Completing the Reaffirmation Process

The Committees on Compliance and Reports (C&R), standing committees of the [SACSCOC Board of Trustees] review reports prepared by peer committees and the institutional responses to those reports. A C&R Committee's recommendation regarding an institution's reaffirmation of accreditation is forwarded to the Executive Council for review. The Executive Council recommends action to the full [SACSCOC Board of Trustees] which makes the final decision on reaffirmation and any follow-up activities that it requires of an institution. The full [SACSCOC Board] convenes twice a year.

Part VI

REVIEW BY THE
SACSCOC BOARD OF
TRUSTEES

The departure of the On-Site Reaffirmation Committee at the conclusion of the Exit Conference certainly signals significant progress in the journey to reaffirmation, but institutions still have a few more miles to travel before reaching their destination. Only the SACSCOC Board of Trustees has the power to reaffirm accreditation, and the Board’s review of institutions seeking reaffirmation takes place approximately seven to ten months after the on-site review – in June for Track A institutions and in December for Track B institutions.

Role of the Evaluators

SACSCOC has 77-elected Board of Trustees members who make the final decision on an institution’s reaffirmation of accreditation. Of the 77, 13 are elected to the Executive Council of the Commission. The other 64 members serve on one of the Board’s Compliance and Reports Committees (C&R Committees). Reaffirmation actions by the SACSCOC Board of Trustees stem from recommendations made to it by the Executive Council; the Executive Council’s recommendations are based on recommendations that it receives from the Compliance and Reports Committees. Board members recuse themselves from decisions on institutions within their own states and from decisions on institutions with which they have a conflict of interest. Further information about the review process is available in the Commission’s policies “Ethical Obligations of Members of SACSCOC Board of Trustees and of Evaluators” and “Standing Rules: the Commission on Colleges, Executive Council, and the College Delegate Assembly,” which are available at www.sacscoc.org. The role of the evaluators at each level of the Commission’s review is described below.

Committees on Compliance and Reports. In addition to the 64 elected Trustees who serve on the C&R Committees, membership may be expanded to include appointed special readers whose expertise – typically in the areas of finance, institutional effectiveness, and library/learning resources – is germane to the compliance issues under review. C&R Committees have the authority to recommend action on reaffirmation, including denial of reaffirmation and the imposition of public sanctions.

Following review of the (1) Report of the Reaffirmation Committee, (2) the Response to the Visiting Committee Report and updated QEP provided by the institution, (3) an evaluation of the institution’s response by the Chair of the on-site review, and (4) an analysis
transmit the final copy of the reaffirmation report to institutions. That mailing includes
directions for completing the institution’s response, and the transmittal letter specifies both
the date that it is due and the number of copies required. Requirements for formatting the
response are summarized in the Commission policy “Reports Submitted for Committee or
Commission Review,” available at www.sacscoc.org. To ensure that the formatting of
the response meets the expectations of the members of the Compliance and Reports Committees,
institutions should follow precisely the policy’s directions under “Report Presentation.”

Institutions are required to respond to all of the recommendations in the Report of the
Reaffirmation Committee, but they are not required to address any of the Committee’s
additional observations or consultative comments. The Committee’s recommendations are
listed at the end of the Report of the Reaffirmation Committee in Appendix C, which
provides a handy reference for organizing the response. As in Compliance Certifications and
Focused Reports, the response should present both a narrative describing the institution’s
current status and documentation confirming that status. In short, the narrative should be
clear, detailed, and comprehensive and should explain thoroughly the actions recently taken
by the institution to ensure compliance, and the documentation should be appropriate for
demonstrating achievement of compliance. The advice on writing the narratives and
selecting the documentation for the Compliance Certification, presented in Section II of this
handbook, applies as well to the development of the Response Report to the On-Site
Reaffirmation Committee.

**Quality Enhancement Plan.** Commission approval of the institution’s Quality
Enhancement Plan lays the foundation for the Board’s review of the implementation of the
QEP five years later in the Fifth-Year Interim Report. Institutions that received no
recommendations on their QEPs should submit copies of the same document that was mailed
to the On-Site Reaffirmation Committee. For institutions that received recommendations
relative to their Quality Enhancement Plans, however, ensuring that members of the
Compliance and Reports Committees can easily determine how the text of the original QEP
has been adjusted in response to those recommendations is a key consideration when
formatting the Response to the On-Site Reaffirmation Committee Report. For this reason,
institutions frequently submit two QEPs for Commission review -- the original version that
was mailed to the On-Site Reaffirmation Committee and the revised version that clearly
indicates and incorporates adjustments made to address recommendations.

**Record of the Board of Trustee’s Action**

Approximately three working days after the SACSCOC Board of Trustees takes
action on reaffirmation decisions at either the Summer Meeting in June or the Annual
Meeting in December, those decisions are posted on the Commission’s website. Institutions
that have been reaffirmed are identified at the top of the posting by name, city, and state.
Institutions that have been denied reaffirmation, continued in accreditation, and placed on
sanction are identified at the bottom of the list in the section addressing sanctions and other
negative actions. For these institutions, the entry also identifies the standards with which the
institution has not yet documented compliance. Approximately two weeks after the website
posting, letters signed by the President of the Commission officially notify the CEOs of the
are required, however, print copies of the financials must be submitted. Requirements for formatting the Monitoring Report are summarized in Commission policy “Reports Submitted for Committee or Commission Review,” available at www.sacscoc.org. To ensure that the formatting of the Monitoring Report meets expectations, institutions should follow precisely the policy’s directions under “Report Presentation.”

Fifth-Year Interim Report

Accrediting agencies that are recognized by the USDE must monitor their institutions often enough to ensure that institutions having access to federal funds maintain compliance with accreditation standards. Because many accrediting bodies reaffirm on five- or seven-year cycles, the Commission on Colleges has developed the Fifth-Year Interim Report to demonstrate to the USDE that the Commission monitors institutional compliance more frequently than once a decade. This report is required of all institutions five years in advance of the next reaffirmation of accreditation. Institutions that have expanded the number of off-campus sites since their last reaffirmation or have experienced rapid growth in off-campus offerings may also be required to host an on-site review of a sample of off-campus sites.

Eleven months prior to the due date for the Fifth-Year Interim Report, the President of the Commission notifies institutions of the dates for submission and review of the report and indicates whether a committee visit to a sample of off-campus locations will be required. Timetables for the notification, submission, and review of the Fifth-Year Interim Report are available at www.sacscoc.org/FifthYear.asp. Like the other documents previously submitted as part of the reaffirmation process, the Fifth-Year Interim Report may be submitted in paper or electronic form. General directions for the submission of paper or electronic documents are included in “The Fifth-Year Interim Report,” which is also available at www.sacscoc.org/FifthYear.asp.

In addition to the signature page (Part I, requiring the signatures of the CEO and the accreditation liaison to attest to the accuracy of the report) and the Institutional Summary Form (Part II, providing reviewers with a brief history and description of the institution), the Fifth-Year Interim Report contains three additional sections – the Compliance Certification (Part III), the Additional Report (Part IV), and the Impact Report of the Quality Enhancement Plan (Part V).

Fifth-Year Compliance Certification (Part III). For selected standards from The Principles of Accreditation, institutions are asked to indicate Compliance or Non-Compliance. Standards for which an institutions selected Compliance should be followed by a narrative that provides a convincing justification for the determination of compliance and by appropriate documentation that supports compliance; standards marked Non-Compliance should be followed by a narrative that provides a plan for coming into compliance and a list of documents that will be used to document compliance in the future. Institutions might develop the Fifth-Year Compliance Certification by extracting the corresponding text from the Compliance Certification submitted for the last reaffirmation and updating the narrative and documentation to reflect changes during the interim. Further guidance for the preparation of this document is provided in “Directions for Completion of
Compliance and Reports for review. C&R Committees may recommend acceptance of these reports with no further monitoring or may request a Monitoring Report if documentation of compliance is not evident for all of the standards under review. Institutions are expected to achieve compliance as quickly as possible. The maximum period for routinely submitting Monitoring Reports is two years, but even during that two-year period, the SACSCOC Board of Trustees may impose a sanction if reasonable progress towards compliance is not documented. At the end of the two-year period, institutions that have still not documented compliance must either be removed from membership or be continued in membership for good cause, placed on Probation, and asked to submit an additional Monitoring Report.

Currently, the two fifth-year segments that apply to all institutions – the Fifth-Year Compliance Certification (Part III) and the Impact Report of the Quality Enhancement Plan (Part V) – are sent to the Committee to Review Fifth-Year Interim Reports, which is composed of experienced evaluators. Four sub-committees (each with a Coordinator and two academic program evaluators, one institutional effectiveness evaluator, and one support services evaluator) review reports from a cluster of institutions grouped by similarity of missions, programs, and/or governance. The Committee to Review Fifth-Year Interim Reports either determines that compliance with all standards has been documented or that additional documentation is required for one or more of the standards. If further documentation is required, the institution is asked to prepare a Referral Report for review by the Compliance and Reports Committee at one of the next two Board meetings. For further details of the review process, see “An Overview: The Fifth-Year Interim Report Review Process” at www.sacscoc.org/FifthYear.asp.