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**Seeking Accreditation Visit (SAV) 2+ Team Report Directions and Template**

Directions For Preparing and Submitting the Report

# **Purpose of the Team Report**

The team report for the second or subsequent Seeking Accreditation Visit conveys to the Commission and the institution the team’s analyses and recommendations about the institution’s level of compliance with WSCUC’s four Standards. This report is an important element in the Commission’s determination about granting Candidacy, Initial Accreditation, or other options such as a deferral or denial. Seeking Accreditation Visit 1 (SAV1) constitutes the first visit following the approval of Eligibility. If the institution is not found to be in compliance with the Commission’s four 2023 Standards for Initial Accreditation, subsequent visits (SAV2, 3, 4) are scheduled and are focused on Standards found not to be in compliance and other recommendations of the SAV1. See *How to Become Accredited* for further details.

# **Team Chair and Assistant Chair’s Responsibility for the Report**

The chair and assistant chair work together to prepare and finalize the team report as follows.

1. The assistant chair compiles and edits the team members’ drafts into one coherent report and forwards the report to the chair for review.
2. The chair sends the draft team report to the team and WSCUC staff liaison and incorporates, as appropriate, any of the team members’ suggested revisions.
3. The chair sends the resulting draft report (as a PDF file) to the CEO of the institution for correction of errors of fact and redaction of proprietary information (in accordance with the Commission Proprietary Information Policy), requesting a letter setting forth any desired changes.
4. The chair makes any revisions requested by the CEO that are deemed necessary for the factual accuracy of the report. (Note that revisions beyond correction of factual errors are made at the discretion of the chair).
5. The chair sends the final report to the WSCUC Accreditation Process Manager, who will then send the final report to the CEO and invite him/her to submit a response to the Commission.

# **Components of the Team Report**

1. Title page
2. Table of contents with page numbers
3. Report narrative
4. Required appendices, if relevant, and not part of SAV1 team report: Federal Compliance Forms (credit hour and program length, student complaints, marketing/recruitment, transfer credit policy)
5. Additional appendices, if relevant, and not part of SAV1 team report: (a) off-campus locations review (b) distance education review

# **Confidential Team Recommendation Form**

The chair also sends the Confidential Team Recommendationform to WSCUC. The information in this form is confidential and intended only for the WSCUC team, staff and Commission. Please do not attach it to the team report.

The team will agree upon the contents of the Confidential Team Recommendation and include a rationale for the proposed action. Teams should consult the “Commission Decisions on Institutions” section of the *Handbook of Accreditation*, available on the WSCUC website.

# **Report Length and Page Format**

The report should be double-spaced, using a standard font size (e.g., Times New Roman 12-point), and should include page headers and page numbers. Seeking Accreditation Visit 1 team reports are generally 30-40 pages in length.

A template for the team report follows.

*Revised, July 2023*

(Title Page Format)

**REPORT OF THE WSCUC VISITING TEAM**

**SEEKING ACCREDITATION VISIT \_\_\_ *(specify visit number)***

For Institutions Seeking Candidacy or Initial Accreditation (*specify which*)

To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Institution)

Date of visit

Team Roster

List names of chair, assistant chair, team members and WSCUC staff liaison. Include title and institution for each person.

|  |
| --- |
| The team evaluated the institution under the **[indicate 2013 or 2023]** WSCUC Standards of Accreditation and prepared this report containing its collective judgment for consideration and action by the institution and by the WASC Senior College and University Commission. The formal action concerning the institution’s status is taken by the Commission and is described in a letter from the Commission to the institution. Once an institution achieves either candidacy or initial accreditation, the team report and Commission Action Letter associated with the review that resulted in the granting of either candidacy or initial accreditation and the team reports and Commission Action Letters of any subsequent reviews will be made available to the public by publication on the WSCUC website. |

# **Table of Contents**

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## **Section I. Overview and Context**

A. Description of the Institution and Visit

B. The Institution’s Seeking Accreditation Visit Report:

* Quality and Rigor of the Review and Report

C. Response to Issues Raised in Past Commission Letters

## **Section II. Evaluation Of Institutional Compliance with WSCUC Standards (only the Standards not yet in compliance need to be addressed in the report)**

Standard 1

Standard 2

Standard 3

Standard 4

## **Section III. Commendations and Recommendations**

## **Appendices (If not completed in prior SAV or if issues were identified by the Commission for follow up)**

Four Federal Compliance Forms

Report on Distance Education

Report on Off-Campus Locations (as appropriate)

# **Format For the Seeking Accreditation Visit 2 Team Report**

## **Section I – Overview and Context**

**A. Description of Institution and Visit**

* Provide background information on the mission and nature of the institution, including brief history, location(s), size, levels and kinds of degrees awarded.
* Provide information on the institution’s recent accreditation history, including the date of the review of the Eligibility Review Committee panel.
* Indicate any new degrees added since the prior Seeking Accreditation Visit.

**B. The Institution’s Seeking Accreditation Visit Report: Quality and Rigor of the Review and Report**

Describe the overall quality of the Seeking Accreditation Visit 2 Report and its value in the review process.

* Was the report well organized and clearly written and presented?
* Did the report accurately portray the Standards not yet in compliance for Initial Accreditation?
* What was the extent of institutional involvement in the review and report preparation? How were faculty included in discussion of issues and recommendations?
* Did the institution address in a self-reflective manner its compliance with the Standards?
* Did the institution identify areas of strength and needed improvement?
* Was the evidence submitted for each Standard not yet in compliance from a prior visit and accompanying Criteria for Review (CFR) thorough, appropriate, and conclusive?
* Did the institution implement the review as a rigorous inquiry with searching questions, appropriate methodology, and effective use of evidence?
* Did the data and evidence support the claims made by the institution in addressing compliance with the identified Standards and CFRs?
* Did the institution’s self-review lead to a greater understanding of its effectiveness, systems of quality improvement, and student learning?

**C. Response to Issues Raised in Past Commission Letters**

Set forth each major recommendation in the Commission letter from the prior Seeking Accreditation Visit, and provide a brief description and analysis of evidence showing how the institution has responded. If an issue remains a concern and is discussed in a later section of the team report, this section may refer to content in those sections.

Also set forth any other major changes that have occurred since the last visit that may affect the Commission’s evaluation of the institution.

## **Section II – Evaluation Of Institutional Compliance With WSCUC Standards**

**A. Organizing the Team Report on Compliance with WSCUC Standards**

The purpose of Section II is to help the Commission understand the institution’s level of compliance with WSCUC’s four Standards of Accreditation. The **team report provides evidence and analysis** to support the team’s confidential recommendation regarding level of compliance. However, **the team recommends only on the Confidential Team Recommendation form, for each Standard, a level of compliance demonstrated by the institution.** The options that are indicated to the WSCUC Commission are: a) level sufficient for granting initial accreditation, b) level sufficient for candidacy, or c) not in compliance.

The team report may be organized holistically around each Standard rather than focusing on each Criterion for Review (CFR) or the team report may focus on each Standard using the Standard’s subheadings with specific language about each CFR supporting the Standard. In all cases, CFRs must be referenced.

Per WSCUC practice, only the Commission is authorized to make the final determination as to whether or not an institution is in compliance with the Standards. The Commission relies, however, on the discernment of peer reviewers as they exercise their collective judgment regarding an institution’s compliance with the Standards. The team report should provide clear evidence and analysis to support findings related to compliance with each of the Standards. Both the team report and the Confidential Team Recommendation form will inform the Commission’s deliberations in making a compliance determination.

In order to help the institution and team determine the level of compliance, the following definitions are provided in “Appendix B: Compliance with WSCUC Standards for Institutions Seeking Candidacy and Initial Accreditation Guide” in the *How to Become Accredited Procedures Manual* and also on the WSCUC website.

**Sufficient for Candidacy:**

* Evidence of a foundational understanding of the CFRs and the development of initial structures and process to operationalize them
* Evidence of a plan for the ongoing development and improvement of structures and processes to fully operationalize the CFRs
* Evidence of engagement with stakeholders to inform quality improvement efforts
* Evidence of financial and operational sustainability and plans for continued growth and stability

**Sufficient for Initial Accreditation:**

* Evidence of compliance with the CFRs, including documentation of ongoing monitoring and improvement efforts
* Evidence of a strong organizational culture of quality
* Evidence of effective communication and collaboration among all levels of the institution
* Evidence of ongoing evaluation of quality improvement initiatives, including a plan for continued sustainability

The team, as validated by the Commission, is making a holistic determination of compliance with each Standard rather than CFR by CFR. The team, as validated by the Commission, may find various levels of compliance across a Standard’s CFRs but may determine that the overall Standard has been met at a sufficient level. However, the Commission also recognizes that some CFRs carry more weight than others, such as those dealing with financial capacity, governance, and educational effectiveness.

In writing about each Standard:

* Identify and briefly describe the Standard.
* Describe the evidence reviewed by the team in addressing the Standard.
* Evaluate the appropriateness, quality, and effectiveness of the evidence and methods used to undertake the inquiry.
* Verify and assess the institution’s analysis and conclusions about the Standard.
* Evaluate the level of self-reflection by the institution.
* State the team findings, but do **not** indicate level of compliance about the Standard in the team report; such indications belong only on the Confidential Team Recommendation form.
* Identify any good practices.
* Provide recommendations for areas of improvement, citing appropriate CFRs.

**B. Presenting Issues, Analyzing Evidence and Formulating Conclusions.**

Each issue identified by the team for discussion in the report should include an analysis with the following elements:

* Statement of the issue
* Description of the evidence the team reviewed in evaluating this matter
* Analysis of the evidence, i.e., what does the evidence show about this issue? What did the institution conclude from this evidence?

## **Section III. Commendations and Recommendations**

The Commission takes action on granting Candidacy or Initial Accreditation or deferring or denying either status following the Seeking Accreditation Visit. To provide the Commission with the information it needs to make this important decision, the team is expected to address the following matters in this final section of the report:

* The team should seek a balance between commendations and recommendations such that the institution knows that its work has been both recognized and critiqued. Commendations should highlight specific practices or accomplishments, broader institutional commitments, and the overall effort evidenced in the institution’s report. Commendations do not need to be linked to a specific CFR.
* Include recommendations that address overarching and important areas and encompass issues that should be addressed before the next comprehensive review or the next visit for Candidacy or Initial Accreditation. All recommendations need to be supported by evidence and analysis set forth in the body of the report. Each recommendation should cite one or more relevant 2023 Standards and CFRs. Institutions are expected to act upon team recommendations.
* Place other suggestions and observations that do not rise to the level of recommendations in the body of the report.

## **Appendices (as appropriate)**