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## Policy on Rights, Responsibilities, and Good Practice in Relations with Member Institutions

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January 2022

### Background

Accreditation as a system of voluntary, non-governmental, self-regulation, and peer review is unique to American educational institutions. It is a system by which an institution evaluates itself in accordance with standards of good practice regarding mission, goals, and objectives; the appropriateness, sufficiency, and utilization of resources; the usefulness, integrity, and effectiveness of its processes; and the extent to which it is achieving its intended student achievement and student learning outcomes, at levels generally acceptable for higher education. It is a process by which accreditors provide students, the public, and each other with assurances of institutional integrity and effectiveness and educational quality.

The Commission supports its member institutions through a collaboration that fosters institutional excellence and continuous improvement. Grounded by a set of core values, ACCJC's interaction with its members is guided by a commitment to the principles of collegiality, transparency, and consistency, which create mutual and clear understandings to ensure fair and value-adding results for institutions. The work of accreditation is mediated through the relationships that are formed among all the participants, characterized by mutual respect and engagement around common interests. In order to foster this relationship, the Commission and its member institutions fulfill their respective roles in the accreditation process in accordance with the following policy elements.

### Policy Elements

#### A. Communication

##### Commission:

The institutional Chief Executive Officer (CEO) is the chief representative of the institution to the Commission. ACCJC regularly communicates with institutions about matters of policy and institutional quality through the CEO and Accreditation Liaison Officer (ALO). Official correspondence between the Commission and an institution's president is typically copied to the institution's designated ALO; other types of communication may occur directly between the Commission staff and the ALO.

##### Institution:

The CEO has the primary leadership role for accreditation, ensuring that the institution meets or exceeds Eligibility Requirements, Accreditation Standards, and Commission policies at all times<sup>1</sup>. The CEO ensures that institutional accreditation standards have primacy over other specialized accrediting agency recognition or other institutional, local, or regional requirements to comply with the Eligibility Requirements, Accreditation Standards,

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<sup>1</sup> ACCJC Accreditation Standard IV.B.4

and Commission policies. The CEO sets the expectations of the accreditation process and is responsible for disseminating accreditation information to its college community. The CEO must designate an ALO at the institution who is a critical point of contact with the Commission.<sup>2</sup>

## **B. Development and Promulgation of Commission Standards**

Commission:

The Commission has the responsibility to develop and promulgate standards,<sup>3</sup> which are consistent with the purposes of accreditation, which are sufficiently flexible to allow diversity of institutional missions and effective program development, and which meet the requirements of the U.S. Department of Education (ED).

The Commission will provide opportunities for broad participation in the development and acceptance of the Eligibility Requirements, Accreditation Standards, and Commission policies.<sup>4</sup>

Institution:

A member institution has the responsibility to participate in development of the Eligibility Requirements, Accreditation Standards, and Commission policies and in the Commission's periodic reviews of them. The CEO and ALO will communicate and promulgate information to their institutional constituencies about the Eligibility Requirements, Accreditation Standards, and Commission policies, any changes to them, and the institution's plans for changes needed to comply with them.

## **C. Institutional Records of Accreditation**

Commission:

The Commission has the responsibility to maintain formal records of accreditation from the previous accreditation cycle and current cycle of comprehensive reviews including institutional reports (such as the Institutional Self Evaluation Report, Follow Up Report, Midterm Report, Special Report, Substantive change applications), team reports, annual reports and annual fiscal reports, and action letters. The Commission has the responsibility to provide, when requested, copies of formal accreditation records pertaining to that institution to the Chief Executive Officer and, when appropriate, to the Accreditation Liaison Officer.

Institution:

A member institution has the responsibility to maintain all correspondence and records on the accreditation history of the institution, including ACCJC substantive change actions and administrative approvals. An institution may share records of the institution's accreditation history, as appropriate, within the campus community.

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<sup>2</sup> ACCJC *Policy on the Role of the Accreditation Liaison Officer*

<sup>3</sup> The Eligibility Requirements, Accreditation Standards, and Commission policies together represent the Commission standards. Implementing procedures can be found in the ACCJC Guides and Manuals.

<sup>4</sup> ACCJC *Policy on Review of Accreditation Standards*

## **D. Peer Review Process**

### **1. Visits**

Commission:

The Commission has the right to: visit an institution on the initiative of the Commission, only after notice is provided to the institution; conduct visits as required under the Commission's adopted accreditation processes and policies<sup>5</sup>; and modify its visit process with appropriate notice. The Commission has the responsibility to provide sufficient notice and time for institutions to prepare for scheduled visits.

Institution:

The institution is responsible for notifying the college community about scheduled visits, and for facilitating the opportunity for communication between relevant institutional representatives and the peer review team as required by the visit. The institution has the right to request adjustments to a scheduled visit when extraordinary and unforeseeable circumstances significantly impact a college's operations.

### **2. Third Party Comment for Comprehensive Accreditation or Pre-Accreditation (Candidacy) Visits<sup>6</sup>**

Commission:

A third-party comment assists the Commission as it considers applications for candidacy, accreditation, or reaffirmation of accreditation. Commission staff will review all third-party comments for applicability to Commission standards and which are received no later than five weeks before the peer review team's focused site visit. Commission staff is responsible for providing institutions an opportunity to review applicable third-party comments.

Institution:

When an institution is undergoing a comprehensive review, the institution is responsible for notifying the campus community and public, six months prior to the focused site visit, of the opportunity and process for submission of third-party comments concerning the institution's ability to meet Standards. Any member of the college community or public may submit a third-party comment by completing the Commission's online third-party form, available via the institution's website or ACCJC's website. In order to ensure evaluation of applicable third-party comments by the peer review team, third-party comments should be received by the Commission staff no later than five weeks before the peer review team's focused site visit.

### **3. Peer Review Teams**

Commission:

The Commission has the responsibility to select peer review team members, who are competent by virtue of experience, training, and orientation, and are sensitive to the unique mission of the institution. Teams will include both academic and administrative representatives. Faculty members will be included among the academic representatives on comprehensive peer review teams. The Commission has the responsibility to assure

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<sup>5</sup> ACCJC *Policy on Commission Actions*; ACCJC *Policy on Monitoring Institutional Performance*

<sup>6</sup> 34 C.F.R. §602.23 (b)

that peer review team members are impartial, objective, and without conflict of interest, and that the peer review team is of an appropriate size and composition for the purposes of the visit. The Commission has the responsibility to assure that team members keep confidential all institutional information pertaining to the peer review process.<sup>7</sup>

Institution:

The institution has the right and responsibility to review the team members and report any conflicts of interest or concerns to the Commission before the team composition is finalized.

#### **4. Peer Review Team Reports**

Commission:

The Commission has the responsibility to ensure that the draft Peer Review Team Report identifies and distinguishes clearly between findings, conclusions and recommendations related to deficiencies in meeting the Eligibility Requirements, Accreditation Standards and Commission policies, and those recommendations representing suggestions for quality improvement. When applicable, the Peer Review Team Report will include commendations, which note areas of exceptional practice when the institution exceeds Standards.

The Commission will provide the CEO with an opportunity to correct all factual errors in the team chair's draft Peer Review Team Report and to provide supplemental materials pertinent to the facts that were available at the time of the visit in the draft Peer Review Team Report before the Commission takes action on the accredited status of the institution. The Commission does not consider new evidence or updates that were not available at the time of the visit in its decision making process.

Institution:

The institution's CEO is responsible for reviewing the draft Peer Review Team Report to make corrections on errors of fact. The institution's CEO has the right to provide to the Commission supplemental materials related pertinent to the facts in the Peer Review Team Report before the Commission takes action. Supplemental materials must be information that was available at the time of the team visit. The written response may also pertain to the conduct of the peer review process.

The CEO has the opportunity to appear before the Commission (in person or via tele/video conference) to present oral comments in closed session. The oral comments must pertain to the facts of the draft Peer Review Team Report or evidence that was available or presented at the time of the visit, or the conduct of the peer review process.

#### **E. Accreditation Decisions**

Commission:

In its decision making process, the Commission will use the Eligibility Requirements, Accreditation Standards, and Commission policies (together Commission's Standards), along with information in the Institutional Self Evaluation Report, college Follow Up reports

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<sup>7</sup> ACCJC Policy on Public Disclosure and Confidentiality in the Accreditation Process; ACCJC Statement on the Process for Preserving Confidentiality of Documents Related to Institutional Evaluations

and other required reports, Peer Review Team Reports, Annual Reports, external audits, written supplemental information provided by the institution in response to the final team report, written or oral testimony before the Commission, or other relevant information brought to the Commission's attention pertaining to compliance with the Commission's Standards.

The Commission, through its President, will afford institutions an opportunity to provide written or oral testimony before making any decision on the institution's compliance with any Accreditation Standards or other deficiencies that will become part of the basis for sanction or denial or withdrawal of accreditation or candidacy. This opportunity is also afforded in cases when the Commission's actions on an institution are based upon any deficiency which has not been noted as part of an accreditation review in the peer review team report, Institutional Self-Evaluation Report or other institutional report, or in the submitted annual reports and audit reports. In its response, the institution also may address any asserted procedural errors.

The Commission also has the responsibility to notify institutions promptly in writing of accreditation decisions and give reasons for the actions; publish accrediting decisions, both affirmative and negative, except for eligibility (which is not made public); and maintain the confidentiality of the draft Peer Review Team Report until after the Commission has acted on it.<sup>8</sup>

Institution:

The CEO has the right to appear before the Commission (in person or via tele/video conference) to present written or oral comments in closed session of the Commission before the Commission takes action on the institution's accredited status.

A member institution has the responsibility to accept the Commission's action and to make public the Commission's action letter and accompanying final Peer Review Team Report, as well as associated institutional reports. A member institution has a responsibility to respond to the Commission requirements and/or recommendations within the time parameters set by the Commission. A member institution has the right to appeal adverse accreditation decisions.<sup>9</sup>

## **F. Ongoing Quality Assurance**

Commission:

The Commission has the responsibility to support improvement of the educational effectiveness of an institution and work with the institution to identify appropriate assistance. As part of its role in assuring the public of quality education based on the Commission standards and policies, the Commission must make sound and consistent decisions based on the evidence provided in required reports. Thus in order to effectively monitor the conditions of an institution in meeting standards, the Commission has the right to require institutions to provide periodic reports, special reports, annual reports, evidentiary documents, and/or documents prepared by external third parties, such as external audits, as well as require additional visits.<sup>10</sup> The Commission can also request the reevaluation of an

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<sup>8</sup> ACCJC Policy on Public Disclosure and Confidentiality in the Accreditation Process

<sup>9</sup> ACCJC Policy on Institutional Appeals

<sup>10</sup> ACCJC Policy on Commission Actions; ACCJC Policy on Monitoring Institutional Performance; ACCJC Policy on Substantive Changes; and ACCJC Eligibility Requirement 21

institution at any time as a means for monitoring specific developments within an institution between comprehensive evaluations.

**Institution:**

A member institution has the responsibility to uphold the credibility and integrity of the accreditation process and collegial peer review process by helping institutional constituencies to understand the Eligibility Requirements, Accreditation Standards, and Commission policies pertinent to an accreditation action; making required improvements in response to Commission decisions and action letters in order to come into compliance with standards; ensuring compliance with standards at all times in pursuit of educational excellence and accomplishment of its unique mission.

*Policy adopted January 2005; Edited August 2007, October 2007; Revised June 2011, June 2012; Edited August 2012; Revised October 2013, January 2014, January 2016, June 2017, January 2020, Revised June 2021; Edited January 2022*

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