## Criteria: 602.18(c) Decisions Based on Published Standards

#### **Narrative**

ACICS awards accreditation solely based upon its published standards in the Accreditation Criteria (Exhibit 1). Criteria are consistently applied and enforced to ensure that the education and training offered by ACICS-accredited institutions are of sufficient quality to achieve the stated objective(s) for the duration of the accreditation period granted. ACICS provides effective controls against the inconsistent application of its criteria and standards, and bases its decisions explicitly upon these published standards.

ACICS consistently uses the published standards as the basis for review and evaluation of institutions. The standards published in the Accreditation Criteria are organized into numbered sections. These sections are referenced each time a team describes an area of non-compliance in its evaluation report (Exhibit 144, Empire Team Report), and are also referred to on the File Review Worksheet (Exhibit 129, File Review Worksheet), for use by the Intermediate Review and Council Committees. If the Council decides to defer action on a grant application or take a non-compliant action (i.e. compliance warning, show-cause directive, and denial or withdrawal), these published criteria are referenced once again in the letters that are sent to the institutions describing the actions of the Council. The action letters in Exhibit 145, (Multi-Level Council Actions) demonstrate that ACICS Council actions are based strictly upon the agency's published standards.

All student achievement standards (i.e. retention, placement, and licensure exam pass rates) are evaluated according to ACICS standards set forth in the Accreditation Criteria (Exhibit 1, Appendix L, pp. 134-139). Institutions are not permitted to set their own student achievement standards in these areas and must meet Council requirements. The use of uniform standards ensures consistency in application. The Council takes actions against all campuses and programs that do not meet the set standards and campuses and programs are subject to withdrawal actions in accordance with the policy described in Appendix L (Exhibit 136: Sample SA Letters).

ACICS allows institutions to set its own standards related to graduate, student, and employer levels of satisfaction, and various student learning outcomes. Consistency in the evaluation of these elements is promoted by the fact that institutions are required to identify and describe how their data are collected, the rationale for using each type of data, a summary and analysis of the data collected, and an explanation of how the data have been used to improve educational processes, including baseline data against which to measure progress. They are also required to describe activities undertaken to achieve goals, document the implementation of these activities, and evidence that this information is reviewed and evaluated at least annually. ACICS requires the institution to continuously review these elements through the Campus Effectiveness Plan process (Exhibit 1, Section 3-1-110, pp. 45-46 and Appendix K, pp. 132-133; Exhibit 137, Forrest College CEP Review). The team chair evaluates these standards in questions 1.06 through 1.13 of the visit report (Exhibit 137, Forrest College CEP Review).

Safeguards include the use of three different levels of evaluation, the site evaluation team, the recommendation from the Intermediate Review Committee, and the Council, ensuring consistency at each step in the process. Ultimately, accreditation decisions can only be taken by the Council and thus it is the discussion and decision by the Council that serve as the final safeguard to ensure that decisions are based solely on the Accreditation Criteria (Exhibit 45, Council Meeting Minutes).

Additional safeguards include the training of staff, evaluators, team chairs, IRC members, commissioners, and Review Board members, to ensure their common knowledge of the standards and of the institutional review process. Training of each of these groups is documented through the training manuals and slides in the following exhibits: Visit Evaluation Procedures and Guidelines (Exhibit 69), Evaluator Refresher Training, (Exhibit 72), Team Chair Training Binder (Exhibit 76), IRC Training Binder (Exhibit 88), Commissioner Training Manual (Exhibit 66), and Review Board Training Manual (Exhibit 66).

As requested in the August 31, 2017 letter from the Department's Accreditation Division, Exhibit 146, ACICS includes in this petition the attached School Finding Spreadsheet (Exhibit 147) which includes information regarding the findings and actions of ACICS with respect to Branford Hall Career Institute, Daymar College, Miller-Motte Technical Institute, and West Virginia Business College, including a cross reference of such Accreditation Criteria discrepancies and resulting agency action with the Department's agency recognition criteria to demonstrate effective implementation of its standards with respect to these schools.

# Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 129 File Review Worksheet-Empire	Exhibit 129 File Review Worksheet-Empire.pdf		
Exhibit 136 SA Actions	Exhibit 136 SA Actions.pdf		
Exhibit 137 Forrest College CEP Review	Exhibit 137 Forrest College CEP Review.pdf		
Exhibit 144 Empire Team Report	Exhibit 144 Empire Team Report.pdf		
Exhibit 145 Multi-Level Council Actions	Exhibit 145 Multi Level Council Actions.pdf		
Exhibit 146 Letter from Dept. Accreditation Division	Exhibit 146 Letter from Dept. Accreditation Division.pdf		
Exhibit 147 School Finding Spreadsheet	Exhibit 147 School Finding Spreadsheet.pdf		
Exhibit 45 Council Meeting Minutes-December 2016 and April 2017	Exhibit 45 Council Meeting Minutes-December 2016 and April 2017.pdf		
Exhibit 46 Commissioner and Board of Director Training Manual	Exhibit 46 Commissioner and Board of Director Training Manual.pdf		
Exhibit 66 Review Board Training Manual	Exhibit 66 Review Board Training Manual.pdf		
Exhibit 69 Visit Evaluation Procedures and Guidelines	Exhibit 69 Visit Evaluation Procedures and Guidelines.pdf		
Exhibit 72 Evaluator Refresher Training	Exhibit 72 Evaluator Refresher Training.pdf		
Exhibit 76 Chair Training Binder	Exhibit 76 Chair Training Binder.pdf		
Exhibit 88 IRC Training Binder	Exhibit 88 IRC Training Binder.pdf		

# Analyst Worksheet - Narrative

Analyst Review Status: Meets the requirement of this section.

## **Analyst Remarks to Narrative:**

The agency has demonstrated via its application of written policies and processes that it bases decisions regarding accreditation on the published standards in its Accreditation Criteria (Exhibit 1). The agency requires that an institution seeking a grant of accreditation must address all standards via the self-study. The on-site review team assesses an institution's compliance with each standard and verifies the information in the self-study. The council and the Intermediate Review Committee use the information provided by the institution and the report provided by the on-site evaluation team as the basis for its review. The council's deliberation and decision-making is based on the information and recommendations provided to it. Also, the on-site review teams and the council follow a standardized, documented process, and that process allows only for accreditation decisions to be made based on the standards. There is no evidence that the agency bases its decisions on anything other than its published standards.

The agency also addressed the specific requests of the Department in this section and throughout the petition.

List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.18(d) Reasonable Assurance of Accurate Information

#### Narrative

ACICS standards state that "the integrity of an institution is manifested by the professional competence, experience, personal responsibility and ethical practices demonstrated by all individuals comprising the ownership control or management" (Exhibit 1, Section 3-1-202, pp. 46-47). "All data reported to ACICS for any purpose is expected to reflect an accurate and verifiable portrayal of institutional performance and is subject to review for integrity, accuracy and completeness" (Ibid., Section 3-1-203, p.47). ACICS uses a combination of traditional accreditation approaches and data verification procedures to assure that the information the Council relies upon in making accreditation decisions is accurate. In the re-accreditation process, site visitors verify information that has been provided to the Council in the renewal application, including a self-study narrative, catalog, and academic credit analyses (Exhibit 21, Institutional File-WVBC, pp.4-51, 133-186, 52-63; Exhibit 64, Institutional File-Dubois, pp.6-54, 192-251, 55-67).

Site visitors are trained and follow a written process for obtaining needed information and for verifying its accuracy, through cross-checking existing records and interviewing numerous staff members, faculty, and students (Exhibit 69, Visit Evaluation Procedures and Guidelines, pp. 21-30; and Exhibit 71, Evaluator Training Binder, pp. 11-14). Evaluators share their initial findings with the team chair and ACICS staff representative who present the concerns to the institution while on-site, so there is an opportunity for the administration to demonstrate that the team had accurate information in its review. The institution is given a second opportunity to respond to any findings detailed in the formal evaluation report following the conclusion of the visit. In its response, the institution has the opportunity to affirm or dispute the accuracy of the information recorded by the team to justify its ongoing compliance with ACICS standards (Exhibit 21, Institutional File, WVBC, p.427; Exhibit 64, Institutional File-DuBois, p. 291).

The broad authority and purpose for measuring retention, placement and licensure/certification performance is expressed in Section 3-1-110 of the Accreditation Criteria which states: "An important indication of the overall effectiveness of an ACICS-accredited institution is the degree to which it meets its own predetermined educational outcomes... for the Campus Effectiveness Plan, the following six elements, at a minimum, will be evaluated for institutional effectiveness: 1. student retention rates; 2. student placement rates; ... 5. student learning outcomes (licensure and certification)" (Exhibit 1, Section 3-1-110, p. 45).

Student achievement data collected from each campus and their programs also inform the accrediting decisions of the Council. Data are collected through the Campus Accountability Report (CAR) (Ibid., Section 2-1-801, p. 21, and 2-1-809, p. 22). The CAR has matured from a paper based system that relied on the institutions to calculate retention and placement rates to a web based system that calculates retention and placement rates directly from individual student data, as discussed in response to §602.16(a)(1)(i). Because the reliability of student achievement data is material to the validity and credibility of accrediting decisions by the Council, ACICS applies a stand-alone data integrity standard to all data reported by the campus and campuses held accountability for any concerns raised with the accuracy and reliability (Exhibit 1, Section 3-1-203, p. 47; Exhibit 138, DIR-Team Reports).

Additional program-and campus-level trending data are also given to the Council. ACICS subjects student achievement data to three testing protocols: 1) data integrity upon submission, accomplished through algorithmic computer software, as described above; 2) review of data integrity on site; and 3) validation of monthly placement outcomes through the Placement Verification Program (PVP) system. The onsite review data include the verification of the retention rate reported on the annual report and the validation of graduates classified as not available for placement for several very specific reasons, documentation for which must be on file. The PVP system requires that the data be confirmed by the graduate or employer with subsequent validation of the placement by ACICS (Exhibit 6, Policies and Procedures Manual, Chapter 39). Results are shared with the onsite team and with the Council. If any of the testing protocols reveal inconsistencies or data integrity issues, the institution may be directed to subject the data to an independent audit at the institution's expense (Exhibit 97, Living Arts College Show-Cause Directive; and Exhibit 98, CSI Adverse Review, p. 8). These enhancements to the reliability of information used in reaching accrediting decisions increase confidence in the reliability of data reviewed by the Council, produce direct feedback to institutions supporting quality assurance and improvement (Exhibit 148, Communication to Institutions-PVP Submissions).

ACICS also places an important focus on the accuracy of data that prospective students and the general public rely on in making judgments about the overall quality of an institution. Misrepresentation in the disclosure of performance or institutional information will result in a finding and require a response and resolution by the institution (Exhibit 18, Institutional File-Branford Hall, pp. 152-153; Exhibit 64, Institutional File-DuBois, pp. 321, 323, 324.

## Relevant ACICS History

The 2016 Department Staff Report to the Senior Department Official found that ACICS did not satisfy this requirement because "ACICS must clarify how the agency holds institutions accountable for ensuring integrity in their data submissions and explain their verification processes" (Exhibit 42, p.2). That report further stated that ACICS "must provide documentation demonstrating that they have applied their standards (such as an onsite visit report). Id. The Report further stated that although ACIS has a Placement Verification Program (PVP) that "has a valid purpose" it was "apparent that the Agency had an inadequate process and providing insufficient resources to accomplish its purpose as well as inadequate process for verifying institutional retention rates and therefore ACICS did not meet this regulation. See id. at 19.

As stated in the July 2016 Response to the SDO Decision, historically, ACICS relied upon on-site random sampling of placement outcome back-up documentation as its standard protocol and practice. That process, however, was transformed beginning in Spring 2016 with addition of dedicated Data Integrity Reviewer (DIR) to review every placement outcome reported by the campus for the previous year, including all available back-up documentation, not just random samples and then with the PVP system. That process is discussed in detail above, as well as under Section §602.17(a)(2) and 602.16(a)(1)(i) of this petition. ACICS has strengthened its policies and procedures related to establishing a reasonable basis for ensuring that information relied upon by the agency in making decisions is accurate, and meets the requirements of this recognition criteria.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 138 DIR Team Reports	Exhibit 138 DIR Team Reports.pdf		
Exhibit 148 Communication to Institutions-PVP Submissions	Exhibit 148 Communication to Institutions-PVP Submissions.pdf		
Exhibit 18 Institutional File-Branford Hall Branford	Exhibit 18 Institutional File Branford Hall - Branford.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 42 2016 Department Staff Report	Exhibit 42 2016 Department Staff Report.PDF		

Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf	
Exhibit 69 Visit Evaluation Procedures and Guidelines	Exhibit 69 Visit Evaluation Procedures and Guidelines.pdf	
Exhibit 71 Evaluator Training Binder	Exhibit 71 Evaluator Training Binder.pdf	
Exhibit 97 Living Arts Show-Cause Directive	Exhibit 97 Living Arts College Show-Cause Directive.pdf	
Exhibit 98 CSI Adverse Review	Exhibit 98 CSI Adverse Review.pdf	

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide additional information and documentation concerning the current use of a Data Integrity Reviewer to support the agency's claim that it has a reasonable basis for determining that the student achievement information the agency relies on for making accrediting decisions is accurate.

## **Analyst Remarks to Narrative:**

The agency's accreditation process requires the submission of a self-study that is verified by an on-site evaluation team. The evaluation team verifies the information provided by reviewing and comparing documents, and through interviews with staff, faculty and students. The institution then has the opportunity to review and respond to the on-site team report. The self-study, the response, and other documentation submitted during the accreditation process are provided to the Intermediate Review Committee and the council for review during the decision-making process. The agency provided documentation of this process within this section and throughout the petition.

Beyond the cross-verification of the accreditation process, the agency has instituted a comprehensive verification process for placement rates, in response to prior issues in that area. As noted in Section 602.16(a)(1)(i), the agency implemented its "Placement Verification Program" (PVP) in July 2016. Institutions are required to submit placement data to the PVP for verification by graduates and employers prior to inclusion in the Campus Accountability Report (CAR). The agency states that the placement data is also reviewed by agency staff to confirm the appropriateness of the placements reported.

Although the agency has developed the PVP, it is unclear if or how the agency conducts data integrity reviews on-site. In Section 602.16(a)(1)(i), the agency states that the PVP has replaced the Data Integrity Reviewer (DIR) and on-site review conducted by that person (which was implemented in 2016). However, this section states that the DIR continues to be a part of the on-site team and to "review every placement outcome reported by the campus for the previous year, including all available back-up documentation, not just random samples." Another section of the agency's narrative states "onsite review data include the verification of the retention rate reported on the annual report and the validation of graduates classified as not available for placement for several very specific reasons, documentation for which must be on file." The agency provided three examples of the use of DIR; however they do not clearly demonstrate a consistent and thorough review of the data. In addition, the DIR described in this section and exhibited in the documentation differs from the on-site reviews observed by Department staff in this area. Also see concerns raised by third-party comments, Written Comment #9 - Center for American Progress and Written Comment #14 - TCF, regarding the reasonable assurance of accurate information.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.18(e) Report Clearly Identifies Deficiencies

### Narrative

As part of the review process, ACICS provides each institution or program with a detailed written report that clearly identifies any deficiencies in the institution's or program's compliance with the agency's standards. As appropriate, the deficiencies reflect a clear delineation between areas of compliance, non-compliance, and in need of improvement. ACICS awards accreditation based upon its published standards as detailed in the Accreditation Criteria (Exhibit 1); these standards form the basis for the detailed written report. The team report template uses a checklist of questions as well as narrative questions, which align with the Criteria standards to ensure that any deficiency is properly referenced to the published standard for which the institution may not be in compliance (Exhibit 62: Team Report Template). In addition, evaluation team members are trained on how to include information from various sources into the report and how to complete the report to ensure that it is detailed and clearly identifies any deficiency (Exhibit 69: Visit Evaluation Procedures and Guidelines).

ACICS uses a number of information-gathering tools in order to determine whether an institution is compliant with the Criteria, including routine and scheduled on-site evaluation visits, unannounced visits, annual reports of student achievement outcomes data and financial data, monthly reporting by institutions of placement information, comments and/or complaints from students and institutional personnel, external information, secret shopper activities, and other requests for information. All of the information generated from these tools are available to evaluation team members during their review and are included, where necessary, into the written report provided to the institution. If any of the interviews, observations, documentation review, or previously gathered information indicate that an institution may be deficient with any particular standard published in the Criteria, the written report specifically references the standard by section number and explains the basis for which the campus's compliance could not be determined. These detailed findings are noted in the body of the report and listed in a summary at the end of the report with each section listed and a short statement which summarizes the finding. The campus receives this report and is required to respond in writing to all of the areas which require additional information. (Exhibit 125, Institutional File-Penn Commercial, pp. 38-99)

The Council reviews the team report, campus response, and all other pertinent information to determine what action to take. If the Council determines that additional information is needed to affirm compliance, the Council will defer their action and ask the campus to provide additional information. The letter will specifically reference the sections of the Accreditation Criteria which are still in question and list the information that is required to prove compliance (Exhibit 145, Multi-Level Council Actions, Sample Deferral Letter, pp. 1-2). If the Council determines that the institution is out of compliance with one or more Accreditation Criteria standards, but has the ability to come into compliance within the maximum time frame, the Council may issue a compliance warning or show-cause directive. The letter will list the specific section for which the Council has determined that the campus is out of compliance and will require a response and evidence to prove that the campus has resolved this area and is now in compliance (Exhibit 145, Multi-Level Council Actions, Sample Compliance Warning/Show-Cause Letter, pp. 3-5). If the Council determines that an institution is out of compliance and is unable to come into compliance within the maximum time frame, the Council will deny the grant of accreditation. The letter will list the areas of non-compliance that were not sufficiently resolved and the letter will provide the rationale for the decision (Exhibit 145, Multi-Level Council Actions, Sample Denial letter, pp. 18-21).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 125 Institutional File-Penn Commercial	Exhibit 125 Institutional File Penn Commercial.pdf		
Exhibit 145 Multi-Level Council Actions	Exhibit 145 Multi Level Council Actions.pdf		
Exhibit 62 Team Report Templates	Exhibit 62 Team Report Templates.pdf		
Exhibit 69 Visit Evaluation Procedures and Guidelines	Exhibit 69 Visit Evaluation Procedures and Guidelines.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## Analyst Remarks to Narrative:

The agency provides the institution with a detailed written report in response to the site visit. The agency also provides council action letters after a review of the on-site team report and the institution's response. Both reports clearly identify deficiencies in the institution's compliance with the agency's standards.

Department staff notes that this section requires the agency to demonstrate that it provides an institution with a detailed written report that clearly identifies any deficiencies in the institution's compliance with the agency's standards. This requirement differs from that of Section 602.17(f), which provides specific items to be included in the detailed written report, as noted in that section.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.19(a) Reevaluation

#### Narrative

The Accreditation Criteria, Exhibit 1, Section 2-3-100, p. 37 notes that the Council grants accreditation for a period of one to six years. The length of the grant is at the discretion of the Council and is not appealable. The Renewal of Accreditation section of the Accreditation Criteria, Section 2-1-300, p. 18, describes the Council's policy that requires the agency to evaluate, at regularly established intervals, the institutions it has accredited. Each institution receives a letter the year prior to its grant expiration date to remind the institution that if it wishes to remain accredited, a renewal of accreditation application must be submitted. The letter also outlines the application requirements and their due date as well as the review cycle for which the campus has been assigned for the following year (Exhibit 121, Renewal of Application Reminder Letters). ACICS also publishes on its website, each campus that has an expiration grant in the upcoming year and when the campus will have their renewal of accreditation evaluation visit (Exhibit 149, Renewal of Accreditation Visit Schedule).

Following an initial or renewal of accreditation visit where an institution has demonstrated that they are in compliance with the Accreditation Criteria, the Council will grant the campus accreditation for a period between one to six years. To remain as consistent as possible, the Council has guidelines for determining the grant length for an institution, which is based on its current status, the on-site evaluation visit and subsequent response(s), student achievement outcomes, financial stability, and other factors (Exhibit 131, Guidelines for Grant Lengths). Institutions which are considered for an initial grant of accreditation typically receive an award for up to three years. However, if the institution is currently accredited by another agency and is in good standing, the Council may consider an award period of four years (Exhibit 1, Section 2-1-701, at 21).

The typical grant length for an institution applying for a renewal grant of accreditation is three to five years. Institutions that have had multiple or substantive area of noncompliance are subject to short grant length periods. Institutions with retention, placement, or licensure rates below benchmark, open external inquiries, or concerns financial instability, will not receive a six-year grant (Exhibit 150, Sample Approvals with Varying Grant Lengths). Also, all currently accredited ACICS institutions are listed in the Directory of Institutions published on the ACICS website, which specify the date of initial accreditation and the institution's expiration date (Exhibit 2, ACICS Directory of Accredited Institutions). Finally, ACICS has defended in federal court its decisions to deny re-accreditation based on failure to meet ACICS standards, evidencing its commitment to a thorough and comprehensive re-accreditation process that consistently applies its standards and denies accreditation to institutions that fail to meet those standards. See Bristol Univ. v. Accrediting Council for Independent Colleges and Schools, 2017 U.S. App. LEXIS 10295.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 121 Renewal of Application Reminder Letters	Exhibit 121 Renewal of Application Reminder Letters.pdf		
Exhibit 131 Guidelines for Grant Lengths	Exhibit 131 Guidelines for Grant Lengths.pdf		
Exhibit 149 Renewal of Accreditation Visit Schedule	Exhibit 149 Renewal of Accreditation Visit Schedule.pdf		
Exhibit 150 Comparison of Institutional Grant Lengths	Exhibit 150 Comparison of Institutional Grant Lengths.pdf		
Exhibit 2 ACICS Directory of Accredited Institutions	Exhibit 2 ACICS Directory of Institution.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency must provide information and documentation concerning the extensions of accreditation grants noted in the agency's Accreditation Criteria. The agency must also provide additional information and documentation concerning the grants of accreditation awarded to institutions that have current or previous compliance issues.

## **Analyst Remarks to Narrative:**

The agency states that it grants accreditation for a period of one to six years, as included in Section 2-3-100 of the agency's Accreditation Criteria (Exhibit 1). In Title II, Chapter 1 of the Accreditation Criteria, the agency includes the requirements for maintaining accreditation, to include a reevaluation prior to the end of a grant of accreditation. The agency demonstrated that accreditation actions are based on a self-study, an on-site review, the institution's response, and any other agency documentation. The examples of the accreditation process (provided throughout the petition) demonstrate that the agency reevaluates, at regularly established intervals, the institutions it accredits.

Within the narrative, the agency states "Institutions that have had multiple or substantive area of noncompliance are subject to short grant length periods. Institutions with retention, placement, or licensure rates below benchmark, open external inquiries, or concerns financial instability, will not receive a six-year grant." The agency's statements and documentation in this area suggest that it regularly grants accreditation to institutions that are out-of-compliance with one or more standards, which would not demonstrate compliance with the enforcement required by Section 602.20(a).

Section 2-3-100 also states "An extension of the previous grant cannot exceed one year, and not more than one extension may be given except for extraordinary circumstances over which the institution has no control" (Exhibit 1, page 18). The agency did not provide any information or documentation concerning these extensions of accreditation grants.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.19(b) Monitoring

### Narrative

ACICS has developed multiple monitoring and evaluation approaches that enable the Council to identify problems with an institution's or program's continued compliance with its standards. The approaches include the requirement for more timely and informative periodic reports and analysis of data as exemplified by indicators of student achievement described further in Section §602.17(f) of this petition. Other factors monitored by the Council include financial reports, substantive change activity, complaints, as well as review of external information that comes to the attention of ACICS through sources such as news media, state oversight and federal entities, and the Department of Education. The Council has established an At-Risk Institutions Group (ARIG) which considers this information during regular meetings between Council meetings and, where applicable, initiates an investigative review through an announced or unannounced visit, or prepares a report for the Council's Executive Committee, which can take action as warranted between Council meetings (Exhibit 6, Policies and Procedures, Chapter 13, ARIG Procedures, p. 37; and Exhibit 110, Summary of ARIG Investigations).

ACICS has also strengthened its monitoring of financial stability which is reviewed periodically and on an ad hoc basis throughout the accreditation process, including through ARIG findings. All institutions must submit an Annual Financial Report (AFR) (Exhibit 1, Title II, Chapter 1, Section 2-1-802 and 2-1-803, p. 21). The AFR requires the institution to upload a balance sheet and income statement for each campus. These reports, along with the annual audited financial statements, are reviewed by a member of staff in conferral with the Council's Financial Review Committee (FRC) (Ibid., Appendix A, Article V, Section 1 (d), p. 102). The agency verifies the accuracy of the report by comparing it to the audited financial statements and applies a scoring rubric (Exhibit 6, Policies and Procedures Manual, Chapter 25), for the purpose of assessing financial stability as detailed in response to §602.16(a)(1)(v). Actions taken include the request for institutional teach-out plans (Exhibit 101, Request for Teach-out plans) and unannounced visits (Exhibit 10, Denial of Renewal Application – SOLEX; Exhibit 105, Institutional File Herquan).

Based on the numeric values derived from the scoring rubric, a review of the notes and other considerations, the Council, at every scheduled meeting, may require the institution to submit a quarterly financial report (QFR), a financial improvement plan (FIP) or both (Exhibit 100, FRC Meeting Minutes; Exhibit 103, Council Action Letters QFR/FIP. The Council also monitors Cohort Default Rates (CDR) and applies that information in evaluating financial stability. Institutions with rates higher than federal standards are subject to additional monitoring and reporting (Exhibit 6, Policies and Procedures Manual, Chapter 29).

The Council monitors student achievement outcomes through the Campus Accountability Report (CAR), which is submitted on an annual basis. The CAR includes retention, placement, and licensure pass rates, as applicable. See Sections §602.17(a)(2) and 602.16(a)(1)(i) of this petition for further detail. ACICS subjects data reported in the CAR to a multi-step integrity check upon submission, enhanced templates for review by evaluators during site visits, third party verification in certain circumstances, and verification through the PVP. When the Council's assessment of the reports indicates below standard performance, the Council will enforce reporting or accreditation conditioning actions-compliance warning, a show-cause directive- or withdrawal of accreditation or approval in accordance with the guidelines outlined in Appendix L of the Accreditation Criteria (Exhibit 1, Appendix L, p.134-139). In each instance, the Council establishes a timeframe within which compliance with the standards must be achieved (Exhibit 94, Student Achievement Action Summary; Exhibit 136, SA Action Samples; Exhibit 20, Sample SA Withdrawal Letters).

ACICS also monitors the number of substantive change requests made by an institution to determine the impact on the overall operation of the institution and its ability to remain compliant with all standards. As part of its review of request for substantive changes, the Executive Committee reviews information concerning student achievement outcomes, financial position, complaints/other negative information, and overall compliance track record. Accordingly, the EC's assessment of these factors, together with the quality of the application will determine whether the substantive change is approved, deferred, or denied. Finally, the Council will conduct a comprehensive on-site evaluation if substantive changes have been made or are proposed are sufficiently extensive that the institution's capacity to maintain compliance with accreditation standards requires an immediate assessment (Exhibit 1, Section, 2-2-102, pp. 23-24; Exhibit 6, Policies and Procedures Manual, Chapter 23).

Another key element of the Council's interim monitoring and review of institutional quality and integrity is the tracking and analysis of complaints and adverse information (Exhibit 1, Section 2-3-700, p.43). ACICS investigates and takes action on complaints and external negative information about an institution from any reliable source, including federal or state agencies, other accrediting entities, the news media, students, faculty or other third parties (Exhibit 6, Policies and Procedures Manual, Chapter 13). Through its At-Risk Institutions Group (ARIG), the Council reviews the risk factors associated with every campus, as detailed in §602.16(a)(1)(ix). This ongoing monitoring enables ACICS to identify any problem with a campus's compliance in several key areas, reflective of its strength and stability.

# Relevant ACICS History

With respect to this criterion, the 2016 Staff Report to the Senior Department Official concluded that ACICS did not meet the requirements of this section because "in view of its weak record in monitoring and failure to document enforcement" the Department did not believe ACICS could come into compliance within a 12-month period and that ACICS had to demonstrate its use of relevant information and documentation in all monitoring mechanisms. As detailed in Section §602.16(a)(1)(i) and as further described in this petition, ACICS revised Accreditation Criteria and enhanced procedures include stronger monitoring and evaluation approaches for identifying problems with an institution's or program's continued compliance with ACICS standards.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 10 Denial of Renewal Application - Ineligibility SOLEX	Exhibit 10 Denial of Renewal Application-Ineligibility SOLEX.pdf		
Exhibit 100 FRC Meeting Minutes	Exhibit 100 FRC Meeting Minutes.pdf		
Exhibit 101 Request for Teach-Out Plans	Exhibit 101 Request for Teach Out Plans.pdf		
Exhibit 103 Council Action Letters for QFR and FIP	Exhibit 103 Council Action Letters for QFR and FIP.pdf		
Exhibit 105 Herguan Institutional File	Exhibit 105 Herguan Institutional File.pdf		
Exhibit 110 Summary of ARIG Investigations	Exhibit 110 Summary of ARIG Investigations.pdf		
Exhibit 136 SA Actions	Exhibit 136 SA Actions.pdf		

11/4		
Exhibit 20 Sample Student Achievement	Exhibit 20 Sample Student Achievement	
Withdrawal Letters	Withdrawal Letters.pdf	
Arrest Company and		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide additional documentation concerning implementation of its Annual Financial Report and Campus Accountability Report to demonstrate that the agency has effective monitoring approaches that enable the agency to identify problems with an institution's continued compliance with agency standards. The agency must provide additional information and documentation concerning the work of the ARIG.

#### **Analyst Remarks to Narrative:**

The agency has multiple monitoring approaches that include an annual report, an annual financial report, substantive change activity, complaints, as well as the review of external information.

The agency utilizes its annual report, the Campus Accountability Report (CAR), as the main instrument for measuring continued compliance with its standards for its accredited institutions. Department staff noted that in all publications (Exhibit 1, Accreditation Criteria, page 21; Exhibit 6, Policies and Procedures Manual, page 14; Exhibit 46, Council Training Manual, page 52; Exhibit 152, CAR Guidelines, page 2) and in Section 602.16(a)(1)(i) the stated due date for the CAR is November 1, but on the agency's website the 2017 CAR was due November 15. The agency did not provide an explanation for the change.

The agency states that the CAR requests student achievement data, to include retention, placement, and State licensing examination pass rates, and annual enrollment data. There is no further discussion by the agency as to the collection of any other key data or indicators that enables the agency to identify problems with an institution's continued compliance with agency standards. As noted in Section 602.16(a)(1)(i), the agency stated that it added data elements related to the collection and review of graduation rates in the 2017 CAR. Therefore, the agency needs to provide documentation of the submission and review of the 2017 CAR to demonstrate compliance with this section.

In addition, the examples of the CAR provided do not clearly demonstrate that the agency is collecting sufficient information in specific areas to enable the agency to identify problems with an institution's continued compliance with agency standards and that takes into account institutional strengths and stability. For example, Exhibit 18 included the 2014, 2015, and 2016 CAR, which only reflected the submission of overall population data, and retention and placement rates by program and overall at the institution. Department staff also note that a settlement agreement was reached in January 2018 with the U.S. Department of Justice over allegations of false federal financial aid claims at one of its accredited institutions, Florida Technical College. The original complaint was filed in March 2016, and the institution was granted accreditation for 5 years in December 2016 by the agency. Based on the documentation provided in the petition, it does not appear that the agency asks its institutions to report such an investigation, nor that the agency has reviewed this particular investigation of Florida Technical College. Therefore, it is not clear that the agency is collecting sufficient information in specific areas to enable the agency to identify problems with an institution's continued compliance with agency standards and that takes into account institutional strengths and stability.

The agency states that data reported in the CAR are reviewed by evaluators during site reviews, are subjected to an "integrity check," third-party verification and verification via the Placement Verification Process (PVP), but did not provide documentation of these stated review processes in this section.

The agency states that it monitors an institution's CAR to ensure student achievement data reported meet the agency's requirements, as stated in Appendix L of the agency's Accreditation Criteria. The agency provided examples (Exhibits 20 & 136) of documentation of review and action taken by the council as a result of the review of student achievement data within the CAR. However, as detailed in the analysis of Section 602.16(a)(1)(i), the example provided in Exhibit 18 does not demonstrate enforcement of its student achievement standards or procedures.

The agency states that it uses a separate Annual Financial Report (AFR) to collect fiscal information and institutional financial statements, such as a balance sheet, income statement, and financial statements. However, the agency did not provide an example of the AFR to determine what fiscal information is collected or confirm the financial statements submitted. The agency stated that it verifies the AFR by comparing it to the financial statements, but did not provide documentation of such review. The agency provided minutes from its Financial Review Committee (FRC) to demonstrate review of the AFR, and the scoring rubric used by the FRC to determine fiscal stability (Exhibit 6, page 77). The council reviews the information provided by the institution and the recommendation of the FRC to determine its action, and the agency provided council action letters as documentation of such review and action. However, the institutional examples provided (Exhibits 10 and 105) to support the use of unannounced visits based on the review of the AFR were not a result of such fiscal capacity review. In addition, the two examples provided for the request of teach-out agreements (Exhibit 101) were the response to action taken by the Department's Office of Federal Student Aid, and do not demonstrate that the council has an effective monitoring approach to review fiscal capacity and stability. The agency also states that it monitors Cohort Default Rates (CDR) in its review of financial stability, but it did not provide documentation of such monitoring. Also see concerns raised by a third-party comment, Written Comment #14 - TCF, regarding effective monitoring mechanisms.

The agency states that it established an At-Risk Institutions Group (ARIG) that reviews information about institutions provided by external sources, such as the Department of Education, State oversight agencies, other Federal agencies, in the media or via complaints between council meetings. The agency also states that the ARIG "where applicable, initiates an investigative review through an announced or unannounced visit, or prepares a report for the Council's Executive Committee, which can take action as warranted between Council meetings." Based on a review of meeting minutes (Exhibit 117), the membership of the ARIG consists of only ACICS staff members. Chapter 13 of the agency's Policies and Procedures (Exhibit 6, pages 37-38) states that the ARIG "is not authorized to take any specific non-compliant action against an institution (only the Council and Executive Committee can take actions against an institution)." But later states that the ARIG can direct a special visit, which can be announced or unannounced, which is reinforced by discussion in committee meeting minutes (Exhibit 23, page 115 & 123). Based on Section 2-3-800, the initiation of any special visit appears to be the right of the council; therefore the direction of such visits by the ARIG appears to violate the agency's Accreditation Criteria. The agency provided a list of the investigations by the ARIG, and examples of special visits, but it is not clear whether the action taken in all cases was the decision of the ARIG or the council (Exhibit 107, page 1).

The agency states that it monitors the requests for substantive change made by an institution to assess the institution's continued compliance with standards. The agency described its substantive change review process and provided examples of implementation of the process in Section 602.22. The example provided in Exhibit 18 does not demonstrate that the agency's substantive change review process is an effective monitoring mechanism. Specifically, the institution had reported, via the 2014, 2015 and 2016 CAR, institution-level placement rate data below the standard for all three years (58%, 50%, 55%, respectively). The agency acted to withdraw the institution's accreditation in December 2016, and acted to re-evaluate the decision, to include the review of new information, in April 2017, per the agency's policies and procedures. Also in April 2017, the agency reviewed a request for reclassification of a branch campus to a main (Exhibit 18, page 12), even though the institution had not demonstrated compliance with its student achievement standard for three years.

In Section 602.16(a)(1)(ii), the agency stated that the review of curricula standards also occurs during the review of annual program effectiveness data and reports. However, the agency did not include such reports in either section.

List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.19(c) Annual Headcount

#### Narrative

ACICS collects enrollment data from its member institutions through their submission of the Campus Accountability Report (CAR), which is due annually on November 1 (Exhibit 1, Section 2-1-801, p. 21). The CAR provides enrollment data by student at the program level and combines the program-level data to the campus-level. The campus-level data excludes any students who have been enrolled in more than one program during the reporting period to provide accurate, unduplicated headcount enrollment data (Exhibit 152, CAR Guidelines and Instructions).

Monitoring of overall institutional growth is conducted annually in December through a subcommittee of the Council, the Institutional Effectiveness Committee (IEC), utilizing the enrollment data from the two most recent submissions of the CAR for all ACICS member institutions (Exhibit 153, Sample 2016 CAR w/Spreadsheets and Questionnaire). The IEC evaluates the financial reporting status and student outcomes such as retention rates, placement rates, and cohort default rates, as well as any complaints or external information to determine whether the significant growth unfavorably impacts an institution's ability to provide a quality education for its students. In addition, at the staff level, the At-Risk Institutions Group (ARIG) committee also incorporates this information into other factors to determine whether or not additional investigation is needed (Exhibit 6, Policies and Procedures Manual, ARIG Process, Chapter 13). If it is determined that an institution's growth may be negatively affecting the quality of education at the campus, the institution may be scheduled for a special on-site visit or required to submit data regarding measures of graduate and employer satisfaction by program; current faculty-student ratios by program; student services staffing levels; and related operating budget ratios (Exhibit 6, Policies and Procedures Manual, Chapter 30). Following the review of the on-site visit and/or institutional response, the full Council (by way of a recommendation from the IEC) makes a determination on whether to remove the institution from monitoring or take a deferral or non-compliant action.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 152 CAR Guidelines and Instructions	Exhibit 152 CAR Guidelines and Instructions.pdf		
Exhibit 153 Sample 2016 CAR w/Spreadsheets and Questionnaire	Exhibit 153 Sample 2016 CAR wSpreadsheets and Questionnaire.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide examples and data from the 2017 annual report to demonstrate compliance with this section. The agency must also provide documentation of implementation of how it monitors overall growth of the institutions it accredits.

#### **Analyst Remarks to Narrative:**

Section 2-1-801 of the agency's Accreditation Criteria (Exhibit 1) states that each institution must provide an annual report (Campus Accountability Report (CAR). The agency states that it collects enrollment data within the CAR. The agency provided an example of the CAR as documentation to demonstrate that each accredited institution is required to submit headcount enrollment data annually. However, the example and data were from the 2016 CAR, and the agency must submit documentation from the 2017 CAR to demonstrate compliance.

In addition, the agency states that it monitors overall growth of the institutions it accredits via the CAR, and provided a narrative of this process. However, the agency did not provide any documentation to demonstrate implementation of this specific monitoring mechanism.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.19(d) Significant Growth

#### Narrative

ACICS monitors the growth of enrollment at all member institutions through the annual submission by institutions of the Campus Accountability Report (CAR), which include specific guidelines for how to report enrollment numbers per program and at the entire campus (Exhibit 152, CAR Guidelines and Instructions). ACICS staff specifically reviews the CAR and then provides tracking and descriptive information to the Council which identifies those institutions that are experiencing significant enrollment growth.

Significant enrollment growth is defined by ACICS as enrollment growth of 100% or greater, between the two most recent CAR periods for institutions with a baseline of at least 200 students. This baseline is utilized to ensure the exclusion of institutions with very limited enrollments where 100% growth would not represent a substantial increase in the number of enrollments. Therefore, all institutions whose enrollments have increased by at least 100% or more from the baseline of 200 enrollments since the previous reporting period are analyzed, beginning with campuses whose ending period enrollment has exceeded 400 students. The ACICS Policies and Procedures Manual describes procedures for monitoring significant enrollment growth (Exhibit 6, Policies and Procedures Manual, Chapter 34). The Enrollment Growth Reports describe the institutions identified in 2016 as having significant enrollment growth (Exhibit 151, Enrollment Growth Report in 2016 IEC Minutes). For the latest review of 2016 data, all institutions who were reviewed under the enrollment growth monitoring policy were undergoing a renewal of accreditation visit in the following year, so these institutions were reviewed in the winter cycle to ensure that the institution had appropriate resources, personnel, and services in place to handle the large growth of students. In addition, the report specifically indicated the program or program(s) which had rapid growth at that institution and a report evaluating that specific program was conducted to ensure that those students had appropriate resources, personnel, and services (Exhibit 154, Team Reports for Schools w/Significant Growth).

The Council annually reviews those institutions that are experiencing rapid program enrollment growth to determine the cause of the growth and whether these institutions are providing adequate educational and support services to their students that meet ACICS standards. If the Council determines that these institutions are meeting student needs, the list is retained for future reference. However, if, after a review of student complaints, external information, retention, placement, and financial reporting, the Council determines that the rapid rate of growth may be diminishing the quality of education, the institution will be required to submit documentation, including key resource indicators, such as faculty/student ratios, student services, staffing levels, etc., or may be require to undergo an on-site evaluation visit. Minutes from the Institutional Effectiveness Committee (IEC) meeting describe the more recent committee discussions of this monitoring and the results of those discussions, which were incorporated into the institutions' upcoming renewal of accreditation visits (Exhibits 151, Enrollment Growth Report for December 2016 IEC Minutes; Exhibit 154, Team Reports for Schools w/Significant Growth). Following the review of the on-site visit and/or institutional response, the full Council (by way of a recommendation from the IEC) makes a determination on whether to remove the institution from monitoring or take a deferral or non-compliant action. At its subsequent meeting in April 2017, following the evaluation reviews of these institutions, the Council determined that while there were no lingering concerns with the programs' growth, the institutions had other areas to address resulting in deferral or compliance warning actions.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 151 Enrollment Growth Report in 2016 IEC Minutes	Exhibit 151 Enrollment Growth Report in 2016 IEC Minutes.pdf		
Exhibit 152 CAR Guidelines and Instructions	Exhibit 152 CAR Guidelines and Instructions.pdf		
Exhibit 154 Team Reports for Schools with Significant Growth	Exhibit 154 Team Reports for Schools wSignificant Growth.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## **Analyst Remarks to Narrative:**

The agency indicates that it defines significant enrollment growth as enrollment growth of 100% or greater, between the two most recent Campus Accountability Report (CAR) periods for institutions with a baseline of at least 200 students. The agency provided its internal policy (Exhibit, 6, page 109) to address significant enrollment growth.

The agency provided an example of the CAR (Exhibit 18) as documentation to demonstrate that each accredited institution is required to submit enrollment data annually. The agency provided documentation of its review of institutions that met the significant enrollment growth definition and the action taken by the agency (Exhibits 151 and 154).

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.19(e) Distance/Correspondence Headcount Increase

## Narrative

ACICS specifically monitors the growth of enrollment at all member institutions that offer courses via distance education. The Council receives tracking and descriptive information that identifies those institutions that are experiencing significant enrollment growth in courses offered via distance education.

Significant enrollment growth for an institution offering distance education courses is defined by ACICS as enrollment growth of 50% or greater between the two most recent CAR periods. The ACICS Policies and Procedures Manual describes the procedures for monitoring significant enrollment growth in institutions that offer distance education coursework (Exhibit 6, Policies and Procedures Manual, Chapter 34).

ACICS member institutions are required to ensure that appropriate resources are applied in order to effectively meet the needs of their students and graduates. The Council's vigilance of appropriate resources to help ensure institutional quality is codified in the Campus Accountability Report (CAR) section of the Accreditation Criteria (Exhibit 1, Section 2-1-801, p.21) and in the Campus Accountability Report - Guidelines and Instructions that describe the policies, procedures, and standards for annual reporting of student enrollment in programs offered via distance education (Exhibit 152, CAR Guidelines and Instructions).

Further, each year the Council reviews the enrollment of its member institutions that offer distance education coursework to determine which campuses have experienced 50% or more growth in enrollment between the two most recently submitted CARs. Any member institution identified as having 50% or more growth in enrollment is reported to the Secretary of Education within 30 days of the Council's review. The Council conducts the same review with enrollment growth for these institutions as described in §602.19(c) and (d).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 152 CAR Guidelines and Instructions	Exhibit 152 CAR Guidelines and Instructions.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation that it monitors the headcount enrollment of each institution it has accredited that offers distance education, and reports an increase in headcount enrollment of 50 percent or more within one institutional fiscal year to the Secretary to demonstrate compliance with this section.

## **Analyst Remarks to Narrative:**

The agency indicates that it monitor the headcount enrollment of each institution it has accredited that offers distance education via the Campus Accountability Report (CAR), as required by this section. The agency provided its internal policy (Exhibit 6, page 109) to address significant enrollment growth in programs offered via distance education.

The agency did not provide any documentation to demonstrate that it reviews the headcount enrollment in programs offered via distance education at its institutions annually or that it reports institutions that experience an increase in headcount enrollment of 50 percent or more within one institutional fiscal year to the Secretary.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.20(a) Enforcement Timelines

#### Narrative

The Council's time frames for coming into compliance are set forth in Title II, Chapter 3 of the Accreditation Criteria as follows:

"If the Council determines that an institution is not in compliance with the Accreditation Criteria, it will take prompt adverse action against the institution, or it will require the institution to take appropriate action to bring itself into compliance with the Accreditation Criteria within a time frame specified by the Council after the institution has been notified that it is not in compliance. That time frame will not exceed and may be less than the following:

- (a) twelve months, if the longest program is less than one year in length;
- (b) eighteen months, if the longest program is at least one year, but less than two years in length; and
- (c) two years, if the longest program is at least two years in length."

(Exhibit 1, Title II, Chapter 3, Introduction, p.37).

Further, the Criteria make clear the conditions under which the Council will take immediate adverse action for non-compliance or extend the period for coming into compliance for good cause. An institution must demonstrate that there have been significant improvements in the deficient areas and the applicable time frame does not provide sufficient time to demonstrate full compliance in order to receive a good-cause extension. Good cause extensions may not exceed one year, which was clearly communicated to the membership in January 2017 Memorandum to the Field. (Exhibit 23, Systematic Review of Criteria, pp. 329-330). At its April 2017 meeting, the Council took such an action to withdraw the accreditation of an institution that failed to come into compliance within the prescribed time frame and not having any good cause to grant an extension (Exhibit 98, CSI Adverse Review, p.2).

The Council monitors compliance with the Accreditation Criteria in a number of ways, including site visits to accredited institutions during the (re)accreditation process, annual reviews of outcomes data submitted as part of the Campus Accountability Report (CAR), monthly placement verification (PVP), and financial reviews. See further discussion in Sections §602.16(a)(1)(i); 602.17(a)(1)(2)(3); 60.17(c); and 602.18(d). In addition, ACICS investigates all complaints, information supplied by state and federal regulatory bodies and accreditors, and media reports that raise compliance concerns, through its At-Risk Institutions Group (ARIG) detailed under Section §602.19(b) of this petition.

There have been at least three instances in which the Council has found institutions to be significantly out of compliance with ACICS standards warranting immediate adverse action following its first review of the visit report and institution's response (Exhibit 21, Institutional File-WVBC; Exhibit 22, Institutional File-CENSA; and Exhibit 64, Institutional File-Dubois. There are other instances of the Council's consideration of the institution's ability to come into compliance and issuance of compliance warning and show-cause directives (Exhibit 136, SA Action Samples; Exhibit 145, Multi-Level Council Actions, pp.3-11).

As described Section §602.16 of this petition, Appendix L of the ACICS' Accreditation Criteria summarizes the monitoring timeframes for programs reporting below standard student achievement rates (Exhibit 1, Appendix L, pp. 134-139). "The Council reserves the right to take prompt adverse action once a campus and/or program is found out of compliance, and will exercise its judgement in applying the guidelines..." (Ibid., Appendix L, p. 135).

The Council also reviews an institution's financial stability, to determine if an institution's resources are sufficient to sustain the delivery of quality education: "When...an institution's financial condition may be weak or deteriorating," the Council will require quarterly updates and an improvement plan. (Ibid., 2-1-808, p. 22; Exhibit 103, Council Action Letters QFR/FIP). In addition, "If the Council determines the institution no longer complies with the Council's requirements for financial stability, the Council will issue a compliance warning, issue a show-cause directive, or otherwise take negative action and require the institution to demonstrate compliance within the time frames" (Exhibit 1, Section 2-1-808, p. 22; Exhibit 104, Financial Show Cause Actions). If the institution fails to demonstrate an ability to meet Council requirements within the established time frame, the accreditation will be withdrawn through suspension (Exhibit 1, Accreditation Criteria, Section 2-3-402(a), p. 39).

## 3. Relevant ACICS History

With regard to §602.20(a), the June 2016 Department Staff Report, Exhibit42, stated that the agency's response to the documentation requests regarding enforcement of timelines was insufficient. In addition, the Staff Report stated that the agency's proposed language revisions are insufficient and have not been finalized and implemented, and the agency has been ineffective in past efforts to bring itself into compliance. As a result, the Staff Report concluded that ACICS was not in compliance with the requirements of this section. As stated in the 2016 ACICS response to the Staff Report, see Exhibit 42, ACICS has made changes to its policies and procedures to comply with this accreditation criterion and has evidence enforcement action as detailed above. ACICS has also revised its Accreditation Criteria to include a revised set of monitoring and evaluation approaches for identifying problems with an institution's or program's continued compliance with ACICS standards. As a result, ACICS demonstrates compliance with criteria.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 103 Council Action Letters for QFR and FIP	Exhibit 103 Council Action Letters for QFR and FIP.pdf		
Exhibit 136 SA Actions	Exhibit 136 SA Actions.pdf		
Exhibit 145 Multi-Level Council Actions	Exhibit 145 Multi Level Council Actions.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 22 Institutional FIle-CENSA	Exhibit 22 Institutional File CENSA.pdf		
Exhibit 23 Systematic Review of Criteria	Exhibit 23 Systematic Review of Criteria.pdf		
Exhibit 42 2016 Department Staff Report	Exhibit 42 2016 Department Staff Report.PDF		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		
Exhibit 98 CSI Adverse Review	Exhibit 98 CSI Adverse Review.pdf	i	

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation that it requires an institution to take appropriate action to bring itself into compliance with the agency's standards within a time period that must not exceed the limits in this section, when an institution is not in compliance with any standard. The agency must also provide documentation to demonstrate that it appropriately implements the requirements of this regulation.

## **Analyst Remarks to Narrative:**

This criterion requires that an agency either initiate immediate adverse action or allow an institution a time period to come into compliance with its standards and requirements. The agency has a written policy within the introduction to Title II, Chapter 3 of the agency's Accreditation Criteria (Exhibit 1) that provides a time period of no more than two years for an institution to return to compliance, depending on the length of the longest program.

The agency provided examples of the initiation of immediate adverse action by the council based on the reports of the on-site teams (Exhibits 21, 22, & 64).

The agency also provided examples of council actions taken based on the review of student achievement data reported on the CAR (Exhibit 136), council actions at different levels based on the reports of the on-site teams (Exhibit 145), and council actions taken based on the review of financial data (Exhibit 103). Department staff also reviewed council show cause actions taken based on the review of financial data (Exhibit 104). However, the examples provided did not include the full cycle of review (i.e. first determination that the institution was out of compliance to final action), therefore the agency has not demonstrated that it enforces the required time period. In addition, these examples do not provide any evidence that the council took into consideration the length of the longest program when taking action, nor that the council notified each institution of the requirement to return to compliance within a specific time period.

Department staff notes that Exhibit 98 provides documentation that the council took into consideration the length of the longest program when taking action, but that example does not appear to demonstrate that the agency applies this section appropriately. Specifically, the adverse action is taken in April 2017 and the letter states the "Council notes that it first found the institution to be out of compliance with the Council's student outcomes standards in April 2016;" however that is when the council first issued a withdrawal notice to the institution, but the agency first issued a show cause order in February 2016, which is the point at which the time period (based on the length of the longest program) would begin. In this example, the time period would be 12 months, based on the length of the longest program.

Based on the information and documentation provided in this section and throughout the petition, it is not clear that the agency appropriately implements the requirements of this regulation, as the agency does not appear to implement the enforcement time period at the point the agency finds the institution out of compliance with any standard, nor does it appear to take into consideration the length of the longest program.

In Section 602.16(a)(1)(i), the agency provided an example (Exhibit 18) that included the 2014, 2015 and 2016 CAR, which reflected that the institution had reported institution-level placement rates below the standard for all three years (58%, 50%, 55%, respectively). The agency acted to withdraw the institution's accreditation in December 2016, and acted to re-evaluate the decision, to include the review of new information, in April 2017, per the agency's policies and procedures. The 2017 mid-year CAR reflected a 58% institution-level placement rate and that the data reported had not been verified in the Placement Verification Program (PVP), but the agency acted to rescind its withdrawal action, even though the institution had not demonstrated compliance with its student achievement standard for over three years. This action by the agency does not demonstrate implementation of its enforcement timelines, to include a review of the length of the longest program to determine the compliance deadline required by this section.

In Section 602.19(b), the agency provided examples of council actions letters (Exhibit 20) based on the review of student achievement data reported on the CAR. The first letter in the exhibit (pages 1-3) is an action to withdraw program approvals due to low retention and/or placement rates reported on the 2014, 2015, and 2016 CAR. However, the action is to withdraw nine programs, which is over 1/3 of the total programs offered by the institution (Exhibit 2, pages 129-130). Even though the agency took adverse action at the program-level, there was no discussion in the letter of any review of the institution and its overall compliance with student achievement standards based on the noncompliance of a significant number of its programs.

List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.20(b) Enforcement Action

#### Narrative

The Council's time frames for coming into compliance are set forth in Title II, Chapter 3 of the Accreditation Criteria, as follows:

"If the Council determines that an institution is not in compliance with the Accreditation Criteria, it will take prompt adverse action against the institution, or it will require the Institution to take appropriate action to bring itself into compliance with the Accreditation Criteria within a time frame specified by the Council after the institution has been notified that it is not in compliance. That time frame will not exceed and may be less than the following:

- (a) twelve months, if the longest program is less than one year in length;
- (b) eighteen months, if the longest program is at least one year, but less than two years in length; and
- (c) two years, if the longest program is at least two years in length."

(Exhibit 1, Accreditation Criteria, Title II, Chapter 3, Introduction, p.37.)

The above time frames may be extended for good cause shown at the sole discretion of the Council. Good cause is defined as evidence that there has been significant improvement in the deficient area(s) and the applicable time frame does not prove sufficient time to demonstrate full compliance, e.g., significant improvement in completion or placement rates. In no instance, will the good-cause extension exceed one year. See id. ACICS enforced this standard when an institution failed to bring itself into compliance within the applicable time frame. Not having any good cause to grant an extension, the Council acted to withdraw the accreditation of the institution by suspension (Exhibit 98, CSI Adverse Review, pp.1-2).

## Relevant ACICS History

With regard to §602.20(b), the June 2016 Department Staff Report ("Staff Report"), Exhibit 46 stated that the agency's proposed policy language regarding good cause extensions

does not include a maximum time period, as requested. In addition, the Staff Report stated that the agency did not provide the requested documentation demonstrating ACICS took immediate adverse action when an institution did not bring itself into compliance within the specified time period. As stated in the July 2016 Response of ACICS to the Staff Report ("ACICS 2016 Response"), ACICS adopted new language in its Accreditation Criteria that more clearly defines the time frame on any extensions to the required maximum time frame granted for good cause, including more specificity with regard to the conditions upon which a good-cause extension would be granted. Also, ACICS has submitted evidence of taking immediate adverse action against a school after the exhaustion of the maximum time frame. Please note that recent history indicates that programs or campuses that struggle to meet standards have themselves voluntarily withdrawn the programs and/or closed the campus before exhausting the maximum time frames for compliance.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 46 Commissioner and Board of Director Training Manual	Exhibit 46 Commissioner and Board of Director Training Manual.pdf		
Exhibit 98 CSI Adverse Review	Exhibit 98 CSI Adverse Review.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## Analyst Remarks to Narrative:

The agency has a written policy within the introduction to Title II, Chapter 3 of the agency's Accreditation Criteria that meets the requirements of this section (Exhibit 1), and make clear the potential circumstances under which a good cause extension would be granted. The policy limits the extension of a good cause extension to one year.

The agency provided an example of the initiation of an immediate adverse action by the council for an institution that failed to return to compliance within the required time period and did not demonstrate good cause to grant an extension (Exhibit 98).

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.21(a)(b) Systematic Review of Standards

#### **Narrative**

As the driver of reforms to improve the effectiveness of the Criteria and processes as demanded by the Department and ACICS's other stakeholders, ACICS incorporated its mission statement into the Accreditation Criteria: "The mission of the Accrediting Council for Independent Colleges and Schools is to advance educational excellence at independent nonpublic career schools, colleges, and organizations in the United States and abroad. This is achieved through a deliberate and thorough accrediting process of quality assurance and enhancement as well as ethical business and educational practices." (Exhibit 1, Chapter 1, Overview of the Council, p. 12).

ACICS has adopted and implemented revised criteria that improve the effectiveness of its accreditation process and outcomes. First, as described in response to §Section 602.16(a)(1) in this petition, ACICS has fundamentally changed its student outcomes assessment criteria and evaluation processes. The longstanding student outcomes criteria for retention, placement, and licensure are now being incorporated into "scheduled to graduate" cohorts in order to provide more informative data with recently implemented partial year reporting requirements for more current data. These changes have served to focus the Council and institutions on student achievement as the mission-critical measure for both accountability and continuous improvement. New Student Achievement Standards and Campus Accountability Report guidelines along with new data integrity initiatives add another layer of accountability for institutions and for ACICS (Exhibit 1, Appendix L, pp. 134-139. The number of discontinued programs and adverse actions enforced by the Council over the past year demonstrate the effectiveness of these initiatives in ensuring compliance with ACICS's standards, specifically as it relates to student achievement outcomes (Exhibit 94, Student Achievement Action Summary).

Second, the Council has responsibly narrowed the scope of its accreditation activities so that resources can be appropriately concentrated on improving the performance of existing accredited institutions through strengthened oversight. ACICS has not accepted any new applications for initial accreditation since June 2016 (Exhibit 155, Notice to Institutions—Hiatus on Initial Applications). Further, it has placed a moratorium on programs above the master's degree level, requiring the ten (10) currently accredited institutions offering doctoral-level programs to find an alternate accreditor or teach out all current enrollees no later than December 31, 2019 (Exhibit 23, Systematic Review of Criteria, p. 304). ACICS also has eliminated standards intended for "centrally controlled institutions" to be approved through a distributed enterprise model. See id. pp. 407-410. These changes have enabled ACICS to focus resources on critical aspects of the quality of the review process, including: additional training across the board for institutions, staff, and volunteers; further developing comprehensive data collection and reporting processes; reviewing the Council's substantive changes criteria more systematically; and refining its processes for identifying and developing more expertise and leadership characteristics for the Council and other bodies.

Third, ACICS has strengthened its interim monitoring mechanisms, with dedicated staff resources paying careful attention to information that indicates that an institution is not meeting the standards. This includes negative trends in student achievement data and financial reports; compliance with state and federal regulations; and external information including complaints and media reports. This, together with stricter enforcement of the timelines for coming into compliance, means that the Council can respond more quickly and decisively to compliance concerns as they occur. The Council's Accreditation Criteria now make clear that the Council can take immediate adverse action against an institution or program where the circumstances warrant such action (Exhibit 1, Title 2, Chapter 3, Introduction, at 37).

In December 2014, the Council voted, for immediate implementation, a Policy Development and Implementation Plan that provides a timetable for systematic review and consideration of policy items that will ensure a comprehensive approach to the annual review of its Standards (Exhibit 156, Policy Development and Implementation Plan). As outlined in the plan, standards for revision and development are considered at the Council's February Policy meetings for full consideration and exploration prior to conducting research and presentation at its April meetings. Items approved for further review and discussion are then communicated via the Memorandum to the Field for feedback and input from all stakeholders (Exhibit 23, Systematic Review of Criteria; Exhibit 157, Memo to the Field Feedback). Through this process, revisions and changes are made to the standards for final approval and implementation on an annual basis or as needed. Further, changes are also considered based on feedback received from team members during the onsite evaluation visits, from members of the intermediate review committee during their evaluation of institutional responses against the expectations of the Criteria, and by direct contact from third parties familiar with the ACICS process (Exhibit 158, Letter to Review Standards-Prager). These recommendations are incorporated into the systematic and periodic review process. Additionally, the Accreditation Criteria are also reviewed throughout the year to ensure that they are reflective of the expectations of compliance for institutions as well as for ACICS's ongoing emphasis on quality (Exhibit 23, Systematic Review of Criteria, Bylaw Changes to Voting, p.260; Public Representatives, pp.263-265; Good Cause Extensions, pp. 107 and 231; and Teach Out Policy, pp. 110-111 and 229-230).

All changes to the Accreditation Criteria are noted in Memoranda to the Field, which are sent to ACICS-accredited institutions and posted on the ACICS website as well, at least three times a year, following each meeting of the Council (Exhibit 23, Systematic Review of Criteria, pp. 12-68, 74-99, 228-262, 321-349, & 387-412). The systematic, comprehensive review and resulting revisions within the last years demonstrate ACICS's strong commitment to regularly reviewing and improving the effectiveness of its Criteria and processes, as well as its responsiveness to the expectations of the Department with respect to its recognition criteria. ACICS's intends to build on this review, systematically adapting the Criteria to meet new or changing expectations.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 155 Notice to Institutions—Hiatus on Initial Applications	Exhibit 155 Notice to Insitutions - Hiatus on Initial Application.pdf		
Exhibit 156 Policy Development and Implementation Plan	Exhibit 156 Policy Development and Implementation Plan.pdf		
Exhibit 157 Memo to the Field Feedback	Exhibit 157 Memo to the Field Feedback.pdf		
Exhibit 158 Letter to Review Standards-Prager	Exhibit 158 Letter to Review Standards - Prager.pdf		
Exhibit 23 Systematic Review of Criteria	Exhibit 23 Systematic Review of Criteria.pdf		
Exhibit 94 Student Achievement Action Summary	Exhibit 94 Student Achievement Action Summary.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

# Staff Determination

The agency must provide additional information and documentation on how its program of review ensures that the agency examines each of the agency's standards and the standards as a whole. The agency must also provide additional information and documentation on how it involves all of the agency's relevant constituencies in the standards review process and affords them a meaningful opportunity to provide input.

## **Analyst Remarks to Narrative:**

The agency provided its "Typical Policy Development and Implementation Plan," which includes how the council manages its policy development and implementation on an annual basis (Exhibit 156). The plan includes brainstorming new criteria or criteria revisions in February, review of policy proposals and research in April, approve draft criteria or criteria revisions for review by the field in August, analyze and revise criteria (as needed) from public and institution comments and approve final criteria in December. Although not mentioned in the narrative, the Policies and Procedures Manual includes a chapter on policy development and review (Exhibit 6, Chapter 40, page 130). The chapter includes the plan provided by the agency (page 131), as well as more detailed information about the policy development procedures and the role of staff. The agency's policies do not appear to discuss how it ensures comprehensive review of the standards, nor does it discuss how it examines each of the agency's standards and the standards as a whole.

The agency discussed in the narrative some of the new and improved criteria in the past two years, in the areas of student achievement, mission focus, and interim monitoring. The agency also provided documentation of its review of standards in 2015 and 2016, to include committee policy review, call for comments and feedback, webinar sessions, and review of feedback by the council (Exhibit 23).

The agency states that it solicits input from institutions and the public when reviewing standards. The agency provided documentation of the feedback provided from the call for comment (which appears to be from institutional representatives) and a letter from an educator requesting to participate, but it is not clear that all of the agency's relevant constituencies are involved in the review of standards. Specifically, the call for comment is addressed to "ACICS-Accredited Institutions and Other Interested Parties" (Exhibit 23, pages 24, 74, 87, 228 & 387), but it does not state who the other interested parties are nor if the "interested parties" include the public. And, the agency provided no other information or documentation on how it involves all of the agency's relevant constituencies in the standards review process and affords them a meaningful opportunity to provide input. This section of the criteria requires that all of the agency's relevant constituencies are involved in the information-gathering phase of the standards review process, not just the review of draft revisions which is covered in the next section (602.21(c)).

The current Accreditation Criteria states that it was published on September 14, 2017 and to "refer to Criteria Revisions Supplement for Effective Dates." The Criteria Revisions Supplement was not provided nor discussed; therefore it is unclear when each of the agency's standards and the standards as a whole were last reviewed.

List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.21(c) Revision of Standards

#### **Narrative**

The Council meets a minimum of three times each year to propose, review, and adopt new and revised criteria or to delete criteria. The Council has four standing committees with specific responsibilities for relevant sections of the Accreditation Criteria. Those committees are the Business Practices Committee, the Education Enhancement and Evaluation Committee, the Financial Review Committee, and the Institutional Effectiveness Committee, as detailed in the Bylaws contained in the Accreditation Criteria, Appendix A, Bylaws, Article V, Committees, pp. 101-102 (Exhibit 1). The procedures through which the Council and its committees review and revise its policies, procedures, and standards are described in the Policy Development and Review chapter of the ACICS Policies and Procedures Manual (Exhibit 6, Chapter 40). As stated as part of the procedure for policy review, "The need for the development or review of existing policies may originate from the following sources: (1) member institutions; (2) Council members; (3) the Intermediate Review Committee and Council committees; (4) evaluators; (5) ACICS staff; (6) the U. S. Department of Education, state higher education licensing agencies, and other regulatory agencies." (Exhibit 6, Policies and Procedures Manual, Chapter 40).

During each Council Meeting, committees may review criteria changes proposed by constituents. The Accreditation Criteria notes that the Council provides notice to and invites comment on all proposed changes to the criteria from all interested parties and that all comments received are considered before final action is taken (Exhibit 1, Section 1-1-200(b), p. 13). Following each meeting, a "Memorandum to the Field" is prepared, posted on the ACICS Web site at www.acics.org and a notice with a link is sent to all ACICS-accredited members, state and federal regulatory officials, and the public (Exhibit 23, Systematic Review of Criteria, pp.12-21, 24-47, 48-68, 74-86, 87-99, 227-262, 321-349, and 386-412; Exhibit 159, Memo to the Field Webpage). The Memorandum outlines all proposed and/or final Criteria changes, provides an explanation for the proposals, and seeks input and comment to proposed changes.

To provide constituencies and other interested parties with adequate opportunity to comment on proposed changes, ACICS's procedure has been to allow for at least 30 days to comment following the release of the Memo to the Field. ACICS collects comments from the field through a web-based survey, where the commenter indicates their name and affiliation, and for each proposed criteria change may accept, modify, or reject the proposed change (Exhibit 157, Sample Memo to the Field Feedback Surveys). Comments from the field are included in the materials provided to the Council and are considered at the next regularly scheduled Council Meeting (Exhibit 160, Sample Meeting Minutes w/Comments, pp. 5, 10, 24, and 29 - 70). The Council always reviews and discusses all substantive comments made to a particular proposed change and then determines whether to move forward with the existing proposed policy, modify the proposed policy, or table the policy for additional review and discussed at the following August 2016 meeting, with additional revisions proposed as a result of substantive feedback from stakeholders (Exhibit 23, Systematic Review of Criteria, pp.77 and 234-235).

As described in §602.21(a)(b), at the February Policy meeting, the Council considers the policy changes that need to be made in the subsequent year. The initiation of the revisions occurs at the April meeting; then throughout the year, ACICS drafts, proposes, and (if approved by the Council) finalizes these policy changes (Exhibit 6: Policies and Procedures Manual, Policy Development and Review, Chapter 40). Revisions to the criteria are published in the memo to the field shortly after Council meetings, and the revised version of the Accreditation Criteria is then made available to the public via the website, www.acics.org. Specific effective dates may vary (Exhibit 23, Systematic Review of Criteria).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 157 Memo to the Field Feedback	Exhibit 157 Memo to the Field Feedback.pdf		
Exhibit 159 Memo to the Field Webpage	Exhibit 159 Memo to the Field Webpage.pdf		
Exhibit 160 Sample Meeting Minutes w/Comments	Exhibit 160 Sample Meeting Minutes wComments.pdf		
Exhibit 23 Systematic Review of Criteria	Exhibit 23 Systematic Review of Criteria.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency must provide documentation that it provides notice of proposed changes to all of the agency's relevant constituencies, gives the constituencies opportunity to comment, and takes into account any comments on the proposed changes submitted timely by the relevant constituencies.

# **Analyst Remarks to Narrative:**

The agency's standard revision process, stated in this section and in Section 602.21(a)&(b), describes how it includes input from all the agency's relevant constituencies when reviewing the validity of the standards. Specifically, the policy states that new or revised criteria proposals could come from institutions, council members, council committees, the Intermediate Review Committee, site visitors, staff, or the Department, state agencies, or other regulatory agencies (Exhibit 6, page 130). However, the agency did not provide documentation that it provided all the relevant constituencies (to include the public) an opportunity to provide input on proposed standards revisions.

The agency provided documentation to support its standards review process (in this section and in Section 602.21(a)&(b)). The documentation indicated that the agency solicited feedback both written and via webinars, and provided a summary of the comments received (Exhibits 157 & 159). However, the feedback does not appear to include comments from all the agency's relevant constituencies, and does not adequately document that the agency seeks and reviews input from all of its relevant constituencies and by other interested parties, provides an opportunity to comment, and takes into account comments received in a timely manner.

Although the agency's policy states how the council manages its policy development and implementation on an annual basis, it does not include any requirement that the agency must initiate action within 12 months to make standards revision changes and must complete that action within a reasonable period of time.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(a)(1) Approval of Substantive Changes

#### Narrative

The Council prescribes specific requirements for substantive changes made at the institutional or program level. Those requirements are specified in the General Procedures and the Council Actions sections of the standards document (Exhibit 1, Accreditation Criteria, Section 2-2-100, p. 23 and Section 2-3-300, p.38). Institutions must seek and receive formal approval by the Council before they initiate operations based on (a) a change in mission or objectives; (b) legal status, form of control or ownership; (c) new programs that are determined to be out of scope; (d) new courses or programs that are offered through a new delivery method (i.e. distance education); (e) new programs at a higher credential than previously offered; (f) a change from clock hours to credit hours; (g) a substantial change in the number of clock or credit hours; (h) the acquisition of any other institution or any program or location of another institution; (i) the addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution; (j) entering into contracts with unaccredited institutions to offer instruction; (k) establishment of a branch campus or learning site geographically apart from the main campus where 50 percent or more of a program is offered; or, (l) addition of a direct assessment competency-based program. The standards require that approval must be granted by the Council before any change can be included in the institution's scope of accreditation (Exhibit 1, Section 2-2-101, p. 23).

ACICS standards clearly describe the assessment, approval, and monitoring procedures associated with the application required for each type of substantive change (Exhibit 141, Substantive Change Application Templates). Institutions are provided guidance on the process of approval in the General Procedures section of the standards (Exhibit 1, Sections 2-2-103 through 2-2-111, pp. 24-26). To ensure that the proposed changes do not adversely affect the ability of the institution to maintain compliance with the standards, the institution is required to explain the impact on the academic, financial, and facilities resources of the institution (Exhibit 161, Plan to Expand Institution Scope of Accreditation Template).

When proposing substantive changes to an existing program, such as extensive changes to the number of clock or credit hours or changing from clock to credit hours, the institution must submit information comparing the proposed program content with that of the currently approved program. That information is provided to ACICS as part of the academic credit analysis (Exhibit 162, Sub-Change to an Existing Program Academic Credit Analysis Template).

When an institution proposes to initiate a new program, the Council evaluates and compares the proposed program against existing programs in four areas to determine if the program is out-of-scope. Those areas are the number of courses in the proposed program, the program's relationship to the Classification of Instructional Program (CIP) code, licensure or certification requirements, and externship requirements (Exhibit 141, Substantive Change Application Templates, p. 26).

All substantive change requests are reviewed by full Council or the Executive Committee of the Council, which has the authority to act "on behalf of the Council between Council meetings" (Exhibit 1, Appendix A, Article V, Section 2(a), p. 102). The Executive Committee has access to the application, the Plan to Expand an Institution's Scope of Accreditation and the Out-of-Scope Evaluation (where applicable), and other supporting documents to support the institution's substantive change request. The Council reviews all materials prior to reaching a decision to include a requested change under the institution's current grant of accreditation. The Council may approve, defer, or deny the institution's application to make a substantive change (Exhibit 163, Executive Committee Meeting Minutes-November, pp. 1, 16, 25, 82, 86, 88, 93, 96, 101, 105).

If the Council approves the change, the letters designate the effective date of change, which is the projected start date of a program or new branch, or the date of the letter for other substantive changes (Exhibit 60, Sample Sub Change Applications and Approval Letters). Inasmuch as prior approval is required before implementation of these changes, the effective date cannot be retroactive. Failure of an institution to secure prior approval of a substantive change will subject that institution to a Suspension order or a Show-Cause Directive (Exhibit 1, Title II, Chapter 2, Section 2-3-230, p. 38 and Section 2-3-402(c), pp. 39-40; Exhibit 109, Institutional File-NWSC, pp. 163-168).

In addition, following approval of the Council, on-site quality assurance monitoring visits are conducted for the following substantive changes: new programs significantly different than others being offered or at a higher credential level; a delivery method currently not used by the institution; a new branch campus; a branch campus or learning site that offers 50 percent or more of an academic program; the acquisition of any other institution or any program or location of another institution; and/or a change in legal status, control or ownership. These on-site evaluations are conducted to ensure the institution remains compliant with ACICS standards (Exhibit 164, Sample QAM Reports).

# Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 109 Institutional File-NWSC	Exhibit 109 Institutional File-NWSC.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		
Exhibit 161 Plan to Expand Institution Scope of Accreditation Template	Exhibit 161 Plan to Expand Institut ion Scope of Accreditation Template.pdf		
Exhibit 162 Sub-Change to an Existing Program-Academic Credit Analysis Template	Exhibit 162 Sub-Change to an Existi ng Program Academic Credit Analysis Template.pdf		
Exhibit 163 Executive Committee Meeting Minutes-November	Exhibit 163 Executive Committee Meeting Minutes-November.pdf		
Exhibit 164 Sample QAM Reports	Exhibit 164 Sample QAM Reports.pdf		
Exhibit 60 Substantive Applications and Approval Letters	Exhibit 60 Substantive Change Applications and Approval Letters.pdf		

## Analyst Worksheet - Narrative

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency must provide information and documentation on how it ensures ensure that any substantive change to the educational mission, program, or programs of an institution after the agency has accredited the institution does not adversely affect the capacity of the institution to continue to meet the agency's standards. The agency must also provide information and documentation that substantive changes are reviewed and approved by a decision-making body of the agency prior to implementation.

## **Analyst Remarks to Narrative:**

The agency's written policies require an institution to obtain the agency's approval of a substantive change prior to inclusion within the scope of accreditation previously granted, as included in Section 2-2-101 of the agency's Accreditation Criteria (Exhibit 1).

The agency's policies and procedures are comprehensive and detailed as to the agency's expectation for submitting substantive change applications, as documented in Sections 2-2-103 through 2-2-111 of the agency's Accreditation Criteria and in the substantive change templates, applications and visit reports. All materials included in the application are reviewed to ensure that the institution can undertake the substantive change and remain in compliance with the agency's standards.

The agency states that either the council or the executive committee of the council reviews and approves substantive changes. (The role of the executive committee is discussed further in Section 602.15(a)(2).) However, Exhibit 161 (page 1) refers to a "Substantive Change Review Committee (SCRC)" that would review all substantive change applications and make a recommendation for action to the council. The SCRC is not referenced by the agency in this section, but documentation of their recommendations and "ballots" are included in Exhibit 60 (pages 863-941). And, Exhibits 141 (page 10) and 60 (page 120) states that the "substantive change request will be presented to the Council for review and decision," with no mention of possible review and approval by the executive committee.

The agency states that an institution requesting a substantive change must provide a "Plan to Expand Institution Scope of Accreditation" to ensure that approval will not be granted to any substantive change that could adversely affect the capacity of the institution to continue to meet the agency's standards, as required by this section. However, based on the directions of the plan, it only appears to be required "when preliminary review of a new program of study is determined to be compliant with ACICS Accreditation Criteria for programs of study, but is determined to be outside the institution's current scope of accreditation" (Exhibit 161, page 1). And, the template provided in Exhibit 141 (page 10, Revised: September 2013) differs from the one in Exhibit 161 (Revised: September 2014) and from the completed example in Exhibit 60 (page 120, Revised: March 2016); and none of these examples appear to address all substantive changes covered by Section 602.22. Therefore, it is not clear that the agency currently ensures that any substantive change to the educational mission, program, or programs of an institution does not adversely affect the capacity of the institution to continue to meet the agency's standards.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(a)(2)(i-vii) Types of Substantive Change

### Narrative

Member institutions are required to maintain standards of quality and integrity, including the submission of applications to ACICS to initiate all substantive changes at the institution (Exhibit 1, Title II, Chapter 2, Introduction, p. 23). The Council requires "...approval by ACICS before substantive changes are implemented..." The Council has established specific definitions (Exhibit 1, Title II, Chapter 2, 2-2-101, p. 23) along with policies and procedures for substantive changes made at the institutional or program level. Member institutions are required to obtain approval for changes to (a) mission or objectives; (b) legal status, form of control or ownership; (c) new programs that are determined to be out of scope; (d) new courses or programs that are offered through a new delivery method (i.e., distance education); (e) new programs at a higher credential than previously offered; (f) initiate a change from clock hours to credit hours; (g) a substantial change in the number of clock or credit hours; (h) the acquisition of any other institution or any program or location of another institution; (i) the addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution; (j) entering into contracts with unaccredited institutions to offer instruction; (k) establishment of a branch campus or learning site geographically apart from the main campus where 50 percent or more of a program is offered; or (l) addition of a direct assessment competency-based program, Id.

Proposed substantive changes must be submitted to ACICS via applications that have very prescribed elements and specific supporting documentation requirements depending on the type of change requested. ACICS describes the assessment, approval, and monitoring procedures associated with each application required for each type of change (Exhibit 141, Substantive Change Application Templates). Institutions are provided guidance related to the expectations relative to the process for approval in the General Procedures section of the Criteria as well as through the application templates themselves (Exhibit 1, Title II, Chapter 2, 2-2-102 through 2-2-111, pp. 23-26; 2-2-505, p. 34; and 3-1-505, p. 53). The institution then prepares and submits the relevant application for its proposed substantive change via the electronic system.

All substantive change requests are presented to the full Council, when in session, or the Executive Committee, when Council is not in session (Exhibit 1, Appendix A, Article III, Section 2, p. 99; Article V, Section 2(a), p. 102). Substantive change requests are presented to the Council or Executive Committee in advance of their respective meetings. The substantive change material includes a brief institutional history, a list of the campus's or campuses' active and approved programs of study, and the substantive change request. The Council or Executive Committee has access to the complete application of the institution's request for a substantive change and reviews all materials prior to reaching a decision to include a requested change under the institution's current grant of accreditation. The Council makes a decision on whether to approve, defer, or deny the institution's application to make a substantive change (Exhibit 162, Executive Meeting Minutes-November, pp. 1, 16, 25, 82, 86, 88, 93, 96, 101, 105). The Council will subsequently communicate the action on the application following its decision (Exhibit 60, Sub-Change Applications and Approval Letters, pp. 118-122, 129-131, 326-327, 807-809, 952-953, 999-1001; Exhibit 24, PVP Driven Sub Change Deferral/Denial Letters).

In addition, the Council may require an on-site quality assurance monitoring visit following Council approval of the following substantive changes: reinstatement of accreditation following a change in legal status, ownership or control; new programs of study significantly different than others being offered or at a higher credential level; and change in the mode of delivery method for a program. These on-site quality assurance monitoring visits are conducted to ensure the institution remains compliant with the agency standards (Exhibit 63, QAM Visit Report Templates). In addition, as stated above, the Council may determine to conduct a comprehensive on-site evaluation visit if the substantive changes made are sufficiently extensive that the nature and scope of the institution is no longer the same as when last reviewed (as further described in §602.22(a)(3)) (Exhibit 1, Section 2-2-102, pp. 23-24).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		
Exhibit 162 Sub-Change to an Existing Program-Academic Credit Analysis Template	Exhibit 162 Sub-Change to an Existi ng Program Academic Credit Analysis Template.pdf		
Exhibit 24 PVP Driven Sub Change Deferral/Denial Letters	Exhibit 24 PVP Driven Sub Change Deferral_Denial Letters.pdf		
Exhibit 60 Substantive Applications and Approval Letters	Exhibit 60 Substantive Change Applications and Approval Letters.pdf		
Exhibit 63 QAM Visit Report Templates	Exhibit 63 QAM Visit Report Templates.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency must provide documentation of the review of direct assessment competency-based programs, if the agency approves such programs.

## **Analyst Remarks to Narrative:**

The agency's policies in Section 2-2-101 of the agency's Accreditation Criteria include all of the types of substantive changes required by this section (Exhibit 1). The agency also provided substantive change documentation (in this section and Section 602.22(a)(1)) to verify the process for review and approval of a variety of substantive change types to demonstrate compliance with this section.

Department staff noted that Section 3-1-505 and Section I of Appendix H of the Accreditation Criteria provide standards specific to direct assessment competency-based programs. The agency did not provide any information or documentation concerning the review and approval of such programs, either via the substantive change process or via the accreditation review process.

## List of Documents Uploaded by Analyst - Narrative

# Criteria: 602.22(a)(2)(viii) Approving Additional Locations

## Narrative

ACICS does not exempt member institutions from adhering to current requirements for prior approval before advertising, recruiting, or enrolling students at an additional location, a new branch, or a new learning site that offers 50% or more of a program of study. The agency requires and conducts evaluation visits according to policy to all additional locations. (Exhibit 1, Section 2-2-104, p. 24). The Department's provision under §602.22(a)(2)(vii)(A)(B)(C)(D) and (E) do not apply to ACICS.

# Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		

# **Analyst Worksheet - Narrative**

## **Analyst Review Status:**

Analyst Remarks to Narrative:
This section is not applicable to the agency as it does not offer the prior approval of additional locations.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(a)(2)(ix-x) Other Locations Needing Approval

#### Narrative

Institutions are required to keep ACICS fully informed of all activities at the institution and the Council requires "Approval by ACICS is required before substantive changes are published, advertised, and implemented" (Exhibit 1, Title II, Chapter 2, Introduction, p. 23). The Council has established specific definitions (Exhibit 1, Accreditation Criteria, Title II, Chapter 2, 2-2-101, p. 23) along with policies and procedures for substantive changes made at the institutional or program level. Member institutions are required to obtain approval for the acquisition of any other institution or any program or location of another institution and the addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution (Ibid., Section 2-2-101(g)(h)). The acquisition of an institution or additional location would be evaluated through the New Branch Application process (Exhibit 11, Stratford University's Acquisition of BIC), if the institution or location being acquired is not ACICS-accredited, or through the Change of Ownership review, if it is (Exhibit 198, ECA – Kaplan Change of Ownership). Further, institutions seeking to add a permanent location (a branch or learning site) at a site where it is conducting a teach-out of students of an institution that has ceased operations would have to undergo the new branch application review subsequent to the Council's review of the teach-out agreement in place. Within the last two years, in light of the challenges faced by ACICS and, by consequence, its institutions, there has been no request for such a change.

Procedurally, the acquisition of a program would be evaluated consistent with the process of review of the institution's addition of a new program. In all cases, the proposed substantive change must be submitted to ACICS via applications that have very specific requirements with supporting documentation depending on the type of change requested. The relevant application describes the assessment, review, and monitoring procedures required for each type of change (Exhibit 141, Substantive Change Application Templates). Institutions are provided guidance related to the expectations relative to the process for approval in the General Procedures section of the Criteria as well as through the application templates themselves (Exhibit 1, Accreditation Criteria, Title II, Chapter 2, 2-2-102 through 2-2-111, pp. 23-26; 2-2-505, p. 34; and 3-1-505, p. 53).

As with all other substantive change requests, requests for the acquisition of any other institution or any program or location of another institution and the addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution are presented to the full Council, when in session, or the Executive Committee, when Council is not in session (Exhibit 1, Accreditation Criteria, Appendix A, Article III, Section 2, p. 99; Article V, Section 2(a), p. 102). As previously described in 602.22(a)(1-vii), substantive change requests are presented to the Council or Executive Committee in advance of their respective meetings. The substantive change material includes a brief institutional history, a list of the campuses' active and approved programs of study, and the substantive change request. The Council reviews all materials prior to reaching a decision to include a requested change under the institution's current grant of accreditation. The Council makes a decision on whether to approve, defer, or deny the institution's application to make a substantive change (Exhibit 165, Executive Committee Meeting Minutes). The Council will subsequently communicate the action on the application following its decision (Exhibit 60, Sample Substantive Change Letters).

In addition, if the institution has acquired a branch campus or added a branch campus in order to teach-out students of another institution, then that location is required, consistent with the new branch addition process, to undergo a quality assurance monitoring visit following Council approval and within six months of the initiation of classes at the location (Exhibit 1, Accreditation Criteria, Title II, Chapter 2, 2-2-110, pp. 25-26).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 11 Stratford University Acquisition of BIC	Exhibit 11 Stratford University Aquistion of BIC.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		
Exhibit 165 Executive Committee Meeting Minutes-Dec-June	Exhibit 165 Executive Committee Meeting Minutes-Dec-June.pdf		
Exhibit 198 ECA-Kaplan Change of Ownership	Exhibit 198 ECA-Kaplan Change of Ownership.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## Analyst Remarks to Narrative:

The agency's policies in Section 2-2-101 of the agency's Accreditation Criteria include all of the types of substantive changes required by this section (Exhibit 1). The agency also provided substantive change documentation (in this section and Section 602.22(a)(1)) to verify the process for review and approval of the acquisition of any other institution or location of another institution to demonstrate compliance with this section. The agency also stated that it has not had a recent opportunity to review a request for the addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(a)(3) When New Evaluation Required

#### Narrative

ACICS's written policies address the mechanism by which ACICS monitors proposed and adopted substantive changes at accredited institutions to determine whether a new comprehensive evaluation is required (Exhibit 1, Title II, Chapter 2, 2-2-101, 2-2-102, p. 23; Section 2-2-121(a), p. 27; Title I, Chapter 1, 1-1-200(b), p. 13).

The standards governing substantive changes states:

The Council shall conduct a comprehensive on-site evaluation of the institution if substantive changes that have been made or are proposed are sufficiently extensive that the institution's capacity to maintain compliance with accreditation standards requires an immediate assessment. Substantive changes are defined by Council as "extensive" when the types and /or number of changes are so substantial that the nature and scope of the accredited institution will no longer be the same since last evaluated and in its place a new institution has evolved. (Ibid., Title II, Chapter 2, 2-2-102, pp. 23-24).

ACICS decision-makers are given clear guidance regarding the triggers for a new institutional evaluation. Specifically, ACICS has a policy that utilizes a rubric to evaluate extensive substantive changes and that is presented to the Council for consideration prior to approval of any substantive change. The rubric provides a guide for evaluation of cumulative substantive changes that could indicate the need for a new evaluation. The Educational Enhancement & Evaluation (EEE) Committee or the Executive Committee uses this rubric to determine when a comprehensive evaluation is needed based on the number of substantive changes made by an institution, as well as giving consideration to any risk factors (financial or student achievement, complaints from students or external sources) (Exhibit 6, Policies and Procedures Manual, Chapter 23; Exhibit 166, Substantive Change Monitoring, p. 1).

ACICS requires that all substantive changes to an institution be brought on a monthly basis to the Executive Committee of the Council for review and decision. ACICS reviews the substantive changes individually as well as collectively with other substantive changes that have occurred since an institution's last grant of accreditation. Please be aware that due to the Secretary's December 2016 decision to deny recognition to ACICS, ACICS accredited schools have operated under a provisional Title IV Program Participation Agreement that prohibits the addition of new programs or locations, and therefore there has been a dramatic reduction in the number of substantive change applications reviewed by the agency over the past year as a result.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 166 Substantive Change Monitoring	Exhibit 166 Substantive Change Monitoring.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## **Analyst Remarks to Narrative:**

The agency's written policies include the requirement to conduct a comprehensive on-site evaluation of an institution when the substantive changes proposed or made are deemed extensive, as included in Section 2-2-102 of the agency's Accreditation Criteria (Exhibit 1). The internal policy included in Chapter 23 of the Policies and Procedures Manual (Exhibit 6, page 68) provides guidance on how to determine if the substantive changes proposed or made would trigger such a determination by the council.

The agency indicated that it has not had the opportunity to apply this policy recently due to the decrease in the number of substantive change requests, and therefore could not provide documentation of implementation of a comprehensive review. The agency did provide documentation of the use of the substantive change monitoring policies and procedures by staff and the council.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(b) Substantive Change Procedures

#### **Narrative**

Substantive changes that must be reported, evaluated, and given prior approval by ACICS include the following: change of mission or objectives; change of ownership or control, new programs that represent a significant departure from existing programs offered when the agency last evaluated the institution; change in mode of delivery; higher credential offerings; change from clock to credit hour; a change of 25% or greater in the number of clock or credit hours awarded for successful completion of a program; the acquisition of any other institution or any program or location of another institution; adding a permanent location at a site at which the institution is completing a teach-out for another institution that has closed; contractual arrangements under which an institution or organization not certified to participate in the Title IV, HEA programs offers more than 25 percent of one or more of the accredit institution's educational program; opening a branch or learning site at which the institution offers at least 50 percent of an educational program; and adding a direct assessment competency-based program (Exhibit 1, Title II, Chapter 2, 2-2-101, p. 23). The documents and applications required by ACICS when reporting substantive changes are found in Exhibit 141 (Substantive Change Application Templates).

The procedures for processing the various applications are described in the Policies and Procedures Manual (Exhibit 6, Policies and Procedures Manual, Chapters 3, 8, 9,10, 19, 33, and 35). Institutions are given guidance in securing approval for substantive change prior to implementation through the Accreditation Criteria (Exhibit 1, Title II, Chapter 2, 2-2-103 through 2-2-111, pp. 24-26), as well as in the applications for substantive change. The documents and applications for substantive changes are available to accredited institutions on the Member Center Portal (Exhibit 167, Member Center Application Templates Screenshot). Procedures for reviewing substantive change applications are detailed in §602.22(a)(1) of this document. Approval letters designate the effective date of change, which is the projected start date of a program or new branch, or the date of the letter for other substantive changes. Inasmuch as prior approval is required before implementation of these changes, the effective date cannot be retroactive. Failure of an institution to secure prior approval of a substantive change will subject that institution to a Suspension order or a Show-Cause Directive (Exhibit 1, Title II, Chapter 2, Section 2-3-230, p. 38; and Section 2-3-402(c), pp. 39-40). Exhibit 105, is an example of a withdrawal of accreditation by suspension of an institution that did not notify ACICS of a change of ownership prior to the change and did not submit a change of ownership application after being informed of the requirement to do so (Exhibit 105, Institutional File-Herguan, pp. 8-15). Further, in Exhibit 109, an institution was issued a show-cause directive for offering a higher credential prior to securing Council's approval (Exhibit 109, Institutional File-NWSC, pp. 6-8, 117-119, 163-168).

The Council must review and act on new programs and substantive program changes prior to initiation. If, during the review process, a new program is deemed out of scope for an institution, the application must go through the substantive change review process (Exhibit 6, Policies and Procedures Manual, Chapter 35).

Substantive changes requiring a visit include new branches, learning sites which offer 50 percent or more of a program, initiation of new programs that are out of scope or at a higher credential than previously offered, change of ownership or control, initiation of a new delivery method, acquisition of another institution or location of another institution, or addition of a direct assessment competency-based program. These visits take place within six months of the initiation of the activity for all but programs that are out of scope and initiation of distance education delivery, which must be conducted within one year of the start of the new program. (Exhibit 1, Title II, Chapter 2, Section 2-2-110, pp. 25-26). Change of Ownership or Control Review Procedures (Exhibit 1, Title II, Chapter 2, Section 2-2-403, pp. 31-32) describes step-by-step procedures including an action of reinstatement of accreditation and subsequent required visit within six months (Exhibit 168, QAM-Change of Control Visit Report, CAIAM). The Council retains the right, however, to conduct a site visit at its discretion at any time.

The Department, School Participation Team in the Office of Federal Student Aid, and state agencies are notified of approvals of substantive changes at the time of the approval, as well as in the Summary of Council Actions (Exhibit 15, Council Actions Summary). Exhibit 60, pp. 952-953 is an example of approval to initiate distance education; Exhibit 60, pp. 872 and 875, shows an example of approval to offer a higher credential; pp. 326-327 show an example of approval of a learning site; on pp. 129-131, is an example of approval of a change in mission; approval of a new branch campus is on pp. 118-121; and, pp. 1001 has an example of a reinstatement of accreditation after a change of control. Exhibit 169, p.12 is an example of a denial of a learning site. Exhibit 165, Executive Committee Meeting Minutes, p. 9 is an example of a denial to initiate distance education. Exhibit 170, is an example of a denial of a higher credential.

# Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 105 Herguan Institutional File	Exhibit 105 Herguan Institutional File.pdf		
Exhibit 109 Institutional File-NWSC	Exhibit 109 Institutional File-NWSC.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		
Exhibit 15 Council Actions Summary	Exhibit 15 Council Actions Summary.pdf		
Exhibit 165 Executive Committee Meeting Minutes-Dec-June	Exhibit 165 Executive Committee Meeting Minutes-Dec-June.pdf		
Exhibit 167 Member Center Application Templates Screenshot	Exhibit 167 Member Center Application Templates Screenshot.PDF		
Exhibit 168 QAM-Change of Control Visit Report, CAIAM	Exhibit 168 QAM-Change of Control Visit Report CAIAM.pdf		
Exhibit 169 Denial of a Learning Site-PPG	Exhibit 169 Denial of a Learning Site PPG.pdf		
Exhibit 170 Denial of a Higher Credential Letter	Exhibit 170 Denial of a Higher Credential Letter.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		
Exhibit 60 Substantive Applications and Approval Letters	Exhibit 60 Substantive Change Applications and Approval Letters.pdf		

# **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide additional information and documentation to demonstrate that the agency has procedures that specify an effective date, which is not retroactive, on which a substantive change is included in the institution's grant of accreditation.

## **Analyst Remarks to Narrative:**

The agency did not provide any evidence that it has policies or procedures that specify an effective date or prohibit it from making retroactive approvals of substantive changes. Although the agency's substantive change policies, as included in Title II, Chapter 2 of the agency's Accreditation Criteria (Exhibit 1), and procedures, in the Policies and Procedures Manual (Exhibit 6), state that an institution must obtain prior approval for any substantive change (as defined by the agency), there is no statement to specify an effective date, which is not retroactive, on which a substantive change is included in the institution's accreditation.

The agency provided examples of substantive change approvals (in Sections 602.22(a)(1) and 602.22(a)(2)(i-vii)) to demonstrate implementation of its policy, but the council action letters do not provide sufficient evidence that the agency clearly and consistently specifies an effective date, which is not retroactive, on which the change is included in the institution's accreditation. Specifically, in Exhibit 60, the letters on pages 45, 47, 123, 801, and 992 include an effective date, but the letters on pages 109, 110, 122, 123, 319, 320, 800 do not; therefore it is not clear that the agency consistently specifies an effective date.

List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(c) Fiscal and Administrative Capacity Determination

#### Narrative

The sections of the Accreditation Criteria (Exhibit 1) relevant to the initiation of a non-main campus are Sections 1-3-100, p. 16; 2-2-101, p. 23; and 2-2-104, p. 24. "Additional Locations" are shown under the titles of "Branch Campuses" and "Learning Sites." While these categories are generically grouped under Additional Locations, branch campuses are expected to provide all the management support and student and educational services as main campuses. Branch campuses must be approved by the Council before advertising, recruiting, or enrollment may take place, and requires a visit within six months of the initial class start (Exhibit 1, Section 2-2-104(a), p. 24). Learning sites are connected directly to a main campus or a branch campus and are generally located close to one of these campuses. A learning site may or may not offer 50% or more of an educational program. In both instances, approval is required by the Council before advertising, recruiting, or enrollment may take place. However, if the site offers 50% or more of a program, then the change must be considered through the substantive change process previously described, and requires a verification visit within six months of the start date (Exhibit 1, Section 2-2-104(b), p. 24).

As detailed in the Branch Application Process chapter of the Policies and Procedures Manual (Exhibit 6, Policies and Procedures Manual, Chapter 3), the application process includes two parts, the first of which must be submitted for review and approval prior to the initiation of the new branch location. Upon receipt of all required information, Part I of the application and the Plan to Expand the Institution's Scope of Accreditation Form are presented to the Executive Committee at its next scheduled meeting for consideration. (Exhibit 186, EDIC Branch Part I Application). Consistent with its authority, the Committee can approve, defer, or deny the application for the new branch.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 125 Institutional File-Penn Commercial	Exhibit 125 Institutional File Penn Commercial.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		
Exhibit 169 Denial of a Learning Site-PPG	Exhibit 169 Denial of a Learning Site PPG.pdf		
Exhibit 186 EDIC Branch Part I Application	Exhibit 186 EDIC Branch Part I Application.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		
Exhibit 63 QAM Visit Report Templates	Exhibit 63 QAM Visit Report Templates.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency did not provide documentation to demonstrate that its procedures for the approval of an additional location where at least 50 percent of an educational program is offered provides for a determination of the institution's fiscal and administrative capacity to operate the additional location.

## **Analyst Remarks to Narrative:**

The agency has written policies and procedures for the review and approval of additional locations that include a determination of the institution's fiscal and administrative capacity to operate an additional location in Section 2-2-104 of the agency's Accreditation Criteria (Exhibit 1). Specifically, the agency requires the submission of a substantive change application for the opening of branch campus or a learning site that offers 50% or more of an educational program. The review of a branch campus also includes the submission of an expansion plan.

The agency provided an example (Exhibit 186) of the review and approval of a branch campus application, which includes specific information and documentation regarding an institution's fiscal and administrative capacity to operate an additional location in an expansion plan. The agency also provided examples (Exhibits 125 and 169) of the review and decision with regard to the addition of a learning site that offers 50% or more of an educational program. However, those examples did not demonstrate that the agency requests an institution's fiscal and administrative capacity in the review and approval of a learning site. Specifically, neither example includes an expansion plan, even though the expansion plan is noted as necessary for a learning site that offers 50% or more of an educational program (in some iterations, as noted in Section 602.22(a)(1)).

In addition, the institution in Exhibit 125 indicated that the learning site would offer 50% or more of an educational program (page 4); however the approval letter (page 7) states "The learning site is approved to offer less than 50% of a program of study. If educational instruction is increased to equal or exceed 50% of a program of study at this location, the institution is required to obtain Council approval prior to implementation and the action would be considered a substantive change to the institution's scope of accreditation." On page 17, the agency provided the history of the review of this learning site, that noted the institution initially requested the addition of a learning site to offer 50% or more of an educational program, but revised it to less than 50% of an educational program so to avoid the more lengthy process to approve a substantive change. Later, the agency was informed that the institution was actually offering 100% of a program at the learning site, acted to place the institution on compliance warning, and eventually approved the learning site. It is not clear that the agency is ensuring that institutions are in compliance with agency standards on an on-going basis or requiring institutions to consistently follow policies and procedures.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(c)(1) Approval of Additional Locations

#### Narrative

As previously referenced in 602.22(c) above, the action is communicated to the institution and if approved, information will be provided concerning the visit which must take place within six months of the initiation of classes (Exhibit 186, EDIC Branch Part I Application, pp. 109-112). The visit will be rescheduled based on communication from the institution that classes have not yet started at the new location to ensure compliance. (See id. pp.113-115). Part II of the application must be submitted according to the directive provided in the original approval letter and includes a Self-study narrative. The second visit to the branch campus is conducted by a full evaluation team normally within 18 months of the start of operations. The report written by the team is forwarded to the campus for response and considered by the Council at its next meeting to determine whether to continue the approval of the branch campus within the institution's grant of accreditation

In the case of learning sites that are approved to offer more than 50% of an approved program, the Penn Commercial review demonstrates the application of the visit evaluation procedure. This visit is conducted by an ACICS staff member who completes a Quality Assurance Monitoring Visit Learning Site Verification Report (Exhibit 125, Institutional File-Penn Commercial, pp. 8-16, 29-33, 53-66). The Committee, upon its review may also choose to defer or deny the application for the learning site (Exhibit 169, Denial of Learning Site-PPG).

The purpose of this visit is to review the establishment of the additional location to ensure its compliance with all applicable standards (Exhibit 63, QAM Visit Report Templates, pp.100-119).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 125 Institutional File-Penn Commercial	Exhibit 125 Institutional File Penn Commercial.pdf		
Exhibit 169 Denial of a Learning Site-PPG	Exhibit 169 Denial of a Learning Site PPG.pdf	ì	
Exhibit 63 QAM Visit Report Templates	Exhibit 63 QAM Visit Report Templates.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation to demonstrate that it conducts a visit, within six months, to each additional location an institution establishes where at least 50% of an educational program is offered.

## **Analyst Remarks to Narrative:**

Section 2-2-110 of the agency's Accreditation Criteria requires a visit to an additional location within six months of the initial class start date (Exhibit 1). However, the agency did not provide documentation to demonstrate that it conducts a visit within six months, as required by the agency's policies and this section. The agency provided two examples in this section, but one did not include a site visit (Exhibit 169). And, the other did not clearly demonstrate that a visit to the learning site occurred within six months of the initial class start date (Exhibit 125).

## List of Documents Uploaded by Analyst - Narrative

# Criteria: 602.22(c)(2) Approval Procedures for 3+ Locations

## Narrative

As a matter of policy and practice, the Council requires every location where an institution offers the education program to be visited by a review team during an on-site team visit, be that location a main campus, branch campus, or other additional location.

The Council makes no distinction in its policies between institutions that operate more than three additional locations and those that operate fewer than three additional locations. The Council's oversight practices and requirements for all of its accredited institutions, regardless of the number of branch campuses operated, are identical (Exhibit 6, Policies and Procedures Manual, Chapter 3). Furthermore, regardless of the number of branch campuses included in the scope of an institution's accreditation, every branch campus is required to undergo the same Council oversight, as detailed in response to section §602.22(c)(1) above. The Council's evaluation teams visit every campus for an initial grant of accreditation visit and every campus each time an institution applies for renewal of accreditation. The applicable standards are described in the Council's Accreditation Criteria regarding applications for new sites, scope of site visits, initiating educational activity away from the main campus, and substantive changes. (Exhibit 1, Title II, Chapters 1 and 2, Sections: 2-1-301, p. 18; 2-1-501, p. 20; 2-2-101, p. 23; \*Section 2-1-301, Application
\*Section 2-1-501, Scope of Visit
\*Section 2-2-101, List of Substantive Changes
\*Section 2-2-104, Initiation of Additional Campus Activity

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## Analyst Remarks to Narrative:

The agency requires that all additional locations must be regularly visited and evaluated in conjunction with the periodic, comprehensive evaluation of the institution. The agency provided documentation of the regular evaluation of additional locations throughout the petition, specifically in Exhibits 17 and 64.

#### List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(c)(3) Approval Procedures for Rapid Growth

#### Narrative

The Council monitors the number of branch campus applications that an institution may submit. As part of the Branch Application (Exhibit 141, pp. 1-9), the main campus must submit copies of audited financial statements, projected financials for the intended branch campus, and short narratives describing the branch's key administrative areas and who will be responsible for these areas. If an institution is on financial reporting, or has been determined to be out of compliance with the Council's standards for financial stability, request to, and approval from, the Council must be granted prior to submitting an application (Exhibit 1, Section 2-1-808, p.22; and 2-2-104(a), p. 24). The Council has not had an institution request approval to apply to initiate a branch campus while on financial review in the past two years.

As previously detailed in response to §602.22(c)(1) above, all branches that receive approval from the Council must have two visits to ensure the institution has appropriate personnel, facilities, and resources, as well as meeting all other standards. All new locations are visited within six months of the start of classes. The second visit is a comprehensive evaluation on-site visit and typically takes place within 18 months of the initial operation of the branch campus. Subsequent to this process for the new branch, the location is visited as part of the institution's renewal of accreditation review. This ensures that the Council is monitoring the administrative capabilities of every campus.

According to Section 2-2-104 of the Accreditation Criteria, "The Council reserves the right to limit the number of branches based on its review of demonstrated administrative and financial capabilities." (Exhibit 1, Title II, Chapter 2, p. 24). The Accreditation Criteria (ibid.) authorizes the Council to conduct site visits at any time and to any location as it deems necessary as seen in the following sections:

- Section 2-1-805, Unannounced Visits (p. 21)
  Section 2-2-104, Initiation of Additional Campus Activity (p. 24)
- Section 2-2-110, Evaluation, Approval, and Monitoring of Substantive Change Activity (pp. 25-26)
- Section 2-3-800, Special and FACT Visits (pp. 43-44)

In addition, the Council has a process as described in §602.22(a)(3) for handling extensive substantive changes, which includes the rapid growth of branch campuses at an institution (Exhibit 1, Section 2-2-102, pp. 23-24).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency must provide any information and documentation with regards to an effective mechanism for ensuring that accredited institutions that experience rapid growth in the number of learning sites maintain educational quality. The agency also must provide documentation to demonstrate compliance with this section.

## Analyst Remarks to Narrative:

The agency does not appear to have a specific mechanism for ensuring that accredited institutions that experience rapid growth in the number of additional locations maintain educational quality. The agency provided information on various policies related to the application to add a branch campus, visit requirements for branch campuses, review of fiscal and administrative capacity in the addition of a branch campus, and review of extensive substantive changes, as included in prior sections. The agency did not provide any documentation to demonstrate that these policies create an effective mechanism for ensuring that accredited institutions that experience rapid growth in the number of additional locations maintain educational quality. In addition, the agency provided no information or documentation with regards to an effective mechanism for ensuring that accredited institutions that experience rapid growth in the number of learning sites maintain educational quality.

# List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.22(d) Purpose of Visits

## Narrative

The Council considers any location where instruction is being offered by an ACICS-accredited institution to be subject to all the requirements, standards, and criteria for quality and integrity. The rapid growth of an institution by adding several additional locations does not in any way change the requirement that each location be evaluated by the Council.

In accordance with the Accreditation Criteria (Exhibit 1, Title II, Chapter 2, Section 2-2-110, pp. 25-6), and as previously detailed, a Quality Assurance Monitoring Visit-New Branch or Quality Assurance Monitoring Visit-Learning Site is conducted to every new branch campus and learning site where more than 50% of an approved program within six months of the initiation of classes. The purpose of the visit is to verify the accuracy of the information reported in the Branch Campus Application and to confirm that the new campus has adequate personnel, facilities, and resources to serve students in compliance with ACICS standards (Exhibit 63, QAM Visit Report Template, pp. 100-113 and 114-119).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 63 QAM Visit Report Templates	Exhibit 63 QAM Visit Report Templates.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency did not provide sufficient documentation to demonstrate that it consistently verifies via a site visit that an additional location has the personnel, facilities, and resources as claimed in its application to the agency for approval of the additional location.

# Analyst Remarks to Narrative:

Section 2-2-110 of the agency's Accreditation Criteria includes the requirement of a site visit to a branch campus or learning site (Exhibit 1); however, the policy does not clearly state that the purpose of the visit is to verify that an additional location has the personnel, facilities, and resources as claimed in its application to the agency for approval of the additional location. The agency provided one example (Exhibit 125) that includes the review of personnel, facilities, and resources as claimed by the institution in its application to the agency for approval of the learning site, which is not sufficient that the agency consistently verifies via a site visit that an additional location has the personnel, facilities, and resources as claimed in its application to the agency for approval of the additional location.

#### List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.23(a) Public Information

### Narrative

ACICS procedures concerning the types of accreditation it grants, and the standards and procedures that it uses to determine whether to grant, reaffirm, deny, revoke, terminate, or take any other action related to each type of accreditation that it grants are all delineated in the Accreditation Criteria which is available to the public via the ACICS website (Exhibit 171, Website Criteria Posting). The types of accreditation granted by ACICS are described in Title II, Chapter 3, of the Accreditation Criteria (Exhibit 1, pp.37-40). Specific sections of the Accreditation Criteria provide the policies and procedures leading to, and following, the award of accreditation or reaccreditation status (Exhibit 1, Title II, Chapter 1, pp. 17-22). ACICS awards institutional accreditation, which within that grant of accreditation includes the approval of branch campuses and learning sites, the credential levels, specific programs, and modes of delivery that are approved for that specific institution (Exhibit 16, Sample Council Action Letters).

Further, the procedures for applying for accreditation are based on the published Eligibility Criteria, which are recorded in the Accreditation Criteria (Exhibit 1, Title I, Chapter 2, pp. 14-15) and are also provided online to allow potential applicants to evaluate their own suitability prior to initiating the initial application process. The detailed steps are outlined on the website: http://www.acics.org/accreditation/content.aspx?id=3288, and provide explicit instructions on the expectations of the applicant as well as the review process by ACICS (Exhibit 172, Website Screenshot-Initial Application Process).

ACICS lists its accredited institutions, by campus, the period of the institution's accreditation, and the programs offered by every campus, on its online directory at the ACICS website (Exhibit 2, ACICS Directory of Institutions). Further, ACICS publishes an evaluation schedule for those institutions whose grant expires within a year (Exhibit 149, Renewal of Accreditation Visit Schedule).

The membership of ACICS's policy and decision-making bodies, the Commission and the Review Board of Appeal, are available on its website for public review, and includes the names, relevant academic and professional qualifications, as well as employment and organizational affiliations (Exhibit 173, ACICS Website – About Us – Commissioners; Exhibit 174, ACICS Website – About Us – Review Board of Appeals). Similar information is also disclosed on the administrative leadership team (Exhibit 175, ACICS Website – About Us – Staff).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 149 Renewal of Accreditation Visit Schedule	Exhibit 149 Renewal of Accreditation Visit Schedule.pdf		
Exhibit 16 Sample Council Action Letters	Exhibit 16 Sample Council Action Letters.pdf		
Exhibit 171 Website Screenshot - Accreditation Criteria Posting	Exhibit 171 Website Criteria Posting.pdf		
Exhibit 172 Website Screenshot– Accreditation  – Initial Application Process	Exhibit 172 Website Screenshot-Initial Application Process.pdf		
Exhibit 173 Website Screenshot - About Us - Review Board of Appeals	Exhibit 173 ACICS Website – About Us – Commissioners.pdf		
Exhibit 174 Website Screenshot - About Us - Review Board of Appeals	Exhibit 174 ACICS Website – About Us – Review Board of Appeals.pdf		
Exhibit 175 Website Screenshot - About Us - Staff	Exhibit 175 ACICS Website – About Us – Staff.pdf	ĺ	
Exhibit 2 ACICS Directory of Accredited Institutions	Exhibit 2 ACICS Directory of Institution.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

# **Analyst Remarks to Narrative:**

The agency maintains and makes available to the public all of the written materials described and required by this section on the agency's website. Most of this required information is available within the agency's Accreditation Criteria. Department staff verified that the other information required by this section is available on the agency's website.

# List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.23(b) Opportunity for 3rd-party Comments

#### Narrative

ACICS provides public notice on its website of all institutions that come before the Council each year for consideration for either an initial grant of accreditation or for a renewal grant of accreditation (Exhibit 149, Renewal of Accreditation Visit Schedule; Exhibit 176, Website Screenshot-Initial Applicant Institutions). ACICS's Policies and Procedures Manual, Chapter 16: Initial Applicants Seeking ACICS Accreditation, Step Four: Invitation to Apply and Step Five: Initial Application, Public Comment (Exhibit 6) captures the following procedure: when ACICS has invited an institution to apply for an initial grant of accreditation, following initial inquiry, registration and review, through a preliminary resource visit, the institution's name is posted on the ACICS website for the collection of public comments. The name of the institution remains on the list until the Council makes a final decision on the application or the institution withdraws its application. Similarly, as described in the Policies and Procedures Manual, Chapter 43: Renewal of Accreditation Application Process (Exhibit 6), a list of currently accredited institutions whose grants expire within a year is also posted to the ACICS website for public comment. This list is posted with the following accompanying statement: "Members of the public, industry members, and other third parties are invited to submit comments on these or any ACICS accredited institutions that is a candidate for ACICS accreditation by emailing them to omments@acics.org." These procedures are in accordance with the Accreditation Criteria (Exhibit 1, Appendix G, 5., p.121).

As comments are received, they are added to the file for the respective institution and are made available to staff and to the Council. If the comments include either complaints or adverse information, they are also routed to the staff person responsible for handling complaints, who systematically opens a file for each case, and follows procedures for collecting, evaluating and communicating information about each case to the Council until the file is officially closed. This process is described in more detail in response to §602.23(c)(1)(2)(3).

In addition, in order to prompt responses from key constituents of an institution under review, ACICS requires each institution undergoing any type of announced on-site evaluation visit to send the link for a Call for Comments Survey to its students, faculty, and staff, which is noted in the visit memo sent to the institution (Exhibit 21, Institutional File-WVBC, p.146; Exhibit 125, Institutional File-Penn Commercial, pp.28-29). In copying the resident state agency of the institution on a visit confirmation document, ACICS informs state agencies that it will be visiting an institution, and the state has the opportunity to supply ACICS with updates on the institution and/or accompany ACICS staff on the visit so they can provide their commentary (Exhibit 40, Sample Communication Evidencing Cooperation, pp. 2 & 6). Commentary from the survey is used to inform the evaluation team and is recorded for review in the evaluation visit report, as seen in Exhibit 125, Institutional File-Penn Commercial, pp. 41-43, Exhibit 17, Institutional File-ACCT, p. 61, and Exhibit 21, Institutional File-WVBC, pp. 310-311 and 378-379. On-site student surveys are also administered by ACICS, and the feedback is incorporated into the review and team report (Exhibit 21, Institutional File-WVBC, pp. 371-372, 378-379 and 448-449). Regardless of whether a comment from the surveys leads to a response that is incorporated in a team report, ACICS encourages institutions to respond to any negative comments reported in order to ensure full compliance with ACICS Criteria. The questions listed in the versions of the Call for Comment for faculty, staff and students, and in the on-site Student Survey are shown in Exhibit 177, Call for Comment and Student Survey Questions.

The Council meets at a minimum three times a year, usually in April, August, and December. ACICS posts on its website Council actions taken at each meeting along with the list of those institutions deferred for consideration at the next Council meeting. The summary of all Council actions is sent to the U.S. Department of Education, other accrediting agencies, state higher education licensing or authorizing agencies, and other interested parties. Copies of the Summary of Actions for the past two Council meetings are included (Exhibit 15, Council Actions Summary).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 125 Institutional File-Penn Commercial	Exhibit 125 Institutional File Penn Commercial.pdf		
Exhibit 149 Renewal of Accreditation Visit Schedule	Exhibit 149 Renewal of Accreditation Visit Schedule.pdf		
Exhibit 15 Council Actions Summary	Exhibit 15 Council Actions Summary.pdf		
Exhibit 176 Website Screenshot - Initial Applicant Institutions	Exhibit 176 Website Screenshot-Initial Applicant Institutions.pdf		
Exhibit 177 Call for Comment and Student Survey Questions	Exhibit 177 Call for Comment and Student Survey Questions.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 40 Sample Communication Evidencing Cooperation	Exhibit 40 Sample Communication Evidencing Cooperation.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

# **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## Analyst Remarks to Narrative:

Appendix G of the agency's Accreditation Criteria includes the policies and procedures related to providing an opportunity for third-party comment concerning an institution's qualifications for accreditation (Exhibit 1). That opportunity is provided on the agency's website which includes the public notice regarding institutions considered for accreditation and instructions on how to submit a third-party comment. The third-party comment opportunity is also available during the review process via a required notice from the institution under review to send a link for a "Call for Comments Survey" to its students, faculty, and staff. The agency provided documentation to demonstrate implementation of these policies and procedures.

## List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.23(c) Complaint Procedures

#### Narrative

Section 2-3-700 of the Accreditation Criteria states that ACICS reviews information submitted by third parties, to include "federal or state agencies or other accrediting agencies, or through public media sources...." as well as complaints from students, faculty, staff, and other stakeholders (Exhibit 1, Accreditation Criteria, 2-3-700, p. 43). ACICS reviews and investigates all information that raises concern about an institution's compliance with the Accreditation Criteria. (Exhibit 6, Policies and Procedures Manual, Chapter 13).

ACICS receives complaints from its various stakeholders through several channels that serve as a basis for the initiation of a review. ACICS also considers complaints that are submitted anonymously or those that did not utilize the institution's grievance policy. Electronically, complaints are received via email or through the ACICS Complaints Module, which is accessible via the ACICS web site (Exhibit 178, Complaints Procedure and Submission Web page).

In most cases, complaints received by email are channeled through the online system which captures key information about the sources, allegations, supporting documentation, and if the institution's grievance policy was followed (Exhibit 113, Screenshot of Complaints Submission Module). During the initial review, ACICS staff determines and indicates the appearance of possible criteria violation(s) as well as the severity of the allegations. This initial review may require a request for additional information from the complainant in support of the allegations (Exhibit 179, Request for Additional Information from Complainants) or require a response from the institution, with notification to the complainant, if applicable (Exhibit 19, Institutional File-Hondros, pp.1-2; Exhibit 180, Complaint Investigation-Stratford University, pp.1-2). Once the complaint is reviewed by senior staff, a determination is made, and recorded, concerning the institution's ability to demonstrate compliance, or if there is a need for a request for a second response (Exhibit 19, Institutional File-Hondros, pp.3-4; Exhibit 180, Complaint Investigation Stratford University, pp.1-2). If following the second request for information, or if additional complaints are received in the interim, the staff presents the case to the At-Risk Institutions Group (ARIG) at its next scheduled, or ad hoc meeting (Exhibit 117, ARIG Meeting Minutes) to determine if an investigative, onsite visit is necessary. In addition, in some cases when the initial complaint review indicates severe concerns about the institution, ACICS may conduct an unannounced visit to investigate the concerns as well as the overall compliance of the institution. Following this on-site review, the institution is issued a report and required to respond to the findings. The Council then reviews the complaint, the report, and the institution/campus response to determine whether to close the complaint or take an action (Exhibit 19, Institutional File-Hondros, p.24; Exhibit 181, Sample Council

The Council has placed a number of campuses on compliance warning and, in some instances, issued a show-cause directive as a result of this complaints review process (Exhibit 110, Summary of ARIG Investigations; Exhibit 181, Sample Council Action of Complaints Investigation).

Similarly, information received by third-parties is reviewed with the same thoroughness and attention as those that originate from the ACICS website. For example, following consideration of the State Council on Higher Education of Virginia (SCHEV) correspondence to the American College of Commerce and Technology, ACICS directed a limited announced visit to the main campus in Fairfax, VA in the spring 2016, resulting in a show-cause directive at the Council's August 2016 meeting (Exhibit 17, Institutional File-ACCT, pp. 29-199). Similarly, when information was received from the BPPE concerning the action by SEVP to revoke Herguan University's approval, a show-cause directive was issued; and when the Minnesota Higher Education authority acted to withdraw the license of Globe University and Minnesota School of Business to operate in the state (Exhibit 182, Show-Cause Directives).

The record of complaints is also incorporated into the onsite (re)evaluation process and serves to inform the Council when making an accreditation decision, as articulated in the agency's response to §602.16(a)(1)(ix).

Complaints made against ACICS are reviewed by the President with consultation with the Chair of the Board of Directors and the agency's legal counsel. The policy and procedure utilized are articulated in Chapter 12 of the Policy and Procedure Manual (Exhibit 6) and have been enforced with the Washington Attorney General Referral Complaint (Exhibit 183, Investigation of Complaint against ACICS).

## Document(s) for this Section

Document Title File Name		Analyst Comments	Agency's Exhibits Comments	
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf			
Exhibit 110 Summary of ARIG Investigations	Exhibit 110 Summary of ARIG Investigations.pdf			
Exhibit 113 Screenshot of Complaints Submission Module	Exhibit 113 Screenshot of Complaints Submission Module.pdf			
Exhibit 117 ARIG Meeting Minutes	Exhibit 117 ARIG Meeting Minutes.pdf			
Exhibit 17 Institutional File-ACCT	Exhibit 17 Institutional File ACCT.pdf			
Exhibit 178 Complaints Procedure and Submission Web page	Exhibit 178 Complaints Procedure and Submission Web page.pdf			
Exhibit 179 Request for Additional Information from Complainants	Exhibit 179 Request for Additional Information from Complainants.pdf			
Exhibit 180 Complaint Investigation-Stratford University	Exhibit 180 Complaint Investigation-Stratford University.pdf			
Exhibit 181 Sample Council Action of Complaints Investigation	Exhibit 181 Sample Council Action of Complaints Investigation.pdf			
Exhibit 182 Show-Cause Directives	Exhibit 182 Show-Cause Directives.pdf			
Exhibit 183 Investigation of Complaint against ACICS	Exhibit 183 Investigation of Complaint against ACICS.pdf			
Exhibit 19 Complaints Investigation Honrdros College	Exhibit 19 Complaints Investigation Hondros College.pdf			
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf			

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency must revise its complaint policy to include requirements for a timely review of complaints. The agency must also provide documentation of the review of complaints by the agency's decision-making body. It must provide complete documentation of the review of a complaint against itself.

## Analyst Remarks to Narrative:

The agency has written policies and procedures for receiving and processing complaints against its accredited institutions, as included in Section 2-3-700 of the agency's Accreditation Criteria (Exhibit 1). The agency's process provides instructions in answering the complaint, to include opportunity of an institution to respond and for the agency to take action. However, the policy does not define reasonable timelines for each step of the process to ensure timely review.

The agency described its complaint process and provided documentation of the review at each step, as well as the request for additional information and documentation both from complainant and institution. The process, as implemented, appears to include initial review by agency staff to determine if the complaint warrants investigation; request for additional information from the complainant, if necessary, and the institution; review by the At-Risk Institutions Group (ARIG) and next action, to include an unannounced visit; and review by the council after an unannounced visit. As discussed in Section 602.19(b), Department staff is concerned that agency staff is making decisions to conduct unannounced visits which appear to be in the stated purview of the agency's decision-making body. In addition, it is not clear that the council is informed, in full or summary, of all of the complaints received by the agency outside of the review of an unannounced visit report, as the decision whether to pursue a complaint appears to be solely at the staff level. Chapter 13 of the agency's Policies and Procedures (Exhibit 6) states that the Business Practices Committee of the council is provided a log and synopsis of all complaints. The meeting minutes provided (Exhibit 116) include a summary of year-to-date complaint activity, but do not appear to include a synopsis or discussion of the complaints.

The agency provided an example of the application of its complaint procedures for an institution (Exhibit 19), which demonstrates that the agency reviews complaints it receives against any institution that is related to the agency's standards or procedures. Another example (Exhibit 180) provides documentation that the agency applied its complaint procedures; however, it appears to be solely handled at the agency staff level and there is no indication that the complaint was ever reviewed by the council to determine compliance with the agency's standards.

The agency included the procedure to review a complaint against itself in the agency's Policies and Procedures Manual, (Exhibit 6, Chapter 12), which is also available to the public in an excerpt on the agency's website. The agency provided an example of the review of a complaint against itself (Exhibit 183), but it did not clearly demonstrate that it follows the agency's written procedures.

List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.23(d) Public Disclosure of Accreditation Status

### Narrative

ACICS has specific requirements detailing how an accredited institution may disclose its accreditation status. These requirements are found in the "Accreditation Criteria" (Exhibit 1, Appendix C, #5, p. 109 & Statement of Accreditation, p. 112). The specified language includes the requirement that the institution publish the name, address, and telephone number of ACICS in the public disclosure of its accreditation status. Also included in these guidelines, is the preclusion of initial applicants to make mention of their application status with ACICS (Exhibit 1, Appendix C, p. 109). In addition, ACICS requires an institution to publish a grievance policy that includes the name and address of ACICS (Exhibit 1, Appendix C, Catalog #23, page 110). An example of an institution's "Statement of Accreditation" and grievance policy that meets ACICS standards is provided (Exhibit 21, Institutional File-WVBC, pp. 133-186; Exhibit 64, Institutional File-DuBois, pp. 192-251).

Appendix C also outlines the Council's general expectations regarding advertising. The Accreditation Criteria (Exhibit 1, Section 2-2-110(c), p. 26) includes the instruction that an institution may not advertise any programs that have not been approved by the Council. The visit template for the publications section of reports also directs the on-site visiting team to verify accurate disclosure of an institution's accreditation status in its publications. A sample completed publications report is included that evidences the expected adherence to this policy (Exhibit 21, Institutional File-WVBC, Section 7.10, p. 34, Section 7.15, p. 34-35, Section 7.16, p.35). Institutions are expected to correct any forms of advertising that are out of compliance with these specific Council requirements.

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

## **Analyst Remarks to Narrative:**

Appendix C of the agency's Accreditation Criteria includes the agency's public disclosure and advertising of accredited status requirements, which are clear, comprehensive, and specific to the requirements of this section (Exhibit 1). More specifically, the agency requires the use of agency-developed language when publicly disclosing the institution's accredited status. The agency's documentation verifies its review for compliance with the public disclosure and advertising of accredited status requirements.

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.23(e) Public Correction of Inaccurate Information

#### Narrative

The Council expects institutions to demonstrate transparency and integrity regarding their disclosure of information to the public, state and federal authorities, and any other interested parties. Specifically, the Council requires institutions it accredits to be subject to ACICS review of their public disclosures concerning their accreditation status and Council actions. Appendix C (Exhibit 1, Accreditation Criteria, Appendix C, p. 109) provides Guidelines for Institutional Publications, including the specified format of the disclosure of Statement of Accreditation (Exhibit 1, Accreditation Criteria, Appendix C, p. 112). Institutions that fail to comply with the standard would be required to publicly correct misleading or incorrect information about the accreditation status of the institution or its programs.

All accredited institutions' publications as well as the institutional website are subject to review by on-site evaluation teams. During the on-site review, program specialists review evidence of compliance with any programmatic accreditors, and ACICS staff review the institution's website and other publications to check for disclosure of any adverse or negative actions from ACICS, other accrediting agencies, and/or federal and state entities (Exhibit 1, Section 2-3-233, p. 38). A thorough review of the institution's publications also takes place with regard to student achievement information. All student achievement information (i.e. retention, placement, and required licensure pass rates) must be current and accurate (Ibid., Sections 3-1-700, pp. 57-58; 3-1-703, p. 58; 3-1-704, p. 58; and Appendix C, p.109). ACICS staff also review the website to ensure compliance with required Department of Education disclosures. If the Council has evidence that an institution has released incorrect or misleading information concerning its accreditation status, reports of on-site reviews, or Council actions with respect to the institutions or its programs, the institution will be directed to correct such information and provide evidence of the public correction of the incorrect or misleading Information within a prescribed period of time (Exhibit 17, Institutional File ACCT, pp. 209 and 237-238; Exhibit 18, Institutional File Branford Hall-Branford, p. 151), for examples of contents of team reports citing an institution's inaccurate or misleading information regarding information about accreditation status of the institution, its programs or the disclosure of the Council's action. Both institutions made the necessary corrections to their websites and catalogs. Exhibit 17 (Institutional File-ACCT, pp. 313-330) and Exhibit 18 (Institutional File-Branford Hall, pp. 220-234) evidence the institution's correction of this misleading information.

In April of 2017, the Illinois Board of Higher Education notified ACICS that Northwestern Suburban College was offering unapproved bachelor's degree programs. A show-cause directive letter was issued on February 28, 2017 demanding the institution explain, correct, and resolve the misleading and incorrect information regarding the accreditation of these programs. (Exhibit 109, Institutional File-NWSC, pp. 6-8).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 109 Institutional File-NWSC	Exhibit 109 Institutional File-NWSC.pdf		
Exhibit 17 Institutional File-ACCT	Exhibit 17 Institutional File ACCT.pdf		
Exhibit 18 Institutional File-Branford Hall Branford	Exhibit 18 Institutional File Branford Hall - Branford.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

The agency must provide documentation to demonstrate implementation of its policy for the public correction of inaccurate information, as required by this section.

## Analyst Remarks to Narrative:

Section 3-1-703 of the agency's Accreditation Criteria includes the requirements for the public correction of incorrect or misleading information an accredited institution releases about its accredited status, the contents of reports of on-site reviews or the agency's accrediting actions with respect to the institution (Exhibit 1).

The agency provided institutional examples in this section, but it does not appear that they are examples that demonstrate compliance with this section. Exhibit 17 includes the notation of incorrect credit conversion. Exhibit 18 includes catalog disclosure issues. Exhibit 109 includes the offering of an unapproved program. However, none of these examples demonstrate that the agency requires the public correction of incorrect or misleading information regarding accreditation status of the institution; the contents of reports of on-site reviews; or the agency's accrediting actions with respect to the institution.

### List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.23(f) Proviso for additional procedures

### Narrative

The Accreditation Criteria (Exhibit 1, Section 2-1-805, p. 21) authorizes the Council to conduct unannounced visits at its discretion. This visit may be triggered by adverse information that has been received from any source or when the institution's operations have been called into question, as was the case for the institution in Exhibits 19, 105, and 109. The procedures for such visits are described in the Accreditation Criteria (Ibid., Appendix B, pp. 107-108) and in the Policies and Procedures Manual (Exhibit 6, Chapter 50).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

### **Analyst Worksheet - Narrative**

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### **Analyst Remarks to Narrative:**

No Remarks Provided

#### List of Documents Uploaded by Analyst - Narrative

#### Criteria: 602.24(a) Branch Campus

#### Narrative

ACICS has written policies and procedures that outline the requirements to establish a branch campus. A branch campus must be approved by the Council before advertising, recruiting, and enrollment may take place, as it is a substantive change (Exhibit 1, Accreditation Criteria, Sections 1-3-100, p. 5; 2-2-101(k), p. 13; 2-2-104(a), p. 24). An institution that intends to initiate a branch campus must complete and submit a Branch Campus Application (Exhibit 141, Substantive Change Application Templates, pp.1-9). The procedures governing the review, approval, and monitoring of branch campuses are outlined in Chapter 3 of ACICS' Policies and Procedures Manual (Exhibit 6).

The Branch Campus Application, which has two Parts, includes a number of required documents and exhibits. In Part I, the institution must provide, for the new campus, a copy of the state authorization to operate the branch; a complete description of the programs of study to be offered at the branch campus; proposed organizational chart; copy of the signed lease or purchase papers for the facility; and proposed inventories of instructional equipment and library resources. Previously, the application included a Plan to Expand the Institution's Scope of Accreditation form which included a detailed narrative regarding the institution's administrative and financial capacity to operate branch campuses. This component of the application has now been incorporated into the online application in order that the institution may provide, at the initiation of the application, a business plan that would include the projected revenues and expenditures and cash flow at the branch campus (Exhibit 141, Substantive Change Application Templates, p.5, Q.8).

The Branch Campus Application is reviewed by ACICS staff to determine that it is complete and that the institution has demonstrated that it has sufficient administrative, financial, physical, and academic resources to support the new campus. The institution's request to initiate a branch campus is then reviewed by the Council or the Executive Committee, if the Council is not in session, for consideration. If the Executive Committee approves the request, the branch campus is included within the institution's scope of accreditation (Exhibit 186, EDIC Branch Part I Application).

An institution under a show cause directive, or a negative action, will not receive approval for the initiation of a branch campus (Exhibit 1, Accreditation Criteria, Section 2-2-104(a)). However, an institution which is under review by the Financial Review Committee, as a function of showing either a net loss or a negative net worth on its most recent financial report, is placed on placement and/or retention student achievement review, or is under a deferral action must request special permission to initiate a new branch campus. This request, called a waiver, is submitted to the Business Practices Committee standing committee of the Council and is reviewed at the Council meeting. A waiver request may be granted if the institution has demonstrated satisfactory progress in addressing the concerns and has established its ability to sustain a new branch campus. There are no examples of the Business Practices Committee's consideration of such a waiver request from an institution within the last two years.

Additionally, a Quality Assurance Monitoring: New Branch visit is conducted following Council approval and within the first six months following the established initial start date of classes at the new branch campus (Exhibit 63, QAM Visit Report Templates, pp. 100-113; Exhibit 186, EDIC Branch Part I Application, p. 115). The purpose of the visit is to verify the accuracy of the information reported in the application and to review the operation of the new campus. The campus is expected to be in compliance with all applicable criteria and demonstrate its ability to support and meet all educational, financial and operational expectations.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 141 Substantive Change Application Templates	Exhibit 141 Substantive Change Application Templates.pdf		
Exhibit 186 EDIC Branch Part I Application	Exhibit 186 EDIC Branch Part I Application.pdf		
Exhibit 63 QAM Visit Report Templates	Exhibit 63 QAM Visit Report Templates.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

### **Analyst Remarks to Narrative:**

Sections 2-2-104 and 2-2-110 of the agency's Accreditation Criteria include the requirements that an institution submit an application that includes the information required by this section as well as submit to a site visit within six months of the establishment of the branch campus (Exhibit 1). The agency provided documentation of the review of the initiation of a branch campus (Exhibit 186).

## List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(b) Change in Ownership

#### Narrative

The ACICS Criteria set forth specific notification and review policies and procedures related to a change of ownership or control process (Exhibit 1, Title II, Chapter 2, 2-2-401 and 2-2-403, pp. 30-32). Institutions undergoing a change of ownership or control must submit Part I of the Change in Ownership/Control Application (Exhibit 184, Redstone CO Application Review, pp. 1-9) 30 days prior to the transfer of the ownership or change in control occurs. Part II of the Change of Ownership/Control Application (Exhibit 184, Redstone CO Application Review, pp. 10-131) must be submitted within five business days after the transaction.

The following procedures govern the Council's review of change of ownership/control:

- (a) Automatic Discontinuation. Any change of ownership or control results in the immediate and automatic discontinuation of an institution's grant of accreditation. The grant of accreditation may be reinstated only upon application to and approval by the Council. Because the discontinuation results without action or prior approval on the part of the Council, this change in status does not constitute withdrawal of accreditation and is not a negative action.
- (b) Reinstatement. After the grant of accreditation has been discontinued, it may be reinstated at the discretion of the Council within 30 days of the change in ownership/control. Those terms and conditions of the reinstatement process are set forth in policy statements issued to the field and in the change of ownership/control application document that institutions must file to initiate the reinstatement process. The Council will conduct a quality assurance monitoring visit (Exhibit 63, QAM Visit Report Templates, pp. 120-127) within six months of the effective date of a change of ownership/control. The new owner(s) and the chief on-site administrator may be required to attend an ACICS Accreditation Workshop within one year of the change of ownership or attend an Accreditation Workshop prior to the quality assurance monitoring visit.
- (c) Effect. Until the Council approves a reinstatement of the grant of accreditation, the accreditation of the institution remains in abeyance. If approval of the application for reinstatement is withheld, the matter will be treated procedurally as a deferral or a denial, as the case may be.

The change of ownership/control process involves a staff review of Part I (current and proposed new owner background information including any history of the new ownership in negative actions) and Part II (proposed new owner financial information). Upon a determination of completeness and accuracy of the application information, the applications are forwarded to the Executive Committee for a review and decision (Exhibit 165, Executive Committee Meeting Minutes). The Executive Committee meets monthly, the effective date of the Council decision of the change of ownership is made within 30 days of the change in ownership (Exhibit 60, Sub-Change Applications and Approval Letters, p. 1001). The Department, School Participation Team in the Office of Federal Student Aid, and state agencies are notified of the Council's decision regarding the change of ownership, See id.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 165 Executive Committee Meeting Minutes-Dec-June	Exhibit 165 Executive Committee Meeting Minutes-Dec-June.pdf		
Exhibit 184 Redstone CO Application Review	Exhibit 184 Redstone CO Application Review.pdf		
Exhibit 60 Substantive Applications and Approval Letters	Exhibit 60 Substantive Change Applications and Approval Letters.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

### **Analyst Remarks to Narrative:**

Section 2-2-403 of the agency's Accreditation Criteria includes the requirement that an institution that has undergone a change of ownership that resulted in a change of control must host a site visit within six months of the change (Exhibit 1). The agency provided documentation of the review of a change of ownership (Exhibit 184).

### List of Documents Uploaded by Analyst - Narrative

## Criteria: 602.24(c)(1) Teach-out Plan Triggers

#### Narrative

ACICS standards require institutions provide a teach-out plan upon the occurrence of any of the following events, if: (1) the secretary issues an emergency action or action to limit, suspend or terminate an institution participating in any title IV, HEA program, (2) ACICS denies or withdraws an institution; (3) the institution notifies ACICS that it is ceasing operations; and (4) state has notified ACICS that an institution's license has been or will be revoked (Exhibit 1, , Section 2-2-303, pp.28-29).

Additionally, ACICS may require a teach-out agreement at the Council's discretion, and more specifically when a show-cause directive has been ordered. (Ibid., Section 2-3-230, p. 38). Exhibit 6, Policies and Procedures, Chapters 6 & 7, has the policies and procedures governing these processes to ensure consistent and systematic implementation. ACICS has evidence of requesting teach out plans from a number of campuses, systematically when a Show-Cause Directive has been issued, and when it has received information from the Department concerning financial monitoring actions (Exhibit 104, Financial Show-Cause Actions; Exhibit 182, Show-Cause Directives-External; and Exhibit 101, Request for Teach-out Plans). Teach-out plans are requested when ACICS has been notified of the institution's closure with debarment procedures initiated and executed if the teach out has not been completed appropriately (Exhibit 106, Debarment Action Letters).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 101 Request for Teach-Out Plans	Exhibit 101 Request for Teach Out Plans.pdf		
Exhibit 104 Financial Show-Cause Actions	Exhibit 104 Financial Show-Cause Actions.pdf		
Exhibit 106 Sample Debarment Action Letters	Exhibit 106 Sample Debarment Action Letters.pdf		
Exhibit 182 Show-Cause Directives	Exhibit 182 Show-Cause Directives.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

#### **Analyst Remarks to Narrative:**

Section 2-2-303 of the agency's Accreditation Criteria includes its teach-out plan requirements and all the specific events to trigger the submission of a teach-out plan as required by this section (Exhibit 1). The agency provided documentation that it required the submission of a teach-out plan upon the occurrence of such events (Exhibits 101, 104 and 182).

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(c)(2) Treatment of Students

#### Narrative

An institution that announces its intent to close must provide a teach-out plan as part of the Campus Closure Application, which can be facilitated in-house or with other institutions (Exhibit 192, Campus Closure Application, p.9). Even in the case of precipitous closure, the Council will advise the institution of the need to provide a teach-out to students matriculating at the time of closure (Exhibit 193, MBTI Acknowledgement of Campus Closure). Teach-out plans are evaluated as part of the Campus Closure Application and must demonstrate that the institution is providing for the equitable treatment of students. This includes providing information on the distances between the closing institution and any other institutions where the teach-out can occur, if students will be responsible for any other charges at the teach-out institution, the credential that would be earned, the provision of transportation to facilitate commute, and the development of individualized completion plans for each student, etc. (Exhibit 64, Institutional File-Dubois, pp.482-491; Exhibit 194, Prince Institute Teach Out).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 192 Campus Closure Application	Exhibit 192 Campus Closure Application.pdf		
Exhibit 193 MBTI Acknowledgment of Campus Closure	Exhibit 193 MBTI - Acknowledgement of Campus Closure.pdf		
Exhibit 194 Prince Institute Teach Out	Exhibit 194 Prince Institute Teach Out.pdf		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide information and documentation to demonstrate that has policies and procedures in place to evaluate a teach-out plan to ensure it provides for the equitable treatment of students under criteria established by the agency, specifies additional charges, if any, and provides for notification to the students of any additional charges, for all events noted in Section 602.24(c)(1).

#### **Analyst Remarks to Narrative:**

The agency does not appear to have a policy to address this section. To address this section, the agency provided its "Campus Closure Application," but that application is only applicable to an institution that has made the decision to close a campus (Exhibit 192, page 1). Department staff notes that Section 2-2-303 of the agency's Accreditation Criteria (Exhibit 1) includes the review of additional charges in teach-out agreements, but does not address any such review for teach-out plans. Therefore, the agency has not demonstrated that it has a mechanism in place to evaluate a teach-out plan to ensure it provides for the equitable treatment of students under criteria established by the agency for all events noted in Section 602.24(c)(1).

As documentation, the agency provided two examples. One example (Exhibit 64, pages 482-491) includes a council action letter to approve the teach-out agreements provided and the campus closure application. However, the teach-out agreements nor other documentation provided do not clearly specify any additional charges or that students were notified of any additional charges for the teach-out. The other example (Exhibit 194) includes a template and completed notice to a student of an institution initiating a controlled closing; however it does not include any information or documentation that the agency evaluated the teach-out plan. Therefore, the agency has not provided documentation that it evaluates a teach-out plan to ensure it provides for the equitable treatment of students under criteria established by the agency, specifies additional charges, if any, and provides for notification to the students of any additional charges.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(c)(3) Notifying Other Agencies

#### Narrative

If the Council approves a teach-out plan that includes a program that is accredited by another recognized accrediting agency, that agency will be copied on the letter approving the teach-out plan. For example, Ms. Florence Tate of ABHES was copied, as the programmatic accreditor of the Medical Assistant programs at the campuses, on the final closure and teach-out of students at the Rochester and Waite Park locations of Minnesota School of Business (Exhibit 195, Acknowledgement of MSB Branch closures). Providing for the interests of students even in extreme circumstances is a fundamental basis for the Council's oversight of its institutions. Even in instances when a teach-out plan has not been received or approved, the Council will share information with programmatic accreditors to facilitate the transition and protection of students affected by the unplanned closure of an institution (Exhibit 196, Missouri College Teach-Out Collaboration\_ACOTE).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 195 Acknowledgment of MSB Branch Closures	Exhibit 195 Acknowledgement of MSB Branch Campuses.pdf		
Exhibit 196 Missouri College Teach Out Collaboration-ACOTE	Exhibit 196 Missouri College Teach Out Collaboration_ACOTE.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide information and documentation that it has policies and procedures to require that if ACICS approves a teach-out plan that includes a program that is accredited by another recognized accrediting agency, ACICS will notify that accrediting agency of approval of the teach-out plan, as required by this section.

#### **Analyst Remarks to Narrative:**

The agency does not appear to have a policy that states or a procedure that requires that if ACICS approves a teach-out plan that includes a program that is accredited by another recognized accrediting agency, ACICS will notify that accrediting agency of approval of the teach-out plan, as required by this section. The agency provided notification of another recognized accrediting agency of ACICS approval of a teach-out plan (Exhibit 195).

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(c)(4) Requiring Teach-out Agreements

#### Narrative

As outlined in Section 2-2-303(f) of the Accreditation Criteria, a teach-out agreement with another institution may be included as part of the teach-out agreement at the Council's discretion (Exhibit 1, p.29). Further, should there by a teach-out agreement with another accredited institution, the signed agreement must be submitted to the Council for review and approval prior to implementation. This agreement must demonstrate that students will receive all remaining instruction not yet provided by the closing institution at no additional charge; that the institution providing the teach-out is geographically close to the closing institution, or has the ability to provide students with reasonable access to its programs and services; and that it has the necessary experience, resources, and support services to provide an educational program of acceptable quality that is reasonably similar in content, structure, and scheduling to the program provided by the closing institution (Exhibit 1, Section 2-2-303(f); Exhibit 6, Policies and Procedures, Chapter 6). In all cases, the teach-out agreements are reviewed prior to approval (Exhibit 64, Institutional Files-Dubois, p. 482; Exhibit 185, Sample Teach-out Agreements and Approvals; Exhibit 197, MSB Richfield BSN Teach-Out Agreement Approval).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 185 Sample Teach-out Agreements and Approvals	Exhibit 185 Sample Teach-out Agreements and Approvals.pdf		
Exhibit 197 MSB Richfield BSN Teach-Out Agreement Approval	Exhibit 197 MSB Richfield BSN Techh-Out Agreement Approval.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

#### **Analyst Remarks to Narrative:**

Section 2-2-303(f) of the agency's Accreditation Criteria states that it may require an institution it accredits to enter into a teach-out agreement as part of its teach-out plan (Exhibit 1). The agency provided documentation that it reviewed and approved teach-out agreements (Exhibits 185 and 197). However, as noted in Section 602.24(c)(5), the agency must provide documentation to demonstrate that its review and approval of teach-out agreements includes all elements required by that section.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(c)(5) Approving Teach-out Agreements

#### Narrative

The Campus Closure Process, as outlined in the Policies and Procedures Manual describes the Council's expectation for an institution that has entered into a teach-out agreement with another institution as part of its closure plans (Exhibit 6, Chapter 6). ACICS policy requires an institution planning to conduct a teach-out to submit the plan for agency approval. When a teach-out agreement with another institution is either required by the Council or initiated voluntarily by the closing institution, the Council will review the proposed teach-out agreement. Approval will be granted only if the cooperating teach-out institution is one which is accredited by an agency recognized by the U. S. Department of Education and the cooperating teach-out institution must be able to provide equitable treatment of students.

Staff members assess the capability and capacity of the teach-out institution to serve the students affected by the proposed teach-out plan based on information provided in the teach-out agreement of the ACICS-accredited institution. The educational program offered at the teach-out institution must demonstrate acceptable quality and be reasonably similar in content, structure, and scheduling. The teach-out institution must also demonstrate that it can provide students convenient access to the programs and services. The institution ceasing operations must demonstrate to ACICS that appropriate provisions have been made for the students' transportation.

The teach-out agreement is evaluated by staff to determine if it addresses financial issues affecting students and how students will be notified. Elements of the evaluation of a proposed teach-out agreement include completion of teach-out form, identification of institution and its location, accredited status of institution, student accessibility to institution, similarity of program offerings, and appropriate notification to students. Exhibit 185 reflects sample Teach-Out Agreements and their approvals.

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 185 Sample Teach-out Agreements and Approvals	Exhibit 185 Sample Teach-out Agreements and Approvals.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide information and documentation to demonstrate that its review and approval of teach-out agreements includes all elements required by this section and meet the agency's requirements.

#### **Analyst Remarks to Narrative:**

Section 2-2-303 of the agency's Accreditation Criteria states that an institution must submit a teach-out agreement to the agency for review and approval prior to implementation (Exhibit 1). Although the agency's review addresses parts of the requirements of this section, it does not include all requirements. Specifically, the agency's written policy does not include the requirement that the agency only approve the teach-out agreement if the agreement is between institutions that are accredited or preaccredited by a nationally recognized accrediting agency. In addition, the agency does not appear to review the teach-out agreement to ensure that the teach-out institution has the necessary experience, resources, and support services to remain stable, carry out its mission, and meet all obligations to existing students.

The agency provided examples of the review and approval of teach-out agreements (Exhibit 185). However, Exhibit 64 appears to include a teach-out agreement that does not meet the agency's established criteria. Specifically, pages 483-486 include teach-out agreements that state "There is no unearned tuition for DuBois Business College students; therefore DuBois Business College students will be required to apply for loans and/or financial aid, or to privately pay tuition/fees to [teach-out institution] for the remaining portion of their program." In Section 2-2-303 of the agency's Accreditation Criteria, the agency states that a teach-out agreement must demonstrate that "students will be provided, without additional charge, all of the instruction promised but not yet provided by the closing institution." It does not appear that these agreements meet this agency requirement. Therefore, it is not clear that the agency consistently reviews and approves teach-out agreements in accordance with its policies.

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(d) Closed Institution

#### Narrative

ACICS collaborates with the U.S. Department of Education and appropriate state agencies to assist students in finding suitable alternatives when an institution closes without a teach-out plan or agreement, as recorded in Accreditation Criteria, Section 2-2-303 (Exhibit 1, Accreditation Criteria, p.29). Exhibit 187, Communication & Conference Calls with Federal and State Agencies, demonstrates ACICS's communication and collaboration with the Department of Education and state agencies regarding the closure of Medtech College and Career Point College. Exhibit 188, Screenshot of Webpages for ITT Students, evidences the publication made available by ACICS to students affected by the closure of ITT Technical Institute (ITT) and Exhibit 189, List of ITT Comparable Programs, is an extensive spreadsheet provided by ITT to ACICS of comparable programs that its students used as possible transfers.

In accordance with Debarment Criteria (Exhibit 1, Section 2-3-900, p. 44), the Council initiates debarment proceedings against the owner or manager of the institution if the institution closed without providing a teach-out or refunds. Exhibit 106, Debarment Action Letter, presents a sample of intent to bar notices and final debarment action letters for individuals involved in the precipitous closure of three institutions.

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 106 Sample Debarment Action Letters	Exhibit 106 Sample Debarment Action Letters.pdf		
Exhibit 187 Communication & conference calls w/state agencies over campus closures	Exhibit 187 Communication and Conference Calls with Federal and State Agencies.pdf		
Exhibit 188 Screenshot of Webpages with information for ITT students	Exhibit 188 Screenshot of Webpages for ITT Students.pdf		
Exhibit 189 List of ITT Comparable Programs at Potential Transfer or Teach-out Institutions	Exhibit 189 List of ITT Comparable Programs.xls		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

### **Analyst Remarks to Narrative:**

Section 2-2-303 of the agency's Accreditation Criteria states that the agency will work to the extent feasible with the Department and appropriate State agencies to assist students affected by the closure of an institution without a teach-out plan or agreement in place (Exhibit 1). The agency provided documentation to demonstrate such collaboration (Exhibits 187, 188, 189 and 196).

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(e) Transfer of Credit Policies

#### Narrative

The Transfer of Credit standards as set forth in the Accreditation Criteria (Exhibit 1, 3-1-413, p. 50; Appendix C, Catalog, 10 and 11, p. 109) require the institution to make public its policies on transfer of credit and also include a statement of criteria or institutional policies by which a determination is made on accepting credits from other institutions. During an evaluation visit, the team verifies that the institution has publicly disclosed its transfer of credit policy in the academic catalog. A list of any institutions with which the institution has established articulation agreements must also be disclosed.

To further confirm that institutions are compliant with the standard, the team specialists review student files, including those of transfer students, to determine if the institution is following its stated policy (Exhibit 18, Institutional File-Branford Hall, p.17; Exhibit 64, Institutional File-DuBois, pp. 245-246, 294, 311-312, 353, 370, 405, 410-411; Exhibit 17, Institutional File-ACCT, pp. 297 and 337). Team specialists also review the Enrollment Agreement, Student Handbook, articulation agreements, catalog, and website, as applicable, to confirm compliance. Questions 4.20-4.23 of the Relations with Students section of the Visit Report specifically address the institution's compliance with the transfer of credit standard (Exhibit 62, Team Report Template, pp.16-17). On-site evaluators receive training on the evaluation process and included within this training are all areas of student relations including ensuring that the institution has a transfer of credit policy that is published, appropriate, and implemented as written (Exhibit 69, Visit Evaluation Policies and Procedures).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 17 Institutional File-ACCT	Exhibit 17 Institutional File ACCT.pdf		
Exhibit 18 Institutional File-Branford Hall Branford	Exhibit 18 Institutional File Branford Hall - Branford.pdf		
Exhibit 62 Team Report Templates	Exhibit 62 Team Report Templates.pdf		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		
Exhibit 69 Visit Evaluation Procedures and Guidelines	Exhibit 69 Visit Evaluation Procedures and Guidelines.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

#### Analyst Remarks to Narrative:

Section 3-1-413 of the agency's Accreditation Criteria include the agency's transfer of credit policy that requires public disclosure, the criteria established by the institution regarding transfer of credit earned at another institution, and a list of institutions with which the institution has established an articulation agreement (Exhibit 1). The agency provided documentation to demonstrate that it evaluates its institutions regarding the public disclosure of its transfer of credit policy (Exhibit 64).

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(f)(2) Credit Hour Review

#### Narrative

As outlined in Sections 2-2-501 of the Accreditation Criteria (Exhibit 1, p. 32), ACICS evaluates the policies and procedures for determining credit hour assignments for purposes of awarding federal financial aid for institutions under consideration for an initial grant of accreditation or renewal of accreditation. As part of its review, the evaluation team has been directed to evaluate the reliability and accuracy of the institution's assignment of credit hours, to courses and programs, as recorded in the Academic Credit Analyses, submitted as part of the renewal of accreditation or initial grant applications. This review is included in the team's report, and the evaluation includes the recording of the evidence available to support the institution's consistent application of the definition (Exhibit 21, Institutional File-WVBC, pp. 52-63; Exhibit 64, Institutional File-DuBois, pp. 56-67). The team is also directed to document evidence that out-of-class work required as part of this definition has been evaluated in credit bearing programs. On-site evaluators also receive training on the evaluation process and included within this training are all academic areas to ensure that the institution has appropriate policies and procedures for determining credit hour assignments (Exhibit 69, Visit Evaluation Procedures and Guidelines, p. 26).

Further, the Council also provides institutions with the ability to complete a clock-to-credit hour conversion application, which will allow the institution to "add" additional out-of-class hours to the total hours reported for Title IV funding. The clock-to-credit hour conversion allows the institution to report out-of-class hours (limited to 25% of hours per credit) for the purpose of reporting this program to Title IV for funding purposes. The funding equation of total hours / 25 (quarter) or 37.5 (semester) will include the out-of-class hours and requires the accreditor's approval letter as evidence that the total hours are compliant with the Departments regulations (Exhibit 190, Clock to Credit Hour Conversion Application and Approval Letter).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 190 Clock-to-Credit Hour Conversion Application and Approval Letter	Exhibit 190 Clock to Credit Hour Co nversion Application and Approval Letter.PDF		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		
Exhibit 69 Visit Evaluation Procedures and Guidelines	Exhibit 69 Visit Evaluation Procedures and Guidelines.pdf		

#### Analyst Worksheet - Narrative

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide information and documentation that it has a policy to conduct an effective review and evaluation of the reliability and accuracy of the assignment of credit hours for all of its accredited or applicant institutions.

#### Analyst Remarks to Narrative:

Section 2-2-501 of the agency's Accreditation Criteria states the requirements for the agency to review an institution's policies and procedures for determining credit hour assignments for purposes of awarding federal financial aid (Exhibit 1). However, this section requires the agency to conduct an effective review and evaluation of the reliability and accuracy of the assignment of credit hours for all of its accredited or applicant institutions, and is not limited to a review for Title IV purposes.

The agency's policy includes the federal definition of a credit hour, as well as clock-to-credit hour conversion formulas for purposes of awarding federal financial aid. As part of the self-study, the agency requires an institution to submit an "Academic Credit Analysis" for each program. The agency's Visit Evaluation Procedures and Guidelines (Exhibit 69) provides site visitors with the guidance on what to evaluate in self-studies and on-site regarding credit hour assignments "for Purposes of Credit awarded for Financial Aid" (page 26). The agency provided examples of its review of credit hour assignments (Exhibits 21 and 64).

## List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(f)(3) Actions of Deficiences

#### Narrative

As detailed in response to §602.24(f)(1)(2), institutions' compliance with the credit hour definition for financial aid purposes are evaluated as part of the onsite review process. In addition to a review of written policies and procedures, evaluation teams also consider the evidence on file that documents consistent application and appropriate interpretation of the definition. In those instances where the team is unable to confirm compliance, a finding requiring additional information is given and the campus is directed to respond. The Council will take an appropriate action based on its review of the materials provided by the campus in its response (Exhibit 191: Ridley Lowell Danbury and New London Review).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 191 Ridley Lowell Danbury and New London Review	Exhibit 191 Ridley Lowell Danbury and New London Review.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

### **Analyst Remarks to Narrative:**

The agency states that it reviews the requirements of Section 2-2-501 of the agency's Accreditation Criteria in conjunction with a review for initial or renewal accreditation which results in an site team report (Exhibit 1). The agency addresses any deficiencies related to the assignment of credit hour through its regular review process. The agency provided examples of its review of credit hour assignments on-site and action taken by the agency to address any deficiencies that it identifies (Exhibits 191 and 64).

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.24(f)(4) Credit Hour Notifications

#### Narrative

To date, the Council has not identified an institution with systemic non-compliance with this requirement and as such, had to forward any communication to the Secretary to the same.

### Document(s) for this Section

No Files uploaded

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

### Staff Determination

The agency must provide information and documentation to demonstrate that it has a policy to notify the Secretary if the agency finds systemic noncompliance with the agency's policies or significant noncompliance regarding one or more programs at the institution related to credit hour assignment.

### **Analyst Remarks to Narrative:**

The agency does not appear to have a policy that it will notify the Secretary when it identifies systematic non-compliance or significant noncompliance regarding one or more programs in the awarding of credit at an institution. The agency stated that it has not identified an institution with systemic non-compliance and therefore could not provide documentation of such notification.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.25(a-e) Basic Due Process Requirements

#### **Narrative**

ACICS ties all its actions to its published standards and all institutions receive particularized notification of the deficiencies that relate to the standards, as well as the opportunity to respond to those deficiencies. The Accreditation Criteria contains all of the formal standards by which an institution is reviewed by the Council (Exhibit 1). The Criteria define the expectations for adherence to these standards: "When an institution ... receives a grant of accreditation, it is committing itself to operate in accordance with the standards and policies... throughout the term of the grant" (Ibid., Title II, Chapter 1, p. 17).

All evaluations conducted by ACICS are provided to the institution in writing; and if there are any deficiencies, the institution is afforded the opportunity and required to respond. ACICS has various methods of reviewing an institution's compliance with its standards, such as on-site evaluations (routine and unannounced), student achievement and financial reporting, external negative or complaint information. In all of these cases, due process is provided to the institution.

Following an on-site evaluation, a copy of the evaluation report is sent to the institution with a cover letter inviting a response to the report in writing within a specified time frame determined by ACICS (Exhibit 1, Section 2-1-601, p. 20; Exhibit 21, Institutional File-WVBC, pp. 360-361; Exhibit 22, Institutional File-CENSA, pp. 135-137; and Exhibit 64, Institutional File-DuBois, p. 229-230).

For student achievement reviews and financial reviews, the institutions provide annual (or more frequent, if required) reports that are reviewed by the Council. If any institution or one if its campuses or programs is deficient with the Accreditation Criteria based on that review, the Council will issue a formal letter and require a written response and/or subsequent reports, as specified in written policies (Exhibit 1, Section 2-1-808 and 2-1-809, p. 22; Exhibit 136, SA Action Samples; Exhibit 104, Financial Show-Cause Directives; Exhibit 103, Council Action Letters QFR/FIP).

For information that is received through a complaint or third-party external sources which is determined to warrant an investigation, ACICS will notify the institution in writing of the information (either prior to, during, or following the investigation, depending on the investigative tactics) and require a response from the institution in writing by a specified date, in accordance with written policies as previously outlined in §602.23(c)(1)(2)(3) (Exhibit 19, Institutional File-Hondros; Exhibit 182, Show-Cause Directives).

The Council has published policies that outline the actions that can be taken following an institutional review (Exhibit 1, Title II, Chapter 3, p. 37-42). The Council also has published standards, which clearly specify the time frames for resolving accreditation issues before the Council, ranging from 12 to 24 months depending on the credential level offered by the institution (See id).

After review of the institution's response, the Council will take an action in accordance with the policies explained above. If the Council determines that additional information is needed to determine compliance, the Council will defer the action and require the campus to provide additional information. The written letter will specifically reference the sections of the Accreditation Criteria that are still in question and require a written response to each of these areas (Exhibit 145, Multi-Level Council Actions, Sample Deferral Letter, pp. 1-2). If the Council determines that the institution is out of compliance with one or more Accreditation Criteria standards, but has the ability to come into compliance within the specified time frames, the Council will issue a compliance warning or show-cause directive. The written letter will list the specific sections for which the Council has determined that the campus is out of compliance and will require a written response to each of these areas (Exhibit 145, Multi-Level Council Actions, Sample Compliance Warning Letters, pp. 3-5; Exhibit 104, Financial Show-Cause Directives; Exhibit 182, Show-Cause Directives External).

The Council will not take an adverse action on an institutional review, in any case, before an institution has received written specifications of any deficiencies and been afforded the opportunity to respond in writing or in person (hearing) before the Council (Exhibit 1, Accreditation Criteria, Section 2-3-403 and 2-3-500, p. 40). However, if following review of a written institutional response (or a hearing), the Council determines that an institution is out of compliance and is unable to come into compliance within the specified time frames, the Council will take an adverse action (i.e. denial of an application or withdrawal by suspension). The written letter will list the areas of non-compliance that were not sufficiently resolved and the letter will provide the basis for that action (Exhibit 21, Institutional File-WVBC, pp. 504-515; Exhibit 22, Institutional File-CENSA, pp. 135-137; and Exhibit 64, Institutional File-DuBois, p. 469-475).

Further, in cases of an adverse action through the denial of an application for renewal of accreditation or a withdrawal by suspension, the institution is afforded the opportunity to appeal this decision to the Review Board of Appeals and must indicate their intent to appeal within 10 business days (Exhibit 1, Section 2-3-604, p. 42). If the Review Board of Appeals affirms the Council's decision, that is considered a final adverse action and the institution receives written correspondence to that effect (Exhibit 22, Institutional File-CENSA, p.144).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 103 Council Action Letters for QFR and FIP	Exhibit 103 Council Action Letters for QFR and FIP.pdf		
Exhibit 104 Financial Show-Cause Actions	Exhibit 104 Financial Show-Cause Actions.pdf		
Exhibit 136 SA Actions	Exhibit 136 SA Actions.pdf		
Exhibit 145 Multi-Level Council Actions	Exhibit 145 Multi Level Council Actions.pdf		
Exhibit 182 Show-Cause Directives	Exhibit 182 Show-Cause Directives.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 22 Institutional Flle-CENSA	Exhibit 22 Institutional File CENSA.pdf		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide additional information and documentation concerning the implementation of the procedures it uses throughout the accrediting process to satisfy due process.

### **Analyst Remarks to Narrative:**

Overall, the agency's written policies and procedures are clear and provide adequate guidance concerning the agency's expectations. The agency's standards and requirements for accreditation are specifically written and published within its Accreditation Criteria and are available on its website.

The agency's procedures also provide adequate timeframes, in accordance with commonly accepted practices, to ensure that institutions have sufficient time to respond to the agency's request for information. Prior to taking any adverse action, the agency provides an institution an opportunity to respond. The agency also notifies the institution in writing of any adverse accrediting action or an action to place the institution on show cause or compliance warning, and describes the basis of such decision.

The agency provided documentation (in this section and throughout the petition) to demonstrate implementation of its procedures it uses throughout the accrediting process to satisfy due process. However, the Department recently received correspondence from an institution which raises questions about the agency's implementation of its due process procedures. (AG Exhibit #2 - Larkin University) Therefore, the agency must provide additional information and documentation on the accreditation process for this institution.

### List of Documents Uploaded by Analyst - Narrative

Armstrong to Ingram re Larkin University 3-9-18.pdf

### Criteria: 602.25(f) Specific Appeals Requirements

#### Narrative

An institution's access to the protections of due process are specified in the Accreditation Criteria and described below (Exhibit 1, Section 2-3-600, p. 41). Upon reaching a decision to take an adverse action against an institution, the Council notifies the institution in writing of the specific areas of non-compliance with the Accreditation Criteria that had not been met by the institution, the basis for its decision as well as the rights, time frames, and process to appeal this action (Exhibit 21, Institutional File-WVBC, pp. 450-461; Exhibit 64, Institutional File-DuBois, pp. 409-415; Exhibit 22, Institutional File-CENSA, pp. 135-137). In the event the institution decides to appeal the adverse decision, official written correspondence by the Council enumerates the process, resources, and time frames to which the institution has access (Exhibit 21, Institutional File-WVBC, pp. 462-466; Exhibit 22, Institutional File-CENSA, pp. 138-142).

The process for appealing withdrawal of accreditation by suspension or denial of accreditation application actions occurs through the Review Board of Appeals (Exhibit 1, Section 2-3-600, page 41). The request for a hearing in front of the Review Board must be made in writing within 10 business days of receipt of the notice of the adverse action or it will be final (Exhibit 1, Section 2-3-604, p. 42). As a matter of policy, the Review Board membership excludes current Council members and commissioners who have served on the Council within one year prior to their appointment to the Review Board (Exhibit 1, Section 2-3-602, p. 41 and Appendix A, Article VII, pp. 104-105). ACICS recruits, trains, and enlists individuals with substantial professional and accreditation decision-making experience, from the public as well as member institutions, to serve as Review Board members (Exhibit 34, Review Board Roster w/Sample Resumes).

All members of the Review Board are explicitly subject to ACICS's Standards of Ethical Responsibilities referenced in the Policies and Procedures Manual (Exhibit 6, p. 82). Review Board members are required to commit in writing to the ethical standards of the Review Board prior to participating in a Review Board hearing (Exhibit 67, CSI Review Board, pp. 475-482).

The institution has an explicit right to be represented by counsel (Exhibit 1, Section 2-3-605, p. 42), and the chair of the Review Board hearing panel is required to structure the hearing "as informal as may be reasonable and appropriate," including allowing for a presentation by legal counsel representing the institution (Ibid.).

For denial or withdraw by suspension actions taken by the Council, which have been appealed by the institution, the Review Board is granted explicit authority to affirm, amend, reverse, or remand actions of the Council (Exhibit 1, Section, 2-3-603, p. 41).

A decision by the Review Board to uphold a Council decision is effective immediately (Exhibit 1, Section 2-3-603, p. 41); a decision to amend, reverse or remand the Council decision is referred to the Council for implementation (Ibid.). The Review Board requirements specify that the decision of its hearing panel must identify for the Council specific issues that led to its decision. The Review Board hearing panel is required to issue in writing "the decision with a statement of its reasons and recommendations" to the Council (Exhibit 1, Section 2-3-606, pp. 42-43). Further, the Council must act in a manner consistent with the instructions and decisions of the Review Board (Ibid.).

Specifically, in cases in which the Review Board remands the case back to the Council, the Review Board will provide recommendations for further consideration by the Council (Exhibit 1, Section 2-3-603, p. 41). In these cases, the Council will review the issues that need to be addressed and take appropriate action. The institution will be notified of the action to remand the case to the Council as well as the subsequent action taken by the Council and the basis for this decision (Exhibit 98, CSI Adverse Action, pp. 8-10; Exhibit 21, Institutional File-WVBC, p. 483).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 22 Institutional File-CENSA	Exhibit 22 Institutional File CENSA.pdf		
Exhibit 34 Review Board Roster with Resumes	Exhibit 34 Review Board Roster with Resumes.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		
Exhibit 64 Instititional File DuBois	Exhibit 64 Institutional File DuBois.pdf		
Exhibit 67 CSI Review Board	Exhibit 67 CSI Review Board.pdf		
Exhibit 98 CSI Adverse Review	Exhibit 98 CSI Adverse Review.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

## Staff Determination

The agency needs to provide documentation that its policy clearly identifies all council actions that are eligible for the appeals process. The agency must also provide information and documentation that its hearing and appeals processes occur in a timely manner. It must provide information and documentation to demonstrate that the appeals panel cannot include current members of the agency's decision-making body that took the initial adverse action.

#### Analyst Remarks to Narrative:

Section 2-3-600 of the agency's Accreditation Criteria includes the agency's policies and procedures with regards to appeals (Exhibit 1). However, it is not clear based on the criterion references which actions are eligible for the agency's appeals process. Specifically, the criterion refers to actions taken in Sections 2-3-301, 2-3-304, 2-3-402 and 2-3-404; however there is no Section 2-3-404, and an action taken as noted in Section 2-3-304 does not appear to be eligible for the agency's appeal process.

In addition to an appeal, an institution whose accreditation is suspended in Section 2-3-402 appears to also be afforded the opportunity for a review or hearing before the council as a first step in Sections 2-3-403 and 2-3-500. All other adverse actions appear to have only the option to convene an appeals panel (Review Board of Appeals). The option for a review or hearing before the council prior to the review by an appeals panel appears to significantly lengthen the overall process and the amount of time an institution could maintain an accredited status, when it might otherwise not be able to do so. As noted in Exhibit 18, the institution availed itself of the council re-review, which accounted for four months of the process.

Although Sections 2-3-604 and 2-3-605 include timeframes to request an appeal and to provide written briefs, no other timeframes are

provided for the appeals process, such as the maximum timeframe to convene the appeals panel. The same limited types of timeframes are provided for a review or hearing allowed under Section 2-3-403. Therefore, it is not clear that the agency's review and appeals processes ensure an expeditious process from council action to appeal decision.

The agency's policies and procedures regarding appeals contain most of the elements required by this section regarding the composition, function, and authorized actions of the appeals body. The policies and procedures preclude any former council member within one year of serving to be a member of the appeals body. However, neither the agency's policies nor bylaws appear to preclude current members of the agency's decision-making body that took the initial adverse action from being members of the appeals panel, as required by this section.

The agency indicates that the appeals panel members are subject to its conflict of interest policies, however, as noted previously in Section 602.15(a)(6), the agency has not demonstrated that it effectively applies clear and effective controls against conflicts of interest.

Section 2-3-603 clearly states that the appeals panel has the authority to affirm, amend, reverse, or remand the adverse action, as required by this section.

Section 2-3-605 clearly allows for the institution to appear before the appeals panel, make any presentation that the agency permits, and be represented by legal counsel.

The agency provided institutional examples (Exhibits 21, 22, and 64) that it has implemented its appeals policies and process, and therefore has demonstrated that it provides an opportunity, upon written request of an institution, for the institution to appeal any adverse action prior to the action becoming final. However, Exhibit 98 is of an institution that whose accreditation was withdrawn by suspension, but does not appear to have been afforded the opportunity for a review or hearing before the council, prior to the opportunity for a review by an appeals panel. Therefore, it is not clear that the agency is implementing its policies and procedures.

## List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.25(g) Basis for Appeal Outcome Provided

#### Narrative

As noted in §602.25(f), any institution exercising their right to appeal is notified in writing of all review board decisions. The appeals process notification requirements are codified in the Review Board Appeal Process of the Accreditation Criteria (Exhibit 1, Section 2-3-606, pp. 42-43), "Within a reasonable time after the conclusion of the hearing, the hearing panel shall issue in writing its decision with a statement of its reasons and recommendation, if any, to the Council...The majority decision with dissenting opinions, if any, will be furnished to the institution." Therefore, once the Review Board has rendered a decision, the decision and the basis for the decision are communicated in writing to the institution, along with disclosures about concurrent notifications to federal and state authorities (Exhibits 21, Institutional File-WVBC, pp. 484-486; Exhibit 22, Institutional File-CENSA, pp. 144, 155).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation to demonstrate that it has a policy that clearly requires the agency to notify the institution in writing of the result of its appeal and the basis for that result.

#### Analyst Remarks to Narrative:

The agency does not appear to have a policy to address the section. Section 2-3-606 of the agency's Accreditation Criteria (Exhibit 1) states that "Within a reasonable time after the conclusion of the hearing, the hearing panel shall issue in writing its decision with a statement of its reasons and recommendation, if any, to the Council." Section 2-3-607 states that "Decisions by the Review Board panel are transmitted to the Council for disposition and publication." There is no clear statement in policy that the agency notifies the institution in writing of the result of its appeal and the basis for that result, as required by this section.

The agency provided documentation to verify that a decision on appeal is provided to the institution (Exhibits 21 and 22).

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.25(h) New Financial Information

#### Narrative

The procedures for conducting all appeals and Review Board hearings are contained in the Policies and Procedures Manual (Exhibit 6, Chapter 31, Institutional Reviews and Hearings, pp. 101-103). As of August 2017, there were no cases of adverse actions that were based on financial condition

An institution that is confronting an adverse action "based solely on the failure...to comply with the standards of financial stability..." is provided an explicit opportunity by the Council to submit new information regarding its financial circumstance before a final action is rendered. The Accreditation Criteria gives the institution on "one occasion" the opportunity to provide for review "significant financial information that was unavailable to the institution prior to the determination of the adverse action and that bears materially on the financial deficiencies" (Exhibit 1, Section 2-3-603, pp. 41-42). The Financial Review Committee of the Council reviews the new information and decides if it is "significant and material." The Accreditation Criteria contains no provisions for the institution to appeal the decision of the Council regarding the significance and materiality of the new financial information. However, if the Council determines the new financial information is significant and material, the Council will reconsider its adverse action, taking the new information into consideration. If the adverse action is subsequently affirmed by the Council, the committee report and the resulting Council actions become part of the record subject to review before the Review Board (Ibid.)

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

#### **Analyst Remarks to Narrative:**

Section 2-3-603 of the agency's Accreditation Criteria include the review of new financial information and it is clear, comprehensive, and specific to the requirements of this section (Exhibit 1). The agency indicated that no institution has requested such a review, and therefore could not provide documentation of implementation.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.26(a) Notifications: Positive Decisions

#### Narrative

The Council has a process and policy (Exhibit 6, Policies and Procedures Manual, Chapter 14) for routinely providing written notice to the Secretary of the U.S. Department of Education (Department), state licensing and authorizing agencies, other accrediting agencies, and the public within 30 days of its decisions to award initial and new grants of accreditation, along with other Council actions. Exhibit 16 (Sample Council Action Letters) is a sample of initial grant of accreditation and renewal of accreditation approval letters, indicating the parties copied.

A summary of Council actions is also e-mailed to the Department, state licensing and authorizing agencies, and other accrediting agencies within 30 days of the actions. It is the intention of ACICS to continue to submit notification of these actions to the Department through the portal and to the other agencies via e-mail within 30 days of the actions. Exhibit 15 (Council Actions Summary) includes samples of the Summary of Council Actions sent to the Department with copies to state agencies and other accrediting agencies.

This information is also available on the ACICS website at www.acics.org (Exhibit 199, Council Actions Webpage). The Accreditation Criteria also includes guidelines for the Council's disclosure policies, which are contained in Appendix G, 2, (Exhibit 1, Accreditation Criteria p. 120).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 15 Council Actions Summary	Exhibit 15 Council Actions Summary.pdf		
Exhibit 16 Sample Council Action Letters	Exhibit 16 Sample Council Action Letters.pdf		
Exhibit 199 Screenshot of Council Actions	Exhibit 199 Screenshot of Council Actions Webpage.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation to demonstrate that it provides written notice of positive accreditation decisions to the public no later than 30 days after it makes the decision.

#### **Analyst Remarks to Narrative:**

Appendix G of the agency's Accreditation Criteria include policies and procedures that require the agency to provide written notice to the Secretary and other entities listed in this section of the criteria no later than 30 days after the positive accreditation decision is made (Exhibit 1).

The agency provided example council action letters and action summaries (Exhibits 15 and 16) to demonstrate that the notification is provided within 30 days to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies.

Based on the information and documentation provided, it appears the notification to the public is made via the agency's website. Department staff verified that the notice to the public, as required by this section, is available on the agency's website via a link to the council actions. However, it is not clear based on the documentation provided (Exhibit 199) that the written notice is posted no later than 30 days after the agency makes its decision, as required by this section.

## List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.26(b) Notifications: Negative Decisions

#### Narrative

As a matter of policy and practice (Exhibit 6, Policies and Procedures Manual, Chapter 14), the ACICS notifies in a timely manner the U.S. Department of Education, other interested third parties, and the public of all Council actions that affect an institution's grant of accreditation (Exhibit 1, Appendix G, 2., p. 120). The Council guidelines specifically include intervals for notification regarding actions that affect an institution's grant of accreditation, including closings, voluntary withdrawal of accreditation, and expiration of accreditation within 30 days of the time of the decision and coincidental with the notification of the institution. See id.

Regarding a final decision to place an institution on show-cause (the ACICS equivalent of probation), or to deny, withdraw, suspend, revoke, or terminate the accreditation of an institution, the Council guidelines specify notification to the public to occur within 24 hours of its notification to the institution. (Ibid., p. 121). In addition to notifying the public via the website, www.acics.org, ACICS also copies the U.S. Department of Education, appropriate state regulatory agencies, and other accrediting agencies as needed in letters to the institution (Exhibit 21, Institutional File-WBC, pp. 504-515 and 538-539; Exhibit 22, Institutional File-CENSA, pp. 135-137; Exhibit 104, Financial Show-Cause Actions, pp.4, 7, 11-12, 16-17 & 21-22).

Examples of the Council notification to these parties are provided in Exhibit 15, Council Actions Summary. In addition, the primary method for making the information available to the public is through www.acics.org, which includes a summary of all actions taken (Exhibit 199, Screenshot of Council Actions) as well as specific rationales for any show-cause or negative action taken through the public posting of the Council Action Letter (Exhibit 200, Screenshot of Adverse Action Posting; Exhibit 201, Screenshot of Show-Cause Directives).

ACICS intends to continue its policies and procedures of notifying the Department through its portal and other agencies and the public of adverse actions via copies of letters to institutions, summaries of Council actions, and www.acics.org.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 104 Financial Show-Cause Actions	Exhibit 104 Financial Show-Cause Actions.pdf		
Exhibit 15 Council Actions Summary	Exhibit 15 Council Actions Summary.pdf		
Exhibit 199 Screenshot of Council Actions	Exhibit 199 Screenshot of Council Actions Webpage.pdf		
Exhibit 200 Screenshot of Adverse Actions	Exhibit 200 Screenshot of Adverse Action.pdf		
Exhibit 201 Screenshot of Show-Cause Directives	Exhibit 201 Screenshot of Show-Cause Directives.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 22 Institutional File-CENSA	Exhibit 22 Institutional File CENSA.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation that it has a policy to provide written notice of negative accreditation decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution of the decision, but no later than 30 days after it reaches the decision, as required by this section.

### **Analyst Remarks to Narrative:**

Appendix G of the agency's Accreditation Criteria (Exhibit 1) include policies and procedures that require the agency to provide written notice to the Secretary and other entities listed in this section of the criteria, but no later than 30 days after action by the agency that "affect an institution's grant of accreditation, institutional closings, and voluntary withdrawal or expiration of accreditation." However, this policy is not clear to include notification of a final decision to place an institution on probation or an equivalent status, nor that the notification will occur at the same time as to the institution, as is required by this section.

The agency provided example council action letters and action summaries (Exhibits 15, 21, 22, and 104) to demonstrate that the notification is provided at the same time as to the institution and within 30 days to the Secretary and other entities listed in this section.

## List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.26(c) Notice to Public w/in 24 hours

#### Narrative

ACICS policies and guidelines provide for a 24-hour notification period. A final decision to show-cause; or deny, withdraw, suspend, revoke, or terminate the accreditation of an institution requires notification to the public within 24 hours of notification to the institution under Council guidelines (Exhibit 1, Appendix G, 2, p. 120). Furthermore, a final adverse decision by the Review Board is conveyed to the Council for publication in the same manner (Ibid., Section 2-3-607, p. 43). The information is posted on the ACICS website at www.acics.org (Exhibit 200, Screenshot of Adverse Actions) as specified in the Policies and Procedures Manual (Exhibit 6, Chapter 14). As previously noted, Exhibit 21, Institutional File-WVBC, pp. 504-515 and 538-539; Exhibit 22, Institutional File-CENSA, pp. 135-137; and Exhibit 104, Financial Show-Cause Actions, pp.4, 7, 11-12, 16-17 & 21-22, show examples of such notifications of these actions, which are then posted on the website within 24 hours of notification to the institution (Exhibit 201, Screenshot of Show-Cause Directives; Exhibit 200, Screenshot of Adverse Actions).

ACICS intends to continue to follow its published policies by notifying the public within 24 hours of a show-cause or final decisions to deny, withdraw, suspend, revoke, or terminate the accreditation of an institution.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 104 Financial Show-Cause Actions	Exhibit 104 Financial Show-Cause Actions.pdf		
Exhibit 200 Screenshot of Adverse Actions	Exhibit 200 Screenshot of Adverse Action.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		
Exhibit 22 Institutional File-CENSA	Exhibit 22 Institutional File CENSA.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

#### **Analyst Remarks to Narrative:**

Appendix G of the agency's Accreditation Criteria include policies and procedures that require the agency to provide written notice of final negative accreditation decisions to the public within 24 hours, as required by this section (Exhibit 1).

The notification to the public is made via the agency's website. Department staff verified that the notice to the public, as required by this section, is available on the agency's website. The agency also provided documentation that this information is posted within 24 hours of the notice to the institution (Exhibit 200).

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.26(d) Brief Summary w/in 60 Days

#### Narrative

As stated in the Accreditation Criteria in Appendix G, Guidelines on Disclosure and Notification, within 60 days of a final negative action, the Council will make available to the U.S. Department of Education, state regulatory agencies, other accrediting agencies, and other interested third parties, and to the public upon request, a brief statement summarizing the reasons for the negative action determination and the official comments that the institution may wish to make with regard to the Council's decision, or evidence that the affected institution has been offered the opportunity to provide official comment (Exhibit 1, Appendix G, p. 120).

The Council affords institutions that are subject to a final adverse or negative action access to written information summarizing the reasons for the action, and invites the institution in writing to provide an official written response (Exhibit 21, Institutional File-WVBC, pp. 484-485; Exhibit 17, Institutional File-ACCT, pp. 345-349; Exhibit 10, Denial of Renewal Application-SOLEX, pp. 76-78). As can be seen in each final negative action letter, the Council provides the opportunity for an institution to submit comments about the action, which will be made available to the Department of Education, state agency, and public through the ACICS web site. Exhibit 17, Institutional File-ACCT, p. 350, is an example of the notification of official comments submitted by an institution after a final negative action, and Exhibit 202 (Time-stamped Notification) is a screenshot with time stamp indicating the notification was posted within 60 days of the date of the decision.

As noted above and per policy, both the summary of the Council's reasons and the institution's official response will be disclosed to the Secretary, the appropriate state regulatory authorities, and the public upon request within 60 days of the final negative action (Exhibit 1, Appendix G, 3, p. 120).

ACICS intends to continue to follow its published policies of offering affected institutions the opportunity to provide official comment and to making the written reason for the action and official comments available to the listed entities within 60 days of the action.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 10 Denial of Renewal Application - Ineligibility SOLEX	Exhibit 10 Denial of Renewal Application-Ineligibility SOLEX.pdf		
Exhibit 17 Institutional File-ACCT	Exhibit 17 Institutional File ACCT.pdf		
Exhibit 202 Time-stamped Notification	Exhibit 202 Time Stamped Notification.pdf		
Exhibit 21 Institutional File-WVBC	Exhibit 21 Institutional File WVBC.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

### Staff Determination

The agency must provide documentation that it has a policy to provide a written rationale of negative accreditation decisions within 60 days to all entities required by this section. The agency must also provide documentation that no limitation is placed on an institution's ability to make an official comment regarding the decision.

### **Analyst Remarks to Narrative:**

Appendix G of the agency's Accreditation Criteria include policies and procedures that require the agency to provide a written rationale of negative accreditation decisions within 60 days, as required by this section (Exhibit 1). However, the agency's policy states that it will provide the rationale "to the agencies above and the public upon request," which does not meet the requirements of this section.

The agency provided example council action letters (Exhibits 10, 17, and 21) that include the following statement:

"If the institution elects not to appeal this action, comments with regard to this decision must be submitted to the Council office within two weeks of the date of this letter and will be included in the summary detailing the reasons for the Council's decision that will be made available to the U.S. Secretary of Education, the appropriate State licensing or authorizing agency, and the public through www.acics.org."

The agency provided an example of a comment provided by an institution (Exhibit 17), but that institution declined to appeal the decision. The agency did not provide any information or documentation if an institution that chooses to avail itself of the appeals process has an opportunity to provide a comment on the decision, as required by this section.

The agency also provided documentation that the written rationale of negative accreditation decisions are provided within 60 days (Exhibit 202). Department staff also reviewed the agency's website and verified that the information required by this section is available.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.26(e) Notifications: Voluntary Withdrawal

#### Narrative

The Council, as outlined in its Policies and Procedures Manual, requires that ACICS notify appropriate parties upon the lapse or voluntary withdrawal of accreditation of an institution within 30 days. (Exhibit 6, Policies and Procedures Manual, Chapter 51). The Council routinely makes that notification in writing, in the prescribed timeframe, as demonstrated by the date of the institutions' notices of withdrawal, and the date of ACICS' acknowledgments of the voluntary withdrawal (Exhibit 203, Sample Voluntary Withdrawal of Accreditation Acknowledgements).

Written notification is conveyed to the Department, appropriate state agencies, and accrediting entities, as they are copied on the acknowledgment of withdrawal. ACICS, pursuant to Appendix G, Section II of the Accreditation Criteria (Exhibit 1, Appendix G, p.120) and its policy notifies the public by posting information to the ACICS website regarding an institution's voluntarily withdrawn status. (Exhibit 204, Screenshot of Voluntary Withdrawal Notices Webpage).

The Council has not had any member institutions whose grants of accreditation have lapsed within the past three years, which would have required notification by ACICS. However, institutions who have notified ACICS (typically within the year prior to their expiration date) that they will not be renewing their accreditation have been acknowledged by ACICS with a letter indicating receipt and highlighting the institution's continued obligation for compliance with the Accreditation Criteria, which may require an on-site quality assurance monitoring review (Exhibit 205, Sample Acknowledgements of Intent not to Renew).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 203 Voluntary Withdrawal of Accreditation Acknowledgments	Exhibit 203 Voluntary Withdrawal of Accreditation Acknowledgments.pdf		
Exhibit 204 Screenshot of Voluntary Withdrawal Notice Web page	Exhibit 204 Screenshot of Voluntary Withdrawal Notice Web page.pdf		
Exhibit 205 Sample Acknowledgments of Intent to Not Renew	Exhibit 205 Sample Acknowledgments of Intent to Not Renew.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must demonstrate that it has a policy regarding the notification of voluntary withdrawals and lapses of accreditation that meet the requirements of this section.

#### **Analyst Remarks to Narrative:**

Appendix G of the agency's Accreditation Criteria (Exhibit 1) include policies and procedures that require the agency to provide written notice to the Secretary and other entities listed in this section of the criteria, but no later than 30 days after action by the agency that "affect an institution's grant of accreditation, institutional closings, and voluntary withdrawal or expiration of accreditation." However, this policy is not clear to that the notification of a voluntary withdrawal would occur within 30 days of receiving the notification from the institution or that the notification of an accreditation lapse would occur within 30 days of the lapse, as is required by this section.

The agency provided example council action letters (Exhibit 203) to demonstrate that the notification of voluntary withdrawal is provided within 30 days to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies.

The notification to the public is made via the agency's website, and the agency provided documentation that notifications of voluntary withdrawal are posted within 30 days (Exhibit 204). Department staff verified that the notice to the public, as required by this section, is available on the agency's website via a link to the council actions.

The agency stated it has not encountered a lapse of accreditation, and therefore could not provide documentation of such implementation of its policy in that regard.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.27(a)(1-5) Other Information to be Provided

#### Narrative

As outlined in Appendix G of the Accreditation Criteria (Exhibit 1, Appendix G, #7, p.12), ACICS would automatically submit an annual report to the Secretary of Education. However, with the Department's implementation of an electronic submission process that is accessible only to recognized agencies, ACICS was unable to complete this task in 2016, once its annual report was published. However, the agency publishes annual reports that include information such as its audited financial statements for a fiscal year that begins on July 1 through June 30 (Exhibit 206, ACICS Annual Reports). The annual report is also publicly disclosed on the ACICS website (Exhibit 207, Annual Report Webpage). ACICS publishes a membership directory on its website that is instantaneously updated when changes are made to school information on the ACICS information management system (Exhibit 2, ACICS Directory of Accredited Institutions). The types of information updated in the membership directory are an institution's accreditation expiration date, new program listings, deletion of program offerings, address of location, and level of academic program. Once recognized, ACICS will follow the USDE procedures to submit a copy of its annual report and an annually updated copy of its directory of accredited institutions.

ACICS lists all major accreditation decisions after each Council meeting within 30 days after the Council makes its decision. The vehicle for notifying the membership and interested parties of any changes in the agency's criteria and policies is through a Memorandum to the Field (Exhibit 23, Systematic Review of Criteria, Memos to Field, pp.12-68, 74-99, 228-262, 321-349, & 387-412). The Memorandum to the Field is sent out to schools and other parties via electronic communication and is posted on the ACICS website after each corresponding Council meeting (Exhibit 159, Screenshot of Memo to the Field Web page).

## Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 159 Memo to the Field Webpage	Exhibit 159 Memo to the Field Webpage.pdf		
Exhibit 2 ACICS Directory of Accredited Institutions	Exhibit 2 ACICS Directory of Institution.pdf		
Exhibit 206 ACICS Annual Reports - 2015 and 2016	Exhibit 206 ACICS Annual Reports - 2015 and 2016.pdf		
Exhibit 207 Annual Report Webpage	Exhibit 207 Annual Report Webpage.pdf		
Exhibit 23 Systematic Review of Criteria	Exhibit 23 Systematic Review of Criteria.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

#### **Analyst Remarks to Narrative:**

Appendix G of the agency's Accreditation Criteria includes its policies regarding notice to the Department (Exhibit 1). Department staff confirmed that the agency maintains its annual report, directory of accredited institutions, and notice of proposed changes in its policies, procedures, or accreditation standards on its website. If recognized, the agency states that it would provide the required information to the Department as required by this section.

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.27(a)(6-7),(b) Fraud and Abuse

#### Narrative

ACICS has written protocols to notify the Department in a timely manner if the Council has reason to believe that any institution is failing its Title IV program responsibilities as outlined in the Accreditation Criteria (Exhibit1, Accreditation Criteria, Appendix G, p. 121). The Council has followed the protocols in Appendix G by providing notice to the Department when ACICS has reason to believe that an institution is engaged in fraud or abuse or is otherwise failing to meet its Title IV program responsibilities (Exhibit 109, Institutional File-Penn Commercial, pp. 17-18). In addition, ACICS sometimes comes across Title IV concerns at institutions through its course of on-site evaluations, complaint reviews, or external negative information reviews. ACICS has specifically notified the Department in these instances (Exhibit 208, Communication to ED – Northwest Suburban College and Exhibit 209, Communication to ED – Trumbull Business College). In line with the ACICS process to notify the institution of its concerns and require an institutional response, as appropriate, ACICS will provide an action letter to the institution (Exhibit 125, Institutional File-Penn Commercial, pp. 19-20). In cases where the Council action is a show-cause directive or a negative action, ACICS will also copy the U.S. Department of Education, state licensing agencies, and other agencies as appropriate on these notifications and publishes these actions on its website (Exhibit 109, Institutional File-NWSC, pp. 163-168).

#### Relevant ACICS History

From ACISC Response to SDO Report – In the June 2016 Staff Report to the Senior Department Official, on which the Secretary's December 2016 decision to deny recognition to ACICS was based, the Department stated that ACICS Accreditation Criteria provided fail to comply with the requirements of this section through evidence of practice and ACICS had provided no basis for concluding it will do so in the future. The Department staff also stated that it was unclear to Department staff how the agency has held its institutions accountable for fraud and abuse prior to this or how it will follow the effective date (July 1, 2016) of the new standards. The Department's main concern was the instances of fraud and abuse discovered at several ACICS-accredited institutions within the last few years, including misrepresentations to students and falsification of placement rates. See id. The Department concluded, therefore, that ACICS needed to provide documentation that it consistently notified the Department regarding suspected Title IV-related fraud and abuse during the last five years, or to attest that it had not found any occupation to do so. See id.

Historically, ACICS has informally contacted ED to share information on institutions it believes has engaged in fraud and abuse. These determinations have been made based on team's review of refund processes, review of satisfactory academic progress (SAP) monitoring, and inappropriate completion of contact hours (credits). ACICS is committed to better communication with ED in regard to potential fraud and abuse and has evidenced that with enforcement of its revised standards. ACICS is training all Commissioners, evaluators and staff on fraud detection issues, as well as instituting heightened evaluation procedures. The At-Risk Institutions Group has also been established to evaluate at least monthly new information about accredited institutions that may be a basis for action.

Language in ACICS's Accreditation Criteria, Appendix G (Exhibit 1) has and continues to meet the requirements of this regulation. In addition, as demonstrated by this response, ACICS has continued to make improvements in policy and procedure to obtain better information about compliance with ACICS standards, including information relevant to potential fraud or abuse.

As outlined in Appendix G of the Accreditation Criteria, (Exhibit 1, Appendix G, #4, pp. 120-121), the Council will formally notify the Department of Education of any issues as referenced in response to Section §602.27(a)(6)(7). However, when the Council contacts the Department regarding concerns that arise with compliance with Title IV regulations or when fraud and abuse is suspected, the Council does not notify the institution of this contact with the Department. The Council's position supports the ability of the Department to investigate and resolve alleged Title IV violations independent of the institution's knowledge.

As mentioned in response to Section §602.27(a)(6)(7), if the Title IV concern arises in the course of an on-site evaluation or complaint or external negative information review, then ACICS will provide a notification to the institution of these concerns and require a response from the institution. In addition, if an eventual action of show-cause or a negative action is taken, then ACICS will also copy the Department on this letter (Exhibit 109, Institutional File-NWSC, pp. 6-8 and 163-168).

ACICS has kept specific requests by the Department confidential and has not shared these requests with the institution (Exhibit 210, Request for Information Program Review, Delta Ed). As noted in the Policy and Procedures Manual (Exhibit 6, Chapter 49), once a staff member is notified that an institution is not in compliance or there is possible fraud, staff will immediately communicate this information to the President. The President will make a determination as to whether this information constitutes reason to believe that the institution may not be in compliance or may be engaged in fraud or abuse. In the case that the President feels that there is indeed fraud or non-compliance, he/she will immediately notify the U.S. Department of Education in writing, with the name of the institution and the reasons for the concern. In conjunction, the institution may be cited as part of a normal ACICS accreditation procedure and given an opportunity to evidence why it is in compliance with Title IV requirements.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 109 Institutional File-NWSC	Exhibit 109 Institutional File-NWSC.pdf		
Exhibit 125 Institutional File-Penn Commercial	Exhibit 125 Institutional File Penn Commercial.pdf		
Exhibit 139 Institutional Reviews-Conformity	Exhibit 139 Institutional Reviews-Conformity.pdf		
Exhibit 208 Communication to ED-NWSC	Exhibit 208 Communication to ED-NWSC.pdf		
Exhibit 209 Communication to ED - Trumbull	Exhibit 209 Communication to ED - Trumbull.pdf		
Exhibit 210 Request for Program Review Information - Delta Education	Exhibit 210 Request for Program Rev iew Information - Delta Education.pdf		
Exhibit 6 Policies and Prodedures Manual	Exhibit 6 Policies and Procedures Manual.pdf		

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation to demonstrate that it has a consistent standard for determining when to provide notification to the Department of any institution it has reason to believe is failing to meet its Title IV, HEA program responsibilities or is engaged in fraud or abuse

#### Analyst Remarks to Narrative:

Appendix G of the agency's Accreditation Criteria includes the policies and procedures that require the agency to notify the Secretary when it has concerns about an institution's ability to meet its title IV, HEA program responsibilities or that an institution is engaged in the fraud or abuse of federal funds (Exhibit 1). Department staff notes that the agency does not appear to have a policy regarding the notification to an institution of contact with the Department in those instances, which is optional per Section 602.27(b).

The agency provided three institutional examples in this section. One example (Exhibit 109) is of an institution providing an unapproved program and a complaint regarding Title IV issues. ACICS was informed by the Illinois Board of Higher Education of the operation of an unapproved bachelor degree program in February 2017, and placed the institution on show cause at that time. The agency copied the Accreditation Group at the Department on the show cause letter, but it does not appear that the agency notified the Department's Office of Federal Student Aid (FSA) of the February action nor the April continued show cause action, even though the institution was a known participant in the Title IV program (Exhibit 109, pages 6-8 and 105-107). A site visit occurred in early June and the extensive complaint was received immediately afterward. The agency conducted a review of both, and found reason to believe the institution was failing to meet its Title IV, HEA program responsibilities. The written notice provided directly to FSA regarding the institution was issued in August 2017 (Exhibit 208), at the same time the agency acted to withdraw accreditation.

Another example (Exhibit 209) included an email notice of potential fraud and abuse received in early August 2017 and the written notice provided to the Department regarding the institution in late August 2017. Based on the documentation provided, it does not appear the agency conducted any independent review of the limited information provided in the email, but still determined notification to the Department was warranted.

The example in Exhibit 125 included written notice to the Department regarding a location offering more than 50% of an education program. As discussed more fully in Section 602.22(c), it is not clear the agency provided adequate oversight in this example to prevent the fraud or abuse of federal funds.

In Exhibit 21 (page 513), the council stated "it is especially disconcerting that some students and faculty have claimed that the campus is taking out loans without student approval and other students are convinced that the school is 'stealing their money.'" The documentation included a substantial complaint filed in July 2016 (page 217), another complaint on similar issues (page 342) in August 2016, and confirmation of allegations in the site team report (pages 365-366) in September 2016. Based on the documentation provided, it does not appear the agency provided written notice to the Department regarding the concerns expressed about the institution and its ability to meet its title IV, HEA program responsibilities.

Therefore, it is not clear that the agency has a consistent standard for determining when to provide notification to the Department of any institution it has reason to believe is failing to meet its Title IV, HEA program responsibilities or is engaged in fraud or abuse of federal funds, nor does it do so in practice.

List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.28(a) Regard for the Legal Authorization of an Institution

#### Narrative

Basic eligibility requirements for accreditation by ACICS require that the institution offer postsecondary education and that it is licensed by the appropriate state education agency for postsecondary institutions, or has explicit, legal authority at a postsecondary education level in the state in which it operates (Exhibit 1, Accreditation Criteria, Section 1-2-100(b), p. 14). As part of the initial screening to evaluate eligibility, applicants must answer this question in the affirmative to proceed with the process (Exhibit 211, Screenshot of Initial Applicant Self-Assessment Checklist). Further, this requirement for authority to operate is publicly disclosed on the ACICS web site (Exhibit 212, Screenshot of Authorization Requirement).

The Council collects and reviews documentation from all initial applicants to evidence that they are currently licensed by the appropriate state agency (Exhibit 8, Initial Approval of Eligibility-Larkin, p.4). The requirement that an institution has legal authority from the state agency to confer degrees is also expressed in the evaluation standards of the Council Accreditation Criteria (Exhibit 1, Section 3-3-100 p. 62, Section 3-4-100 p. 66, Section 3-5-100 p. 70, and Section 3-6-200 p. 74).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 211 Screenshot of Initial Applicant Self-Assessment Checklist	Exhibit 211 Screenshot of Initial A pplicant Self-Assessment Checklist.pdf		
Exhibit 212 Screenshot of Authorization Requirement	Exhibit 212 Screenshot of Authorization Requirement.pdf		
Exhibit 8 Sample Initial Approval - Larkin	Exhibit 8 Sample Initial Approval - Larkin.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Meets the requirement of this section.

### **Analyst Remarks to Narrative:**

Section 1-2-100(b) of the agency's Accreditation Criteria requires its institutions to be licensed by the appropriate state education agency for postsecondary institutions or the appropriate state agency for authorizing the conduct of business in that state for noninstitutional entities (Exhibit 1). The agency provided documentation to demonstrate compliance with this section.

#### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.28(b) Regard for Negative Actions by Other Accreditors

#### Narrative

ACICS policy requires the Council to consider information about institutions applying for an initial or a new grant of accreditation that is provided by other accreditors, state or federal government agencies, the public, and other institutions. As outlined in the Accreditation Criteria, the Council will withhold an initial or new grant of accreditation from an institution that is known to be the subject of a pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State; or a decision by a recognized agency to deny accreditation; or a pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation; or probation or an equivalent status imposed by a recognized agency (Exhibit 1, Section 2-1-200, p.17; and Section 2-1-302, pp. 18-19).

There have been limited instances of the Council's consideration of an initial application with an outstanding adverse action by another accrediting agency or the state. However, evidence of this policy's implementation following receipt of information from an accrediting agency which placed an applicant on show-cause can be demonstrated. In the instance where an institution was being considered for initial accreditation, the Council received notice related to a show-cause directive initiated by the current institutional accreditor. Subsequent to the Council's decision to not take action until investigating the matter, the institution voluntarily withdrew its application (Exhibit 115, South Baylo University Initial Application).

Institutions holding grants of accreditation from other entities when seeking initial grants from ACICS are advised that the agencies will be notified for comment (Exhibit 134, Institution Invitation Letter & Comment from Accreditor). The adverse or probationary information is typically and routinely shared by other accrediting bodies with the Council, who will take follow up action as warranted (Exhibit 213, Action by Other Agencies and ACICS Follow-Up).

In the most recent three-year period, the Council has not granted accreditation to an institution known to be the subject of a pending or final negative action brought by a State agency, or a decision by a recognized agency to deny accreditation or to suspend, revoke, withdraw or terminate accreditation or been placed on probation or the equivalent by a recognized accrediting agency.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 115 South Baylo Initial Application	Exhibit 115 South Baylo Initial Application.pdf		
Exhibit 134 Institution Invitation Letter & Comment for Accreditor (UEI/CEM)	Exhibit 134 Institution Invitation Letter and Comment from Accreditor.pdf		
Exhibit 213 Actions by Other Agencies and ACICS Follow Up	Exhibit 213 Actions by Other Agencies and ACICS Follow Up.pdf		

### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation that it has a policy that meets all the requirements of this section when making a decision to grant initial or renewed accreditation.

## **Analyst Remarks to Narrative:**

Section 2-1-200 of the agency's Accreditation Criteria (Exhibit 1) requires it to consider the actions of other recognized accrediting agencies that have denied accreditation to the institution, placed the institution on probationary status, or revoked the accreditation of the institution in making a decision to grant initial accreditation, but do not prohibit it, as required by this section, unless covered by the exception included in Section 602.28(c). In addition, the policy does not appear include the consideration of a pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State or a denial, suspension, termination or revocation of preaccreditation by a recognized agency in making a decision to grant initial or renewed accreditation, as required by this section.

For institutions seeking renewal of accreditation, Section 2-1-302 states that ACICS will not grant renewal of accreditation to an institution that is subject to an interim action by another recognized institutional accrediting agency or a state agency that could lead to the suspension, revocation, or termination of that institution's accreditation or authority to provide postsecondary education. The policy is not clear to prohibit a grant of accreditation to an institution that is subject to a decision by a recognized agency to deny accreditation or preaccreditation, or a final action to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation, as required by this section.

The agency stated that it has not had the opportunity to apply its policy in this area, and therefore could not submit documentation. The agency did submit documentation that it considered a show cause action by another accrediting agency in the review of an institution applying for accreditation from ACICS, but the institution withdrew its application prior to any decision.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.28(c) Explanation of Over-riding Decision

#### Narrative

It is the policy of the Council to consider information about institutions applying for an initial or a new grant of accreditation that is provided by other accreditors, state or federal government agencies, the public, and other institutions. As outlined in the Accreditation Criteria, the Council will withhold an initial or new grant of accreditation from an institution that is known to be the subject of a pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State; or a decision by a recognized agency to deny accreditation; or a pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation; or probation or an equivalent status imposed by a recognized agency (Exhibit 1, Section 2-1-200, p. 17 and Section 2-1-302 pp. 18-19).

While the authority does exist for the Council to grant accreditation to an institution as described in the paragraph above and Section §602.28 (b), with proper notice to the Secretary, U.S. Department of Education, the Council has not exercised this right. In the most recent three-year period, the Council has not granted accreditation to an institution known to be the subject of a pending or final negative action brought by a State agency, or a decision by a recognized agency to deny accreditation or to suspend, revoke, withdraw or terminate accreditation, or been placed on probation or the equivalent by a recognized accrediting agency.

If the Council should decide to approve an initial or new grant of accreditation for an institution that is the subject of any of the adverse actions such as those listed in Section §602.28(b), a letter will be prepared in accordance with the standards of Section §602.28(c) within 30 days of the decision. The letter would include a thorough and reasonable explanation of why the action of the state or other accrediting agency does not preclude the ACICS grant of accreditation.

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments	1
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf			

#### **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must provide documentation to demonstrate that it has a policy to address the requirements of this section.

#### **Analyst Remarks to Narrative:**

The agency does not appear to have a policy to address this criterion. Although the agency has policies to require the consideration of most of the actions described in Section 602.28(b) of the Secretary's Criteria for Recognition in Sections 2-1-200 and 2-1-302 of the agency's Accreditation Criteria (Exhibit 1), there is no reference to providing a thorough and reasonable explanation, consistent with its standards, why the action of the other accrediting body does not preclude the agency's grant of accreditation to the Secretary within 30 days of its action.

The agency stated that it has not had an opportunity to apply such a policy, and therefore could not provide documentation in this area.

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.28(d) Requirement to Initiate Review

#### Narrative

ACICS policy requires the review of information provided by another recognized accrediting agency related to accredited institutions. If the Council learns that one of its accredited institutions is the subject of an adverse action by another recognized accrediting body or has been placed on probation or an equivalent status by another recognized agency, the Council will promptly review the institution to determine if the grant of accreditation should be conditioned. The Council reviews the information to determine if it is germane to the Accreditation Criteria. If the information is relevant to the Criteria, an inquiry will be initiated that includes direct requests for information. If the Council's investigation of external information reveals the institution is not in compliance with standards, the institution may be directed to show-cause why its accreditation should not be suspended (Exhibit 1, Section 2-3-230, p. 38; and Section 2-3-402, pp. 39-40).

In one example, when a state agency initiated a negative action against an institution's state license, ACICS immediately took an investigatory action and conducted multiple on-site visits, which led to a show-cause action and ultimately, a denial of accreditation action (Exhibit 17, Institutional File-ACCT.

Issues related to the probation status as sanctioned by the Florida Board of Nursing on the Institute of Healthcare Professions were discussed by the Executive Committee. As a result, the International College of Health Sciences was placed on monitoring status (Exhibit 213, Action by Other Agencies and ACICS Follow up, p. 152).

#### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 17 Institutional File-ACCT	Exhibit 17 Institutional File ACCT.pdf		
Exhibit 213 Actions by Other Agencies and ACICS Follow Up	Exhibit 213 Actions by Other Agencies and ACICS Follow Up.pdf		

### Analyst Worksheet - Narrative

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must demonstrate that it has a policy meet the requirements of this section.

#### **Analyst Remarks to Narrative:**

The agency does not appear to have a policy to address this section of the criteria. The agency stated in its narrative that it has such a policy, but did not provide a reference to the policy in the agency's Accreditation Criteria or other publication.

The agency provided two examples of institutions, or a program at its accredited institution, subject of an adverse action by another recognized accrediting agency or State agency to demonstrate that the agency promptly reviewed its accreditation of the institution to determine if it should also take adverse action place the institution on probation or show cause (Exhibits 17 & 213).

### List of Documents Uploaded by Analyst - Narrative

### Criteria: 602.28(e) Information-Sharing with Other Accrediting/Approval Bodies

#### Narrative

The Council maintains a policy directing the sharing of information regarding status of, and any adverse actions taken, in relation to an institution or the programs offered. Exhibit 1, Accreditation Criteria, Appendix G (2), p. 120, describes the policy requiring the Council to notify the U.S. Department of Education, state regulatory agencies, other accrediting agencies, other interested third parties and the public of all Council actions that affect an institution's grant of accreditation.

The Council shares a summary of all actions affecting an institution's accreditation on its Website (Exhibit 199, Screenshot of Council Actions); and with the Department of Education, state authorizing agency, and accrediting agencies (Exhibit 15, Council Actions Summary). In addition, the Council publishes all show-cause and negative actions on its website (Exhibit 200, Screenshot of Adverse Actions and Exhibit 201, Screenshot of Show-Cause Directives), and copies the Department of Education, state authorizing agency, and accrediting agencies in corresponding notifications to the institution (Exhibit 104, Financial Show-Cause Directives; Exhibit 182, Show-Cause Directives-External; Exhibit 17, Institutional File-WVBC, pp. 504-515, 538-539; Exhibit 22, Institutional File-CENSA, pp. 135-137).

Upon request, the Council shares with other recognized accrediting agencies and state approval agencies information on the accreditation status of an institution or any of its programs, and any adverse actions it has taken against an accredited institution or programs. These stakeholders are copied on all agency substantive change, affecting accreditation letters (Exhibit 60, Sub-Change Applications and Approval Letters; Exhibit 16, Sample Council Action Letters; and Exhibit 136, SA Actions). Further, when requested, additional information is shared with state agencies as part of their own review of accredited institutions (Exhibit 40, Sample Communication Evidencing Cooperation).

### Document(s) for this Section

Document Title	File Name	Analyst Comments	Agency's Exhibit Comments
Exhibit 1 Accreditation Criteria	Exhibit 1 Accreditation Criteria.pdf		
Exhibit 104 Financial Show-Cause Actions	Exhibit 104 Financial Show-Cause Actions.pdf		
Exhibit 136 SA Actions	Exhibit 136 SA Actions.pdf		
Exhibit 15 Council Actions Summary	Exhibit 15 Council Actions Summary.pdf		
Exhibit 16 Sample Council Action Letters	Exhibit 16 Sample Council Action Letters.pdf		
Exhibit 17 Institutional File-ACCT	Exhibit 17 Institutional File ACCT.pdf		
Exhibit 182 Show-Cause Directives	Exhibit 182 Show-Cause Directives.pdf		
Exhibit 199 Screenshot of Council Actions	Exhibit 199 Screenshot of Council Actions Webpage.pdf		
Exhibit 200 Screenshot of Adverse Actions	Exhibit 200 Screenshot of Adverse Action.pdf		
Exhibit 201 Screenshot of Show-Cause Directives	Exhibit 201 Screenshot of Show-Cause Directives.pdf		
Exhibit 22 Institutional FIle-CENSA	Exhibit 22 Institutional File CENSA.pdf		
Exhibit 40 Sample Communication Evidencing Cooperation	Exhibit 40 Sample Communication Evidencing Cooperation.pdf		
Exhibit 60 Substantive Applications and Approval Letters	Exhibit 60 Substantive Change Applications and Approval Letters.pdf		

## **Analyst Worksheet - Narrative**

Analyst Review Status: Does not meet the requirement of this section.

#### Staff Determination

The agency must demonstrate that it has an information sharing policy that meets the requirements of this section.

### **Analyst Remarks to Narrative:**

Although the agency regularly reports on its accrediting decisions, to include adverse action per Appendix G of the agency's Accreditation Criteria (Exhibit 1), it does not appear that the agency has a policy that it will share upon request from another body, as required by this section, information about the accreditation status of and any adverse actions taken against an institution accredited by ACICS. The agency needs to provide evidence of an information sharing policy, which meets the requirements of this section and differs from the regular reporting of accreditation actions.

The agency provided documentation of such information sharing (Exhibits 40 and 109).

## List of Documents Uploaded by Analyst - Narrative