not structured to provide comprehensive knowledge and skills for candidates to respond to the cultural and ethnic diversity of the students they serve. (Component 1.1, Fall 2017 SV)
- 3. There is no evidence of assessments associated with candidate use of research. (Component 1.2, Fall 2017 SV)
- 4. The EPP does not provide consistent evidence that candidates know how to employ strategies for measuring P-12 student progress. (Component 1.2)
- The EPP did not provide sufficient evidence that candidates use research and evidence to assess P-12 student progress and modify instruction based on student data. (Component 1.2, Fall 2017 SV)
- 6. The EPP does not systematically prepare candidates to meet the needs of diverse learners (component 1.2, Fall 2017 SV)
- 7. The EPP did not provide a sufficient plan regarding the collection of data related to candidates' ability to afford all P-12 students access to rigorous college and career-ready standards. (Component 1.4, Fall 2017 SV)
- 8. The EPP lacks sufficient evidence or plans that candidates demonstrate the college and career-ready standards. (Component 1.4, Fall 2017 SV)
- 9. The EPP does not provide evidence that candidates model and apply technology standards. (Component 1.5, Fall 2017 SV)
- 10. The EPP does not systematically prepare candidates to integrate technology in instruction (Component 1.5, Fall 2017 SV)
- 11. The EPP provides limited evidence of candidates' ability to design and facilitate technology enhanced instruction (Component 1.5, Fall 2017 SV).
- 12. The EPP does not provide evidence of co-construction of mutually beneficial P-12 school and community arrangements for clinical preparation. (Component 2. 1, 2.2, Fall 2017 SV)
- 13. The EPP did not provide a plan to create a shared responsibility model that included strategies to co-select, prepare, evaluate, support, and retain high-quality clinical educators. (Component 2.1, Fall 2017 SV)
- 14. The EPP does not have a plan to co-select, prepare, evaluate, support, and retain high-quality clinical educators. (Component 2.2, Fall 2017 SV)
- 15. The EPP does not have a plan to co-select, prepare, evaluate, support, and retain high-quality clinical educators. (Component 2.2)
- 16. The EPP did not provide a plan to ensure diversity in placement for all candidates. (Component 2.3, Fall 2017 SV)

- 17. The EPP did not provide a plan to ensure diversity in placement for all candidates. (Component 2.3, Fall 2017 SV)
- 18. A sufficient plan was not provided to demonstrate that candidates' placements in a diverse field and clinical settings are tracked in a systematic manner (Component 2.3, Fall 2017 SV)
- 19. The EPP does not have a plan to ensure that clinical experience requirements require that candidates demonstrate their positive impact on P-12 students' learning and development. (Component 2.3)