HIGHER LEARNING COMMISSION

POLICY

Policy Book

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HIGHER LEARNING COMMISSION

POLICY

Section One: Criteria and Requirements

Policy Title: Eligibility Requirements

Number: CRRT.A.10.010

An institution must meet all Eligibility Requirements before it is granted Candidate status. It must present *initial* evidence that it meets these requirements before a pre-application interview is scheduled with the Commission. Through submission of the Eligibility Filing it must present *full* evidence that it meets these requirements before a site visit for Candidacy is scheduled.

1. Jurisdiction of the Commission
The institution falls within the Commission's jurisdiction as defined in the Commission's Bylaws (Article III). The Commission extends accreditation and candidacy for accreditation to higher education institutions that are 1) incorporated in Arizona, Arkansas, Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, New Mexico, North Dakota, Ohio, Oklahoma, South Dakota, West Virginia, Wisconsin, and Wyoming, or operating under federal authority within these states, and 2) have substantial presence, as defined in Commission policy, within these states.

2. Legal Status
The institution is appropriately authorized in each of the states, sovereign nations, or jurisdictions in which it operates to award degrees, offer educational programs, or conduct activities as an institution of higher education. At least one of these jurisdictions must be in the HLC region.

3. Governing Board
The institution has an independent governing board that possesses and exercises the necessary legal power to establish and review the basic policies that govern the institution.

4. Stability
The institution demonstrates a history of stable operations and consistent control during the two years preceding the submission of the Eligibility Filing.

5. Mission Statement
The institution has a statement of mission approved by its governing board and appropriate for a degree-granting institution of higher education. The mission defines the nature and purpose of the higher learning provided by the institution and the students for whom it is intended.

6. Educational Programs
The institution has educational programs that are appropriate for an institution of higher education. The Commission may decline to evaluate an institution for status with the Commission if the institution's mission or educational

programs fall outside areas in which the Commission has demonstrated expertise or lacks appropriate standards for meaningful review.

In appropriate proportion, the institution's programs are degree-granting and involve coursework provided by the institution, establishing the institution's commitment to degree-granting higher education.

The institution has clearly articulated learning goals for its academic programs and has strategies for assessment in place.

The institution:

- maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor's degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any exceptions are explained and justified.
- has a program of general education that is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts common knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess. The institution clearly and publicly articulates the purposes, content and intended learning outcomes of its general education program.
- conforms to commonly accepted minimum program length: 60 semester credits for associate's degrees, 120 semester credits for bachelor's degrees, and 30 semester credits beyond the bachelor's for master's degrees. Any exception to these minima must be explained and justified.
- meets the federal requirements for credit ascription described in the Commission's Federal Compliance Program.

7. Information to the Public

The institution makes public its statements of mission, vision, and values; full descriptions of its program requirements; its requirements for admission both to the institution and to particular programs or majors; its policies on acceptance of transfer credit, including how credit is applied to degree requirements; clear and accurate information on all student costs, including tuition, fees, training and incidentals, and its policy on refunds; its policies regarding good standing, probation, and dismissal; all residency requirements; and grievance and complaint procedures.

The institution portrays clearly and accurately to the public its accreditation status with national, specialized, and professional accreditation agencies as well as with the Higher Learning Commission, including a clear distinction between Candidate or Accredited status and an intention to seek status.

8. Financial Capacity

The institution has the financial base to support its operations and sustain them in the future. It demonstrates a record of responsible fiscal management, including appropriate debt levels.

The institution:

- has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years; and
- undergoes external financial audit by a certified public accountant or a public audit agency. For private institutions the audit is annual; for public institutions it is at least every two years. (Institutions under federal control are exempted provided that they have other reliable information to document the institution's fiscal resources and management.)

9. Administration
The institution has a Chief Executive Officer appointed by its governing board.

The institution has governance and administrative structures that enable it to carry out its operations.

10. Faculty and Other Academic Personnel
The institution employs faculty and other academic personnel appropriately qualified and sufficient in number to support its academic programs.

11. Learning Resources
The institution owns or has secured access to the learning resources and support services necessary to support the learning expected of its students (research laboratories, libraries, performance spaces, clinical practice sites, museum collections, etc.).

12. Student Support Services
The institution makes available to its students support services appropriate for its mission, such as advising, academic records, financial aid, and placement.

13. Planning
The institution demonstrates that it engages in planning with regard to its current and future business and academic operations.

14. Policies and Procedures
The institution has appropriate policies and procedures for its students, administrators, faculty, and staff.

15. Current Activity
The institution has students enrolled in its degree programs. (To be granted initial accreditation, an institution must have graduated students from at least one degree program.)

16. Integrity of Business and Academic Operations
The institution has no record of inappropriate, unethical, and untruthful dealings with its students, with the business community, or with agencies of government. The institution complies with all legal requirements (in addition to authorization of academic programs) wherever it does business.

17. Consistency of Description Among Agencies
The institution describes itself consistently to all accrediting and governmental agencies with regard to its mission, programs, governance, and finances.

18. Accreditation Record
The institution has not had its accreditation revoked and has not voluntarily withdrawn under a show-cause order or

been under a sanction with another accrediting agency recognized by CHEA or USDE within the five years preceding the initiation of the Eligibility Process.

19. Good Faith and Planning to Achieve Accreditation
The board has authorized the institution to seek affiliation with the Commission and indicated its intention, if affiliated with the Commission, to accept the Obligations of Affiliation.

The institution has a realistic plan for achieving accreditation with the Commission within the period of time set by Commission policy.

- If the institution offers programs that require specialized accreditation or recognition in order for its students to be certified or sit for licensing examinations, it either has the appropriate accreditation or discloses publicly and clearly the consequences of the lack thereof. The institution always makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.
- If the institution is predominantly or solely a single-purpose institution in fields that require licensure for practice, it demonstrates that it is also accredited by or is actively in the process of applying to a recognized specialized accrediting agency for each field, if such agency exists.

Policy Number Key

Section CRRT: Criteria and Requirements
Chapter A: Establishing Institutional Eligibility
Part 10: General

Last Revised: June 2011
First Adopted: February 2003
Revision History: June 2006, June 2011
Notes: Former policy number 1.1(c), 2013 – 1.1(e)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Criteria for Accreditation

Number: CRRT.B.10.010

The Criteria for Accreditation are the standards of quality by which the Commission determines whether an institution merits accreditation or reaffirmation of accreditation. They are as follows:

Criterion One. Mission

The institution's mission is clear and articulated publicly; it guides the institution's operations.

Core Components

1.A. The institution's mission is broadly understood within the institution and guides its operations.

1. The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.
2. The institution's academic programs, student support services, and enrollment profile are consistent with its stated mission.
3. The institution's planning and budgeting priorities align with and support the mission. (This sub-component may be addressed by reference to the response to Criterion 5.C.1.)

1.B. The mission is articulated publicly.

1. The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.
2. The mission document or documents are current and explain the extent of the institution's emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.
3. The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.

1.C. The institution understands the relationship between its mission and the diversity of society.

1. The institution addresses its role in a multicultural society.
2. The institution's processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.

1.D. The institution's mission demonstrates commitment to the public good.

1. Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.

2. The institution's educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.
3. The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

Criterion Two. Integrity: Ethical and Responsible Conduct
The institution acts with integrity; its conduct is ethical and responsible.

Core Components

2.A. The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows policies and processes for fair and ethical behavior on the part of its governing board, administration, faculty, and staff.

2.B. The institution presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships.

2.C. The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity.

1. The governing board's deliberations reflect priorities to preserve and enhance the institution.
2. The governing board reviews and considers the reasonable and relevant interests of the institution's internal and external constituencies during its decision-making deliberations.
3. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests, or other external parties when such influence would not be in the best interest of the institution.
4. The governing board delegates day-to-day management of the institution to the administration and expects the faculty to oversee academic matters.

2.D. The institution is committed to freedom of expression and the pursuit of truth in teaching and learning.

2.E. The institution's policies and procedures call for responsible acquisition, discovery and application of knowledge by its faculty, students and staff.

1. The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students.
2. Students are offered guidance in the ethical use of information resources.
3. The institution has and enforces policies on academic honesty and integrity.

Criterion Three. Teaching and Learning: Quality, Resources, and Support
The institution provides high quality education, wherever and however its offerings are delivered.

Core Components

3.A. The institution's degree programs are appropriate to higher education.

1. Courses and programs are current and require levels of performance by students appropriate to the degree or certificate awarded.

2. The institution articulates and differentiates learning goals for its undergraduate, graduate, post-baccalaureate, post-graduate, and certificate programs.
3. The institution's program quality and learning goals are consistent across all modes of delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through contractual or consortial arrangements, or any other modality).

3.B The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to its educational programs.

1. The general education program is appropriate to the mission, educational offerings, and degree levels of the institution.
2. The institution articulates the purposes, content, and intended learning outcomes of its undergraduate general education requirements. The program of general education is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.
3. Every degree program offered by the institution engages students in collecting, analyzing, and communicating information; in mastering modes of inquiry or creative work; and in developing skills adaptable to changing environments.
4. The education offered by the institution recognizes the human and cultural diversity of the world in which students live and work.
5. The faculty and students contribute to scholarship, creative work, and the discovery of knowledge to the extent appropriate to their programs and the institution's mission.

3.C. The institution has the faculty and staff needed for effective, high-quality programs and student services.

1. The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for student performance; establishment of academic credentials for instructional staff; involvement in assessment of student learning.
2. All instructors are appropriately qualified, including those in dual credit, contractual, and consortial programs.
3. Instructors are evaluated regularly in accordance with established institutional policies and procedures.
4. The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.
5. Instructors are accessible for student inquiry.
6. Staff members providing student support services, such as tutoring, financial aid advising, academic advising, and co-curricular activities, are appropriately qualified, trained, and supported in their professional development.

3.D. The institution provides support for student learning and effective teaching.

1. The institution provides student support services suited to the needs of its student populations.

2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its programs and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites, museum collections, as appropriate to the institution's offerings).
5. The institution provides to students guidance in the effective use of research and information resources.

3.E. The institution fulfills the claims it makes for an enriched educational environment.

1. Co-curricular programs are suited to the institution's mission and contribute to the educational experience of its students.
2. The institution demonstrates any claims it makes about contributions to its students' educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Criterion Four. Teaching and Learning: Evaluation and Improvement

The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

Core Components

4.A. The institution demonstrates responsibility for the quality of its educational programs.

1. The institution maintains a practice of regular program reviews.
2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.
3. The institution has policies that assure the quality of the credit it accepts in transfer.
4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.
5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
6. The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).

4.B. The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.

1. The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.
2. The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.
3. The institution uses the information gained from assessment to improve student learning.
4. The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.

4.C. The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.

1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.
2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.
3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.
4. The institution's processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Criterion Five. Resources, Planning, and Institutional Effectiveness

The institution's resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

Core Components

5.A. The institution's resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.

1. The institution has the fiscal and human resources and physical and technological infrastructure sufficient to support its operations wherever and however programs are delivered.
2. The institution's resource allocation process ensures that its educational purposes are not adversely affected by elective resource allocations to other areas or disbursement of revenue to a superordinate entity.
3. The goals incorporated into mission statements or elaborations of mission statements are realistic in light of the institution's organization, resources, and opportunities.
4. The institution's staff in all areas are appropriately qualified and trained.
5. The institution has a well-developed process in place for budgeting and for monitoring expense.

5.B. The institution's governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission.

1. The governing board is knowledgeable about the institution; it provides oversight of the institution's financial and academic policies and practices and meets its legal and fiduciary responsibilities.
2. The institution has and employs policies and procedures to engage its internal constituencies—including its governing board, administration, faculty, staff, and students—in the institution's governance.
3. Administration, faculty, staff, and students are involved in setting academic requirements, policy, and processes through effective structures for contribution and collaborative effort.

5.C. The institution engages in systematic and integrated planning.

1. The institution allocates its resources in alignment with its mission and priorities.
2. The institution links its processes for assessment of student learning, evaluation of operations, planning, and budgeting.
3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.
4. The institution plans on the basis of a sound understanding of its current capacity. Institutional plans anticipate the possible impact of fluctuations in the institution's sources of revenue, such as enrollment, the economy, and state support.
5. Institutional planning anticipates emerging factors, such as technology, demographic shifts, and globalization.

5.D. The institution works systematically to improve its performance.

1. The institution develops and documents evidence of performance in its operations.
2. The institution learns from its operational experience and applies that learning to improve its institutional effectiveness, capabilities, and sustainability, overall and in its component parts.

Policy Number Key

Section CRRT: Criteria and Requirements
Chapter B: Criteria for Accreditation
Part 10: General

Last Revised: June 2013
First Adopted: August 1992
Revision History: Criterion Three revised August 1998; revised February 2002; revised February 2007. New Criteria for Accreditation adopted February 2003, effective January 2005; New Criteria for Accreditation adopted February 2012, effective January 2013; Revised June 2013.

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Assumed Practices

Number: CRRT.B.10.020

Please note: This policy will sunset on August 31, 2017. The revised Assumed Practices adopted June 2015 will be effective for all institutions on September 1, 2017.

Foundational to the Criteria and Core Components is a set of practices shared by institutions of higher education in the United States. Unlike Criteria and Core Components, these Assumed Practices are (1) generally matters to be determined as facts, rather than matters requiring professional judgment and (2) unlikely to vary by institutional mission or context.

A. Integrity: Ethical and Responsible Conduct

1. The institution has a conflict of interest policy that ensures that the governing board and the senior administrative personnel act in the best interest of the institution.
2. The institution has ethics policies for faculty and staff regarding conflict of interest, nepotism, recruitment and admissions, financial aid, privacy of personal information, and contracting.
3. The institution provides its students, administrators, faculty, and staff with policies and procedures informing them of their rights and responsibilities within the institution.
4. The institution provides clear information regarding its procedures for receiving complaints and grievances from students and other constituencies, responds to them in a timely manner, and analyzes them to improve its processes.
5. The institution makes readily available to students and to the general public clear and complete information including:
    a. statements of mission, vision, and values
    b. full descriptions of the requirements for its programs, including all pre-requisite courses
    c. requirements for admission both to the institution and to particular programs or majors
    d. policies on acceptance of transfer credit, including how credit is applied to degree requirements. (Except for courses articulated through transfer policies or institutional agreements, the institution makes no promises to prospective students regarding the acceptance of credit awarded by examination, credit for prior learning, or credit for transfer until an evaluation has been conducted.)
    e. all student costs, including tuition, fees, training, and incidentals; its financial aid policies, practices, and requirements; and its policy on refunds
    f. policies regarding academic good standing, probation, and dismissal; residency or enrollment requirements (if any)
    g. a full list of its instructors and their academic credentials

h. its relationship with any parent organization (corporation, hospital, or church, or other entity that owns the institution) and any external providers of its instruction.

6. The institution assures that all data it makes public are accurate and complete, including those reporting on student achievement of learning and student persistence, retention, and completion.
7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.
    a. An institution offering programs that require specialized accreditation or recognition by a state licensing board or other entity in order for its students to be certified or to sit for the licensing examination in states where its students reside either has the appropriate accreditation and recognition or discloses publicly and clearly the consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.
    b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status and recognition of the program by state licensing boards at each location.
    c. An institution that provides a program that prepares students for a licensure, certification, or other qualifying examination publicly discloses its pass rate on that examination, unless such information is not available to the institution.
8. The governing board and its executive committee, if it has one, include some "public" members. Public members have no significant administrative position or any ownership interest in any of the following: the institution itself; a company that does substantial business with the institution; a company or organization with which the institution has a substantial partnership; a parent, ultimate parent, affiliate, or subsidiary corporation; an investment group or firm substantially involved with one of the above organizations. All publicly-elected members or members appointed by publicly-elected individuals or bodies (governors, elected legislative bodies) are public members.[1]
9. The governing board has the authority to approve the annual budget and to engage and dismiss the chief executive officer.[1]
10. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.
11. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.

[1] *Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.*

B. Teaching and Learning: Quality, Resources, and Support

1. Programs, Courses, and Credits
    a. The institution conforms to commonly accepted minimum program length: 60 semester credits for associate's degrees, 120 semester credits for bachelor's degrees, and 30 semester credits beyond the bachelor's for master's degrees. Any variation from these minima must be explained and justified.

b. The institution maintains structures or practices that ensure the coherence and quality of the programs for which it awards a degree. Typically institutions will require that at minimum 30 of the 120 credits earned for the bachelor's degree and 15 of the 60 credits for the associate's degree be credits earned at the institution itself, through arrangements with other accredited institutions, or through contractual relationships approved by the Commission. Any variation from the typical minima must be explained and justified.

c. The institution's policy and practice assure that at least 50% of courses applied to a graduate program are courses designed for graduate work, rather than undergraduate courses credited toward a graduate degree. (Cf. Criterion 3.A.1 and 2.)
(An institution may allow well-prepared advanced students to substitute its graduate courses for required or elective courses in an undergraduate degree program and then subsequently count those same courses as fulfilling graduate requirements in a related graduate program that the institution offers. In "4+1" or "2+3" programs, at least 50% of the credits allocated for the master's degree – usually 15 of 30 – must be for courses designed for graduate work.)

d. The institution adheres to policies on student academic load per term that reflect reasonable expectations for successful learning and course completion.

e. Courses that carry academic credit toward college-level credentials have content and rigor appropriate to higher education.

f. The institution has a process for ensuring that all courses transferred and applied toward degree requirements demonstrate equivalence with its own courses required for that degree or are of equivalent rigor.

g. The institution has a clear policy on the maximum allowable credit for prior learning as a reasonable proportion of the credits required to complete the student's program. Credit awarded for prior learning is documented, evaluated, and appropriate for the level of degree awarded. (Note that this requirement does not apply to courses transferred from other institutions.)

h. The institution maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor's degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any variation is explained and justified.

2. Faculty Roles and Qualifications

a. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process.

b. Instructors teaching at the doctoral level have a record of recognized scholarship, creative endeavor, or achievement in practice commensurate with doctoral expectations.

c. Faculty participate substantially in:

1) oversight of the curriculum—its development and implementation, academic substance, currency, and relevance for internal and external constituencies;

2) assurance of consistency in the level and quality of instruction and in the expectations of student performance;

3) establishment of the academic qualifications for instructional personnel;

4) analysis of data and appropriate action on assessment of student learning and program completion.

3. Support Services
    a. Financial aid advising clearly and comprehensively reviews students' eligibility for financial assistance and assists students in a full understanding of their debt and its consequences.
    b. The institution maintains timely and accurate transcript and records services.

C. Teaching and Learning: Evaluation and Improvement

1. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) have the authority for the assignment of grades. (This requirement allows for collective responsibility, as when a faculty committee has the authority to override a grade on appeal.)
2. The institution refrains from the transcription of credit from other institutions or providers that it will not apply to its own programs.
3. The institution has formal and current written agreements for managing any internships and clinical placements included in its programs.
4. A predominantly or solely single-purpose institution in fields that require licensure for practice is also accredited by or is actively in the process of applying to a recognized specialized accrediting agency for each field, if such agency exists.
5. Instructors communicate course requirements to students in writing and in a timely manner.
6. Institutional data on assessment of student learning are accurate and address the full range of students who enroll.
7. Institutional data on student retention, persistence, and completion are accurate and address the full range of students who enroll.

D. Resources, Planning, and Institutional Effectiveness

1. The institution is able to meet its current financial obligations.
2. The institution has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years.
3. The institution has future financial projections addressing its long-term financial sustainability.
4. The institution maintains effective systems for collecting, analyzing, and using institutional information.
5. The institution undergoes an external audit by a certified public accountant or a public audit agency that reports financial statements on the institution separately from any other related entity or parent corporation. For private institutions the audit is annual; for public institutions it is at least every two years.[2]

6. The institution's administrative structure includes a chief executive officer, chief financial officer, and chief academic officer (titles may vary) with appropriate credentials and experience and sufficient focus on the institution to ensure appropriate leadership and oversight. (An institution may outsource its financial functions but must have the capacity to assure the effectiveness of that arrangement.)

2 Institutions under federal control are exempted provided that they have other reliable information to document the institution's fiscal resources and management.

Policy Number Key

Section CRRT: Criteria and Requirements
Chapter B: Criteria for Accreditation
Part 10: General

Last Revised: June 2014
First Adopted: February 2012
Revision History: June 2013, June 2014

HIGHER LEARNING COMMISSION

POLICY

Section Two: Policies Required by Federal Regulation

Policy Title: Federal Compliance Requirements

Number: FDCR.A.10.010

An institution accredited by the Commission or seeking accreditation or candidate status shall demonstrate that it meets each of the Commission's federal compliance requirements. This expectation shall apply to an institution regardless of whether the institution is participating in the Title IV program. However, an institution that does not participate in the Title IV program shall be exempted from that federal compliance requirement related to demonstrating that the institution is meeting its Title IV program responsibilities.

An institution shall provide evidence of meeting these requirements in preparation for a comprehensive evaluation and upon demand by the Commission. The comprehensive evaluation or other team will weigh the information and its relationship to the Criteria for Accreditation, and/or the requirements of the Candidacy program. If a team determines that an institution has failed to meet these requirements or if the team determines that issues in meeting these requirements raise concerns about the institution's ability to meet the Criteria for Accreditation, Core Components or Assumed Practices, it may recommend further monitoring, sanction, or withdrawal of affiliation.

The Commission reserves the right to review an institution's status with regard to these requirements and with the Criteria for Accreditation, Core Components or Assumed Practices, as appropriate, when the U.S. Department of Education findings or findings by another recognized accreditor have proven significant noncompliance with the Higher Education Act.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: June 2012
First Adopted: February 1996
Revision History: Adopted February 1996, effective September 1996, revised February 1998, edited October 2003, renumbered November 2010, revised and split between policies 4.0 and 4.0(d) June 2012
Notes: Former policy: 1.7 "Institutional Compliance with the Higher Education Reauthorization Act"; see also new Policy 4.5 "Institutional Compliance with Title IV Program Responsibilities."
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Assignment of Credits, Program Length, and Tuition

Number: FDCR.A.10.020

An institution shall be able to equate its learning experiences with semester or quarter credit hours using practices common to institutions of higher education, to justify the lengths of its programs in comparison to similar programs found in accredited institutions of higher education, and to justify any program-specific tuition in terms of program costs, program length, and program objectives. Affiliated institutions shall notify the Commission of any significant changes in the relationships among credits, program length, and tuition.

Assignment of Credit Hours. The institution's assignment and award of credit hours shall conform to commonly accepted practices in higher education. Those institutions seeking, or participating in, Title IV federal financial aid, shall demonstrate that they have policies determining the credit hours awarded to courses and programs in keeping with commonly-accepted practices and with the federal definition of the credit hour, as reproduced herein for reference only, and that institutions also have procedures that result in an appropriate awarding of institutional credit in conformity with the policies established by the institution.

> ***Federal Credit Hour Definition**: 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 not less than:*
>
> *(1) one hour of classroom or direct faculty instruction and a minimum of two hours of 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 in paragraph (1) of this definition for other activities as established by an institution, including laboratory work, internships, practica, studio work, and other academic work leading toward to the award of credit hours. 34CFR 600.2 (11/1/2010)*

Commission Review. The Commission shall review the assignment of credit hours, program length, and tuition in conjunction with a comprehensive evaluation for reaffirmation of accreditation during the Commission's assurance process. The Commission may sample or use other techniques to review specific institutional programs to ensure that it has reviewed the reliability and accuracy of the institution's assignment of credit. The Commission shall monitor, through its established monitoring processes, the resolution of any concerns identified during that evaluation with regard to the awarding of academic credit, program length, or tuition, and shall require that an institution remedy any deficiency in this regard by a date certain but not to exceed two years from the date of the action identifying the deficiency.

Commission Action for Systematic Noncompliance. In addition to taking appropriate action related to the institution's compliance with the Federal Compliance Requirements, the Commission shall notify the Secretary of

Education if, following any review process identified above or through any other mechanism, the Commission finds systematic noncompliance with the Commission's policies in this section regarding the awarding of academic credit.

The Commission shall understand systematic noncompliance to mean that an institution lacks policies to determine the appropriate awarding of academic credit or that there is an awarding by an institution of institutional credit across multiple programs or divisions or affecting significant numbers of students not in conformity with the policies established by the institution or with commonly accepted practices in higher education.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: June 2012
First Adopted: February 1996
Revision History: Adopted February 1996, effective September 1996, revised November 2011, revised and combined with policies 3.10, 3.10(a), 3.10b), and 3.10(c)
Notes: Former policy number 4.0(a).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Institutional Records of Student Complaints

Number: FDCR.A.10.030

An institution shall make available an account of the student complaints it has received, its processing of those complaints, and how that processing comports with the institution's policies and procedures on the handling of grievances or complaints.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: June 2012
First Adopted: February 1998
Revision History: Adopted February 1998, revised August 1999, revised and renumbered June 2012
Notes: Former policy number: 4.0(b).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Publication of Transfer Policies

Number: FDCR.A.10.040

Each institution shall determine its own policies and procedures for accepting transfer credits, including credits from accredited and non-accredited institutions, from foreign institutions, and from institutions which grant credit for experiential learning and for non-traditional adult learner programs in conformity with any expectations in the Commission's Assumed Practices. An institution's periodic review of its transfer policies and procedures should include evaluation of their clarity to those who administer them, to the students who follow them, and to employers and other stakeholders. It should also include the consistency of their interpretation and application throughout the institution, as well as their responsiveness to new types of learning opportunities outside institutions of higher education.

An institution shall demonstrate that it has transfer policies that are publicly disclosed and that such policies include a statement of criteria established by the institution regarding transfer of credit earned at another institution. An institution shall also demonstrate that it publishes a list of institutions or programs with which the institution has established articulation agreements to receive and send credit.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: April 2013
First Adopted: October 1988
Revision History: Adopted October 1988, revised February 2011, revised February 2009, revised and renumbered June 2012, April 2013
Notes: Former policy number: 4.0(c).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Practices for Verification of Student Identity

Number: FDCR.A.10.050

An institution offering distance education or correspondence education, as specified in the federal definitions reproduced herein solely for reference, shall have processes through which the institution establishes that the student who registers in the distance education or correspondence education courses or programs is the same student who participates in and completes and receives the academic credit.

> *Definitions:*
> *Distance education/course means education that uses one or more of the {following} technologies (i) to deliver instruction to students who are separated from the instructor: and (ii) to support regular and substantive interaction between the students and the instructor, synchronously or asynchronously. The technologies used may include: (i) the internet; (ii) one way and two way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; (iii) audioconferencing; or (iv) videocassettes, DVDs, and CD-Roms, if the videocassettes, DVDs or CDRoms are used in conjunction with any of the technologies listed in clauses (i) through (iii).*
>
> *Correspondence education/course means: (1) Education provided through one or more courses by an institution 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. (2) Interaction between the instructor and the student is not regular and substantive, and is primarily initiated by the student. (3) Correspondence courses are typically self-paced. (4) Correspondence education is not distance education. 34CFR 602.3 (11/1/2010)*

Institutional Practices. In verifying the identify of students who participate in class or coursework the institution may make use of a variety of methods at the option of the institution, including but not limited to: (1) secure login and pass code; (2) proctored examinations; and (3) new or other technologies and practices that are effective in verifying the identity of students. Such methods must have reasonable and appropriate safeguards to protect student privacy. Institutions must notify students at the time of registration or enrollment of any projected additional student charges associated with the verification of student identity such as separate fees charged by proctoring services, etc.

Commission Review. The Commission will review an institution's student identity verification protocols when an institution requests permission to add programs in distance delivery as well as during a comprehensive evaluation. The Commission will also require that institutions submit information about student identity verification protocols on the Commission's Institutional Update.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: June 2012
First Adopted: February 2009
Revision History: Adopted February 2009, revised February 2010, revised and renumbered June 2012
Notes: Former policy number: 4.0(d).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Title IV Program Responsibilities

Number: FDCR.A.10.060

An institution shall demonstrate that it complies if required with the Title IV program responsibility requirements of the Higher Education Reauthorization Act as most recently amended. Therefore, institutions will provide for Commission review any documents concerning the institution's program responsibilities under Title IV of the Act, including any results of financial or compliance audits and program reviews, audits reports by the Office of Inspector General of the U.S. Department of Education, and any other information related to its fulfillment of its Title IV responsibilities.

Default rate. An institution shall make reasonable efforts to ensure that its students do not take on excessive debt either through federal or private loans. An institution shall also demonstrate that it is appropriately fulfilling its Title IV responsibilities to manage its student loan program, to minimize student default on such loans, and to provide accurate information to the U.S. Department of Education when required in conjunction with its loan program. Therefore, an institution will submit to the Commission information about its participation in federal and private loan programs as well as its three-year Title IV default rates and any default reduction plans provided to the U.S. Department of Education.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: June 2012
First Adopted: February 1996
Revision History: Adopted February 1996, effective September 1996, revised February 1998, edited October 2003, renumbered November 2010, revised and renumbered June 2012.
Notes: Former policy number 4.0(e).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Public Information

Number: FDCR.A.10.070

Required Information for Students and the Public

An institution demonstrates that it makes available to students and the public fair, accurate and complete information in catalogs, student handbooks, and other publications that include, at a minimum, information about the institution's calendar, grading, admissions, academic program requirements, tuition and fees, and refund policies.

Information about Student Achievement

An institution's information for students and the public shall include information regarding student achievement. This information shall include student retention rates, completion rates or other information appropriate for the mission of the institution and its goals for students.

Advertising and Recruiting Materials and Other Public Information

An institution's public information including its advertising and recruiting materials shall evidence the same fairness and accuracy the Commission expects in an institution's catalog and other documents for students.

Disclosure of Affiliation Status

If the institution chooses to reference its accreditation status in advertising and recruiting materials or other document or location, that disclosure will accurately explain its status with the Commission and the academic programs, locations and other institutional activities included in its accreditation.

It will accompany that reference with information on how to contact the Commission. It shall provide the Commission's address and telephone number or it may use the Commission's website address in lieu of this information. Electronic materials shall use the Commission's collective membership mark.

The Commission reserves the right to issue a public statement or Public Disclosure Notice (PDN) correcting any incorrect or misleading information the Commission determines that an institution has publicized about its accreditation status, recent actions by the Commission or other information.

Public Notification of Opportunity to Comment

The Commission shall seek comment from third parties about institutions being evaluated for accreditation or candidacy. As part of the comprehensive evaluation, institutions shall publicize the forthcoming evaluation in accordance with established Commission procedures regarding content, dissemination, and timing.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: October 2014
First Adopted: August 1990, February 1996, and June 2012
Revision History: Adopted August 1990, revised August 1996, effective September 1996, renumbered February 2010, revised and renumbered June 2012, October 2014
Notes: Policies combined November 2012 – 4.0(f), 4.0(g), 4.0(j).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Review of Student Outcome Data

Number: FDCR.A.10.080

An institution shall demonstrate that, wherever applicable to its programs, its consideration of outcome data in evaluating the success of its students and its programs includes course completion, job placement, and licensing examination information.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised:
First Adopted: June 2012
Revision History:
Notes: Former policy number 4.0(h)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Standing with State and Other Accrediting Agencies

Number: FDCR.A.10.090

An institution has a responsibility to remain in good standing with each state in which it is authorized or licensed as well as with any other institutional or programmatic accrediting agency recognized by the U.S. Department of Education by which it is accredited or pre-accredited up to the point that it voluntarily withdraws from such relationships. An institution shall fairly represent to the Commission and to the public its history or current or previous status with other institutional or programmatic accrediting bodies and with each state in which it is authorized or licensed.

An institution shall disclose to the Commission any pending or final state actions that affect the institution's legal status or authority to grant degrees or offer programs and any pending or final actions by an accrediting agency to withdraw accredited or pre-accredited status, impose a sanction or deny an application for such status. Such disclosure shall take place at the time of the action by the other entity and on the Commission's Institutional Update as well as in preparation for a comprehensive evaluation by the Commission.

Commission Review. If another such accrediting agency or if a state has taken any of these actions, the Commission will undertake a prompt review of the institution and the related action.

With regard to an applying institution, the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant candidacy or accreditation. If it chooses to grant candidacy or accreditation to such an institution, it will provide the Secretary of Education a written explanation of why that action is appropriate within thirty days of taking the action.

With regard to an accredited institution, the Commission will determine whether additional review or Commission action, including sanction or withdrawal of accreditation, is appropriate. The Commission may undertake its review in any way provided for in Commission policy.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter A: Federal Compliance
Part 10: General

Last Revised: June 2012
First Adopted: January 1983

Revision History: Policy 9.1 (Adopted January 1983, revised February 1996, effective June 1996, revised February 1998, revised June 2008); Policy 9.2 (Adopted February 1986, revised February 1996, effective July 1996, revised June 2001, revised June 2008); Policy 9.3 (Adopted February 1988, revised February 1996, revised February 1998); Policy 9.4 (Adopted February 1998, revised June 2008); combined, revised, and renumbered June 2012
Notes: Former policy number 4.0(i).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Commission Approval of Institutional Teach-Out Arrangements

Number: FDCR.B.10.010

Commission approval shall be required when an institution must teach-out one or more students.

Institutional Situations Requiring Submission of Teach-Out Arrangements

The institution shall be required to submit a written teach-out plan in any of the following circumstances: (a) the U.S. Department of Education notifies the Commission of an emergency action, or a limitation, suspension or termination or similar action against the institution; (b) the Commission acts to withdraw, terminate or suspend the status of an institution; (c) the institution notifies the Commission that it intends to cease or suspend operations or permanently close a site where it offers at least 100% of either a Certificate or degree program before all students have completed their program of study; or (d) a state licensing or authorizing agency notifies the Commission that an institution's license or legal authorization to provide an educational program in that state has been or will be revoked.

Commission Approval of Teach-Out Plans

The institution shall submit the teach-out plan to the Commission; the Commission will provide its approval if the following are met:

1. The teach-out plan provides for equitable treatment of students by ensuring that they are able to complete the educational program in which they were enrolled immediately prior to the notification in *Institutional Situations Requiring Submission of Teach-Out Arrangements* within a reasonable period of time; and
2. The teach-out plan provides for prompt notification of additional charges to students, if any.

If the Commission approves a teach-out plan that includes a program accredited by a specialized or professional accreditor, the Commission shall notify that accreditor.

Commission Requirement for Teach-Out Agreement

The Commission may require that an institution in the situations identified in *Institutional Situations Requiring Submission of Teach-Out Arrangements* submit a teach-out agreement for the Commission's review and approval in conjunction with its teach-out plan. In addition, any affiliated institution that enters into a teach-out agreement with, or on behalf of, another institution, regardless of whether that institution has presented a teach-out plan to the Commission or is accredited by the Commission, shall submit the teach-out agreement to the Commission for approval prior to its implementation. The Commission will provide its approval if the following are met:

1. The teach-out agreement is with another institution that is accredited by or holding candidacy with an agency recognized by the U.S. Department of Education and, where appropriate, that it is an eligible institution for Title IV financial aid;
2. The teach-out agreement is consistent with all applicable state and federal regulations;

3. The teach-out institution has the necessary experience, resources, and support services to provide an educational program that is of acceptable quality and reasonably similar in content, structure and scheduling to that provided by the institution closing or ceasing operations; demonstrates that it can provide students access to such programs and services without requiring them to move or travel substantial distances; and is stable, carrying out its mission and meeting all obligations to existing students; and

The teach-out agreement is fair and equitable to students and provides students with reasonable opportunities to complete their education without additional charges and includes a notification provision to ensure that students have complete information about the tuition and fees of the institution conducting the teach-out.

Institutional Closure Without Approved Teach-Out Plan or Agreement

The Commission shall work with the U.S. Department of Education and the appropriate state agency, if any, in the event an institution the Commission accredits or has awarded candidacy for accreditation status closes without a teach-out plan or agreement, to assist students in finding reasonable opportunities to complete their education without additional charges.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation
Chapter B: Teach Out
Part 10: General

Last Revised: November 2010
First Adopted: June 2008
Revision History: revised February 2009, February 2010, November 2010
Notes: Policies combined November 2012: 3.9, 3.9(a), 3.9(b), 3.9(c), 3.9(d).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Section Three: Institutions

Policy Title: Determining Institutional Quality

Number: INST.A.10.010

The Commission shall determine institutional quality using Criteria for Accreditation and Assumed Practices.

The Commission's Board of Trustees shall grant institutions one of two statuses: accreditation or candidate for accreditation (candidacy) based on that determination.

Policy Number Key

Section INST: Institutional Policies
Chapter A: Implementation of HLC Criteria and Requirements
Part 10: General

Last Revised: February 2012
First Adopted: August 1992
Revision History: February 2011, February 2012, effective January 2013
Notes: Former policy number 1.1, 2013 – 1.1(a). The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013. See Appendix A for information on the related policies that sunset December 31, 2012.
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Evaluative Framework for the HLC Criteria

Number: INST.A.10.020

An institution must be judged by the Commission to have met each of the Criteria for Accreditation, the Core Components and the Federal Compliance Requirements to merit the grant of initial accreditation or the reaffirmation of accreditation.

In preparation for accreditation and reaffirmation of accreditation, an institution shall provide evidence through a self-study or self-evaluation process that it meets each of the Criteria and the Core Components. The distinctiveness of an institution's mission may condition the strategies it adopts and the evidence it provides that it meets each Core Component. The institution shall also provide evidence with regard to those sub-components of the Criteria that apply to the institution. An institution in its evidence or a team in its review may identify topics or issues related to a Core Component other than those specified in the sub-components to be included in evaluating the institution's meeting of the Core Component.

For institutions applying for initial accreditation the submission of evidence from the self-study or self-evaluation process constitutes the official application for accreditation. An institution applying for initial accreditation shall also demonstrate conformity with the Assumed Practices.

The judgment that the organization meets the Criteria for Accreditation and Core Components is based on detailed information about all parts of the institution. Such information may be acquired through evidence provided to the Commission by the institution or acquired by the Commission from other sources prior to, during, or subsequent to an evaluation process. This information will be confirmed in the written report of the visiting team; in the pattern of portfolios, reports, panel views and appraisals required of institutions participating in the AQIP processes; or in other review documents identified by the Commission as core elements of a process for reaffirmation of accreditation.

In the evaluation process, the Commission will review the institution against the Criteria and Core Components according to the following evaluative framework.

Core Components. The institution meets the Core Component if:

a. the Core Component is met without concerns, that is the institution meets or exceeds the expectations embodied in the Component; or

b. the Core Component is met with concerns, that is the institution demonstrates the characteristics expected by the Component, but performance in relation to some aspect of the Component must be improved.

The institution does not meet the Core Component if the institution fails to meet the Component in its entirety or is so deficient in one or more aspects of the Component that the Component is judged not to be met.

Criteria for Accreditation. The institution meets the Criterion if:

a. the Criterion is met without concerns, that is the institution meets or exceeds the expectations embodied in the Criterion; or

b. the Criterion is met with concerns, that is the institution demonstrates the characteristics expected by the Criterion, but performance in relation to some Core Components of the Criterion must be improved.

The Criterion is not met if the institution fails to meet the Criterion in its entirety or is so deficient in one or more Core Components of the Criterion that the Criterion is judged not to be met.

The institution meets the Criterion only if all Core Components are met. The institution must be judged to meet all five Criteria for Accreditation to merit accreditation.

The Commission will grant or reaffirm accreditation (with or without conditions or sanctions), deny accreditation, or withdraw accreditation based on the outcome of this evaluation.

Policy Number Key

Section INST: Institutional Policies
Chapter A: Implementation of HLC Criteria and Requirements
Part 10: General

Last Revised: February 2012
First Adopted: February 2003
Revision History: February 2012, effective January 2013
Notes: Formerly policy number 1.1(a)2, 2013 – 1.1(a)1, 1.1(a)1.1. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013. See Appendix A for information on the related policies that sunset December 31, 2012.
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Institutional Conformity with Commission Requirements

Number: INST.A.10.030

When the Commission discovers that an accredited or candidate institution is not following an Assumed Practice, the Commission initiates a review, in accordance with its policy and procedure, to determine whether the institution remains in compliance with the Criteria for Accreditation. If the institution is found to be not meeting the Criteria, including any Core Component, the Commission may proceed to act under any applicable policy including Reconsideration. (See Commission Policy INST.B.30.050 Commission Right to Reconsider Affiliation.)

The Commission also requires that the institution take action to bring its practice into conformity with the Assumed Practices. An accredited institution that finds through its own processes that its practice is departing from the Assumed Practices should take immediate steps to correct the deficiency; it is not required to disclose its finding to the Commission provided that it moves quickly to initiate a remedy.

The Commission may also re-examine, as specified in Commission policies, any candidate or accredited institutions' ability to meet Eligibility Requirements.

Policy Number Key

Section INST: Institutional Policies
Chapter A: Implementation of HLC Criteria and Requirements
Part 10: General

Last Revised: June 2011
First Adopted: February 2003
Revision History: June 2006, June 2011
Notes: Formerly policy number 1.1(c)1, 2013 – 1.1(d), 1.1(f). The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013. See Appendix A for information on the related policies that sunset December 31, 2012.
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Jurisdiction

Number: INST.B.10.010

An institution applying for, or holding accredited or candidate status with the Commission shall demonstrate that it meets the Commission's jurisdictional requirements, as established in the *Bylaws of the Higher Learning Commission*, related to 1) incorporation and 2) substantial presence.

Incorporation

An institution shall demonstrate that it is incorporated as an institution of higher education in one of the 19 states of the north central region or operating under federal authority in conjunction with an executive branch or independent federal agency or branch of the U.S. military.

(*Note that an institution that was accredited by, or a candidate for accreditation with, the Commission prior to July 1, 2010 must be incorporated as an institution of higher education but may be incorporated outside the region provided that it is registered to do business in at least one of the 19 states of the north central region. A charter or other form of authorization from the state legislature shall constitute incorporation for public institutions for the purpose of this policy.).*

Substantial Presence

An institution shall demonstrate that its operations are substantially in the 19-state north central region. An institution shall provide evidence that the majority of its educational administration and activity, business operations, and executive and administrative leadership are located or are operating within the North Central region. Institutions that have campuses or additional locations must demonstrate that at least one campus and one additional location (if the institution has additional locations) are located in the region. The Commission shall make the decision regarding whether the institution is substantially in the region based on the preponderance of the evidence regarding the operations of the institution. The Commission shall consider evidence presented by the institution as well as evidence available from public sources and from evaluations undertaken by the Commission in making a judgment about the institution's presence in the region.

Establishing Substantial Presence

Institutions must establish that they meet the substantial presence requirement according to the implementation provisions established in the Commission's Bylaws. The appropriate provisions derived from Article III, Section 5 are provided below for reference:

> *All institutions submitting Preliminary Information Forms or other documentation to establish eligibility for Commission evaluation on or after July 1, 2010, or having evaluation visits for initial candidacy or accreditation in 2010-11 or thereafter shall comply with jurisdictional requirements for incorporation and substantial presence in the region, as identified in Section 2 of this Article.*

All institutions accredited by the Commission or a candidate for accreditation status on July 1, 2010, shall comply with substantial presence requirements no later than July 1, 2012, or at the time of evaluation for initial accreditation, whichever comes first. Institutions accredited by the Commission on July 1, 2010, shall be evaluated against this requirement at the time of the next comprehensive evaluation except where the Commission has information to indicate that an institution does not meet this requirement and initiates, subsequent to July 1, 2012, an inquiry to review jurisdiction. Institutions that become a candidate for accreditation or accredited after July 1, 2010, must demonstrate compliance with the substantial presence requirement at the time of the next comprehensive evaluation of the institution or prior to initial accreditation of the institution, whichever comes first.

All institutions accredited by the Commission or a candidate for accreditation status on July 1, 2010, shall be grandfathered from the requirement for incorporation in the region; such institutions known to be incorporated outside the region shall provide evidence of having registered within the region to do business as a corporation no later than July 1, 2011. Institutions that become accredited or a candidate for accreditation after July 1, 2010, must demonstrate compliance with the incorporation requirement at the time of the next comprehensive evaluation of the institution or prior to initial accreditation of the institution, whichever comes first.

Non-affiliated institutions seeking status that are unable to demonstrate substantial presence to the satisfaction of the Commission staff shall not proceed with the Eligibility Process. Institutions already holding status with the Commission that are unable to demonstrate substantial presence shall be subject to Reconsideration as outlined in Commission policy, which may be undertaken in conjunction with a Commission evaluation under this policy.

Institutions Accredited by Another Recognized Accreditor Seeking Commission Status

An institution accredited by another institutional accrediting agency recognized for Title IV federal gatekeeping purposes by the U.S. Department of Education that:

1. moves its home campus or main office or a component to the Commission's region;
2. designates an existing campus or office as the main; or
3. initiates a new home campus or main office in the Commission's region

for the purposes of establishing Commission jurisdiction to accredit the entire institution, including, if applicable, various components in other regions, may seek Commission status. It will seek status by establishing its eligibility for a Commission evaluation under the Eligibility Process. If the Eligibility Panel determines the institution is eligible for Commission review, it must host a comprehensive evaluation team and follow Commission policy and procedure for seeking initial status.

The Commission will not consider for status any institution under sanction, show-cause, or withdrawal by another recognized institutional accrediting agency, or within two years of such status, or less than two years before the agency's next comprehensive evaluation of the institution. As a part of the Eligibility review, the institution must establish how it is resolving any issues identified for monitoring or further review by the other agency. During the time it is seeking status from the Commission, it must remain in good standing with the other agency and meet all financial and accrediting obligations. It must work to keep both agencies properly informed and copy both agencies on all relevant correspondence.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 10: General

Last Revised: June 2012
First Adopted: November 2010 and June 2009
Revision History: June 2012
Notes: Policies combined November 2012 – 1.2, 1.2(a), 1.2(b), 1.2(c), 3.5
Related Policies: INST.B.30.050 Commission Right to Reconsider Affiliation

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Components of Accredited or Candidate ("Affiliated") Institutions

Number: INST.B.10.020

The affiliation status of an institution shall include the institution's home campus or system office located within the Commission's region and all its components wherever located. Components of an institution shall include all branch campuses, instructional sites, course locations and divisions offering distance delivery or correspondence operating inside the region, outside the region but within the United States, or outside the United States.

The operational status of all institutional components will be periodically reviewed under this policy.

Characteristics of a Component that may be included in the Institution's Affiliation

An entity may be deemed a component of an affiliated institution if responsibility for the educational and operational activities of the component is clearly located at a home campus or system office that is central to the institution affiliated with the Commission.

The component may be included in the institution's affiliation only if it has all of the following characteristics:

1. the home campus or system office has oversight over the finances, administration, and hiring, firing and retention of personnel at the component;
2. an administrator for the component reports to the CEO of the affiliated institution or the system;
3. the home campus or system office provides meaningful oversight over the academic programs at the component;
4. degree-granting authority of the home campus or system office encompasses, where possible, the degree or program activity of the component;
5. public information about the institution, the component, and any corporate parent or structure is consistent with the characterization of the entity as a component of the affiliated entity.

Characteristics of a Separately Accreditable Component

A component of a larger institution that is currently included in that institution's accreditation may be separately accreditable if a significant portion of responsibility and decision making for its educational activities lies within the component and not in the other parts of the larger system as defined in the CHARACTERISTICS outlined in this section.

The component may be separately accreditable if it has the following characteristics:

1. has, under board policy, substantial financial and administrative independence from the home institution including matters related to personnel;
2. has a full time chief administrative officer;

3. is empowered, under board policy, to initiate and sustain its own academic programs;
4. has degree-granting authority in the state or jurisdiction in which it is located; and
5. public information about the institution, the component, and any corporate parent or structure is consistent with the characterization of the entity as a separately accreditable entity.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 10: General

Last Revised: June 2009
First Adopted: January 1983, June 2000
Revision History: June 2000, revised June 2009
Notes: Jointly adopted with Council on Regional Accrediting Agencies. Former Policy number: 3.4(b). Also combined with the following policies November 2012: 3.4, 3.4(a)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Related Entities

Number: INST.B.10.030

The Commission will review and hold only the accredited or candidate institution responsible for fulfilling the Commission's Criteria for Accreditation. However, where some aspects of institutional decision-making are controlled by a non-accredited related entity including a corporate parent, system administration or board, religious sponsor, funding sponsor (which, in some cases, may include an equity or investment fund), or other entity, the institution shall be responsible to the Commission for presenting, explaining, and evaluating all significant situations involving such related entities that may affect its compliance with accreditation requirements. The Commission will consider that an entity that has 50 percent or more ownership interest in the accredited entity or has 50 percent or more voting interest in the accredited entity's board constitutes a related entity.

The institution shall exercise this reporting obligation following Commission instructions at the time it initiates the Eligibility Process, applies for candidacy or initial accreditation, or files a self-study or other document prior to reaffirmation of accreditation. The institution will also exercise this reporting obligation when it informs the Commission, through the Commission's change process, of any change in ownership or other changes as outlined in Commission policy on Institutional Change: INST.F.20.040.

The Commission may, at any time, request information about a situation that the institution may not have disclosed.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 10: General

Last Revised:
First Adopted: November 2007
Revision History:
Notes: Former policy number 3.7
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Eligibility

Number: INST.B.20.010

Non-affiliated institutions will establish eligibility for a Commission on-site evaluation for initial status by completing the Commission's Eligibility Process and by receiving a determination at the conclusion of that process that the institution is ready to schedule and prepare for a visit. An institution seeking a Commission on-site evaluation for initial status shall provide sufficient evidence in writing that it meets the Eligibility Requirements. The determination that an institution meets the Eligibility Requirements will take place during the review processes involved in establishing an initial affiliation with the Commission: a team and subsequent reviewers will make this determination based on a self-study and on evidence derived from the on-site visit.

An institution may claim no official Status of Affiliation with the Commission during the Eligibility Process or the self-study process.

Eligibility Process

The Eligibility Process provides for Commission staff consultation and for review by Eligibility Reviewers to determine the institution's readiness to begin the self-study process. Eligibility Reviewers review the written evidence put forward by a non-affiliated institution that it meets the Eligibility Requirements and determine whether the evidence is sufficient to warrant the Commission scheduling an on-site visit for the institution and allowing it to begin the self-study Process. An applying organization may choose to seek either candidate for accreditation or accredited status and must prepare its self-study to address the status sought.

An organization that does not receive a recommendation to proceed with a Commission visit can petition the Board of Trustees for a review if it can provide evidence that the decision of the Eligibility Reviewers was arbitrary or capricious or was not supported by substantial evidence in the record on which the Reviewers made their decision or that the Commission staff or Eligibility Reviewers departed from established procedures during the review.

Fees will be charged and published in a schedule of fees for the Eligibility Process.

Eligibility Reviewers

The Board of Trustees will choose peer reviewers who have completed terms as members of the Institutional Actions Council to serve as a reviewer of the Eligibility process. These reviewers will fill non-renewable four-year terms, with a maximum of five years of service when a Reviewer is chosen to fill an uncompleted term.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 20: Defining the Affiliating Entity

Last Revised: February 2007
First Adopted: November 1998
Revision History: February 2003, effective May 2003; revised February 2007, renumbered November 2010
Notes: Policies combined November 2012 – 1.8, 1.8(a), 1.8(b), 1.8(c)
Related Policies: INST.B.20.020 Candidacy

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Candidacy

Number: INST.B.20.020

Grant of Candidacy

The Board of Trustees will review an institution's application for candidacy and all related materials after the institution has undergone evaluation by a team of peer reviewers and an Institutional Actions Council hearing, as defined in Commission policy. The Board of Trustees may grant or deny candidacy.

Every non-affiliated institution seeking status with the Commission shall apply for and serve a period of candidacy. Such candidacy shall be for four years (48 months) from the date action is taken to grant candidacy to the date action is taken to grant accreditation, with a minimum period in candidacy of at least two years (24 months), but not to exceed the maximum time limits of candidacy outlined in this policy. In exceptional circumstances, the Board may in its discretion waive the required candidacy period; such waiver will be based upon evidence that the institution meets all the Criteria for Accreditation and has met all other requirements laid out in Commission policies related to achieving accreditation, but such evidence shall not obligate the granting of a waiver.

Achieving Candidacy and Continued Candidacy

An institution must be judged by the Commission to have met each of the requirements of the candidacy program to merit the award of candidate for accreditation status (candidacy). The requirements of the candidacy program are as follows:

1. the institution meets each of the Eligibility Requirements
2. the institution demonstrates sufficient evidence, including evidence that the institution currently conforms with each of the Assumed Practices, to support the judgment that all of the Criteria for Accreditation and Core Components can reasonably be met within four years of candidacy; and
3. the institution meets the Federal Compliance Requirements.

The self-study or documentation assembled in a self-evaluative process constitutes the official application for candidacy.

During the candidacy period the Commission will ensure ongoing compliance with the Eligibility Requirements and continued progress towards achieving accreditation at the end of the candidacy period through a biennial visit.

The judgment that the institution meets the Eligibility Requirements and is likely to meet the Criteria by the end of the candidacy period is based on detailed information about all parts of the institution. Such information may be acquired through evidence provided to the Commission by the institution or acquired by the Commission from other sources prior to or during an evaluation process.

Evaluative Framework for Achieving and Maintaining Candidacy

In the evaluation process, the Commission will review the institution against the requirements of the candidacy program according to the following evaluative framework.

Eligibility Requirements. The institution meets the Eligibility Requirement if the Commission determines that the Requirement is met without concerns; that is, the institution is found to meet or exceed the expectations embodied in the Requirement.

The institution does not meet the Eligibility Requirement if the Commission determines that the institution has failed to meet the Requirement in its entirety or is so deficient in one or more aspects of the Requirement that the Requirement is judged not to be met.

Criteria for Accreditation and Core Components. The institution demonstrates that it can reasonably meet the Criteria for Accreditation within the four years of candidacy if it provides emerging evidence with regard to each Criterion and Core Component and the Commission determines that the Criteria and Components are likely to be met within the candidacy period.

The institution must provide emerging evidence with regard to each Criterion in order for it to provide sufficient evidence of meeting the Criteria for Accreditation during the candidacy period.

Federal Compliance Requirements. The institution demonstrates that it meets the Federal Compliance Requirements.

The Commission will award candidacy based on the outcome of this evaluation.

Assumed Practices in the Evaluative Framework for Candidacy. An institution seeking candidate for accreditation status must explicitly demonstrate, in its required plan to meet the Criteria for Accreditation within the four years of candidacy, that it currently conforms with all of the Assumed Practices.

Candidacy Cycle

The period of candidacy is four years. However, at any time during the candidacy period, subsequent to the completion of the two-year required minimum candidacy, the institution may file an application for early initial accreditation and host an on-site initial accreditation visit to evaluate the institution for this purpose. The institution will be limited to one application for early initial accreditation during the term of candidacy. In exceptional situations, the Board of Trustees at its discretion may extend candidacy to a fifth year.

Candidacy will be initiated through a comprehensive on-site evaluation and maintained through a subsequent on-site biennial evaluation two years after candidacy is granted to determine\ whether the institution is making reasonable progress towards meeting accreditation requirements by the end of the candidacy period, including continued conformity with the Assumed Practices. Two years after this biennial evaluation, or at the end of the four-year candidacy period, an institution will have its evaluation for initial accreditation. If, as a result of the initial accreditation visit, the Board acts to extend the institution's candidacy for a fifth year, the institution will repeat the visit for initial accreditation during that fifth candidacy year in sufficient time for the Board to consider the outcome of the evaluation prior to the conclusion of the fifth candidacy year.

Evaluation for Initial Accreditation or Candidacy

An institution applying for initial accreditation or candidacy shall undergo a Comprehensive Evaluation by the Commission composed of the following elements:

Assurance Process. The Assurance Process for an institution undergoing an evaluation for initial accreditation or candidacy has the following components:

- Assurance Filing;
- Assurance Review;
  - analysis of the Assurance Filing and of information from any on-site visit by Commission peer reviewers culminating in a written report;
  - an on-site visit by a team of Commission peer reviewers.

Assurance Filing. An institution hosting a Comprehensive Evaluation for initial accreditation or candidacy shall submit the following information assembled through a self-evaluative or selfstudy process:

1. evidence of meeting the Eligibility Requirements;
2. for initial accreditation, evidence of conformity with the Assumed Practices and meeting the Criteria for Accreditation and Core Components, or for candidacy, evidence of the degree to which the institution meets the Criteria for Accreditation and Core Components;
3. for candidacy, evidence of conformity with the Assumed Practices and a carefully articulated plan and timetable showing how the institution will meet fully each of the Criteria for Accreditation and Core Components within the period of candidacy;
4. evidence of meeting the Federal Compliance Requirements;
5. branch campus evaluation information; and
6. any addenda requested by the team during the evaluation process.

In addition, the Commission shall supply information including but not limited to the Eligibility Process analysis, official correspondence, public comments, previous evaluation team reports and action letters, if any, information from the institution's accreditation file with other recognized accrediting agencies, and any other information the Commission deems appropriate.

Comprehensive Evaluation. A team of peer reviewers, selected by Commission staff following Commission procedures, shall review an institution's Assurance Filing and related materials. The team shall then conduct an on-site visit to the institution's main campus, its branch campuses, and such other institutional locations as shall be determined by the Commission based on its policies and procedures and to verify where appropriate evidence provided by the institution; for institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations. The length of the visit shall be three days, but the Commission shall retain discretion to lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities as a part of a particular Comprehensive Evaluation to examine specific issues. The President of the Commission shall determine whether the institutional liaison or other Commission staff member will accompany the initial accreditation or candidacy visit team.

Analysis and Written Report. Commission peer reviewers shall conduct an analysis of the information generated by the Assurance Review and shall prepare a detailed written report that outlines the team's findings related to the institution's meeting either the requirements for initial accreditation or for candidacy, including but not limited to, requirements related to assessment of student learning. The report shall identify strengths and challenges or deficiencies for the institution, and shall make a recommendation related to granting initial accreditation or granting candidacy.

Recommendations Arising from Evaluations for Initial Accreditation or Candidacy. The team of Commission peer reviewers conducting a Comprehensive Evaluation for initial accreditation or candidacy shall in its written report make a recommendation for Commission action to complete the review. That recommendation shall be as follows:

For initial accreditation, the team shall recommend whether to grant initial accreditation, and whether to require limited interim monitoring on a discrete issue where such monitoring does not call into the question the institution's compliance with the Criteria for Accreditation, in which case, the institution will not be granted Initial Accreditation. Alternatively, the team may recommend denying initial accreditation. In denying accreditation the team will also recommend whether to extend candidacy if the institution continues to meet the requirements, and is within the time limits, for candidacy or to withdraw candidacy if the institution does not meet the requirements for candidacy or has reached the time limitations on candidacy.

For candidacy, the team shall recommend whether to grant candidacy. The team shall not recommend monitoring but may identify discrete issues to be addressed by the institution by the time of its biennial evaluation where such identification does not call into the question the institution's compliance with the Eligibility Requirements, in which case, the institution will not be granted candidacy.

These recommendations, along with the team's written report, shall be forwarded to a Commission decision-making body for review and action.

Institutional Responses to Recommendations Arising from Evaluations for Initial Accreditation or Candidacy. The institution shall have the opportunity to provide a written response to the written report of a Comprehensive or Assurance Review following Commission policies for the provision of institutional responses.

Biennial Visit

An institution in candidacy shall host an on-site evaluation after the first two years of candidacy. In preparation for the visit the institution and the Commission shall provide information to update the Assurance Filing assembled at the time the institution was evaluated for candidacy.

On-site Visit. A team of peer reviewers, selected by Commission staff following Commission procedures, shall review the updated Assurance Filing and related materials and shall then conduct an on-site visit to the institution's main campus or, for institutions that offer only distance or correspondence education, its administrative offices, and such other institutional locations as shall be determined by the Commission based on its policies and procedures. The length of the visit shall be one and a half days, but the Commission shall retain discretion to lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

Report and Recommendation from a Biennial Visit. The team shall prepare a written report that outlines the team's findings related to the institution's progress in completing its candidacy plan and meeting the Criteria for Accreditation within the four years of candidacy. If the institution is not making reasonable progress or there is evidence that the institution does not meet the Eligibility Requirements or conforms to the Assumed Practices, the team shall

recommend withdrawal of candidacy.
The report and recommendation shall be forwarded to a Commission decision-making body for review and action.

Institutional Responses to Recommendations Arising From a Biennial Visit. The institution shall have the opportunity to provide a written response to the written report of a Comprehensive or Assurance Review following Commission policies for the provision of institutional responses.

Withdrawal of Application for Candidacy

An institution may withdraw its application for candidacy at any time prior to a decision on that application by the Board of Trustees. The legally designated governing body of the institution must approve the withdrawal. If an institution that has withdrawn its application for candidacy seeks status again with the Commission at a later time, it must wait at least one year from its withdrawal and then begin with the Eligibility Process. Commission records of this application and its evaluation, and any other Commission records related to the institution, shall be available to Commission staff and Peer Reviewers evaluating the institution in all subsequent reviews.

Withdrawal of Application for Initial Accreditation

An institution may withdraw its application for initial accreditation at any time prior to a decision on that application by the Board of Trustees. The legally designated governing body of the institution must approve the withdrawal.

If an institution is nine months or less from the end of its four-year term of candidacy when it withdraws its application, such withdrawal shall also constitute voluntary withdrawal from status with the Commission. If an institution that has withdrawn its application for initial accreditation in these circumstances seeks Commission status at a later time, it must wait at least one year from its withdrawal and seek candidacy by initiating the Eligibility Process.

If an institution is more than nine months from the end of its four-year term of candidacy when it withdraws its application for initial accreditation, it may request continued candidacy instead. If it withdraws its application before or during the initial accreditation visit, after receiving the team report, or after receiving a recommendation from the Institutional Actions Council Hearing, and the team or Hearing Committee raised no issues that call into question the institution's compliance with the requirements of the candidacy program, the institution may continue in its original four-year candidacy subject to action for continued candidacy by the Institutional Actions Council. If either the team or the Hearing Committee raised issues related to the institution's compliance with the requirements of the candidacy program, the Commission's Board of Trustees must take action regarding the ongoing candidacy of the institution.

Commission records of this application and its evaluation, and any other Commission records related to the institution, shall be available to Commission staff and Peer Reviewers evaluating the institution in all subsequent reviews.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 20: Defining the Affiliated Entity

Last Revised: November 2012
First Adopted: August 1992 and August 1987

Revision History: revised August 1996, effective September 1996, revised February 1998. Revised Criteria for Candidacy adopted February 2003, effective May 1, 2003, revised February 2007, revised February 2010, revised June 2011, revised February 2012, effective January 2013, revised November 2013.
Notes: Policies combined November 2012 – 1.1(a), 1.1(b), 1.1(b)1, 1.1(b)2, 1.4, 2013 – 1.1(b)1.3, 1.1(c), 1.1(c)1. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013. See Appendix A for information on the related policies that sunset December 31, 2012.
Related Policies: INST.G.10.020 Official Records.

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Accreditation

Number: INST.B.20.030

Grant of Initial Accreditation

The Board of Trustees reviews an institution's application for initial accreditation and all related materials after the institution has undergone evaluation by a team of peer reviewers and an Institutional Actions Council hearing, as defined in Commission policy. The Board of Trustees may grant or deny initial accreditation. If it grants initial accreditation, it may grant such accreditation subject to interim monitoring, restrictions on institutional growth or substantive change, or other contingency.

Accreditation Cycle

Institutions must have accreditation reaffirmed not later than four years following initial accreditation, and not later than ten years following a reaffirmation action. The time for the next reaffirmation is made a part of the accreditation decision, but may be changed if the institution experiences or plans changes. The Commission may extend the period of accreditation not more than one year beyond the decennial cycle or one year beyond the initial accreditation cycle for institutions that present good and sufficient reason for such extension.

Effective Date of Accreditation

The effective date of initial accreditation or reaffirmation of accreditation or other Commission action will be the date the action was taken.

The Commission's Board may grant initial accreditation, with the contingency noted in this subsection, to an institution that applies for accreditation and is determined by the Commission to have met the Criteria for Accreditation but has not yet graduated a class of students in at least one of its degree programs, as required by the Eligibility Requirements. Institutions shall have completed the two-year required minimum candidacy period or received a waiver from the Commission's Board of Trustees. Such action shall be contingent on the institution's graduation of its first graduating class in at least one of its degree programs within no more than thirty days of the Board's action. In such cases, the effective date of accreditation will be the date of this graduating class.

Assumed Practices in the Evaluative Framework for Initial and Reaffirmation of Accreditation

An institution seeking initial accreditation, accredited to candidate status, or removal of Probation or Show-Cause, must explicitly address these requirements when addressing the Criteria. The institution must demonstrate conformity with these Practices as evidence of demonstrating compliance with the Criteria. Institutions undergoing reaffirmation of accreditation will not explicitly address the Assumed Practices except as identified in section INST.A.10.030. Any exemptions from these Assumed Practices must be granted by the Board and only in exceptional circumstances.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 20: Defining the Affiliated Entity

Last Revised: June 2015
First Adopted: August 1987
Revision History: renumbered November 2010, revised February 2012, June 2015
Notes: Policies combined November 2012 - 1.1(a)1, 1.1(a)2, 1,1(a)3, 1.4, 2013 – 1.1(a)1.2, 1.1(a)1.3, 1.1(a)1.4. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013. See Appendix A for information on the related policies that sunset December 31, 2012.
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Change of Control, Structure, or Organization

Number: INST.B.20.040

An institution shall receive Commission approval prior to undergoing a transaction that affects, or may affect, how corporate control*, structure or governance occurs at the accredited or candidate institution (hereinafter the "affiliated institution"). Approval of the transaction resulting in the CHANGE OF CONTROL, STRUCTURE, OR ORGANIZATION shall be necessary prior to its consummation to effectuate the continued accreditation of the institution subsequent to the closing of the proposed transaction.

*Control shall be understood to mean the possession, direct or indirect, of the power to direct or cause the direction of, the management and policies of an institution, corporation, partnership or other entity, whether through the ownership of voting securities, by contract or otherwise. (See related definition at 34 CFR § 600.31(b).)

Eligibility for Change of Control

No institution shall be deemed eligible for CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION merely by virtue of having accredited or candidate status with the Commission. Approval shall be at the sole discretion of the Commission's Board of Trustees ("the Board" or "the Commission's Board"). An institution shall apply for Commission approval of a proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION transaction through processes outlined in this policy and must demonstrate to the satisfaction of the Commission's Board that the transaction and the institution affiliated with the Commission that will result from the transaction meet the requirements identified in this policy and that approval of the proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION is in the best interest of the Commission.

In those cases in which the Commission's Board decides to approve a proposed CHANGE OF CONTROL, STRUCTURE, OR ORGANIZATION, it may decide so subject to conditions on the institution or its accreditation. In those cases in which the Commission's Board decides, in its sole discretion, that the proposed transaction builds a new institution bypassing the Eligibility Process and initial status review by means of a comprehensive evaluation, the Commission Board shall not approve the CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION.

The Board will not consider for approval any proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION involving an institution that is under sanction, Show-Cause or loss of status or authorization from any other recognized accrediting agency or state entity or is under investigation by any state entity, or involving a buyer or investor who owns such an institution except as described in this policy. The Board will also not consider for approval any proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION for an institution the Board has determined within the previous twelve months to merit withdrawal of accreditation, even if a formal action to withdraw accreditation has not yet taken place.

The Board will consider a CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION for a Commission-affiliated institution on sanction or under Show-Cause only if there is substantial evidence that the proposed transaction

resolves the issues the institution must address during the sanction or Show-Cause period and the transaction otherwise meets each of the Approval Factors identified in this policy.

Types of Transactions

The transactions that require prior Commission approval[1] include, but are not limited to, the following:

1. 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 (not including any transfer that constitutes only the granting of a security interest);
2. Merger or consolidation of an institution with one or more institutions or entities. This includes the consolidation of an institution not accredited or in candidate status with the Commission into the structure of an institution holding status with the Commission;
3. The division of the affiliated institution into one or more institutions or entities;
4. Stock transactions including Initial Public Offerings of stock as well as those transactions wherein an individual, entity or group[2] acquires and controls 25% of the total outstanding shares of stock of the affiliated institution, or an individual, entity or group increases or decreases its control of shares to greater or less than 25%, through individual or cumulative transactions, of the total outstanding shares of the stock of the institution;
5. Change of corporate form, governance structure, or conversion, including, but not limited to, change from Limited Partnership to Corporation, from Limited Liability Corporation to a Corporation, from a Not-for Profit Corporation to a For-Profit Corporation, a Private to Public, a Not-for Profit Corporation controlled by members to one controlled by its Board of Directors, significant change in the size of the institution's governing board;
6. Any of the transactions in items 1 through 5 above involving a parent corporation that owns or controls the affiliated institution or in any intermediate subsidiary of a parent corporation where that subsidiary has a controlling relationship to the institution and where the transaction may reasonably affect the control of the accredited institution as determined by the Commission or by the U.S. Department of Education;
7. Sale, transfer, or release of an interest in the affiliated institution such that there is change in the management or governance of the institution; and
8. Transfer of substantial academic or operational control of the affiliated institution to a third-party entity.

Change of Control, Structure, or Organization Without Prior Commission Approval

The Board shall withdraw the accreditation or candidacy of an institution that completes a CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION without receiving prior Commission approval from the Board of Trustees. The Higher Learning Commission President will take a recommendation for withdrawal to the Board upon learning of the change that took place without prior Commission approval. Prior to the Board's review, the institution will be informed about the recommendation and will have at least 14 calendar days to prepare and submit a response that the Board will have available when it considers the President's recommendation for withdrawal.

Notification to the Commission Regarding other Transactions

An institution affiliated with the Commission must notify Commission staff of any other CHANGE OF CONTROL,

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1 Such transactions may or may not also require approval from the U.S. Department of Education.

2 For a definition of a "group" see Section 13(d)(3) of the Securities and Exchange Act of 1934.

STRUCTURE, OR ORGANIZATION that is not separately identified in this policy or that may be separately identified in the policy but may not be reasonably known by, or under the control of, the accredited institution, a parent entity or intermediate subsidiary prior to the transaction (e.g., disposal of stock by an investor). These changes include, but are not limited to, changes in the Chief Executive Officer of the affiliated institution, changes in the structure and composition of the Board of Trustees of the institution, other than those due to normal or mid-term completion of Board members' terms or removal or replacement of Board members or revision of corporate bylaws through regular review processes, and sale or transfer of a block of stock that constitutes less than 25% but more than 10% of the total outstanding voting shares of the affiliated institution, its corporate parent or other entity in a controlling relationship with the institution. These changes must be reported to the Commission as soon as they are reasonably known to the institution. While such changes are to be reported for information, staff may determine in certain cases that they do constitute a Transaction that must be approved under this policy or that require Commission follow-up under Commission policies related to monitoring.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 20: Defining the Affiliated Entity

Last Revised: February 2010
First Adopted: June 2009 and February 2010
Revision History:
Notes: Policies combined November 2012 – 3.3, 3.3(a), 3.3(b), 3.3(e), 3.3(f).
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Termination of Affiliation or Accreditation

Number: INST.B.30.010

Resignation from Affiliation with the Commission

An institution affiliated with the Commission either as a candidate or as an accredited institution may voluntarily resign from that affiliation at any time. The resignation must be initiated by the legally designated governing body of the institution and conveyed to the Commission through a formal letter signed by the President of the institution. This letter may set an effective date for such resignation not to exceed one year from the date of the letter and provided that such effective date is not more than eleven (11) years (the maximum interval for reaffirmation of accreditation) from the date of the last reaffirmation of accreditation or four (4) years from the date candidacy was awarded. The institution must meet all obligations of affiliation until the resignation becomes effective. Within thirty (30) days of receiving this letter, the Commission issues a public disclosure notice that describes the resignation, including resignation based on the closing of the institution, which is available to the public on the Commission's website. Within thirty (30) days the Commission also notifies the U.S. Department of Education and the appropriate state agency and other recognized accrediting agencies regarding the resignation. Voluntary resignation does not release an institution from past and current financial obligations to the Commission.

Accreditation of Closing Institutions

When the governing board of an accredited institution decides to close the institution, it may seek from the Board of Trustees an extension of its accreditation beyond the publicly announced date of closing. The sole purpose of the extension is to ensure that its students can complete degrees and programs without undue difficulty. Extension of accreditation is typically for no longer than one year beyond the date of closing.

Extension of Accreditation after Closing

To approve an extension of accreditation, the Board of Trustees must be assured of (1) the ongoing legal existence of the institution beyond closing, (2) the existence of a teach-out agreement with another institution that meets Commission and federal requirements; and (3) the existence of appropriate processes to guarantee that all degrees granted after the date of closing meet the graduation requirements established by the institution.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 30: Obligations of Membership and Affiliation

Last Revised: April 2013
First Adopted: August 1987 and October 1988
Revision History: revised May 2002, February 2002, renumbered November 2010, April 2013
Notes: Policies combined November 2012 – 1.5, 3.8.
Related Policies: INST.B.30.040 Public Disclosure, FDCR.B.10.010 Commission Approval of Institutional Teach-Out Arrangements

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Obligations of Affiliation

Number: INST.B.30.020

While seeking and holding affiliation with the Commission, an institution voluntarily agrees to meet obligations set forth by the Commission as follows:

1. The institution participates in periodic evaluation through the structures and mechanisms set forth in Commission policies, submission of reports as requested by the Commission, filing of the Institutional Update, and any other requirements set forth in its policies.
2. The institution is candid, transparent, and forthcoming in its dealings with the Commission, including in its responses to any special inquiries or requests for information from the Commission. The institution agrees not to enter into any agreement that limits the nature or scope of its communications with the Commission or requires that a third party review and approve those communications prior to their transmission to the Commission.
3. The institution notifies the Commission of any condition or situation that has the potential to affect the institution's status with the Commission, such as a significant unanticipated reduction in program offerings or serious legal investigation. (A fuller list of such conditions or situations is included in the Commission's policy on special monitoring.)
4. The institution informs the Commission of its relationship with any related entity wherein institutional decision-making is controlled by that entity and of any changes in that relationship that may affect the institution's compliance with Commission accreditation requirements. (Definitions and process requirements are contained in the Commission's policy on institutions with related entities.)
5. The institution describes itself in identical terms to the Commission and to any other institutional accrediting body with which it holds or seeks affiliation with regard to purpose, governance, programs, locations, degrees, diplomas, certificates, personnel, finances, and constituents.
6. The institution notifies the Commission when it receives an adverse action from or has been placed on sanction by any other accrediting agency or if a state has issued a pending or final action that affects the institution's legal status or authority to grant degrees.
7. The institution assures its employees and students that it will consider fairly all complaints and third-party comments and not engage in retaliatory action against any who have submitted such information.
8. The institution accepts that the Commission will, in the interest of transparency to the public, publish outcomes from its accreditation process.
9. The institution portrays its accreditation status with the Commission clearly to the public, including the status of its branch campuses and related entities. The institution posts the electronic version of the Commission's

Mark of Affiliation in at least one place on its Web site, linking users directly to the institution's status on the Commission's Web site.

10. The institution communicates to its constituencies and applicants any Public Disclosure Notice it receives from the Higher Learning Commission.
11. The institution maintains prominently on its Web site a telephone number that includes an option for both current students and the public to speak with a representative of the institution.
12. The institution submits timely payment of dues and fees and accepts the fact of surcharges for late payment.
13. The institution agrees to accept binding arbitration in the event of an action by the Commission's Board of Trustees that the institution disputes and is not able to resolve through the Commission's processes. This agreement follows procedures developed and published by the Commission. The institution also agrees to grant immunity to the Commission from claims of civil liability related to judgments made by the Commission or its agents in the course of its work of accrediting institutions provided that it was acting in good faith and within the scope of its responsibilities.

Meeting Obligations of Affiliation

Institutions must remain in compliance with the Obligations of Affiliation at all times. The Commission shall determine when an institution is in violation of the Obligations of Affiliation. Commission staff, may at its discretion, make use of any means to determine whether the institution has violated an Obligation of Affiliation including, but not limited to, seeking written information from the institution or scheduling a peer reviewer or staff member to meet with one or more institutional representatives either on-campus or through other appropriate method.

Administrative Probation

An institution that is determined by Commission staff or peer reviewers to have not met the Obligations of Affiliation shall be placed on Administrative Probation by the Commission's President for a period not to exceed ninety days. During this time the institution will be expected to remedy the situation that led to the imposition of Administrative Probation. The Commission President will notify the institution of the imposition of the Administrative Probation and the conditions for its removal.

If an institution fails to remedy the situation that led to Administrative Probation by the end of the ninety-day period, the Commission President shall take a recommendation concerning the institution to the Commission's Board of Trustees. That recommendation may be for the application of a sanction or the withdrawal of accreditation, in accordance with Commission policies and procedures.

Disclosure of Administrative Probation

Administrative probation is noted on an institution's Statement of Affiliation Status along with the reason for the Administrative Probation.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 30: Obligations of Membership and Affiliation

Last Revised: June 2013
First Adopted: January 1983
Revision History: Renumbered February 2010, February 2012, June 2013
Notes: Policies combined November 2012 – 1.6, 2013 – 1.6(a), 1.6(b), 1.6(b)1. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013. See Appendix A for information on the related policies that sunset December 31, 2012.
Related Policies: INST.B.30.050 Commission Right to Reconsider Affiliation

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Dues and Fees

Number: INST.B.30.030

Applying and accredited institutions shall pay dues and fees when required by the Commission's Dues and Fees Schedule. Commission institutional fees and annual dues shall be due on receipt of the billing.

Refunds

Dues are not refundable whether the Board of Trustees withdraws the affiliation status, the institution withdraws from affiliation, or the institution ceases to operate.

When a team visit is canceled or postponed at the institution's initiative before the scheduled date, the Commission will refund all fees paid for that evaluation less expenses incurred.

The Commission will retain all fees received from an institution which withdraws from the process after the on-site visit. If the Commission staff cancels the visit, the institution will receive a full refund.

Non-Payment of Dues and Fees by Affiliated Institutions

The Board of Trustees reserves the right to withdraw the affiliation of an institution which, after due notice, does not pay its dues or fees.

Debts to the Commission

Withdrawal from affiliation with the Commission shall not cancel any debts owed to the Commission by an institution. Unless exempted by the Board of Trustees, an institution seeking affiliation with the Commission must pay in full any debts it might have previously incurred with the Commission.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 30: Obligations of Membership and Affiliation

Last Revised: October 2003
First Adopted: February 1990
Revision History:
Notes: Policies combined November 2012 – 4.1, 4.2, 4.3, 4.4
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Public Disclosure

Number: INST.B.30.040

Public Disclosure of the Team Report

The team report shall be an important, but not the only, document considered by the Commission in making a decision about an organization's accreditation relationship. Only after final Commission action may an organization make public the entire report or excerpts that are accurate (i.e., verbatim or reasonable paraphrases) and that correctly reflect the Assurance Section of the report. If an organization discloses or distributes excerpts, it shall indicate that the Assurance Section of the report is available on request. An organization shall consider its official response to the report to be an integral component of the report.

Public Information about Regional Institutional Accreditation

The Commission will expect each organization affiliated with it to use or paraphrase this Commission information in describing regional institutional accreditation or candidacy.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 30: Obligations of Membership and Affiliation

Last Revised: February 2010
First Adopted: January 1983, June 2004, February 1996
Revision History: revised June 2004
Notes: Policies combined November 2012 – 12.3, 12.4
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Commission Right to Reconsider Affiliation

Number: INST.B.30.050

The Board of Trustees shall reserve the right to reconsider the Status of Affiliation of an institution at any time. Reconsideration will allow the Board to interrupt an institution's scheduled evaluation cycle to make a formal determination whether the institution continues to meet the Eligibility Requirements or Criteria for Accreditation or is acting in accordance with the policies of the Commission. If the Board chooses to exercise its authority under this provision, it will provide to the institution clearly specified reasons related to the Criteria for Accreditation, Eligibility Requirements or Commission policies for its reconsideration and define a process by which the reconsideration shall take place. The institution shall have at least thirty days to respond to the reasons for reconsideration prior to the Board taking action to initiate a reconsideration process. The Board shall take into consideration the institution's response before formally acting to initiate the reconsideration process. The Board will observe Commission policy in conducting the reconsideration process and will complete the reconsideration process no later than the Board meeting subsequent to the next scheduled Board meeting.

Policy Number Key

Section INST: Institutional Policies
Chapter B: Requirements for Achieving and Maintaining Affiliation
Part 30: Obligations of Membership and Affiliation

Last Revised: February 2007
First Adopted: February 1993
Revision History: revised February 2007, renumbered June 2010, renumbered February 2011
Notes: Former policy number 2.5(g)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Substantive Requirements for Reaffirmation of Accreditation

Number: INST.C.10.010

Each institution shall have its accreditation reaffirmed by formal action of the Commission according to its decision-making policies. The basis for reaffirmation shall be evidence that the institution meets the Criteria for Accreditation and Federal Compliance Requirements.

Reaffirmation Cycle

Reaffirmation shall occur not more than ten years from the date of the last formal Commission action reaffirming accreditation; for an institution that received initial accreditation after its most recent comprehensive evaluation, reaffirmation shall occur not more than four years after the initial accreditation action. Should the reaffirmation action take place in the spring or fall following the required date for reaffirmation, such action shall be considered to have met the requirements of this policy provided that the evaluation visit takes place no later than ten, or, where applicable, four, years from the date of the last reaffirmation action.

The cycle for reaffirmation may be less than ten years for institutions that participate in or are assigned by the Commission to processes that require more frequent reaffirmation.

An institution may file a formal request for an extension of its reaffirmation process, provided that it has a compelling reason for seeking such extension and it is not under sanction or show-cause with, or pending withdrawal by, the Commission or any other recognized accrediting agency. An institution must file such a request with sufficient time for a decision to be made prior to the expiration of an institution's current reaffirmation period. Such request will be considered and acted on through the Commission's decision-making processes. The extension shall be no more than one year beyond the institution's regular cycle as established by the terms of the reaffirmation process in which it participates. The maximum cycle permitted under this policy is eleven (11) years.

Procedural Requirements for Reaffirmation

Prior to every formal Commission action reaffirming the accreditation of an institution that institution and the Commission shall have participated in a process that includes the following components:

- self-study activities at the institution that result in submission to the Commission of evidence that the institution meets the Criteria for Accreditation and the Federal Compliance Requirements; and, in the same or different submission as required by the process in which the institution participates, evidence of continuing improvement at the institution;
- visit to the institution by a team of Commission Peer Reviewers for the purpose of gathering additional information to determine whether the institution meets the Criteria

for Accreditation and the Federal Compliance Requirements and to verify whether appropriate evidence has been provided by the institution;

- analysis by Commission Peer Reviewers of the evidence provided by the institution and the additional information gathered during the visit;
- written report prepared by Commission Peer Reviewers documenting their conclusions regarding whether the institution meets the Criteria for Accreditation and the Federal Compliance Requirements, including but not limited to, requirements related to assessment of student learning, and, in the same or a different report as required by the process in which the institution participates, conclusions regarding continuous improvement and identifying deficiencies, if any, at the institution;
- an opportunity for an institution to provide a written response prior to Commission action following procedures outlined by the Commission.

Processes for Reaffirmation

Each accredited institution in good standing with the Commission shall reaffirm and maintain its accredited status by participating in evaluation processes that: 1) document that it meets the Commission's Criteria for Accreditation and the Federal Compliance Requirements, 2) demonstrate a focus on institutional improvement, and 3) fulfill the Commission's procedural requirements for reaffirming and maintaining accreditation. These evaluation processes shall be known as accreditation pathways. The pathways are: Standard, Open and the Academic Quality Improvement Program (AQIP). The Commission may approve other pathways. Each pathway shall include a series of evaluative activities that the Commission determines to be appropriate for that pathway provided that each pathway allows an institution to fulfill the procedural requirements necessary to maintain accreditation. In any pathway the Commission staff may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process but provide particularized advice and assistance where appropriate to Commission staff or evaluation team members.

Institutions not yet accredited by the Commission as well as accredited institutions that are on probation, under show-cause, or pending withdrawal action shall participate in evaluation activities specifically outlined in Commission policy applicable to such designation and shall not participate in a pathway.

Entrance Requirements for Each Pathway

The Commission shall determine the entrance requirements for each pathway in relation to the institution's history with the Commission. These requirements shall include the length of its accreditation with the Commission, as well as such factors as interim monitoring, substantive change and change of control requests, sanctions, show-cause orders, adverse actions, and any other information the Commission deems relevant. In addition, the Commission may exercise discretion in determining an appropriate pathway for an institution.

Assignment to a Pathway

Subsequent to granting of initial accreditation and after removal of probation or show-cause, institutions shall be limited to the Standard Pathway for a minimum of ten years until such time as they shall meet the entrance requirements for a different pathway and make appropriate application to enter such pathway. An institution undergoing approval of a change of control, structure or organization or removal from notice may be subject to limitation to the Standard Pathway. A pathways assignment shall be made by the Board of Trustees in making these accrediting decisions.

A decision renewing an institution's assignment to a pathway or determining an institution's eligibility for a different pathway shall always take place at reaffirmation of accreditation and may take place at other times as established by the procedures of the pathway or Commission policy. A pathway determination after initial accreditation, a continuation of eligibility for a pathway, and any change of pathway shall be a formal decision by the Commission and shall be subject to all Commission requirements related to the pathway as well as to the Commission's decision-making process. Such decision shall also indicate the date of the next Assurance Review or comprehensive evaluation and the institution's placement in the cycle for that pathway.

An institution shall receive notice of a recommended pathway assignment prior to the formal decision placing it on a pathway. In cases where the Pathway assignment is not based on entrance requirements for the Pathway but on Commission discretion and exempting any pathways assignments made at the discretion of the Board of Trustees related to sanction or other actions assigned to the Board, the institution shall have an opportunity to respond prior to the assignment being made through the Commission's decision-making process. After a pathways assignment has been made, it is subject to additional review or change only at the discretion of the Commission.

Change of Pathways by the Commission

The Commission may at its discretion move an institution from one Pathway to another if: 1) the institution fails to fulfill the requirements of its Pathway, 2) serious concerns arise about the institution's capacity to continue to meet the Criteria for Accreditation or the Federal Compliance Requirements, or 3) the institution needs to be monitored more closely through the processes of the Standard Pathway.

All other changes in pathways will occur subsequent to reaffirmation of accreditation. (Note that assignment to a pathway following Commission policy is not a change of a pathway.).

Policy Number Key

Section INST: Institutional Policies
Chapter C: Process for Reaffirmation of Accreditation
Part 10: Substantive Requirements for Reaffirmation of Accreditation

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Last Revised: November 2012
First Adopted: June 2012
Revision History: November 2012
Notes: Policies combined November 2012 - 1A.1.1, 1A1.2, 1A.1.3, 1A.1.4, 1A.1.5, 1A.1.6, 1A.1.7. Implementation Note: Implementation Note: see Appendix B.
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Process Requirements for Each Pathway

Number: INST.C.10.020

Standard Pathway

An institution on the Standard Pathway shall have its accreditation reaffirmed every ten years except for an institution that has received initial accreditation after its most recent comprehensive evaluation. Subsequent to initial accreditation, reaffirmation shall occur not more than four years after the initial accreditation action. Reaffirmation for all other institutions on the Standard Pathway shall be contingent on the institution having undergone comprehensive evaluations in years four and ten of the cycle through a process that assures the higher education community and the public that the institution continues to the meet the Criteria for Accreditation and Federal Compliance Requirements, and that the institution demonstrates a focus on continuing improvement.

Subsequent to reaffirmation, the Commission will also renew the institution's assignment to the Standard Pathway or declare it eligible to choose another Pathway. Renewal of assignment to the Standard Pathway will be contingent on the institution demonstrating that it meets the Criteria for Accreditation and the Federal Compliance Requirements, and not receiving an action involving show-cause, probation, or withdrawal. An institution on the Standard Pathway declared eligible to choose another Pathway may move to that pathway subsequent to reaffirmation provided it files a letter of acceptance within a limited timeframe as required by the requirements of the pathway being sought. The institution may also choose to remain on the Standard Pathway.

Open Pathway

An institution on the Open Pathway shall have its accreditation reaffirmed every ten years. Reaffirmation shall be contingent on the institution having undergone an Assurance Review in year four of the cycle and a comprehensive evaluation in year ten of the cycle through processes that assure the higher education community and the public that the institution continues to meet the Criteria for Accreditation and the Federal Compliance Requirements, and demonstrates a focus on continuing improvement.

At reaffirmation, the Commission will determine whether to renew the institution's eligibility for the Open Pathway. An institution may lose eligibility for the Open Pathway if serious concerns arise about the institution's capacity to continue to meet the Criteria for Accreditation and Federal Compliance Requirements; the institution needs to be monitored more closely through the processes of the Standard Pathway; or the institution does not fulfill the requirements of the Open Pathway, including those of the Quality Initiative.

Process Elements Common to Open and Standard Pathway

Assurance Review. Institutions in the Open and Standard Pathways shall participate in an Assurance Review that has the following components:

- Assurance Filing by the institution;

- Review by the Assurance Review team composed of Commission Peer Reviewers appointed by Commission staff in accordance with team selection procedures; such review shall include analysis of the Assurance Filing as well as of information from any on-site visit conducted to institutions on the Standard Pathway or to institutions on the Open Pathway in year ten or in year four where specifically required by the Assurance Review team;
- Written report prepared by the Assurance Review team that outlines the team's findings related to the institution's meeting the Criteria for Accreditation and identifies any strengths and challenges or deficiencies.

The Assurance Review for an institution with distance or correspondence education shall include a specific focus on these forms of delivery.

Assurance Filing. The Assurance Filing shall be housed on the Commission's web-based platform, known as the Assurance System, and composed of the following parts: 1) information submitted by the institution to document evidence of meeting, and of any institutional improvement related to, the Criteria for Accreditation, which shall consist of an Assurance Argument, Evidence File, and any addenda required by the evaluation team or Commission staff to the above information; and 2) information supplied by the Commission including but not limited to summary data from the institution's recent Institutional Update, records related to evaluation visits, official actions and correspondence, public comments, results of Commission-sponsored student surveys, complaints, and any other information the Commission deems appropriate.

For comprehensive evaluations, the Assurance Filing shall also address the Federal Compliance Requirements and, if applicable, provide information for branch campus evaluation.

Comprehensive Evaluation. An institution on the Standard Pathway and an institution in year ten of the Open Pathway shall undergo a comprehensive evaluation, which shall consist of the Assurance Review with an on-site visit. In addition to reviewing the Assurance Filing and related materials, the Assurance Review team shall also visit the institution's main campus and other institutional locations as determined by the Commission based on its policies and procedures. For institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations, if any, in the on-site visit. The President of the Commission shall determine whether the liaison or other Commission staff member will accompany any visit related to an Assurance Review.

The length of the visit shall be one and one-half days, but the Commission may lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

In a comprehensive evaluation, the team's report will include any findings from the on-site visit, the multi-campus evaluation, if applicable, and the review of compliance with Federal Compliance Requirements.

Other Visits. When the Commission is conducting an Assurance Review for an institution in year 4 of the Open Pathway, an on-site visit will not be required; however, a team may call for an on-site visit to gather additional information not available electronically or to conduct further review of specific issues arising from the Assurance Review. In addition, if the team is considering a sanction or withdrawal, it must call for an on-site visit.

Multi-Campus Evaluation. When an institution that has multiple branch campuses undergoes a comprehensive evaluation, the Commission will send one or more Commission Peer Reviewers to visit the institution's branch campuses. The Peer Reviewer may, but is not required to, be a member of the Assurance Review team. Such branch campus visits may precede or follow the Commission's comprehensive evaluation visit to the institution's main campus. The Commission will determine the campuses to be included in the branch campus visit, but the focus of the visit will be on branch campuses not recently visited by the Commission. The Peer Reviewer visiting the branch campus will complete a form outlining findings arising from the visit. The purpose of this form shall be to inform the comprehensive evaluation team regarding the quality of the institution's branch campuses. The Peer Reviewer will make no formal recommendation, and there will be no formal Commission action arising from the branch campus evaluation visit.

Process Elements Specific to the Open Pathway

Quality Initiative. An institution on the Open Pathway shall conduct after year four and prior to year ten of its reaffirmation cycle a Quality Initiative through which it demonstrates an ongoing commitment to improving its quality. The institution shall select a topic for the Initiative that shall be reviewed and approved by a panel of Commission Peer Reviewers. The institution shall compile a report explaining the results of the initiative and no later than year nine of its reaffirmation cycle submit it to the Commission for review.

Review of the Quality Initiative Report. A panel of Peer Reviewers shall review the Quality Initiative Report. The panel shall determine whether the institution has met the stated expectations for the Quality Initiative. The panel will complete a form explaining its findings. The form will be sent with the written report resulting from the comprehensive evaluation in year ten to the Institutional Actions Council.

Process Elements Specific to the Standard Pathway

An institution on the Standard Pathway shall demonstrate institutional improvement through an approach integrated with and focused on the Criteria for Accreditation. In addition, an institution on the Standard Pathway shall demonstrate that it has made reasonable progress in resolving any concerns resulting from the previous comprehensive evaluation or raised by the Commission during the period between evaluations.

AQIP Pathway

AQIP Cycle. An institution on the AQIP Pathway shall have its accreditation reaffirmed every eight years. Reaffirmation shall be contingent on the institution having undergone a comprehensive review through a series of AQIP activities culminating in a Comprehensive Quality Review that assures the higher education community and the public that the institution continues to the meet the Criteria for Accreditation and the Federal Compliance Requirements, and demonstrates a focus on continuing improvement.

At reaffirmation, the Commission will also determine whether to renew the institution's eligibility to participate in the AQIP Pathway. An institution may lose eligibility for the AQIP Pathway if serious concerns arise about the institution's capacity to continue to meet the Criteria for Accreditation or Federal Compliance Requirements, the institution needs to be monitored more closely through the processes of the Standard Pathway, or the institution does not fulfill the requirements of the AQIP Pathway.

Systems Portfolio. The Systems Portfolio is a vehicle through which the institution documents its self-evaluation of its institutional systems organized around quality principles, its meeting of the Criteria for Accreditation and its provision of distance and correspondence education, if any. An institution on the AQIP Pathway shall be required to submit a Systems Portfolio no later than year three of its initial AQIP cycle, and again in year seven prior to reaffirmation with this timeline repeating in subsequent AQIP cycles.

Systems Appraisal. A team of Commission Peer Reviewers appointed by Commission staff in accordance with team selection procedures shall conduct an analysis of the Systems Portfolio submitted by the institution and shall prepare a detailed written report. The report will outline the team's findings related to the institution's ability to meet the Criteria for Accreditation and quality expectations required for participation in the AQIP Pathway, and will include any deficiencies identified for institutional follow-up by the time of the Comprehensive Quality Review in the eighth and final year of the cycle.

Comprehensive Quality Review. The Commission staff will appoint a team of Commission Peer Reviewers in accordance with team selection procedures. The team may, but is not required to, include members previously on the institution's Systems Appraisal team. The team shall conduct a visit to the institution's main campus or, for institutions that offer only distance or correspondence education, to its administrative offices. The length of the visit shall be two days, but the Commission may lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues. Prior to the visit the institution shall submit the required Federal Compliance materials. In preparation for the Comprehensive Quality Review, the team shall review those materials along with the entire record of the institution's participation in the AQIP Pathway including its Systems Portfolio and Appraisal and the record of any quality improvement projects undertaken by the institution in the form of Action Projects. The Comprehensive Quality Review team will determine whether the record demonstrates that the institution meets the Commission's requirements for reaffirmation and whether it maintains an appropriate focus on improvement sufficient to render it eligible for continued participation in the AQIP Pathway. The team members will prepare a detailed written report of their findings from the visit related to the institution's meeting the Criteria for Accreditation and Federal Compliance Requirements, and including any deficiencies identified. The team's report will make a recommendation to the Commission's decision-making body regarding the institution's reaffirmation of accreditation, including any interim monitoring or sanction, and its continued eligibility for the AQIP Pathway or eligibility for the Open Pathway. The Comprehensive Quality Review of an institution with distance or correspondence education shall include a specific focus on these forms of delivery. A Comprehensive Quality Review is required proximate to the final year of the AQIP Pathway cycle and may also occur in the fourth year based upon institutional request or a staff determination.

Multi-Campus Evaluation. When an institution that has multiple branch campuses undergoes a Comprehensive Quality Review, the Commission will send one or more Peer Reviewers to visit the institution's branch campuses. The Peer Reviewer may, but is not required to, be a member of the Comprehensive Quality Review team. Such branch campus visits may precede or follow the Comprehensive Quality Review to the institution's main campus. The Commission will determine the branch campuses to be included in the visit, but the focus of the visit will be on branch campuses not recently visited by the Commission. The Peer Reviewer visiting the branch campus will complete a form outlining findings arising from the visit. The purpose of this form shall be to inform the Comprehensive Quality Review team regarding the quality of the institution's branch campuses. The Peer Reviewer will make no formal recommendation, and there will be no formal Commission action arising from the branch campus evaluation visit.

Policy Number Key

Section INST: Institutional Policies
Chapter C: Process for Reaffirmation of Accreditation
Part 10: Substantive Requirements for Reaffirmation of Accreditation

Last Revised: June 2014
First Adopted: June 2012
Revision History: November 2012, June 2014
Notes: Policies combined in November 2012 - 1A.2.1, 1A.2.2, 1A.2.3, 1A.2.4, 1A.2.5. Implementation Note: see Appendix B.
Related Policies: COMM.B.10.010 Staff Role and Responsibility

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Process Requirements Leading to Commission Action for Reaffirmation

Number: INST.C.10.030

Recommendations Arising from Pathways for Reaffirmation

The team of Commission Peer Reviewers conducting either a comprehensive evaluation or Assurance Review in the Standard or Open Pathway, or a Comprehensive Quality Review in the AQIP Pathway, shall in its written report make a recommendation for Commission action to complete the review. For comprehensive evaluations and for Comprehensive Quality Reviews, the team shall recommend whether to reaffirm the institution's accreditation and whether to require interim monitoring, if needed, as available on the institution's pathway. For Assurance Reviews, the team shall recommend whether to continue the institution in its current cycle and whether to require any interim monitoring as available on the institution's pathway. Any team may recommend a sanction or withdrawal of accreditation. These recommendations, along with the team's written report, shall be forwarded to a Commission decision-making body for review and action.

Institutional Responses to Recommendations Arising from Pathways for Reaffirmation

An institution shall have the opportunity to provide a written response to the written report of a comprehensive evaluation or Assurance Review or Comprehensive Quality Review following Commission policies for the provision of institutional responses. In all cases involving a response to comprehensive evaluation, Assurance Review, or other visit, an institution shall have at least two weeks to prepare and submit an institutional response to the team report prior to review and action through the Commission's decision-making processes.

Policy Number Key

Section INST: Institutional Policies
Chapter C: Process for Reaffirmation of Accreditation
Part 10: Substantive Requirements for Reaffirmation of Accreditation

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Last Revised: June 2014
First Adopted: June 2012
Revision History: June 2014
Notes: Policies combined November 2012 – 1A.3.1, 1A.3.2. Implementation Note: see Appendix B.
Related Policies: INST.G.10.020 Official Records (Institutional Responses within the Process)

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Institutional Data for Commission Teams

Number: INST.C.20.010

Prior to any on-site visit, the Commission will provide the team with a record of the institutional indicators that have been submitted by the institution over the years. Prior to an AQIP evaluation or a comprehensive evaluation culminating in reaffirmation of accreditation or prior to other Commission evaluation where the Commission determines it to be appropriate, the Commission may also provide aggregate data collected from a survey administered to students by the Commission.

The institution will provide other information required by the Commission on-site, in the self-study report, Assurance Argument, or in the Systems Portfolio-Systems Appraisal materials.

Policy Number Key

Section INST: Institutional Policies
Chapter C: Process for Reaffirmation of Accreditation
Part 20: Institutional Data

Last Revised: June 2014
First Adopted:
Revision History: February 2014, June 2014
Notes: Former policy number 1.3(d)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Board of Trustees

Number: INST.D.10.010

The composition, selection, and term of the Board of Trustees are defined in the Bylaws of the Higher Learning Commission and subject to additional expectations outlined herein.

Decision-Making Authority

The Board of Trustees shall hold final responsibility for all accreditation actions taken by the Higher Learning Commission. The Board of Trustees shall retain its authority for deliberation and actions regarding accreditation decisions to:

1. grant or deny initial status, including initial candidacy and initial accreditation;
2. issue or withdraw a sanction, including on-notice or probation;
3. withdraw status, including candidacy or accreditation;
4. issue or remove a show-cause order;
5. initiate a reconsideration process;
6. approve or deny an application for Change of Control, Structure or Organization;
7. approve moving an institution from accredited to candidate status; and
8. approve exemptions, if any, from the Assumed Practices.

All such decisions, once issued by the Board, shall become the final action, except for those decisions that are subject to appeal. Such decisions shall become the final accreditation action as outlined in Commission policy INST.E.90.010 Appeals.

For all other accreditation decisions the Board authorizes the Institutional Actions Council, as constituted in this policy, to conduct reviews and to take actions, provided that such structure is recognized as such by the U.S. Department of Education.

Academics and Administrators

The Commission through its Nominating Committee as outlined in Commission Bylaws will assure that among those Trustees on its Board of Trustees who represent institutions there is representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

Policy Number Key

Section INST: Institutional Policies
Chapter D: Decision-Making Bodies and Process
Part 10: Board of Trustees

Last Revised: April 2013
First Adopted: June 2011
Revision History: February 2012, April 2013
Notes: Policies combined November 2012 - 2.2(d)1.1, 2.2(d)1.1a, 2.2(d)1.1b
Related Policies: INST.E.90.010 Appeals (Conflict of Interest, Confidentiality), Trustee Policies, Chapter III. Board Authority and Responsibility, Section C, Confidentiality and D, Objectivity and Conflict of Interest.

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Institutional Actions Council

Number: INST.D.20.010

Composition, Selection, Term, and Activity

The Institutional Actions Council (IAC) shall consist of no fewer than forty (40) members who have been nominated by the Commission staff and who have been appointed by the Board of Trustees. IAC members who represent institutions shall be broadly representative of institutions accredited by the Commission, with attention to institutional type, control, size, and geographical distribution, and shall be current members of the Peer Review Corps. IAC shall include representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The IAC shall include a sufficient number of public members to allow for one public member to be appointed to each committee. IAC members who are representative of the public shall not be, or have a familial relationship with, current employees, consultants, owners, shareholders, or members of the governing board of any affiliated or member institution, organization, or applicant thereof, or higher education agency, and shall reside or have a principal place of employment within the area of the Commission's jurisdiction.

The IAC shall make use of committees, known as First Committee (Level 1) and Second Committee (Level 2) as identified in this section, in completing its responsibilities for decision-making that may result in final actions or in recommendations to the Board of Trustees. The Commission staff will select individuals from the IAC to compose committees to conduct reviews, as outlined in this policy.

The term of appointment for those who serve on First Committee (Level 1) Committees shall be four (4) years, to begin at the start of the Commission's fiscal year. The term of appointment for IAC members who serve on Second Committees (Level 2) shall be extended for a fifth year to complete this responsibility. During that additional twelve (12) month period, those members shall not participate in any First Committee (Level 1) reviews.

The IAC shall meet as a body at least one time each year to review the decision process and engage in training.

Academics and Administrators

The Commission will assure representation on the IAC of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The staff of the Commission will be responsible for developing selection criteria and for implementing a nomination process to assure such representation on the IAC subject to review by the Board of Trustees when it elects IAC members.

Scope of Authority

The IAC, acting through its committees, shall have authority to conduct reviews that result in final action or in recommendations to the Board of Trustees.

Authority to Take Action on Accreditation Decision

The IAC is authorized to take action on accreditation decisions to:

1. reaffirm accreditation;
2. approve recommendations resulting from biennial visits in candidacy;
3. approve or deny applications for substantive change requiring review by a decision structure, but not including Change of Control, Structure, or Organization;
4. approve recommendations resulting from focused evaluations;
5. approve recommendations from staff or financial/non-financial panels for required monitoring or changes in the Statement of Affiliation Status.

For these cases, the IAC has the authority to set the next comprehensive evaluation visit date, establish a schedule of required monitoring, and make other changes in the Statement of Affiliation Status.

Authority to Make Recommendations for Cases that Require Board Action

The IAC is authorized to review the following recommendations arising from the evaluation process and to forward them to the Board of Trustees with a concurring or differing recommendation:

1. to grant or deny initial status, including initial candidacy and initial accreditation;
2. to issue or withdraw a sanction, including on-notice or probation, except where the Board of Trustees in a previous accreditation decision may have outlined specific provisions for a recommendation related to the sanction to move directly to the Board;
3. to withdraw accredited or candidate status; or
4. to move an institution from accredited to candidate status.

The IAC is authorized at Second Committee (Level 2) to review the following recommendations from an IAC First Committee (Level 1) Committee and to forward them to the Board of Trustees with a concurring or differing recommendation:

1. to impose a sanction;
2. to withdraw accredited or candidate status; or
3. to move an institution from accredited to candidate status.

Conflict of Interest

The Commission will not knowingly allow to participate in an action or hearing any IAC member whose past or present activities could affect his/her ability to be impartial and objective in that action or hearing. Therefore, an IAC member must agree to act with objectivity and without conflict of interest when taking an action or participating in a hearing involving an institution. An IAC member confirms agreement to abide by this policy in an Annual Statement of Conflict of Interest, Confidentiality, and Disclosure. This Statement will identify situations involving conflict of interest and provide examples of situations that raise the appearance or potential of conflict of interest. The Statement will

require that the IAC member disclose any known conflicts, predispositions, affiliations or relationships that could jeopardize, or appear to jeopardize objectivity and indicate his/her agreement to follow this policy.

In addition to completing this form, an IAC member must also recuse himself/herself from any action or hearing in which that IAC member does not believe, or the Commission determines, that he/she cannot act with impartiality and free of conflict of interest. The IAC Minutes will reflect such recusals.

Confidentiality

An IAC member agrees to keep confidential any information provided by the institution under review and information gained as a result of participating in an action or hearing. Keeping information confidential requires that the IAC member not discuss or disclose institutional information except as needed to further the purpose of the Commission's decision-making processes. It also requires that the IAC member not make use of the information to benefit any person or organization. Maintenance of confidentiality survives any action and continues after the process has concluded. (See PEER.A.10.040, Standards of Conduct, for a list of examples of confidential information available to IAC members.)

Policy Number Key

Section INST: Institutional Policies
Chapter D: Decision-Making Bodies and Process
Part 20: Institutional Actions Council

Last Revised: June 2014
First Adopted: June 2011
Revision History: April 2013, June 2014
Notes: Policies combined November 2012 - 2.2(d)1.2, 2.2(d)1.2a, 2.2(d)1.2b, 2.2(d)1.2b1, 2.2(d)1.2b2
Related Policies: INST.D.40.010 Characteristics of a Decision Processes

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Staff Actions and Recommendations

Number: INST.D.30.010

As defined in Commission policy, the staff may act to change an institution's Statement of Affiliation Status or recommend directly to the Institutional Actions Council that a change in the Statement of Affiliation Status be approved.

Staff may act to approve the following: editing of the Statement of Affiliation with non-substantive amendments; changing the date of upcoming evaluations or filing of reports by no more than one year and not to exceed the maximum timeframe for evaluation visits provided in Commission policy; approving progress and monitoring reports or requiring follow-up reports on the same or related topics; and removing an institution from notification for approval of additional locations.

Staff may recommend to the Institutional Actions Council for review and action the following: substantive amendments to the Statement of Affiliation Status including modifications to the Stipulations section; changing the date of upcoming evaluations or filing of reports by more than one year or beyond the maximum ten years required for a comprehensive evaluation; and new requirements for monitoring.

Policy Number Key

Section INST: Institutional Policies
Chapter D: Decision-Making Bodies and Processes
Part 30: Staff Actions and Recommendations

Last Revised: June 2011
First Adopted: November 1998, February 2007, February 2002, June 2011
Revision History: revised June 2008, February 2009, June 2009, June 2011
Notes: Policies combined November 2012 –2.2(f), 2.2(f)1, 2.2(h)
Related Policies: INST.F.10.010 Routine Monitoring, INST.E.00.000 Chapter E: Sanctions, Adverse Actions, and Appeals

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Characteristics of a Decision Process

Number: INST.D.40.010

Review and Analysis of the Full Record

Commission decision-makers shall review and analyze the full record prior to taking action. The full record shall consist of documents submitted by the institution as the record of its self-analysis, as application for substantive change, or as other relevant institutional information; the Commission's evaluation team or panel report; and any institutional responses filed by the institution. In addition, the Commission may add other documents to the record that it believes provide additional relevant information. In preparation for this review the Commission will provide appropriate training regarding the responsibilities of Commission decision-makers and regarding the Criteria for Accreditation, Assumed Practices, Federal Compliance Requirements and other policies, and their application.

Each decision-making body shall have the obligation to ensure that it has completed a review of the full record relating to each accreditation recommendation or decision.

Board of Trustees Process

The Board of Trustees may identify subcommittees or specific readers from the current membership of the Board to complete its responsibilities related to decision-making.

Institutional Actions Council Process

The IAC, working through a First Committee (Level 1) or Second Committee (Level 2), shall review the full written record of the evaluation, as defined in this policy section, and the rationale related to any recommendation. The Committee may make findings of fact related to any recommendation under consideration and may substitute its judgment for that of any evaluation team or panel where there is reasonable cause for such substitution. Such findings shall be explained in the Committee record. When the Committee's review results in a final action, its record shall be the basis for the Commission President's action letter. When the Committee's review results in a recommendation to the Board, its record shall be forwarded to the Board, the institution, and the team or change panel chair, along with a letter from the President. All decisions of a Committee, whether they result in actions or recommendations, are made by majority vote. First Committees (Level 1) and Second Committees (Level 2) may defer action in keeping with the Commission's policy on deferral.

Institutional Actions Council First Committee (Level 1) Composition

A First Committee (Level 1) shall consist of at least five (5) members drawn from the current Institutional Actions Council. In rare cases other Peer Reviewers with recent IAC experience may be included on a Committee. All Committees shall include at least one public member. A member of the Committee shall be assigned to act as chair; another member shall be assigned to record the decision of the Committee.

Review Without a Hearing. When an IAC Committee is reviewing cases for which it is authorized to take action and the institutions under review have not requested a hearing, the Committee shall conduct its business by any means that allows for synchronous or asynchronous communication among Committee members. No representatives of the institution or team shall appear at, or participate in, Committees without a hearing.

The decisions of the Committee shall become final actions, unless:

1. the Committee makes substantial changes in the recommendation involving reaffirmation of accreditation or resulting from a focused evaluation or other monitoring, in which case either the institution or the Commission staff may request a Second Committee (Level 2) Review. If such a request is not made, the decision of the First Committee (Level 1) prevails and the action is final; or
2. the First Committee (Level 1) recommends a sanction, withdrawal, or moving the institution from accredited to candidate status, and the First Committee (Level 1) Review did not include an in-person hearing, in which case that recommendation will be considered by a Second Committee (Level 2) prior to action by the Board of Trustees. If such a hearing was held, the case goes directly to the Board for action.

Review with an Optional Hearing. Some cases for which the IAC is authorized to take an action have the option for the institution to request a hearing as part of the review. These are:

a. reaffirmation of accreditation;
b. biennial visits in candidacy;
c. focused visits; and
d. financial and non-financial indicator monitoring.

The Commission charges the institution a fee for a requested hearing on a recommendation that does not require Board action.

The IAC, through its committee structure, will conduct the hearing. The hearing may be held in-person or electronically through any means that allows for synchronous communication among panel members. Representatives of the institution and the evaluation process shall participate in the hearing as appropriate for the nature of the hearing.

The decision of the Committee shall become the final action unless it results in a recommendation for sanction, withdrawal of status, or moving an institution from accredited to candidate status, in which case the case goes directly to the Board of Trustees for a decision.

Review with a Required Hearing. When an IAC Committee is acting as a recommending body to the Board of Trustees, the review shall include a hearing. The IAC through its committee structure shall conduct the hearing. The hearing shall be held in person unless alternative arrangements have been agreed to by the institution. Representatives of the institution and the evaluation process shall participate in the hearing.

Review with No Option for a Hearing. All decisions regarding substantive change and staff recommended monitoring or changes to the Statement of Affiliation Status that are reviewed by a First Committee (Level 1) are final and the First Committee (Level 1) decision prevails.

Institutional Actions Council Second Committee (Level 2) Composition

Composition and Assignments. The IAC Second Committee (Level 2) shall consist of at least five (5) members, drawn from a body of fifteen (15) members of the Institutional Actions Council whose terms on the Council have been

extended by one additional year to complete this responsibility. A Second Committee (Level 2) shall include at least one public member. A member of the Second Committee (Level 2) shall be assigned to act as Chair; another Second Committee (Level 2) member shall be assigned to record the decision of the Committee.

The Second Committee (Level 2) is authorized to take action on decisions made by a First Committee (Level 1) that differ substantially from the recommendation provided by the evaluation process but do not involve sanction, withdrawal of status, or moving an institution from accredited to candidate status, and the institution or the Commission staff has requested the Second Committee (Level 2) review.

The institution may request that the review involve a hearing. Such hearing may be held in-person or electronically through any means that allows for synchronous communication among committee members and other participants. Representative(s) of the institution, the evaluation process, and the First Committee (Level 1) that considered the case shall participate in the hearing as appropriate for the nature of the hearing. The decision of this body shall become the final action unless it results in a recommendation for sanction, withdrawal of status, or moving an institution from accredited to candidate status, which requires Board action. However, if the Second Committee (Level 2) is considering a sanction, withdrawal of status, or moving an institution from accredited to candidate status, and consideration of the case did not involve a hearing, the Second Committee (Level 2) will schedule a hearing involving representatives of the institution and the evaluation process within thirty days of the Committee's initial meeting prior to completing its consideration of the case. The hearing shall be an in-person hearing unless other arrangements have been agreed to by the institution.

The Second Committee (Level 2) will review cases arising from a First Committee (Level 1) in which the Committee has recommended a sanction, withdrawal of status, or moving an institution from accredited to candidate status, all of which require action by the Board of Trustees, if the First Committee (Level 1) did not include an in-person hearing. The Second Committee (Level 2) will hold a hearing as part of its review. The hearing shall be held in person unless alternative arrangements have been agreed to by the institution. Representative(s) of the institution, the evaluation process, and the First Committee (Level 1) that considered the case shall participate in the hearing.

Notice to Institution

When the action is taken by the Board, including when it differs from the recommendation arising out of the evaluation process or when the institution has contested a recommendation, the action letter shall provide information about the terms of the action, including changes to the Statement of Affiliation Status, the rationale, any subsequent steps in the decision process, and any opportunities for institutional response.

When the action is taken by the Institutional Actions Council, the action letter shall provide information about the terms of the action, including changes to the Statement of Affiliation Status. When the action differs from the recommendation arising out of the evaluation process or when the institution has contested that recommendation, the action letter will provide the rationale for the action, any subsequent steps in the decision process, and any opportunities for institutional response.

Deferral of Institutional Action

The Board of Trustees and the Institutional Actions Council may defer action on an institutional action in the following circumstances:

1. a state agency or another recognized institutional accrediting agency has provided official notice of potential suspension, revocation, or termination of legal authority to provide education or accredited or pre-accredited

status, or has denied or not approved an application for legal authority or accredited or pre-accredited status prior to the action;

2. evidence relevant to the action or the institution's compliance with the Criteria for Accreditation, Federal Compliance Requirements or other Commission policies may be required or anticipated within a specified period of time.

A decision to defer action will specify (a) the information that must be provided by the institution or by the Commission office to the decision-making body; (b) the means by which the Commission will acquire the information, including another on-site visit or any other means identified in Commission policy; and (c) the date on which the Commission decision-making body will consider the information and take action.

The Board of Trustees will not defer final action beyond the next regularly scheduled business meeting. The Institutional Actions Council will not defer final action longer than 70 days.

Policy Number Key

Section INST: Institutional Policies
Chapter D: Decision-Making Bodies and Process
Part 40: Characteristics of a Decision Process

Last Revised: November 2012
First Adopted: June 2011, November 1998
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Notes: Policies combined November 2012 -2.2(d)2, 2.2(d)2.1, 2.2(d)2.1a, 2.2(d)2.2, 2.2(d)2.2a, 2.2(d)2.2b, 2.2(d)2.2b.1, 2.2(d)2.2b.2, 2.2(d)2.3, 2.2(g)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Notice

Number: INST.E.10.010

Notice is a public sanction that attaches to an institution's accreditation status. This status indicates that an institution is at risk of being out of compliance with one or more Criteria for Accreditation, or Federal Compliance Requirements or out of conformity with the Assumed Practices but nevertheless is currently in compliance with these requirements. An action to impose Notice is a final action not subject to appeal.

In placing an institution on Notice the Board of Trustees will identify in the letter notifying the institution of the action the deficiencies at the institution that led to Notice. The letter will also specify a date for submission of a written report on the corrective measures taken by the institution during the Notice period and for a subsequent Notice evaluation. The written report must provide clear evidence that the institution has ameliorated the deficiencies that led to the Notice action and is no longer at risk for compliance issues. The Notice evaluation will determine whether claims made in the report are verifiable and demonstrate significant improvement in the deficient areas.

The Notice period will typically be one year and shall not exceed two years, commencing on the date of the Board's action placing the institution on Notice until the date the Board determines whether the deficiencies that led to the institution being placed on Notice have been ameliorated. The filing of the report and the subsequent Notice evaluation will take place within this time period as established by the Board. The Board of Trustees may impose Notice at the end of Probation or Show-Cause if the institution has demonstrated compliance with the areas previously identified as non-compliant but remains at risk related to those areas of non-compliance or other deficiencies.

If, at the end of the Notice period, the Board finds that the deficiencies leading to the Notice action have not been ameliorated, the Board may place the institution on Probation or may withdraw its accreditation following Commission policy. The Board is not required to provide a period of Probation to an institution prior to withdrawing its accreditation after the institution has been on Notice. The Board may also renew Notice if the institution complies with all the Criteria for Accreditation and Federal Compliance Requirements and is making progress but has not completely ameliorated the conditions that led to the Notice. This renewal will be available for an additional year if the institution was originally placed on Notice for one year or for an additional six months if the institution was originally placed on Notice for two years.

Process for Imposing or Removing Notice

Only the Board of Trustees, acting on the recommendation of any evaluation team, an Institutional Actions Council Committee, or the President, shall take action placing an institution on Notice. A team recommendation to place an institution on Notice, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and Institutional Actions Council Hearing Committee recommendations in its deliberations. The President of the Commission makes a recommendation for Notice resulting from an advisory visit process directly to the Board. In all

cases, the Board of Trustees will act on a recommendation for Notice only if the institution's chief executive officer has been given an opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

The Board of Trustees, acting on the recommendation of the Commission President based on the focused evaluation report and recommendation or other information, may remove an institution from Notice; may determine that the institution is not in compliance with one or more of the Criteria for Accreditation or Federal Compliance Requirements or is not in conformity with the Assumed Practices and place the institution on Probation or withdraw accreditation, following Commission policy; or, when the institution's response and actions are insufficient or inadequate to make a judgment, may define a process for determining whether the institution is in compliance with one or more of the Commission's Criteria for Accreditation, or Federal Compliance Requirements and is in conformity with all the Assumed Practices. For a renewal or extension of Notice, the Board may determine whether to call for another Notice report and Notice evaluation or whether a previously scheduled evaluation visit shall consider whether the conditions of Notice have been satisfied.

Pathways Assignment

The Board shall reassign an institution on the Open Pathway to the Standard Pathway in the action that places the institution on Notice. The institution shall remain on the Standard Pathway until such time as it has reestablished its eligibility for the Open or AQIP Pathway as determined by a comprehensive evaluation. An institution on the AQIP Pathway if placed on Notice may remain on that Pathway or may be reassigned to the Standard Pathway as determined by the Board in the action placing the institution on Notice.

Substantive Change During the Notice Period

An institution on Notice may file one or more applications for substantive change during the Notice period. However, any application related to deficiencies identified in the Notice action will be subject to strict scrutiny and may be deferred by staff or by the Institutional Actions Council Committee for consideration by the Commission after the Board has removed Notice, or the application may be denied. An approval of a substantive change for an institution on Notice is not indicative of a determination by the Commission that an institution has corrected identified areas of deficiency.

An institution on Notice is not eligible for the Notification Program for Additional Locations and shall be removed from that program by staff after being placed on Notice. After Notice has been removed with no further sanction or Show-Cause imposed and provided that the Notice was not related to the quality of the institution's off-campus instruction or related issues, the institution may apply after the next comprehensive evaluation or after a period of four years, whichever is longer, to be restored to the Notification Program. If the Notice was related to the quality of the institution's off-campus instruction or related issues, the institution may not reapply until it has completed the ten years of good standing required for access to the Notification Program for Additional Locations.

Public Disclosure of Notice Actions

A Public Disclosure Notice for an institution on Notice will be available on the Commission's website shortly after, but not more than twenty-four (24) hours after, the Commission notifies the institution of the action imposing Notice. An institution on Notice must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than fourteen (14) days after receiving the action letter from the Commission; the notification must include information on how to contact the Commission for further information; the institution must also disclose this status whenever it refers to its Commission accreditation.

Notice Evaluation at the End of the Notice Period

The Notice evaluation conducted at the end of the Notice period will be conducted following Commission policies and procedures for focused evaluations conducted as routine monitoring. (See INST.F.10.010, Routine Monitoring.)

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 10: Notice

Last Revised: February 2014
First Adopted: June 2000
Revision History: February 2011, June 2012, February 2014
Notes: Policies combined November 2012 – 2.5(a), 2.5(a)1, 2.5(a)2
Related Policies: INST.F.20.010 Special Monitoring

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Probation

Number: INST.E.20.010

Probation is a public sanction that attaches to an institution's accreditation status. This status indicates that an accredited institution is no longer in compliance with one or more of the Commission's Criteria for Accreditation or Federal Compliance Requirements or is out of conformity with the Assumed Practices. The institution remains accredited while it is on Probation. An action to impose Probation is a final action not subject to appeal.

In placing an institution on Probation the Board of Trustees will identify in the letter notifying the institution of the action the specific areas of non-compliance that led to the Probation and the date for the institution's next comprehensive evaluation at which time the institution must provide clear evidence of having ameliorated the areas of non-compliance as well as clear evidence of compliance with each of the Criteria for Accreditation including the Assumed Practices, or Federal Compliance Requirements.

The initial period for Probation shall be two (2) years commencing with the date of the Board's action placing the institution on Probation and concluding with the Board's determination that Probation be removed and accreditation continued or that accreditation be withdrawn. The period for Probation may be less than two (2) years if the Board so determines. Regardless of the initial length of Probation, under rare circumstances an institution may be eligible for one extension of its initial period of Probation as explained below.

The comprehensive evaluation process to consider removal of probation will take place within the time period for the sanction established by the Board. If the institution has been on Notice prior to the imposition of Probation, the Board may take that history into account in determining the length of Probation. An institution that receives Probation for less than two (2) years is not entitled to the remainder of the two (2) years if, at the end of the probationary period, it has not been able to demonstrate compliance with the Criteria for Accreditation and Federal Compliance Requirements.

The Board may at its sole discretion grant one extension of Probation at the end of the initial period of Probation if the institution is not able to demonstrate compliance with the Criteria for Accreditation and the Core Components but is able to demonstrate all of the following to show that it is eligible for the extension:

- clear evidence of substantial progress towards meeting the Criteria for Accreditation and Core Components, including evidence of substantial implementation of necessary improvements, in the majority of areas in which the institution has been previously found to be non-compliant;
- verifiable plans to cure the remaining areas of non-compliance or any other areas of non-compliance identified in the action granting the extension by the end of the extension period;
- sufficient capacity and resources in place to cure the identified areas of non-compliance during the extension; and

- likelihood that the institution will be able to demonstrate compliance with all the Criteria for Accreditation and the Core Components by the end of the extension.

The extension shall be one for an additional six months beyond the initial period of Probation. In no case shall the time period of Probation, including the extension period, exceed three years.

The institution shall host a focused evaluation as soon as possible after the six-month extension has concluded to determine whether the improvements anticipated in the action granting the extension are in place and functioning to cure any areas of non-compliance identified in that action and whether the Criteria for Accreditation and Core Components are met such that Probation may be removed following the requirements for removal of Probation stipulated in this policy or whether accreditation shall be withdrawn or other action taken following Commission policy. The report of the focused evaluation team, and any response to that report filed by the institution, shall be considered by the Board of Trustees in determining its action at end the of extension period.

The Board is not required to have placed an institution on Notice prior to the imposition of Probation nor is the Board required to provide a period of Probation prior to withdrawing accreditation. In making the judgment about whether to provide a period of Probation or an extension of Probation the Board will weigh the capacity of the institution to resolve the areas of non-compliance within the probationary period, any harm that might result to students and the public from allowing the institution time to resolve areas of non-compliance while remaining accredited, and other factors. Therefore, the Board may choose to withdraw accreditation without providing a period of Probation or withhold an extension of Probation upon consideration of such factors.

The Board also has the discretion at any time during the probationary period to reevaluate its decision to allow for a period of Probation if it receives evidence of additional non-compliance with the Criteria for Accreditation, including the Assumed Practices, or Federal Compliance Requirements or deteriorating conditions at the institution that have the capacity to affect the teaching and learning experience at the institution. In such cases the Board may move to Show-Cause or take other action provided for in these policies.

At the end of the period of Probation or following the extension of Probation or at any time during Probation as specifically outlined in this policy, if the institution cannot provide evidence of ameliorating the areas of non-compliance within the timeframe specified by the Board for the Probation, or if further evidence surfaces that suggests the institution is found not to be in compliance with one or more of the Criteria for Accreditation, whether or not the areas of non-compliance are the same or different from those originally identified, the Board shall withdraw the institution's accreditation or take other action as provided for in these policies.

Process for Imposing or Removing Probation

Only the Board of Trustees, acting on the recommendation of any evaluation team, an Institutional Actions Council Committee, or the President, shall take action placing an institution on Probation. A team recommendation to place an institution on Probation or extend Probation, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. The Board may also act of its own accord to grant an extension of Probation at the time it considers removing Probation without a prior recommendation by an evaluation team or Institutional Actions Council. The President of the Commission makes a recommendation for Probation resulting from an advisory visit process directly to the Board. In all cases, the Board of Trustees will act on a recommendation for Probation only if the institution's chief executive officer

has been given an opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

At the end of Probation the Board of Trustees will review recommendations from the comprehensive evaluation team that evaluated the institution and from the Institutional Actions Council Hearing Committee. In taking action, the Board of Trustees may choose to accept, reject, or modify these recommendations. The Board of Trustees may continue accreditation, withdraw accreditation or take other action as provided for in these policies, including imposing a period of Notice if the institution has remediated the areas of non-compliance but remains at risk in those areas or in relation to other deficiencies.

Pathways Assignment

An institution placed on Probation is also removed from any reaffirmation pathway until it is removed from Probation. An institution removed from Probation will be placed on the Standard Pathway for its next reaffirmation cycle.

If the Board of Trustees removes the institution from Probation and does not withdraw accreditation or issue an Order to Show-Cause, the Board shall reaffirm the institution's accreditation and assign it to the Standard Pathway. The institution will have an evaluation to reaffirm accreditation no later than four (4) years after the Board acts to remove Probation although the Board may set the reaffirmation date earlier, and the institution will be placed in the Standard Pathway accordingly. The Board may also require interim monitoring as a part of its action. The institution will remain on the Standard Pathway until it completes the full ten (10) year cycle. If at that time accreditation is reaffirmed without further sanction, it may be considered to be eligible for the Open or AQIP Pathways.

Substantive Change During the Probationary Period

An institution on Probation may file one or more applications for substantive change during the probationary period. However, the institution must address in its application the question of why the change is immediately necessary and how the institution will manage the change while continuing to work to remedy the areas of non-compliance; the application will be subject to strict scrutiny by the Commission. The institution should anticipate that the application is likely to be denied or deferred by staff or by the Institutional Actions Council Committee for consideration by the Commission after the Board has removed Probation. An approval of a substantive change for an institution on Probation is not indicative of a determination by the Commission that an institution has corrected identified areas of non-compliance.

An institution on Probation is not eligible for the Notification Program for Additional Locations and shall be removed from that program by staff after being placed on Probation. The institution may not reapply until it has completed ten (10) years in good standing as required for access to the Notification Program for Additional Locations.

Public Disclosure of Probation Actions

A Public Disclosure Notice for an institution on Probation will be available on the Commission's website shortly after, but not more than twenty-four (24) hours after, the Commission notifies the institution of the action imposing Probation. An institution on Probation must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than fourteen (14) days after receiving the action letter from the Commission; the notification must include information on how to contact the Commission for further information; the institution must also disclose this status whenever it refers to its Commission accreditation.

Comprehensive Evaluation Visit During Probation

An institution on Probation shall undergo a comprehensive evaluation by the Commission according to a schedule set by the Commission's Board of Trustees in placing the institution on Probation. While the evaluation will review the institution's compliance with all the Criteria for Accreditation and Federal Compliance Requirements and conformity with the Assumed Practices, the Commission may determine, if the institution has had a recent comprehensive evaluation within the previous three (3) years prior to the imposition of Probation, that the visit will focus primarily on those areas in which the institution has been found to be non-compliant; therefore the Commission may attenuate some aspects of the visit unrelated to the issues involved in Probation.

The President of the Commission shall determine whether the institutional liaison or other Commission staff member will accompany evaluation visits related to Probation. The comprehensive evaluation for an institution undergoing such an evaluation during Probation has the following elements:

Assurance Review.

- Assurance Filing by the institution;
- Review by the comprehensive evaluation team composed of Commission Peer Reviewers appointed by Commission staff in accordance with team selection procedures; such review shall include analysis of the Assurance Filing as well as of information from the onsite visit conducted to the institution;
- Written report prepared by the comprehensive evaluation team outlining the team's findings related to the evidence required of the institution and the conditions that led to the imposition of Probation. The report shall identify strengths and challenges or deficiencies for the institution.

The Assurance Review for an institution with distance or correspondence education shall include a specific focus on these forms of delivery.

Assurance Filing. Information assembled by the institution through a self-evaluative or self-study process:

1. evidence of remediation of the areas of non-compliance identified in the letter notifying the institution of Probation;
2. evidence of conformity with the Assumed Practices;
3. evidence of meeting the Criteria for Accreditation;
4. branch campus evaluation information, if applicable;
5. evidence of compliance with the Federal Compliance Requirements; and
6. any addenda requested by the team or the Commission during the evaluation process.

In addition, the Commission shall supply information, including but not limited to: summary data from the institution's recent Institutional Update; records related to evaluation visits, official actions and correspondence; public comments, complaints and results of Commission-sponsored surveys; information from the institution's accreditation file regarding other recognized accrediting agencies, when appropriate; and any other information the Commission deems appropriate together with any response the institution wishes to file with regard to this information.

On-Site Visit. A team of Peer Reviewers appointed by Commission staff in accordance with Commission procedures shall conduct a visit to the institution's main campus and other institutional locations as shall be determined by the Commission based on its policies and procedures; for institutions that offer only distance or correspondence education,

the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations.

The length of the visit shall be three (3) days, but the Commission shall retain discretion to lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities as a part of a particular Comprehensive Evaluation to examine specific issues.

Recommendations Arising from Comprehensive Evaluations During Probation. The team of Commission Peer Reviewers conducting a comprehensive evaluation during Probation shall in its written report make a recommendation to the Commission's Board of Trustees for Commission action.

The team shall recommend whether to remove Probation, specifying interim monitoring that should be attached to the removal, or to withdraw accreditation. In recommending withdrawal of accreditation, the team may also recommend for the Board's consideration an effective date for the withdrawal action.

These recommendations, along with the team's written report, shall be forwarded to an Institutional Actions Council Hearing Committee and from there to the Commission's Board of Trustees.

Institutional Responses to Recommendations Arising from Comprehensive Evaluations During Probation. An institution shall have the opportunity to provide a written response to the written report of a comprehensive evaluation following Commission policies for the provision of institutional responses. An institution shall have at least two weeks to prepare and submit an institutional response to the team report prior to review and action through the Commission's decision-making processes.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 20: Probation

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First Adopted: August 1988
Revision History: February 1998, May 2002, February 2011, June 2012, November 2012, February 2014, February 2015
Notes: Policies combined November 2012 – 2.5(b), 2.5(b)1, 2.5(b)2, 2.5(b)3
Related Policies: INST.G.10.020 Official Records (Institutional Responses within the Process), COMM.B.10.010 Staff Role and Responsibility

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Show-Cause (Procedural Order)

Number: INST.E.30.010

The Board of Trustees may require an accredited institution to show cause, within a limited period of time not to exceed one (1) year, as to why its accreditation should not be removed. The basis for the issuance of a Show-Cause Order will be the Board's determination that there is probable cause that the institution does not meet the Criteria for Accreditation or the Federal Compliance Requirements or is out of conformity with the Assumed Practices. The Show-Cause Order is public. The institution remains accredited while it is on Show-Cause. An order to show cause is a final action not subject to appeal.

The Board of Trustees will explain the reasons for its decision and areas of probable non-compliance in the Show-Cause Order and in the letter provided to the institution after the action to impose Show-Cause. The Show-Cause Order will require that an institution (1) present its case for continued accreditation by means of a report, known as a Show-Cause Report, that provides substantive evidence that the institution continues to meet each of the Criteria for Accreditation including the Assumed Practices, and Federal Compliance Requirements and has resolved the issues that led to the findings of probable non-compliance identified in the Show-Cause Order, and (2) host an on-site evaluation team to validate the report. The President of the Commission shall determine whether the institutional liaison or other Commission staff member will accompany the Show-Cause Evaluation Visit. The on-site team will produce a report that includes its findings regarding the institution's compliance with the Criteria for Accreditation and the Federal Compliance Requirements and conformity with the Assumed Practices for consideration by the Board of Trustees. Only the Board of Trustees may issue a Show-Cause Order, and only the Board of Trustees may find that the Show-Cause Order has been addressed, and that the institution has demonstrated compliance with the Criteria for Accreditation and the Federal Compliance Requirements and conformity with the Assumed Practices.

Process for Imposing or Removing a Show-Cause Order

The Board of Trustees shall take action at the end of the Show-Cause period. If the institution has demonstrated to the sole satisfaction of the Board that it has ameliorated each finding of probable non-compliance identified by the Board detailed in the Show-Cause Order and that it meets each of the Criteria for Accreditation, including but not limited to the Assumed Practices and Federal Compliance Requirements, the Board may remove the institution from Show-Cause and cancel the Order; the Board may also reaffirm accreditation as required by the institution's reaffirmation cycle with the Commission. The Board may remove the institution from Show-Cause subject to a period of Notice if the institution has demonstrated compliance with the Criteria for Accreditation, including but not limited to the Assumed Practices and Federal Compliance Requirements, but remains at risk related to those areas of non-compliance or other deficiencies. No language in other Commission policies including but not limited to the policy on Probation shall be interpreted to create a right by an institution to additional time after a period of Show-Cause concludes to demonstrate compliance with the Criteria for Accreditation or Federal Compliance Requirements.

If the institution has not demonstrated to the sole satisfaction of the Board 1) that it has ameliorated each area of non-compliance identified by the Board detailed in the Show-Cause Order and 2) that it meets each of the Criteria for Accreditation and Federal Compliance Requirements, the Board shall withdraw accreditation or take any other action provided for in Commission policy including Probation or Reconsideration, as appropriate, subject to the requirements of those policies provided that in no case shall the period of time provided to an institution determined to be non-compliant be more than two (2) years including the Show-Cause period.

In all cases, the Board of Trustees will act at the conclusion of a Show-Cause process only if the institution's chief executive officer has been given opportunity to place before the Board of Trustees a written response to the Show-Cause Report and any other information arising in the Show-Cause process. An institution shall have at least two (2) weeks to prepare and submit an institutional response to the team report prior to review and action by the Board of Trustees.

Board Committee Hearing in Show-Cause

At the time it establishes the order, or within a reasonable period of time thereafter, the Board of Trustees will name individuals to conduct a Board Committee Hearing in keeping with INST.E.70.010 Special Protocols Related to Adverse Actions. The hearing will occur after the on-site visit but prior to the Board of Trustees meeting at which the Board of Trustees will take final action on the Show-Cause Order.

Pathways Assignment

An institution placed on Show-Cause is removed from any reaffirmation pathway until it is removed from Show-Cause.

If, at the conclusion of the Show-Cause period, the Board of Trustees removes the institution from Show-Cause and does not withdraw accreditation or place the institution on Probation or take other action related to a finding of non-compliance, the Board shall assign the institution to the Standard Pathway. The institution will have an evaluation to reaffirm accreditation no later than four (4) years after the Board acts to remove Show-Cause and depending on the previous date of reaffirmation although the Board may set the reaffirmation date earlier, and the institution will be set in the Standard Pathway accordingly. The Board may also require interim monitoring as a part of its action. The institution will remain on the Standard Pathway until it completes a full ten (10) year cycle and is then reaffirmed without further sanction at which time it may be considered for the Open or AQIP Pathways.

Substantive Change During the Show-Cause Period

The Commission will not consider for approval any substantive change during the Show-Cause period unless the institution can demonstrate that the change is required by law or by the requirements of a specialized accreditor or is essential for the institution to demonstrate compliance with the Criteria for Accreditation or Federal Compliance Requirements or to remain fiscally viable. Even if the Commission accepts the application after this showing of necessity, the application will be subject to strict scrutiny by the Commission and may be denied or deferred by staff or by the Institutional Actions Council Committee for consideration by the Commission after the Board has removed Show-Cause. An approval of a substantive change for an institution on Show-Cause is not indicative of a determination by the Commission that an institution has corrected identified areas of probable non-compliance.

An institution on Show-Cause is not eligible for the Notification Program for Additional Locations and shall be removed from that program by staff after being placed on Show-Cause. The institution may not reapply until it has completed ten (10) years in good standing as required for access to the Notification Program for Additional Locations.

Public Disclosure of Show-Cause

A Public Disclosure Notice for an institution on Show-Cause will be available on the Commission's website after, but

not more than twenty-four (24) hours after, the Commission notifies the institution of the action issuing the Show-Cause Order. An institution on Show-Cause must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than fourteen (14) days after receiving the action letter from the Commission; the notification must include information on how to contact the Commission for further information; the institution must also disclose this status whenever it refers to its Commission accreditation.

Show-Cause Evaluation Visit

An institution under a Show-Cause Order shall undergo a Show-Cause Evaluation Visit by the Commission according to a schedule set by the Commission's Board of Trustees in placing the institution on Show-Cause. The evaluation will review the institution's compliance with all the Criteria for Accreditation and Federal Compliance Requirements and conformity with the Assumed Practices. The visit will be narrowly tailored at the Commission's discretion to make this key determination.

A team of peer reviewers appointed by Commission staff in accordance with Commission procedures shall conduct a visit to the institution's main campus and other institutional locations as determined by the Commission based on its policies and procedures; for institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations.

The length of the visit shall be three (3) days, but the Commission shall retain discretion to lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

The President of the Commission shall determine whether the institutional liaison or other Commission staff member will accompany evaluation visits related to Show-Cause.

Institutional Responses to the Show-Cause Evaluation Visit Report

An institution shall have the opportunity to provide a written response to the written report of a Show-Cause evaluation following Commission policies for the provision of institutional responses. An institution shall have at least two (2) weeks to prepare and submit an institutional response to the team report prior to review and action through the Commission's decision-making processes.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 30: Show Cause

Last Revised: February 2015
First Adopted: June 2000
Revision History: June 2006, November 2012, February 2014, February 2015
Notes: Policies combined November 2012 – 2.5(c), 2.5(c)1, 2.5(c)2, 2.5(c)3
Related Policies: INST.E.70.010 Special Protocols Related to Adverse Actions, INST.B.30.040 Public Disclosure, COMM.B.10.010 Staff Role and Responsibility

HIGHER LEARNING COMMISSION

POLICY

Policy Title: External Expertise in Sanctions or Show-Cause

Number: INST.E.40.010

The Commission staff or the Board may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process but provide particularized advice and assistance where appropriate to the Commission Board, staff or evaluation team members.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 40: External Expertise in Sanctions or Show-Cause

Last Revised:
First Adopted: June 2012
Revision History:
Notes: Former policy number 2.5(d)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Accredited to Candidate Status

Number: INST.E.50.010

The Board of Trustees may determine that an institution be moved from accredited to candidate status subsequent to the close of a CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION transaction as a result of the findings of an on-site team, including either a Fact-Finding or other team, visiting the institution or the findings in a Staff Summary Report. The Board must find that the institution, as a result of or related to the CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION, meets the Eligibility Requirements and demonstrates conformity with the Assumed Practices but no longer meets all of the Criteria for Accreditation and Federal Compliance Requirements. It must also find that the institution meets the requirements of the candidacy program. Moving an institution from accredited to candidate status is an adverse action and thus is not a final action and is subject to appeal.

Process for Moving an Institution from Accredited to Candidate Status

The Board of Trustees may take an action to move an institution from accredited to candidate status in conjunction with a CHANGE OF CONTROL, STRUCTURE, OR ORGANIZATION, as outlined in Commission policy INST.B.20.040. In addition, a team recommendation arising out of a comprehensive or focused evaluation within six (6) months of the close of a transaction approved under INST.B.20.040 to move the institution from accredited to candidate status, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. In all cases, the Board of Trustees will act on a recommendation to move an institution from accredited to candidate status only if the institution's chief executive officer has been given at least two weeks to place before the Board of Trustees a written response to the recommendation of the team or Institutional Actions Council Hearing Committee.

Public Disclosure of Accredited to Candidate Status

A Public Disclosure Notice for an institution whose status has shifted under this policy will be available on the Commission's website shortly after, but not more than twenty-four (24) hours after, the Commission notifies the institution of the action moving the institution from accredited to candidate status. An institution moved from accredited to candidate status must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than fourteen (14) days after receiving the action letter from the Commission; the notification must include information on how to contact the Commission for further information; the institution must also disclose this new status whenever it refers to its Commission affiliation.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 50: Accredited to Candidate Status

Last Revised: February 2014
First Adopted: June 2009
Revision History: February 2011, February 2014
Notes: Policies combined November 2012 – 2.5(e), 2.5(e)1, 2.5(e)2
Related Policies: INST.B.20.020 Candidacy, INST.B.20.040 Change of Control, Structure, or Organization

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Denial or Withdrawal of Status

Number: INST.E.60.010

Withdrawal of Accreditation

The Board of Trustees shall take action withdrawing the accreditation of an institution. The grounds for withdrawal of accreditation shall be that the institution does not meet one or more of the Criteria for Accreditation or Federal Compliance Requirements or fails to demonstrate conformity with the Assumed Practices or has not demonstrated a pattern of meeting the Obligations of Affiliation during the accreditation period.

This determination may be made by the Board after any of the following:

- a focused or comprehensive evaluation;
- a period of Notice or Probation;
- a Show-Cause process;
- a reconsideration process; or
- upon recommendation of the President, if an on-site visit has occurred within the year preceding.

A team recommendation to withdraw accreditation, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. A recommendation for withdrawal of accreditation by the President is made directly to the Board, and there is no Institutional Actions Council Hearing in this case.

In all cases, the Board of Trustees will act on a recommendation for withdrawal only if the institution's chief executive officer has been given opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

In addition, an institution may also lose its accreditation if it fails to meet institutional Obligations of Affiliation within a designated time after being warned of non-compliance, if it ceases to operate as an educational institution, or if its legal authorization to operate and grant degrees is terminated. The President shall take a recommendation to the Board calling for withdrawal in such cases; the institution need not have had an on-site visit within the previous year.

Withdrawal of accreditation is an adverse action and thus is not a final action and is subject to appeal.

Public Disclosure After Withdrawal of Accreditation

A Public Disclosure Notice for an institution that has had its accreditation withdrawn will be available on the Commission's website shortly after, but not more than twenty-four (24) hours after, the Commission notifies the

institution of the action. Since an institution may appeal this decision by the Commission, the public notice shall also include clear reference to the appeal options available to the institution and official comments that the institution provides to be included in the notice. An institution under withdrawal must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than fourteen (14) days after receiving the action letter from the Commission; the notification must include information on how to contact the Commission for further information; the institution must also disclose this status whenever it refers to its Commission status.

Denial of Accreditation

The Board of Trustees shall take action denying accreditation to an institution. The grounds for denial of accreditation shall be that the institution does not meet one or more of the Eligibility Requirements, the Assumed Practices, or the Criteria for Accreditation, or has not demonstrated a pattern of meeting the Obligations of Affiliation during the candidacy period.

This determination may be made by the Board after any of the following:

- a comprehensive evaluation; or
- a reconsideration process of the accreditation of an institution awarded within the preceding one (1) year.

A team recommendation to deny accreditation will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations.

In all cases, the Board of Trustees will act on a recommendation for denial only if the institution's chief executive officer has been given opportunity to place before the Board of Trustees a written response to the recommendation.

Denial of accreditation is an adverse action and thus is not a final action and is subject to appeal except in cases where the Board, in taking such action, denies an institution's early application for accreditation prior to the end of the candidacy period and thereby continues the institution's candidate for accreditation status or extends that status to a fifth year, as provided for in Commission policy.

Denial or Withdrawal of Candidate for Accreditation Status

The Board of Trustees shall take actions denying or withdrawing the candidate for accreditation status of an institution. The grounds for denial or withdrawal of candidacy shall be that the institution does not meet one or more of the Eligibility Requirements, the Assumed Practices, and Federal Compliance Requirements or that there is not sufficient evidence to support the judgment that all of the Criteria for Accreditation can reasonably be met within the period of candidacy, or the remainder of the candidacy period if withdrawal of candidacy is being considered.

This determination may be made by the Board after any of the following:

1. in the case of denial of candidacy, a comprehensive evaluation;
2. in the case of withdrawal of candidacy, a comprehensive, focused or other evaluation during candidacy;
3. a reconsideration process; or
4. upon recommendation of the President, if an on-site visit has occurred within the year preceding.

A team recommendation to deny or withdraw candidacy, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. A recommendation for withdrawal of accreditation by the President is made directly to the Board, and there is no Institutional Actions Council Hearing in this case.

In all cases, the Board of Trustees will act on a recommendation for denial or withdrawal of candidacy only if the institution's chief executive officer has been given opportunity to place before the Board of Trustees a written response to the recommendation.

In addition, an institution may also lose its candidate for accreditation status if it fails to meet institutional Obligations of Affiliation within a designated time after being warned of non-compliance, if it ceases to operate as an educational institution, or if its legal authorization to operate and grant degrees is terminated. The President shall take a recommendation to the Board calling for withdrawal in such cases; the institution need not have had an on-site visit within the previous year.

Denial or withdrawal of candidate for accreditation status is an adverse action and thus is not a final action and is subject to appeal.

Public Disclosure After Denial of Accreditation or Denial or Withdrawal of Candidate for Accreditation

A Public Disclosure Notice for an institution that has had accreditation denied or candidacy withdrawn, or had candidacy denied, will be available on the Commission's website shortly after, but not more than twenty-four (24) hours after, the Commission notifies the institution of the action. Since an institution may appeal this decision by the Commission (except in cases where the Commission has extended an existing candidacy), the public notice shall also include clear reference to the appeal options available to the institution and official comments that the institution provides to be included in the notice. An institution under withdrawal or denial must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than fourteen (14) days after receiving the action letter from the Commission; the notification must include information on how to contact the Commission for further information; the institution must also disclose this status whenever it refers to its Commission status.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 60: Denial or Withdrawal of Status

Last Revised: February 2014
First Adopted: January 1983
Revision History: revised November 1994, May 2002, June 2006, February 2011, February 2012, February 2014
Notes: Policies combined November 2012 - 2.5(f), 2.5(f)1, 2.5(f)2, 2.5(f)3, 2.5(f)4
Related Policies: INST.B.20.020 Candidacy

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Special Protocols Related to Sanctions and Adverse Actions

Number: INST.E.70.010

Special Notice to Institutions in Limited Circumstances

Prior to placing an institution on probation, withdrawing accreditation, or denying initial candidacy or initial accreditation, the Board will notify an institution of the intended action. The notification will include the reasons for the action if such action has not previously been recommended by a team or Review Committee or the President, and the institution has not had an opportunity to respond. The institution will have thirty days to respond to the notice of the Board's intended action. The Board also will determine when it will take final action, either at regular meeting or through any means permitted by policy. The Board will consider the institution's response, if any, filed within the thirty day period, prior to taking final action.

Board Committee Hearing

The Commission shall make available a Board Committee Hearing, provided the institution requests such hearing, prior to a final decision by the Board to:

- deny accreditation, except where the Commission is denying an application for early accreditation prior to the end of the four-year term of candidacy with a possible extension for a fifth year for good cause;
- withdraw accreditation; or
- move an institution from accredited to candidate status.

The Commission shall require a Board Committee Hearing prior to a final decision by the Board concluding a show-cause order process, unless such hearing is waived by the institution. An institution may have no more than one Board Committee Hearing related to a single institutional decision.

Board Committee Hearing Process

A Board Committee Hearing will be conducted according to a timeframe established by the Board. A Board Committee will consist of three to five members, a majority of which will consist of members of the Board of Trustees, and be selected by vote of the Board members.

A written record shall be made of a Board Committee Hearing, and a transcript made available to all members of the Board prior to their taking final action. Moreover, Committee members will make an oral report to the full Board of the contents of the hearing prior to the vote of the Board of Trustees regarding the institution.

The fee for a Board Committee Hearing will be set by the Board and will be posted in the Commission's schedule of fees. The institution seeking such a hearing will submit the fee with its written request for a hearing.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 70: Special Protocols Related to Adverse Actions

Last Revised: February 2011
First Adopted: June 2006
Revision History: revised June 2008, December 2009, February 2011
Notes: Policies combined November 2012 – 2.2(i), 2.2(j), 2.2(j)1
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Reapplication following a Denial or Withdrawal of Status

Number: INST.E.80.010

An institution denied candidacy upon initial application must wait one year before reapplying. This period of time may be shortened by action of the Board of Trustees.

An institution denied accreditation upon initial application must wait two years before reapplying. This period of time may be shortened by action of the Board of Trustees.

When accreditation or candidacy is withdrawn by action of the Board of Trustees, the Board of Trustees will not consider an application for accreditation or candidacy from the same institution until a period of at least two years has elapsed following the date the withdrawal action became effective. This period of time may be shortened by action of the Board of Trustees.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 80: Reapplication following a Denial or Withdrawal of Status

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Last Revised:
First Adopted: January 1983 and October 1983
Revision History:
Notes: Policies combined November 2012 – 2.6(a), 2.6(b), 2.6(c)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Appeals

Number: INST.E.90.010

An institution may appeal an adverse action of the Board of Trustees, prior to the action becoming final by filing a written request to appeal following the appeals procedures of the Commission. Adverse actions are defined as those that (1) withdraw or deny accreditation, except in denial of accreditation where the Board denies an early application for accreditation and continues candidate for accreditation status or extends it to a fifth year, (2) withdraw or deny candidacy, or (3) moves the institution from accredited to candidate status.

Grounds for Appeal

The grounds for such an appeal shall be (a) that the Board's decision was arbitrary, capricious, or not supported by substantial evidence in the record on which the Board took action; or (b) that the procedures used to reach the decision were contrary to the Commission's By-laws, Handbook of Accreditation, or other established policies and practices, and that procedural error prejudiced the Board's consideration. The appeal will be limited to only such evidence as was provided to the Board at the time it made its decision.

Appeals Body and Appeals Panel

The Appeals Body will consist of ten persons appointed by the Board of Trustees, following the Board's commitments to diversity and public involvement. From the Appeals Body, the President will establish an Appeals Panel of five persons to hear an institutional appeal. Members of the Panel will include no current members of the Board of Trustees nor members of the Board at the time the adverse action was taken; Panel members shall have no apparent conflict of interest as defined in Commission policies that will prevent their fair and objective consideration of the appeal. One member of the Appeals Panel will be a public member, in keeping with Commission requirements for public members on decision-making bodies. Members of the Appeals Panel will receive training prior to the Appeals Panel hearing. The Appeals Panel will receive appropriate training regarding its responsibilities and regarding the Criteria for Accreditation, Assumed Practices and Federal Compliance Requirements and their application.

The Panel shall convene on a date no later than 16 weeks from the Board decision under appeal. At least one representative of the public shall serve on each Panel. Where necessary to avoid conflict of interest or in other exceptional circumstances, the President may select individuals outside the Appeals Body as Panel members. One member of the Panel will be designated as the chair. The President shall notify the institution of the individuals selected for the Panel and shall afford the institution the opportunity to present objections regarding conflict of interest; the President reserves final responsibility and authority for setting all Appeals Panels. The Appeals Panel shall include representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The Board of Trustees shall approve an APPEALS PROCEDURE that identifies the materials for, and sets out the required timetables and procedures of, an appeal. This document will be available on the Commission Web site. Throughout the appeals process, the institution shall have the right to representation of, and participation by, counsel at its own expense.

The Appeals Panel has the authority to make a decision to affirm, amend or reverse the adverse action. The Appeals Panel then conveys that decision to the Board of Trustees, which must implement the Appeals Panel's decision regarding the status of the institution in a manner consistent with the decision. The Appeals Panel also has the authority to remand the adverse action to the Board of Trustees for additional consideration with an explanation of its decision to remand; the Board of Trustees may affirm, amend or reverse its action after taking into account those issues identified by the Appeals Panel in the explanation of its remand. The Commission will notify the institution of the result of the appeal and of the final action by the Board of Trustees and the reason for that result.

Academics and Administrators

The Commission will assure that on the Appeals Body and each Appeals Panel there is representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The staff of the Commission will be responsible for developing selection criteria and for implementing a nomination process to assure such representation on the Appeals Body subject to review by the Board of Trustees when it elects IAC members. The President of the Commission will be responsible for assuring such representation on each Appeals Panel.

Conflict of Interest

The Commission will not knowingly allow to participate in an appeal any Appeals Panel member whose past or present activities or relationships could affect his/her ability to be impartial and objective in that appeal. Therefore, an Appeals Panel member must agree to act with objectivity and without conflict of interest when reviewing an appeal. An Appeals Panel member confirms agreement to abide by this policy in a Statement of Conflict of Interest, Confidentiality, and Disclosure provided annually to the Appeals Body and to a Panel member prior to hearing an appeal. This Statement will identify situations involving conflict of interest and provide examples of situations that raise the appearance or potential of conflict of interest. The Statement will require that the Panel member affirm prior to participating in an appeal that he/she has no conflicts, predispositions, affiliations or relationships known to that Panel member that could jeopardize, or appear to jeopardize, objectivity and indicate his/her agreement to follow this policy. If an Appeals Panel member has such conflicts, predispositions, affiliations or relationships that he/she believes or, the Commission determines, constitute a Conflict of Interest, that Panel member must withdraw from the appeal.

Confidentiality

An Appeals Panel member agrees to keep confidential any information provided by the institution under review and information gained as a result of participating in an appeal. Keeping information confidential requires that the Panel member not discuss or disclose institutional information except as needed to further the purpose of the Commission's decision-making processes. It also requires that the Panel member not make use of the information to benefit any person or organization. Maintenance of confidentiality survives any action and continues after the process has concluded. (See PEER.A.10.040, Standards of Conduct, for a list of examples of confidential information available to IAC members.)

Submission of Financial Information Subsequent to Adverse Action

When the Board of Trustees takes an adverse action based solely on or involving financial grounds, the institution shall

have an opportunity to submit financial information to the Board of Trustees to be considered prior to the action becoming final. The financial information must be: 1) significant and material to the financial deficiencies cited in the grounds for the adverse action; 2) not available at the time of the adverse action. The institution may submit this material on one occasion only prior to the formal consideration of any appeal filed by the institution. The Board of Trustees will determine at its sole discretion whether the information is significant and material, and, if it is material, whether this information would cause it to take a different action. The Board's decision whether the information is significant and material and whether to continue with its action subsequent to reviewing this material is final and not appealable.

An institution may submit financial information under this policy in addition to filing an appeal or it may submit financial information instead of, or in lieu of, filing an appeal. Should it submit financial information and forego requesting an appeal by the deadline stated in the APPEALS PROCEDURE, it shall also submit a formal waiver in writing of its right to appeal in conjunction with the adverse action.

The APPEALS PROCEDURE identifies the materials for, and sets out the required timetables and procedures of, submission of financial information. This document shall be available on the Commission's Web site.

Institutional Change During Appeal Period

During the period in which an appeal from a decision of the Commission by an institution is under consideration, the institution cannot initiate any change that would by policy require Commission approval.

Policy Number Key

Section INST: Institutional Policies
Chapter E: Sanctions, Adverse Actions, and Appeals
Part 90: Appeals

Last Revised: April 2013
First Adopted: February 2001, February 2009, January 1983
Revision History: October 2003, June 2006, February 2009, June 2009, February 2010, February 2011, November 2012, April 2013
Notes: Policies combined November 2012 - 2.6(d), 2.6(d)1, 2.6(d)2, 2.6(d)3, 2.6(d)4
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Routine Monitoring and Data Collection

Number: INST.F.10.010

Monitoring on Pathways. An institution on the Standard, Open, or AQIP Pathway may be required to file one or more interim reports. An institution on the Standard or AQIP Pathway may be required to host one or more focused visits. Such monitoring shall be appropriate in circumstances where the team has concluded that the Commission should review the institution's progress in addressing a serious issue at the institution, the resolution of which is relevant to the institution's future compliance with, or improvement regarding, the Criteria for Accreditation. Commission staff may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process related to monitoring but provide particularized advice and assistance where appropriate to Commission staff or evaluation team members.

Other Monitoring. An institution, regardless of its pathway, is always subject to monitoring in the form of interim reports or focused evaluations related to review by the Commission of the following: financial and non-financial indicators; a change of control, structure or organization transaction; substantive change; complaints; conformity with Assumed Practices; or other Commission investigation or review.

Process for Requiring Monitoring. An evaluation team or staff may recommend that an institution be required to file an interim report or host a focused on-site evaluation on one or more topics. An appropriate decision-making body, or Commission staff where allowed by Commission policy, shall determine whether the monitoring is appropriate for the institution, and, if so, shall act to approve such monitoring.

For an institution that is being considered for initial accreditation, such monitoring shall be appropriate in conjunction with the grant of initial accreditation only when the monitoring is with regard to a discrete issue and does not call into the question the institution's compliance with the Criteria for Accreditation, in which case the institution will not be granted initial accreditation.

Interim Reports. An institution shall submit a required interim report according to the due date established in the action calling for the interim report. Staff will review and prepare a written analysis of all reports and may act on behalf of the Commission to accept the report or require additional reports on the same or related topic or may recommend to the Commission's decision-making bodies that further monitoring, including new interim reports or focused visits, as appropriate to the institution's Pathway assignment, be required on the same topics identified in the action or on other topics.

Focused Visits. An institution on the Standard or AQIP Pathway shall host a focused visit according to the date established in the action calling for the focused visit. The institution shall submit a focused report to the Commission prior to the evaluation on the topics identified in that action prior to the focused visit. Commission staff may expand the focus of the evaluation where appropriate to review additional topics of concern to the Commission. The focused visit shall be conducted by a team of Commission Peer Reviewers appointed by Commission staff. The length of the focused

visit shall be one and one-half days, but the Commission may lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

The focused visit team will prepare a written report addressing the topics of concern identified in the action calling for the focused visit and any areas of concern raised by Commission staff and identifying deficiencies, if any, at the institution. The focused visit team report shall include a recommendation for Commission action either accepting the institution's focused report or calling for additional monitoring, sanction or withdrawal of accreditation. The institution shall have the opportunity to file a written response to the focused visit report prior to a decision-making body acting on the report. Focused visit reports will be considered through the Commission's regular review and decision-making processes.

Data Reporting From Affiliated Institutions

All affiliated institutions will complete data reports for the Commission; such reporting will occur annually as well as periodically. The Commission, with oversight as appropriate from the Board of Trustees, will determine the contents of this reporting to assure that it addresses potential or developing problems with an institution's compliance with accrediting requirements and institutional stability, as well as solicits updated information on the scope of activities of each affiliated institution. Data required from each institution will include, at minimum, annual financial information, headcount and enrollment, measures related to student achievement, and other indicators. The data reporting will provide the Commission with sufficient information to understand and respond to significant shifts in an institution's capacity and/or scope of educational activities.

Institutional Contact for Data Reporting

To assure that the organization provides accurate and consistent information, each affiliated organization identifies a liaison who will bear administrative responsibility for submitting the report in a timely manner. Commission training will be available for those liaisons.

Commission Follow-Up to Institutional Data

In reviewing and analyzing institutional data, the Commission will look at relationships among a variety of indicators and other information in any given year or over several years. If those relationships suggest that the organization may be experiencing problems or very rapid change, the Commission will ask the organization to submit an explanation of the data. In particular, the Commission will ask institutions that were identified through review of information about student achievement for more information about student academic achievement at those institutions. The Commission staff may forward data, and any explanation or other information provided by the institution, to a Financial or Non-Financial Panel for further review. If non-financial data, particularly enrollment information, and any other information submitted by the institution, are indicative of problems, rapid change, significant growth, or require validation, the Commission staff may call for an on-site evaluation as soon as possible; require that an institution address concerns arising from these data in the next evaluation process; or recommend to the Institutional Actions Council additional institutional monitoring through any process provided for in Commission policy and procedure.

Monitoring of Student Enrollment Growth

The Commission will monitor enrollment growth through institutional annual data reporting and will monitor on an ongoing basis growth in enrollment and programs at those institutions that have significant enrollment growth as defined in Commission procedures. The Commission will ask institutions that have been identified through the annual data reporting process as having significant enrollment growth to provide information about enrollment growth at the program level. The Commission may take follow-up action.

Surveying of Students

The Commission may survey students of an institution to gather information about their experience at the institution prior to a site visit at the institution scheduled by the Commission. The Commission will provide aggregate data resulting from the survey to the institution under review and the evaluation team prior to the visit. The institution will have an opportunity to provide additional information or other data in response to the student survey data to the evaluation team and the Commission prior to the visit.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 10: Routine Monitoring

Last Revised: June 2014
First Adopted: November 1999, February 2003, February 2007
Revision History: February 2001, February 2007, February 2009, February 2010, November 2010, June 2012, November 2012, April 2013, February 2014, June 2014
Notes: Policies combined November 2012 – 3.6, 3.6(a), 1.3, 1.3(a), 1.3(b), 1.3(c)
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Special Monitoring

Number: INST.F.20.010

The Commission reserves the right to call for special monitoring when the integrity of the institution and its educational programs might be in jeopardy. The President may conduct such monitoring by calling for a special report or an advisory team visit. The President of the Commission shall determine whether the institutional liaison or other Commission staff member will accompany the Advisory Team Visit.

A special report or advisory team report, including any specified deficiencies identified by the team at the institution, will not be reviewed through the Commission's regular review processes; it may be used by the President to provide information, to support a recommendation by the President to the Commission's decision-making processes for a possible sanction or monitoring, or for any other purpose supported by the policies and practices of the Commission. The President may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process but provide particularized advice and assistance where appropriate to Commission staff or evaluation team members.

Any action proposed by the President will be shared with the institution for response at least two weeks prior to the intended date of deliberation and decision. Among the situations that might result in such monitoring are:

1. institutional declaration of bankruptcy, financial exigency, or intent to close;
2. highly publicized and divisive controversies among the governing board, the administration, and/or the faculty or the student body;
3. significant unanticipated reduction in program offering, faculty, and/or enrollment;
4. public sanctions applied by governmental agencies or by other accrediting or licensing bodies;
5. serious legal, financial, or ethical investigations, including those involving adjudication in courts;
6. financial audit reports that raise serious concerns about financial viability or financial management practices;
7. serious misrepresentation to students and the public.

Presidential Recommendation

The Commission's President shall have the authority to take a recommendation to the appropriate Commission decision-making body to require regular monitoring, a sanction, or withdrawal of accreditation for an institution, subject to Commission policy and procedures related to those actions.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

Last Revised: November 2012
First Adopted: November 1999
Revision History: February 2001, February 2007, June 2012, November 2012
Notes: Former policy number 3.6(b), 3.6(c)
Related Policies: COMM.B.10.010 Staff Role and Responsibility

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Financial Panels

Number: INST.F.20.020

The purpose of a Financial Panel is to review institutions' financial indicators based on their annual submission of financial ratios. The Financial Panel may request additional documentation from institutions for review when appropriate. The Panel may request that institutions address financial and related concerns in their next Self-Study and visit process. The Panel may recommend for action by the Institutional Actions Council additional institutional monitoring through any process provided for in Commission policy and procedure.

A Financial Panel is comprised of two or more financial professionals selected by the staff from the Peer Review Corps or from member institutions. The Panel may conduct its review of actions in a scheduled meeting or by any means that allows for synchronous or asynchronous communication.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

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Notes: Policies combined November 2012 – 2.2(e), 2.2(e)1
Related Policies: INST.F.10.010 Routine Monitoring

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Non-Substantive Changes in the Accreditation Relationship Between an Institution and the Commission

Number: INST.F.20.030

The Commission may request or Commission staff may initiate non-substantive changes in the terms of the Commission's relationship with the institution as outlined in the Statement of Affiliation Status. Commission approval is required to change the terms of the accreditation relationship with an institution in any of the following ways:

1. Change existing stipulations or other language, not related to monitoring or the next comprehensive evaluation, within the institution's current Statement of Affiliation Status. (Commission staff may approve editing of the Statement of Affiliation Status. However, requests for substantive modification, including new language not previously in the document, must be referred to the Institutional Actions Council for action.)
2. Change the date of the next comprehensive evaluation or Assurance review:
    - Changes of no more than one year from the date set by the last action following an evaluation process. (Commission staff may approve the change unless the one year extension places an institution's comprehensive evaluation beyond the ten years required by Commission policy.
    - Changes of more than one year from the date set by the last action following an evaluation process or beyond the ten year maximum for comprehensive evaluations. Extensions of more than one year and extensions beyond ten years may be granted only for good cause. (Institutional Actions Council must act to approve all such changes.)
3. Change the date of other visits or required reports or other Commission monitoring or interaction previously scheduled for the institution, including accepting required progress or monitoring reports or scheduling follow-up reports on the same or related topics. (Commission staff may approve the change).
4. Require new monitoring be added to the Statement of Affiliation Status. (Commission staff may make a recommendation for action to the Institutional Actions Council to approve the change.)
5. Remove an institution from an expedited review process for approval of new additional locations. (Commission staff may approve removal.)

Process for Initiating a Non-Substantive Change in the Relationship with the Commission

The institution may file a written application seeking a change in its relationship with the Commission in any of the ways defined above. Alternatively, Commission staff may propose such a change and will provide the proposed action or recommendation in writing to the institution for comment. The institution will be provided an opportunity to respond in writing to any change in relationship with the Commission arising from its own application or at the initiative of the Commission. The Commission will consider the institution's response prior to completing any staff action or action by the IAC.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

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Notes: Policies combined November 2012 – 3.1, 3.1(a)
Related Policies: INST.B.20.030 Accreditation

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Institutional Change

Number: INST.F.20.040

An institution shall have the obligation to report institutional changes to the Commission as identified in this policy and related policies and to seek and receive Commission approval where appropriate prior to implementing specific changes.

The institution shall use the Commission's change reporting protocol for this purpose. Changes identified as requiring prior Commission approval prior to implementation shall be included in the institution's accreditation only after the Commission has reviewed the change through a process identified in this policy and formally acted to approve the change. Changes identified as requiring Commission notification are included in the institution's accreditation provided that the institution provides timely notification to the Commission through the Institutional Update and other data reporting instruments established by the Commission according to a schedule established by the Commission. However, institutions that have access to the Notification Program for Additional Locations must notify the Commission and receive acknowledgment prior to initiating the Additional Location.

Institutional Change Requiring Notification or Approval

1. Changes in actual or apparent mission of the institution or its educational objectives require prior COMMISSION APPROVAL.
2. Significant changes in the character or nature of the student body of the institution, particularly, but not limited to, those changes involved in seeking international students for the first time or acquiring students being taught-out of programs provided by a closing institution require prior COMMISSION APPROVAL.
3. Initiation of new academic program(s) or major(s) other than those listed below, or cancellation or suspension of academic programs requires COMMISSION NOTIFICATION. The following changes require prior COMMISSION APPROVAL:

    - The addition of academic program(s) at a degree or credential level not previously included in the institution's accreditation by the Commission;
    - the addition of academic program(s), including Title IV-eligible Certificate programs not related to existing degree programs, that represent a *significant departure* from programs previously included in the institution's accreditation;
    - the addition of academic programs that require allocation of substantial financial investment or resources, or any programs acquired from another institution;
    - the addition of academic programs outside stipulations imposed by a previous Commission action limiting such activity without prior approval.

4. A change in one or more of the following requires NOTIFICATION OR APPROVAL:

    - change from clock to credit hours in one or more institutional programs;
    - substantial increase or decrease in the number of clock or credit hours required for successful completion of an academic program;
    - change in term length (e.g. semesters to quarters or semesters to a five-week compressed term) that affects 25% or more of all the institution's courses or programs; and
    - increase or decrease in the number of credit hours per course in 25% or more of the courses in the institution's curriculum.

5. Change in the method of delivery of courses or programs requires prior COMMISSION APPROVAL:

    - The initial offering of academic programs through distance, correspondence or other alternate delivery wherein 50% or more of the courses or credits in the program are provided through the alternate delivery;
    - The initial offering of courses through distance, correspondence or other alternate delivery if the institution is not already approved to offer programs through that delivery mechanism; and
    - Programs offered for the first time by an institution are subject to review and approval, if required, by the Commission as a new program (see #3 of this section) prior to being reviewed as distance or correspondence education.

6. The establishment of a campus or an additional location requires prior COMMISSION APPROVAL unless the institution has been approved for access to the Notification Program for Additional Locations as outlined in INST.F.20.050.
7. The acquisition of a campus or an additional location from another institution, including one established or acquired in order to provide for teach-out of the students from another institution, requires prior COMMISSION APPROVAL unless the institution has been approved for access to the Notification Program for Additional Locations as outlined in INST.F.20.050.
8. Closure or suspension for more than one semester of any of the following requires COMMISSION NOTIFICATION: 1) a course location outside the state of the institution's main campus at which an institution offers five or more courses per year, 2) an additional location, or 3) a campus.
9. The establishment of a course location at either an international location or at a location outside the institution's home state at which the institution offers five or more courses per year requires prior COMMISSION NOTIFICATION.
10. The initiation of a contractual or other arrangement wherein an institution outsources some portion of one or more of its educational programs to any of the following parties: an unaccredited institution; an institution that is not accredited by an accreditor recognized by the U.S. Department of Education; or a corporation or other entity:

    - less than 25% of any educational program outsourced to the other party requires COMMISSION NOTIFICATION;
    - 25%-50% of any educational program outsourced to the other party requires prior COMMISSION APPROVAL;

- more than 50% of any educational program outsourced to the other party will receive intense scrutiny and will not be approved by the Commission except in exceptional circumstances. (Note that 34 CFR 668.5(3)(ii)(A) provides that educational programs provided through contractual arrangements between an accredited institution and an ineligible entity wherein more than 50% of the educational program is being provided by the ineligible entity will not receive Title IV assistance even if approved by the accreditor.)

11. The initiation of a consortial or other arrangement wherein a consortium of institution(s) accredited by an accreditor recognized by the U.S. Department of Education[1] provides a significant portion of the academic program:

    - 25-50% of one or more of the institution's educational programs provided by the consortium or other accredited institution requires COMMISSION NOTIFICATION;
    - more than 50% of one or more of the institution's educational programs provided by the consortium or other accredited institution requires prior COMMISSION APPROVAL.

[1]The accreditor must be recognized by the U.S. Department of Education as an institutional accreditor whose scope of recognition includes the accreditation of degree-granting institutions.

Approval of Substantive Change

An institution requesting prior approval of a substantive change shall present appropriate application information seeking approval of change according to the Commission's change review protocol. Generally, such materials shall be reviewed by the Commission according to the provisions of this section; however, certain types of change may require additional review provisions as provided herein. With the exception of changes submitted under INST.F.20.030 Non-Substantive Changes in the Accreditation Relationship Between an Institution and the Commission - Notification, the process will result in formal approval of all substantive changes by a Commission decision-making body effective on or after the date of the action of that body. In no case will such approval be retroactive.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

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Related Policies: INST.B.20.040 Change of Control, Structure, or Organization, FDCR.B.10.010 Commission Approval of Institutional Teach-Out Arrangements, INST.F.20.030 Non-Substantive Changes in the Accreditation Relationship Between an Institution and the Commission

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Review of Institutional Change

Number: INST.F.20.050

The review process for requests for changes in educational programs and/or method of delivery shall be determined in the following two ways: (1) each affiliated institution shall be assigned a designation by the Commission according to its experience and maturity in offering new educational programs and new methods of delivery, including offering distance and correspondence education; (2) the Commission shall determine the complexity of the specific proposed changes being requested for approval.

As determined by the designation of the institution and the complexity of the change, the change request will be reviewed by one of the following: a Change Panel; a Change Visit to the institution; or a Desk Review. All such change requests will be presented for final review and approval by a Commission decision-making body.

Review of a Campus. Institutions seeking Commission approval of a campus or branch that houses a full range of instruction as well as administrative and support services shall provide a business plan for the new campus that specifies the following:

1. the educational programs to be offered at the campus;
2. the projected revenues, expenditures and cash flow at the campus; and
3. the operational, management, and physical resources at the campus.

The specific change will be reviewed by an appropriate Substantive Change Panel composed of Commission peer reviewers. All such changes will be presented for final review and approval by a Commission decision-making body.

Within six months of the date the campus matriculates students and offers instruction, the Commission will conduct a campus visit.

Review of Additional Locations. The review process for additional locations offering 50% or more of an academic program shall be determined in the following two ways: (1) each affiliated institution shall be assigned a designation by the Commission according to its experience and maturity in offering new additional locations; (2) the Commission shall determine the complexity of the specific proposed changes being requested for approval. Such review shall include consideration of the institution's fiscal and administrative capacity to operate that location. The only exception shall be for institutions approved for access to the expedited approval programs, Desk Review for Additional Locations and Notification Program for Additional Locations, as defined in this policy.

As determined by the designation of the institution and the complexity of the change, a change request will be reviewed through one of the following processes: a Change Panel; a Change Visit to the institution; or a Desk Review. All such change requests will be presented for final review and approval by a Commission decision-making body.

Within six months of the date an institution matriculates students and begins instruction at any of its first three new additional locations, the Commission will conduct an on-site evaluation visit to that additional location.

Expedited Approvals of Additional Locations: Notification Program for Additional Locations. Institutions that have previously received approval from the Commission to initiate at least three additional locations may seek access to the Notification Program for Additional Locations. Such access shall reflect the Commission's determination that the institution has a proven record of educational and administrative oversight of such locations and has the capacity to extend that oversight to new additional locations. An institution's request for initial access to the Notification Program will be granted only after the institution has been reviewed by a Change Visit or other review resulting in a written report that documents the institution's compliance with appropriate requirements as outlined in this policy. Staff may act to remove an institution temporarily or permanently from the Notification Program in the following circumstances: 1) when an institution's capacity to provide appropriate oversight over its existing or future additional locations has been called into question; 2) when it has been placed on sanction or Show-Cause; or 3) when it has had its accreditation withdrawn even though such action may be stayed while pending appeal or other proceeding.

An institution with access to the Notification Program for Additional Locations will be able to open new additional locations as defined in the institution's Statement of Affiliation Status after notifying the Commission prior to initiating any new additional locations and receiving an acknowledgment that the Commission has added the new additional location to its database.

Access to the Notification Program for Additional Locations will be granted only to institutions that meet the following criteria:

1. accreditation by the Commission, prior to seeking access to the streamlined process, for at least 10 consecutive years with no record of any action during that period for Probation, Show-Cause, or monitoring of issues related to the quality of instruction or to the oversight of existing additional locations or campuses; 1.1. an institution that has been on Warning for issues unrelated to the quality of instruction or oversight of additional locations or campuses and was approved for the Notification program prior to being placed on Warning may seek readmission to the Notification program after the next comprehensive evaluation or after a period of four years, whichever is longer; if the Warning was related to the quality of the institution's off-campus instruction or related issues, the institution may not reapply until it has completed the ten years of good standing required for access to the Notification Program for Additional Locations.
2. demonstrated success in overseeing more than three locations;
3. no other Commission or other legal restrictions on additional locations and/or programs offered off campus; and
4. appropriate systems at the institution to ensure quality control of locations that include clearly identified academic controls; regular evaluation by the institution of its locations; a pattern of adequate faculty, facilities, resources, and academic/support systems; financial stability; and long-range planning for future expansion.

Continued institutional eligibility for access to the Notification Program for Additional Locations will be reviewed at least every five years, typically in conjunction with the comprehensive evaluation and the multi-location visit.

An institution with access to the Notification Program for Additional Locations that undergoes a Change of Control, Structure or Organization as defined in Commission policy INST.B.20.040 will no longer be eligible for such review

until such time as it demonstrates at the time of the next comprehensive evaluation after the transaction is approved by the Commission that it continues to meet the requirements for inclusion in the program.

Approval of Other Substantive Changes. The specific change requested by the institution will be reviewed by an appropriate Desk Review, Change Panel or by a Change Visit at the institution, as determined by Commission staff. All such changes will be presented for final review and approval by a Commission decision-making body.

Substantive Change Review Process Structure

Commission Change Panel. A Commission Change Panel shall consist of three or more Commission Peer Reviewers designated by the Commission who shall review applications for approval of substantive change submitted by institutions.

The Change Panel may seek additional information from the institution if such information is being sought to explain or clarify the materials provided by the institution in its application for change.

The Change Panel may recommend that the change be denied or that it be approved with or without additional monitoring as appropriate. Such recommendation will then be forwarded to an appropriate Commission decision-making body. The institution shall be given an opportunity to review the recommendation and provide an institutional response prior to consideration of the recommendation by the decision-making body.

Alternatively, the Change Panel may recommend that the change be further evaluated by an on-site evaluation team, either by a Change Visit or by a previously scheduled focused or comprehensive evaluation. The Change Panel may seek additional information from the institution if such information is being sought to explain or clarify the materials provided by the institution in its application for change.

Commission Change Visit. A Change Visit shall consist of a team of two or more Commission peer reviewers designated by the Commission who shall review applications for approval of substantive change submitted by institutions.

The Change Visit team may recommend that the change be approved, approved subject to additional monitoring, or denied. Such a recommendation will then be forwarded to an appropriate Commission decision-making body. The institution shall be given an opportunity to review the recommendation and provide an institutional response prior to consideration by the decision-making body.

Commission Desk Review. A Commission Desk Review shall consist of a review of a proposed institutional change conducted by an individual Commission official. The Desk Review will result in a recommendation for approval of substantive change to an appropriate Commission decision-making body.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

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Related Policies: INST.B.20.030 Accreditation

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Monitoring of Institutional Change

Number: INST.F.20.060

The Commission may monitor any approved institutional change through required progress or monitoring reports or on-site evaluations and shall monitor specific changes.

Campus Evaluation Visit. The Commission will conduct an on-site evaluation visit to a new campus or branch within six months of matriculation of students and initiation of instruction at such campus. The visit shall be conducted by Commission peer reviewers and shall be handled according to the procedure for a focused evaluation.

Additional Location Confirmation Visit. The Commission will conduct an on-site visit of each of the first three additional locations begun by an institution within six months of matriculation of students and initiation of instruction at the additional location. The visit may be conducted by Commission peer reviewers or Commission staff and will be to confirm the accuracy of the information provided to the Commission concerning the quality and oversight of the education at the additional location when it was originally approved by the Commission. Commission site visitors may call for further monitoring of an institution's additional locations through the Commission's established monitoring processes. Such recommendations for further monitoring will be reviewed and acted upon by a Commission decision-making body.

Multi-Location Evaluation Visit. The Commission will conduct an on-site visit to additional locations of an institution with multiple off-campus additional locations (more than three such locations) every five years. The visit shall take place to a sample of such locations as defined in Commission procedure. The visit may be scheduled proximate to an on-site evaluation, an Assurance Review, comprehensive evaluation, or Comprehensive Quality Review, where appropriate to inform that team's evaluation. The visit may be made by Commission peer reviewers or Commission staff and will be to confirm the continuing effective oversight by the institution of its additional locations. Commission site visitors may call for further monitoring of an institution's additional locations through the Commission's established monitoring processes.

If an institution is part of the Notification program for new additional locations, the visit will consider whether the institution continues to meet the requirements for access to the program outlined in the policy and will make a recommendation for the institution's continued participation in that program. Such recommendations will be reviewed and acted upon by a Commission decision-making body.

Other Monitoring Related to Additional Locations. The Commission will require a Change Visit before extending accreditation to include a new additional location for an institution under Commission sanction, an institution experiencing serious financial problems, or where the Commission has raised questions about the institution's quality assurance processes in its off-campus operations. The Commission will also monitor institutions experiencing rapid growth of additional locations through either an on-site focused visit or through other forms of monitoring.

Other Monitoring Related to Institutional Change. The Commission reserves the right to initiate monitoring related to any institutional change it has previously approved if it has questions about the quality of that change in its execution or the institution is experiencing rapid growth in some aspect of the institution's operations related to the approved change.

Cumulative Substantive Changes that Result in a Comprehensive Evaluation. The Commission reserves the right to call for a comprehensive evaluation when changes made or proposed by an institution are so extensive that they call into question whether they fundamentally alter the nature or character of the institution the Commission accredited at the time of the institution's last comprehensive evaluation. These changes include, but are not limited to, the any or all of the following:

1. extensive numbers of new or revised academic programs;
2. extensive numbers of new campuses or additional locations;
3. significant new populations of students;
4. new delivery formats including distance, correspondence, compressed, or other formats;
5. frequent significant modifications to corporate or governance structures;
6. involvement of the institution in one or more joint ventures, limited partnerships or other arrangements that may affect its academic programs, services, students, or governance structure.

Policy Number Key

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Part 20: Intermittent Monitoring

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Related Policies: INST.B.20.030 Accreditation

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Processes for Seeking Approval of Change of Control

Number: INST.F.20.070

The Commission's Board will make all decisions regarding approval of transactions under this policy taking into consideration the summary report made by Commission staff. Commission staff may seek external assistance from peer reviewers or individuals with appropriate expertise or may require an immediate on-site Fact-Finding Review to gather information about the proposed CHANGE OF CONTROL, STRUCTURE, OR ORGANIZATION in making a summary report to the Board. The summary report may contain a recommendation regarding approval of the transaction made by the institution's Commission staff liaison or by the Commission staff. Commission staff will provide the institution with a copy of the staff summary report, including the staff recommendation, if any, being provided to the Board and allow the institution 14 calendar days to prepare a response to that summary report; that response will be shared with the Board prior to its decision.

The Board may act in agreement with any recommendation put forward by Commission staff or the Board may develop and act on its own recommendation. The Board may elect to provide the institution with thirty days to respond to any recommendation before the Board takes final action.

The Board may approve the change, thereby authorizing accreditation for the institution subsequent to the close of the transaction, or it may deny approval for the change. The Board may defer its consideration of the proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION to the next public Board meeting date pending receipt of additional information or action by a third party such as the state or another recognized accreditor. The Board may make use of OTHER OPTIONS identified in this section.

The Board may approve the change subject to certain conditions. Such conditions may include, but are not limited to, limitations on new educational programs, student enrollment growth, development of new campuses or sites, etc. Related to these conditions, the Board may require that it review and approve certain changes at the institution prior to their inception. The institution and other parties involved in the transaction have 14 calendar days after receiving the Board's action letter to indicate in writing the acceptance of these conditions. If the institution and the other parties do not respond in writing or decline to accept the conditions, the Board may immediately act to rescind its approval. The parties to the CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION may not act to close the transaction until accepting in writing the Board's conditions, if any.

The Board reserves the right to delegate to a Board subcommittee the review, prior to the decision by the full Board, of changes proposed under this policy and that subcommittee may make a recommendation to the full Board regarding the decision on the proposed transaction.

If the Board votes to approve the change with or without conditions, thereby authorizing accreditation for the institution subsequent to the close of the transaction, the Commission will conduct a focused or other evaluation to the institution within six months of the consummation of the transaction. A previously-scheduled comprehensive or focused evaluation may fulfill this task provided that it is scheduled, or can be rescheduled, within the six-month timeframe. The Board's action to approve a Change of Control, Structure or Organization may designate an effective date of approval provided that such date will be not later than 30 days from the date of the action. If the institution does not effect the transaction within this 30 day period, the institution must notify the Commission and seek a revised effective date, which may involve providing additional information to the Commission and another action by the Board of Trustees.

Approval Factors

The Board will consider the following factors in determining whether to approve the transaction: 1) the extension of the mission, educational programs, student body and faculty that were in place when the Commission last conducted an on-site evaluation of the affiliated institution; 2) the on-going continuation and maintenance of the institution historically affiliated with the Commission with regard to its mission, objectives, outreach, scope, structure, and related factors; 3) substantial likelihood that the institution, including the revised governance and management structure of the institution, will continue to meet the Commission's Eligibility Requirements, and Criteria for Accreditation; 4) sufficiency of financial support for the transaction; and 5) previous experience in higher education and accreditation, qualifications, and resources of new owners, Board members or other individuals who play a key role in the institution or related entities subsequent to the transaction. If the Board determines in its sole discretion that the institution or the transaction fails to meet any of the approval factors, the Board will not approve the proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION. The Board may also renew the institution's eligibility for its existing pathways assignment or place the institution on a different pathway.

Other Board Options

The Board may act, prior to approving the proposed CHANGE OF CONTROL, to require additional review through the Eligibility Process or through a Fact-Finding Review, which may be an additional such Review, conducted by peer reviewers or by other higher education, legal or accounting professionals regarding whether the proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION constitutes the creation of a new institution such that it should be required to go through a period of time in candidacy or an initial status evaluation. The review shall be conducted within sixty days of the Board's action requiring such review, and the results shall be available to the Board at its next regularly scheduled or special meeting. The institution will have seven working days to respond to the report prepared for the Board prior to the Board's meeting.

Any candidacy required by the Board under this section shall be known as a Change of Control Candidacy. The effective date of the Change of Control Candidacy shall be the closing date of the transaction. The Board shall establish the minimum and maximum length of the candidacy but not to exceed the maximum length of time for candidacy as identified in these policies, as well as the schedule of evaluations during the candidacy period.

Evaluation Visits Related to Change of Control, Structure, or Organization

Fact-Finding Review. Commission staff may call for a Fact-Finding Review prior to making a summary report to the Board regarding a proposed CHANGE OF CONTROL, STRUCTURE, OR ORGANIZATION. The role of the Fact-Finding Review will be to gather information and advise staff regarding the summary report to the Board. The Fact-Finding Review Team will not prepare a formal team report but may prepare a written summary of activities and

findings. A Fact-Finding Review may take place on-site at the institution or at any other location appropriate to its activities.

In addition, the Board may call for a special Fact-Finding Review to determine, in certain cases, whether a proposed CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION may constitute the creation of a new institution. This review may take place through the Commission's Eligibility Process or through other mechanism as defined by the Board. This review may result in a recommendation that the Board approve a transaction subject to the institution's acceptance of a period of time as a candidate for accreditation.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

Last Revised: June 2015
First Adopted: June 2009, June 2012, June 2015
Revision History: February 2010, February 2012, June 2012
Notes: Policies combined November 2012 – 3.3(c), 3.3(c)1, 3.3(c)2, 3.3(c)3, 3.3(d), 3.3(d)1
Related Policies: INST.B.10.030 Related Entities, INST.B.20.040 Change of Control, Structure, or Organization

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Monitoring Related to Change of Control, Structure, or Organization

Number: INST.F.20.080

Focused or Other Evaluation After the Transaction (Post-Transaction Visit). The focused or other evaluation subsequent to the consummation of the transaction will be conducted according to the Commission's procedure for focused or other evaluations. The evaluation will review the appropriateness of the approval of the change as well as whether the institution met any commitments made to the Commission prior to that approval. The evaluation team will also document that the institution continues to meet the Eligibility Requirements and Criteria for Accreditation or candidacy requirements, as applicable. The team may recommend further Commission monitoring, rescheduling of the next comprehensive evaluation, or Commission sanctions or withdrawal of status. If the institution had been accredited by the Commission prior to the transaction, and the team determines that the institution continues to meet the Eligibility Requirements but not the Criteria for Accreditation and otherwise meets the requirements of the candidacy program, the team may recommend that the institution be continued in status only as a candidate for accreditation. Recommendations for withdrawal, sanction or candidate status will be reviewed by a Review Committee and decided by the Commission's Board of Trustees in keeping with Commission policy.

Comprehensive Evaluation After the Post-Transaction Visit. The next comprehensive evaluation shall take place no later than five years after the Post-Transaction Visit and shall assess whether the institution under new control continues to meet the Criteria for Accreditation and bears a substantial relationship to the institution accredited by the Commission prior to the transaction.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

Last Revised: June 2012
First Adopted: June 2009
Revision History: February 2010, February 2012, June 2012
Notes: Policies combined November 2012 – 3.3(d)2, 3.3(d)3, 3.3(g)
Related Policies: INST.B.10.030 Related Entities, INST.B.20.040 Change of Control, Structure, or Organization

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Processes for Including a Component within or Removing a Component from the Affiliation of the Institution

Number: INST.F.20.090

At the time the institution files with the Eligibility Process, the Commission will review the status of all components of the institution to determine whether the institution seeking affiliation constitutes a single entity for the purpose of accreditation based on the characteristics identified in this policy.

An affiliated institution developing a new component(s) must file a change request under Commission policy INST.F.20.040 Institutional Change. As a part of the review under Commission policy the Commission will review the appropriateness of inclusion of the proposed component in accreditation of the institution using the characteristics cited above.

An affiliated institution seeking to have an existing entity that is not currently included as a component in the institution's status deemed a component of the institution must file a change request under Commission policy INST.B.20.040 Change of Control, Structure, or Organization. As a part of the review under Commission policy INST.B.20.040 the Commission will review the appropriateness of inclusion of the proposed component in the accreditation of the institution using the characteristics cited above.

Process for Commission Consideration of Separate Status for a Component

A component of an institution holding status with the Commission that is seeking separate status from the Commission, or from another recognized accrediting agency, must establish that it meets the separately accreditable characteristics outlined in this policy and, if it is seeking status with this Commission, its eligibility through the Commission's Eligibility Process. For those components seeking status from the Commission, if the Eligibility Panel determines that the component is separately accreditable and appears to meet the Eligibility Requirements, the Commission will set a visit for initial status for the component. For those components seeking status from another recognized accreditor, the Commission will make a recommendation to the host agency that it allow the component to begin its process for separate accreditation after a showing by the component and the accredited institution to the Commission that the component may be separated from the parent for the purpose of accreditation.

Institutions with Components in the Region

For institutions operating solely within the North Central Region, the Commission will follow the process outlined in INST.F.20.090 after the component seeking separate status contacts Commission staff.

Institutions with Components Out of the Region

Jointly adopted with Council on Regional Accrediting Agencies

A component located in a region other than that of its home campus must seek separate accreditation in the region in which it exists if it functions independent of operational control of the parent college or university. A component will be

deemed operationally independent and accreditable by the host region when it has the characteristics listed in INST.B.10.020.

Each regional commission will determine if any of its affiliated institutions have components that appear to be separately accreditable. Following consultation with the host commission and the institution, and upon learning from the host region the site's potential to meet its eligibility requirements, the home region will make the determination as to the status of such sites that meet these requirements. The host region will agree to take deliberate steps toward reviewing any components identified as operationally independent in keeping with its policies and procedures for applying institutions. An institution identified as separately accreditable will continue to be included in the accreditation of the parent college or university until it achieves separate accreditation.

When required by the U.S. Department of Education, the Commission will continue to include in its accreditation of an institution components deemed separately accreditable and accredited by another host agency. The Commission will maintain this arrangement under a Memorandum of Understanding with the host agency that makes clear that the Commission remains responsible for the accreditation of the entire institution, including separately accreditable components accredited by another agency, under its Title IV gatekeeping function.

Policy Number Key

Section INST: Institutional Policies
Chapter F: Maintenance and Monitoring
Part 20: Intermittent Monitoring

Last Revised: June 2009
First Adopted: June 2000
Revision History: June 2009
Notes: Policies combined November 2012 - 3.4(a)1, 3.4(b)1, 3.4(c), 3.4(c)1, 3.4(c)2
Related Policies: INST.F.20.040 Institutional Change, INST.B.20.040 Change of Control, Structure, or Organization, INST.B.10.020 Components of Accredited or Candidate Institutions

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Management of Commission Information

Number: INST.G.10.010

Defining and Establishing Ownership of Commission Information

The Commission shall have ownership of the following information:

1. Information created for the Commission by one of it consultants, evaluators, staff or other party in furtherance of a Commission process or review;
2. Information created for the Commission by institutions or submitted to the Commission by institutions in support of an application for new or continuing status, approval of substantive change or other Commission process or request for information;
3. Information collected or received by the Commission from other sources including peer reviewers; and
4. Any other information known by the Commission or otherwise collected or received in support of its mission and purposes.

Information referenced under this policy may exist in electronic, written or other format.

Commission Retention and Management of Information

The Commission shall have the right to retain and manage such information as appropriate to fulfill its mission and purposes. Such management will include organizing, digitizing, displaying and storing such information. The Commission shall adopt appropriate procedures governing the retention and management of information. These policies shall be applicable to the Commission and its staff as well as to any individual acting as a reviewer or decision-maker for the Commission. The Commission shall work with third-party agents or contractors to ensure that information retention and management is handled in observance of such procedures to the fullest extent possible within the terms of that relationship.

Commission Information on its Website

The Commission will provide information available to public on the Commission's website about the following: the Eligibility Requirements, Criteria for Accreditation, Assumed Practices, and Obligations of Affiliation; accreditation and candidacy status and related policies and procedures for achieving and maintaining such status; policies and procedures related to sanctions and withdrawal or denial of status; a directory of institutions that are affiliated with the Commission and the date of the next comprehensive evaluation and information related to Commission monitoring; where necessary, information correcting inaccurate claims made by affiliated, accredited or other institutions regarding their accreditation status with the Commission or results of a recent evaluation visit or accrediting action taken by the Commission; and information about the members of the Commission's decision-making bodies, institutional liaisons and other principal Commission staff.

Commission Correction of Institutional Information. If an institution accredited by, in candidacy status with, or applying for such status with the Commission inaccurately discloses its accreditation status, an action by the Commission, or the contents of a Commission evaluation report, the Commission will provide for public correction of that information. It will provide this correction through its website or through release of a public statement or Public Disclosure Notice. It will also act through appropriate policies to enforce its Obligations of Affiliation with any accredited or affiliated institution, if any Obligation has been violated by this inaccurate disclosure.

Commission Release of Information

The Commission shall release Commission information in compliance with the following policies:

Institutional File Information. The Commission shall release information about an affiliated institution in response to a request by the following:

1. the President or Chief Executive Officer of that institution officially designated as such in the Commission's records;
2. an individual designated by the President or Chief Executive Officer to receive such information; or
3. a resolution from that institution's governing board signed by the current Chair of that board.

The Commission shall release information to any other individual or to a consultant or attorney representing the institution only when the Commission has received a written request from the President or CEO of the institution.

Peer Review Information. In preparation for Commission review the Commission may release information to institutions about peer reviewers including contact information, credentials and other information for the purpose of assuring that Commission processes are free of conflict of interest.

The Commission may provide oral or written comments or explanation in conjunction with the release of the above information and non-particularized information about Commission precedent.

Within Commission Processes or to External Agents of the Commission. The Commission may provide information as identified in this policy under Defining and Establishing the Ownership of Commission Information, to individuals acting as reviewers and decision-makers for the Commission within its processes. The Commission also may provide such information to Commission consultants or other individuals or entities retained by the Commission to provide assistance, expertise or other function in support of Commission processes. As a condition of a relationship with the Commission, all reviewers, decision-makers, and consultants shall agree in writing to maintain the confidentiality of such information.

Researchers. The Commission may provide its information to a researcher(s) who, in the sole discretion of the Commission, has appropriate academic credentials and who outlines an appropriate research project related to the work of the Commission. As a condition of any relationship with the Commission, all researchers must agree in writing to maintain the confidentiality of the information and to other terms as outlined in an appropriate agreement or contract.

Third Parties. The Commission shall release information about an institution or peer reviewer(s) or about Commission policies, procedures or activities in furtherance of its processes to, or in response to a written request form, the following entities:

1. The U.S. Department of Education or other federal agency with appropriate jurisdiction to request the information;

2. A validly-issued subpoena from a court of law with appropriate jurisdiction; and
3. Another recognized accrediting agency with which the institution(s) may have an affiliation or status or be seeking such affiliation or status;

The Commission may, at its sole discretion, release information to a state higher education or other governmental agency with appropriate jurisdiction.

The Commission may provide oral or written comments or explanation to such entities in conjunction with, or separate from, the release of such information.

Public. The Commission shall release the following information to the public and any other interested parties by means of its website, fax or other disclosure:

1. the name and contact information for any institution that holds, or has held, status with the Commission along with information about its campuses, additional locations and educational programs as well as any other data it regularly collects through its Institutional Update process;
2. the name and contact information of any institution scheduled for an evaluation for initial status;
3. the Statement of Accreditation Status for affiliated institutions;
4. Public Disclosure Notices and, when appropriate, certain other public statements made by the Commission;
5. action letters related to the granting, reaffirmation or withdrawal of candidate for accreditation or accreditation status; to the imposition or removal of a sanction or show-cause order; and to the outcome of an advisory visit.
6. summary of all Commission actions posted within 30 days of taking such action, including voluntary withdrawals and other information within 30 days of the Commission receiving such information;
7. the list of institutions being evaluated by the Commission for initial status, reaffirmation of accreditation, probation or show-cause in the upcoming academic year and the invitation for third-party comment about appropriate institutions;
8. the policies and procedures of the Commission and related information;
9. the results of aggregate data analyses and other information the Commission staff determine to be appropriate for public release;
10. the names of all active peer reviewers and other information including title and contact information in their organization; and
11. the names, internal contact and areas of responsibility for all staff members.

The Commission may provide oral or written comments or explanation of such information to the public.

Mailing or Address Lists for Marketing Purposes. The Commission shall not give or sell mailing lists of institutions or peer reviewers or similar information to any company, organization, institution, or individual for use in marketing or solicitation. However, the Commission may provide information about individuals who attend a conference or workshop to appropriate business partners. All such business partners must agree to provide appropriate mechanisms by which a recipient may decline to receive additional promotional material.

Other Commission Release of Information. The Commission may include Commission information in any submission it shall make on behalf of the Commission. Such submissions shall include, but are not limited to, Commission petitions for continued recognition from the U.S. Department of Education or the Council on Higher

Education Accreditation, or Commission petition or response in any lawsuit or action it initiates or which has been initiated by another party.

The Commission may release the team report or other documents to third parties or the public if the institution or one of its agents has released information or excerpts from documents created by or for the Commission in such a way that information from those documents, or information with regard to Commission status or findings, has been misrepresented.

The Commission may, at its sole discretion, release information about an institution publicly or to another entity if requested by that institution.

Policy Number Key

Section INST: Institutional Policies
Chapter G: Commission Information
Part 10: General

Last Revised: February 2013
First Adopted: February 2010
Revision History: November 2012, February 2013
Notes: Policies combined in November 2012 – 2.3, 2.3(a), 2.3(b), 2.3(b)1, 2.3(b)2, 2.3(b)3, 2.3(b)4, 2.3(b)5, 2.3(b)6, 2.3(b)7
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Official Records

Number: INST.G.10.020

The Commission will transmit all documents and communications to an affiliated or applying institution or to other parties through electronic means whenever possible. The Commission will expect that all affiliated and applying institutions receive Commission communications transmitted electronically and that such institutions submit all documents, including self-studies, and communications electronically whenever possible. When the Commission withdraws the accreditation of an institution or imposes a sanction, the Commission will ensure that the institution receives the letter conveying the action by also sending a certified copy.

When an institution submits correspondence or other documents in a non-electronic form, the Commission reserves the right to digitize the document, to archive the electronic representation thereof and treat that representation as the original, and to destroy the non-electronic submission. The Commission record will then consist of the electronic version.

Official Records of Commission Processes and Actions

While the various review processes allow for frequent, clear and open communication between the institution and the Commission, the record of official action will be the action letter signed by the President and accompanied by a newly-adopted Statement of Affiliation Status.

Official Action of the Commission

The official relationship between an affiliated institution and the Commission will be recorded in the action letter, which is accompanied by appropriate documents that summarize the accrediting relationship or identify relevant aspects of that relationship. Such documents typically include at minimum the Statement of Affiliation Status (SAS) and the Organization Profile (OP) or any other comparable document developed by the Commission to summarize officially the key components of the relationship and other information about the institution.

Statement of Affiliation Status

The Statement of Affiliation Status (SAS) provides official information regarding the conditions of the institution's accreditation with the Commission. Such information will include, but is not restricted to, the type of affiliation the institution has with the Commission; sanctions, if any, attendant to that status; the date of the institution's next comprehensive evaluation; and any monitoring the institution must undergo prior to that evaluation. Other information relevant to the facts of the institution's relationship with the Commission may be added.

The SAS is accompanied by the Organizational Profile (OP), a summary of data provided to the Commission by each affiliated institution. It is updated annually after the Commission receives the institution's annual data report and may be updated at the time of action by any Commission decision-making body or by Commission staff. The SAS and OP are public documents and are posted on the Commission's website.

Changes to the SAS. Staff may act on its own initiative or at the request of an institution to approve the following changes to the SAS: editing with non-substantive amendments; and changing the date of upcoming evaluations or filing of reports by no more than one year and not to exceed the maximum timeframe for evaluation visits provided in Commission policy.

Staff may recommend to the Institutional Actions Council for review and action on the staff's own initiative or at the request of an institution the following changes to the SAS: substantive amendments including modifications to the Stipulations section; and changing the date of upcoming evaluations or filing of reports by more than one year or beyond the maximum ten years required for a comprehensive evaluation.

Communication with the Institution

Through all accrediting processes, the Commission office will transmit its formal and official communications to an institution through the chief executive officer (CEO). A copy of the official action letter will also be provided to the chair of the institution's governing board. The Commission will also communicate with the individual identified by the institution as the Accreditation Liaison Officer. The responsibilities of the Accreditation Liaison Officer will be specified in Commission procedure.

Exit Session

An evaluation visit will normally conclude with a meeting between the evaluation team and the CEO of the institution. With the agreement of the team chair, the institution's CEO may invite other persons to attend the meeting. At this meeting the chairperson of the team will explain the next steps in the evaluation process, including identifying any additional information the team may need, and may orally summarize the team's preliminary findings. The team's oral summary of its preliminary findings may differ from the findings and recommendations provided in the draft or final written report. The oral summary is not a part of the official record of the evaluation and should not be relied on by the institution to make any public announcement regarding the outcome of the evaluation or to take other action.

Distribution of the Team Report

The final team report will be part of the official record of the evaluation. The staff will be responsible for submitting copies of it to the CEO of the institution who will be expected to distribute the report internally and to determine whether wider distribution of it is warranted. The staff will also forward copies of the report to persons designated by the Commission to participate in the various review processes.

Institutional Responses Within the Processes

The CEO of the institution is expected to file written responses to any of the following:

1. an evaluation team's report and recommendations;
2. a decision of a First Committee (Level 1) of the Institutional Actions Council calling for substantial modifications in the action;
3. a recommendation of a First Committee (Level 1) or Second Committee (Level 2) regarding initial status, sanction, denial or withdrawal of status;
4. desk review or panel recommendations;
5. staff recommendations or reports regarding Change of Control, Structure or Organization or changes in the institution's accredited relationship with the Commission as reflected in the Statement of Affiliation Status; or
6. a recommendation of the Commission President for sanction, denial or withdrawal of status.

The CEO shall submit the written response within two weeks of receipt of the final evaluation team report. The response shall be considered in the review processes prior to the final action, including adverse action, and becomes a part of the official record of the process.

The documents identified in this section constitute the official record of the Commission's interaction with an institution. These documents are: team reports, institutional responses, recommendations from a First Committee (Level 1) or Second Committee (Level 2) of the Institutional Actions Council, analyses of required reports and change requests, specific documents identified within the AQIP processes, and all official letters from the Commission detailing actions taken regarding the institution's relationship with the Commission. The participants in those processes will be identified in the documents.

Other documents, including those documents developed by the staff to assist in specific processes and information regarding oral interactions, will not, except for good and sufficient cause, be included in materials provided in future review processes and will not be considered to be part of the official record of the interaction.

Definition of Official Records of a Process

The documents identified in this section constitute the official record of the Commission's interaction with an institution. These documents are: institutional self-studies and other materials submitted in preparation for Commission review; other reports and change applications submitted by the institution; team or panel reports; institutional responses; recommendations from an Institutional Actions Council Hearing Committee; analyses of required reports and change requests; specific documents identified within the AQIP processes; and action letters and all other official letters from the Commission regarding the institution's relationship with the Commission. The participants in those processes will be identified in the documents. For institutions applying for accreditation or accredited within the past ten years official records will also include documents arising from the current or any previous Eligibility Process or candidacy involving the institution.

Other documents, including those documents developed by the staff to assist in specific processes and information regarding oral interactions, will not, except for good and sufficient cause, be included in materials provided in future review processes and will not be considered to be part of the official record of the interaction.

Retention of Official Records

Through its record retention program, the Commission will maintain the official records of accredited institutions for at least the last full ten-year accreditation cycle, and, of applying institutions, for the institutions' Eligibility Process and candidacy reviews.\

Policy Number Key

Section INST: Institutional Policies
Chapter G: Commission Information
Part 10: General

Last Revised: November 2012
First Adopted: February 2012, November 1998, February 2001, February 2007, November 1998, February 1996
Revision History: revised February 2002, February 2009, June 2011, November 2010, November 2012

Notes: Policies combined November 2012 - 2.4, 2.4(a), 2.4(b), 2.4(b)1, 2.4(c), 2.4(d), 2.4(e), 2.4(f), 2.4(g), 2.4(h), 2.4(i)
Related Policies: INST.B.30.040 Public Disclosure, INST.G.10.010 Management of Commission Information, INST.F.10.010 Routine Monitoring

HIGHER LEARNING COMMISSION

POLICY

Section Four: The Higher Learning Commission

Policy Title: Commission Public Notices and Statements

Number: COMM.A.10.010

Public Information about Regional Accreditation

The Commission will provide on its web site and in print publications information about the purposes of regional institutional accreditation, the processes used in it, and the appropriate interpretation and use of it by institutions, students, and the public.

Commission Public Notices and Statements

The Commission shall have the authority to make specific disclosures to the public regarding affiliated or applying institutions as outlined below. The Commission shall provide notification to the affected institution about the disclosure at or before, as determined by the Commission, it releases the information to the public.

Notification of Accrediting Actions. The Commission shall ensure that it properly notifies the public, state higher education agencies, the U.S. Department of Education, and accrediting agencies recognized by the U.S. Department of Education regarding the Commission's accrediting actions according to the following timetable:

1. with regard to an action to reaffirm or grant accreditation or initial candidacy or approve a substantive change or the results of monitoring, the Commission will provide notification of the action to all constituencies identified above within thirty days of the action;
2. with regard to an action to place an institution on notice or probation or to issue a show-cause order to an institution, the Commission will provide notification of the action to state higher education agencies, the U.S. Department of Education, and recognized accrediting agencies simultaneously with the action being communicated to the institution not later than thirty days after the action, and notification to the public within 24 hours of notice being provided to the institution;
3. with regard to an action to deny or withdraw accreditation or candidacy, the Commission will provide notification of the action to state higher education agencies, the U.S. Department of Education, and recognized accrediting agencies simultaneously with the action being communicated to the institution not later than thirty days after the action, and notification to the public within 24 hours of notice being provided to the institution;
4. with regard to a decision by an institution to resign voluntarily from accreditation or candidacy, the Commission will provide notification of the action all constituencies identified above within thirty days of notice of the resignation being provided to the Commission through a formal letter from the president of the institution conveyed to the Commission with the approval of the institution's governing board, as required by Commission policy on Termination of the Accreditation Relationship; and

5. with regard to an action to approve a teach-out plan, the Commission will provide notification to appropriate specialized and professional accrediting agencies of approval of the plan not later than thirty days after the action if the teach-out includes a program accredited by such agency.

Such notification shall take place for the public through the Commission's website and for the U.S. Department of Education, state higher education agencies, and accrediting agencies recognized by the U.S. Department of Education through electronic or other communication.

Adverse Actions, Sanctions, and Related Actions. The Commission will issue a Public Disclosure Notice (PDN) regarding the following actions:

1. Adverse action including denial or withdrawal of affiliation;
2. Sanction;
3. Show-cause;
4. Denial of change of control application.

The PDN shall contain information about the action, the findings of the Board associated with the action, and the availability of appeal. In the case of adverse actions of denial or withdrawal of affiliation or moving an institution from accredited to candidate status, the PDN also shall contain within sixty days of the action official comments of the affected institution, if any, or evidence that the affected institution was given an opportunity to provide official comment.

Other Situations. The Commission may issue a Public Disclosure Notice (PDN) in other circumstances including but not limited to the following:

1. High-profile controversy(ies) at affiliated or applying institution;
2. Lawsuit against, or other investigation by another entity of, an affiliated institution;
3. Scheduled Commission advisory visit to an affiliated institution;
4. Other situation at or concerning an institution that is related to the Commission's accrediting role.

The PDN shall contain information about the institution's history and relationship with the Commission and other appropriate information.

Public Statements. The Commission may issue a public statement in writing or orally to correct or confirm a media report, to respond to frequent inquiries from the public, or to address other matters.

Policy Number Key

Section COMM: Commission Policies
Chapter A: Commission Obligations to Institutions and the Public
Part 10: General

Last Revised: April 2013
First Adopted: August 1996, February 1996, June 2004

Revision History: February 1998, May 2002, October 2002, June 2008, February 2010, June 2012, November 2012, April 2013
Notes: Policies combined in November 2012 – 12.4, 2.3(c), 2.3(c)1, 2.3(c)2, 2.3(c)3
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Confidentiality of Information

Number: COMM.A.10.020

Except as defined under INST.G.10.010 Commission Release of Information and COMM.A.10.010 Commission Public Notices and Statements, the Commission will maintain the confidentiality of specific information provided to the Commission from institutions, peer reviewers and other entities. Such data include but are not limited to:

1. Information about the institution not available to the public through the institution's own program to share information and its reporting to the Federal Government (IPEDS);
2. Information the institution identifies prior to the Commission's evaluation as "proprietary" such as recruitment strategies including pricing policies, new strategic initiatives being considered or planned for, impending but not public changes in personnel, legal activities not yet part of the public record, planned acquisitions or mergers, courseware and software created by the institution for its own use;
3. Information provided in the institutional self study report or Assurance Filing and information made available in the resource room or electronically including such documents as personnel files, minutes of meetings, transcripts of grievances and hearings, management letters from external auditors, reports from internal and external quality assurance activities (i.e., reports from specialized accrediting agencies or program reviews);
4. Information identified explicitly by the institution as "Confidential";
5. In clinical settings, patient identity, history, and all other information related to the patient's involvement with the clinic;
6. Information shared orally during the on-site visit and any face-to-face hearings that might be part of the Commission's review processes.
7. Any other information of a particularly sensitive nature where the institution or a Peer Reviewer involved in an evaluation of an institution asks that the Commission handle the information confidentially.

Policy Number Key

Section COMM: Commission Policies

Chapter A: Commission Obligations to Institutions and the Public

Part 10: General

Last Revised: November 2012
First Adopted: August 1996, February 1996, June 2004
Revision History: February 1998, May 2002, October 2002, June 2008, February 2010, June 2012
Notes: Former policy number –2.3(d)
Related Policies

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Complaints and Other Information Regarding Affiliated Institutions

Policy: COMM.A.10.030

Scope. The Commission, aware of the value of information from the public, shall receive complaints against its affiliated institutions but pursue only those complaints that bear upon the institution's meeting of the Criteria for Accreditation. Because the complaint process is intended to pursue only those matters that suggest substantive non-compliance by institutions, the Commission shall expect individuals who have a personal dispute with an institution to use other internal and external grievance mechanisms, particularly the internal grievance procedures of the institution, to resolve the dispute. In no case will the Commission use the complaint process to seek redress or to fashion an individual remedy with an institution on behalf of a complainant.

Contents, Presentations, and Processing. The Commission will consider no complaint that concerns facts or circumstances that took place more than five years from the date the complaint was received by the Commission. All complaints must be in writing and signed by the complainant although the Commission may at its discretion consider other complaints where warranted subject to the requirements in Other Information (below). The Commission will acknowledge a complaint promptly and within thirty working days of receipt will advise the complainant whether or not the complaint warrants consideration by the Commission. If the Commission determines a complaint warrants further consideration, the Commission will give the institution named in the complaint an opportunity of 30 days to respond to the complaint or to a summary of the complaint if the complainant requests confidentiality of identity or documents, before the Commission completes its review and makes a decision regarding the complaint. The Commission may require that the institution file a follow-up report or, upon approval by the Institutional Actions Council, may schedule a focused evaluation to the institution regarding issues raised by the complaint. In addition, the Commission President may schedule the institution for Special Monitoring. Such follow-up review may lead to sanction or withdrawal of accreditation following Commission policies and procedures related to such actions.

The Commission reserves the right to reject any complaint that contains defamatory statements.

When the Commission receives a complaint(s) about an institution that has an impending site visit and that raises questions about the compliance of the institution with Commission requirements, it will forward the complaint(s), or a summary thereof, to the attention of the chair of the on-site team for consideration instead of, or in addition to, the any regular review the Commission might undertake regarding a complaint. The team will notify the Commission staff of its findings, either in the team report or in a separate memo.

Other Information. In addition to pursuing complaints, the Commission may initiate an inquiry in response to any information that gives reason to be concerned about the institution's meeting one or more of the Criteria for Accreditation.

Complaints Against the Commission. To be considered as a formal complaint against the Commission, a complaint must involve issues broader than concern about a specific institutional action or a specific on-site evaluation. The document must state clearly the nature of the complaint, and it must be signed. The President, on behalf of the Commission, shall respond to each complaint made against the Commission within 30 days; report regularly to the Executive Committee and the Board of Trustees on the nature and disposition of complaints; and compile annually a list, available to the public on request that summarizes the complaints and their dispositions. Upon advice of counsel, the Commission retains the right to withhold public disclosure of information if potential legal action is involved in the complaint.

Policy Number Key

Section COMM: Commission Policies
Chapter A: Commission Obligations to Institutions and the Public
Part 10: General

Last Revised: November 2012
First Adopted: August 1996, February 1996, June 2004
Revision History: February 1998, May 2002, October 2002, June 2008, February 2010, June 2012, November 2012
Notes: Policies combined in November 2012 – 13.1, 13.1(a), 13.1(b), 13.1(c), 13.2
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Staff Role and Responsibility

Number: COMM.B.10.010

The staff of the Commission shall be responsible to the President of the Commission, or to any intermediate supervisor who reports to the President, who in turn shall be responsible to the Board of Trustees. The staff shall assist institutions in the accreditation processes, implement Commission policy, and carry out other responsibilities given it by the President and by Commission policy but shall not serve as an advocate for any institution. The Commission staff shall have the discretion to establish and modify Commission procedures in keeping with the intention and spirit of Commission policy.

Institutional Liaison

A staff member of the Commission shall be assigned to each affiliated institution to serve as the primary liaison between the Commission and the institution, and to ensure that the institution receives effective service on behalf of the Commission.

Commission Staff on Evaluation Visits

The Commission staff liaison or other Commission staff member may accompany the evaluation team on certain visits. These visits include:

- Advisory Visits
- Visits for Removal of Sanction or Show-Cause
- Visits for Candidacy or initial accreditation

The President of the Commission shall determine whether the liaison or other Commission staff member will accompany a specific evaluation visit. The Commission President also has the discretion to determine that circumstances warrant having a Commission staff liaison or other Commission staff member accompany evaluation visits other than those visits expressly noted above.

The role of the Commission staff member accompanying an evaluation visit shall be (1) to support the team as needed with guidance on Commission policy and procedure; (2) to answer questions from the public or institutional representatives about Commission processes related to the visit; and (3) to observe the visit. When preparing to take action regarding the institution, the Board of Trustees or Institutional Actions Council may ask the Commission staff member to discuss the evaluation visit, but the staff member will not prepare a written report separate from the report prepared by the evaluation team.

In addition, Commission staff shall participate as a team member in any Fact-Finding Team related to Change of Control, Structure or Organization or in any on-site investigation of any serious complaint or legal, ethical or other related issue at an institution.

Staff Conflict of Interest

The President will remove any liaison activities with an institution from a member of the professional staff when it appears that a conflict of interest might be present. It shall be a matter of staff responsibility for staff to inform the President when a potential conflict of interest might exist. In determining conflict of interest, staff shall weigh such things as past attendance, previous and/or prospective employment, the status at an institution of close personal friends or family members, or the holding of privileged information not available to others involved in the evaluation process.

Policy Number Key

Section COMM: Commission Policies
Chapter B: Commission Staff
Part 10: General

Last Revised: November 2012
First Adopted: January 1983, November 1991
Revision History: November 2012
Notes: Policies combined in November 2012 – 14.1, 14.2, 15.1
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Staff Authority for Minor Changes Related to an Institution's Relationship with the Commission

Number: COMM.B.10.020

Commission staff may act to change an institution's Statement of Affiliation Status or recommend directly to the Institutional Actions Council that a change in the Statement of Affiliation Status be approved.

Staff may act to approve the following changes: editing of the Statement of Affiliation with non-substantive amendments; changing the date of upcoming evaluations or filing of reports by no more than one year and not to exceed the maximum timeframe for evaluation visits provided in Commission policy; approving progress and monitoring reports or requiring follow-up reports on the same or related topics; and removing an institution from notification for approval of additional locations.

Staff may recommend to the Institutional Actions Council for review and action the following: substantive amendments to the Statement of Affiliation Status including modifications to the Stipulations section; changing the date of upcoming evaluations or filing of reports by more than one year or beyond the maximum ten years required for a comprehensive evaluation; and new requirements for monitoring.

In addition, the President of the Commission may act to terminate, postpone or cancel a visit in extraordinary circumstances. The President may approve the presence of observers on an evaluation team or other Commission activity. The President may schedule Special Monitoring for an institution or make a recommendation to the Board for sanction or withdrawal of accreditation or to the Institutional Actions Council for monitoring following Commission policies for these actions.

Policy Number Key

Section COMM: Commission Policies
Chapter B: Commission Staff
Part 10: General

Last Revised: November 2012
First Adopted: June 2011
Revision History: November 2012
Notes: Former policy number 2.2(h)
Related Policies: INST.F.20.030 Non-Substantive Changes in the Accreditation Relationship Between an Institution and the Commission, INST.E.00.000 Sanctions, Adverse Actions, and Appeals

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Cooperative Review of Institutions Operating Across Regions

Number: COMM.C.10.010

To preserve the values and practices of peer review and regional accreditation, the Commission's evaluation of affiliated institutions that deliver education at a physical site(s) in another region(s) within the U.S. or its territories will be undertaken with the participation of the host regional accrediting commission(s). This will include the joint (home/host) evaluation of the off-campus sites in a host region against the accreditation standards of that region.

Procedures for the evaluation of colleges and universities operating interregionally will honor these basic principles:

1. The mission of the institution will be respected throughout the evaluation process.
2. The design and implementation of the strategy fashioned to evaluate its host region's instructional sites will be developed collaboratively by the participating regional commissions together with the affected institution.
3. The home region's evaluation processes will serve as the basis for the joint evaluations and the home region will take the leadership role in initiating and overseeing the process.
4. The home region will be solely responsible for final accrediting actions, but will respond to issues brought to its attention by the host commission as identified through its involvement in the institutional review.
5. Host commission participation in an interregional accrediting process shall not constitute accreditation of the institution by that commission.
6. When an institution moves instructional activities into another region the commission in the home region will consult with the host region and institution in determining whether the new activities are subject to review under the interregional accrediting process.
7. The host region retains the discretion to determine its involvement in the evaluation of institutions operating interregionally.

(In keeping with the agreement reached by the regional accrediting associations, the procedures for evaluating institutions operating at transregional sites will be revisited every three years.)

Process for Evaluating Institutions Operating Interregionally. As part of its review processes for each institution operating off-campus locations outside of the region, the Commission will determine which locations are to be visited. The Commission will then notify other regional accrediting commissions if a site review is scheduled in their region(s) as part of a substantive change or comprehensive review. For those locations to be visited in another region, the Commission will inform the host regional agency(ies) of such visit(s) and give the opportunity to include a representative on the visiting team to the sites within the host region. Such representatives will participate as members of the site team and will apply the Commission's standards and processes. Findings from the separate site visits will be incorporated into the institutional report as determined by the Commission.

Recognition of Institutions Operating Interregionally. Accreditation or candidacy granted by the Commission applies to all educational activities of the institution. Unless a unit is designated as separately accreditable (see the Policy on Separately Accreditable Institutions), the Commission is responsible for reviewing educational activities offered by institutions it accredits, including those offered in other regions (host regions).

If the state of incorporation and central operations of an institution are located in a region of another U.S. regional accreditor, then the accreditation decisions of that regional accreditor (the home region) that are related to the educational activities of that institution will be recognized and accepted by the Commission, including those decisions related to the educational activities of the institution in the North Central region.

Policy Number Key

Section COMM: Commission Policies
Chapter C: Relationships with External Agencies
Part 10: General

Last Revised: November 2012
First Adopted: January 1983, February 1986, June 2000
Revision History: February 1996, February 1998, June 2001, February 2008, June 2008, February 2009, June 2012
Notes: Policies combined in November 2012 – 3.13, 3.13(a), 3.13(b)
Related Policies

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Relation with Other Recognized Accrediting Agencies

Number: COMM.C.10.020

The Commission will base the grant or reaffirmation of accreditation on its own Criteria for Accreditation and processes and will evaluate the entire institution, but in granting or reaffirming status to an institution it will take into consideration actions, particularly but not exclusively adverse actions, sanctions, and show-cause orders, taken or issued by any recognized institutional, specialized or professional accrediting agency previously or currently associated with an institution.

Consideration for the Accreditation Decisions or Other Agencies. In determining whether an institution meets the Commission's Eligibility Requirements, Criteria for Accreditation and Commission Requirements, the Commission will consider the reports, action letters and other information of other recognized institutional, specialized and professional accrediting agencies previously or currently associated with the institution, with specific attention to any adverse, probationary or show-cause actions. The Commission will expect that institutions will disclose such information in the Eligibility Process and place it in its Assurance File when seeking candidate or accredited status or when undergoing regular review by the Commission through any pathway. The Commission may request information directly from the recognized accrediting agency and place it in the Assurance File for review by an evaluation team for consideration in the accrediting action.

In considering a substantive change the Commission may request information from an institution regarding its specialized or professional accreditation or may request it directly from the accrediting agency and take it into account in the accrediting action.

If another recognized accrediting agency has denied or withdrawn affiliation or pre-accreditation or placed sanctions on the institution the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant accredited or candidate for accreditation status. If it chooses to grant affiliation to such an institution, it will provide the Secretary of Education a written explanation within thirty (30) days of taking action of why the issues that led to the action by the other recognized accrediting agency did not preclude the Commission from reaching a decision to grant accreditation or candidacy or did not otherwise justify a different action.

Information Provided to Other Recognized Accrediting Agencies. If the Commission takes action to place an institution on notice or probation or withdraw or deny accreditation or candidate for accreditation status, or if the Commission places an institution on show-cause, the Commission will notify all recognized accreditors at the same time that it notifies the institution and the U.S. Department of Education but not later than thirty days after the action, and will include a Public Disclosure Notice that provides reasons for the Commission's decision. If the action was denial or withdrawal of accredited or candidate for accreditation status that Public Disclosure will within sixty (60) days after the action becomes final include comments from the affected institution or information to indicate that the institution was

provided an opportunity to comment but did not do so. The Commission will notify state higher education agencies of an action to reaffirm or grant accreditation or initial candidacy or approve a substantive change or the results of monitoring within thirty days of the action; it will notify the state higher education agency of a voluntary resignation by an institution of its accredited or candidate status within thirty days of receiving notification from the institution of the resignation.

If another recognized accreditor seeks written or other information about an institution that has accredited or candidate status with the Commission, or that has previously sought such status with the Commission, the Commission will forward that information to the other accreditor after receiving a written request.

Coordinated Visits with Other Recognized Accrediting Agencies. The Commission may conduct a coordinated visit with a specialized or professional accrediting agency recognized by the USDE or CHEA. Coordinated visits typically will be limited to no more than three participating agencies. While the teams of the participating agencies may coordinate some or many of their activities on campus, decision-making and the production of the team report will be done separately by each agency. A letter of agreement for each coordinated visit, signed by the Presidents of the participating agencies or their designees, will lay out the level of coordination and interaction allowed among agency representatives involved in the visit.

Policy Number Key

Section COMM: Commission Policies
Chapter C: Relationships with External Agencies
Part 10: General

Last Revised: April 2013
First Adopted: January 1983, February 1986, June 2000
Revision History: February 1996, February 1998, June 2001, February 2008, June 2008, February 2009, June 2012, April 2013
Notes: Former policy number – 9.1
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Relation with U.S. Government

Number: COMM.C.10.030

The Commission shall participate in the recognition program mandated by federal law and conducted by the U.S. Department of Education, and it shall seek periodic continuance of its federal recognition. The Commission will notify the Department of any changes in the scope of its activities.

Notification of Actions and Other Institutional Information. Within thirty days after any institutional action is formally adopted or validated by the Board of Trustees the Commission will file with the Department a summary of actions it has taken on an institution. If the Board of Trustees takes an adverse action of denial or withdrawal of status or if it issues a sanction or show-cause order, it will simultaneously notify the institution and the U.S. Department of Education and place information about the action on its public website within 24 hours of notifying the institution. If the action was denial or withdrawal of accredited or candidate for accreditation status that Public Disclosure will within sixty (60) days after the action becomes final include comments from the affected institution or information to indicate that the institution was provided an opportunity to comment but did not do so. In addition, the Commission supplies, at the Department's request, electronic membership information.

Other Communication. The Commission shall maintain regular communications with the U.S. Department of Education and other federal agencies. It will respond to U.S. Department of Education inquiries regarding institutional eligibility for Title IV; on receipt, it will forward to the institution for comment claims from students, the public and others of Title IV fraud and abuse and other allegations related to Title IV; and it will share with the U.S. Department of Education clear evidence received from Commission evaluation teams, Commission staff or other sources of possible Title IV fraud and abuse or failure to meet Title IV, HEA program responsibilities, along with a summary of the Commission's reasons for concern. With the exception of information about possible Title IV fraud and abuse or a specific request for confidentiality of contact with the U.S. Department of Education, the Commission will typically notify an institution when the Commission provides information about it to the U.S. Department of Education but will consider each situation on a case-by-case basis to determine whether confidentiality is appropriate.

Policy Number Key

Section COMM: Commission Policies
Chapter C: Relationships with External Agencies
Part 10: General

Last Revised: February 2010
First Adopted: February 1996

Revision History: Adopted February 1996, effective February 1996, revised February 1998, revised June 2008, revised February 2009, revised February 2010
Notes: Former policy number: 10.1, 10.1(a), 10.1(b).
Related Policies: INST.E.10.010 Notice, INST.E.20.010 Probation, INST.E.30.010 Show-Cause, and INST.E.60.010 Denial or Withdrawal of Statu

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Relations with State Higher Education Agencies, and Other State Offices

Number: COMM.C.10.040

The Commission shall maintain communications and discussions with officers of states, higher education agencies and other state offices to clarify the functions and concerns of the Commission with respect to its affiliated institutions.

Consideration for the Decisions of State Higher Education Agencies. In determining whether an institution meets the Commission's Eligibility Requirements, Criteria for Accreditation and other requirements, the Commission will consider actions of the state in which the institution has its main campus or in which it meets the legal requirements to seek authorization for its educational activities with specific attention to issued or pending decisions by states to deny, suspend, revoke, withdraw or terminate legal authority to provide education in that state. The Commission will also expect that institutions will disclose such information in the Eligibility Process and place it in its Assurance File when seeking candidate or accredited status or when undergoing regular review by the Commission through any pathway. The Commission may request information directly from the state higher education office and place it in the Assurance File for review by an evaluation team and for consideration in the accrediting action.

In considering a substantive change the Commission shall request information from an institution regarding its authorization from the state related to the substantive change for which the institution is seeking Commission approval or may request it directly from the state and shall take it into account in the accrediting action.

If a state has denied, suspended, revoked, terminated or withdrawn an institution's authority to provide education in that state, the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant accredited or candidate for accreditation status. If the Commission chooses to grant status to an institution in these circumstances, it will provide the Secretary of Education a written explanation of why that action is appropriate within thirty (30) days of taking the action.

Information Provided to States. If the Commission takes action to place an institution on notice or probation, notice, or withdraw or deny accreditation or candidate for accreditation status, or if the Commission places an institution on show-cause, the Commission will notify state higher education agencies at the same time that it notifies the institution and the U.S. Department of Education but not later than thirty (30) days after the action, and will include a Public Disclosure Notice that provides reasons for the Commission's decision. If the action was denial or withdrawal of accredited or candidate for accreditation status, that Public Disclosure will within sixty (60) days after the action becomes final include comments from the affected institution or information to indicate that the institution was provided an opportunity to comment but did not do so. The Commission will notify state higher education agencies of an action to reaffirm or grant accreditation or initial candidacy or approve a substantive change or the results of monitoring within thirty (30) days of the action; it will notify the state higher education agency of a voluntary

resignation by an institution of its accredited or candidate status within thirty (30) days of receiving notification from the institution or the resignation.

If a state higher education agency seeks written or other information about an institution that has accredited or candidate status with the Commission, or that has previously sought such status with the Commission, the Commission will forward that information to the state after receiving a written request.

Coordinated Visits with State Higher Education Agencies. The Commission may schedule an evaluation visit to an institution when representatives of such boards are on campus if (1) the institution wishes this schedule and (2) the President of the Commission and the chair of the visiting team approve arrangements which ensure the autonomy of the Commission team. Whether the representatives are present as observers of the Commission team or for other purposes, the Commission team may meet with them to share information. However, such representatives shall not participate in Commission team deliberations leading directly to the team's recommendations to the Commission.

At the request of an institution and state agency, the Commission may send a peer reviewer to the institution or one or more of its campuses or additional locations to confirm that an institution remains in compliance with Commission policy. The peer reviewer will prepare a written report of findings from the evaluation following instructions provided by the Commission.

Policy Number Key

Section COMM: Commission Policies
Chapter C: Relationships with External Agencies
Part 10: General

Last Revised: November 2012
First Adopted: January 1983, February 1986, June 2000
Revision History: February 1996, February 1998, June 2001, February 2008, June 2008, February 2009, June 2012
Notes: Policies combined in November 2012 –10.2
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Section Five: Commitment to Peer Review

Policy Title: Commitment to Peer Review

Number: PEER.A.00.000

The Commission is committed to a strong Peer Corps that will conduct evaluations and take accrediting actions on behalf of the Commission's member institutions. Through its recruitment and selection processes, the Commission will strive to assure that the Peer Corps reflects the diversity of the people—professionals and students—engaged in higher education in the Higher Learning Commission region. In selecting and appointing Peer Reviewers the Commission does not discriminate on matters of race, creed, gender, sexual orientation, or physical disability.

Policy Number Key

Section PEER: Commitment to Peer Review
Chapter A: Policies Applicable to All Peer Reviewers
Part 00: Introduction

Last Revised:
First Adopted: November 2012
Revision History:
Notes:
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Eligibility Criteria and Selection

Number: PEER.A.10.010

A majority of the members of the Peer Corps will be officially and actively employed on a full-time basis by regionally accredited institutions of higher education as faculty or instructors, administrators or other institutional personnel. Other members of the Corps may include, as appropriate, members of boards of trustees of accredited institutions, legal counsel, state education or system employees, representatives of the business community, public members or other employees of institutions. The Corps may also include individuals with specialized experience in quality improvement or other areas and recent retirees from any of these categories above. Peer reviewers will have appropriate academic degrees from accredited institutions of higher education or the equivalent foreign degrees as well as a minimum of five years of work experience. A majority of the members of the Peer Corps will be located, either through personal residence or employment relationship, in the North Central region. The Commission may include in its Peer Corps members who have an employment relationship with institutions of higher education or other entities not located in the North Central region provided that such members comply with all other eligibility criteria for membership in the Peer Corps.

The Commission will assure representation in the Peer Corps on evaluation teams of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The staff of the Commission will be responsible for developing selection criteria for Peer Reviewers and for implementing a selection process and will report the Corps' composition to the Board of Trustees.

Specialized Corps. The staff of the Commission may establish within the Peer Corps specialized groups of peer reviewers who will be assigned to initial status, sanction or show-cause, advisory visit or other evaluations that the Commission determines to require specialized expertise or training or to perform particular functions on the team including chair, recorder, etc.

Policy Number Key

Section PEER: Commitment to Peer Review
Chapter A: Policies Applicable to All Peer Reviewers
Part 10: General

Last Revised: June 2014
First Adopted: January 1983
Revision History: February 2002, October 2003, November 2012. April 2013, June 2014
Notes: Former policy number 6.1

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Terms of Appointment

Number: PEER.A.10.020

A new Peer Reviewer shall be appointed to a two-year probationary term. Commission staff will review that appointment after completion of the two-year probationary term. The Commission staff will take into consideration the Peer Reviewer's completion of required training as well as performance in institutional evaluations. On the basis of this review, the Commission staff will decide whether to appoint the Peer Reviewer to a four-year term.

At the expiration of the four-year term, Commission staff may invite a Peer Reviewer to apply for reappointment for a successive four-year term. The Commission staff will consider the Peer Reviewer's performance in institutional evaluations, including comments from institutions, other Peer Reviewers and staff, and the Peer Reviewer's adherence to the Peer Reviewer Standards of Conduct and participation in required training in determining whether to appoint the Peer Reviewer to a subsequent four-year term.

The Commission retains the discretion to evaluate the performance of a Peer Reviewer at any time and end the term of a Peer Reviewer if the Commission determines it to be appropriate. The Commission may also end the term of a Peer Reviewer before the regular completion date if that Peer Reviewer no longer meets the eligibility criteria for the Peer Corps established by the Commission. The Commission will notify the Peer Reviewer of such action.

Policy Number Key

Section PEER: Commitment to Peer Review
Chapter A: Policies Applicable to All Peer Reviewers
Part 10: General

Last Revised: June 2014
First Adopted: February 1994
Revision History: October 2003, November 2012, June 2014
Notes: Former policy number 6.2

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Required Training and Professional Development

Number: PEER.A.10.030

Within the initial two-year term and prior to participation in any institutional evaluation, a Peer Reviewer must participate in Commission training or professional development that educates the Peer Reviewer in the application of the Commission's Criteria for Accreditation and Commission policies and the specific processes integral to Commission evaluations. Peer Reviewers must complete training at least every three years thereafter or within two years after any major initiative such as the adoption of new Criteria for Accreditation.

Such training may be customized for the specific role the Peer Reviewer undertakes in the Commission's evaluation process, including training in preparation for a role in the Commission's decision-making or appeals processes. Training for Peer Reviewers will regularly include a segment on evaluating distance and correspondence education.

Training may take place through in-person events or electronic mechanisms that will allow the Peer Reviewer to complete the training program and the Commission to assess the Peer Reviewer's completion of the training material.

Policy Number Key

Section PEER: Commitment to Peer Review
Chapter A: Policies Applicable to All Peer Reviewers
Part 10: General

Last Revised: November 2012
First Adopted: February 1994
Revision History: October 2003, February 2004, February 2010, November 2012
Notes: Policies combined in November 2012 – 6.3

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Standards of Conduct

Number: PEER.A.10.040

The Commission expects Peer Reviewers to behave with the highest level of ethics and integrity while conducting any activity for the Commission. Peer reviewers must abide by appropriate and ethical standards of conduct to assure the public and the higher education community that evaluations have been carried out objectively and with the goal of assuring the public good.

While participating as Peer Reviewers in any institutional evaluation, hearing or other Commission activity as a Peer Reviewer, Peer Reviewers shall agree to abide by the following Standards of Conduct:

Peer Reviewers:

1. Conduct themselves with appropriate dignity and professionalism while representing the Commission.
2. Treat all institutional representatives, members of the public, fellow peer reviewers and Commission staff with courtesy and respect.
3. Adhere to the Commission's Policy on Objectivity and Conflict of Interest and disclose any actual or apparent conflicts to the Commission staff in advance of accepting any assignment.
4. Avoid representing interests that conflict or compete, or provide the appearance of conflict, competition or bias, with the fair and objective review of every institution.
5. Act with competence in all Commission activities by reading assigned materials in advance, reviewing Commission requirements, attending required training, and participating in all evaluation activities as outlined by Commission staff.
6. Follow the Commission policy for Peer Reviewers on Independent Consulting and guidelines on independent consulting and mock visits.
7. Decline any offer of gifts, incentives, or other compensation from any institution under review unless those gifts are nominal in nature (less than $50 fair market value per individual gift) or of significance in a particular cultural context and notify the Commission staff of an offer of such gift that exceeds this threshold. *(Note that the institution may provide a meal or social function for an evaluation team or other Commission group provided that the function is conducted simply and at reasonable cost.)*
8. Act with appropriate fiscal moderation while conducting an institutional evaluation or other Commission activity and provide an accurate and honest reporting of all expenses incurred during that activity.
9. During an evaluation visit to an institution and for a period of one year after Commission action in the evaluation, refrain from seeking employment from or accepting employment, or any future relationship, with the institution under review.

10. During an evaluation visit to an institution and for a period of one year after Commission action in the evaluation, refrain from seeking to employ or otherwise hire or retain any employee of the institution under review.
11. Protect confidential information received through the Commission's processes and observe the Commission Policy on Confidentiality.
12. Refrain from commenting on the details of any institutional review in which they have been engaged unless compelled by legal process.
13. Cooperate in any legal process in which the Commission or its Board of Trustees or staff have become engaged, refrain from responding to any inquiries related to legal action made by institutions or their counsel, and direct such inquiries to Commission staff.

Policy on Objectivity and Conflict of Interest. Peer Reviewers must be able to render impartial and objective decisions on behalf of the Commission. Therefore, the Commission will not knowingly allow any person whose past or present activities could affect his or her ability to be impartial and objective to participate in an institutional evaluation (Assurance Review, Focused Visit, Change Panel or Visit, or AQIP process). Peer Reviewers will inform the staff of the Commission of any barrier to impartiality and objectivity known to them.

Confirmation of Objectivity Form. Through the Confirmation of Objectivity form a Peer Reviewer affirms a commitment to, and capacity for, impartiality. Before participating in any institutional evaluation each Peer Reviewer will sign a Confirmation of Objectivity form regarding each institution being evaluated. Before participating in any panel review, each Peer Reviewer will sign or orally agree to a Confirmation of Objectivity for each institution under consideration.

The Confirmation of Objectivity form will identify situations involving conflict of interest as well as provide examples of other situations that raise the potential for conflict of interest. The form will require that the person disclose any such conflicts, predisposition, or affiliation that could appear to jeopardize objectivity. When appropriate, Commission staff will notify the institution of that potential and will consult with the Peer Reviewer and the institution regarding that person's suitability for the assignment. The Commission staff reserves final responsibility for determining whether the Peer Reviewer who has identified a potential bias or predisposition will participate in an institutional evaluation, or review.

Policy on Confidentiality. In all Commission accreditation processes, a Peer Reviewer must agree to keep confidential any information provided by the institution under review and information gained as a result of participating in any part of the Commission's review processes. Confidential information includes, but is not limited to:

1. Information about the institution not available to the public through the institution's own program to share information and its reporting to the Federal Government (IPEDS);
2. Information the institution identifies as "proprietary" such as recruitment strategies including pricing policies, new strategic initiatives being considered or planned for, impending but not public changes in personnel, legal activities not yet part of the public record, planned acquisitions or mergers, courseware and software created by the institution for its own use;
3. Information provided in the institutional self study report or Assurance Filing, and information made available in the resource room or electronically including such documents as personnel files, minutes of meetings,

transcripts of grievances and hearings, management letters from external auditors, reports from internal and external quality assurance activities (i.e., reports from specialized accrediting agencies or program reviews);

4. Information identified explicitly by the institution as "Confidential";
5. In clinical settings, patient identity, history, and all other information related to the patient's involvement with the clinic;
6. Information shared orally during an on-site visit and any face-to-face hearing that might be part of the Commission's review processes.

Keeping information confidential requires that the Peer Reviewer not discuss or disclose institutional information except as needed to further the purpose of the Commission's evaluation processes. It also requires that the Peer Reviewer not make use of the information to benefit any person or organization. Maintenance of confidentiality survives the evaluation visit and continues after the process has concluded.

Independent Consulting

To avoid the appearance of possible conflict of interest in the accreditation process, no Peer Reviewer who evaluated an institution will serve as an independent consultant to that institution for a period of three years following the official Commission accrediting action. In addition, no Peer Reviewer will participate in an evaluation of an institution for which that Peer Reviewer served as an institutional consultant in the previous ten years.

Peer Reviewers will disclose to the Commission on an annual basis all consulting activities related to an institution accredited by the Commission or related to accreditation and will agree to inform any institution or other entity with which the Peer Reviewer is developing a consulting relationship that the Peer Reviewer is acting in a personal capacity and is not representing the Commission.

Any Peer Reviewer who violates this policy will be removed automatically from the Peer Review Corps.

Violations of the Standards of Conduct. The Commission staff will investigate allegations that a Peer Reviewer has violated the Standards of Conduct and may ask the Peer Reviewer or others involved to provide information. If there is a determination that a Peer Reviewer has violated a Standard of Conduct, the President of the Commission may issue a letter of reprimand or may ask a Commission staff member to provide a verbal warning to the Peer Reviewer. The Commission may end the term of the Peer Reviewer prior to the regular completion date.

Policy Number Key

Section PEER: Commitment to Peer Review
Chapter A: Policies Applicable to All Peer Reviewers
Part 10: General

Last Revised: April 2013
First Adopted: January 1983, February 1984, August 1990, February 2001, November 2006
Revision History: October 2003, November 2012, April 2013
Notes: Policies combined in November 2012 – 5.1, 5.1(a), 5.2, 5.3, 8.2
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Peer Corps Members on Teams

Number: PEER.A.10.050

The Commission staff shall determine the specific number of peer reviewers comprising any evaluation team following Commission policies related to the specific type of evaluation being conducted. The team shall be large enough to make a thorough and professional evaluation of the particular institution. In composing the team, staff will weigh variables such as institutional mission, number of students served, number of degree levels offered, number of programs offered, breadth of services provided students and other constituencies, and number and type of off-campus offerings supported by the institution. Matters unique to a visit (e.g., unusual new institutional dynamics, pending implementation of significant changes, response to alternative evaluation agreements) may add to the size of the team. Staff may also consider institutional requests for a large enough team to ensure that specific institutional issues are addressed.

Institutional Review of Peer Reviewers Identified for a Team. The names of persons proposed by the Commission staff to compose a team to visit an institution will be submitted to the institution. The institution will be free to comment on the composition of the team, and staff will take such comments into consideration in completing the team. Should any changes in the team be necessary after the initial team is set, the changes will be discussed with the institution by the staff, and institutional comments will be given consideration in making necessary changes.

The Commission reserves final responsibility and authority for composing teams that visit institutions as part of a Commission evaluation. In exercising that responsibility, the Commission has determined that issues of equity and diversity will be addressed as well as issues of institutional fit and educational and administrative emphases.

Policy Number Key

Section PEER: Commitment to Peer Review
Chapter A: Policies Applicable to All Peer Reviewers
Part 10: General

Last Revised: November 2012
First Adopted: February 1994
Revision History: October 2003, November 2012
Notes: Former policy number 6.7, 6.8
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Section Six: Policies Related to Policy Adoption and Review

Policy Title: Application of Standards and Policies

Number: PPAR.A.10.000

The Commission will apply its Eligibility Requirements, Criteria for Accreditation, Assumed Practices and Federal Compliance Requirements consistently following policies outlined in this document. Where necessary the Commission will take follow-up action to ensure that an institution that does not meet these requirements either has its accreditation withdrawn or denied following policies related to those processes or comes into compliance within no more than two years.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review
Chapter A: General
Part 10: General

Last Revised:
First Adopted: November 2012
Revision History:
Notes:
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Dating of Policies

Number: PPAR.A.10.010

The effective date of any policy is the date on which it was adopted or revised unless otherwise noted. Policy may be noted as revised, edited or renumbered to reflect various changes that have occurred in the policy subsequent to its original adoption. Revisions to any policy are taken by action of the Board; editing and renumbering may occur as necessary as technical amendments and do not require formal Board approval.

Each policy carries a date of adoption (i.e., Adopted January 2000); any revision dates are noted as well (revised February 2002). Commission Policies periodically undergo major revisions for editorial, numbering and titling updates; dates for these major revisions are noted on the following page. Sometimes sections may be edited outside the regular editing cycle; in such cases policies that have had minor editorial revisions or renumbering will carry a date when the editing took place.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review
Chapter A: General
Part 10: General

Last Revised:
First Adopted:
Revision History:
Notes: Former policy number: front matter
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Board of Trustees Commitment to Regular Review of its Policies and Procedures

Number: PPAR.A.10.020

The Board of Trustees recognizes that higher education is rapidly changing and that the Commission policy contained herein needs to reflect those changes. Therefore, the Board of Trustees commits to review its policies and procedures, particularly but not exclusively related to institutional dynamics and change, regularly to evaluate their responsiveness to the higher education environment, their effectiveness in providing quality assurance, and their usefulness in enhancing institutional and educational improvement. The Board will follow policies outlined herein for a program of review of Commission policies and procedures.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review
Chapter A: General
Part 10: General

Last Revised:
First Adopted: February 2007
Revision History:
Notes: Former policy number: front matter
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Program for Review of Institutional Accreditation Policies

Number: PPAR.A.10.030

The Commission, through its system of self-evaluation, will regularly seek from affiliated institutions and Peer Reviewers comment on the effectiveness of the Commission's policies, programs and activities. The Commission's review process will provide opportunities for a broad group of stakeholders, such as employers, students, parents, business leaders, etc., to evaluate the program and requirements for accreditation. The feedback from the stakeholders may lead the Board of Trustees to modify or change the Commission's programs and requirements in response to these ongoing systems of evaluation. In addition, the Board of Trustees will convene an advisory panel at least every five years to review the effectiveness of, and proposed changes and programs for, accreditation. The panel will include representatives from various constituencies within the Commission as well as members of the Board of Trustees. Should the Board of Trustees learn from its review of policies that a change in Commission policy is necessary to ensure that the policy is being interpreted properly by institutions or peer reviewers or is being properly applied in the evaluation process, the Board will ensure that such change is made within no more than 12 months of the Board learning about the necessary change.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review
Chapter A: General
Part 10: General

Last Revised: November 2012
First Adopted:
Revision History: November 2012
Notes: Former policy number: front matter
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Revision of Accreditation Policy

Number: PPAR.A.10.040

The Board of Trustees may amend, delete, or add to the policies, with the exception of policies related to the Eligibility Requirements, Criteria for Accreditation, Assumed Practices, and Obligations of Affiliation as noted in the following subsections, at any time. Adoption of policies shall be taken at a Board of Trustees meeting subsequent to the first meeting when the policy was presented. Policies affecting affiliated and member organizations shall be made available to them for comment through the Commission's Web site and other regular Commission communications during the period between the first and second reading of the proposed policy. The Board of Trustees will consider any comments before action is taken. This policy does not preclude the Commission Board or staff making technical amendments to clarify the meaning of policies without necessarily providing a notice and comment period.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review
Chapter A: General
Part 10: General

Last Revised: November 2012
First Adopted: August 1992
Revision History: February 2007, November 2012
Notes: Former policy number: front matter
Related Policies:

HIGHER LEARNING COMMISSION

POLICY

Policy Title: Revision of the Eligibility Requirements, Criteria for Accreditation, Assumed Practices and Obligations of Affiliation

Number: PPAR.A.10.050

The Board of Trustees may not act to adopt or change any Eligibility Requirement or Criterion, including Core Components of a Criterion, or Assumed Practices by which the eligibility or accreditation or other affiliation of an organization is judged or Obligations of Affiliations unless the proposed amendment has been presented at a scheduled Board meeting, circulated in writing to all affiliated and member organizations for a comment period of not less than 60 days, and adopted at a subsequent Board meeting. The Board of Trustees will consider the comments before action is taken. This policy does not preclude the Commission Board or staff making technical amendments to clarify the meaning of policies without necessarily providing a notice and comment period.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review
Chapter A: General
Part 10: General

Last Revised: November 2012
First Adopted:
Revision History: November 2012
Notes: Former policy number: front matter
Related Policies:

Appendix A

These Criteria remain in effect after December 31, 2012 only as long as necessary to complete the evaluations of institutions begun under these Criteria in 2012. For all other institutions, these Criteria sunset on December 31, 2012.

Policy Title: Types of Affiliation

Former Number: 1.1

Institutions affiliated with the Higher Learning Commission receive one of two statuses: accreditation or candidacy.

Policy Title: Criteria for Accreditation

Former Number: 1.1(a)

The Commission's evaluation for either initial or continuing accreditation shall seek to ascertain that an institution of higher education meets the following five Criteria for Accreditation:

Criterion One: Mission and Integrity

The organization operates with integrity to ensure the fulfillment of its mission through structures and processes that involve the board, administration, faculty, staff, and students.

Core Component A. The organization's mission documents are clear and articulate publicly the organization's commitments.

Examples of Evidence:

- The board has adopted statements of mission, vision, values, goals, and organizational priorities that together clearly and broadly define the organization's mission.
- The mission, vision, values, and goals documents define the varied internal and external constituencies the organization intends to serve.
- The mission documents include a strong commitment to high academic standards that sustain and advance excellence in higher learning.
- The mission documents state goals for the learning to be achieved by its students.
- The organization regularly evaluates and, when appropriate, revises the mission documents.

- The organization makes the mission documents available to the public, particularly to prospective and enrolled students.

Core Component B. In its mission documents, the organization recognizes the diversity of its learners, other relevant constituencies, and the greater society it serves.

Examples of Evidence:

- In its mission documents, the organization addresses diversity within the community values and common purposes it considers fundamental to its mission.
- The mission documents present the organization's function in a multicultural society.
- The mission documents affirm the organization's commitment to honor the dignity and worth of individuals.
- The organization's required codes of belief or expected behavior are congruent with its mission.
- The mission documents provide a basis for the organization's basic strategies to address diversity.

Core Component C. Understanding of and support for the mission pervade the organization.

Examples of Evidence:

- The board, administration, faculty, staff, and students understand and support the organization's mission.
- The organization's strategic decisions are mission-driven.
- The organization's planning and budgeting priorities flow from and support the mission.
- The goals of the administrative and academic sub-units of the organization are congruent with the organization's mission.
- The organization's internal constituencies articulate the mission in a consistent manner.

Core Component D. The organization's governance and administrative structures promote effective leadership and support collaborative processes that enable the organization to fulfill its mission.

Examples of Evidence:

- Board policies and practices document the board's focus on the organization's mission.
- The board enables the organization's chief administrative personnel to exercise effective leadership.
- The distribution of responsibilities as defined in governance structures, processes, and activities is understood and is implemented through delegated authority.
- People within the governance and administrative structures are committed to the mission and appropriately qualified to carry out their defined responsibilities.

- Faculty and other academic leaders share responsibility for the coherence of the curriculum and the integrity of academic processes.
- Effective communication facilitates governance processes and activities.
- The organization evaluates its structures and processes regularly and strengthens them as needed.

Core Component E. The organization upholds and protects its integrity.

Examples of Evidence:

- The activities of the organization are congruent with its mission.
- The board exercises its responsibility to the public to ensure that the organization operates legally, responsibly, and with fiscal honesty.
- The organization understands and abides by local, state, and federal laws and regulations applicable to it (or by laws and regulations established by federally-recognized sovereign entities).
- The organization consistently implements clear and fair policies regarding the rights and responsibilities of each of its internal constituencies.
- The organization's structures and processes allow it to ensure the integrity of its co-curricular and auxiliary activities.
- The organization deals fairly with its external constituents.
- The organization presents itself accurately and honestly to the public.
- The organization documents timely response to complaints and grievances, particularly those of students.

Criterion Two: Preparing for the Future

The organization's allocation of resources and its processes for evaluation and planning demonstrate its capacity to fulfill its mission, improve the quality of its education, and respond to future challenges and opportunities.

Core Component A. The organization realistically prepares for a future shaped by multiple societal and economic trends.

Examples of Evidence:

- The organization's planning documents reflect a sound understanding of the organization's current capacity.
- The organization's planning documents demonstrate that attention is being paid to emerging factors such as technology, demographic shifts, and globalization.
- The organization's planning documents show careful attention to the organization's function in a multicultural society.

- The organization's planning processes include effective environmental scanning.
- The organizational environment is supportive of innovation and change.
- The organization incorporates in its planning those aspects of its history and heritage that it wishes to preserve and continue.
- The organization clearly identifies authority for decision making about organizational goals.

Core Component B. The organization's resource base supports its educational programs and its plans for maintaining and strengthening their quality in the future.

Examples of Evidence:

- The organization's resources are adequate for achievement of the educational quality it claims to provide.
- Plans for resource development and allocation document an organizational commitment to supporting and strengthening the quality of the education it provides.
- The organization uses its human resources effectively.
- The organization intentionally develops its human resources to meet future changes.
- The organization's history of financial resource development and investment documents a forward-looking concern for ensuring educational quality (e.g., investments in faculty development, technology, learning support services, new or renovated facilities).
- The organization's planning processes are flexible enough to respond to unanticipated needs for program reallocation, downsizing, or growth.
- The organization has a history of achieving its planning goals.

Core Component C. The organization's ongoing evaluation and assessment processes provide reliable evidence of institutional effectiveness that clearly informs strategies for continuous improvement.

Examples of Evidence:

- The organization demonstrates that its evaluation processes provide evidence that its performance meets its stated expectations for institutional effectiveness.
- The organization maintains effective systems for collecting, analyzing, and using organizational information.
- Appropriate data and feedback loops are available and used throughout the organization to support continuous improvement.
- Periodic reviews of academic and administrative sub-units contribute to improvement of the organization.
- The organization provides adequate support for its evaluation and assessment processes.

Core Component D. All levels of planning align with the organization's mission, thereby enhancing its capacity to fulfill that mission.

Examples of Evidence:

- Coordinated planning processes center on the mission documents that define vision, values, goals, and strategic priorities for the organization.
- Planning processes link with budgeting processes.
- Implementation of the organization's planning is evident in its operations.
- Long-range strategic planning processes allow for reprioritization of goals when necessary because of changing environments.
- Planning documents give evidence of the organization's awareness of the relationships among educational quality, student learning, and the diverse, complex, global, and technological world in which the organization and its students exist.
- Planning processes involve internal constituents and, where appropriate, external constituents.

Criterion Three: Student Learning and Effective Teaching

The organization provides evidence of student learning and teaching effectiveness that demonstrates it is fulfilling its educational mission.

Core Component A. The organization's goals for student learning outcomes are clearly stated for each educational program and make effective assessment possible.

Examples of Evidence:

- The organization clearly differentiates its learning goals for undergraduate, graduate, and post-baccalaureate programs by identifying the expected learning outcomes for each.
- Assessment of student learning provides evidence at multiple levels: course, program, and institutional.
- Assessment of student learning includes multiple direct and indirect measures of student learning.
- Results obtained through assessment of student learning are available to appropriate constituencies, including students themselves.
- The organization integrates into its assessment of student learning the data reported for purposes of external accountability (e.g., graduation rates, passage rates on licensing exams, placement rates, transfer rates).
- The organization's assessment of student learning extends to all educational offerings, including credit and non-credit certificate programs.

- Faculty are involved in defining expected student learning outcomes and creating the strategies to determine whether those outcomes are achieved.
- Faculty and administrators routinely review the effectiveness and uses of the organization's program to assess student learning.

Core Component B. The organization values and supports effective teaching.

Examples of Evidence:

- Qualified faculty determine curricular content and strategies for instruction.
- The organization supports professional development designed to facilitate teaching suited to varied learning environments.
- The organization evaluates teaching and recognizes effective teaching.
- The organization provides services to support improved pedagogies.
- The organization demonstrates openness to innovative practices that enhance learning.
- The organization supports faculty in keeping abreast of the research on teaching and learning and of technological advances that can positively affect student learning and the delivery of instruction.
- Faculty members actively participate in professional organizations relevant to the disciplines they teach.

Core Component C. The organization creates effective learning environments.

Examples of Evidence:

- Assessment results inform improvements in curriculum, pedagogy, instructional resources, and student services.
- The organization provides an environment that supports all learners and respects the diversity they bring.
- Advising systems focus on student learning, including the mastery of skills required for academic success.
- Student development programs support learning throughout the student's experience regardless of the location of the student.
- The organization employs, when appropriate, new technologies that enhance effective learning environments for students.
- The organization's systems of quality assurance include regular review of whether its educational strategies, activities, processes, and technologies enhance student learning.

Core Component D. The organization's learning resources support student learning and effective teaching.

Examples of Evidence:

- The organization ensures access to the resources (e.g., research laboratories, libraries, performance spaces, clinical practice sites) necessary to support learning and teaching.
- The organization evaluates the use of its learning resources to enhance student learning and effective teaching.
- The organization regularly assesses the effectiveness of its learning resources to support learning and teaching.
- The organization supports students, staff, and faculty in using technology effectively.
- The organization provides effective staffing and support for its learning resources.
- The organization's systems and structures enable partnerships and innovations that enhance student learning and strengthen teaching effectiveness.
- Budgeting priorities reflect that improvement in teaching and learning is a core value of the organization.

Criterion Four: Acquisition, Discovery, and Application of Knowledge

The organization promotes a life of learning for its faculty, administration, staff, and students by fostering and supporting inquiry, creativity, practice, and social responsibility in ways consistent with its mission.

Core Component A. The organization demonstrates, through the actions of its board, administrators, students, faculty, and staff, that it values a life of learning.

Examples of Evidence:

- The board has approved and disseminated statements supporting freedom of inquiry for the organization's students, faculty, and staff, and honors those statements in its practices.
- The organization's planning and pattern of financial allocation demonstrate that it values and promotes a life of learning for its students, faculty, and staff.
- The organization supports professional development opportunities and makes them available to all of its administrators, faculty, and staff.
- The organization publicly acknowledges the achievements of students and faculty in acquiring, discovering, and applying knowledge.
- The faculty and students, in keeping with the organization's mission, produce scholarship and create knowledge through basic and applied research.
- The organization and its units use scholarship and research to stimulate organizational and educational improvements.

Core Component B. The organization demonstrates that acquisition of a breadth of knowledge and skills and the exercise of intellectual inquiry are integral to its educational programs.

Examples of Evidence:

- The organization integrates general education into all of its undergraduate degree programs through curricular and experiential offerings intentionally created to develop the attitudes and skills requisite for a life of learning in a diverse society.
- The organization regularly reviews the relationship between its mission and values and the effectiveness of its general education.
- The organization assesses how effectively its graduate programs establish a knowledge base on which students develop depth of expertise.
- The organization demonstrates the linkages between curricular and co-curricular activities that support inquiry, practice, creativity, and social responsibility.
- Learning outcomes demonstrate that graduates have achieved breadth of knowledge and skills and the capacity to exercise intellectual inquiry.
- Learning outcomes demonstrate effective preparation for continued learning.

Core Component C. The organization assesses the usefulness of its curricula to students who will live and work in a global, diverse, and technological society.

Examples of Evidence:

- Regular academic program reviews include attention to currency and relevance of courses and programs.
- In keeping with its mission, learning goals and outcomes include skills and professional competence essential to a diverse workforce.
- Learning outcomes document that graduates have gained the skills and knowledge they need to function in diverse local, national, and global societies.
- Curricular evaluation involves alumni, employers, and other external constituents who understand the relationships among the courses of study, the currency of the curriculum, and the utility of the knowledge and skills gained.
- The organization supports creation and use of scholarship by students in keeping with its mission.
- Faculty expect students to master the knowledge and skills necessary for independent learning in programs of applied practice.
- The organization provides curricular and co-curricular opportunities that promote social responsibility.

Core Component D. The organization provides support to ensure that faculty, students, and staff acquire, discover, and apply knowledge responsibly.

Examples of Evidence:

- The organization's academic and student support programs contribute to the development of student skills and attitudes fundamental to responsible use of knowledge.
- The organization follows explicit policies and procedures to ensure ethical conduct in its research and instructional activities.
- The organization encourages curricular and co-curricular activities that relate responsible use of knowledge to practicing social responsibility.
- The organization provides effective oversight and support services to ensure the integrity of research and practice conducted by its faculty and students.
- The organization creates, disseminates, and enforces clear policies on practices involving intellectual property rights.

Criterion Five: Engagement and Service

As called for by its mission, the organization identifies its constituencies and serves them in ways both value.

Core Component A. The organization learns from the constituencies it serves and analyzes its capacity to serve their needs and expectations.

Examples of Evidence:

- The organization's commitments are shaped by its mission and its capacity to support those commitments.
- The organization practices periodic environmental scanning to understand the changing needs of its constituencies and their communities.
- The organization demonstrates attention to the diversity of the constituencies it serves.
- The organization's outreach programs respond to identified community needs.
- In responding to external constituencies, the organization is well-served by programs such as continuing education, outreach, customized training, and extension services.

Core Component B. The organization has the capacity and the commitment to engage with its identified constituencies and communities.

Examples of Evidence:

- The organization's structures and processes enable effective connections with its communities.
- The organization's co-curricular activities engage students, staff, administrators, and faculty with external communities.
- The organization's educational programs connect students with external communities.
- The organization's resources - physical, financial, and human - support effective programs of engagement and service.

- Planning processes project ongoing engagement and service.

Core Component C. The organization demonstrates its responsiveness to those constituencies that depend on it for service.

Examples of Evidence:

- Collaborative ventures exist with other higher learning organizations and education sectors (e.g., K-12 partnerships, articulation arrangements, 2+2 programs).
- The organization's transfer policies and practices create an environment supportive of the mobility of learners.
- Community leaders testify to the usefulness of the organization's programs of engagement.
- The organization's programs of engagement give evidence of building effective bridges among diverse communities.
- The organization participates in partnerships focused on shared educational, economic, and social goals.
- The organization's partnerships and contractual arrangements uphold the organization's integrity.

Core Component D. Internal and external constituencies value the services the organization provides.

Examples of Evidence:

- The organization's evaluation of services involves the constituencies served.
- Service programs and student, faculty, and staff volunteer activities are well-received by the communities served.
- The organization's economic and workforce development activities are sought after and valued by civic and business leaders.
- External constituents participate in the organization's activities and co-curricular programs open to the public.
- The organization's facilities are available to and used by the community.
- The organization provides programs to meet the continuing education needs of licensed professionals in its community.

Policy Title: Achieving and Maintaining Accreditation

Former Number: 1.1(a)2

An organization must be judged to have met each of the Criteria for Accreditation to merit accreditation. An organization shall demonstrate that it meets the Criteria for Accreditation by presenting appropriate evidence, as

suggested in the examples of evidence, to address the Core Components related to each Criterion. The judgment that the organization meets the Criteria for Accreditation is based on detailed information about all parts of the organization. This information may be in a self-study report, an AQIP Systems Portfolio, a series of documents resulting from self-evaluation processes, or other institutional documents. This information will be confirmed in the written report of the visiting team; in the pattern of portfolios, reports, panel views and appraisals required of institutions participating in the AQIP processes; or in other review documents agreed to by the Commission and the institution as core elements of a customized process for continued accreditation. For institutions applying for initial accreditation the self-study constitutes the official application for accreditation.

Policy Title: Commission Right to Reexamine Institutional Conformity with Requirements

Former Number: 1.1(c)1

The Commission may also re-examine, as specified in Commission policies, any affiliated or accredited institutions' ability to meet the requirements.

Policy Title: Candidacy

Former Number: 1.1(b), 1.1(b)1, 1.1(b)2, 1.4

Every non-affiliated institution seeking status with the Commission shall apply for and serve a period of candidacy. Such candidacy shall be for four years (48 months) from the date action is taken to grant candidacy to the date action is taken to grant accreditation, with a minimum period in candidacy of at least two years (24 months), but not to exceed the maximum time limits of candidacy outlined in this policy. In exceptional circumstances, the Board may in its discretion waive the required candidacy period; such waiver will be based upon evidence that the institution meets all the Criteria for Accreditation and has met all other requirements laid out in Commission policies related to achieving accreditation, but such evidence shall not obligate the granting of a waiver.

Achieving Candidacy and Continued Candidacy

The Commission's evaluation for initial candidacy shall seek to ascertain that an organization of higher learning meets the following:

1. The Eligibility Requirements as adopted by the Commission;
2. The Minimum Expectations for Accreditation;
3. Sufficient evidence to support the judgment that all of the Criteria for Accreditation can reasonably be met within four years of candidacy.

Any visit during the candidacy period will ensure ongoing compliance with these requirements.

The self-study constitutes the official application for candidacy. In the self-study the institution seeking candidacy shall document that it meets each Eligibility Requirement. It will also document compliance with the Minimum Expectations or any successor document, the degree to which it meets each of the Criteria for Accreditation, and through a carefully articulated plan and timetable show how it will meet fully each of them within the period of candidacy.

To achieve candidacy an organization will be expected to provide emerging evidence for each Criterion by addressing the Core Components related to that Criterion and demonstrating that they are likely to be met within the candidacy period.

Candidacy Cycle

The period of candidacy is four years. However, at any time during the candidacy period, subsequent to the completion of the two-year required minimum candidacy, the institution may file an application for early initial accreditation and host an on-site initial accreditation visit to evaluate the institution for this purpose. The institution will be limited to one application for early initial accreditation during the term of candidacy. In exceptional situations, the Board of Trustees at its discretion may extend candidacy to a fifth year.

Candidacy will be initiated through a comprehensive on-site evaluation and maintained through a subsequent on-site biennial evaluation two years after candidacy is granted to determine whether the institution is making reasonable progress towards meeting accreditation requirements by the end of the candidacy period. Two years after this biennial evaluation, or at the end of the four-year candidacy period, an institution will have its evaluation for initial accreditation. If, as a result of the initial accreditation visit, the Board acts to extend the institution's candidacy for a fifth year, the institution will repeat the visit for initial accreditation during that fifth candidacy year in sufficient time for the Board to consider the outcome of the evaluation prior to the conclusion of the fifth candidacy year.

Withdrawal of Initial Application for Candidate Status

An institution may withdraw its application for affiliation without prejudice at any time prior to a decision on that affiliation by the Board of Trustees. The withdrawal must be initiated by the legally designated governing body of the institution. The Commission will retain all fees paid to it by the institution if the application is withdrawn after the on-site visit has been made.

Policy Title: Accreditation

Former Number: 1.1(a)1, 1.1(a)2, 1,1(a)3, 1.4

An organization must be judged to have met each of the Criteria for Accreditation to merit accreditation. An organization shall demonstrate that it meets the Criteria for Accreditation by presenting appropriate evidence, as suggested in the examples of evidence, to address the Core Components related to each Criterion. The judgment that the organization meets the Criteria for Accreditation is based on detailed information about all parts of the organization. This information may be in a self-study report, an AQIP Systems Portfolio, a series of documents resulting from self-evaluation processes, or other institutional documents. This information will be confirmed in the written report of the visiting team; in the pattern of portfolios, reports, panel views and appraisals required of institutions participating in the AQIP processes; or in other review documents agreed to by the Commission and the institution as core elements of a customized process for continued accreditation. For institutions applying for initial accreditation the self-study constitutes the official application for accreditation.

Accreditation Cycle

Institutions must have accreditation reaffirmed not later than five years following initial accreditation, and not later than ten years following a reaffirmation action. The time for reaffirmation is made a part of the accreditation decision, but may be changed if the institution experiences or plans changes. The Commission may extend the period of accreditation not more than one year beyond the decennial cycle or one year beyond the initial accreditation cycle for institutions that present good and sufficient reason for such extension.

Effective Date of Accreditation

If the institution has graduated its first class not more than one year before the Commission's evaluation for initial accreditation, the effective date of accreditation will be the date of the graduation of the first class.

Withdrawal of Application for Initial Accreditation

An institution may withdraw its application for affiliation without prejudice at any time prior to a decision on that affiliation by the Board of Trustees. The withdrawal must be initiated by the legally designated governing body of the institution. The Commission will retain all fees paid to it by the institution if the application is withdrawn after the on-site visit has been made.

Policy Title: Institutional Obligations of Affiliation

Former Number: 1.6

While seeking and holding affiliation with the Commission, an institution voluntarily agrees to meet obligations set forth by the Commission, including periodic evaluation through the structures and mechanisms set forth in these policies, payment of dues and fees, and making reports as requested by the Commission. An institution that does not meet the Obligations of Affiliation may be subject to withdrawal of affiliation.

Appendix B

Implementation Note for the Pathways for Reaffirmation

The new pathways for reaffirmation of accreditation will be effective for institutions according to the following implementation schedule:

- September 1, 2012.
  - New policies become effective for institutions in the Program to Evaluate and Advance Quality (PEAQ) with comprehensive evaluations in 2015-16 and thereafter. These PEAQ institutions will transition to the Standard Pathway or (if eligible and so choosing) the Open Pathway according to a phase-in timeline that will place the institutions on the ten-year Standard or Open Pathway cycle according to their scheduled reaffirmation dates.
  - New policies become effective for institutions in Academic Quality Improvement Program (AQIP). AQIP institutions eligible to elect the Standard or Open Pathway that do so elect will transition similarly, based on their scheduled reaffirmation dates. All other AQIP institutions remain in AQIP but become subject to revised related policies contained herein and also consistent with policies applicable to other pathways in such areas as monitoring, sanction, etc.
  - Pioneer Institutions. New policies on pathways also become effective for all "pioneer" institutions. The Commission is conducting a Demonstration Project in which groups of institutions are helping design and test the new model. The first demonstration cohort began in fall 2009; a second cohort began in fall 2010, based on participation in the Commission's Academy for Assessment of Student Learning; and a third cohort began in spring 2011, focused on the Lumina Foundation's Degree Qualifications Profile.
  - Revised policies on sanction and other related policies become effective for all institutions.
  - Rolling effective date. New policies on pathways become effective for all other PEAQ institutions on a rolling basis. Institutions in PEAQ currently under comprehensive evaluation or with comprehensive evaluations scheduled through August 2015 will transition to pathways after action by the Commission to complete the institution's PEAQ cycle.

Appendix C

Policies to be sunset once the Pathways transition is complete and no institutions remain in PEAQ (Program to Evaluate and Advance Quality).

Policy Title: Mechanics of the Process

Former Number: 2.2

Official decisions related to institutional affiliation will originate with one of the following recommendations: a recommendation provided by an evaluation team (comprehensive or focused), a recommendation provided by an Institutional Actions Council First Committee (Level 1) or Second Committee (Level 2), a recommendation provided by Financial or Non-Financial Monitoring Panel, or AQIP Review Panel, a recommendation provided through any mechanism for reviewing substantive change, or a recommendation provided by the staff. Commission policies define the various processes appropriate to the review of and disposition of these recommendations.

Policy Title: Recommendations Arising from the Evaluation Process

Former Number: 2.2(a)

A Commission team, including where appropriate an AQIP review panel, conducting a comprehensive evaluation for initial or continued status will evaluate the institution and will make a recommendation regarding status and setting a year for the next comprehensive review for continuing or initial status. The recommendation may also include Commission monitoring. The team recommendation will be accompanied in the team report by identified deficiencies, if any, at the institution being evaluated.

A Commission team, including where appropriate an AQIP review panel, conducting a focused evaluation or a review of substantive change will evaluate the institution and will make a recommendation regarding previous monitoring or a substantive change requested by the institution. A biennial visit during candidacy will review the institution's progress during candidacy.

A Commission monitoring panel will evaluate the institution and will make a recommendation regarding the institution's financial or non-financial situation. The recommendation may also include future Commission monitoring.

Subject to requirements in Commission policy, a Commission evaluation team considering initial or continuing status or a focused evaluation, biennial or a substantive change visit may revise the date of the next comprehensive evaluation or recommend future monitoring, a sanction, withdrawal or denial of status, or moving the institution from accredited to candidate status.

Commission monitoring panels and Commission staff may make recommendations for monitoring or other changes in the institution's Statement of Affiliation Status subject to requirements in Commission policy.

Policy Title: Institutional Responses within the Process

Former Number: 2.4(f)

The CEO of the institution is expected to file written responses to any of the following:

1. an evaluation team's report and recommendations;
2. a decision of a First Committee (Level 1) of the Institutional Actions Council calling for substantial modifications in the action;
3. a recommendation of a First Committee (Level 1) or Second Committee (Level 2) regarding initial status, sanction, denial or withdrawal of status;
4. AQIP reviews, including the review that results in a recommendation for continued accreditation;
5. desk review or panel recommendations;
6. staff recommendations or reports regarding Change of Control, Structure or Organization or changes in the institution's accredited relationship with the Commission as reflected in the Statement of Affiliation Status; or
7. a recommendation of the Commission President for sanction, denial or withdrawal of status.

The CEO shall submit the written response within two weeks of receipt of the final evaluation team report. The response shall be considered in the review processes prior to the final action, including adverse action, and becomes a part of the official record of the process.

The documents identified in this section constitute the official record of the Commission's interaction with an institution. These documents are: team reports, institutional responses, recommendations from a First Committee (Level 1) or Second Committee (Level 2) of the Institutional Actions Council, analyses of required reports and change requests, specific documents identified within the AQIP processes, and all official letters from the Commission detailing actions taken regarding the institution's relationship with the Commission. The participants in those processes will be identified in the documents.

Other documents, including those documents developed by the staff to assist in specific processes and information regarding oral interactions, will not, except for good and sufficient cause, be included in materials provided in future review processes and will not be considered to be part of the official record of the interaction.