



Handbook
for
Review
Committees



HANDBOOK FOR REVIEW COMMITTEES

*Southern Association of Colleges and Schools
Commission on Colleges*

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PREFACE

The *Handbook for Review Committees* has been developed for use by reviewers and chairs of the various types of evaluation committees authorized to review institutions for the purpose of ensuring continuous improvement and ongoing compliance with the standards adopted by member institutions. SACSCOC's *Principles of Accreditation: Foundations for Quality Enhancement* have become well-established in their approach for granting and reaffirming accreditation of its member institutions. This *Handbook* is designed to be a companion resource for evaluators exercising professional judgment in the application of those standards.

This third edition has been extensively edited and revised. Careful readers will notice that the scope of this edition has been expanded beyond the two committees engaged in the reaffirmation process (Off-Site and On-Site Reaffirmation Committees) to include the broad range of committees working on behalf of SACSCOC to evaluate institutions and their ongoing compliance with the Principles. The *Handbook* has also been edited to reflect current practices of SACSCOC committees.

PART I
THE EVALUATION PROCESS

PURPOSE AND PHILOSOPHY OF ACCREDITATION

Accreditation in the United States is a voluntary and self-regulatory mechanism of the higher education community. It plays a significant role in fostering public confidence in the educational enterprise, maintaining standards of educational quality, enhancing institutional effectiveness, and improving higher education. It also provides the basis on which colleges and universities can be assured that institutions that have achieved accreditation have complied with a commonly-accepted set of requirements and standards.

The adoption of *The Principles of Accreditation: Foundations for Quality Enhancement* by SACSCOC established a focus on the institution's effectiveness and its ability to create and sustain an environment that enhances student learning and student success. The evaluation process is designed to determine the quality of an institution within the framework of its mission, its goals, and its analysis of and response to crucial institutional issues. The process also assumes that all participants will conduct their responsibilities with integrity, fairness, and confidentiality.

The effectiveness of the accreditation process depends on four paramount concepts. One is the belief that the accreditation of institutions should be conducted by peer reviewers, a process whereby institutional effectiveness and quality are professionally judged by peers from institutions of higher education whose expertise and experience are essential to their ability to exercise professional judgment. A second is institutional integrity and the assumption that all information disseminated by an institution seeking accreditation is truthful, accurate, and complete and that all of its dealings with its constituencies and the public are honest and forthright. A third concept is the institution's commitment to quality enhancement. The concept of quality enhancement is at the heart of SACSCOC's philosophy of accreditation; this presumes each member institution to be engaged in an ongoing program of improvement and able to demonstrate how well it fulfills its stated mission. The final underlying concept is the institution's focus on student learning and its effectiveness in supporting and enhancing student learning.

In summary, the philosophy and process presented in the *Principles* are based on the expectation that an accredited institution will have made a commitment to:

- Comply with the Core Requirements and other standards contained in the *Principles* and the policies and procedures of the SACSCOC.
- Enhance the quality of its educational programs.
- Focus on student learning.
- Ensure a "culture of integrity" in all of its operations.
- Recognize the centrality of peer review to the effectiveness of the accreditation process.

The Principles of Accreditation, the *Resource Manual for The Principles of Accreditation*, SACSCOC policies and procedures, and the various handbooks are the primary sources of information developed to assist institutions in fulfilling their responsibilities in the accreditation process.

TYPES OF COMMITTEE REVIEWS

Reaffirmation Committee

There are two types of reaffirmation committees: the Off-Site Reaffirmation Committee and the On-Site Reaffirmation Committee. The Off-Site Reaffirmation Committee conducts the initial review, a document review of the Compliance Certification developed by a member institution seeking reaffirmation of accreditation. The committee is composed of a chair and evaluators for finance, institutional effectiveness, organization and administration, student support services, library/learning support services, and three or more evaluators for faculty and educational programs.

The On-Site Reaffirmation Committee visits a member institution seeking reaffirmation of accreditation to complete the review of the standards begun by the Off-Site Reaffirmation Committee and to review the Quality Enhancement Plan. This committee is composed of a chair and evaluators in the areas of organization/governance, academic administration, faculty and educational programs, student support services, institutional effectiveness, and the Quality Enhancement Plan. The On-Site Reaffirmation Committee is responsible for the Final Report of the Reaffirmation Committee.

Substantive Change Committee

A Substantive Change Committee visits the institution to confirm ongoing compliance with the *Principles of Accreditation* following the approval of a change of a substantive nature to the institution between reaffirmation reviews. It is composed of a chair and evaluators whose expertise is appropriate for the significant departure or expansion under review.

Interim Off-Campus Instructional Site Committee

This committee visits off-campus instructional sites approved by SACSCOC and initiated between an institution's previous reaffirmation and its fifth-year review. It is composed of a chair and at least two evaluators whose expertise is appropriate for the expansion under review.

Committee on Fifth-Year Interim Reports

A Committee on Fifth-Year Interim Reports, divided into multiple clusters, reviews an institution's compliance with selected standards from *The Principles of Accreditation* and determines the acceptability of an institution's QEP Impact Report in order to verify ongoing compliance since the institution's decennial review. The Report is submitted about four years prior to the institution's next reaffirmation. Each cluster is composed of a Coordinator and five evaluators.

Special Committee

A Special Committee conducts a visit to an institution to evaluate institutional circumstances determined to be indicative of a lack of compliance with SACSCOC *Principles of Accreditation* or policies. Such a committee is authorized by the SACSCOC Board of Trustees or by the President of SACSCOC. It is composed of a chair and at least two evaluators, with expertise appropriate for the focus of the review.

Candidacy Committee

A Candidacy Committee conducts the first site visit to all teaching locations of an applicant institution to verify compliance with the selected standards and requirements addressed in the Application for Membership. The applicant is seeking Candidate status – a pre-accreditation status. This committee is typically composed of a chair and evaluators for the areas of educational programs and faculty qualifications, library/learning resources, student support services, institutional effectiveness, and finances.

Accreditation Committee

An Accreditation Committee conducts the second on-site visit to the main campus and to a sampling of off-campus instructional sites of a Candidate institution to verify compliance with all the requirements and standards of the *Principles of Accreditation* except Standard 7.2 (*Quality Enhancement Plan*). The Candidate institution is seeking initial membership or renewal of candidate status. An institution may remain in candidacy for a maximum of four years. The basic composition of the committee includes a chair, three evaluators in the areas of faculty qualifications and educational programs, and one evaluator each in the areas of organization and administration, library/learning resources, student support services, institutional effectiveness, and finances.

ROLE OF REVIEW COMMITTEES

Each of the Committees described above is charged with assessing institutional compliance with *The Principles of Accreditation*. The determination of compliance is based on an evaluation of the institution considering information presented and documented by the institution. This effort demands diligence in carrying out reading/writing assignments and requires that evaluators exercise their best professional judgment, in concert with their fellow committee members. Whenever possible, determinations regarding compliance are made by committee consensus.

Peer evaluators are expected to:

- Use their professional judgment and maintain integrity in their role in the committee process.
- Maintain confidentiality. Except for participating in deliberations within committee meetings or in other discussions with committee members, the chair, or SACSCOC staff, evaluators should not discuss the evaluation of the institution being reviewed at any time – before, during, or after the meeting of the committee.
- Function as a collegial team by striving to be helpful to other members.
- Note and then share any information that may contribute to the overall evaluation of the institution from the information that pertains to a specific area of responsibility and any other observations beyond their assigned area.
- Acknowledge that there may be multiple acceptable ways for an institution to address compliance.
- Rely on the collective judgment of the committee members to form the basis for any committee decisions.
- Concentrate on being accurate and fair in findings and observations.

- Refrain from initiating contact with individuals at an institution being evaluated. However, committee members who have difficulty accessing material presented electronically are authorized to contact the individual at the institution who is responsible for providing technical service to users of the website. This individual will be identified in the materials received from the institution. Any questions and comments should be limited to the technical difficulty being experienced.

ROLE OF THE CHAIR

Chairing a review committee for SACSCOC is leadership in action. It requires an understanding of peer review as both a process and a product, an understanding that peer review is both an instrument of accountability and a means of quality enhancement, a dedication of time and energy to ensure a successful review that is of value to the institution and SACSCOC, an informed awareness of SACSCOC, an understanding of *The Principles of Accreditation*, and an understanding of the institution's mission. Special skills include the capacity to evaluate, frame and guide, and instill confidence, as well as the ability to lead and to produce a committee report that is of value to the institution and SACSCOC.

The chair is responsible for communicating with the institution regarding the work of the committee. In addition, the chair ensures that the committee:

- Understands its purpose, charge, and responsibilities;
- Demonstrates integrity in all aspects of its engagement with the institution;
- Conducts its review in a collegial and professional manner;
- Conducts its review within the context of the institution's mission and the requirements of SACSCOC and the *Principles of Accreditation*;
- Exercises appropriate diligence in appropriately reviewing institutional materials;
- Applies its professional judgment in a reasoned and responsible manner in assessing the institution's compliance with the *Principles*;
- Conducts a review that is of value to the institution; and
- Produces a written report that is clear, concise, substantiated, and readable.

ROLE OF SACSCOC STAFF

The SACSCOC staff member assigned to the institution is available as a resource for the committee. The primary role of the staff member is to facilitate the work of the committee. Evaluators are encouraged to talk with the assigned staff person regarding any questions about the *Principles of Accreditation*, the materials provided by the institution for any of the committee assignments, or the logistics of the visit. Because the staff member is most knowledgeable about the institution, he or she will be helpful in clarifying the process as it relates to the institution under review. The email addresses of the chair, the staff member, and the committee members will be included in the roster of committee members. SACSCOC staff are responsible for selecting the committee, creating draft writing assignments and other draft documents, and working with the chair and the institution to ensure appropriate logistical arrangements.

SACSCOC staff members provide assistance and information to committees. Staff members do not participate in the final decisions of committees regarding compliance or recommendations.

DOCUMENTS RELATED TO THE COMMITTEE EVALUATION PROCESS

The Principles of Accreditation: Foundations for Quality Enhancement

[The Principles of Accreditation](#) is the primary source document describing the accreditation standards and process. It contains the Core Requirements [CR] and standards with which institutions must comply in order to be granted candidacy, initial accreditation, or reaffirmation of accreditation. Compliance with the Core Requirements is essential for gaining and maintaining accreditation with SACSCOC. The requirements establish a foundational level of development required of an institution seeking initial or continued accreditation. Compliance with the Core Requirements is necessary but not sufficient to warrant accreditation or reaffirmation of accreditation. If an institution fails to demonstrate compliance with a Core Requirement at the time of any review, the SACSCOC Board of Trustees will place the institution on sanction or take adverse action (see SACSCOC policy [Sanctions, Denial of Reaffirmation, and Removal from Membership](#)). Member institutions must also demonstrate ongoing compliance with the rest of the standards of the *Principles*, as well as SACSCOC policies.

Institutional Summary Form Prepared for SACSCOC Reviews

Institutions undergoing a comprehensive review such as Reaffirmation (Off- and On-Site), Fifth-Year Interim, Candidacy, Accreditation, Merger/Consolidation/Acquisition, or Level Change submit an [Institutional Summary](#) which provides evaluators with important information about the institution's structure, enrollment, off-campus instructional sites, and educational programs.

Compliance Certification

In the [Compliance Certification](#), the institution attests to its determination of the extent of its compliance with each of the standards under review by the Off-Site Reaffirmation Committee. The signatures of the chief executive officer and the accreditation liaison on the Compliance Certification are a "bond of integrity" with SACSCOC that attests to the institution's honest, forthright, and comprehensive analysis, as well as the accuracy and completeness of its findings.

Quality Enhancement Plan

The Quality Enhancement Plan (QEP) is a document developed by the institution describing a course of action for institutional improvement that addresses an issue or issues critical to enhancing educational quality and directly related to student learning and/or student success. The QEP is based upon a comprehensive analysis of the effectiveness of the institution in supporting student learning and accomplishing its mission. For further information, see the SACSCOC policy [Quality Enhancement Plan](#).

Institutional Profile

The Institutional Profile contains data compiled by the institution and annually submitted to SACSCOC to provide updates in the areas of enrollment and financial information. SACSCOC may use this information in various ways, including screening substantive change decisions and

requesting additional information at the Fifth-Year Interim Review. Further, significant changes in enrollment may also be reported to the federal government.

Focused Report

The Focused Report is a document that an institution may opt to produce in response to any findings of non-compliance rendered by the Off-Site Reaffirmation Committee. The Focused Report addresses the findings of the Off-Site Reaffirmation Committee by providing updated or additional documentation regarding the institution's determination of its compliance with the Standards in question. The Focused Report is made available to the members of the On-Site Reaffirmation Committee for their review six weeks prior to the committee's visit.

Documentation for other Review Committees

Similar to the Compliance Certification and the Focused Report, institutions provide narrative and supporting documentation demonstrating compliance with the standards under consideration by a Candidacy Committee, an Accreditation Committee, or a Substantive Change Committee. [Documentation templates](#) are available on the SACSCOC website (www.sacscoc.org); they provide a common starting place for the various types of committee reviews. Depending on the exact nature of the review, SACSCOC staff members may choose to add to or delete from the standards under review to ensure that evaluators have appropriate information from the institution to carry out the committee's charge.

Monitoring Reports

If a Special Committee has been authorized by the SACSCOC Board of Trustees or President, it will be charged with an on-campus review of selected standards of the *Principles*. In those cases, committee members will receive the institution's monitoring report no later than four weeks before the visit. This monitoring report is also forwarded to the SACSCOC Board of Trustees as part of its review.

PART II
REVIEW COMMITTEES

OFF-SITE REAFFIRMATION COMMITTEE

The Off-Site Reaffirmation Committee conducts a document review of institutional Compliance Certifications to determine whether each institution is in compliance with all Core Requirements and standards except for Standard 7.2 (*Quality Enhancement Plan*). The evaluation by the Off-Site Reaffirmation Committee is conducted in two phases. First, a preliminary review of each institution is completed by individual committee members prior to the full committee meeting. The committee usually conducts a conference call as part of the review for each institution. Second, the committee conducts a two-day meeting in Atlanta to reach consensus about its findings and develop a report of its findings for each institution.

Each committee is assigned a group of institutions similar in educational program offerings and governance control. This group of institutions, called a cluster, will normally consist of no more than three institutions. Committee members evaluating a cluster will also be from institutions similar to those in the cluster. The institutions in the cluster are reviewed in a particular order and during specific time periods prior to and during the meeting in Atlanta.

Charge

The Off-Site Reaffirmation Committee is charged with:

- Reviewing and analyzing the Compliance Certification and supporting documents, most of which may be in electronic form, and data collected by SACSCOC from Institutional Profiles.
- Preparing a Preliminary Report identifying areas of compliance, areas of non-compliance, or areas that are not applicable. This Report will be completed by the On-Site Reaffirmation Committee to produce the Report of the Reaffirmation Committee.

The peer review process involves making both individual and collective professional judgments. Prior to the meeting in Atlanta, committee members will evaluate each institution's mission, policies, procedures, programs, resources, and activities as they relate to the standards assigned for review. Committee members present their evaluation and findings to the full committee during conference calls and at the meeting in Atlanta.

Composition and Role

The Off-Site Reaffirmation Committee normally has eight to ten members and is composed of a chair; evaluators for finance, institutional effectiveness, organization and administration, student support services, and library/learning resources; and three or four evaluators for educational programs, depending on the size and complexity of the institutions in the group being reviewed.

Committee members should determine whether there is any conflict of interest, as defined in SACSCOC policies, in their service on the committee. If a conflict of interest might exist, committee members should notify the SACSCOC staff member assigned to the committee immediately. A list of circumstances that present a conflict of interest is included in information sent to those invited to serve on a committee (See SACSCOC policy [*Ethical Obligations of Evaluators*](#)).

Members of the committee are expected to:

- Review the Compliance Certifications of specific institutions included in the cluster;
- Participate in a SharePoint® training session;
- Participate in conference call meetings scheduled by the chair of the Off-Site Reaffirmation Committee;
- Refrain from contact with any individuals at an institution being evaluated. However, if an evaluator has difficulty accessing material presented electronically, and if directed to do so by committee chair, the evaluator may get in touch with the individual at the institution who is responsible for providing technical support for the institution's electronic submission. This individual will be identified in the materials received from each institution in the cluster. During this contact, questions and comments should be confined to the technical difficulty. Institutions will be instructed not to call or email any of the committee members directly.
- Make preliminary determinations regarding each institution's compliance with pre-assigned selected standards;
- Enter preliminary findings into the Preliminary Report of the Reaffirmation Committee, which will be posted in SharePoint®;
- Meet deadlines; and
- Attend the committee meeting in Atlanta and reach consensus on findings of all the institutions in the cluster.

The Office of Legal and Governmental Affairs, and Commission Support is responsible for coordinating the Off-Site Review process. This office will provide all of the resource materials and logistical information in preparation for the committee meeting.

A Staff Coordinator, an administrative member of SACSCOC staff, will be assigned to assist the committee before and during its meeting in Atlanta. The primary role of the Staff Coordinator is to provide consultative and administrative assistance to the committee. The Staff Coordinator is available to address any concerns with the interpretation of standards and facilitate consistency in the application of the standards.

A Recorder, an administrative support member of SACSCOC staff, will be assigned to assist the committee during its meeting in Atlanta. The primary role of the Recorder is to update the committee's report as changes are made during the committee's deliberations and ensure that the Report is properly formatted.

Logistical Arrangements

The Office of Legal and Governmental Affairs, and Commission Support will arrange for lodging in Atlanta and will communicate hotel confirmations and final logistical arrangements for the committee meeting about two weeks before committee members' planned arrival.

SACSCOC will reimburse evaluators for travel, meals, and an amount for miscellaneous business-related expenses incurred during the meeting. Committee members should complete and submit the expense voucher (<http://sacscoc.org/expense-vouchers/>) to SACSCOC as soon as possible after the conclusion of the Off-Site meeting.

Although evaluators are responsible for making their own travel arrangements, SACSCOC recommends they use its travel agency, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy. The maximum allowable reimbursement, including *en-route* expenses, may not exceed the published roundtrip coach class air fare to and from Atlanta.

Committee members will receive information regarding the beginning and ending times for the activities of the off-site review. They should plan arrival and departure times to allow them to be present for all activities and to complete all of their assignments. Committee members may need to arrive the night before the meeting, and they should plan to depart sometime after Noon of the meeting’s second day.

Figure 1: Sample Off-Site Reaffirmation Committee Review Schedule

	Morning	Afternoon
DAY ONE	Breakfast Meeting of Chairs and SACSCOC Staff Joint Meeting of all SACSCOC Staff, Chairs, and Committee Members Review Institution #1	Lunch Meeting of Chairs and SACSCOC Staff/Buffer Lunch Review Institution #2
DAY TWO	Breakfast Meeting of Chairs and SACSCOC Staff Continental Breakfast in Meeting Rooms Review Institution #3	

Documents

Approximately twelve weeks prior to the meeting of the Off-Site Reaffirmation Committee in Atlanta, each member of the committee will receive a series of emails from the Coordinator of Commission Support containing the following documents and information:

- Committee Roster for your cluster of assigned institutions,
- Committee Writing Assignments for readers for each of the Core Requirements and Standards (includes the schedule for the review of the institutions in the cluster),
- Preliminary schedule for the Atlanta meeting,
- Housing Reservation Form (to be completed and returned to SACSCOC by a specific date),
- Logistical arrangements for the Atlanta meeting,
- Roster of SACSCOC staff,
- General information for Off-Site Reaffirmation Committees, addressing conflict of interest and reimbursement information,
- SACSCOC policies and guidelines related to the work of the Off-Site Reaffirmation Committee,
- Off-Site Review Analysis Worksheet,
- Committee SharePoint® link and login information for accessing the committee reports in the SharePoint® system,

OFF-SITE REAFFIRMATION COMMITTEE

- Instructions for using SharePoint®, and
- Registration Form for SharePoint® training (to be completed and returned to SACSCOC by a specific date).

Committee members should check these materials immediately upon receipt to determine whether they have received everything they were supposed to receive and report to the Office of Legal and Governmental Affairs, and Commission Support any missing materials.

Approximately eight weeks prior to the Off-Site Reaffirmation Committee’s meeting in Atlanta, each institution in the cluster to be reviewed will send electronic copies of the following documents to each member of the Off-Site Reaffirmation Committee:

- Signed Compliance Certification with appropriate supporting documents,
- [“Institutional Summary Form Prepared for SACSCOC Reviews,”](#) providing an overview of the institution,
- Catalog,
- Financial audit for the most recently completed fiscal year and most recent financial aid audit (for the chair and the designated finance reviewer), and
- Instruction sheet that includes clear directions on how to access the electronic documents and the contact information of the technical support person who can assist an evaluator who may have difficulty accessing electronic information (if the institution prepared an electronic Compliance Certification)

Committee members should check the materials from the institutions immediately upon receipt to determine whether they have received all materials and report to the chair and the Office of Legal and Governmental Affairs, and Commission Support any materials that are missing. They should also check to determine whether they can access *all* of the material that has been provided electronically. If they cannot, they should inform the committee chair, who will determine the most appropriate way to engage with the technical staff member at the institution in question for assistance. They should not call or email any other person at the institution.

After the due date for submission of materials to the Off-Site Reaffirmation Committee, the institution may not submit any additional information to Committee members. The only exception is that of the audit for the most recently completed fiscal year. The institution may submit its audited financial statements for the most recently completed fiscal year no later than ten (10) working days prior to the Off-Site Reaffirmation Committee’s meeting. If applicable, the chair and the finance reader may also receive copies of U.S. Department of Education Notification Letters that were sent to the institutions. The finance reader should review these files to see if this information alters the initial impression regarding the financial situation of each institution.

SACSCOC will have a complete set of materials for each institution in the cluster at the Off-Site Committee meeting. Except as it may be helpful, do not bring materials to the Atlanta meeting.

Activities

Before the Atlanta meeting

The off-site meeting in Atlanta will be devoted primarily to reaching consensus regarding each institution’s compliance with the *Principles* and to preparing a preliminary report for each

institution. Therefore, the major portion of the analysis of compliance must be completed and in draft form in advance of that meeting. The time frame allotted for this portion of the review is six consecutive weeks.

To accomplish these tasks, each evaluator will be assigned as a primary reader/writer to review certain standards for each institution in the cluster. Most standards will also have a second reader assigned; some may have a third or fourth reader. Before the committee meets in Atlanta, evaluators – having conferred with the other readers assigned to the standard(s) – should write a draft analysis for each standard assigned to them as a primary reader, indicating whether the institution appears to be in compliance and the reasons for that decision. This analysis for each of the assigned standards must be posted into the electronic reports for the committee in SharePoint® by the deadlines established by the chair. The deadlines will align with the ending of each two-week period allocated to review each institution. A separate Report is completed for each institution being reviewed.

SharePoint® training and Conference Calls

During this phase of the review conducted prior to the committee meeting in Atlanta, evaluators should communicate regularly with the chair and other members of the committee through SharePoint® and email exchanges. Committee members should copy the chair on emails sent to other committee members so that the chair can observe how the review process is proceeding and where there may be problems that necessitate attention or intervention.

Evaluators should participate in any conference calls that may be arranged by the chair. An introductory conference call will usually be scheduled; conference calls will also be scheduled at or near the end of each institutional review period. These calls enable the committee to discuss initial findings. If committee members are unavailable during the time of a scheduled call, they should inform the chair and other committee members. Arrangements can be made to record the call, if necessary.

Compliance Review Process

Committee members should review the writing assignments document to check the specified order and time period for reviewing each institution in the cluster. Each institution should be reviewed separately in the context of its mission. Using professional judgment, evaluators should avoid engaging in “comparative compliance,” that is, determining compliance based on whether an institution is “more in compliance” or “less in compliance” than another one. In the final analysis, committee members must judge whether each individual institution is in compliance with the standards on the merits of its own documentation and not whether it is better or worse than another institution.

The following are suggestions for becoming familiar with each institution in the cluster and conducting a review of the Compliance Certification. Evaluators should:

- Read carefully all of the documents received from SACSCOC, particularly *The Principles of Accreditation*.
- Become familiar with each institution as a whole, paying particular attention to such things as history, mission, educational programs, size, type of governance, distance learning, off-campus instructional sites and branch campuses. For this

information, the institution's completed "Institutional Summary Form Prepared for SACSCOC Reviews" will be very helpful.

- Read carefully the Compliance Certification of each institution in the cluster. Each institution will identify whether it judges itself to be in compliance, partial compliance, or non-compliance with each of the standards and will indicate the reasons it has made that assessment. It will also provide evidence to support its conclusions or describe documents that will support them. If the institution determines that a standard addresses an issue that is outside of its mission, it will denote its compliance with that standard to be not applicable.
- Review the materials for each institution, noting how the materials are presented, whether any materials seem to be missing, and whether some or all of the material is presented electronically, and if so, whether that material can be accessed. If material cannot be accessed, email or call the chair of your committee for guidance on making contact with the institution.
- Review the institution's compliance generally, noting any concern raised by the institution itself.
- Review areas of responsibility as either a primary or other reader of assigned standards as specified in the Off-Site Reading/Writing Assignments document and begin to draft an analysis of compliance in those areas. After a preliminary review, primary readers should consult with other assigned readers before posting draft narrative in SharePoint®.
- For any institution that states in its "Institutional Summary Form Prepared for SACSCOC Reviews" that it has distance learning programs and off-campus instructional sites, determine if the institution has incorporated the evaluation of its off-campus instructional sites and distance learning programs throughout its Compliance Certification. Refer to the SACSCOC [Distance and Correspondence Education](#) policy to review the broad areas where an institution with distance and/or correspondence education programs should address distance and/or correspondence education within the Compliance Certification. The guidelines contained in the policy assist committee members evaluating distance and correspondence education and are intended to be used in conjunction with the *Principles of Accreditation*, the *Resource Manual*, and this *Handbook*.
- Review assigned secondary areas and form some preliminary assessments of each institution's compliance in those areas.
- Be mindful that many of the standards have multiple parts, all of which should be addressed in a cogent narrative.
- Using the "Offsite Review Analysis Worksheet" supplied by SACSCOC prepare a draft report for each institution in the cluster. For each assigned standard, mark "Compliance" or "Non-Compliance" and prepare a comment explaining specifically the reasons for the determination. The SACSCOC document [Writing Comments for Committee Reports](#) may be useful in preparing comments. When evaluators have completed their assessment and worksheet for an institution, they should then copy and paste the comments in the Report for that institution on its SharePoint® site. Deadlines for inserting these preliminary findings are identified on the review schedule provided in the Off-Site Reading/Writing Assignments document.

During the meeting in Atlanta

The three major agenda items of the Off-Site Reaffirmation Committee's meeting in Atlanta include conducting a procedural meeting, formulating the committee's decisions regarding compliance, and finishing the Preliminary Report of the Reaffirmation Committee.

Procedural Meeting

The chair, with assistance from the staff coordinator, will plan a procedural meeting that may include some of the following agenda items as well as others:

- Introduce committee members and SACSCOC staff members.
- Review the purpose of the meeting.
- Describe the expected outcomes.
- Discuss the order in which the institutions will be reviewed.
- Establish review procedures.
- Describe the role of the staff coordinator in assisting the committee with arriving at its professional judgments.
- Describe the role of the recorder to format comments into the institutional Reports.
- Review the "Institutional Summary Form Prepared for SACSCOC Reviews" for each institution.
- Reiterate the importance of confidentiality and ask committee members to sign and date the Conflict of Interest form.
- Discuss the responsibility of all to participate in the development of the final judgments, regardless of assignments.
- Offer suggestions that will facilitate the work of the committee.
- Discuss ways that the committee can ensure that the final Reports provide the reader with an informed understanding regarding the committee's determinations.

As the committee begins its deliberations, evaluators will want to focus their attention on the identification of significant issues. It is important to stay on task and not be drawn into discussions that have no relevance to the committee's task.

Formulating the Decisions of the Committee Regarding Compliance

The Off-Site Reaffirmation Committee is responsible for evaluating each standard except 7.2 (*Quality Enhancement Plan*) and publishing preliminary findings as follows:

- Compliance. The Off-Site Reaffirmation Committee determines that the institution has presented a persuasive and appropriately documented case and meets the standard.
- Non-Compliance. The Off-Site Reaffirmation Committee determines that the institution has not presented a persuasive and/or appropriately documented case of compliance with the standard.
- Not Applicable. The Off-Site Reaffirmation Committee determines that the standard does not apply to the institution.

Note: The Compliance Certification Template offers institutions an option to choose “Partial Compliance.” This option has been provided to allow institutions which have identified an area for improvement – and cannot, with integrity, mark the standard as “Compliant” – to articulate their progress toward coming into compliance. Off-Site Reaffirmation Committees will normally mark such standards with a finding of “Non-Compliance.” The committee’s narrative, however, should still reflect a thorough review of the institution’s case for compliance.

In sessions led by the chair, the committee will discuss compliance of each institution in the cluster. The review of each institution will begin with a brief overview of the institution followed by discussion by committee members of their preliminary findings in the areas that were assigned to them and the narrative to be included in the committee’s report for each institution.

Finishing the Preliminary Report of the Reaffirmation Committee

The recorder will come to the meeting with an electronic copy of the committee’s draft report for each institution in the cluster. During the meeting, as findings and narrative are altered and finalized as a result of the committee’s discussions, the recorder will make those changes in the draft report. Committee members may be expected to provide edited narrative to the recorder and for the committee’s approval following the discussion of each institution. At the conclusion of the Atlanta meeting, the recorder will finalize the draft report – with the assistance of the chair, if necessary – and forward that report to the staff coordinator. The staff coordinator will email the finalized report to the SACSCOC Vice President assigned to each institution and be available to consult with that staff person during the process of transmitting the Preliminary Report of the Reaffirmation Committee to the institution.

After the Atlanta meeting

As soon as possible after returning home, evaluators should mail a completed expense voucher to SACSCOC. The expense voucher must have an original signature, and the reimbursement request must include all original receipts.

About two weeks after the Off-Site Reaffirmation Committee’s meeting in Atlanta, SACSCOC will send committee members an email with a link to an online survey about their experience. The results of this survey significantly assist SACSCOC with improving its coordination of this very important part of the reaffirmation process.

The Off-Site Reaffirmation Committee’s Report

After reaching consensus or a majority opinion, the committee prepares “The Preliminary Report of the Reaffirmation Committee,” recording its findings regarding compliance, non-compliance, or not applicable. For each standard, the committee must write an explanation that clearly indicates to the institution the reasons for the committee’s determination. When the Report has been completed for each institution in the committee’s cluster, the responsibilities of the Off-Site Reaffirmation Committee are concluded.

In summary, the Preliminary Report of the Reaffirmation Committee for each institution in the cluster should include (1) compliance determinations for every standard except 7.2 and (2) a narrative detailing the reason for each of these determinations.

Note on Standard 7.2 (Quality Enhancement Plan)

Institutions may choose to provide information regarding their QEP at the same time they submit their Compliance Certification. Submission of such QEP information is strictly optional on the part of the institution, and the institution's choice will have no bearing on the rigor or breadth of the On-Site Reaffirmation Committee's review of the QEP. An institution which chooses to submit its QEP to the Off-Site Reaffirmation Committee's non-binding review should provide the following information:

- *A short narrative (1-2 pages) summarizing the QEP topic and its relationship to the institutional planning process.*
- *A short narrative (1-2 pages) describing the focus of the QEP on enhancing student learning outcomes and/or student success.*

These narratives should be included with the Compliance Certification document under Standard 7.2. The Off-Site Reaffirmation Committee will provide its reasoned opinion and any additional narrative in its comments on Standard 7.2. Those comments are strictly for the institution's use, however; they will be deleted from the draft report forwarded to the On-Site Reaffirmation Committee which forms the basis for the Report of the Reaffirmation Committee.

Role and Responsibilities of the Chair

The chair is responsible for organizing and managing the work of the committee and is the primary contact person for committee members as they prepare for and participate in the off-site review. The Off-Site Reaffirmation Committee is frequently referred to by a "cluster number" because it is reviewing a "cluster" of no more than three institutions that are generally comparable with one another.

Prior to the Committee meeting in Atlanta

Prior to the visit, the chair will learn as much as possible about the institutions in the cluster, the expertise and experience of each member of the committee, the information provided to the committee by the institutions, and the specific charge to the committee. Off-Site Reaffirmation Committee chairs should:

- Establish early contact with SACSCOC staff coordinator for the Cluster they will be chairing to review the assignments for the committee members, the schedule for reviewing each institution prior to the meeting in Atlanta, and the expectations for the quality and value of the written report for each institution. Confirm the chair's responsibilities as well as the SACSCOC office and staff's responsibilities throughout the review process.
- Participate in a conference call(s) facilitated by the Office of Commission Support for Off-Site Reaffirmation Committee Chairs to discuss issues bearing upon the consistency of the Off-Site reviews (approximately 12 or more Off-Site Reaffirmation Committees will be conducting reviews of other institutions during the same period of time)
- Email or call the committee members to make certain they have received materials, understand their responsibilities and know the schedule for reviewing the institutions. Establish whether any of the committee members anticipate scheduling issues that may impede their progress in completing each report within the scheduled amount of time. Emphasize the need to remain "on task."
- Review the compliance certification materials from the institutions in the cluster. Make certain that the committee reviews and evaluates each institution's distance learning programs and off-site locations within its report. If the committee concludes that the

institution has not provided a compelling case for its compliance with all matters pertaining to distance learning and off- site locations, then it should cite those concerns in the appropriate standards within the *Principles*.

- Maintain regular contact with the committee members to ensure that they are on track with the review schedule. Chairs generally schedule three to four conference calls with committee members prior to the meeting in Atlanta. These conference calls “committee meetings” are to make preliminary decisions on the compliance based on each institution’s compliance document.
- Contact the staff coordinator regarding any concerns or questions throughout the preliminary review schedule.
- Ensure that an electronic draft of the report for each institution is completed using the SharePoint® application.
- Once the SharePoint® of each institution’s report is completed and closed, inform the staff member who is serving as the recorder for the cluster during the meeting in Atlanta.

During the Meeting

The chair’s role is critical in ensuring thoughtful, candid, and open discussions among the committee members. The chair establishes the context within which the committee functions, and demonstrates for the committee the professional, collegial, and confidential manner of its work. Off-Site Reaffirmation Committee chairs should:

- Conduct an orientation meeting with committee in Atlanta prior to its analysis of the institutions being reviewed that:
 - Reviews the purpose of the meeting
 - Describes the expected outcomes
 - Reviews the schedule for reviewing each institution
 - Establishes the procedures for producing the final reports for each institution
 - Describes the role of SACSCOC staff in assisting the committee in arriving at its professional judgments.
- Throughout the discussions of each institution, ensure that all committee members have opportunities to participate in the development of the shared, informed professional judgments of each institution’s compliance with the *Principles*.
- Pay particular attention to the narratives for those standards which are complex and/or multi-part, as well as those which require an institutional policy for which the institution must demonstrate approval, publication, and implementation.
- Ensure that committee’s reports provide the reader with an informed understanding of the committee’s professional judgments regarding the institutions’ compliance with all applicable requirements within the *Principles* as well as the basis for those judgments.

After the Meeting

At the conclusion of the committee’s reviews and prior to departing from the Atlanta meeting, Off-Site Reaffirmation Committee chairs should work with SACSCOC staff coordinator and the recorder to ensure that the narratives of the Off-Site reports for each institution in the cluster accurately reflect the issues, findings, and collective judgments of the Off-Site Reaffirmation Committee. In addition, chairs should:

- Complete and submit an evaluation for each committee member.

- Submit an expense voucher to SACSCOC office, including mileage and necessary original receipts.
- Maintain confidentiality and avoid any appearance of conflict of interest.

(Figure 1)

Off-Site Reaffirmation Committee Process and Timeline				
Action	Track A	Track B	Responsible	Completed
Choose/Reserve/Invite Off-Site Chairs	March ~ 13 months prior to Review	September ~ 14 months prior to Review	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	April ~ 1 year prior to Review	October ~ 13 months prior to Review	SACSCOC	<input type="checkbox"/>
Confirm Committee members	January	August	SACSCOC	<input type="checkbox"/>
Verify/Affirm Institutional Summary	February	August	Institution	<input type="checkbox"/>
Generate Institutional Summary	February	August	SACSCOC	<input type="checkbox"/>
Generate Writing Assignments	February	August	SACSCOC	<input type="checkbox"/>
Rosters and instructions sent to institutions	February	August	SACSCOC	<input type="checkbox"/>
Conduct Orientation calls with Chairs	February	August	SACSCOC	<input type="checkbox"/>
Schedule Cluster conference calls	February	August	Chair	<input type="checkbox"/>
Submit Compliance Certification	March	September	Institution	<input type="checkbox"/>
Conduct review	spring	fall	Off-Site Committee	<input type="checkbox"/>
Finalize Preliminary Report draft	April	November	Chair	<input type="checkbox"/>
Atlanta review	April	November	Off-Site Committee	<input type="checkbox"/>
Finalize Preliminary Report	May	November	SACSCOC	<input type="checkbox"/>
Receive Preliminary Report	May	December	Institution	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

ON-SITE REAFFIRMATION COMMITTEE

Charge

The On-Site Reaffirmation Committee is charged with determining the institution's compliance with Standard 7.2 which deals with the Quality Enhancement Plan (QEP); making final determinations of compliance with the other standards of the *Principles*; reviewing for compliance the U. S. Department of Education (USDE) required standards even if the Off-Site Reaffirmation Committee found the institution to be in compliance; reviewing, if applicable, all branch campuses, a sampling of off-campus instructional sites (approved to offer 50% or more of an educational program), and distance learning/correspondence courses; and finalizing the Report of the Reaffirmation Committee.

To complete this assignment, committee members are expected to review carefully the institution's QEP, the Compliance Certification, the Off-Site Reaffirmation Committee's preliminary findings in the Preliminary Report of the Reaffirmation Committee, any Focused Report the institution may submit, and other documents that may be made available prior to the on-site visit or during the visit. Committee members will also need to talk with individuals and groups of faculty, staff, and students on campus to gather information in order to provide a comprehensive evaluation of the institution's compliance with *The Principles of Accreditation*.

Composition

A minimum of seven members will serve on an On-Site Reaffirmation Committee: the chair, a chief executive officer, evaluators in the areas of academic administration, faculty and educational programs, institutional effectiveness, student support services, and a QEP Lead Evaluator. The SACSCOC staff member may expand the size of the committee depending upon: (1) the size, scope, and complexity of the institution being reviewed and/or (2) the number of significant compliance issues to be reviewed by the On-Site Reaffirmation Committee.

Committee members should determine whether there is any conflict of interest, as defined in SACSCOC policies, in their service on the committee. If a conflict of interest might exist, committee members should notify the SACSCOC staff member assigned to the committee immediately. A list of circumstances that present a conflict of interest is included in information sent to those invited to serve on a committee (See SACSCOC policy [*Ethical Obligations of Evaluators*](#)).

QEP Lead Evaluator

The QEP lead evaluator is responsible for guiding the committee through the assessment of the institution's QEP. While this person takes a leadership role for reviewing the QEP, the entire committee is responsible for its assessment. The QEP lead evaluator will have writing assignments associated with the QEP, but each committee member will have a primary or secondary writing assignment for inclusion in the report. In the end, it is the entire committee's responsibility to judge the institution's compliance. The QEP lead evaluator often plays more of an editorial role in completing Part III of the Report of the Reaffirmation Committee. This committee member also usually leads the portion of the exit conference related to the QEP.

Logistical Arrangements

SACSCOC will reimburse evaluators for their travel, meals, lodging expenses, and an amount for miscellaneous business-related expenses incurred during the on-site visit. Institutions often cover the expense of committee meals and lodging directly during the visit. Evaluators should complete and submit the expense voucher to SACSCOC as soon as possible after the conclusion of the on-site visit.

Although committee members are responsible for making their own travel arrangements, SACSCOC asks that evaluators use its travel agency to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

The SACSCOC staff member assigned to the institution under review will consult with the institution and the committee chair regarding the schedule for the visit. Evaluators will receive an Information Outline from SACSCOC before the visit. This document provides important contact information and meeting times. Evaluators should pay careful attention to the information regarding the beginning and ending times for the activities of the on-site review and plan their arrival and departure times to allow them to be present for all of these activities and to complete their assignments. If an institution operates off-campus instructional sites, selected committee members will probably be asked to arrive early in order to facilitate the review of a sampling of those sites. Members of committees visiting institutions which operate one or more international sites may be asked to conduct site visits separately before arriving on the main campus.

Documents

Approximately six weeks prior to the on-site visit, the institution will send each committee member and the SACSCOC staff member the following materials:

- Quality Enhancement Plan,
- Signed Compliance Certification,
- Focused Report, if one has been prepared by the institution,
- College catalog,
- Institutional Summary Form for SACSCOC Reviews, including identification of a technical support person if some of the materials are also available electronically (updated from that prepared for the Off-Site Committee), and
- Additional material that may be requested by the SACSCOC staff member or the chair.

The committee chair or SACSCOC staff will email the following materials to each committee member:

- Draft Report of the Reaffirmation Committee (based on the preliminary Report prepared by the Off-Site Reaffirmation Committee),
- Committee roster,
- Committee Writing Assignments,
- Committee memo and/or visit itinerary/schedule,
- Information Outline, including such details as dates of the visit, times of the first and final meetings of the committee, lodging arrangements,
- Electronic links to the following documents:

- *The Principles of Accreditation: Foundations for Quality Enhancement,*
- *Handbook for Review Committees,*
- *Resource Manual,*
- Expense voucher,
- Information about the travel agency that handles flight arrangements for SACSCOC, and
- Other pertinent materials as determined by SACSCOC.

Activities

Before the On-Site Visit

To prepare for the on-site visit, evaluators should:

- Make certain that they have all the materials. If something seems to be missing, committee members should email the committee chair or SACSCOC staff member assigned to their committee immediately. Often, the administrative assistant to the staff member is a good first point of contact.
- Make travel arrangements informed by the Information Outline. Committee members may wish to consult with the chair before making travel arrangements to plan for possible visits to off-campus instructional sites.
- Become familiar with the institution's history, mission, programs, and services. This information will provide the context for the assessment of the institution's compliance with *The Principles of Accreditation*.
- Consult the Writing Assignments/committee memo to determine those standards for which they have primary and secondary responsibility.
- Read the Draft Report of the Reaffirmation Committee to determine the issues of compliance remaining, particularly considering their primary and secondary reading/writing assignments.
- Read the institution's QEP, with a focus on their writing assignments.
- Participate in conference calls and email exchanges with the chair, staff member, and other committee members. Evaluators should copy the chair and the staff member on all emails so that they can check the progress everyone is making in preparing for the on-site visit and determine whether their intervention is needed.
- Read carefully the explanations given by the Off-Site Reaffirmation Committee for its judgment of "Non-Compliance" or "Did Not Review" for all *Principles* they have been assigned to review.
- Read those sections of the Focused Report that pertain to their assignment to determine whether the documentation is sufficiently substantial and convincing to warrant finding the institution in compliance with those requirements and standards they are assigned to review.
- Prepare and submit electronically a draft narrative for their assigned standards to the committee chair by the date set by the chair prior to arriving for the visit.
- Determine the additional documentation needed to review on campus or the groups or individuals to be interviewed if they are unable to determine compliance based on the information in the Focused Report or if no Focused Report was submitted.

- Prepare notes about reasons for the judgment regarding compliance or non-compliance if they are able to make a decision after reviewing the Focused Report and be prepared to share with the committee.
- Read the QEP carefully and compose a list of questions to ask various small groups during the on-site visit about the QEP. Some questions may be prompted by the indicators suggested for reviewing the QEP described later in this *Handbook* in the section entitled “Assessing the Quality Enhancement Plan.”
- Prepare a selective list of groups and individuals to interview on-site regarding the institution’s QEP and any remaining issues of compliance. The chair will coordinate the committee’s final request for interviews.
- Make notes concerning advice they might consider giving the institution regarding ways the QEP can be strengthened and thus more beneficial to the institution in enhancing the quality of its programs and environment for student learning.
- Become familiar with *The Principles of Accreditation*, this *Handbook*, and any other materials appropriate to their assignment made available prior to the on-site visit.

Committee chairs will work with SACSCOC staff to schedule one or more conference calls with the entire committee before arriving for the visit. These calls allow the committee to become acquainted, review logistics and travel arrangements, review the itinerary for the visit, and discuss preliminary assessments of the institution’s compliance following the initial review of institutional materials. Committee chairs may choose to make the QEP the focus of one of these calls.

Evaluators should bear in mind the importance of making final determinations about the institution’s compliance with the *Principles* as quickly as possible. The final assessment of the QEP may depend on establishing the institution’s compliance with requirements and standards related to financial, physical, and staff resources; institutional mission and effectiveness; or other standards concerning the institution’s capability to complete the QEP.

During the On-Site Visit

The organizational meeting provides a first opportunity to meet formally with the other committee members. This meeting serves as a general orientation for the committee. It provides pertinent information, training, and consultation that evaluators will need for their assigned responsibilities. The agenda of the meeting may cover some or all of the following items in addition to those the chair or the staff member may suggest:

- Introduction of committee members and a discussion of assignments and responsibilities.
- Review of the responsibilities of the chair and the staff member.
- Review of the responsibilities of the On-Site Reaffirmation Committee.
- Review of the *Principles*, the institution’s Compliance Certification, the initial Report of the Reaffirmation Committee as prepared by the Off-Site Reaffirmation Committee, the institution’s Focused Report (if applicable), and the institution’s Quality Enhancement Plan.
- Discussion of the compliance issues that need to be addressed by the On-Site Reaffirmation Committee.
- Analysis of the QEP and strategies for its review.
- Review of the committee’s schedule, including the times for completing certain tasks.

ON-SITE REAFFIRMATION COMMITTEE

- Instructions for writing the final report, including using terminology for writing recommendations and other advisory comments regarding compliance and for reporting the committee's assessment of the acceptability of the QEP.
- Suggestions for facilitating the work of the committee.
- Discussion of the institution's accreditation status.
- Information regarding housing, transportation, conference facilities, computer support, organization of the institution's resource room, and other topics related to the logistics of the on-site visit.
- Review of format and times for the exit conferences.

Committee members are expected to:

- Use professional judgment and maintain integrity in their role on the committee.
- Maintain confidentiality. Except for participating in deliberations within committee meetings or in other discussions with committee members, the chair, or the staff, evaluators should not discuss the evaluation of the institution being reviewed at any time – before, during, or after the on-site visit.
- Function as a team by striving to be helpful to other members.
- Note and communicate information that may contribute to the evaluation of the institution whether or not the information pertains to their area of responsibility.
- Acknowledge that there will be several acceptable ways for an institution to address the QEP and compliance.
- Rely on the collective judgment of the committee members to form the basis for action by committee members. Most committees operate by consensus, although the majority will rule in any action taken.
- Concentrate on being accurate and fair in their findings and observations.

Reviewing Branch Campuses, Off-Campus Instructional Sites, and Distance Learning

The On-Site Reaffirmation Committee's comprehensive review of the institution will include – if applicable – a visit to all branch campuses operated by the institution, as well as a sampling of off-campus instructional sites and distance learning/correspondence courses. The purpose of the visit is to determine if the institution is in compliance with the *Principles of Accreditation* regarding selected elements related to such things as personnel; physical facilities; library and learning resources; technology; financial resources; access to student support programs, services, and activities; institutional planning; and institutional effectiveness. Members of the review committee assigned to conduct a physical or virtual visit (as appropriate) to these sites will provide their findings to the larger committee; all decisions about compliance and any formal recommendations are the purview of the committee as a whole. Evaluators may find the following SACSCOC documents helpful in conducting these reviews: [Resource Manual](#) (Appendix C: *Guidelines for Addressing Off-Campus Instructional Sites*), [Guidelines for Addressing Distance Education and Correspondence Courses](#), and [Guidelines for the Evaluation of Distance Education \(Online Learning\)](#).

Assessing the Quality Enhancement Plan

The QEP describes a carefully designed and focused course of action that addresses one or more critical issues related to enhancing student learning and/or success. The QEP should complement the institution's ongoing integrated institution-wide planning and evaluation process and is not intended to replace the processes described in Core Requirement 7.1 (*Institutional planning*). On the contrary, the topic or issue identified for the QEP should evolve from these existing processes, as well as from other issues stemming from the institution's internal reaffirmation review.

The On-Site Reaffirmation Committee may be providing the initial external review of the institution's QEP. Committee members are responsible for determining whether the institution has demonstrated compliance with **all** of the elements of Standard 7.2. Evaluators also have the opportunity to provide consultative advice that may help the institution strengthen the QEP initiated and implemented by the institution. Evaluators are encouraged to review the excellent discussion of the QEP and its components under Standard 7.2 in the *Resource Manual* as they prepare to review an institutional QEP.

Committee members should receive the institution's QEP at the same time they receive the Focused Report. SACSCOC does not prescribe a particular format for the QEP document, but the plan should address all of the components of the standard. The On-Site Reaffirmation Committee will evaluate the QEP based on whether the institution demonstrated compliance with the following:

- The institution's QEP has a **topic** identified through its ongoing, comprehensive planning and evaluation processes;
- The institution's QEP has **broad-based support** of institutional constituencies;
- The institution's QEP focuses on improving specific **student learning outcomes and/or student success**;
- The institution's QEP **commits resources** to initiate, implement, and complete the QEP; and
- The institution's QEP includes a **plan to assess achievement**.

All On-Site Reaffirmation Committee members are expected to review the institution's QEP. Everyone is also assigned to review and assist in creating the narrative for one facet of the QEP. Where two evaluators are assigned to the same section of the report on the QEP, they need to establish their own plan for ensuring that all of the relevant issues are addressed in the text. As is the case with the draft compliance narratives, primary reviewers should complete and submit a draft of their QEP section to the committee chair before arriving for the visit. These drafts will probably need revision during the committee's visit, but their prior submission will greatly facilitate the committee's review and timely completion of the Report.

The QEP Lead Evaluator is responsible for guiding the committee's review of the institution's QEP. Often, this begins before the committee arrives on campus, as the QEP Lead Evaluator provides initial questions to guide the committee's review. The QEP Lead Evaluator should also take responsibility for soliciting and organizing salient questions from other reviewers on the committee to guide the committee in its analysis of the QEP before and during the visit. Finally, the QEP Lead Evaluator is responsible for editing the draft QEP report during the committee's on-site deliberations and leading/facilitating the discussion of the QEP during the exit conference.

Listed below are some questions that an evaluator might use when evaluating an institution's QEP. The questions are guidelines only – *not a check list* – and are meant to be of assistance.

1. Topic of the QEP
 - Has the institution provided evidence that the QEP topic arises from the institution's planning process?
 - Has the institution documented the process for developing and selecting the topic?
 - Is the selection of the topic supported by evaluation and analysis of relevant data?
2. Broad-based support
 - Were institutional constituencies included in the topic selection process as appropriate?
 - Do faculty, staff, students, governing board members, and community partners appear knowledgeable about the QEP as appropriate?
 - Do stakeholders appear to support the plan as it moves toward implementation?
3. Focus on student learning outcomes and/or student success
 - Does the QEP define the specific student learning outcomes and/or student success indicators to be enhanced?
 - Does the QEP include appropriate strategies to enhance those outcomes and/or indicators?
 - Are the criteria for achieving success in enhancing those outcomes and/or indicators appropriately defined and stated?
4. Committed resources
 - Does the QEP identify sufficient human and fiscal resources to initiate, implement, and sustain the plan?
 - Do those resources appear to be realistic?
 - Is there sufficient evidence of an institutional commitment?
5. Assessment plan
 - Does the QEP include appropriate direct and indirect measures to assess the identified outcomes and/or indicators?
 - Does the QEP assign appropriate responsibility for collecting and analyzing data?
 - Does the QEP identify those responsible for taking appropriate action based on the analysis of assessment data?

Report

The Report of the Reaffirmation Committee incorporates the narrative and findings from both the Off- and On-Site Reaffirmation Committees. The Report of the Off-Site Reaffirmation Committee includes preliminary findings of "Compliance," "Non-Compliance," or "Not Applicable." The On-Site Reaffirmation Committee – following its review of the institution's Focused Report and any on-campus interviews – makes the final judgment of compliance for the Report of the Reaffirmation Committee. The preliminary findings are removed, and the committee propagates a recommendation for those standards it considers still to be non-compliant. The final Report retains the Off-Site Reaffirmation Committee's narrative, and the On-Site Reaffirmation Committee adds narrative reflecting the further information gleaned through the Focused Report, other documents, and on-site interviews.

As noted previously, each committee member will be assigned primary writing responsibility for one or more standards. Evaluators are also likely to be assigned secondary responsibility for reviewing one or more standards. The primary reviewer should form a preliminary opinion as to

the persuasiveness of the institution’s case for compliance and then consult with the secondary reviewer(s). Most of the time, this consultation results in a consensus to be shared with the other members of their committee in a conference call or executive session during the visit. Based on the ensuing discussion, the entire committee usually reaches consensus regarding compliance with the standards under review.

When the committee decides that the institution has failed to demonstrate compliance with a standard and propagates a recommendation (as discussed above), the primary reviewer is responsible for providing narrative in the Report that enables the institution to understand the context and the rationale for the formal recommendation. In composing the narrative supporting the recommendation, evaluators should:

- Ensure that the narrative supporting these judgments is sufficiently clear and specific as to inform the institution of the issues it will need to address in its response.
- Word the supporting narrative using the least possible negative words and statements. For example, rather than writing, “The institution does not use the results of assessment to improve its programs and services,” they should write something like, “The committee was unable to find evidence that the institution uses the results of assessment to improve its programs and services.”
- Avoid using judgmental language, such as “Unfortunately or regrettably the institution does not use the results of assessments to improve its programs or services.” (See the SACSCOC document [Writing Comments for Committee Reports](#) for additional information.)

Exit Conference

The committee will present its findings to institutional representatives during the exit conference. These findings will include any recommendations related to standards for which the institution has not yet demonstrated compliance; the chair usually reads any recommendations without discussion. The conference also affords the committee the opportunity to share any consultative comments regarding the institution’s QEP. The QEP Lead Evaluator usually leads this section of the exit conference, and other committee members participate as appropriate. The QEP discussion is also the final opportunity for institutional representatives to ask clarifying questions about the committee’s comments.

After the on-site visit

As soon as possible after returning home, evaluators should mail a completed expense voucher to SACSCOC. The expense voucher must have an original signature, and the reimbursement request must include all original receipts.

The chair will email the draft report to committee members to give evaluators and SACSCOC staff an opportunity to provide timely feedback within one to two weeks following the visit. Within three to four weeks following the On-Site Reaffirmation Committee’s visit, the chair will send the institution a draft of the committee report to review for factual errors. The institution is instructed not to respond to the committee’s judgments at this time. The chair – in consultation with the assigned SACSCOC staff member – will determine whether changes should be made in the report based on the institution’s review of factual errors and will make any revisions that are justified. The chair will send the revised report to the SACSCOC staff member. The SACSCOC staff

member's office will send the final report to the institution along with instructions regarding any response to the committee's findings.

The institution is required to respond to all recommendations cited in the Report of the Reaffirmation Committee. The institution's response to these recommendations should be detailed, comprehensive, and explain thoroughly the actions taken by the institution to ensure compliance with all appropriate standards. The institution's response and copies of its Quality Enhancement Plan are due in SACSCOC office no later than the date specified by SACSCOC staff member assigned to the institution, usually five months after the committee's visit is concluded.

Role and Responsibilities of the Committee Chair

The chair of the committee provides the leadership for the On-Site Reaffirmation Committee. The chair is responsible for organizing and managing the work of the committee and is the primary contact person as evaluators prepare for and participate in the on-site visit.

Before the visit

Committee chairs should:

- Consult with SACSCOC staff to discuss:
 - Timing of initial contact with the institution. Sometimes the institution's CEO may initiate contact; other times, the chair may have to take the lead.
 - Issues the committee is likely to encounter prior to and during its review.
 - Who will be responsible for emailing documents to the committee members (Information Outline, Writing Assignments, etc.).
 - The institution's policies on reimbursing expenses, including alcoholic beverages.
 - How and when reviews of distance learning and off-campus instructional sites will be conducted.
- Review draft committee documents provided by SACSCOC staff and suggest any appropriate changes.
- Send an email to the committee members to review the purpose of the committee, the focus of its review, and to confirm primary and secondary writing assignments. Share expectations regarding their preparation for the review. As soon as conference calls have been scheduled, inform committee members of those dates and times. Set a date by which committee members need to email their drafts before arriving for the visit.
- Email or call the institution's accreditation liaison to confirm logistics of the visit, including any preparations that need to be made regarding the review of off-campus instructional sites.
- Plan to arrive prior to the arrival of the committee to review the institution's "readiness" for the committee's visit.
- Schedule one or more conference calls with the committee to review the committee's tasks and assess the committee's readiness for the visit.

During the visit

Committee chairs should:

- Ensure that the committee's discussions are thoughtful, candid, open, professional, and collegial.

- Monitor the committee’s schedule during the visit and communicate with the institution any committee requests that may arise.
- Guide committee members – particularly those with little or no experience – to apply the standards in the context of professional judgment and commonly accepted practices.
- Guide the committee to produce a report with clear language and findings. Lead committee members to reach consensus on the language of the report, especially on the precise language of any recommendations.
- Plan to finish the draft of the report by the final evening of the visit.
- Approach the visit in the best spirit of collegiality, with the interests of SACSCOC and the institution at the forefront. Integrity of the process is key.
- Maintain strict confidentiality and require the same of the committee members.
- Work closely with committee members as they formulate their professional judgments or have questions about issues.
- Maintain communication with the institution’s CEO as the committee’s work progresses. This will include previewing the exit conference before leaving campus on the last full day of the visit. It should also include meeting with the CEO immediately before the exit conference.
- Maintain the committee’s focus on major issues during executive sessions rather than getting bogged down in “minor” matters. The chair’s leadership of the committee during its executive sessions is the fine art of balancing time, making certain that each person has the opportunity to contribute to the discussion and analysis without revisiting points already discussed.
- Ensure that any formal recommendations made by the committee are germane to the standard(s) and do not prescribe a specific course of action on the part of the institution.
- Complete the draft of the committee’s report. Ensure that the narrative provides evidence that the committee has exercised appropriate diligence and conducted a reasonable and responsible review of the information provided by the institution. Ensure that the report provides the reader with an informed understanding of the committee’s professional judgments regarding the institution’s compliance with all standards.

After the visit

Committee chairs should:

- Finalize the draft Report of the Reaffirmation Committee. Make necessary edits for format, style, and accuracy.
- Email a draft of the report to committee members and the SACSCOC staff member for their final review, asking for a quick response. Once any corrections have been received and the final draft is completed, email the Report to the institution’s CEO and Accreditation Liaison, asking that the institution review the Report to identify any errors of fact. If any factual errors are noted by the institution, consult with the SACSCOC Staff member. Once the Report is complete, email it to the SACSCOC staff member.
- Submit an expense voucher with original receipts.
- Submit lists of those interviewed during the committee’s visit.
- Submit confidential evaluations of committee members.
- Maintain confidentiality and avoid any appearance of conflict of interest.

ON-SITE REAFFIRMATION COMMITTEE

- Provide an assessment of the institution's response to any formal recommendations. The institution's response will be emailed to the chair following its receipt by SACSCOC (approximately five months following the visit). The chair represents the On-Site Reaffirmation Committee at that point, completing an evaluation form. That evaluation is included among the materials provided to the Committee on Compliance and Reports that will review the institution during one of the SACSCOC Board of Trustees' meetings in either June or December.

SACSCOC Staff

The staff member assigned to the institution will be available on site as a resource for the committee. One of the functions of the staff is to serve as the liaison between the Off-Site Reaffirmation Committee and the On-Site Reaffirmation Committee. The primary role of the staff member is to facilitate the work of the committee. Evaluators are encouraged to talk with the assigned staff person regarding any questions about *The Principles of Accreditation*, the institution's QEP, the institution's Compliance Certification, the findings of the Off-Site Reaffirmation Committee, the Focused Report, the documents supporting the institution's compliance and QEP, Commission procedures, or the logistics of the visit. Because the staff is knowledgeable about the institution, she or he will be helpful in clarifying the reaffirmation process as it relates to the institution under review. The email addresses of the chair, the staff member, and the committee members will be included in the roster of committee members received from SACSCOC. Staff members provide assistance and information to committees; they do not participate in the final decisions of committees regarding compliance.

Review by SACSCOC Board of Trustees

A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the Report of the Reaffirmation Committee and the response of the institution to the committee's report. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and will make a decision regarding the institution's accreditation and any follow-up activities that it requires of the institution. The Board of Trustees makes decisions regarding accreditation status in June and in December each year.

(Figure 2)

On-Site Reaffirmation Committee Process and Timeline			
Action	Timing	Responsible	Completed
Choose/Reserve Chairs	12 months prior to visit	SACSCOC	<input type="checkbox"/>
Check with institution for chair COI	12 months prior to visit	SACSCOC	<input type="checkbox"/>
Invite chair	11 months prior to visit	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	9 months prior to visit	SACSCOC	<input type="checkbox"/>
Verify/Affirm Institutional Summary	6 months prior to visit	Institution	<input type="checkbox"/>
Generate Institutional Summary	6 months prior to visit	SACSCOC	<input type="checkbox"/>
Complete Visit Information	5 months prior to visit	Institution	<input type="checkbox"/>
Complete Information Outline	4 months prior to visit	SACSCOC	<input type="checkbox"/>
Finalize Committee Roster	4 months prior to visit	SACSCOC	<input type="checkbox"/>
Information Outline to Committee members	3 months prior to visit	SACSCOC	<input type="checkbox"/>
Draft visit documents (writing assignments, itinerary, information outline, roster) to chair	3 months prior to visit	SACSCOC	<input type="checkbox"/>
Finalize visit documents	3 months prior to visit	Chair	<input type="checkbox"/>
Send visit documents to the committee	2 months prior to visit	SACSCOC	<input type="checkbox"/>
Schedule conference calls	2 months prior to visit	Chair	<input type="checkbox"/>
Submit Focused Report/QEP	42 days prior to visit	Institution	<input type="checkbox"/>
Insert drafts into Preliminary Report	1 week prior to visit	Chair	<input type="checkbox"/>
Compile draft report - including any recommendations	During the visit	Chair	<input type="checkbox"/>
Edit draft report and send to committee members	2 weeks following visit	Chair	<input type="checkbox"/>
Send draft report to institution for errors of fact	3 weeks following the visit	Chair	<input type="checkbox"/>
Review draft report for errors of fact	4 weeks following visit	Institution	<input type="checkbox"/>
Submit Final Reaffirmation Committee Report to staff	4 weeks following visit	Chair	<input type="checkbox"/>
Transmit Final Reaffirmation Committee Report to institution	5 weeks following visit	SACSCOC	<input type="checkbox"/>
Submit Response Report (responding to any recommendations) and current QEP	150 days following visit	Institution	<input type="checkbox"/>
Send Response Report to chair	150 days following visit	SACSCOC	<input type="checkbox"/>
Submit Chair's evaluation of Response Report	170 days following visit	Chair	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

SUBSTANTIVE CHANGE COMMITTEE

Charge

Substantive Change Committees are authorized by the SACSCOC Board of Trustees or the President of SACSCOC. Their purpose is to review an institution's continued compliance with *The Principles of Accreditation* following the acceptance of a prospectus or the approval of a substantive change. The composition of the committee and its charge may vary depending on the nature of the substantive change being reviewed. The Substantive Change Committee reviews an institution's compliance with appropriate standards and prepares a Report of the Substantive Change Committee to be submitted to the SACSCOC Board of Trustees.

The Substantive Change Committee is charged to:

- Evaluate and make determinations of the institution's ongoing compliance with selected standards of *The Principles of Accreditation* following the institution's implementation of the approved substantive change.
- Present the committee's findings and any recommendations to the leadership of the institution in an exit conference that concludes the committee's visit.
- Produce a report to be submitted to SACSCOC that includes the committee's recommendations and its observations.

To complete this assignment, evaluators will need to review carefully the compliance documentation provided by the institution and other supporting documents that may be available either prior to or during the committee's visit. Evaluators will also need to talk with individuals and groups of faculty, staff, and students during the visit to gather information to enable the committee to determine compliance with the standards under review.

Committee members should determine whether there is any conflict of interest, as defined in SACSCOC policies, in their service on the committee. If a conflict of interest might exist, committee members should notify the SACSCOC staff member assigned to the committee immediately. A list of circumstances that present a conflict of interest is included in information sent to those invited to serve on a committee (See SACSCOC policy [*Ethical Obligations of Evaluators*](#)).

Types and Composition of Substantive Change Committees

Level Change

SACSCOC accredits institutions at six levels, according to the highest degree the institution is authorized to confer (I=associate, II=baccalaureate, III=masters, IV=specialist, V=1-3 doctorates, VI=4 or more doctorates). When an institution wishes to offer educational programs at a different degree level, it must submit an application for review by the SACSCOC Board of Trustees. The Board's approval of that change includes authorizing a Substantive Change Committee to evaluate the institution's continued compliance with the *Principles* at its new level, with particular attention to the standards that relate directly to the new programs under review. At a minimum, the committee would usually include a chair, at least one academic reviewer in the appropriate area, and a librarian. Often additional academic reviewers might be added to the committee, as well as a reviewer with expertise in the area of institutional effectiveness.

Program Expansion

Often, institutions have received approval to expand their educational program offerings in an area that represents a significant departure from its current programs. In those cases, a Substantive Change Committee might be authorized as part of the approval process for those new program offerings. As with the level change, this committee would focus much of its attention on the institution's continued compliance with the standards appropriate to the provision and support of the new program(s). Such a committee would usually include a chair, at least one academic reviewer with appropriate disciplinary expertise, and a librarian. Additional committee members with expertise in academic affairs, student development, and institutional effectiveness might be included if warranted by the nature and scope of the change under review.

Merger/Consolidation/Acquisition

When two or more institutions wish to merge or consolidate – or when one institution intends to acquire all or part of another – they must submit an application which is reviewed by the SACSCOC Board of Trustees. If all the institutions involved are already accredited by SACSCOC, the Board may approve the merger and authorize a Substantive Change Committee to conduct a visit to the newly merged institution within six months after the effective date of the merger. In this case, the merger/consolidation has already been approved, and the Board's subsequent review of the Substantive Change Committee's Report would determine continued compliance with the standards.

If one or more of the institutions involved is not currently accredited by SACSCOC, the Board may accept the merger prospectus and authorize a Substantive Change Committee to visit the merged institution within six months after the effective date of the merger. In this case, the Board's subsequent review of the Substantive Change Committee's Report would result in the approval or disapproval of the merger, as well as determining the accredited institution's continued compliance with the standards. This subtle difference will likely have no real impact on the review of the institution, but it may play a role in conversations between the committee and institutional representatives.

These committees will be larger than most Substantive Change Committees, since the committee will be reviewing the institution's compliance with more standards. Such committees will usually include a chair, a CEO, two or more academic reviewers, and reviewers in the areas of institutional effectiveness, student services, library and learning resources, and finance. Additional academic reviewers may be included if the nature and scope of the resulting institution's academic programs warrants such an addition.

Substantive Change Committees reviewing a merger/consolidation/acquisition conduct what amounts to a comprehensive review of the resulting institution – with the exception of reviewing a Quality Enhancement Plan. Therefore, any branch campuses and a sampling of any off-campus instructional sites (approved to offer 50% or more of an educational program) operated by the resulting institution will be visited as part of the committee's review. If the resulting institution operates one or more off-campus instructional sites at an international location, at least one of those sites will be included in the sample to be visited. The committee will also review any distance learning programs and/or correspondence courses as part of its review.

The purpose of the visit is to determine if the institution is in compliance with the *Principles of Accreditation* regarding selected elements related to such things as personnel; physical facilities; library and learning resources; technology; financial resources; access to student support programs, services, and activities; institutional planning; and institutional effectiveness. Members of the review committee assigned to conduct a physical or virtual visit (as appropriate) to these sites will provide their findings to the larger committee; all decisions about compliance and any formal recommendations are the purview of the committee as a whole. Evaluators may find the following SACSCOC documents helpful in conducting these reviews: [Resource Manual](#) (Appendix C: *Guidelines for Addressing Off-Campus Instructional Sites*), [Guidelines for Addressing Distance Education and Correspondence Courses](#), and [Guidelines for the Evaluation of Distance Education \(Online Learning\)](#).

New Sites/Electronic Expansion

Many institutions have expanded their number of off-campus instructional sites approved to offer 50% or more of an educational program. By SACSCOC policy, an institution's first two off-campus instructional sites must receive a Substantive Change Committee's visit within six months after the institution initiates course offerings following SACSCOC approval of the site. That review examines the institution's continued compliance with appropriate *Principles*, giving particular attention to that site and the program(s) offered there. This type of committee will usually include a chair and an academic reviewer. Other reviewers are often added – especially in academic areas, library/learning resources, and student services – if the complexity of the site and its educational programs warrants such additions.

The purpose of the visit is to determine if the institution is in compliance with the *Principles of Accreditation* regarding selected elements related to such things as personnel; physical facilities; library and learning resources; technology; financial resources; access to student support programs, services, and activities; institutional planning; and institutional effectiveness. Members of the review committee assigned to conduct a physical or virtual visit (as appropriate) to these sites will provide their findings to the larger committee; all decisions about compliance and any formal recommendations are the purview of the committee as a whole. Evaluators may find the following SACSCOC documents helpful in conducting these reviews: [Resource Manual](#) (Appendix C: *Guidelines for Addressing Off-Campus Instructional Sites*), [Guidelines for Addressing Distance Education and Correspondence Courses](#), and [Guidelines for the Evaluation of Distance Education \(Online Learning\)](#).

Branch Campuses

Some institutions operate sites that possess a level of independence which meets the SACSCOC and USDE definition of a “branch campus” (see [Reaffirmation of Accreditation and Subsequent Reports](#)). By SACSCOC policy, all such branch campuses will receive a Substantive Change Committee's visit within six months after SACSCOC approval and initiation of educational programs. Due to the independent nature of these campus sites, the committee will conduct a relatively comprehensive review of the institution's continued compliance with the *Principles* related to that site's operation. The committee usually includes a chair, a CEO, and reviewers in the areas of institutional effectiveness, academic administration, library/learning resources, student services, and finances. SACSCOC staff may add additional reviewers (often in academic areas) to the committee if the size and complexity of the branch campus warrants the addition.

Logistical Arrangements

SACSCOC will reimburse evaluators for travel, meals, and lodging expenses and an amount for miscellaneous business-related expenses incurred during the committee's visit. Please note that some institutions may choose to cover committee meals and lodging expenses directly. Evaluators should complete and submit the expense voucher as soon as possible after the conclusion of the visit.

Although evaluators are responsible for making their own travel arrangements, SACSCOC recommends the use of its travel agency to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

Committee members will receive information regarding the beginning and ending times for the activities of the on-site review. They should plan their arrival and departure times to allow them to be present for all activities and to complete all assignments. If branch campuses or off-campus instructional sites are part of the visit, evaluators may be asked to arrive early to conduct those reviews.

Documents

Approximately six weeks prior to the Substantive Change Committee's visit, the institution will send committee members and SACSCOC staff member the following materials:

- Documentation for the Substantive Change Committee (based on the appropriate template), including all necessary documentation,
- Institutional Summary Form for SACSCOC Reviews, including identification of a technical support person if some of the materials are also available electronically, and
- Additional material that may be requested by SACSCOC staff or the chair.

SACSCOC staff or the committee chair will email the following materials to committee members:

- Committee Roster
- Committee Writing Assignments
- Information Outline (including such details as the dates of the visit, times of first and final meetings of the committee, lodging arrangements, and contact information)
- Itinerary for the visit

Activities

Prior to the Visit

Prior to the visit, evaluators should:

- Make certain they have received the materials listed above. If one or more items were missing, committee members should call or email the office of the staff member assigned to the committee immediately.
- Read all materials appropriate to their assignment that are made available to them prior to the committee's visit.

- Become familiar with the institution's history, mission, programs, and services. This information will provide the context for an assessment of the institution's compliance with the standards.
- Participate in conference calls and email exchanges with the chair, staff member, and other committee members. They should exchange information with other committee members regarding pre-visit activities. Evaluators should copy the chair and the staff member on all emails so that they can check the progress everyone is making in preparing for the visit and determine whether intervention is needed.
- Become familiar with their role and assignment as well as the roles and assignments of other committee members. In addition, although they may be assigned to review compliance with certain standards according to their area of expertise, committee members are expected to work collaboratively on-site to resolve compliance issues as expeditiously as possible.
- Read those sections of the institution's Documentation for the Substantive Change Committee that pertain to their assignment and consult with secondary reviewer(s), if appropriate, to determine whether the documentation is sufficiently substantial and convincing to warrant finding the institution in compliance with those requirements and standards they are assigned to review.
- Determine any additional documentation needed to review on campus or the groups or individuals to be interviewed if evaluators are unable to determine compliance based on the information submitted.
- Prepare notes about the reasons for their judgment regarding compliance or non-compliance after reviewing the institution's report and be prepared to share with the committee.
- Prepare a selective list of groups and individuals to be interviewed regarding the institution's compliance and work with the chair to coordinate the final request for interviews and an interview schedule.
- Prepare and submit electronically a draft of their writing assignments to the committee chair prior to arriving for the visit.

During the Visit

The Organizational Meeting

The organizational meeting will provide the first opportunity to meet formally with the other committee members. This meeting serves as a general orientation for the committee. It provides pertinent information, training, and consultation that evaluators will need for their assigned responsibilities. The agenda of the meeting may cover some or all of the following items in addition to those the chair or the staff member may suggest:

- Introduction of committee members and a discussion of assignments and responsibilities.
- Review of the responsibilities of the chair and the staff member.
- Review of the responsibilities of the Substantive Change Committee.
- Review of *The Principles of Accreditation* and the institution's Documentation for the Substantive Change Committee.
- Review of the committee's schedule, including the times for completing certain tasks.
- Instructions for writing the final report, including using terminology for writing recommendations and other advisory comments regarding compliance.

- Suggestions for facilitating the work of the committee.
- Discussion of the institution's accreditation status.
- Information regarding housing, transportation, conference facilities, computer support, organization of the institution's resource room, and other topics related to the logistics of the visit.
- Review of format and times for the exit conferences.

Assessment of Compliance

The Substantive Change Committee's responsibility is to determine an institution's compliance with the standards under review. Every reviewer will be assigned primary responsibility for reviewing and writing responses to multiple standards. In addition, each reviewer will be assigned as a secondary reviewer for other standards. Professional judgment and collegial collaboration are vital to the success of the committee's review.

Evaluators who have been assigned primary responsibility to make a preliminary judgment about the institution's compliance with one or more standards should:

- Determine whether compliance with one or more standards can be determined based solely on the narrative and supporting documents submitted by the institution prior to the visit. If that is the case, primary and secondary reviewers should be prepared to present the draft findings at the committee's initial executive session.
- Identify those applicable standards for which concerns remain. In these cases, reviewers may find it helpful to identify remaining questions and include those with the draft narratives submitted to the committee chair beforehand. Such an exercise often aids committee members to remain focused during the committee's on-site visit.
- Conduct interviews as necessary to corroborate, clarify, or interpret the documentation presented by the institution to support its determination of compliance with the standards under review.
- Consult with the secondary reviewer(s), other committee members, the chair, and SACSCOC staff to determine whether their conclusions reflect generally what others are finding.
- Edit the initial draft report submitted to the chair prior to the visit.

If the committee decides that the institution has failed to demonstrate compliance with one or more of the standards under review, the committee will propagate a recommendation for each such standard. Such recommendations reflect the decision of the entire committee. They should be preceded by a narrative that provides a clear rationale for the committee's decision. Recommendations should not prescribe how the institution should come into compliance, and they should reflect the committee's reasonable professional judgment. That is, if an institution has made a persuasive argument for compliance with a part or parts of the standard in question, the recommendation should focus on that part of the standard about which questions remain.

Narratives preceding formal recommendations should:

- Use the least possible negative words and statements. For example, rather than writing, "The institution does not use the results of assessment to improve its programs and services," evaluators should write something like, "The committee could find no evidence that the institution uses the results of assessment to improve its programs and services."

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- Avoid using judgmental language, such as “Unfortunately or regrettably the institution does not use the results of assessments to improve its programs or services.” (See the SACSCOC document [Writing Comments for Committee Reports](#) for further guidance.)
- Avoid using prescriptive language that might limit the institution’s flexibility to demonstrate compliance with the standard in question.

There are two scheduled exit conferences at the conclusion of the committee’s visit:

- A discussion among the institution’s CEO, the chair, and the SACSCOC staff dealing with a summary of the committee’s report.
- A formal presentation of the committee’s recommendations among the SACSCOC staff, the chair, the institution’s leadership team, and members of the committee.

Rarely, there may be an optional session relaying the committee's report that includes the committee chair, SACSCOC staff, the institution’s leadership team, other institution personnel the CEO wishes to invite, and any committee members who can be available. Attendance of committee members is optional. The institution’s CEO is expected to inform SACSCOC staff in advance if such a session is planned.

Evaluators are expected to:

- Use professional judgment and maintain integrity.
- Maintain confidentiality. Except for participating in deliberations within the committee meetings or in other discussions with committee members, the chair, or the staff, evaluators should not discuss the evaluation of the institution being reviewed at any time – before, during, or after the visit.
- Function as a team by striving to be helpful to other members of the committee.
- Note and communicate information that may contribute to the evaluation of the institution whether or not the information pertains to their area of responsibility.
- Acknowledge that there will be several acceptable ways for the institution to demonstrate compliance.
- Rely on the collective judgment of the committee members to form the basis for action by the committee. The goal is consensus, but the majority will rule in any action taken.
- Concentrate on being accurate and fair in findings and observations.

Report

The committee will write a Substantive Change Committee Report to submit to SACSCOC. This Report will indicate the *Principles* with which it finds the institution to be in compliance and those with which it judges the institution to be in non-compliance. For each finding of *non-compliance*, the committee will compose a recommendation with supporting narrative to guide the institution in developing its response to the recommendation.

After the Visit

As soon as possible after returning home, evaluators should mail a completed expense voucher to SACSCOC. The expense voucher must have an original signature, and the reimbursement request must include all original receipts.

The committee chair will leave the visit with a complete draft report, including the actual text of any recommendations propagated by the committee. Committee members should receive an electronic copy of the draft report from the chair with an opportunity to provide timely feedback within one to two weeks following the visit. Within three to four weeks following the Substantive Change Committee's visit, the chair will email the institution an electronic draft of the committee report. The institution will review the draft for factual errors; this is not an opportunity to respond to the committee's judgments. The chair – in consultation with the assigned SACSCOC staff member – will determine whether changes should be made in the report based on the institution's report of factual errors and will make any revisions that are justified. The chair will email an electronic version of the revised report to the SACSCOC staff member. The SACSCOC staff member's office will send the final report to the institution along with instructions regarding its response to the committee's findings.

The institution must respond to every formal recommendation cited in the Report of the Substantive Change Committee. The institution's response should be detailed, comprehensive, and explain thoroughly the actions taken by the institution to ensure compliance with all appropriate standards. The institution's response is due in SACSCOC office no later than the date specified by SACSCOC staff member assigned to the institution, normally five months after the committee's visit is concluded.

Role and Responsibilities of the Committee Chair

Before the Visit

The chair should consult with SACSCOC staff member to discuss:

- The timing of the initial contact with the institution. (In some instances, the CEO at the institution may initiate the call to you; in others, the chair may initiate the contact.)
- Issues the committee is likely to encounter prior to and during its review
- Who will be responsible for sending the Information Outline and Committee Writing Assignments to the committee members.
- Who will be responsible for requesting additional information from the institution (such as requests for information from committee members).
- The institution's policies on reimbursing expenses including alcoholic beverages.
- How reviews of distance learning and off-campus sites will be conducted, if necessary.

The chair should email the committee members to:

- Review the purpose of the committee, the focus of its review, and to confirm their individual responsibilities and assignments.
- Share expectations regarding preparations for the review. Share dates and times of any scheduled conference call(s) prior to the visit.

The chair should schedule at least one conference call with the committee to:

- Review the committee's purpose(s) and tasks, and to assess the committee members' readiness for the review.
- Lead the committee to discuss the focus of the visit, the overall task of the committee, review the writing assignments, and start identifying additional information that the committee members will need to review as they conduct their analysis.

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- Set a due date for the substantive change report drafts to be submitted by evaluators before the actual visit.
- Prompt evaluators to share any preliminary compliance findings and remaining questions.

The chair should consult with institutional representatives to:

- Determine logistics of visit (schedules, transportation, accommodations, support, and other arrangements).
- Communicate issues and/or concerns the committee might have regarding any aspect of the institution's demonstrated compliance with the standards under review. During these conversations, the chair should consider how they will be addressed on campus.

During the Visit

The committee chair is critical in ensuring thoughtful, candid, and open discussions among the committee members. The chair establishes the context within which the committee functions, and demonstrates for the committee the professional, collegial and confidential manner of its work.

The chair should:

- Monitor the committee's schedule during the visit, and advise the institution of any committee requests that arise; make sure the committee has ample time for interviews.
- Guide committee members (particularly those with little or no experience) to apply the standards in the context of professional judgment.
- Guide the committee to produce a report with clear language and findings; lead committee members to reach consensus on the language of the entire report, particularly any recommendations that are included.
- Plan to finish the draft report by the final evening of the visit.
- Approach the visit in the best spirit of collegiality, with interests of SACSCOC and the institution at the forefront; integrity of the process is key.
- Maintain strict confidentiality; remind committee members to destroy any materials related to the institution.
- Work closely with committee members as they formulate their professional judgments or have questions about issues.
- Maintain communication with the institution's CEO to discuss issues bearing on the committee's review.
- Maintain focus on major issues during executive sessions rather than getting bogged down in "minor" matters. The chair's leadership of the committee during its executive sessions is the fine art of balancing time – making certain that each person is able to contribute to the discussion and analysis without rehashing points already discussed.
- Complete the draft of the committee's report. Ensure that the narrative provides evidence that the committee has exercised due diligence in conducting a reasonable and responsible review of the information provided by the institution and accessible to the committee.
- Pay close attention to the language used to frame any formal recommendations. Make certain that the narratives provide a clear understanding of the basis of the committee's judgments.
- Ensure that committee's report provides the reader with an informed understanding of the committee's professional judgments regarding the institutions' compliance with all applicable requirements within the Principles as well as the basis for those judgments.

After the Visit

Following the committee's on-site visit, the chair should:

- Submit an expense voucher to the SACSCOC office, including mileage and necessary receipts.
- Review the draft report and send it to committee members for their review; ask for their comments within a reasonable time period (1-2 weeks).
- Send the edited report to the institution's Chief Executive Officer asking for any corrections of factual errors; ask for a response within a reasonable time period (1-2 weeks).
- Submit the final report of the committee to SACSCOC staff member's office electronically; include ratings and interview lists.
- Finalize the Substantive Change Committee report. Once the committee concludes its review, the chair's task is to edit the draft report to ensure that it accurately reflects the collective judgments of the Substantive Change Committee. It is especially important that the chair pay close attention to the quality of the analysis and the clarity of the report. If it contains any statements of non-compliance, make certain that the narrative provides clear and concise justification for any formal recommendations, and that the recommendations are clearly related to a specific standard of the *Principles of Accreditation*. Be mindful that the purpose of a recommendation is to identify what an institution needs to do in order to establish its compliance with an accreditation requirement without being prescriptive.
- Forward an electronic draft of the report to the staff member and to committee members, asking for immediate response. After the draft is completed, email it to the institution for identification of factual errors. Once the institution returns the draft with any factual errors, consult with the assigned SACSCOC staff member, complete the final report, and email an electronic copy of the report to the staff member along with the chair's evaluations of committee members.
- Maintain confidentiality and avoid any appearance of conflict of interest.

SACSCOC Staff

The SACSCOC staff member assigned to the institution will usually be available on site as a resource for the committee; however, a staff member is not required to accompany every Substantive Change Committee. The primary role of the staff member is to facilitate the work of the committee. Committee members are encouraged to talk with the assigned staff person regarding any questions about *The Principles of Accreditation: Foundations for Quality Enhancement*, the documents supporting the institution's compliance with the standards under review, SACSCOC policies and procedures, or the logistics of the visit. Because the staff is most thoroughly knowledgeable about the institution, she or he will be helpful in clarifying the process as it relates to the institution you are reviewing. The email addresses of the chair, the staff member, and the committee members will be included in the roster of committee members received from SACSCOC.

SACSCOC staff members provide assistance and information to committees. They do not participate in the final decisions of committees regarding compliance or recommendations.

Review by SACSCOC Board of Trustees

A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the Report of the Substantive Change Committee and the response of the institution to the committee's report. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and will make

a decision regarding the institution’s accreditation and any follow-up activities that it requires of the institution. The Board of Trustees makes decisions regarding accreditation status in June and in December of each year.

(Figure 3)

Substantive Change Visit Timeline and Process			
Action	Timing	Responsible	Completed
Schedule Site Visit	6-9 months before visit	SACSCOC	<input type="checkbox"/>
Invite chair	6-9 months before visit	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	5 months before visit	SACSCOC	<input type="checkbox"/>
Complete Visit Information	5 months before visit	Institution	<input type="checkbox"/>
Complete Information Outline	4 months before visit	SACSCOC	<input type="checkbox"/>
Finalize Committee Roster	4 months before visit	SACSCOC	<input type="checkbox"/>
Information Outline to Committee members	4 months before visit	SACSCOC	<input type="checkbox"/>
Draft visit documents (writing assignments, itinerary, information outline, roster) to chair	3 months before visit	SACSCOC	<input type="checkbox"/>
Finalize visit documents	3 months before visit	Chair	<input type="checkbox"/>
Send visit documents to the committee	8 weeks before visit	SACSCOC	<input type="checkbox"/>
Schedule conference calls	8 weeks before visit	Chair	<input type="checkbox"/>
Submit Documentation for ? Committee Visit	42 days before visit	Institution	<input type="checkbox"/>
Insert drafts into Preliminary Report	7 days before visit	Chair	<input type="checkbox"/>
Compile draft report - including any recommendations	Visit	Chair	<input type="checkbox"/>
Edit draft report and send to committee members	2 weeks after visit	Chair	<input type="checkbox"/>
Send draft report to institution for errors of fact	3 weeks after visit	Chair	<input type="checkbox"/>
Review draft report for errors of fact	4 weeks after visit	Institution	<input type="checkbox"/>
Submit Final Substantive Change Committee Report to staff	4 weeks after visit	Chair	<input type="checkbox"/>
Transmit Final Substantive Committee Report to institution	5 weeks after visit	SACSCOC	<input type="checkbox"/>
Submit Response Report (responding to any recommendations)	150 days after visit	Institution	<input type="checkbox"/>
Send Response Report to chair	150 days after visit	SACSCOC	<input type="checkbox"/>
Submit Chair's evaluation of Response Report	170 days after visit	Chair	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

SPECIAL COMMITTEE

Charge

A Special Committee may be authorized by SACSCOC Board of Trustees, any of its Standing Committees, or by SACSCOC President to visit an institution and conduct a focused review of circumstances that the Board of Trustees or the President determines to be accreditation related with compliance concerns. The principal role of the Special Committee is to judge whether the institution meets the requirements of *The Principles of Accreditation* in terms of the circumstances that prompted the authorization of the Special Committee visit and to determine continued compliance with the *Principles*, and/or to obtain information for SACSCOC. The committee's report and any formal recommendations are forwarded to the SACSCOC Board of Trustees for review and action.

The Special Committee is charged (1) to conduct an on-site review of specific standards of the *Principles* cited in the notification letter from the President of SACSCOC in order to determine an institution's compliance; (2) when appropriate, to extend the initial focus if any evidence of additional accreditation-related concerns that come to the committee's attention; (3) to make final determinations of compliance with the specific standards under review; (4) to present the committee's findings and recommendations to the leadership of the institution at the conclusion of the meeting; and (5) to write a report and forward its findings to the SACSCOC Board of Trustees to enable a decision regarding the institution's accreditation status.

Evaluators are expected to review carefully the institution's response to the letter of notification from the SACSCOC President and any supporting documentation, as well as any other documents that may be available prior to the visit. Evaluators will also interview individuals and groups of faculty, staff, and students to gather information to enable them to evaluate the institution's compliance with the specified standards of *The Principles of Accreditation*.

Composition

A Special Committee will be of sufficient size to review the issues and to make a determination regarding the institution's compliance with *The Principles of Accreditation*. The SACSCOC staff member assigned to the institution may expand the size of the committee depending upon: (1) the size, scope, and complexity of the institution and/or (2) the number of significant compliance issues the Special Committee must review. A SACSCOC staff member is required to accompany all Special Committees.

Evaluators should determine whether there is any conflict of interest, as defined in SACSCOC policies, in their service on the committee. If a conflict of interest might exist, committee members should notify the SACSCOC staff member assigned to the committee immediately. A list of circumstances that present a conflict of interest is included in information sent to those invited to serve on a committee (See SACSCOC policy [*Ethical Obligations of Evaluators*](#)).

Logistical Arrangements

SACSCOC will reimburse evaluators for travel, meals, lodging expenses, and an amount for miscellaneous business-related expenses incurred during the visit. Evaluators should complete and submit an expense voucher as soon as possible after the conclusion of the visit.

Although evaluators are responsible for making their own travel arrangements, SACSCOC asks that its travel agency be used to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

Committee members will receive an information outline which details the logistics of the visit. The beginning and ending times for the activities of the review are included on this form (See Appendix for a typical schedule). Evaluators should plan their arrival and departure times to allow participation in these activities and to complete all assignments.

Documents

Approximately four weeks prior to the Special Committee visit, the institution will send you and the SACSCOC staff member the following materials:

- Monitoring Report (if committee was authorized by the Board of Trustees) or
- Materials making the case for compliance (if authorized by the President of SACSCOC)

SACSCOC staff will email the following materials to each committee member:

- Memorandum outlining charge to the committee,
- Committee roster,
- Committee writing assignments (may be included in the Memorandum),
- Information Outline form that includes dates of the visit, times of the first and final meetings of the committee, lodging arrangements, suggestions regarding transportation, and the travel agency that handles flight arrangements for SACSCOC, and
- Other pertinent materials as determined by SACSCOC.

Activities

Prior to the visit

Evaluators will be expected to:

- Confirm receipt of the necessary materials from the institution and SACSCOC.
- Consult this *Handbook*, review *The Principles of Accreditation*, and review the materials submitted by the institution, and any other materials appropriate to their assignment that are made available prior to the visit.

Since many of the materials from or about the institution may be accessible through electronic means, evaluators will be able to access them prior to the visit. Evaluators who have trouble accessing electronic materials are authorized to call or email the technical staff member at the institution for assistance. Any other questions about the institution or about materials submitted by the institution should be addressed to the chair, SACSCOC staff member, or institutional personnel who may be able to clarify information that will facilitate understanding and the committee's review of the institution. Evaluators should never discuss the institution's compliance directly with institutional personnel.

- Participate in conference calls and email exchanges with the chair, staff member, and other committee members. Evaluators should exchange information with other committee members regarding pre-visit activities. They should copy the chair and the staff member on all emails so

that they can check the progress everyone is making in preparing for the Special Committee's visit and determine whether any intervention is needed.

- Become familiar with their role and assignment as well as the roles and assignments of other committee members. In addition, although an evaluator may be assigned primary responsibility to review compliance with certain *Principles*, according to an area of expertise, committee members are expected to work collaboratively to resolve compliance issues.
- Determine any additional documentation needed to review on campus, as well as the groups or individuals to be interviewed based on the information provided.
- Write a draft narrative for the sections assigned to them prior to the visit and submit such narratives to the committee chair by the expected deadline. It is far easier to edit a narrative during the visit than it is to compose the narrative in the short amount of time the committee is on campus.

During the visit

The Organizational Meeting

The organizational meeting provides the first opportunity to meet formally with the other committee members. This meeting serves as a general orientation for the committee. It provides pertinent information, training, and consultation that evaluators need for their assigned responsibilities. The agenda of the meeting may include the following items in addition to those the chair or the staff member may suggest:

- Introduction of committee members and a discussion of assignments and responsibilities.
- Review of the responsibilities of the chair and the staff member.
- Review of the responsibilities of the Special Committee.
- Discussion of the compliance issues that need to be addressed by the committee.
- Review of the committee's schedule, including the times for completing certain tasks.
- Instructions for writing the final report, including terminology for writing recommendations regarding compliance
- Suggestions for facilitating the work of the committee.
- Discussion of the institution's accreditation status.
- Information regarding housing, transportation, conference facilities, computer support, organization of the institution's resource room, and other topics related to the logistics of the on-site visit.
- Review of format and times for the exit conferences.

Report

The Report of the Special Committee is usually focused on the institution's compliance with specific standards of the *Principles*. The Special Committee has an opportunity and responsibility to conduct interviews designed to verify and clarify the institution's compliance, and the Report of the Special Committee should reflect the committee's findings based on its review of the Monitoring Report and on-site interviews. The exercise of professional judgment on the part of evaluators is crucial in the committee's capacity as advisory to the SACSCOC Board of Trustees.

Narratives should be clear and encompass the committee's entire review. Evaluators should avoid using judgmental language, such as "Unfortunately or regrettably the institution does not use the results of assessments to improve its programs or services." Narratives should also use the least

possible negative words and statements. For example, rather than stating, “The institution does not use the results of assessment to improve its programs and services,” the narrative might state something like, “The committee could find no evidence that the institution uses the results of assessment to improve its programs and services.”

Like any other evaluation committee, the Special Committee may determine that the institution has not demonstrated its compliance with one or more of the standards under review. In that case, the committee will propagate one or more recommendations. Any committee recommendation(s) should be clearly related to the standard and supported by cogent narrative that identifies the remaining issue(s) of non-compliance without being prescriptive.

Exit Conference

The committee will present its findings on the last day of the visit to the institution’s CEO and any other institutional personnel the CEO wishes to be present. Recommendations will be read without discussion.

After the Visit

As soon as possible after returning home, evaluators should mail a completed expense voucher to SACSCOC. The expense voucher must have an original signature, and the reimbursement request must include all original receipts.

The committee chair will leave the visit with a complete draft report, including the precise text of any recommendations propagated by the committee. Committee members should receive an electronic copy of the draft report from the chair with an opportunity to provide timely feedback within one week following the visit. Within two weeks following the Special Committee’s visit, the chair will email the institution an electronic draft of the committee report. The institution will review the draft for factual errors; this is not an opportunity to respond to the committee’s judgments. The chair – in consultation with the assigned SACSCCO staff member – will determine whether changes should be made in the report based on the institution’s report of factual errors and will make any revisions that are justified. The chair will email an electronic version of the revised report to the SACSCOC staff member. The SACSCOC staff member’s office will send the final report to the institution along with instructions regarding its response to the committee’s findings.

The institution may choose to respond in writing to the recommendations cited in the Report of the Special Committee. The institution’s response to these recommendations should be detailed, comprehensive, and explain thoroughly any actions taken by the institution to ensure compliance with all appropriate standards. The institution’s response is due in SACSCOC office no later than the date specified by SACSCOC staff member assigned to the institution. By SACSCOC policy, the institution’s response is due no later than ten (10) working days before the meeting of the SACSCOC Board of Trustees.

Role and Responsibilities of the Committee Chair

The timing of a Special Committee is vitally important. In most instances, the committee visit will occur shortly before SACSCOC’s Annual Meeting in December or its Summer Meeting in June. Consequently, the chair should be prepared to finalize the committee’s report quickly. As is the

case with all committees, the chair needs to work especially closely with SACSCOC staff throughout all phases of a Special Committee review.

Prior to the Visit

- Work with Commission staff to provide materials to committee members and determine the parameters of the visit (committee responsibility, timing of initial meeting and exit conference, etc.)
 - Outline of Information for a Committee Visit
 - Committee Roster
 - Writing Assignments and charge to the committee
 - Itinerary for the visit
- Receive materials from the institution
 - Institution's Monitoring Report focused on standards in question
 - Audit
 - Questions regarding technology needs and visit preferences
- Make travel arrangements and inform institutional contact
- Review *The Principles of Accreditation* and the Monitoring Report
- Lead pre-visit conference call (two [2] weeks before visit); lead committee members to discuss compliance status after review of report; discuss possible questions for on-site review. Discuss the focus of the visit, the overall task of the committee, review the writing assignments, start identifying additional information the committee members will need to review as they conduct their analysis and set a deadline date for the special committee report draft due to the chair before the actual visit. Review the preliminary analysis on non-compliant issues and any other concerns, review the schedule, and make sure everyone is set on travel and visit details.
- Request any further information from the institution arising from the conference call

During the Visit

- The chair's work is critical to ensure thoughtful, candid, and open discussions among the committee members. The chair establishes the context within which the committee functions, and demonstrates for the committee the professional, collegial and confidential manner of its work.
- Ensure that committee members sign and date the Conflict of Interest form.
- Monitor the committee's schedule during the visit and communicate with the institution any committee requests that arise; be sure the committee has ample time for interviews.
- Guide committee members to apply the standards in the context of professional judgment.
- Guide the committee to produce a report with clear language and findings; lead committee members to reach consensus on the language of the entire report, particularly any recommendations that are included.
- Plan to finish draft report by final evening of the visit.
- Approach the visit in the best spirit of collegiality, with interests of SACSCOC and institution at the forefront; integrity of the process is key.
- Maintain strict confidentiality; remind committee members to destroy any materials related to the institution.
- Work closely with committee members as they formulate their professional judgments or if there are questions about issues.

SPECIAL COMMITTEE

- Maintain communication with the institution's CEO to discuss issues bearing on the committee's review.
- Maintain focus on major issues during executive sessions rather than getting bogged down in "minor" matters. Leadership of the committee during its executive sessions is the fine art of balancing time – making certain that each person is able to contribute to the discussion and analysis without rehashing points already discussed.
- Complete the draft of the committee's report. Ensure that narrative provides evidence that the committee has exercised appropriate diligence in conducting a reasonable and responsible review of the information provided by the institution and accessible to the committee. Pay particular attention to the language of any formal recommendations. Make certain the narratives provide a clear understanding of the basis of the committee's judgments. Ensure that committee's report provides the reader with an informed understanding of the committee's professional judgments regarding the institutions' compliance with all applicable standards of *Principles* as well as the basis for those judgments.

After the Visit

- Submit expense voucher to SACSCOC office, including mileage and necessary receipts. Enclose committee member ratings and interview lists.
- Finalize the draft Special Committee report. Once the committee concludes its review, edit the draft report developed during the visit to ensure that it accurately reflects the collective judgments of the Special Committee. It is especially important to pay close attention to the quality of the analysis and the clarity of the report. Narratives must include clear and concise justification for any formal recommendation(s), and the recommendations themselves must be clearly related to one of the standards of the *Principles of Accreditation*.
- Email the draft Report to committee members for their review and request comments within a reasonable time period (usually no more than one [1] week).
- Email the edited report to the institution's CEO asking for any corrections of errors of fact; ask for a response within a reasonable time period (usually one [1] week). If any errors are identified by the institution, consult with the assigned SACSCOC Staff member.
- Submit the final report of the committee via email to the SACSCOC staff member, and copy the appropriate administrative assistant.
- Maintain confidentiality and avoid any appearance of conflict of interest.

Review by SACSCOC Board of Trustees

A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the institution's Monitoring Report, the Report of the Special Committee, and the institution's response to the committee's report. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and will make a decision regarding the institution's accreditation and any follow-up activities that it requires of the institution. The Board of Trustees makes decisions regarding accreditation status twice each year – in June and in December.

(Figure 4)

Special Committee Visit Timeline and Process			
Action	Timing	Responsible	Completed
Choose chairs	Following BoT meeting	SACSCOC	<input type="checkbox"/>
Schedule Site Visit	3 months before visit	SACSCOC	<input type="checkbox"/>
Invite chair	3 months before visit	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	3 months before visit	SACSCOC	<input type="checkbox"/>
Complete Visit Information	3 months before visit	Institution	<input type="checkbox"/>
Complete Information Outline	3 months before visit	SACSCOC	<input type="checkbox"/>
Finalize Committee Roster	8 weeks before visit	SACSCOC	<input type="checkbox"/>
Information Outline to Committee members	8 weeks before visit	SACSCOC	<input type="checkbox"/>
Draft visit documents (writing assignments/committee memo, itinerary, information outline, roster) to chair	8 weeks before visit	SACSCOC	<input type="checkbox"/>
Finalize visit documents	8 weeks before visit	Chair	<input type="checkbox"/>
Send visit documents to the committee	8 weeks before visit	SACSCOC	<input type="checkbox"/>
Schedule conference calls	8 weeks before visit	Chair	<input type="checkbox"/>
Submit Monitoring Report/Institutional Special Response	28 calendar days before visit	Institution	<input type="checkbox"/>
Insert drafts into Preliminary Report	7 days before visit	Chair	<input type="checkbox"/>
Compile draft report - including any recommendations	Visit	Chair	<input type="checkbox"/>
Edit draft report and send to committee members	1 week after visit	Chair	<input type="checkbox"/>
Send draft report to institution for errors of fact	2 weeks after visit	Chair	<input type="checkbox"/>
Review draft report for errors of fact	3 weeks after visit	Institution	<input type="checkbox"/>
Submit Final Special Committee Report to staff	4 weeks after visit	Chair	<input type="checkbox"/>
Transmit Final Special Committee Report to institution	4 weeks after visit	SACSCOC	<input type="checkbox"/>
Submit Response Report (responding to any recommendations)	10 working days prior to BoT meeting	Institution	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

CANDIDACY COMMITTEE

Charge

Candidacy Committee visits are authorized if the institution's Application for Membership documents compliance with the applicable *Principles*. For the majority of applicant institutions, authorization of a Candidacy Committee's visit results from the review of the revised Application by one of the Committees on Compliance and Reports, a recommendation to the Executive Council, and subsequent authorization by the SACSCOC Board of Trustees at either its June or December meeting. For some Applicants, however, whose revised Applications for Membership are extremely strong, the SASCOC President may choose to authorize the Candidacy Committee's visit.

The Candidacy Committee is responsible for verifying compliance with the requisite accreditation standards through interviews with campus personnel, observation, and review of documents on site. As part of its review, the committee will visit all of the institution's branch campuses and off-campus instructional sites (approved to offer 50% or more of an educational program) and, where applicable, will address issues stemming from Third-Party comments. The Candidacy Committee will present its findings to the institution during an Exit Conference and record its findings in the Report of the Candidacy Committee. This report, along with the institutional response to any findings of non-compliance, is then reviewed by the SACSCOC Board of Trustees, which will determine whether to award Candidacy to the institution and authorize an Accreditation Committee.

Reviewing Compliance

The work of the Candidacy Committee begins with the committee's review of the updated Application for Membership six weeks prior to the visit. During the committee's conference call approximately two to three weeks prior to the visit, evaluators identify additional documentation they wish to examine and begin to construct a list of individuals to interview. The chair of the committee forwards the list of additional documentation to the institution so that the documents can either be sent to the committee members immediately or be assembled for review at the hotel or on campus. The chair also forwards to the institution the requests for interviews so that a preliminary schedule for the visit can be drafted.

Visiting Off-Campus Instructional Sites

For most institutions with few off-campus sites, review of these locations is scheduled for the morning of Day Two of the visit. For institutions with too many off-campus sites to be visited in a single morning, review of some locations will also be scheduled for the morning of Day One. For institutions with many off-campus locations or off-campus sites abroad, a review of some of these locations may be scheduled earlier than the week of the Candidacy Committee's visit to the main campus. In all instances, the off-campus site will be visited by more than one member of the committee to confirm compliance with the requisite standards at each of the sites.

Reviewing Branch Campuses, Off-Campus Instructional Sites, and Distance Learning

The Candidacy Committee's comprehensive review of the institution will include – if applicable – a visit to all branch campuses operated by the institution, as well as a sampling of off-campus instructional sites and distance learning/correspondence courses. The purpose of the visit is to

determine if the institution is in compliance with the *Principles of Accreditation* regarding selected elements related to such things as personnel; physical facilities; library and learning resources; technology; financial resources; access to student support programs, services, and activities; institutional planning; and institutional effectiveness. Members of the review committee assigned to conduct a physical or virtual visit (as appropriate) to these sites will provide their findings to the larger committee; all decisions about compliance and any formal recommendations are the purview of the committee as a whole. The committee will also make a determination regarding the institution's administrative, fiscal, and long-range planning capabilities to add additional sites in the future. Evaluators may find the following SACSCOC documents helpful in conducting these reviews: [Resource Manual](#) (Appendix C: *Guidelines for Addressing Off-Campus Instructional Sites*), [Guidelines for Addressing Distance Education and Correspondence Courses](#), and [Guidelines for the Evaluation of Distance Education \(Online Learning\)](#).

Reviewing Third-Party Comments

Prior to scheduled Candidacy Committee visits, SACSCOC posts on its website a call for third-party comments. For fall visits, third-party comments are due on the August 10 prior to the visit; for spring visits, third-party comments are due on the January 10 prior to the on-site visit. Any substantive comments received by the date specified are forwarded to the institution within ten working days of their receipt. The institution is then invited to prepare a written response to the comments for review during the committee's visit. For additional information, see the SACSCOC policy [Third-Party Comment by the Public](#).

Conducting the Exit Conference

The last responsibility of the Candidacy Committee is to conduct an Exit Conference with the CEO and a few key institutional personnel. At that time, the committee discusses its findings of compliance and non-compliance, along with a sampling of its other observations and comments. The SACSCOC staff member outlines the timetable for transmittal of the committee's report to the institution and describes the process for submitting appropriate documents to the SACSCOC Board of Trustees for the Board's action regarding the granting of Candidacy status.

Composition

A Candidacy Committee typically includes six members: the chair and evaluators in the areas of (1) faculty qualifications and educational programs, (2) library/learning resources, (3) student support services, (4) institutional effectiveness, and (5) finances. The Commission staff member, who creates a new Candidacy Committee for each institution being reviewed, may expand the size of the committee if the institution has numerous off-campus sites that must be visited or if the institution is large or complex. All Candidacy Committee members are expected to maintain complete confidentiality regarding documents and discussions pertaining to all phases of the review. Committee service to both SACSCOC and the institution under review ends when the Report of the Candidacy Committee is completed, and members are prohibited from advising or consulting with the institution on any issues cited in the report.

When evaluators accept positions on Candidacy Committees, they are asked to attest to having no conflict of interest with the institution. SACSCOC policy [Ethical Obligations of Evaluators](#) at www.sacscoc.org provides examples of conflict of interest. That same policy establishes an expectation that individuals with a vested interest in the institution scheduled for review will

refrain from attempting to influence an evaluator's judgment or otherwise influence the upcoming visit. Applicant institutions should refrain from contacting members of the Candidacy Committee for reasons other than providing necessary information about logistical arrangements for the visit, distributing the required institutional materials for the review, or responding to inquiries for additional materials or clarification about materials provided.

Although the applicant institution's SACSCOC staff member is available on site to facilitate the work of the committee, the staff member does not function as a member of the Candidacy Committee and does not make the determinations of institutional compliance that will be recorded in the Report of the Candidacy Committee. The SACSCOC staff member will, however, listen closely to deliberations among committee members to help ensure that the SACSCOC standards and policies are consistently applied. Part of the staff member's role is to provide historical information on similar institutions, as well as procedural and substantive advice on how Commission policies and standards have been interpreted and could be applied to the current situation.

Logistical arrangements

SACSCOC will reimburse evaluators for their travel, meals, and lodging expenses and an amount for miscellaneous business-related expenses incurred during the visit. Evaluators should complete and submit an expense voucher to SACSCOC as soon as possible after the conclusion of the visit.

Although evaluators are responsible for making their own travel arrangements, SACSCOC asks that its travel agency be used to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

Committee members will receive an information outline which details the logistics of the visit. The beginning and ending times for the activities of the review are included on this form. Evaluators should plan their arrival and departure times to allow participation in all activities and to complete all assignments. If the institution operates branch campuses or off-campus instructional sites which need to be reviewed as part of the visit, evaluators may be asked to arrive early in order to conduct those reviews.

Documents

Six weeks prior to the on-site visit, institutions should send to each member of the Candidacy Committee and to SACSCOC staff member electronic copies of the following materials:

- Updated Application for Membership,
- Catalog(s),
- Institutional Summary Form Prepared for SACSCOC Reviews,
- Organization chart,
- Most recent audit, and
- Written response to third-party comments, if applicable.

Commission staff will email the following materials to committee members:

- Committee Roster,
- Committee Writing Assignments,

- Information Outline (including the dates of the visit, times of first and final meetings of the committee, lodging arrangements, and contact information),
- Guidelines for Writing Committee Comments,
- Itinerary for the visit, and
- Request for Justifying and Documenting Faculty Qualifications

Activities

Prior to the Visit

Evaluators should:

- Verify receipt of all necessary materials. Evaluators should call or email the committee chair or the SACSCOC staff member's office regarding missing or incomplete materials.
- Review this *Handbook, The Principles of Accreditation*, the institution's Compliance Certification, and any other materials appropriate to their assignment made available prior to the committee's visit. Should evaluators determine that they cannot access electronic materials, they are authorized to call or email the technical staff member at the institution for assistance. Any other questions about the institution or about materials submitted by the institution should be directed to the chair, staff member, or institutional personnel who may be able to clarify information. Evaluators should not discuss whether the institution is in compliance directly with institutional personnel.
- Become familiar with the institution's history, mission, programs, and services. This information will provide the context for an assessment of the institution's compliance with the accreditation standards.
- Participate in conference calls and email exchanges with the chair, staff member, and other committee members, and exchange information with other committee members regarding pre-visit activities. The chair and the staff member should be copied on all emails so that they can check the progress everyone is making in preparing for the visit and determine whether their intervention is needed.
- Become familiar with their role and assignment as well as the roles and assignments of other committee members. In addition, although they may be assigned to review compliance with certain standards according to their area(s) of expertise, committee members are expected to work collaboratively on-site to resolve compliance issues as expeditiously as possible.
- Read those sections of the institution's Compliance Certification that pertain to their assignment and consult with secondary reviewer(s), if appropriate, to determine whether the documentation is sufficient and convincing to warrant finding the institution in compliance with those standards.
- Determine the additional documentation needed to review on campus or the groups or individuals to interview if they are **unable** to determine compliance based on the information submitted.
- Prepare notes about reasons for judgment regarding compliance or non-compliance if they are **able** to make a decision after reviewing the institution's report, and be prepared to share with the committee.
- Prepare a list of groups and individuals to be interviewed on-site. Work with the chair to coordinate a final request for interviews and an interview schedule.
- Prepare and submit electronically draft narrative(s) for primary writing assignments to the committee chair prior to arriving for the visit.

During the Visit

The Organizational Meeting

This meeting provides the first opportunity for a formal meeting of the committee and serves as a general orientation for the committee. It provides pertinent information, training, and consultation that evaluators need for their assigned responsibilities. The agenda of the meeting may cover the following items in addition to those the chair or the staff member may suggest:

- Introduction of committee members and a discussion of assignments and responsibilities.
- Review of the responsibilities of the chair and the staff member.
- Review of the responsibilities of the Candidacy Committee.
- Review of *The Principles of Accreditation* and the institution's Compliance Certification.
- Review of the committee's schedule, including the times for completing certain tasks.
- Instructions for writing the final report, including using terminology for writing recommendations and other advisory comments regarding compliance.
- Suggestions for facilitating the work of the committee.
- Discussion of the institution's accreditation status.
- Information regarding housing, transportation, conference facilities, computer support, organization of the institution's resource room, and other topics related to the logistics of the visit.
- Review of format and times for the exit conference.

Exit Conference

The Exit Conference is designed as a dialogue between two small groups of individuals – the Candidacy Committee and the institution's leadership. Often, the institution is represented by only the CEO and the Accreditation Liaison. Occasionally, the CEO invites other institutional leaders to attend. The committee conveys its findings orally; no paper or electronic copy of the committee's draft report is provided at this time.

Prior to the Exit Conference, the committee chair and the SACSCOC staff member meets with the CEO to preview the committee's findings. At the Exit Conference, the chair reports on any findings of non-compliance in Part II of the report, and committee members may share a sampling of other observations from Part III. To ensure that the institution understands issues of non-compliance presented by the committee, the institutional leadership may ask questions of clarification. The SACSCOC staff member then reviews the timeline for finalizing the committee's draft report and the remaining steps in preparing the institution for review by the SACSCOC Board of Trustees.

Members of a Candidacy Committee are expected to:

- Exercise professional judgment and maintain integrity.
- Maintain confidentiality. Except for participating in deliberations within committee meetings or in other discussions with committee members, the chair, or SACSCOC staff, evaluators should not discuss the evaluation of the institution being reviewed at any time before, during, or after the visit.
- Function as a team by striving to be helpful to other members of the committee.
- Note and communicate information that may contribute to the evaluation of the institution whether or not the information pertains to their area of responsibility.

- Remember that there will be several acceptable ways for the institution to demonstrate compliance.
- Rely on the collective judgment of the committee members to form the basis for action by the committee. The goal is consensus, but the majority will rule in any action taken.
- Concentrate on being accurate and fair in any findings and observations.

The SACSCOC staff member assigned to the institution will be available on-site as a resource for the committee. The primary role of the staff member is to facilitate the work of the committee. Evaluators are encouraged to consult with the assigned staff person regarding any questions about the *Principles of Accreditation*, the institution's Compliance Certification, Commission policies and procedures, or the logistics of the visit. Because the staff is knowledgeable about the institution, he or she will be helpful in clarifying the process as it relates to the institution under review. The email addresses of the chair, the staff member, and the committee members will be included in the Committee Roster received from SACSCOC.

SACSCOC staff members provide assistance and information to committees, but they do not participate in the final decisions of committees regarding compliance or recommendations.

Assessment of Compliance

The Candidacy Committee's responsibility is to make final determinations regarding an institution's compliance with the Core Requirements and other standards under review. Every evaluator will be assigned primary responsibility for reviewing and writing responses to multiple standards. In addition, each evaluator will be assigned as a secondary reviewer for other standards. Professional judgment and collegial collaboration are vital to the success of the committee's review.

In the process of forming a preliminary judgment about the institution's compliance with one or more of the standards, evaluators should:

- Conduct a pre-visit review of the institution's narrative and supporting documentation, confer with the secondary reader(s), and submit a draft narrative to the Chair prior to the committee's arrival on campus. If evaluators determine that the institution has demonstrated compliance based on the review of the Compliance Certification, the draft narrative should summarize the institution's persuasive case and the evaluators' analysis. If evaluators are unable to determine that the institution has demonstrated compliance with the standard based on the review of the Compliance Certification, the draft narrative should capture the substance of the institution's case and any remaining questions. The draft narrative provides the foundation for evaluators' questions during the committee's visit and the language of the final committee draft.
- Review any additional documentation presented by the institution to support its claim of compliance during the committee's visit. Remember that it is the institution's responsibility to establish compliance. It is the committee's responsibility to determine whether the institution has established compliance.
- Conduct interviews as necessary to corroborate, clarify, or interpret the documentation presented by the institution to support its determination of compliance with the standards under review.

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- Engage with the other members of the committee and SACSCOC staff to ensure consistency and application of professional judgment in reaching conclusions about the institution's compliance with the standards under review.
- Make any necessary edits to the initial draft report submitted to the chair prior to the visit.
- Participate in committee discussions to reach consensus about the language of any recommendation(s) to be included in the report.

Report

The Report of the Candidacy Committee consists of three primary sections:

- Section I (Overview and Introduction to the Institution) briefly describes the institution by focusing on such issues as its history, control, enrollment, and primary student characteristics. In so doing, it lays a foundation for the evaluative comments that follow.
- Section II (Assessment of Compliance) opens with the committee's evaluation of the institution's compliance with the Principle of Integrity (1.1), which is not addressed by the institution in its revised Application for Membership. Section II then addresses each of the *Principles* addressed in the revised Application. Under each is a brief narrative in which the Candidacy Committee identifies the primary evidence of compliance that it reviewed and, where necessary, describes missing documentation and/or weaknesses in the institution's argument for compliance. For each of the standards, the committee's narrative closes with a direct statement of the committee's finding of compliance or non-compliance.
- Section III (Observations and Comments) provides both validations of institutional strengths and consultative advice on quality enhancement and/or on preparing the Compliance Certification for the Accreditation Committee.

All findings and comments in the report reflect the collective professional judgment of the entire committee. Two appendices record the roster of the members of the Candidacy Committee and details about the off-campus sites visited and/or distance learning programs reviewed.

After the Visit

By the end of the visit, the committee's report is complete, but a copy of the draft is not given to institutions during the Exit Conference. In general, the chair edits the draft report and emails it to the committee and to SACSCOC staff member for their final review the week after the visit. Before finalizing the report, the chair then emails a copy to the institution for review of its factual accuracy. The institution should review the factual references in the report (such as dates, names of campuses and committees, position titles, enrollment numbers, and financial figures) and confirm their accuracy or provide corrections. Institutions must limit their review to representations of fact and avoid suggesting changes to the committee's interpretation and analysis of those facts.

After the chair has consulted with the assigned SACSCOC Staff member and incorporated any final edits and factual corrections, the final copy of the Report of the Candidacy Committee emailed to the institution's SACSCOC staff member, who then transmits a hard copy to the institution.

Role and Responsibilities of the Candidacy Committee Chair

The leadership of the Candidacy Committee is provided by the chair of the committee. The chair is responsible for organizing and managing the work of the committee and is the primary contact person as evaluators prepare for and participate in the visit. Evaluators should discuss with the chair any matters of concern or problems they encounter as they prepare for and perform their duties as a member of the committee. Any email communication should also copy the SACSCOC staff member.

Before the Visit

Consult with the SACSCOC staff member to discuss:

- The timing of the initial contact with the institution. (In some instances, the CEO at the institution may initiate a call; in others, the chair may initiate the contact.)
- Issues the committee is likely to encounter prior to and during its review.
- Who will be responsible for sending Information Outline and Committee Writing Assignments to the committee members.
- Who will be responsible for requesting additional information from the institution (such as requests for information from committee members).
- The institution's policies on reimbursing expenses including alcoholic beverages.
- How reviews of distance learning and off-campus sites will be conducted.

Email or call the committee members to:

- Review the purpose of the committee, the focus of its review, and to confirm their individual responsibilities and assignments.
- Schedule one or more conference calls prior to the visit.

Email or call the institutional liaison to determine logistics of visit (schedules, transportation, accommodations, support and other arrangements)

Schedule at least one conference call with the committee to:

- Discuss the focus of the visit and the overall task of the committee.
- Review the writing assignments.
- Start identifying additional information that the committee members will need to review as they conduct their analysis.
- Set a deadline date for drafts of writing assignments due to the chair before the visit.
- Review the schedule, and make sure everyone is set on travel and visit details.

Consult with institutional representatives regarding:

- Requests for further documentation.
- Requests for interviews during the visit.
- Review of off-campus instructional sites and/or distance education courses.
- Modifications to the committee's itinerary.

During the Visit

- Ensure thoughtful, candid, and open discussions among the committee members. Establish a context which enables professional, collegial and confidential committee work.
- Ensure that all committee members sign and date the Conflict of Interest form.

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- Monitor the committee's schedule during the visit and communicate with the institution any committee requests that arise; be sure the committee has ample time for interviews.
- Guide committee members (particularly those with little or no experience) to apply the standards in the context of professional judgment.
- Guide the committee to produce a report with clear language and findings; lead committee members to reach consensus on the language of the entire report.
- Plan to finish draft report by final evening of the visit.
- Approach the visit in the best spirit of collegiality, with interests of SACSCOC and the institution at the forefront; integrity of the process is key.
- Maintain strict confidentiality; remind committee members to destroy any materials related to the institution.
- Work closely with committee members as they formulate their professional judgments or have questions about issues.
- Maintain communication with the institution's CEO to discuss issues bearing on the committee's review.
- Maintain focus on major issues during executive sessions rather than getting bogged down in "minor" matters. Leadership of the committee during its executive sessions is the fine art of balancing time – making certain that each person is able to contribute to the discussion and analysis without rehashing points already discussed.
- Complete the draft of the committee's report. Ensure that the narrative provides evidence that the committee has exercised appropriate diligence in conducting a reasonable and responsible review of the information provided by the institution and accessible to the committee. Ensure that the committee's report provides the reader with an informed understanding of the committee's professional judgments regarding the institution's compliance with all applicable requirements within the *Principles* as well as the basis for those judgments.

After the Visit

- Submit expense voucher to COC office, including mileage and necessary receipts.
- Finalize the Report of the Candidacy Committee. Following the conclusion of the committee's review, edit the draft report developed during the visit to ensure that it accurately reflects the collective judgments of the Candidacy Committee. Pay careful attention to the quality of the analysis and the clarity of the report. If it contains any findings of non-compliance, make certain that the narrative provides clear and concise justification, and that the findings are clearly related to a specific accreditation requirement within the *Principles of Accreditation*.
- Email a draft of the report to the SACSCOC staff member and to committee members, asking for a quick review and response. After the draft is completed, email it to the institution's CEO and Accreditation Liaison for identification of errors of fact. Provide a clear timeline for the institution's response. If any factual errors are identified by the institution, consult with the assigned SACSCOC Staff member.
- Complete the final report and email to the staff member along with evaluations of committee members; include ratings and interview lists.
- Maintain confidentiality.

Review by SACSCOC Board of Trustees

A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the Report of the Candidacy Committee. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and will decide whether to award Candidacy and authorize an Accreditation Committee's visit. The Board of Trustees makes decisions regarding accreditation status twice each year – in June and in December.

(Figure 5)

Candidacy Committee Visit Timeline and Process			
Action	Timing	Responsible	Completed
Schedule Site Visit	6 months before visit	SACSCOC	<input type="checkbox"/>
Invite chair	6 months before visit	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	5 months before visit	SACSCOC	<input type="checkbox"/>
Complete Visit Information	5 months before visit	Institution	<input type="checkbox"/>
Complete Information Outline	4 months before visit	SACSCOC	<input type="checkbox"/>
Finalize Committee Roster	4 months before visit	SACSCOC	<input type="checkbox"/>
Information Outline to Committee members	3 months before visit	SACSCOC	<input type="checkbox"/>
Draft visit documents (writing assignments, itinerary, information outline, roster) to chair	3 months before visit	SACSCOC	<input type="checkbox"/>
Finalize visit documents	3 months before visit	Chair	<input type="checkbox"/>
Send visit documents to the committee	2 months before visit	SACSCOC	<input type="checkbox"/>
Schedule conference calls	2 months before visit	Chair	<input type="checkbox"/>
Submit Application for Membership	42 days before visit	Institution	<input type="checkbox"/>
Insert drafts into Preliminary Report	7 days before visit	Chair	<input type="checkbox"/>
Compile draft report - including any recommendations	Visit	Chair	<input type="checkbox"/>
Edit draft report and send to committee members	2 weeks after visit	Chair	<input type="checkbox"/>
Send draft report to institution for errors of fact	3 weeks after visit	Chair	<input type="checkbox"/>
Review draft report for errors of fact	4 weeks after visit	Institution	<input type="checkbox"/>
Submit Final Candidacy Committee Report to staff	4 weeks after visit	Chair	<input type="checkbox"/>
Transmit Final Candidacy Committee Report to institution	5 weeks after visit	SACSCOC	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

ACCREDITATION COMMITTEE

Charge

Like the Candidacy Committee, the Accreditation Committee is responsible for verifying compliance with the requisite standards and requirements through interviews with campus personnel, observation, and review of documents on site. As part of its comprehensive review, the Committee will visit any branch campuses and a sampling of the institution's off-campus instructional sites approved to offer 50% or more of an educational program. Where applicable, the Committee will address issues arising from Third-Party comments. The Accreditation Committee will present its findings to the institution during an Exit Conference and will record those comments in the Report of the Accreditation Committee, which will be reviewed by the SACSCOC Board of Trustees when it makes its decision to award Initial Accreditation, continue the institution in Candidacy, or remove the institution from Candidacy.

Composition of the Accreditation Committee

An Accreditation Committee typically includes nine members: the chair, three evaluators in the areas of faculty qualifications and educational programs, and one evaluator for each of the following areas: organization and administration, library, student support services, institutional effectiveness, and finances. The SACSCOC staff member, who identifies the Committee for each institution being reviewed, may expand the size of the committee if the institution has numerous off-campus sites that must be visited or if the institution is large and/or complex. None of the committee members may be from institutions in the same state as the institution being visited, nor will the Accreditation Committee include any of the individuals who had visited the institution as members of the Candidacy Committee. All committee members are expected to maintain complete confidentiality regarding documents and discussions pertaining to all phases of the review.

Committee members' service to SACSCOC and to the institution under review ends when the Report of the Accreditation Committee is completed, and they are prohibited from advising or consulting with the institution on any issues cited in the report. When evaluators accept positions on Accreditation Committees, they are asked to attest that they have no conflict of interest with the institution. Examples of conflict of interest may be found in the SACSCOC policy [*Ethical Obligations of Evaluators*](#). That same policy establishes an expectation that individuals with a vested interest in the institution scheduled for review will refrain from attempting to influence an evaluator's judgment or otherwise influence the upcoming visit. Candidate institutions should refrain from contact with members of the Accreditation Committee for reasons other than providing necessary information about logistical arrangements for the visit, distributing the required institutional materials for the review, or responding to inquiries for additional materials or clarification about materials provided.

Although the institution's SACSCOC staff member is available on site to facilitate the work of the committee, the staff member does not function as a member of the Accreditation Committee and does not make the determinations of institutional compliance that will be recorded in the Report of the Accreditation Committee. The SACSCOC staff member will, however, pay careful attention to deliberations among committee members to help ensure that SACSCOC standards and policies are consistently applied. Part of the staff member's role is to provide historical information on

similar institutions, as well as procedural and substantive advice on how SACSCOC policies and standards have been interpreted and could be applied to the current situation.

Logistical Arrangements

SACSCOC will reimburse evaluators for expenses related to travel, meals, and lodging, along with an amount for miscellaneous business-related expenses incurred during the visit. Evaluators should complete and submit the expense voucher to the SACSCOC as soon as possible after the conclusion of the visit.

Evaluators are responsible for making their travel arrangements, and SACSCOC requests that its travel agency be utilized to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

Evaluators will receive an information outline for the visit. This document will note the beginning and ending times for the activities of the committee's review. Evaluators should plan arrival and departure times to be present for all committee activities and to complete all assignments. If the institution operates branch campuses or off-campus instructional sites that need to be reviewed as part of the visit, evaluators may be asked to arrive early in order to conduct that review.

Documents

Six weeks prior to the on-site visit, evaluators and the SACSCOC staff member should receive electronic copies of the following materials from the institution:

- The signed Compliance Certification.
- Catalog(s).
- By-laws of the institution's Board.
- Institutional Summary Form Prepared for SACSCOC Reviews.
- Most recent audit. (The "most recent audit" refers to the most recently ended fiscal year prior to the due date of an institution's Compliance Certification.)
- Most recent financial aid audit, if applicable.
- Written response to any third-party comment, if applicable.

SACSCOC staff will email the following materials to committee members:

- Committee Roster.
- Committee Writing Assignments.
- Information Outline (including such details as the dates of the visit, times of first and final meetings of the committee, lodging arrangements, and contact information.
- Guidelines for Writing Committee Comments.
- Itinerary for the visit.
- Request for Justifying and Documenting Faculty Qualifications.

Activities

Before the visit

Prior to the committee's visit, committee members should:

- Make certain that they have all of the materials listed above. If one or more items are missing, email or call the office of the SACSCOC staff member assigned to the committee immediately.
- Review all documentation. If electronic materials cannot be accessed, email the technical staff member at the institution identified in the Information Outline. For any other questions about the institution or about materials submitted by the institution, email or call the chair, staff member, or institutional personnel who may be able to clarify information.
- Become familiar with the institution's history, mission, programs, and services. This information provides the context for assessment of the institution's compliance with the applicable *Principles*.
- Participate in conference calls and email exchanges in preparation for the committee's visit. Copy the chair and the SACSCOC staff member on all emails so that they can check the progress everyone is making in preparing for the visit and determine whether their intervention is needed.
- Become familiar with their role and assignment as well as the roles and assignments of other committee members. Committee members are expected to work collaboratively on-site to resolve compliance issues as expeditiously as possible.
- Read those sections of the institution's Compliance Certification that pertain to their writing assignment and consult with secondary reviewer(s), if appropriate, to determine whether the documentation is sufficiently substantial and convincing to warrant finding the institution in compliance with those requirements and standards.
- Determine the additional documentation needed to review on campus or the groups or individuals to be interviewed if they are unable to determine compliance based on the information submitted.
- Prepare notes about their reasons for judgment regarding compliance or non-compliance and be prepared to share with the committee.
- Prepare a selective list of groups and individuals to be interviewed on-site regarding the institution's compliance. Work with the chair to coordinate their final request for interviews.
- Request assistance from the chair in setting up an interview schedule in advance of the on-site visit of those groups and/or individuals they wish to interview.
- Prepare and submit electronically a draft of their writing assignments to the committee chair prior to arriving for the visit.

During the visit

Organizational Meeting

The organizational meeting will provide the first opportunity to meet formally with the chair and the other committee members. This meeting serves as a general orientation for the committee. It provides pertinent information, training, and consultation. The agenda of the meeting may cover the following items in addition to those the chair or the staff member may suggest:

- Introduction of committee members and a discussion of assignments and responsibilities.
- Review of the responsibilities of the chair and the staff member.
- Review of the responsibilities of the Accreditation Committee.
- Review of the *Principles of Accreditation* and the institution's Compliance Certification.
- Review of the committee's schedule, including the times for completing certain tasks.

- Instructions for writing the final report, including using terminology for writing recommendations and other advisory comments regarding compliance.
- Suggestions for facilitating the work of the committee.
- Discussion of the institution's accreditation status.
- Information regarding housing, transportation, conference facilities, computer support, organization of the institution's resource room, and other topics related to the logistics of the visit.
- Review of format and times for the exit conferences.

Reviewing Compliance

Although a portion of the Accreditation Committee's work includes re-examining the institution's compliance with the same *Principles* that were previously reviewed by the Candidacy Committee, the Accreditation Committee's review is separate from and independent of those portions of the initial accreditation process that preceded it. Candidate institutions should not assume that members of the Accreditation Committee have any specific knowledge of the institution stemming from any documents previously submitted to SACSCOC. Because the Accreditation Committee will not have received copies of the Application for Membership or the Report of the Candidacy Committee, it will base its review of the institution's compliance on the recently completed Compliance Certification, additional documentation provided by the institution just prior to or during the visit, and interviews with institutional staff during the on-site review.

Accreditation Committees make no assumptions about compliance with the standards that have been previously reviewed; rather, they focus on the level of compliance documented in the Compliance Certification and verified by the committee during the visit. Much of this work of the Committee begins six weeks prior to the visit. During the committee's conference call approximately two to three weeks prior to the visit, the evaluators identify additional documentation they wish to examine and begin to construct a list of individuals to interview. The chair of the Committee, who is the institution's primary contact for arranging the details of the upcoming visit, forwards that list of additional documentation to the institution so that the documents can either be sent to the committee members immediately or be assembled for review later at the hotel or on campus. The chair also forwards to the institution the requests for interviews so that a preliminary schedule for the visit can be drafted.

Visiting Off-Campus Sites

The SACSCOC staff member determines which off-campus sites the Accreditation Committee will visit. For most institutions with few off-campus sites, review of these locations is scheduled for the morning of Day Two. For institutions with too many off-campus sites to be visited in a single morning, review of some locations will also be scheduled for the morning of Day One. For institutions with many off-campus locations or off-campus sites abroad, a review of some of these locations may be scheduled earlier than the week of the Accreditation Committee's visit to the main campus.

In all instances, sites will be visited by more than one member of the committee to confirm compliance with the requisite requirements and standards at each of the locations. Whereas Candidacy Committees generally visit all off-campus sites, Accreditation Committees may visit a selection of off-campus sites. Since all locations, however, need to be participants in the initial

accreditation process, the institution should arrange for key personnel at sites not visited to be engaged in conversations with members of the Accreditation Committee – in person at the main campus or at one of the off-campus sites scheduled for a visit, through a conference telephone call, or via electronic conferencing.

Reviewing Branch Campuses, Off-Campus Instructional Sites, and Distance Learning

The Accreditation Committee's comprehensive review of the institution will include – if applicable – a visit to all branch campuses operated by the institution, as well as a sampling of off-campus instructional sites and distance learning/correspondence courses. The purpose of the visit is to determine if the institution is in compliance with the *Principles of Accreditation* regarding selected elements related to such things as personnel; physical facilities; library and learning resources; technology; financial resources; access to student support programs, services, and activities; institutional planning; and institutional effectiveness. Members of the review committee assigned to conduct a physical or virtual visit (as appropriate) to these sites will provide their findings to the larger committee; all decisions about compliance and any formal recommendations are the purview of the committee as a whole. The committee will also make a determination regarding the institution's administrative, fiscal, and long-range planning capabilities to add additional sites in the future. Evaluators may find the following SACSCOC documents helpful in conducting these reviews: [Resource Manual](#) (Appendix C: *Guidelines for Addressing Off-Campus Instructional Sites*), [Guidelines for Addressing Distance Education and Correspondence Courses](#), and [Guidelines for the Evaluation of Distance Education \(Online Learning\)](#).

Reviewing Third-Party Comments

Prior to scheduled visits, SACSCOC posts on its website a call for third-party comments. For fall visits, third-party comments are due on the August 10 prior to the visit; for spring visits, third-party comments are due on the January 10 prior to the on-site visit. If SACSCOC receives substantive comments by the date specified, they are forwarded to the institution within ten working days of their receipt. The institution is then invited to prepare a written response to the comments for review during the institution's on-site visit. For additional information, see SACSCOC policy [Third-Party Comment by the Public](#).

Exit Conference

The last on-site responsibility of the Accreditation Committee is to present its findings orally in an Exit Conference with key institutional personnel.

Report

Like the Report of the Candidacy Committee, the Report of the Accreditation Committee contains three primary sections.

- Part I (Overview and Introduction to the Institution) briefly describes the nature of the institution by focusing on such issues as its history, control, enrollment, and primary student characteristics, laying a foundation for the evaluative comments that follow.
- Part II (Assessment of Compliance) addresses each of the Core Requirements and standards, except for Standard 7.2 (*Quality Enhancement Plan*). Under each standard is a narrative describing the committee's analysis of the institution's compliance. Where compliance has not been fully documented, the narrative will point out the shortcoming(s)

and conclude with a recommendation identifying the issue of non-compliance and the need for submission of further documentation for review by the SACSCOC Board of Trustees. Recommendations must be tied directly to a standard.

- Part III (Observations and Comments) provides both validations of institutional strengths and consultative advice on enhancing quality. All findings and comments in the report reflect the collective professional judgment of the entire committee.

Three appendices capture (1) the roster of the Accreditation Committee, (2) the sites visited and distance learning programs reviewed, and (3) the Recommendations written by the committee. By the end of the visit, a draft of the Accreditation Committee's report is complete, but a hard copy of this draft is not given to institutions during the Exit Conference. Generally, the chair edits the draft report and emails it to the committee members and to the SACSCOC staff member for their final review the week after the visit. Following that review, the chair also emails a copy to the institution's CEO and Accreditation Liaison for review of its factual accuracy. At this time, the institution should review the factual references in the report (such as dates, names of campuses and committees, position titles, enrollment numbers, and financial figures) and confirm their accuracy or provide corrections. Institutions must limit their review to representations of fact and avoid suggesting changes to the committee's interpretation and analysis of those facts. After the chair has incorporated final edits and factual corrections, the final copy of the Report of the Accreditation Committee is sent to the institution's SACSCOC staff member, who then forwards a hard copy to the institution.

In composing any formal recommendations proposed to the committee and the narrative supporting that recommendation, evaluators should:

- Be sure to reference the standard to which the recommendation pertains.
- Make certain that the narrative supporting these judgments is sufficiently clear and specific to inform the institution of the issues it will need to address in its response.
- Word the supporting narrative using the least possible negative words and statements. For example, rather than writing, "The institution does not use the results of assessment to improve its programs and services," evaluators should consider writing something like, "The committee could find no evidence that the institution uses the results of assessment to improve its programs and services."
- Avoid using judgmental language, such as "Unfortunately or regrettably the institution does not use the results of assessments to improve its programs or services."
- Avoid using prescriptive language that might limit the institution's flexibility to demonstrate compliance with the standard in question.

Members of the committee are expected to:

- Use professional judgment and maintain integrity.
- Maintain confidentiality. Except for participating in deliberations within committee meetings or in other discussions with committee members, the chair, or the staff, evaluators should not discuss the evaluation of the institution being reviewed at any time – before, during, or after the visit.
- Function as a team by striving to be helpful to other members of the committee.
- Note and communicate information that may contribute to the evaluation of the institution whether or not the information pertains to their area of responsibility.

- Remember that there may be several acceptable ways for the institution to demonstrate compliance.
- Rely on the collective judgment of the committee members to form the basis for action by the committee. The goal is consensus, but the majority will rule in any action taken.
- Concentrate on being accurate and fair in their findings and observations.

Role and Responsibilities of the Committee Chair

The leadership of the Accreditation Committee is provided by the chair of the committee. The chair is responsible for organizing and managing the work of the committee and is the primary contact person as evaluators prepare for and participate in the visit. Evaluators should discuss with the chair any matters of concern or problems they may encounter as they prepare for and perform their duties as a member of the committee. They should also copy the SACSCOC staff member on any email communication.

Before the Visit

Consult with SACSCOC staff to discuss:

- The timing of the initial contact with the institution. (In some instances, the CEO at the institution may initiate a call; in others, the chair may initiate the contact.)
- Issues the committee is likely to encounter prior to and during its review.
- Who will be responsible for sending Information Outline and Committee Writing Assignments to committee members?
- Who will be responsible for requesting additional information from the institution (such as requests for information from committee members)?
- The institution's policies on reimbursing expenses including alcoholic beverages.
- How will committee members conduct reviews of distance learning and off-campus instructional sites?

Email or call the committee members to review:

- The purpose of the committee, the focus of its review, and to confirm individual responsibilities and assignments.
- Expectations regarding preparations for the review. If conference calls have been scheduled prior to the visit, be certain to get those dates and times on their schedules.

Email or call the institutional liaison to determine the logistics of visit (schedules, transportation, accommodations, support and other arrangements).

Plan to arrive at the institution in advance of the committee to review the institution's "readiness" for the committee's visit.

Schedule at least one conference call with the committee

- Review the committee's purpose(s) and tasks
- Discuss the focus of the visit, the overall task of the committee, and review the writing assignments
- Start identifying additional information that the committee members will need to review as they conduct their analysis

- Set a deadline date for the drafts of primary writing assignments due to the chair before the actual visit.
- Review the schedule, and make sure everyone is set on travel and visit details.

Consult with institutional representatives prior to the committee visit

- Request further information and/or documentation
- Request committee member interviews during the visit
- Discuss logistical issues related to the review of any off-campus instructional sites
- Review adjustments to the committee's itinerary

During the Visit

The Chair's role is crucial in ensuring thoughtful, candid, and open discussions among the committee members.

- Establish the context within which the committee functions, and demonstrate for the committee the professional, collegial and confidential manner of its work.
- Ensure that all committee members sign and date the Conflict of Interest form.
- Monitor the committee's schedule during the visit and communicate with the institution any committee requests that arise; be sure the committee has ample time for interviews.
- Guide committee members (particularly those with little or no experience) to apply the standards in the context of professional judgment.
- Guide the committee to produce a report with clear language and findings; lead committee members to reach consensus on the language of the entire report, particularly any recommendations that are included.
- Plan to finish the draft report by final evening of the visit.
- Approach the visit in the best spirit of collegiality, with interests of SACSCOC and institution at the forefront; integrity of the process is key.
- Maintain strict confidentiality; remind committee members to destroy any materials related to the institution.
- Work closely with committee members as they formulate their professional judgments or have questions about issues.
- Maintain communication with the institution's CEO to discuss issues bearing on the committee's review.
- Maintain focus on major issues during executive sessions rather than getting bogged down in "minor" matters. Leadership of the committee during its executive sessions is the fine art of balancing time – making certain that each person has the opportunity to contribute to the discussion and analysis without rehashing points already discussed.
- Complete the draft of the committee's report. Ensure that the quality of the narrative is such that it provides evidence that the committee has exercised due diligence in conducting a reasonable and responsible review of the information provided by the institution and accessible to the committee. Pay particular attention to the language the members use to frame any formal Recommendations. Make certain that narratives provide a clear understanding of the basis of their judgments. Ensure that the committee's report provides the reader with an informed understanding of the committee's professional judgments regarding the institution's compliance with all applicable requirements within the *Principles* as well as the basis for those judgments.

After the Visit

- Submit expense voucher to the SACSCOC office, including mileage and necessary receipts. Enclose evaluator ratings and interview lists.
- Finalize the Accreditation Committee report. Once the committee concludes its review, edit the draft report developed during the visit to ensure that it accurately reflects the collective judgments of the Accreditation Committee. The quality of the analysis and the clarity of the report is especially important. If it contains any statements of non-compliance, make certain that the narrative provides clear and concise justification for any formal recommendations, and that the recommendations themselves are clearly related to a specific accreditation requirement within *The Principles of Accreditation*. Be mindful that the purpose of a recommendation is to identify what an institution needs to do in order to establish its compliance with an accreditation requirement without prescribing how it is to do it.
- Forward a draft of the report to the staff member and to committee members, asking for final edits and an immediate response. After the draft is completed, send it to the institution's CEO and Accreditation Liaison for identification of errors of fact.
- Determine – consulting with SACSCOC staff, if necessary – if changes need to be made to the final report as a result of any identified errors of fact.
- Finalize the report and email the Report of the Accreditation Committee to the SACSCOC staff member's office.
- Maintain confidentiality and avoid any appearance of conflict of interest.

SACSCOC Staff Member

The SACSCOC staff member assigned to the institution will be available on site as a resource for the committee. The primary role of the staff member is to facilitate the work of the committee. Evaluators are encouraged to talk with the assigned staff person regarding any questions about the *Principles of Accreditation*, the institution's Compliance Certification, SACSCOC policies and procedures, or the logistics of your visit. Because the staff is most knowledgeable about the institution, he or she will be helpful in clarifying the process as it relates to the institution under review. The email addresses of the chair, the staff member, and the committee members will be included in the Committee Roster received from SACSCOC.

SACSCOC staff members provide assistance and information to committees. They do not participate in the final decisions of committees regarding compliance or recommendations.

Assessment of Compliance

The Accreditation Committee's responsibility is to make final determinations regarding an institution's compliance with all of the *Principles of Accreditation* except Standard 7.2 (*Quality Enhancement Plan*). Every evaluator will be assigned primary responsibility for reviewing and writing responses to multiple standards. In addition, each evaluator will be assigned as a secondary reviewer for other standards. Professional judgment and collegial collaboration are vital to the success of the committee's review.

Evaluators should draft a narrative for all the standards they were assigned primary responsibility for review and writing and send that draft to the chair of the committee prior to the committee's arrival on campus.

For those standards that need further investigation, evaluators should:

- Review the documentation presented by the institution to support its claim of compliance with each standard they were assigned to investigate. Remember that it is the institution's responsibility to establish compliance. The committee is responsible for determining whether the institution has established compliance.
- Conduct interviews as necessary to corroborate, clarify, or interpret the documentation presented by the institution to support its determination of compliance with the standards under review.
- Check their perceptions with those of the secondary reader, other committee members, the chair, and the staff to determine whether their conclusions appear to reflect generally what others are finding.
- Edit the initial draft report submitted to the chair prior to the visit.
- Compose a draft of any recommendation and supporting narrative to present to the full committee.

Exit Conference

The Exit Conference is designed as a dialogue between the Accreditation Committee and the institution's leadership. As the name, Exit Conference, implies, the committee conveys its findings orally; it does not provide a paper or electronic copy of its draft report at this time.

Prior to the Exit Conference, the committee chair and the SACSCOC staff member meet with the institution's CEO to preview the committee's findings. At the Exit Conference, the committee reports on any findings of non-compliance resulting in recommendations. The Accreditation Committee may also provide consultative advice on enhancing quality in areas not directly related to one of the standards in *The Principles of Accreditation*.

To ensure that the institution understands issues of non-compliance presented by the committee, the institutional leadership may ask questions for clarification. Since all issues of non-compliance must be addressed in a further report (the institution's Response to the Visiting Committee Report), attaining a clear understanding of the additional documentation of compliance that is required enables the institution to maximize the amount of time available for developing its response. The SACSCOC staff member then reviews the timeline for finalizing the committee's draft report and the remaining steps in preparing the institution for review by the SACSCOC Board of Trustees.

Review by SACSCOC Board of Trustees

A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the Report of the Accreditation Committee and the response of the institution to the committee's report. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and make a decision regarding whether to award Initial Accreditation, continue the institution in Candidacy, or remove the institution from Candidacy. The Board of Trustees makes decisions regarding accreditation status twice each year – in June and in December.

(Figure 6)

Accreditation Committee Visit Timeline and Process			
Action	Timing	Responsible	Completed
Schedule Site Visit	6 months before visit	SACSCOC	<input type="checkbox"/>
Invite chair	6 months before visit	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	5 months before visit	SACSCOC	<input type="checkbox"/>
Complete Visit Information	5 months before visit	Insitution	<input type="checkbox"/>
Complete Information Outline	4 months before visit	SACSCOC	<input type="checkbox"/>
Finalize Committee Roster	4 months before visit	SACSCOC	<input type="checkbox"/>
Information Outline to Committee members	3 months before visit	SACSCOC	<input type="checkbox"/>
Draft visit documents (writing assignments, itinerary, information outline, roster) to chair	3 months before visit	SACSCOC	<input type="checkbox"/>
Finalize visit documents	3 months before visit	Chair	<input type="checkbox"/>
Send visit documents to the committee	2 months before visit	SACSCOC	<input type="checkbox"/>
Schedule conference calls	2 months before visit	Chair	<input type="checkbox"/>
Submit Compliance Certification (no Standard 7.2)	42 days before visit	Insitution	<input type="checkbox"/>
Insert drafts into Preliminary Report	1 week before visit	Chair	<input type="checkbox"/>
Compile draft report - including any recommendations	Visit	Chair	<input type="checkbox"/>
Edit draft report and send to committee members	2 weeks after visit	Chair	<input type="checkbox"/>
Send draft report to institution for errors of fact	3 weeks after visit	Chair	<input type="checkbox"/>
Review draft report for errors of fact	4 weeks after visit	Insitution	<input type="checkbox"/>
Submit Final Accreditation Committee Report to staff	4 weeks after visit	Chair	<input type="checkbox"/>
Transmit Final Accreditation Committee Report to institution	5 weeks after visit	SACSCOC	<input type="checkbox"/>
Submit Response Report (responding to any recommendations)	150 days after visit	Insitution	<input type="checkbox"/>
Send Response Report to chair	150 days after visit	SACSCOC	<input type="checkbox"/>
Submit Chair's evaluation of Response Report	170 days after visit	Chair	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

INTERIM OFF-CAMPUS INSTRUCTIONAL SITES COMMITTEE

Charge

The comprehensive nature of an On-Site Reaffirmation Committee's review always encompasses a representative sample of the institution's off-campus instructional sites approved to offer 50% or more of an educational program. In addition, as part of the Fifth-Year Interim Review process, SACSCOC reviews a sampling of new off-campus instructional sites initiated since the previous comprehensive review for those institutions which have five (5) or more such sites. The Interim OCIS Committee charged with this review will:

- Evaluate and make determinations concerning the institution's ongoing compliance with selected standards of the *Principles of Accreditation*.
- Present the committee's findings and any recommendations to the leadership of the institution at the conclusion of the meeting.
- Write a report to be submitted to SACSCOC that includes the committee's recommendations and its observations.

The committee conducts a careful review of the Documentation for the Interim Off-Campus Instructional Sites (OCIS) Committee Review provided by the institution and other supporting documents that may be available either prior to or during the committee's visit. The committee also conducts on-site visits to a sampling of these new sites, interviewing individuals and groups of faculty, staff, and students during the visit to gather information that will enable evaluators to determine compliance with the standards under review. The purpose of the visit is to determine if the institution is in compliance with the *Principles of Accreditation* regarding selected elements related to such things as personnel; physical facilities; library and learning resources; technology; financial resources; access to student support programs, services, and activities; institutional planning; and institutional effectiveness. The committee will also make a determination regarding the institution's administrative, fiscal, and long-range planning capabilities to add additional sites in the future. Evaluators may find the following SACSCOC documents helpful in conducting these reviews: [Resource Manual](#) (Appendix C: *Guidelines for Addressing Off-Campus Instructional Sites*), [Guidelines for Addressing Distance Education and Correspondence Courses](#), and [Guidelines for the Evaluation of Distance Education \(Online Learning\)](#).

Composition

The committee usually includes a chair and a second evaluator, usually in the area of academics or student services. SACSCOC staff may add additional reviewers to the committee if the number of off-campus instructional sites warrants their addition.

Committee members should determine whether there is any conflict of interest, as defined in SACSCOC policies, in their service on the committee. If a conflict of interest might exist, committee members should notify the SACSCOC staff member assigned to the committee immediately. A list of circumstances that present a conflict of interest is included in information sent to those invited to serve on a committee (See SACSCOC policy [Ethical Obligations of Evaluators](#)).

Logistical Arrangements

SACSCOC will reimburse evaluators for expenses related to travel, meals, and lodging, along with an amount for miscellaneous business-related expenses incurred during the visit. Evaluators should complete and submit the expense voucher to the SACSCOC as soon as possible after the conclusion of the visit. Evaluators are responsible for making travel arrangements, and SACSCOC requests that its travel agency be utilized to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

Evaluators will receive an information outline for the visit. This document will note the beginning and ending times for the activities of the committee's review. Evaluators should plan their arrival and departure times to be present for all activities and to complete their assignments.

Documents

Approximately six weeks prior to the Interim Off-Campus Instructional Sites Committee's visit, the institution will send evaluators and the SACSCOC staff member the following materials:

- A Compliance Certification based on the Documentation for the Interim Off-Campus Instructional Sites Committee Review template, including all necessary supporting documentation,
- An Institutional Summary Form for Commission Reviews, including identification of a technical support person if some of the materials are also available electronically, and
- Additional material that may be requested by the SACSCOC staff or the chair.

SACSCOC staff will email the following materials to committee members:

- Committee Roster
- Committee Writing Assignments
- Information Outline (including such details as the dates of the visit, times of first and final meetings of the committee, lodging arrangements, and contact information)
- Guidelines for Writing Committee Comments
- Itinerary for the visit
- Request for Justifying and Documenting Faculty Qualifications

Activities

Prior to the visit, evaluators should:

- Make certain that they have the materials listed above. If one or more items were missing, email or call the staff member assigned to the committee immediately.
- Review the *Principles of Accreditation*, the institution's narrative and supporting documentation, and any other materials appropriate to the assignment that are made available prior to the committee's visit. If they cannot access electronic materials, evaluators are authorized to contact the technical staff member at the institution for assistance. Any other questions about the institution or about materials submitted by the institution should be directed to the chair, SACSCOC staff member, or institutional personnel who may be able to clarify information. However, no discussion of the institution's compliance should be discussed directly with institutional personnel.
- Become familiar with the institution's history, mission, programs, and services.
- Participate in conference calls and email exchanges with the chair, SACSCOC staff member, and any other committee members. Copy the chair and the staff member on all

emails so that they can check the progress everyone is making in preparing for the visit and determine whether their intervention is needed.

- Become familiar with their role and writing assignments. Committee members are expected to work collaboratively on-site to resolve compliance issues as expeditiously as possible.
- Read those sections of the institution's Documentation for the Interim OCIS Committee Review that pertain to their assignments and consult with secondary reviewer(s), if appropriate, to determine whether the documentation is sufficiently substantial and convincing to warrant finding the institution in compliance with the standards.
- Determine any additional documentation needed to review on campus.
- Prepare a selective list of groups and individuals to be interviewed on-site regarding the institution's compliance. Work with the chair to coordinate the final request for interviews.
- Request assistance from the chair in setting up an interview schedule in advance of the on-site visit of those groups and/or individuals to be interviewed.
- Prepare and submit electronically a draft of their writing assignments to the committee chair prior to arriving for the visit.

During the visit

The organizational meeting provides the first opportunity to meet formally with entire committee. This meeting serves as a general orientation for the committee. It provides pertinent information, training, and consultation. The agenda of the meeting may cover the following items in addition to those the chair or the SACSCOC staff member may suggest:

- Introduction of committee members and a discussion of assignments and responsibilities.
- Review of the responsibilities of the chair and the staff member.
- Review of the responsibilities of the Interim Off-Campus Instructional Sites Committee.
- Review of the *Principles of Accreditation* and the institution's documentation.
- Review of the committee's schedule, including the times for completing certain tasks.
- Instructions for writing the final report, including using terminology for writing recommendations and other advisory comments regarding compliance.
- Suggestions for facilitating the work of the committee.
- Information regarding housing, transportation, conference facilities, computer support, organization of the institution's resource room, and other topics related to the logistics of the visit.
- Review of format and times for the exit conference(s).

There are two scheduled conferences at the conclusion of the committee's visit:

- A discussion among the institution's CEO, the chair, and the SACSCOC staff member (if accompanying the visiting committee) providing a summary of the committee's report.
- A formal exit conference, involving a presentation of the committee's recommendations to the institution's leadership team.

After the visit

The committee chair will leave the visit with a complete draft report, including the actual text of any recommendations propagated by the committee. Evaluators should receive an electronic copy of the draft report from the chair with an opportunity to provide timely feedback within one to two weeks following the visit. Within three to four weeks following the committee's visit, the chair

will email a draft of the committee report to the institution. The institution is instructed not to respond to the committee's judgments at this time. The chair – in consultation with the assigned SACSCOC Staff member – will determine whether changes should be made in the report based on the institution's report of factual errors and will make any revisions that are justified. The chair will email the final report to SACSCOC. The SACSCOC staff member will send the final report to the institution along with instructions regarding its response to the committee's findings.

Report

The committee's review produces the Report of the Interim Off-Campus Instructional Sites Committee, submitted to SACSCOC. This report will address the committee's findings related to the institution's ongoing compliance with the applicable standards. For each *Principle* with which it concludes that the institution is not in compliance, the committee will compose a recommendation with supporting narrative that will guide the institution in developing its response to the recommendation. The institution will be required to respond to all recommendations in a report submitted to SACSCOC five months following the conclusion of the committee's visit.

In composing a formal recommendation and the narrative supporting that recommendation, evaluators should:

- Reference the requirement or standard to which the recommendation pertains.
- Make certain that the narrative supporting these judgments is sufficiently clear and specific as to inform the institution of the issues it will need to address in its response.
- Word the recommendation and supporting narrative using the least possible negative words and statements.
- Avoid using judgmental language, such as “Unfortunately or regrettably the institution does not use the results of assessments to improve its programs or services.”
- Avoid using prescriptive language that might limit the institution's flexibility to demonstrate compliance with the standard in question.

Members of the committee are expected to:

- Use professional judgment and maintain integrity in their role on the committee.
- Maintain confidentiality. Except for participating in deliberations within committee meetings or in other discussions with committee members, the chair, or the staff, they should not discuss the evaluation of the institution being reviewed at any time – before, during, or after the visit.
- Function as a team by striving to be helpful to other members of the committee.
- Note and communicate information that may contribute to the evaluation of the institution whether or not the information pertains to their area of responsibility.
- Remember that there will be several acceptable ways for the institution to demonstrate compliance.
- Rely on the collective judgment of the committee members to form the basis for action by the committee. The goal is consensus, but the majority will rule in any action taken.
- Concentrate on being accurate and fair in findings and observations.

The leadership of the Interim Off-Campus Instructional Sites Committee is provided by the chair of the committee. The chair is responsible for organizing and managing the work of the committee and is the primary contact person. Evaluators should discuss with the chair any matters of concern

or problems encountered as they prepare for and perform their duties as a member of the committee. SACSCOC staff should be copied on any email communication.

The SACSCOC staff member assigned to the institution will be available as a resource for the committee. The staff member may or may not join the committee during the visit. The primary role of the staff member is to facilitate the work of the committee. Evaluators are encouraged to talk with the assigned staff person regarding any questions about the *Principles of Accreditation*, the documents supporting the institution's compliance with the standards under review, SACSCOC policies and procedures, or the logistics of the visit. Because the staff is most knowledgeable about the institution, she or he will be helpful in clarifying the process as it relates to the institution you are reviewing. The email addresses of the chair, the staff member, and the committee members will be included in the roster of committee members that received from SACSCOC.

SACSCOC staff members provide assistance and information to committees. They do not participate in the final decisions of committees regarding compliance or recommendations.

Assessment of Compliance

The Interim Off-Campus Instructional Sites Committee's responsibility is to make final determinations regarding an institution's compliance with the standards under review. Every reviewer will be assigned primary responsibility for reviewing and writing responses to multiple standards. In addition, each reviewer will be assigned as a secondary reviewer for other standards. Professional judgment and collegial collaboration are vital to the success of the committee's review.

An evaluator who has been assigned primary responsibility to make a preliminary judgment about the institution's compliance with one or more of the applicable standards should:

- Review the institution's narrative and supporting documentation and make a preliminary determination regarding compliance.
- Consult with the secondary reviewer(s).
- Produce a draft narrative for each assigned standard and submit these narratives to the chair by the deadline indicated before the on-site visit. These narratives should be clear about the committee's conclusions and the evidence on which those conclusions were based. If appropriate, these draft narratives might also contain further questions to be explored during the on-site visit.
- Conduct interviews as necessary to corroborate, clarify, or interpret the documentation presented by the institution to support its determination of compliance with the standards under review.
- Work with other committee members to reach consensus.
- Edit the initial draft report submitted to the chair prior to the visit.
- Compose a draft of any recommendation and supporting narrative to present to the full committee.

Role and Responsibility of the Committee Chair

Before the Visit

The chair should consult with the SACSCOC staff member to discuss:

- The timing of the initial contact with the institution. (In some instances, the CEO at the institution may initiate the call; in others, the chair may initiate the contact.)
- Issues the committee is likely to encounter prior to and during its review
- Who will be responsible for sending the Information Outline and Committee writing assignments to the committee members?
- Who will be responsible for requesting additional information from the institution (such as requests for information from committee members)?
- The institution's policies on reimbursing expenses including alcoholic beverages.

The chair should email the committee members to:

- Review the purpose of the committee, the focus of its review, and to confirm their individual responsibilities and assignments.
- Share with them expectations regarding their preparations for the review. Share dates and times of any scheduled conference call(s) prior to the visit.

The chair should schedule at least one conference call with the committee to:

- Review the committee's purpose(s) and tasks, and to assess the committee members' readiness for the review.
- Lead the committee to discuss the focus of the visit, the overall task of the committee, review the writing assignments, and start identifying additional information that the committee members will need to review as they conduct their analysis.
- Set a due date for the substantive change report drafts to be submitted by evaluators before the actual visit.
- Prompt evaluators to share any preliminary compliance findings and remaining questions.

The chair should consult with institutional representatives to:

- Determine logistics of visit (schedules, transportation, accommodations, support, and other arrangements).
- Communicate issues and/or concerns the committee might have regarding any aspect of the institution's demonstrated compliance with the standards under review. During these conversations, the chair should consider how they will be addressed on campus.

During the Visit

The committee chair is critical in ensuring thoughtful, candid, and open discussions among the committee members. The chair establishes the context within which the committee functions, and demonstrates for the committee the professional, collegial and confidential manner of its work.

The chair should:

- Monitor the committee's schedule during the visit and communicate with the institution any committee requests that arise; make sure the committee has ample time for interviews.
- Guide committee members (particularly those with little or no experience) to apply the standards in the context of professional judgment.

- Guide the committee to produce a report with clear language and findings; lead committee members to reach consensus on the language of the entire report, particularly any recommendations that are included.
- Plan to finish a draft report by the final evening of the visit.
- Approach the visit in the best spirit of collegiality, with interests of SACSCOC and institution at the forefront; integrity of the process is key.
- Maintain strict confidentiality; remind committee members to destroy any materials related to the institution.
- Work closely with committee members as they formulate their professional judgments or have questions about issues.
- Maintain communication with the institution's CEO to discuss issues bearing on the committee's review.
- Maintain focus on major issues during executive sessions rather than getting bogged down in "minor" matters. The chair's leadership of the committee during its executive sessions is the fine art of balancing time – making certain that each person can contribute to the discussion and analysis without rehashing points already discussed.
- Complete the draft of the committee's report. Ensure that the narrative provides evidence that the committee has exercised due diligence in conducting a reasonable and responsible review of the information provided by the institution and accessible to the committee.
- Pay particular attention to the language used to frame any formal recommendations. Make certain that the narratives provide a clear understanding of the basis of the committee's judgments.
- Ensure that committee's reports provide the reader with an informed understanding of the committee's professional judgments regarding the institutions' compliance with all applicable requirements within the Principles as well as the basis for those judgments.

After the Visit

Following the committee's on-site visit, the chair should:

- Submit an expense voucher to the SACSCOC office, including mileage and necessary receipts. The chair should also enclose committee member ratings and interview lists.
- Finalize the Interim OCIS Committee's draft report. Once the committee concludes its review, the chair's task is to edit the draft report developed during the visit to ensure that it accurately reflects the collective judgments of the committee. It is especially important that the chair pay close attention to the quality of the analysis and the clarity of the report. If it contains any statements of non-compliance, make certain that the narrative provides clear and concise justification for any formal recommendations, and that the recommendations themselves are clearly related to a specific accreditation requirement within *The Principles of Accreditation*. Be mindful that the purpose of a recommendation is to identify what an institution needs to do in order to establish its compliance with an accreditation requirement without prescribing how.
- Email the draft report to committee members for their review; ask for their comments within a reasonable time period (1-2 weeks).
- Email the edited report to institution's CEO asking for any corrections of errors of fact; ask for a response within a reasonable time period (1-2 weeks). If any errors of fact are identified by the institution, consult with the assigned SACSCOC Staff member.
- Email the final report of the committee to the SACSCOC staff member's office.

- Maintain confidentiality and avoid any appearance of conflict of interest.

Review by SACSCOC Board of Trustees

A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the Report of the Interim OCIS Committee and the response of the institution to the committee’s report. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and make a decision regarding the institution’s accreditation and any follow-up activities that it requires of the institution. The Board of Trustees makes decisions regarding accreditation status twice each year – in June and in December.

(Figure 7)

Interim OCIS Visit Timeline and Process			
Action	Timing	Responsible	Completed
Schedule Site Visit	6-9 months before visit	SACSCOC	<input type="checkbox"/>
Invite chair	6-9 months before visit	SACSCOC	<input type="checkbox"/>
Reserve/Invite Committee members	5 months before visit	SACSCOC	<input type="checkbox"/>
Complete Visit Information	5 months before visit	Institution	<input type="checkbox"/>
Complete Information Outline	4 months before visit	SACSCOC	<input type="checkbox"/>
Finalize Committee Roster	4 months before visit	SACSCOC	<input type="checkbox"/>
Information Outline to Committee members	4 months before visit	SACSCOC	<input type="checkbox"/>
Draft visit documents (writing assignments, itinerary, information outline, roster) to chair	3 months before visit	SACSCOC	<input type="checkbox"/>
Finalize visit documents	3 months before visit	Chair	<input type="checkbox"/>
Send visit documents to the committee	8 weeks before visit	SACSCOC	<input type="checkbox"/>
Schedule conference calls	8 weeks before visit	Chair	<input type="checkbox"/>
Submit Documentation for ? Committee Visit	42 days before visit	Institution	<input type="checkbox"/>
Insert drafts into Preliminary Report	7 days before visit	Chair	<input type="checkbox"/>
Compile draft report - including any recommendations	Visit	Chair	<input type="checkbox"/>
Edit draft report and send to committee members	2 weeks after visit	Chair	<input type="checkbox"/>
Send draft report to institution for errors of fact	3 weeks after visit	Chair	<input type="checkbox"/>
Review draft report for errors of fact	4 weeks after visit	Institution	<input type="checkbox"/>
Submit Final Substantive Change Committee Report to staff	4 weeks after visit	Chair	<input type="checkbox"/>
Transmit Final Substantive Committee Report to institution	5 weeks after visit	SACSCOC	<input type="checkbox"/>
Submit Response Report (responding to any recommendations)	150 days after visit	Institution	<input type="checkbox"/>
Send Response Report to chair	150 days after visit	SACSCOC	<input type="checkbox"/>
Submit Chair's evaluation of Response Report	170 days after visit	Chair	<input type="checkbox"/>

(An Excel version of this checklist is available on the SACSCOC website for [Evaluator Resources](#) – under Resources for Committee Chairs).

FIFTH-YEAR INTERIM REVIEW

Charge

The Committee on Fifth-Year Interim Reports assesses institutional compliance with select standards from the *Principles of Accreditation*. The committee also assesses whether each institution has adequately addressed the required components of the Quality Enhancement Plan (QEP) Impact Report. The evaluation by the committee is conducted in two phases. First, a preliminary review is completed by individual committee members prior to the full committee meeting. Second, the full committee conducts a two-day meeting to reach consensus about its findings and develop a report for each institution.

The options for the review are: “No referral required” and “Referral required.” If a Referral Report is requested, a C&R Committee of the Board of Trustees will review the institution’s narrative and supporting documentation at the meeting following the due date of the report in order to determine if the institution has demonstrated compliance with the standard(s) under review. The process for review conforms to that of other committee reports, and the SACSCOC Board of Trustees may take any appropriate action regarding the institution’s accreditation.

Members of the Committee on Fifth-Year Interim Reports:

- Review and analyze the Fifth-Year Compliance Certification and Quality Enhancement Plan Impact Report and supporting documents and
- Prepare a report identifying referrals for areas of non-compliance with the selected standards under review.

The peer review process involves making both individual and collective professional judgments. Evaluators examine and evaluate each institution’s policies, procedures, programs, resources, and activities as they relate to the select Core Requirements and Standards they are assigned to review prior to the committee’s meeting. These preliminary findings are then presented to the full committee for review and reaching consensus.

Composition

The committee is composed of a chair (a member of the SACSCOC Board of Trustees) and four clusters of reviewers, each led by a cluster coordinator. Each committee cluster consists of two evaluators for educational programs, one evaluator for institutional effectiveness, and one evaluator for student support services. Two to three finance evaluators share responsibilities among all four clusters. Each cluster reviews reports from approximately ten (10) institutions.

Committee members should determine whether there is any conflict of interest, as defined in SACSCOC policies, in their service on the committee. If a conflict of interest might exist, committee members should notify the SACSCOC staff member assigned to the committee immediately. A list of circumstances that present a conflict of interest is included in information sent to those invited to serve on a committee (See SACSCOC policy [*Ethical Obligations of Evaluators*](#)).

Responsibilities

Members of the committee are expected to:

- Participate in an orientation conference call with the Coordinator of Commission Support;
- Review the Fifth-Year Interim Reports of the institutions included in their cluster;
- Participate in conference call meetings scheduled by the respective cluster coordinator(s);
- Refrain from making contact with any individuals at an institution being evaluated. Evaluators who have difficulty accessing material presented electronically should notify their cluster coordinator. Then, if directed to do so by the cluster coordinator, they are authorized to call or email the individual at the institution who is responsible for providing technical support for the institution's electronic submission. This individual will be identified in the materials received from the institution. During this contact, evaluators are expected to confine questions and comments to the technical difficulty they are experiencing. Institutions will be instructed not to contact any of the committee members.
- Make preliminary determinations regarding each institution's compliance with pre-assigned selected standards;
- Compose preliminary findings in the "Combined Reporting Forms" document, which should be completed separately for each institution.
- Forward completed "Combined Reporting Forms" documents to the cluster coordinator by the established deadlines; and
- Attend the committee meeting and reach consensus on findings of all the institutions being reviewed.

The chair of the committee is a member of SACSCOC's Board of Trustees. The chair is responsible for managing the work of the committee during its meeting and presenting a summary of the recommendations from the committee's reports to the Board of Trustees.

Cluster coordinators are responsible for organizing and managing the work of the clusters before and during the committee meeting. The cluster coordinator is the primary contact person for evaluators as they prepare for and participate in the review of the Fifth-Year Interim Report. Evaluators should discuss with the cluster coordinator any matters of concern or problems they encountered as they prepare for and perform their duties as a member of the committee. The role of the cluster coordinator is very similar to the role of the chair of the Off-Site Review Committee.

The Coordinator of Commission Support, at least one Vice President, and two Recorders will be assigned to assist the committee. The primary responsibility of the Coordinator of Commission Support is to provide consultative and administrative assistance to the committee before and during the committee's meeting. The primary responsibility of the Vice President is to ensure consistency in the interpretation and application of the standards addressed by the institutions. The primary responsibility of the Recorders is to ensure the committee's findings are documented accurately in the "Form G" reports for each institution being reviewed.

Logistical Arrangements

Commission staff will arrange for lodging and will communicate with evaluators concerning logistical arrangements for the committee meeting. SACSCOC will reimburse evaluators for expenses related to travel, meals, and lodging, along with an amount for miscellaneous business-

related expenses incurred during the visit. Evaluators should complete and submit the expense voucher to the SACSCOC as soon as possible after the conclusion of the visit.

Evaluators are responsible for making their travel arrangements, and SACSCOC requests that its travel agency be utilized to make flight arrangements, unless the airfare through another agency is less expensive. Air travel will be reimbursed for coach fare. The reimbursement for travel by personal automobile will be the mileage rate determined by SACSCOC policy.

Committee members will receive information regarding the beginning and ending times for the activities of the Committee on Fifth-Year Interim Reports' meeting. They should plan their arrival and departure times to allow them to be present for all activities and to complete all assignments.

Before the Meeting

Participation on the Committee on Fifth-Year Interim Reports begins with orienting members to the Fifth-Year Review process during a two-hour conference call conducted by the Coordinator of Commission Support. Committee members are required to participate in this conference call, held approximately eight to ten weeks prior to the committee meeting. The conference calls are conducted to discuss the procedures of the committee's review, review SACSCOC guidelines and policies to be used during the review, highlight the interpretation and application of select standards, and provide guidance on how to develop the committee's reports.

Documents that are emailed to all committee members for reference during the conference call include:

- Conference Call Agenda and Notes, which contains the timeline for the review of institutional cases
- "Combined Reporting Forms" document, which provides the assignments for readers by focus areas for each of the Core Requirements and other selected standards
- Blank copy of the Fifth Year Interim Report
- Blank copy of the Form G for Fifth-Year Interim Report
- SACSCOC guidelines and policy statements
- Other pertinent materials as determined by SACSCOC

Training webinars for evaluators reviewing standards in specific focus areas can be found on SACSCOC's website at <http://www.sacscoc.org>. These focus areas include finance, institutional effectiveness, student services, and the Quality Enhancement Plan.

Materials

Approximately eight weeks prior to the committee meeting, SACSCOC will send each committee member a package containing materials to be used during the review. The resource materials that will be included in the package are:

- List of institutions to be reviewed including a roster of the reviewers in your cluster,
- Information on the travel agency that handles flight arrangements for SACSCOC,
- Expense voucher,
- Other pertinent materials as determined by SACSCOC.

Also in the package sent to each committee member will be the electronic copies of the following documents from each institution in their respective cluster:

- Fifth-Year Interim Report Compliance Certification
- A completed “Institutional Summary Form Prepared for SACSCOC Reviews,” providing an overview of the institution
- Document identifying the contact information of a technical support person
- Impact Report of the Quality Enhancement Plan
- FROM SELECT INSTITUTIONS ONLY: Financial Audit and accompanying correspondence for the most recently completed fiscal year and financial aid audit. This information will be sent to the designated finance reviewer(s) only.

After the due date for submission of materials to the Committee on Fifth-Year Interim Reports, no additional information may be submitted.

Evaluators should check these materials immediately upon receipt to determine whether they have received everything; they should report to the Office of Legal and Governmental Affairs, and Commission Support any materials that are missing. Committee members should also check to determine whether they can access material that is available electronically. If not, they should first contact the cluster coordinator. If directed to do so by the cluster coordinator, they are authorized to make contact with the technical staff member at the institution in question for assistance. Committee members should avoid making contact with any other person at the institution.

SACSCOC staff will provide a complete set of materials for each institution being reviewed at the Committee on Fifth-Year Interim Reports meeting.

Compliance Review Process

The Committee on Fifth-Year Interim Reports meeting will be devoted primarily to reaching consensus regarding each institution’s compliance with the select *Principles* and the QEP Impact Report. Therefore, the preliminary analysis of compliance must be completed and submitted in draft form in advance of that meeting. Every evaluator will be assigned as a reader to review certain standards for each institution in the cluster. This information is contained in the document, “Combined Reporting Forms.”

During the phase of the review conducted prior to the committee meeting, evaluators should communicate regularly with the cluster coordinator and the other members of the cluster. Copy the cluster coordinator on emails sent to other committee members so that she or he can observe how the review process is proceeding and where there may be problems that necessitate attention or intervention. Committee members should also be available to participate in all conference calls arranged by the cluster coordinator or SACSCOC staff. Evaluators who are unavailable during the time of a scheduled call should inform the cluster coordinator.

Evaluators should review each institution in the group separately in the context of its mission. Using professional judgment, they should avoid engaging in “comparative compliance,” that is, determining compliance based on whether an institution is “more in compliance” or “less in compliance” than another one. In the final analysis, evaluators should determine whether each individual institution is in compliance with the standards based on the strength of the institution’s own narrative and supporting documentation.

The following suggestions may be helpful as evaluators conduct their review of the Compliance Certification. Evaluators should:

- Read carefully all of the documents received from SACSCOC, particularly *The Principles of Accreditation* and the Compliance Certification of each institution in their assigned cluster. In its Compliance Certification, each institution will identify whether it judges itself to be in compliance or non-compliance with each of the selected standards and will provide narrative and supporting documentation.
- Check the specified order and time period for reviewing each institution in the cluster as outlined in the timeline and communicated by the cluster coordinator.
- Become familiar with each institution as a whole, paying attention to such things as mission, programs, size, type of governance, and history. The institution’s completed “Institutional Summary Form Prepared for SACSCOC Reviews” is a helpful resource.
- Review the materials for each institution, noting how the materials are presented, whether any materials seem to be missing, and whether some or all of the material is presented electronically, and if so, whether that material can be accessed.
- Review the institution’s compliance generally, noting any concern raised by the institution itself.
- Review the narrative and supporting documentation for each assigned standard and draft a response for any standard in which the institution has not demonstrated compliance. Evaluators may wish to begin with components of the assignment that can be quickly determined, and then review those components that may require further discussion and analysis with other committee members. Make a note regarding any area in which they are unable to determine compliance and the reasons why they are unable to do so.
- For any institution that states in its “Institutional Summary Form Prepared for SACSCOC Reviews” that it has distance learning programs and off-campus instructional sites, determine if the institution has incorporated the evaluation of its off-campus instructional sites and distance learning programs throughout its Compliance Certification. Refer to the SACSCOC *Distance and Correspondence Education* policy to review the broad areas where an institution with distance and/or correspondence education programs should address distance and/or correspondence education within the Compliance Certification. The guidelines contained in the policy assist committee members evaluating distance and correspondence education and is intended to be used in conjunction with *The Principles of Accreditation*, the *Resource Manual*, and this *Handbook*.
- Read each institution’s QEP Impact Report, regardless of whether they are assigned to write comments for it. Be prepared to participate in the discussion of each institution’s QEP Impact Report to ensure an appropriate determination of compliance is rendered.
- Prepare comments for each institution in the cluster using the “Combined Reporting Forms” document. It is helpful to delete the pages of the document that do not reference the assigned focus area and then save the document with a new name for each of the institutions being reviewed. If the institution is determined to be in compliance with a standard, the evaluator should note “No referral required” for that standard. No additional comments need to be written. If the institution is determined not to be in compliance for a standard, the evaluator would note, “Referral required” and provide a clear and concise explanation of why the institution has not demonstrated compliance and what the institution should focus on addressing in its referral report to C&R, without “telling them what to do.”

- Email completed “Combined Reporting Forms” to the cluster coordinator when reviews have been completed for the institutions within a specific round of case reviews. This should be done in accordance with the dates designated in the timeline.
- Review the drafts of the “Form G” reports that will be emailed by the cluster coordinator approximately two weeks prior to the committee meeting. The “Form G” report is a compilation of all of the committee member’s comments for an institution and reflects the determinations reached during each committee member’s review. If there are any changes that need to be made to the report, evaluators should inform the cluster coordinator.

Evaluators should refrain from:

- Perusing web pages on the institution’s website. The institution is responsible for making its case.
- Using the *Resource Manual* as a checklist. SACSCOC has developed the *Resource Manual* to provide guidance to institutions as well as to evaluation committees of SACSCOC. Committee members will find the “Rationale and Notes” for each standard in the Resource Manual helpful to gain a better understanding of the intent of the standard.

Meeting of the Committee on Fifth-Year Interim Reports

Each meeting of the committee accomplishes five major agenda items: (a) conducting a procedural meeting; (b) reviewing interpretations and applications of standards with other reviewers by focus area; (c) formulating the determinations of compliance for institutions within the clusters; (d) formulating the determinations of compliance for all institutions under review as a committee of the whole; and (e) finalizing a committee report for each institution.

Procedural Meeting

The committee chair, with assistance from SACSCOC staff, will conduct a procedural meeting that may include some of the following agenda items as well as others:

- Introduction of committee members
- Introduction of SACSCOC staff members and their roles
- Brief overview of the Fifth-Year Interim Report review process
- Discussion of the role of the review committee and of individual committee members
- Suggestions that will facilitate the work of the committee
- Review of the committee’s schedule
- Instructions for writing comments for each standard for which the institution has not demonstrated compliance
- Directions concerning logistics for the remainder of the meeting

Focus Area Review of Interpretations and Applications of Standards

Following the procedural meeting, committee members will meet by focus areas. This session is led by one of the cluster coordinators. Evaluators should use this time to discuss any referrals being requested to ensure there is consistency in the interpretation and application of the standards. During this discussion, the name of the institutions being reviewed are not mentioned in order to maintain confidentiality, as reviewers from other clusters may have conflicts of interest with the institutions in your cluster. SACSCOC staff will be available to answer any questions that emerge during these discussions.

Formulating Compliance Decisions

The Committee on Fifth-Year Interim Reports evaluates each standard in the Compliance Certification and makes an assessment as follows:

- No referral required. The Committee on Fifth-Year Interim Reports determines that the institution has presented a persuasive and appropriately documented case and meets the standard.
- Referral required. The Committee on Fifth-Year Interim Reports determines that the institution has not presented a persuasive and/or appropriately documented case of compliance with the standard. For these standards, the report should provide a clear and concise explanation of why the institution has not demonstrated compliance.

The Committee on Fifth-Year Interim Reports also evaluates the QEP Impact Report and makes an assessment as follows:

- Accept with comment. The institution has adequately addressed all of the required components listed for the QEP Impact Report. The Committee may also indicate whether it finds that an institution's QEP was particularly strong in areas such as its significance and impact on student learning and/or student success; the outstanding support of the institution's administrative leadership, faculty, and students throughout its implementation; the strength of the assessment design; or any other elements of excellence.
- Refer to C & R for review. The institution has not adequately addressed one or more of the four required components for the QEP Impact Report. The Committee should provide a clear and concise explanation of why the institution has not demonstrated compliance with one or more of the components and what the institution should focus on addressing in its referral report to C&R, without "telling them what to do."

Led by the cluster coordinator, each cluster will discuss compliance of each institution in the cluster. The review of each institution will begin with a brief overview of the institution followed by discussion of the committee members' preliminary findings for the standards that were assigned to them. Each committee member is responsible for providing explanations and supporting narrative for those standards for which the institution did not demonstrate compliance for inclusion in the committee's report. Upon reaching consensus or a majority opinion, the cluster coordinator develops a "Form G" report for each institution to record its determination regarding "No referral required" or "Referral required" for each standard.

After all clusters have completed these sessions, the chair will lead the full committee through a discussion of each institution's case, to gain consensus on each of the recommendations for a referral report. During this time, the committee will finalize the comments to be included in each institution's report and identify the due date for the referral reports, if requested. The appropriate amount of time needed by the institution to prepare its referral report should be considered when determining the due date.

In cases where an institution has not demonstrated compliance with a Core Requirement and/or a significant number of other standards, the committee may decide to include a Notification Statement in the institution's letter containing the committee's recommendations. The Notification Statement may be added if the committee believes that the institution may have difficulty coming into compliance with the identified standards. The Notification Statement includes stern language

that calls attention to the institution's potential to being placed on a sanction if it does not demonstrate compliance with the standards.

Finalizing the Report

Upon reaching consensus or a majority opinion, the committee finalizes the "Form G" report for each institution to record its determination regarding "No referral required" or "Referral required." For each standard and the QEP Impact Report, the cluster must write an explanation that clearly indicates to the institution the reason for the committee's determination of "Referral required." The two staff recorders assigned to the committee provide administrative support for producing the committee's final "Form G" report for each institution. When these reports have been completed, the responsibilities of the Committee on Fifth-Year Interim Reports are concluded.

The "Form G" report of the Committee on Fifth-Year Interim Reports for each institution must include: (1) compliance determinations for every standard under review and the Impact Report for the Quality Enhancement Plan, (2) a narrative consisting of an explanation for the committee's determination of the institution not demonstrating compliance, (3) an identified due date for the institution's referral report, if applicable, and (4) the designation for inclusion of a Notification Statement in the institution's letter, if applicable.

All materials received from the institutions, as well as any documents created, should be destroyed after "Form G" reports have been finalized. SACSCOC staff will provide instructions regarding the handling of materials.

After the Meeting

As soon as possible after returning home, committee members should mail a completed expense voucher to SACSCOC. This voucher should have an original signature, and all original receipts should be included with the voucher. Within two weeks following the committee meeting, committee members will be asked to complete an evaluation of their cluster coordinator. Evaluators should include comments that would assist SACSCOC in determining the best fit for future review committees.

Role and Responsibilities of the Committee Chair

The chair is responsible for:

- Participating in an orientation conference call with the Coordinator of Commission Support
- Reviewing all "Form G" reports drafted by the cluster coordinators
- Conducting and managing the business of the Committee on Fifth-Year Interim Reports meeting.

Prior to the Meeting

The chair will:

- Participate in an orientation conference call with the Coordinator of Commission Support.
- Review each institution's "Form G" report submitted by the cluster coordinators.
- Consult with the Coordinator of Commission Support to discuss any special considerations before or during the committee meeting.

Email or call all the cluster coordinators to:

- Reiterate the importance of forwarding a final version of the “Form G” reports, if any corrections have been made to the draft reports submitted already.
- Communicate any matters of concern that should be discussed during the committee meeting.

During the Meeting

The chair:

- Leads an orientation meeting with the cluster coordinators as a part of the C&R chair/SACSCOC Staff meeting on the afternoon before the committee meeting.
- Conducts a procedural meeting with all committee members on the morning of the first day of the committee meeting.
- Facilitates the committee members through the five agenda items of the committee meeting.
- Leads the committee discussions through the determinations of compliance for each institution, obtaining consensus on “No referral report” or “Referral report required”
- Ensures that each institution’s report contains appropriate and sufficient explanation for each standard for which the institution has not demonstrated compliance, along with a due date for any requested referral reports.

After the Meeting

The Coordinator of Commission Support will provide a spreadsheet, “Committee E Summary of Findings,” which contains data on each of the institutions and the standards cited. The due dates for any referral reports, along with any additional comments that arose from the meeting will also be included. The committee chair makes an oral report to the Executive Council and the full Board of Trustees, providing the following information:

- Number of institutions reviewed
- Number of institutions with no referral reports requested
- Number of institutions with recommendations for referral reports
- Breakdown of number of institutions with only one referral, two referrals, three referrals and four or more referrals
- Comparisons to previous years’ findings, if numbers vary significantly
- Any additional matters emerging from the review

The committee chair should submit an expense voucher to SACSCOC as soon as possible after returning home. This voucher must have an original signature, and all original receipts should be included with the voucher.

Role and Responsibilities of the Cluster Coordinator

Those evaluators serving as cluster coordinators will:

- Participate in an orientation conference call with the Coordinator of Commission Support
- Email or call committee cluster members prior to the meeting to review assignments and to respond to any questions committee members might have. Coordinators usually conduct a conference call involving all committee members. This call allows a discussion of the tasks the committee members are to complete, including the timeline for completion, prior to the meeting of the committee. The Coordinator of Commission Support should be copied on all email communications with the cluster.

- Monitor the progress of committee members in completing their analysis of compliance with the standards for the assigned cluster of institutions to review prior to the committee meeting.
- Manage the business of the cluster to facilitate discussion, monitor the time allotted to complete tasks, and manage the process of completing a draft “Form G” report for each institution in the cluster concerning the submitted Compliance Certification and Quality Enhancement Plan Impact Report.

Prior to the Meeting

After receiving an email confirmation of the date of the scheduled orientation conference call with SACSCOC staff, the coordinator should:

- Participate in a cluster coordinator orientation conference call with the Coordinator of Commission Support.
- Consult with the Coordinator of Commission Support to discuss any special considerations before or during the committee meeting.
- Send an introductory email to committee members and set up an introductory conference call. Refer to the document, “Sample Memo to Committee Members,” for a template of this introductory email.

The coordinator will usually conduct an initial conference call with all committee members to ensure that they:

- Review each institution’s “Institutional Summary Form Prepared for SACSCOC Reviews” and become familiar with any documentation that the institutions in the cluster have forwarded or referenced as being available through electronic means.
- Begin work as soon as they receive materials from institutions.
- Communicate regularly through email messages with other committee members and SACSCOC staff.
- Copy the coordinator on emails sent to other committee members about an institution in the group.
- Email or call the the Office of Legal and Governmental Affairs, and Commission Support immediately if materials are missing.
- Forward a completed “Combined Reporting Forms” document for each institution in the cluster.
- Email or call the coordinator if they are having technical issues accessing electronic materials. The coordinator can direct them to contact the technical support person identified by the institution if the issue is an isolated one. Committee members should not discuss issues of compliance with the institution.

The work of the cluster coordinator is vital to the committee review process. The coordinator:

- Monitors the progress of the review prior to the committee meeting.
- Drafts a preliminary “Form G” report for each institution from the “Combined Reporting Forms” documents collected from each committee member and forwards those preliminary drafts to the chair and the Coordinator of Commission Support by the established deadline
- Consults with the Coordinator of Commission Support to resolve any preliminary questions or concerns about the reviews.

- Forwards any feedback on the preliminary draft “Form G” reports obtained from SACSCOC staff to all committee members in the cluster.
- Forwards final drafts of the “Form G” reports to the members of the cluster, the chair, and the Coordinator of Commission Support by the established deadline.

During the Meeting

The cluster coordinator:

- Leads one of the focus area discussions of committee members on questions or referrals that have been determined for institutions in their respective clusters to ensure consistency in the interpretation and application of the select standards.
- Leads the members of the cluster through the Compliance Certifications and Quality Enhancement Plan Impact Reports from each institution, obtaining consensus on “No referral report” or “Referral report required.”
- Ensures that a report with appropriate, sufficient, and concise explanation is generated for each standard for which an institution in the cluster has not demonstrated compliance.
- Shares the findings of the cluster with the full committee during the deliberations for the institutions in the cluster.
- Works with the assigned Recorders to finalize the “Form G” reports to reflect the final recommendations of the committee.
- Signs all final “Form G” reports.

After the Meeting

Following the conclusion of the committee meeting, the cluster coordinator should complete an evaluation form for each committee member, including any comments that would assist SACSCOC with determining the best fit for the evaluator on future review committees.

Review by SACSCOC Board of Trustees

The Fifth-Year Interim Review Committee has two options in its review. The Committee may find the institution to have demonstrated compliance with all of the standards under review. In such a case, no further report would be required from the institution. If the Committee finds that the institution has not presented sufficient evidence to warrant a finding of compliance with one or more standards, however, the Committee may choose to request a Referral Report on the standards still in question. A Committee on Compliance and Reports (C&R), one of the standing committees of the SACSCOC Board of Trustees, will receive and review the institution’s Referral Report. The Executive Council and the full SACSCOC Board of Trustees will receive the C&R Committee report and will make a decision regarding the institution’s accreditation and any follow-up activities that it requires of the institution. The Board of Trustees makes decisions regarding accreditation status twice each year – in June and in December.

APPENDIX: GLOSSARY AND REFERENCE GUIDE

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Accreditation Committee	The Accreditation Committee visits a candidate institution or an institution seeking Separate Accreditation to verify compliance with all standards in the <i>Principles of Accreditation</i> (except for Standard 7.2 [<i>Quality Enhancement Plan</i>]). The candidate institution is seeking renewal of candidate: status or initial membership. An institution may remain in candidacy status for a maximum of four years.
Accreditation Contact	The Accreditation Contact is the member of the applicant institution’s Leadership Team who works closely with SACSCOC staff during review of the Application for Membership and with the chair of the candidacy committee to prepare for the institution’s first on-site review.
Accreditation Liaison	Each candidate and member institution appoints an Accreditation Liaison to serve as the resource person on campus for SACSCOC accreditation questions and as an institutional contact person for SACSCOC personnel. (A complete description of the responsibilities of the Accreditation Liaison is available under Institutional Resources .)
Adverse Action	SACSCOC defines four actions made by the SACSCOC Board of Trustees as adverse actions: (1) Denial of Candidacy for Initial Accreditation, (2) Removal from Candidacy for Initial Accreditation, (3) Denial of Initial Membership, and (4) Removal from Membership. All four actions are appealable.
Annual Meeting	Each December, SACSCOC’s College Delegate Assembly business meeting caps a four-day Annual Meeting agenda of pre-session workshops, general sessions, break-out meetings, and round-table discussions about current issues in higher education and topics related to accreditation processes. (Information about the upcoming Annual Meeting is available at Annual Meeting .)
Appealable Action	SACSCOC defines four decisions made by the SACSCOC Board of Trustees or its standing committees as appealable actions: (1) Denial of Candidacy for Initial Accreditation, (2) Removal from Candidacy for Initial Accreditation, (3) Denial of Initial Membership, and (4) Removal from Membership. (Details of the appeals process can be found in SACSCOC policy, Appeals Procedures of the College Delegate Assembly .)

Appeals Committee	Consisting of 12 persons who have served on the SACSCOC Board of Trustees, the Appeals Committee is elected by the College Delegate Assembly to enable applicant, candidate, and member institutions to appeal adverse decisions taken by the SACSCOC Board. (Information on the membership of the committee and its operating procedures is available in SACSCOC policy, Appeals Procedures of the College Delegate Assembly .)
Applicant Institution	After a prospective member institution submits to SACSCOC an initial Application for Membership, it is identified by SACSCOC as an applicant institution. An applicant institution has no formal status with SACSCOC nor does submission of an Application for Membership imply that the institution will attain candidacy or membership.
Application for Membership	The first document submitted by institutions as they begin the process of securing initial accreditation, the Application for Membership describes institutional characteristics in Part A (history, control, organization, educational programs, methods of delivery, enrollment, faculty qualifications, library/learning resources, financial resources, and physical resources) and documents compliance with selected standards of the <i>Principles of Accreditation</i> in Part B (all Core Requirements, Standard 6.2, Section 7, and several other standards as identified in Appendix A of the Resource Manual). (More information is available at Application Information .)
Approval of Substantive Change	Some substantive changes filed by institutions require notification and approval prior to implementation of the change. When SACSCOC takes positive action (by its Board of Trustees) on an institution's prospectus or application for substantive change following notification in accord with SACSCOC policy, it has approved the substantive change and the institution can initiate the substantive change. The policy and procedures for reporting and review of institutional substantive change are outlined in the SACSCOC policy Substantive Change for SACSCOC Accredited Institutions .
Articulation Agreement	An agreement among institutions to accept transfer credits from one institution(s) by the other institution(s). Articulation agreements of a SACSCOC institution are covered by Standard 10.7 (Evaluating and awarding academic credit) of the <i>Principles of Accreditation</i> .

Authorization of a Candidacy Committee Visit

The first official action in the SACSCOC procedure for securing initial accreditation is the authorization of a Candidacy Committee visit, which results from a determination that the revised Application for Membership appears to document compliance with the subset of standards in that Application. (More details are in SACSCOC policy [Accreditation Procedures for Applicant Institutions](#).)

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Branch Campus

A branch campus is an instructional site located geographically apart and independent of the main campus of the institution. A location is independent of the main campus if the location is (1) permanent in nature, (2) offers courses in educational programs leading to a degree, diploma, certificate, or other recognized educational credential, (3) has its own faculty and administrative or supervisory organization, and (4) has its own budgetary and hiring authority. All branch campuses related to the parent campus through corporate or administrative control must (1) include the name of the parent campus and make it clear that its accreditation is dependent on the continued accreditation of the parent campus and (2) be evaluated during reviews for institutions seeking candidacy, initial membership, or reaffirmation of accreditation. (For more information on branch campuses, see SACSCOC Policy [Separate Accreditation for Units of a Member Institution](#).)

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Candidacy Committee

The Candidacy Committee visits an applicant institution to verify compliance with the selected standards and requirements addressed in the Application for Membership. The applicant institution is seeking candidate status. (More details are in SACSCOC policy [Accreditation Procedures for Applicant Institutions](#).)

Candidacy Status

An institution seeking initial accreditation is granted candidacy status upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees indicating that the institution has demonstrated compliance with the requirements addressed in the Application for Membership and that this compliance has been verified by a Candidacy Committee during a visit to the institution. An institution may remain in candidacy status for a maximum of four years with renewal within two years of the date when it was granted candidacy. (More information is available at [Application Information](#).)

Change of legal status, governance, control, or form

For the purpose of accreditation and in accord with the SACSCOC policy on substantive change, an institution must seek prior approval of any of the following: a change of corporate form, governance structure, or conversion, including, but not limited to, change from Limited Partnership to Corporation, from Limited Liability Corporation to Corporation, from a Not-for Profit Corporation to a For-Profit Corporation, a Private to a Public, a Not-for Profit Corporation controlled by members to one controlled by its Board of Directors, or a significant change in the size of the institution’s governing board. (Further information on consolidations is available in SACSCOC policy [Mergers, Consolidations, Change of Ownership, Acquisitions, and Change of Governance, Control, Form, or Legal Status.](#))

Change of ownership

For the purpose of accreditation and in accord with SACSCOC policy on substantive change, an institution must seek prior approval for the sale or transfer to, or acquisition by, a new owner of all, or a substantial portion, of the institution’s assets, or the assets of a branch campus or site. (Further information on consolidations is available in SACSCOC policy [Mergers, Consolidations, Change of Ownership, Acquisitions, and Change of Governance, Control, Form, or Legal Status.](#))

Coherent Evidence

Coherent evidence of an institution’s level of compliance with SACSCOC standards is orderly and logical and consistent with other patterns of evidence presented. (See Part II of this *Handbook* for information on documenting compliance.)

College Delegate Assembly

Comprised of one voting representative from each member institution, the College Delegate Assembly elects the SACSCOC Board of Trustees, the Appeals Committee, and representatives to the SACS Board, and approves revisions to the accrediting standards and the dues schedule. (See Appendix E of the [Resource Manual](#). Further information on the authority of the College Delegate Assembly is available in SACSCOC policy [Standing Rules: SACSCOC Board of Trustees, Executive Council, and the College Delegate Assembly.](#))

Combination Degree

A combination degree is a situation where the same institution awards more than one degree from an overlapping course of study. Combination degrees often allow a shorter time for completion due to the “double-counting” of some coursework. Where this occurs, institutions have an obligation to explain how the quality and integrity of each degree involved is maintained. See Standard 9.2 (Program Length) (Core Requirement) in the [Resource Manual](#) for more detail.

Committees on Compliance and Reports (C&R Committees)

Standing committees of the SACSCOC Board of Trustees, the Committees on Compliance and Reports review Applications for Membership, reports prepared by visiting committees, and the institutional responses to those reports and recommend action on those accreditation issues to the Executive Council. (See Appendix E of the [Resource Manual](#). Further information on the composition and duties of C&R Committees is available in SACSCOC policy [Standing Rules: SACSCOC Board of Trustees, Executive Council, and the College Delegate Assembly](#).)

Complaint against the Commission

A formal written document submitted by a student, employee, or others against a Commission staff member, agency representative, the President of SACSCOC, SACSCOC, or a member of its Board of Trustees, alleging failure to follow Commission policy, evidence of existing bias against an institution, evidence of a conflict of interest, failure to attend to allegations of unfair treatment by a staff member against an institution, etc. (Further information on complaints is available in SACSCOC policy [Complaint Procedures Against SACSCOC or Its Accredited Institutions](#).)

Complaint against an Institution

A formal written document submitted by a student, employee, or others against a member or candidate institution alleging possible non-compliance with a standard of the *Principles of Accreditation*. (Further information on complaints is available in SACSCOC policy [Complaint Procedures Against SACSCOC or Its Accredited Institutions](#).)

Compliance

A finding of compliance in a report resulting from committee review indicates that an institution has documented that it meets the expectations set forth in a standard or requirement in the *Principles of Accreditation*. Reports written by committees require judgments about the compliance or non-compliance of the institution with all of the standards relevant to the review; each judgment is summarized in a short narrative that details how the institution meets or fails to meet the standard or requirement. (See Parts III and V of this *Handbook*.)

Compliance Certification

The primary document prepared by candidate institutions for Accreditation Committees (when seeking initial accreditation) and Off-Site Reaffirmation Committees (when member institutions are seeking reaffirmation of Accreditation), the Compliance Certification presents narrative arguments and appropriate documentation supporting those narratives for compliance with all standards of the *Principles of Accreditation* except Standard 7.2 (*Quality Enhancement Plan*), which is submitted separately as part of a Reaffirmation review. (The template for the [Compliance Certification](#) is available at www.sacscoc.org under [Institutional Resources](#) and also under [Application Information](#).)

Compliance Components	Embedded in the wording of the standards of the <i>Principles of Accreditation</i> , the compliance components are the multiple discrete issues that must be addressed for each standard. These components are frequently signaled by alphanumeric letter, numbers, commas, and the use of compound modifiers. When writing a narrative for a standard, all compliance components should be addressed
Comprehensive Standards	Prior to the 2018 edition of the <i>Principles of Accreditation</i> , some standards were identified as Comprehensive Standards. This distinction was removed in the 2018 edition.
Consolidation	For the purpose of accreditation and in accord with SACSCOC policy, a consolidation is the combination or transfer of the assets of at least two distinct institutions (corporations) to that of a newly-formed institution (corporation). An example includes two colleges consolidating to form a new institution. For purposes of accreditation, when an institution consolidates with another, SACSCOC uses the same review process as that with a change of ownership, acquisitions, and merger. (Further information on consolidations is available in SACSCOC policy <u>Mergers, Consolidations, Change of Ownership, Acquisitions, and Change of Governance, Control, Form, or Legal Status.</u>)
Consortial Relationship	A consortial relationship typically is a type of cooperative academic arrangement in which two or more institutions share in the responsibility of developing and delivering courses and programs that meet mutually agreed-upon standards of academic quality.
Continued Candidacy	An institution is continued in candidacy upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees that the institution (1) has failed to demonstrate adequate compliance with the applicable standards of the <i>Principles of Accreditation</i> and/or (2) has not been in operation through at least one complete degree program cycle and consequently has not graduated at least one class at the level of the highest degree offered by the institution. Furthermore, this failure to meet the requirements for initial accreditation has been verified by the first Accreditation Committee that visited the institution. (More details are in SACSCOC policy <u>Accreditation Procedures for Applicant Institutions.</u>)
Contractual Agreement	A contractual agreement typically is a type of cooperative academic arrangement in which an institution enters an agreement with another institution or service provider for receipt or delivery of courses/programs or portions of courses or programs delivered by another institution or service provider.

Cooperative Academic Arrangements

Cooperative academic arrangements are agreements by institutions accredited by SACSCOC and other parties where the SACSCOC-accredited institution records credits on its transcript as its own without delivering all of the educational process for those credits. Cooperative academic arrangements require notification and a copy of the signed agreement be submitted prior to initiation. The SACSCOC accredited institution has full responsibility for the quality and integrity of the courses and/or programs offered through such arrangements. These arrangements are covered by Standard 10.9 (Cooperative academic arrangements) of the *Principles of Accreditation*.

Core Requirements

Basic, broad-based, foundational requirements, the Core Requirements establish a threshold of development required of all institutions seeking initial accreditation or reaffirmation. Core Requirements are designated with a “(CR)” designation following the standard, and are also listed in Appendix A of the [Resource Manual](#).

Correspondence Education

Correspondence education is a formal educational process under which the institution provides instructional materials, by mail or electronic transmission, including examinations on the materials, to students who are separated from the instructor. Interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student; courses are typically self-paced. (See SACSCOC policy [Distance and Correspondence Education](#).)

Credit Hour

For the purpose of accreditation and in accord with federal regulations, a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates (1) not less than one hour of classroom or direct faculty instruction and a minimum of two hours out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time or (2) at least an equivalent amount of work as required outlined in item 1 above for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours. (Further information on the definition of credit hour is available in SACSCOC policy [Credit Hours](#).)

Current Evidence

Information that supports an assessment of the institution as it exists now is current evidence of an institution’s level of compliance with SACSCOC standards and requirements. (See Part II of this *Handbook* for information on documenting compliance.)

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Degree completion program	Typically, a degree completion program is one designed for a non-traditional undergraduate population such as working adults who have completed some college-level course work but have not achieved a baccalaureate degree. Students in such programs may transfer in credit from courses taken previously and may receive credit for experiential learning. Courses in degree completion programs are often offered in an accelerated format or meet during evening and weekend hours, or may be offered via distance learning technologies. An institution's initial degree completion program is considered to be a substantive change.
Degree Level	See "Level."
Degree Programs	See "Educational Program."
Denial of Authorization of a Candidacy Committee Visit	An institution is denied authorization of a Candidacy Committee visit upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees indicating that the institution has failed to demonstrate compliance with the requirements of the Application for Membership. (More details are in SACSCOC policy <i>Accreditation Procedures for Applicant Institutions.</i>)
Denial of Candidacy Status	An institution is denied candidacy status upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees indicating that the institution has failed to demonstrate compliance with the requirements of the Application for Membership and that this lack of compliance has been verified by a Candidacy Committee during a visit to the institution. Denial of candidacy status is an appealable action. (More details are in SACSCOC policy <i>Accreditation Procedures for Applicant Institutions.</i>)
Denial of Initial Accreditation	An institution is denied initial accreditation upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees that the institution (1) has failed to demonstrate adequate compliance with the applicable standards of the <i>Principles of Accreditation</i> and/or (2) has not been in operation through at least one complete degree program cycle and consequently has not graduated at least one class at the level of the highest degree offered by the institution. Furthermore, this failure to meet the requirements for initial accreditation has been verified by the second Accreditation Committee that visited the institution. Denial of initial accreditation is an appealable action. (More details are in SACSCOC policy <i>Accreditation Procedures for Applicant Institutions.</i>)

Denial of Reaffirmation	An institution is denied reaffirmation upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees that, during its decennial review, the institution (1) has failed to comply with any of the Core Requirements, (2) demonstrates significant non-compliance with other standards of the <i>Principles</i> , or (3) does not comply with SACSCOC policies. Denial of reaffirmation is accompanied by a sanction. Denial of reaffirmation is not an appealable action. (Further information is available in SACSCOC policy <i>Sanctions, Denial of Reaffirmation, and Removal from Membership.</i>)
Distance Education	In conjunction with the federal definition, SACSCOC defines distance education as a formal educational process in which the majority of the instruction (interaction between students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or video cassettes, DVDs, and CD-ROMs if used as part of the distance learning course or program. (See SACSCOC policy <i>Distance and Correspondence Education.</i>)
Dual Degree Program	A dual degree (or a dual academic award) is one whereby students study at two or more institutions, and each institution awards a separate program completion credential bearing only its own name, seal and signature. (See SACSCOC policy <i>Agreements Involving Joint and Dual Academic Awards.</i>)
Dual-Enrollment Program	A dual-enrollment program (or dual credit program) is one where a high school student earns college credit for courses that also satisfy high school requirements. Higher education institutions awarding college credit to high school students are fully responsible for the quality and integrity of that credit. (See SACSCOC Policy <i>Dual Enrollment.</i>)
Dues	Member and candidate institutions pay annual dues to SACSCOC based on a fixed cost set by the Executive Council, plus a percentage of the institution's full-time equivalent enrollment, plus a percentage of the E & G expenses of an institution, if the E & G expenses exceed four million dollars. Institutions are billed in April for receipt by June 30 of that same year. (See SACSCOC policy <i>Dues, Fees and Expenses.</i>)

Educational Program An educational program is a coherent set of courses leading to a credential (degree, diploma, or certificate) awarded by the institution.

Executive Council Comprised of 13 members, the Executive Council is the executive arm of the SACSCOC Board of Trustees and functions on behalf of the Board and the College Delegate Assembly between meetings. (See Part I in this *Handbook*. Further information on the composition and selection of the Executive Council and its duties is available in SACSCOC policy [Standing Rules: SACSCOC Board of Trustees, Executive Council, and the College Delegate Assembly](#).)

Exit Conference Committee visits end with a brief meeting between the Committee and the institution's leadership, the Exit Conference, at which time the Committee orally presents an overview of its draft report with particular emphasis on its findings of compliance/non-compliance. (See Part V of this *Handbook*.)

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Faculty Qualifications Standard 6.2.a (Faculty qualifications) of the *Principles of Accreditation* requires that the institution justifies and documents the qualifications of its faculty members.

Federal Requirements Prior to the 2018 Edition revision of the *Principles of Accreditation*, some standards were identified as Federal Requirements. This distinction was removed in the 2018 revision. However, Table 3 in Part IV of this *Handbook* identifies standards of the *Principles* that must be reviewed on-site as part of SACSCOC's obligations as an accreditor recognized by the U.S. Department of Education.

Fees SACSCOC assesses fees to institutions for a variety of activities: application, reaffirmation of accreditation, substantive change, special reviews, and advisory visits. As part of the reaffirmation process, member institutions pay a set fee for the Off-Site Review, as well as the actual expenses incurred by members of the On-Site Reaffirmation Committee. (See SACSCOC policy [Dues, Fees and Expenses](#).)

Fifth-Year Follow-up Submitted approximately five years prior to an institution's reaffirmation review, a Fifth-Year Follow-up Report, also called an Additional Report to the Fifth-Year Interim Report, addresses accreditation issues identified for verification of continued compliance during a prior meeting of the Committee on Compliance and Reports.

Fifth-Year Interim Report Submitted approximately five years prior to an institution’s reaffirmation review, a Fifth-Year Interim Report includes (1) a modified Compliance Certification that addresses only those federal expectations that are integrated in the various requirements and standards of the *Principles of Accreditation*, (2) an Impact Report on the Quality Enhancement Plan, (3) an [Institutional Summary Form Prepared for SACSCOC Reviews](#), and, where applicable, (4) a report on off-campus sites initiated since the institution’s last reaffirmation but not reviewed, and (5) a report on issues identified for verification of continued compliance during the last reaffirmation review. (See [Fifth-Year Interim Review](#).)

Focused Report A component of the process for reaffirmation of Accreditation, a Focused Report addresses the findings of the Off-Site Review Committee. (Further information about the Focused Report is available in Part IV of this *Handbook*.)

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General Education Courses in general education introduce undergraduate students to the basic content and methodology of the principal areas of knowledge – humanities and the fine arts, the social and behavioral sciences, and the natural sciences and mathematics.

Geographically Separate A geographically separate site is an instructional site or branch campus that is located physically apart from the main campus of the institution. This definition is used in the application of provisions of the SACSCOC policy [Substantive Change for SACSCOC Accredited Institutions](#).

Good Cause If a member institution has not remedied deficiencies at the conclusion of its two-year monitoring period, the SACSCOC Board of Trustees must either remove the institution from membership or continue accreditation for Good Cause; an institution may be continued for Good Cause only if it has met all of the following three conditions: it has (1) demonstrated significant recent accomplishments in addressing non-compliance; (2) documented that it has the “potential” to remedy all deficiencies within the extended period; and (3) provided assurance to the Board that it is not aware of any other reasons why the institution could not be continued in accreditation. Good Cause must be accompanied with Probation. (For further information, see SACSCOC policy [Sanctions, Denial of Reaffirmation, and Removal from Membership](#).)

Good Practices A SACSCOC good practice is a commonly-accepted practice within the higher education community designed to enhance institutional quality. Good practices are posted on the [Documents](#) page.)

Governance When SACSCOC refers to the governance of an institution, it means one of three types of control: (1) public, (2) private, not-for-profit, and (3) private, for-profit. (See also Types of Institutions.)

Guidelines A SACSCOC guideline is an advisory statement designed to assist institutions in fulfilling accreditation requirements. Guidelines are posted on the [Documents](#) page.)

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Impact Report for the Quality Enhancement Plan (QEP) Submitted as part of the Fifth-Year Interim Report five years prior to an institution's reaffirmation review, the Impact Report demonstrates the extent to which the QEP has affected outcomes related to student learning and/or student success

Initial Accreditation An institution is awarded initial accreditation upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees that the institution has demonstrated compliance with the applicable standards of the *Principles of Accreditation* and this compliance has been verified by an Accreditation Committee during a visit to the institution, that it has been in operation through at least one complete degree program cycle, and that it has graduated at least one class at the level of the highest degree offered by the institution. The date of initial accreditation is the time of action by the Board of Trustees. (More details are in SACSCOC policy [Accreditation Procedures for Applicant Institutions](#).)

Initial Application for Membership The initial Application for Membership (addressing Institutional Characteristics in Part A and documenting compliance with the relevant standards in Part B) is the first document submitted by the applicant institution after participation in a Pre-Applicant Workshop. (More information is available at [Application Information](#).)

Institute on Quality Enhancement and Accreditation Each summer, SACSCOC offers a three-day Institute on Quality Enhancement and Accreditation to address issues related to the assessment of student learning and the development of a QEP. (Programs for the upcoming institute and highlights of recent institutes are available on the [Institute on Quality Enhancement and Accreditation](#) page.)

Institutional Effectiveness Institutional effectiveness is the systematic, explicit, and documented process of measuring performance against mission in all aspects of an institution.

Institutional Effectiveness Workshop for Pre-Applicants

All attendees at the Workshop for Pre-Applicants are invited to attend a one-day Institutional Effectiveness Workshop for Pre-Applicants, which is designed to illustrate how to write adequate narratives and appropriately document compliance with the SACSCOC requirements and standards that have historically proven most difficult for applicants to address – Section 7 (Institutional Planning and Effectiveness) and Section 8 (Student Achievement) .

Institutional Profile

Each year, the SACSCOC office collects information about candidate and member institutions. The Institutional Profile requesting information about finances is due in July; the Institutional Profile requesting information about enrollment is due in January.

Institutional Publication

The term “institutional publication” refers to formal print materials of the institution, such as catalogs and faculty handbooks, as well as electronic materials, such as web sites.

Integrity

The honesty, sincerity, and sound moral principle embedded in the concept of integrity serve as the foundation of the relationship between the SACSCOC and its member, candidate, and applicant institutions. (See Section 1 in the [Resource Manual](#) or in the *Principles of Accreditation*.)

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Joint Degree Program

A joint degree program (or joint academic award) is one whereby students study at two or more institutions and are awarded a single program completion credential bearing the names, seals and signatures of each of the participating institutions. (See SACSCOC policy [Agreements Involving Joint and Dual Academic Awards](#).)

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Last Reaffirmation

The date of an institution’s last reaffirmation identifies the year that the most recent comprehensive review of the institution’s compliance with SACSCOC standards was acted upon by the SACSCOC Board of Trustees.

Leadership Team

The Leadership Team is the small group at the institution that coordinates and manages the internal process for developing appropriate documents and overseeing preparations for the reviews that are required for initial accreditation or reaffirmation of Accreditation. (See Part I of this *Handbook*.)

Level Classified by SACSCOC according to the highest degree offered, member institutions are designated as operating at one of the following six levels:
Level I – Associate
Level II – Baccalaureate
Level III - Masters
Level IV – Education Specialist
Level V – Doctorate (3 or fewer)
Level VI – Doctorate (4 or more)

Loss of Membership See “Removal from Membership.”

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Main Campus An institution’s main campus is the street address used for the institution as a whole. The main campus is typically the campus where the central administrative offices are located.

Meeting on the Record Committees on Compliance and Reports meet with representatives of institutions in a meeting on the record, which is an interview with a recorded transcript, when there is a significant possibility that Commission action could include appealable actions (denial of candidacy for initial accreditation, removal from candidacy for initial accreditation, denial of initial membership, and removal from membership), or when such a meeting is needed to provide more information on a complex case. (Further information is available in SACSCOC policy [*Administrative Procedures for the Meetings of the Committees on Compliance and Reports.*](#))

Merger “Merger” means the acquisition by one institution of another institution’s assets. An example includes an institution accredited by SACSCOC acquiring the assets of a non-accredited institution. For purposes of accreditation, when an institution merges with another, SACSCOC uses the same review process as that with a change of ownership, acquisitions, and consolidation. (Further information on mergers is available in SACSCOC policy [*Mergers, Consolidations, Change of Ownership, Acquisitions, and Change of Governance, Control, Form, or Legal Status.*](#))

Mission statement	The mission statement is a comprehensive statement addressing all aspects of institutional function. It is important that the institutional mission statement be formally adopted, published, implemented, and made available to all the constituencies of the institution and to the general public. Because the mission statement describes what the institution does, it is the foundation for planning and effectiveness processes. These processes validate that the institution does what it claims and evaluates how well it fulfills its mission statement. The mission statement thus provides the basis and context for evaluating institutional effectiveness. SACSCOC uses the term “mission” throughout its standards to be consistent in representing other terminology which may mean the same, such as purpose or vision.
Modified prospectus	A modified prospectus can be submitted in lieu of a full prospectus for certain designated substantive changes. When a modified prospectus is acceptable, SACSCOC specifies requested information from the institution. (For more information see SACSCOC policy <i>Substantive Change for SACSCOC Accredited Institutions.</i>)
Monitoring Report	A Monitoring Report provides additional documentation of compliance for those standards of the <i>Principles of Accreditation</i> identified by the Committee on Compliance and Reports following review of a committee’s findings as issues for which full compliance has not yet been documented. (Additional information is available in SACSCOC policy <i>Reports Submitted for SACSCOC Review.</i>)
Multi-campus Institution	A multi-campus institution is accredited as one unit with all campuses included in that accreditation. Such campuses are permanent and usually have a core faculty and substantive administrative and academic support systems. A multi-campus institution may have a central administrative unit—a unit that administers the entire institution—with all instruction taking place on the individual campuses.
Multiple Level Governing Structure	The governing board of an institution typically has legal authority and responsibility for the institution’s mission, its financial stability, and institutional policies. When the governing board does not retain sole legal authority and operating control, the institution has a multiple level governing structure, and needs to clearly outline the active control of these functions by other entities and how the multiple levels of governance relate to the governing board’s responsibilities pertaining to institutional mission, financial operations, and/or institutional policies. See Standard 4.3 (Multiple level governing structure) in the <i>Resource Manual.</i>

National Accrediting Agencies	National accrediting agencies (such as the Rabbinical and Talmudic Schools Accreditation Commission and the Accrediting Bureau of Health Education Schools) focus on specific types of institutions wherever they are located. Normally, these are single purpose institutions (e.g. career education, religious education). (See Appendix E of the Resource Manual .)
Negative Actions	SACSCOC defines negative actions taken by SACSCOC Board of Trustees as the following: (1) Place or continue on warning; (2) Place or continue on probation; and (3) Continue accreditation for good cause and place or continue on probation.
Next Reaffirmation	The date of the next reaffirmation of a member institution is the year in which the SACSCOC Board of Trustees will act on the results of the next comprehensive review of the institution’s compliance with the <i>Principles of Accreditation</i> . Between reaffirmations, other committees (such as Substantive Change Committees) may visit the campus to review the institution’s compliance with a portion of the SACSCOC standards.
Non-Compliance	A finding of Non-Compliance in a report written by a visiting committee indicates that an institution has failed to document that it meets a standard in the <i>Principles of Accreditation</i> . Reports written by both Off-Site Reaffirmation Committees and On-Site (all types) Committees require judgments about the compliance or non-compliance of the institution with all of the standards relevant to the review; each judgment is summarized in a short narrative that details how the institution meets or fails to meet the standard or requirement. In reports written by visiting committees, narratives that detail findings of non-compliance include recommendations, which formally cite the lack of compliance with a standard or requirement. (See Parts III and V of this <i>Handbook</i> .)
Notification of substantive change	For some types of substantive changes, prior to initiation of the change, the institution must first submit a letter from its CEO, or his/her designated representative, to the SACSCOC President summarizing the proposed change and providing the intended implementation date. Some types of changes also require prior approval. The policy and procedures for reporting and review of institutional substantive change are outlined in the SACSCOC policy Substantive Change for SACSCOC Accredited Institutions .



Objective Evidence	Objective evidence of the institution’s level of compliance with SACSCOC standards and requirements is based on observable data and information. (See Part II of this <i>Handbook</i> for information on documenting compliance.)
Off-Campus Instructional Site	An off-campus instructional site is a teaching site located geographically apart from the main campus. A site at which an institution provides electronic delivery and where students go to access the support services needed is also considered an off-campus instructional site. The site is not independent of the institution’s main campus.
Off-Site Reaffirmation Committee	Composed of a chair and evaluators for finance, institutional effectiveness, governance and administration, academic and student support services, library and learning support services, and two or more evaluators for educational programs, the Off-Site Reaffirmation Committee completes the first review of the Compliance Certification developed by a member institution seeking reaffirmation of Accreditation. (See Part III of this <i>Handbook</i> .)
On-Site Reaffirmation Committee	Composed of a minimum of seven members (the chair and evaluators in the areas of organization/governance, faculty, educational programs, student support services, institutional effectiveness, and the Quality Enhancement Plan), the On-Site Reaffirmation Committee visits a member institution seeking reaffirmation of Accreditation to complete the review of the standards begun by the Off-Site Review Committee and to review the QEP and Focused Report. (See Part V this <i>Handbook</i> .)
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Policy	A SACSCOC policy is a required course of action to be followed by SACSCOC’s Board of Trustees or its member or candidate institutions. Policies are posted on the Documents page of the SACSCOC website .
Position Statement	A SACSCOC position statement examines an issue facing SACSCOC’s membership, describes appropriate approaches, and states SACSCOC’s stance on the issue. Position statements are posted on the Documents page of the SACSCOC website .
The Principles of Accreditation: Foundations For Quality Enhancement	The accreditation requirements of SACSCOC that must be met by all applicant, candidate, and member institutions (private for-profit, private not-for-profit, and public) are published in the <i>Principles of Accreditation</i> . These requirements apply to all institutional programs and services, wherever located or however delivered.

Principle of Integrity

The Principle of Integrity (Standard 1.1 in the *Principles of Accreditation*) embodies SACSCOC's expectations that integrity govern the operation of all institutions and that institutions make decisions consistent with the spirit of integrity. Failure to adhere to the integrity principle may result in a loss of accreditation or loss of candidacy.

Probation

The more serious of two SACSCOC-imposed sanctions, probation is usually, but not necessarily, invoked by SACSCOC as the last step before an institution is removed from membership. The reasons for the imposition of probation can be found under "Sanctions." The maximum consecutive time that an institution may be on Probation is two years. (See SACSCOC policy [*Sanctions, Denial of Reaffirmation, and Removal from Membership*](#).)

Procedure One

Procedure One of the substantive change policy is followed by member institutions prior to implementing substantive changes requiring approval and includes the development of a prospectus or application. Procedure One applies to changes such as the following: (1) curriculum: initiating programs at a lower level, expanding at the institution's current degree level if the new programs constitute a significant departure from current programs, initiating degree completion programs, changing significantly the length of a program, entering into a teach-out agreement or closing an institution, and initiating a joint degree program with another institution not accredited by the SACSCOC; (2) location: initiating an additional off-campus site for site-based/classroom group instruction offering at least 50 percent of the credits toward an educational program, and initiating or relocating a branch campus; and (3) delivery system: initiating distance learning courses and programs by which students can earn at least 50 percent of a program's credits offered electronically. Substantive change is prohibited during the process for achieving initial accreditation. (A full list of substantive changes that require both notification and approval and directions for developing a prospectus can be found in SACSCOC policy [*Substantive Change for SACSCOC Accredited Institutions*](#).)

**Procedure
Two**

Procedure Two of the substantive change policy is followed by member institutions prior to implementing substantive changes requiring only notification. Procedure Two applies to changes such as the following: (1) curriculum: repackaging of an existing approved curriculum to create a new lower degree level; (2) location: initiating an additional off-campus site for site-based/classroom group instruction offering at least 25-49 percent of the credits toward an educational program or relocating an approved off-campus site, and (3) delivery system: initiating distance learning courses and programs by which students can earn 25-49 percent of a program's credits offered electronically, or initiating programs/courses delivered through contractual agreement or consortium. Substantive change is prohibited during the process for achieving initial accreditation. (A full list of substantive changes that require both notification and approval and directions for developing a prospectus can be found in SACSCOC policy [Substantive Change for SACSCOC Accredited Institutions](#).)

**Procedure
Three**

Procedure Three of the substantive change policy is followed by member institutions prior to closing of the institution, an off-campus instructional site or branch campus, or a program at the institution. Procedure Three outlines the requirements for approval of a teach-out plan and development of teach-out agreements. (See SACSCOC policy [Substantive Change for SACSCOC Accredited Institutions](#).)

**Programmatic
Accrediting
Agencies**

Programmatic Accrediting Agencies (such as those for dentistry and for dance) are also called Specialized Accrediting Agencies. They focus on discipline-specific educational programs and are not geographically restricted. (See Appendix E of the [Resource Manual](#).)

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**Quality
Enhancement
Plan (QEP)**

Required of all member institutions undergoing reaffirmation of Accreditation, the Quality Enhancement Plan is a carefully designed and focused course of action derived from the institution's existing planning and evaluation processes that addresses a well-defined issue directly related to enhancing specific student learning outcomes and/or student success. Applicant and candidate institutions do not prepare a Quality Enhancement Plan during the process for initial accreditation. (See Standard 7.2 [Quality Enhancement Plan] of the [Resource Manual](#) and Part IV of this *Handbook*.)

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Reaffirmation of Accreditation	A process that involves a collective analysis and judgment by the institution’s internal constituencies, an informed review by peers external to the institution, and a reasoned decision by the elected members of the SACSCOC Board of Trustees, reaffirmation of accreditation is the process for ensuring that member institutions maintain continuing compliance with Commission policies and with the <i>Principles of Accreditation</i> . An institution must be reaffirmed five years after it gains initial accreditation and every ten years thereafter.
Recommendation	A recommendation is a formal statement written by an evaluation committee of SACSCOC indicating an institution’s lack of compliance with a standard in the <i>Principles of Accreditation</i> . The Candidacy Committee and the Off-Site Reaffirmation Committee are the only SACSCOC committees that do not write recommendations (if appropriate).
Referral Report	A Referral Report provides additional documentation of compliance for those standards identified by the Committee on Fifth-Year Interim Reports following submission of an institution’s Fifth-Year Interim Report and Quality Enhancement Plan Impact Report as issues for which full compliance has not yet been documented. The Referral Report is forwarded to the Committees on Compliance and Reports for action. (Additional information is available in SACSCOC policy Reports Submitted for SACSCOC Review .)
Regional Accrediting Agencies	The seven regional accrediting agencies within the six geographic regions of the U.S. review the entire organization, not just the education programs, for institutions within their geographic service area. (See Appendix E of the Resource Manual).
Relevant Evidence	When the evidence directly addresses the standard and provides the basis for the institution’s argument for compliance, it is relevant evidence of an institution’s level of compliance with SACSCOC standards. (See Part II of this <i>Handbook</i> for information on documenting compliance.)
Reliable Evidence	Evidence that can be consistently interpreted is reliable evidence of an institution’s level of compliance with SACSCOC standards. (See Part II of this <i>Handbook</i> for information on documenting compliance.)

Removal from Candidacy

An institution is removed from candidacy upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees that the institution has failed to demonstrate compliance with the Core Requirements and/or has failed to provide strong evidence that it is making adequate progress towards complying with the other standards in the *Principles of Accreditation*. Removal from candidacy is an appealable action. (More details are in SACSCOC policy [Accreditation Procedures for Applicant Institutions](#).)

Removal from Membership

An institution is removed from membership upon recommendation of the Committee on Compliance and Reports and subsequent action by the SACSCOC Board of Trustees that the institution has failed to demonstrate compliance with the Core Requirements (including the Principle of Integrity), other standards in the *Principles of Accreditation*, or has failed to comply with SACSCOC policy. Removal from membership is an appealable action. (See SACSCOC policy [Sanctions, Denial of Reaffirmation, and Removal from Membership](#).)

Report of the Accreditation Committee

Prepared by the Accreditation Committee to record their on-site findings of compliance and non-compliance with the applicable standards of the *Principles of Accreditation*, the [Report of the Accreditation Committee](#) is considered by the Committee on Compliance and Reports when it determines whether to recommend initial accreditation for a candidate institution. (The template for this report is available at [Evaluator Resources](#).)

Report of the Candidacy Committee

Prepared by the Candidacy Committee to record their on-site findings of compliance and non-compliance with all Core Requirements and several additional standards, the [Report of the Candidacy Committee](#) is considered by the Committee on Compliance and Reports when it determines whether to recommend the granting of candidacy status to an applicant institution. (The template for this report is available at [Evaluator Resources](#).)

Report of the Reaffirmation Committee

Begun by the Off-Site Reaffirmation Committee and completed by the On-Site Reaffirmation Committee to record findings of compliance and non-compliance with all requirements and standards in the *Principles of Accreditation*, the [Report of the Reaffirmation Committee](#) is reviewed by the Committee on Compliance and Reports when it determines whether to recommend reaffirmation of accreditation for a member institution. (The template for this report is available under [Evaluator Resources](#).)

Report of the Special Committee Prepared by the Special Committee to record on-site findings of compliance and non-compliance with the applicable standards, the [Report of the Special Committee](#) is reviewed by the Committee on Compliance and Reports when it determines whether to recommend continuation of accreditation for a member institution. (The template for this report is available under [Evaluator Resources](#), although it should be noted that this report template is almost always tailored to better match the issues under review by the Special Committee.)

Report of the Substantive Change Committee Prepared by the Substantive Change Committee to record on-site findings of compliance and non-compliance with the applicable standards, the Report of the Substantive Change Committee is reviewed by the Committee on Compliance and Reports when it determines whether to recommend continuation of accreditation for a member institution. (The templates for various substantive change reports are available at www.sacscoc.org under [Evaluator Resources](#).)

Representative Evidence Not indicative of an isolated case, representative evidence of an institution's level of compliance with SACSCOC standards reflects a larger body of knowledge. (See Part II of this *Handbook*.)

Response to the Visiting Committee Report A Response to the Visiting Committee Report addresses recommendations written by visiting committees by providing updated or additional documentation of compliance. (Additional information is available in SACSCOC policy [Reports Submitted for Committee or Commission Review](#).)

Revised Application for Membership After the leadership team from the applicant institution has met with SACSCOC staff to discuss the staff analysis of the initial Application for Membership, the institution is invited to re-work weak standards of the original document and submit a revised Application for Membership. The decision whether to authorize a Candidacy Committee visit will be based on this revised document. (More information is available under [Application Information](#).)

—S—

SACS A private, nonprofit, voluntary organization, SACS (the Southern Association of Colleges and Schools) comprises two separately-incorporated accrediting entities: [SACSCOC](#), which accredits higher education degree-granting institutions, and SACS CASI (a division of a larger group known as [Cognia](#)) which accredits elementary, middle, and secondary schools. SACS itself now has no accreditation function. (See Appendix E of the [Resource Manual](#).)

SACSCOC	One of two separately incorporated entities of the Southern Association of Colleges and Schools, the SACSCOC (Southern Association of Colleges and Schools SACS Commission on College) is the regional body for the accreditation of degree-granting institutions of higher education in the eleven Southern states – Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia; SACSCOC also accredits international institutions of higher education. (See Appendix E of the Resource Manual .)
SACSCOC Board of Trustees	Comprised of 77 elected members, the SACSCOC Board of Trustees recommends changes to the accrediting standards, authorizes special visits, takes final action on the accreditation status of institutions, nominates individuals to serve on the SACSCOC Board, elects the Executive Council, appoints ad hoc study committees, and approves policies and procedures. (See Appendix E of the Resource Manual . Further information on the selection of trustees and their duties is available in SACSCOC policy Standing Rules: SACSCOC Board of Trustees, Executive Council, and the College Delegate Assembly .)
SACSCOC Staff Representative	Various members of SACSCOC staff are designated contacts for applicant, candidate, and member institutions as they move through various phases of the accreditation process. (See Part I of this <i>Handbook</i> and SACSCOC policy Standing Rules: SACSCOC Board of Trustees, Executive Council, and the College Delegate Assembly .)
Sampling	There is a clear expectation that an institution is required to be able to demonstrate institutional effectiveness for all its educational programs. This includes certificate and degree programs. To this end, an institution may provide a sampling of the effectiveness of its programs within its Compliance Certification submitted at the time of its comprehensive review. Sampling, for the purpose of accreditation, includes the following three elements: (1) a representation of the institution’s mission, (2) a valid cross-section of programs from every school or division, and (3) a compelling case as to why the sampling and assessment findings are an appropriate representation of the institution’s educational programs. Sampling does not preclude the institution from having effectiveness data/analysis available on all programs. It is the prerogative of a SACSCOC committee member to conduct a more in-depth review of an institution’s data/findings/analysis on the effectiveness of all its educational programs.

Sanctions	An institution that fails to comply with any of the Core Requirements, demonstrates significant non-compliance with other standards of the <i>Principles of Accreditation</i> , fails to make significant progress towards correcting deficiencies within the time allotted, or does not comply with SACSCOC policies may be placed on one of two sanctions: warning or probation. (See SACSCOC policy <i>Sanctions, Denial of Reaffirmation, and Removal from Membership.</i>)
Separate Accreditation	Separate accreditation is the process by which an extended unit of a SACSCOC-accredited institution may seek or be directed to seek separate accreditation because of its degree of autonomy from the main campus. (See SACSCOC Policy <i>Separate Accreditation for Units of a Member Institution.</i>)
Significant departure	<p>A new program planned by an institution is a significant departure from current programs offered if the new program is not closely related to previously approved programs at the institution. To determine whether a new program is a “significant departure,” it is helpful to consider the following questions:</p> <ul style="list-style-type: none"> • What previously approved programs does the institution offer that are closely related to the new program and how are they related? • Will significant additional equipment or facilities be needed? • Will significant additional financial resources be needed? • Will a significant number of new courses be required? • Will a significant number of new faculty members be required? • Will significant additional library/learning resources be needed?
Site visits	Committees of evaluators are sent to applicant, candidate, and member institutions to verify the documentation of compliance previously submitted to SACSCOC in such documents as Applications for Membership, Compliance Certifications, and prospectuses for substantive change. Site visits typically involve both the main campus and off-campus instructional sites.
Southern Association of Colleges and Schools	See “SACS.”
Southern Association of Colleges and Schools Commission on Colleges	See “SACSCOC”

Special Committee	Special Committees are authorized by the SACSCOC Board of Trustees or by the SACSCOC President to evaluate institutional circumstances determined to be indicative of a lack of compliance with SACSCOC standards, regulations, or policies. (Further information is available in SACSCOC policy <i>Special Committee Procedures and Team Report.</i>)
Staff Advisory Visit	After the Orientation Meeting for the institution’s Leadership Team for Reaffirmation, an institution may schedule an optional staff advisory visit to the institution to address preparation of the Compliance Certification. Advisory visits are sometimes conducted virtually. (See Part I of this <i>Handbook.</i>)
Substantive Change	Substantive change is a significant modification or expansion of the nature and scope of an accredited institution. Under federal regulations, substantive change includes institutional activities such as (1) changing the established institutional mission or objectives, (2) changing the institution’s legal status, form of control, or ownership, (3) adding courses/programs that represent a significant departure in content or in method of delivery, (4) adding courses/programs at a degree or credential level above the institution’s current accreditation, (5) changing from clock hours to credit hours, (6) substantially increasing the number of clock or credit hours for completion of a program, (7) adding an off-campus location at which the institution offers at least 50 percent of an educational program, or (8) establishing a branch campus. (See Standard 14.2 (Substantive change) of the <i>Resource Manual</i> for more details. Further information about reporting and approval procedures for substantive change can be found in SACSCOC policy <i>Substantive Change for SACSCOC Accredited Institutions.</i>)
Substantive Change Committee	Composed of a chair and a number of evaluators whose expertise is appropriate for the significant departure or expansion under review, the Substantive Change Committee visits the institution to confirm whether the institution has maintained compliance with selected standards of the <i>Principles of Accreditation.</i>

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Teach-out Agreement

A teach-out agreement is a written agreement between institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if an institution, an educational program at an institution, or an institutional location that provides fifty percent or more of at least one program offered ceases to operate before all enrolled students have completed their program of study. Such a teach-out agreement requires SACSCOC approval in advance of implementation. (Requirements for approval of teach-out agreements can be found in SACSCOC policy [Substantive Change for SACSCOC Accredited Institutions](#).) See especially Procedure Three in that policy.)

Teach-out Plan

A teach-out plan is a written plan developed by an institution that provides for the equitable treatment of students if an institution, an educational program at an institution, or an institutional location that provides fifty percent or more of at least one program, ceases to operate before all students have completed their program of study, and may include, if required by the institution's accrediting agency, a teach-out agreement between institutions. Teach-out plans must be approved by SACSCOC in advance of implementation. (Requirements for approval of teach-out agreements can be found in SACSCOC policy [Substantive Change for SACSCOC Accredited Institutions](#).) See especially Procedure Three in that policy.)

Third-Party Comments

In recognition of the value of information provided by the public in determining whether an institution's performance at the time of formal committee evaluation for candidacy, initial accreditation, or reaffirmation of accreditation meets all requirements at the time of the relevant committee's review, SACSCOC invites the public to submit third-party comments. For the purpose of this policy, the public is defined as individuals external to the college or university, excluding students. Therefore, this policy will not apply to comments forwarded to the SACSCOC by the current administration, faculty, and staff. SACSCOC's "Complaint Policy" is the vehicle for comments filed by institutional personnel. (Further information can be found in SACSCOC policy [Third-Party Comment by the Public](#).)

Track A Institution

A Track A institution is a SACSCOC-accredited institution that offers undergraduate degrees only. The term is used to classify institutions during the reaffirmation process and affects the timing of the review.

Track B Institution

A Track B institution is a SACSCOC-accredited institution that offers undergraduate and graduate degrees or graduate degrees only. The term is used to classify institutions during the reaffirmation process and affects the timing of the review.

Type of Institution On the basis of their governance systems, member institutions are classified as one of two primary types of institutions – public or private. Private institutions are further classified as not-for-profit and for-profit.

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Unsolicited Information Significant accreditation-related information revealed about a candidate or member institution (1) during off-site or on-site committee reviews, (2) between periods of scheduled review, and/or (3) during a meeting on the record with the Committees on Compliance and Reports constitutes unsolicited information that may become the basis for a request for further documentation of compliance with a SACSCOC standard or policy. (Further information can be found in SACSCOC policy [Unsolicited Information](#).)

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Verifiable Evidence Evidence that can be replicated and corroborated is verifiable evidence of an institution’s level of compliance with SACSCOC standards and requirements. (See Part II of this *Handbook* for information on documenting compliance.)

Visiting Committees Composed of evaluators from similar institutions outside of the home state of the host institution, visiting committees conduct site visits to main campuses and/or off-campus instructional sites and write reports of their findings for consideration by the Committee on Compliance and Reports as it addresses institutional accreditation issues. Visiting committees are most often referred to by their formal titles (such as On-Site Reaffirmation Committee or Substantive Change Committee) that reflect the nature of the accreditation issue under consideration. (See Parts V of this *Handbook*. Further information is available in SACSCOC policy [Ethical Obligations of Evaluators](#).)

—W—

Warning The less serious of two SACSCOC-imposed sanctions, warning is usually, but not necessarily, levied in the earlier stages of institutional review and often, but not necessarily, precedes probation. It cannot, however, succeed probation. The reasons for the imposition of warning can be found under “Sanctions.” The maximum consecutive time that an institution may be on warning is two years. Sanctions do not apply to applicant and candidate institutions. (See SACSCOC policy [Sanctions, Denial of Reaffirmation, and Removal from Membership](#).)

**Workshop for
Pre-Applicants**

Prior to submitting an Application for Membership, all prospective applicants (including campuses of member institutions seeking separate accreditation) are required to attend a one-day Workshop for Pre-Applicants, which is designed to (1) review the procedures for attaining membership, (2) provide an understanding of SACSCOC and its accreditation procedures, and (3) explain how to complete the application. (More information is available under [Application Information](#).)