# 2020 RESOURCE GUIDE

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## RESOURCES

**HLC's Resource Guide** is published each year in time for the annual conference. The next issue will be published in April 2021. For the most current information from HLC, visit hlcommission.org.

**2021 HLC Annual Conference**
April 9–13, 2021 | Chicago, IL

**HLC's Response to COVID-19**
In light of the coronavirus (COVID-19) outbreak, HLC is adjusting its accreditation work and in-person programs and events. For the latest updates and resources, see hlcommission.org/coronavirus.

# PEOPLE

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## NEWS FROM HLC

### Email

Email is HLC's primary means of communicating with member institutions. Institutions are asked to help ensure that email communications sent from HLC are delivered.

Five email addresses have been designated as official addresses for HLC, and member institutions are asked to add these addresses to their whitelists:

- hlc@hlcommission.org
- accreditation@hlcommission.org
- peerreview@hlcommission.org
- academy@hlcommission.org
- annualconference@hlcommission.org

Be sure that the institution's HLC staff liaison's email address is also whitelisted. Each liaison's email address is first initial, last name@hlcommission.org (example: John Smith would be jsmith@hlcommission.org).

### Leaflet

HLC's newsletter, Leaflet, is a snapshot of the work HLC does to fulfill its mission. Published six times a year, it provides updates, news and resources regarding HLC, accreditation and higher education.
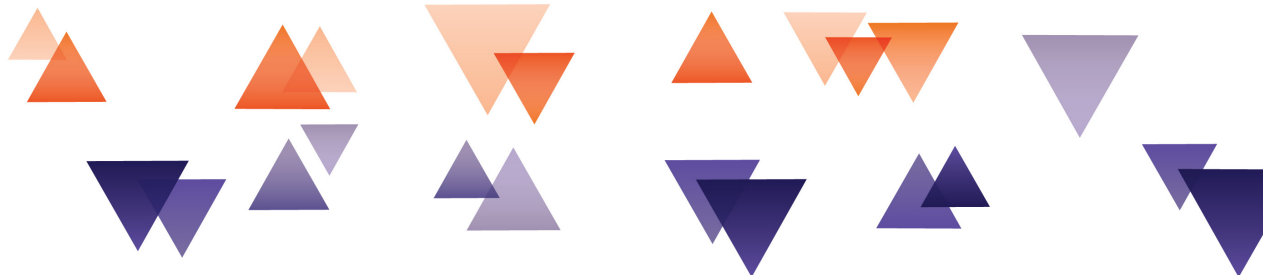
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# HLC'S STRATEGIC PLAN

## INTRODUCING EVOLVE

*As HLC began to create the next strategic plan, the evaluation of trends in higher education resulted in six focus areas: Equity, Vision, Outcomes, Leadership, Value and Engagement. The plan to take HLC from 2020 to 2025 will concentrate on EVOLVE.*

### EQUITY

Focus on access and inclusion, variety of institutions, opportunities for all students and respect for mission.

### VISION

Hold a vision for the future of higher education and the role of regional accreditation. Become partners with institutions in developing the vision. Be nimble, flexible and forward thinking. Focus on quality.

### OUTCOMES

Look at data-driven student outcomes, student success as well as HLC outcomes and accountability.

### LEADERSHIP

Support institutional leadership and provide thought leadership. Look at how to influence national and state leaders.

### VALUE

Spend time communicating the value of higher education to stakeholders. Continue providing value to members. Reinforce the value of high-quality accreditation.

### ENGAGEMENT

Focus on outreach, advocacy and civic engagement. Be the change you want to see in the higher education world!

The strategic directions for EVOLVE 2025 will be available later this year.

# UPDATE ON BEYOND THE HORIZON

*HLC's strategic plan, Beyond the Horizon, implemented from 2016 through 2020 and focusing on VISTA—Value to Members, Innovation, Student Success, Thought Leadership and Advocacy—has resulted in the following highlights. For more information, visit hlcommission.org/strategic-plan.*

## VALUE TO MEMBERS

To bring Value to Members, HLC gathered feedback from institutions and peer reviewers on the revised Criteria for Accreditation. The revisions, adopted by the Board of Trustees in February 2019, address concerns raised by institutions and peer reviewers. Since February 2019, HLC has provided webinars on the new Criteria for Accreditation and begun moving institutions in the Assurance System to the new Criteria template.

HLC has expanded its elective programming, with two new workshops on program assessment and cocurricular assessment that will be held later this year.

Finally, HLC has launched an initiative to create a Teach-Out Toolkit. The initiative will work toward developing templates for teach-out agreements between closing and receiving institutions, along with guidance documents based on input from institutional personnel and students.

## INNOVATION

In the summer of 2019, HLC secured funding to explore new quality awareness initiatives funded by a $500,000 grant by Lumina Foundation. The initiatives seek to foster transparency in accreditation and demonstrate commitment to serving today's changing student populations, as well as expand availability of higher education credentials that better align with the needs and educational intents of those learners.

## STUDENT SUCCESS

HLC has launched an initiative, inviting various higher education stakeholders, to develop a Student Right to Know Guide, providing clear information on accreditation.

HLC has also established an Assessment Task Force to provide institutions and peer reviewers additional clarity around Criterion 4 and to explore longer-term strategies related to assessment expectations.

## THOUGHT LEADERSHIP

HLC President Barbara Gellman-Danley continues to provide thought leadership by participating in national conversations on leadership, governance and the value of accreditation. In addition, this year HLC launched a Stakeholder Roundtable, convening workforce and higher education leaders to examine the question: What are the current gaps between the needs in the workforce and higher education?

## ADVOCACY

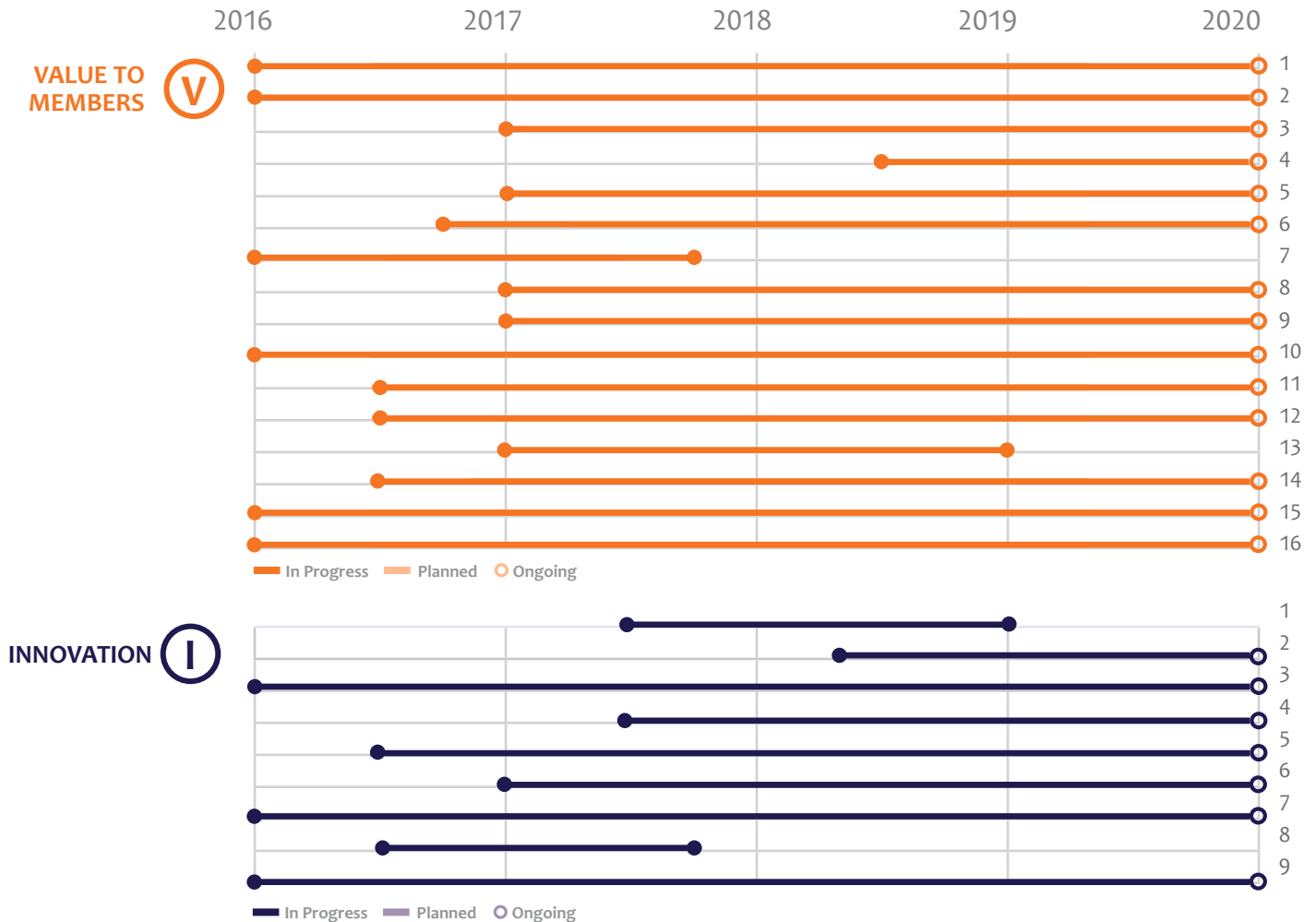HLC engages regularly with the Council for Regional Accrediting Commissions (C-RAC), state higher education executive officers (SHEEOs), and associations based in Washington, D.C. In addition, HLC has been invited to participate in a conversation on interaction between the Triad by the U.S. Department of Education.

Finally, in response to the new Code of Federal Regulations, HLC is making policy adjustments as required.

# HLC'S STRATEGIC PLAN

## PROGRESS ON VISTA



**VALUE TO MEMBERS** (V)

In Progress — Planned ○ Ongoing

**INNOVATION** (I)

In Progress — Planned ○ Ongoing

## VALUE TO MEMBERS

1 Processes are sustainable and understood
2 Foster inter-institutional collaboration
3 Collect member input on HLC's role
4 Communicate member Reaffirmation of Accreditation
5 Provide guidance for quality assurance
6 Provide education about peer review
7 Evaluate the Pathways for Reaffirmation of Accreditation
8 Increase contact between staff and members
9 Develop tools to enhance information access
10 Improve depth of peer reviewer training
11 Diversify the Peer Corps
12 Develop peer training by trends
13 Conduct a needs analysis of HLC's services
14 Build up the academy/workshop model
15 Evaluate services regularly for improvement
16 Enable institutional interactions at HLC's conference

## INNOVATION

1 Construct innovation zones for institutions
2 Advance emerging higher education practices
3 Develop and fine-tune accreditation processes
4 Seek clarity from the Triad on institutional innovation
5 Accommodate for quality institutional innovation
6 Acknowledge innovations HLC cannot advance or thwart
7 Maintain and improve Peer Corps training modalities
8 Add the AQIP Pathway to the Assurance System
9 Increase quality in IAC work

2016  2017  2018  2019  2020

**STUDENT SUCCESS** (S)
1
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13
14

■ In Progess  ■ Planned  ○ Ongoing

**THOUGHT LEADERSHIP** (T)
1
2
3
4
5
6

■ In Progress  ■ Planned  ○ Ongoing

**ADVOCACY** (A)
1
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■ In Progress  ■ Planned  ○ Ongoing
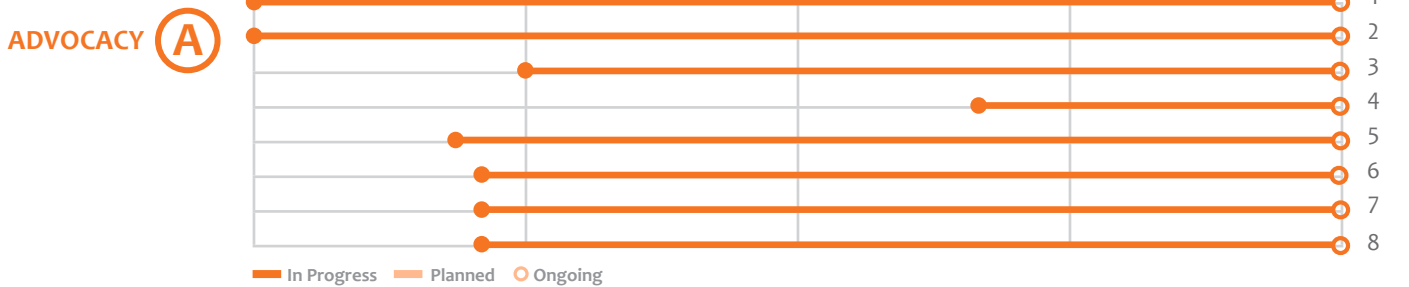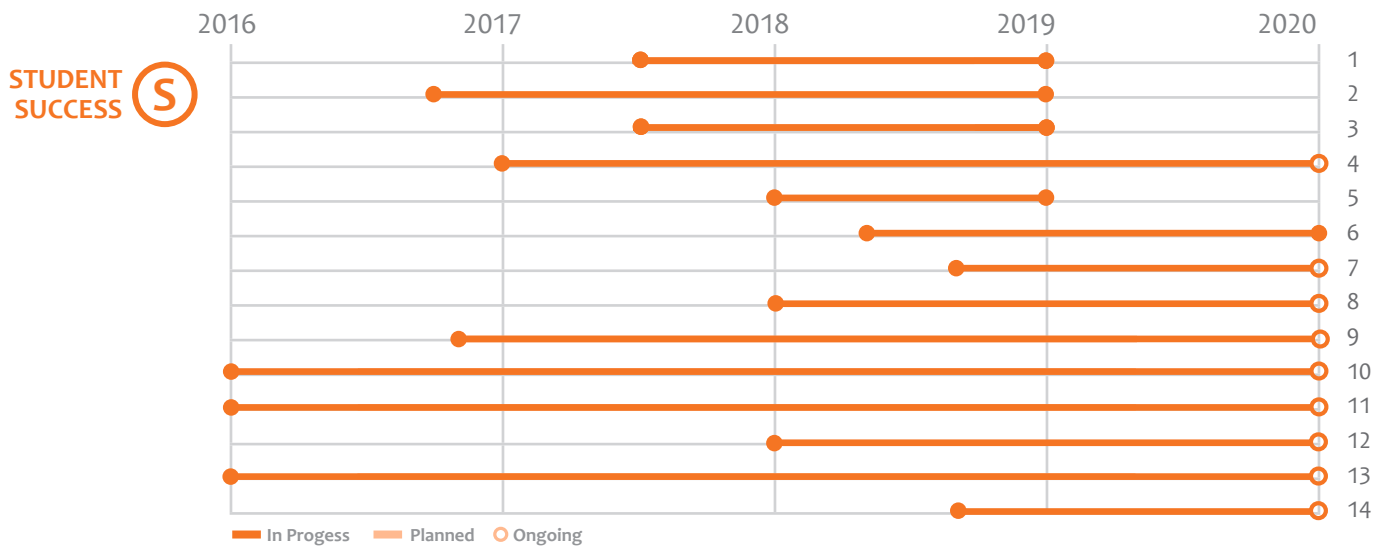
### STUDENT SUCCESS

1  Launch initiative to define student success
2  Ensure student success includes student demographics
3  Research trends of student success
4  Engage in the discourse on student success
5  Modify policies in a timely, consistent and transparent way
6  Evaluate the non-financial indicator process
7  Clarify the role of regional and programmatic accreditors
8  Emphasize the breadth of assessment of student learning
9  Connect assessment to institutional improvements
10  Analyze the obstacles to "closing the assessment loop
11  Connect members to share assessment lessons learned
12  Develop understanding of student success
13  Promote student success for the common good
14  Explore assessment frameworks for various institutional missions

### THOUGHT LEADERSHIP

1  Form an advisory group that guides HLC on innovation
2  Foster understanding of common challenges
3  Connect with national efforts to improve higher education
4  Explore creation of HLC subsidiaries for thought leadership and advocacy
5  Publish white papers on higher education issues
6  Publish quality advancement resources

### ADVOCACY

1  Build understanding for accreditation
2  Communicate the value of accreditation
3  Create ways for members to support accreditation
4  Research, capitalize on, and improve public recognition of HLC and accreditation
5  Develop government relations and advocacy strategy
6  Articulate role of and interaction with the Triad
7  Simplify processes to cut duplication of institutional efforts
8  Mutually understand expectations from the USDE

## (V) VALUE TO MEMBERS

**V1 Processes are sustainable and understood**
HLC has conducted its annual review of the Federal Compliance process and has made updates based on frequently asked questions.

**V2 Foster inter-institutional collaboration**
HLC has launched an initiative to create a Teach-Out Toolkit. The initiative will work toward developing templates for teach-out agreements between closing and receiving institutions, along with guidance documents based on input from institutional personnel and students.

**V3 Collect member input on HLC's role**
HLC invited Accreditation Liaison Officers (ALOs) to complete a survey on how their institution identifies and responds to equity challenges relative to access and success.

**V4 Communicate member Reaffirmation of Accreditation**
HLC publishes member reaffirmations of accreditation on its website. In addition, HLC links to the lists of reaffirmations via social media.

**V5 Provide guidance for quality assurance**
HLC has begun training for the implementation of the revised Criteria for Accreditation and has launched an online training course for ALOs.

**V6 Provide education about peer review**
HLC's president and staff continue to participate in various state, regional and national conferences discussing the value of peer review and related information about accreditation.

**V7 Evaluate the Pathways for Reaffirmation of Accreditation**
This action step is complete.

**V8 Increase contact between staff and members**
HLC's *Leaflet* continues to share news with the membership.

**V9 Develop tools to enhance information access**
HLC has been working to develop a Salesforce tool to extend access to HLC's database for members and peer reviewers.

**V10 Improve depth of peer reviewer training**
HLC will add a training session on the evaluation of institutions regarding Core Component 4.B.

**V11 Diversify the Peer Corps**
HLC's Diversity Task Force is recruiting new members to work on the task force.

**V12 Develop peer training by trends**
The peer reviewer evaluation system continues to identify training needs, and HLC develops training to address those trends, such as on faculty qualifications and IAC's review of teach outs.

**V13 Conduct a needs analysis of HLC's services**
This action step is complete.

**V14 Build up the academy/workshop model**
HLC has launched two new workshops to be offered later this year: Cocurricular Assessment and Program Assessment.

**V15 Evaluate services regularly for improvement**
HLC's Enterprise Risk Management Committee continues to assess and mitigate/manage potential risks.

**V16 Enable institutional interactions at HLC's conference**
HLC's annual conference continues to provide share fairs and poster fairs for attendees to experience examples at similar institutions.

## (I) INNOVATION

**I1 Construct innovation zones for institutions**
This action step is complete.

**I2 Advance emerging higher education practices**
HLC has spent the last year evaluating trends in higher education for development of its next strategic plan.

**I3 Develop and fine-tune accreditation processes**
HLC has updated the Assurance System and begun transitioning institutions into the system set with the New Criteria for Accreditation.

**I4 Seek clarity from the Triad on institutional innovation**
HLC is working with the Midwest Higher Education Compact to develop a paper detailing innovation at institutions regarding qualified faculty in dual credit programs.

**I5 Accommodate for quality institutional innovation**
HLC is working with a group of institutional representatives to develop a lab to test innovations and create a community of practice.

**I6 Acknowledge innovations HLC cannot advance or thwart**
HLC's will begin prioritizing the recommendations from the Innovation Zone and Partners for Transformation based on feasibility.

**I7 Maintain and improve Peer Corps training modalities**
HLC continues offering Team Chair Webinars, providing the opportunity to connect with HLC in preparation for an evaluation.

**I8 Add the AQIP Pathway to the Assurance System**
This action step is complete.

**I9 Increase quality in IAC work**
HLC has updated policy and procedure to add Removal of Notice to the work completed by IAC.

## (S) STUDENT SUCCESS

**S1 Launch initiative to define student success**
HLC's Defining Student Success Initiative has completed its work.

**S2 Ensure student success includes student demographics**
HLC's Testing Student Success Data Initiative has completed its work.

**S3 Research trends of student success**
HLC's Testing Student Success Data Initiative has completed its work.

**S4 Engage in the discourse on student success**
HLC has launched an initiative, inviting various stakeholders, to develop a Student Right to Know Guide.

**S5 Modify policies in a timely, consistent and transparent way**
HLC's policy committee continues to help identify the procedures and practices that are affected by policy changes.

**S6 Evaluate the non-financial indicator process**
HLC is building the capacity to access different data sources to support future indicator processes.

**S7 Clarify the role of regional and programmatic accreditors**
HLC is making policy adjustments to accommodate the new Code of Federal Regulations.

## (S) STUDENT SUCCESS (cont.)

**S8 Emphasize the breadth of assessment of student learning**
HLC has established an Assessment Task Force to provide institutions and peer reviewers additional clarity around Criterion 4 and to explore longer-term strategies related to assessment expectations.

**S9 Connect assessment to institutional improvements**
HLC continues to provide this connection through its workshops on assessment and the Assessment Academy.

**S10 Analyze the obstacles to "closing the assessment loop"**
HLC's Academies curriculum continues to provide guidance for institutions addressing this issue.

**S11 Connect members to share assessment lessons learned**
HLC has launched an initiative to add the Collaboration Network resources to SparQ, creating a more comprehensive and in-depth community of practice.

**S12 Develop understanding of student success**
HLC is developing a thought paper based on the results of a survey of students asking them how they define student success.

**S13 Promote student success for the common good**
HLC named student success as a main strategic direction and continues to conduct outreach on this topic.

**S14 Explore assessment frameworks for various institutional missions**
HLC's Testing Student Success Initiative examined bright lines and the research paper provides recommendations related to this concept.

## (T) THOUGHT LEADERSHIP

**T1 Form an advisory group that guides HLC on innovation**
This action step is complete. Any future action to be determined.

**T2 Foster understanding of common challenges**
HLC has launched a Stakeholder Roundtable, convening workforce and higher education leaders to examine the current gaps between the needs in the workforce and higher education.

**T3 Connect with national efforts to improve higher education**
HLC's outreach report is a record of its efforts to connect with national efforts.

**T4 Explore creation of HLC subsidiaries for thought leadership and advocacy**
HLC confirmed the current structure is appropriate for the immediate needs.

**T5 Publish white papers on higher education issues**
HLC is working on papers regarding dual credit and student success.

**T6 Publish quality advancement resources**
The 2020 Resource Guide will feature a number of institutional projects, research and initiatives that speak to quality advancement.

## (A) ADVOCACY

**A1 Build understanding for accreditation**
HLC has established a new role on the staff: Government Relations Officer.

**A2 Communicate the value of accreditation**
Staff liaisons and HLC's president have been speaking at national conferences regarding the value of accreditation.

**A3 Create ways for members to support accreditation**
HLC's *Leaflet* has a feature on advocacy that provides updates on the higher education issues affecting accreditation.

**A4 Research, capitalize on, and improve public recognition of HLC and accreditation**
HLC's social media presence has grown with the publishing of thought papers on student success and innnovation.

**A5 Develop government relations and advocacy strategy**
HLC published its 2020 Advocacy Agenda.

**A6 Articulate role of and interaction with the Triad**
HLC engages regularly with the Council for Regional Accrediting Commissions (C-RAC), state higher education executive officers (SHEEOs), and associations based in Washington, D.C. HLC has been facilitating meeting interactions among these Triad members and speaking with increasing frequency at their meetings and events.

**A7 Simplify processes to cut duplication of institutional efforts**
Staff members are working with the other regional accreditors to explore ways to simplify how information is sent to and from the U.S. Department of Education.

**A8 Mutually understand expectations from the USDE**
HLC has been invited to participant in a conversation on interaction between the Triad by the U.S. Department of Education.

*Please Note: Action steps that are ongoing will be examined by staff committees on Equity, Vision, Outcomes, Leadership, Value and Engagement (EVOLVE) for their placement within the next Strategic Plan.*

# POLICY

# 2019 HLC POLICY CHANGES

*HLC recognizes that higher education is rapidly changing and that its policies need to reflect those changes. Therefore, HLC commits to review its policies and procedures 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.*

HLC's Board of Trustees typically approves and adopts changes to HLC policy three times a year at its in-person meetings. In most cases, the process for revising a policy involves two readings by the Board that take place over the course of two meetings. A policy change is approved by the Board on first reading and then shared with HLC institutions, peer reviewers and other constituents for comment. At its subsequent meeting, the Board considers these comments before taking action to adopt the policy change on second reading. If a policy change is required by federal regulation or other legal mandate, the Board may adopt it on a single reading without a public comment period.

The following policy changes were adopted in 2019. All changes are currently in effect unless otherwise noted.

### CRITERIA FOR ACCREDITATION
*Adopted February 2019, Effective September 2020*

HLC is required to initiate a review of its Criteria for Accreditation every five years. Starting in 2017, HLC conducted a thorough analysis of the Criteria, including an evaluation of the rigor of team reports, a look at trends across interim reporting and feedback from member institutions and peer reviewers. The final revisions address redundancies among Core

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Components and provide clarification and elaboration in needed areas. The revised Criteria are available on page 26.

**Revised policy:** Criteria for Accreditation (CRRT.B.10.010)

## APPEALS BODY
*Adopted February 2019*

The adopted change increased the number of people who can serve on HLC's Appeals Body from 10 to 15 members.

**Revised policy:** INST.E.90.010

## CHANGE OF CONTROL, STRUCTURE OR ORGANIZATION
*Adopted June 2019*

The adopted change allowed HLC greater flexibility in responding to instances in which an accredited institution undergoes a change of control, structure or organization that requires prior HLC review and approval without providing HLC prior notice.

**Revised policy:** Change of Control, Structure or Organization (INST.B.20.040)

*Adopted November 2019*

The adopted changes strengthened the evaluative framework related to Change of Control, Structure or Organization applications and removed the option for Change of Control Candidacy.

**Revised policies:** Processes for Seeking Approval of Change of Control (INST.F.20.070), Monitoring Related to Change of Control, Structure or Organization (INST.F.20.080), Accreditation (INST.B.20.030), Board of Trustees (INST.D.10.010), Institutional Actions Council (INST.D.20.010), Institutional Actions Council Processes (INST.D.40.010), Special Protocols Related to Sanctions and Adverse Actions (INST.E.70.010), Appeals (INST.E.90.010), Commission Public Notices and Statements (COMM.A.10.010)

**Deleted policy:** Accredited to Candidate Status (INST.E.50.010)

## COMPLAINTS ABOUT HLC-AFFILIATED INSTITUTIONS
*Adopted November 2019*

The adopted changes set a 2-year time limit for submitting complaints to HLC, removed the option of submitting anonymous and confidential complaints, and reinforced HLC's commitment to reviewing complaints in a timely and fair manner. The changes aligned HLC's complaints policy more closely to those of other regional accreditors.

**Revised policy:** Complaints and Other Information Regarding Affiliated Institutions (COMM.A.10.030)

## ELIGIBILITY
*Adopted June 2019*

The adopted change clarified that an unaffiliated institution must serve a period of candidacy prior to gaining accredited status with HLC and that eligibility reviewers are not required to be members of the Institutional Actions Council and may serve renewable four-year terms.

**Revised policy:** Eligibility (INST.B.20.010)

## FEDERAL COMPLIANCE
*Adopted June 2019*

The adopted changes allowed HLC flexibility in streamlining the Federal Compliance review process. The new process cuts out redundancies related to areas that HLC already reviews as part of its Criteria for Accreditation or otherwise.

**Revised policies:** Federal Compliance Requirements (FDCR.A.10.010), Assignment of Credits, Program Length, and Tuition (FDCR.A.10.020), Institutional Records of Student Complaints (FDCR.A.10.030), Practices for Verification of Student Identity (FDCR.A.10.050), Title IV Program Responsibilities (FDCR.A.10.060), Public Information (FDCR.A.10.070), Standing With State and Other Accrediting Agencies (FDCR.A.10.090)

## HLC LEGAL PURPOSE AND JURISDICTION IN HLC BYLAWS
*Adopted June 2019*

This change to HLC's Bylaws clarified that the offering of elective training and educational programs is part of the scope of HLC's work and that the jurisdiction of HLC for purposes other than accreditation is not limited to its 19-state region.

**Revised bylaws:** Legal Purposes of the Commission (Article II), Jurisdiction for Accreditation (Article III, Section 2)

## INSTITUTIONAL ACTIONS BY THE BOARD OF TRUSTEES
*Adopted February 2019*

The adopted change allowed the Board to amend or modify a prior decision related to an individual institution in order to avoid unintended aspects of implementation that are beyond the authority of the HLC president or staff members to correct.

**Revised policy:** Board of Trustees (INST.D.10.010)

## INSTITUTIONAL ACTIONS COUNCIL
*Adopted November 2019*

The adopted changes clarified and aligned the policies related to the Board of Trustees and Institutional Action Council with current practice and recent policy revisions.

**Revised policies:** Board of Trustees (INST.D.10.010), Institutional Actions Council (INST.D.20.010), Institutional Actions Council Processes (INST.D.40.010), Notice (INST.E.10.010), Official Records (INST.G.10.020)

## OBLIGATIONS OF AFFILIATION
*Adopted June 2019, Effective September 2020*

The adopted change added an obligation for institutions to ensure that information submitted to HLC does not include unredacted personally identifiable information, to the extent possible. Personally identifiable information is information about an individual that allows the individual to be specifically identified. This policy will go into effect in September 2020 to allow time for institutions to take the new requirements into account when planning for evaluative activity. HLC also created guidelines on this topic for institutions and peer reviewers (see page 48).
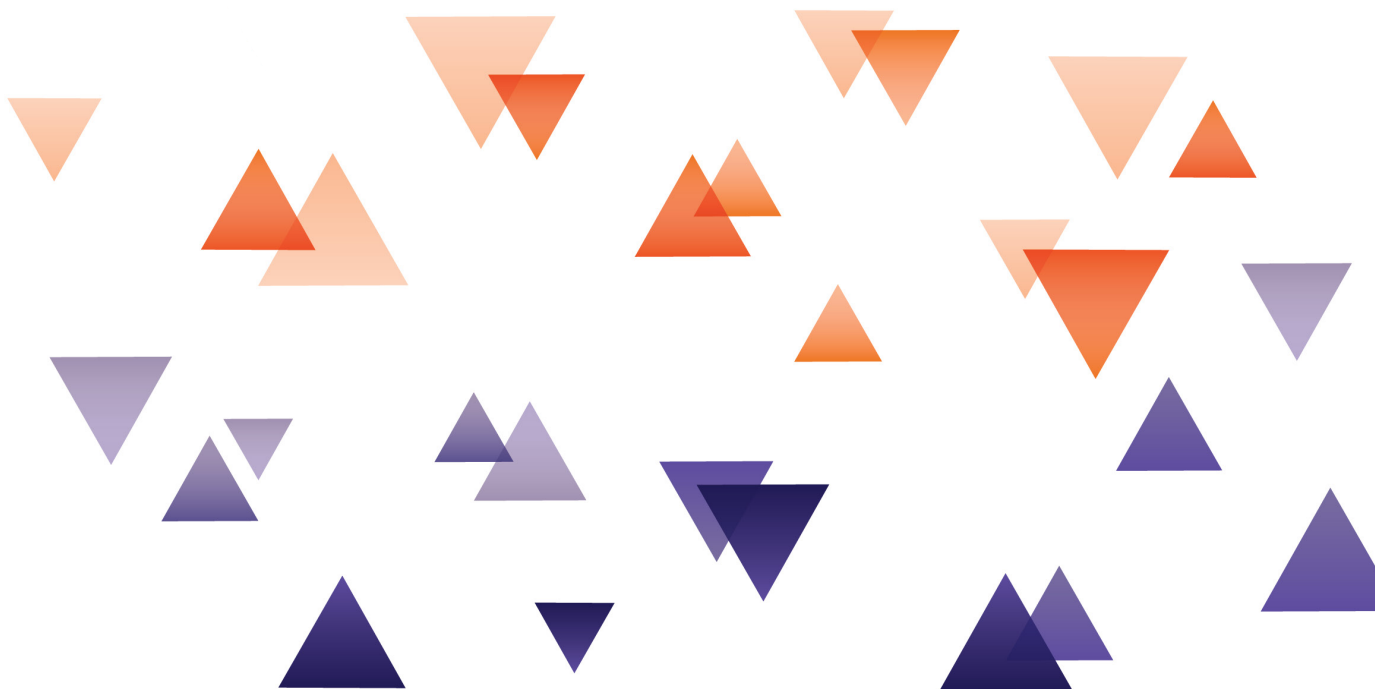
**Revised policy:** Obligations of Affiliation (INST.B.30.020)

## SEPARATE INCORPORATION
*Adopted February 2019*

The adopted change clarified a requirement regarding separate incorporation and specified that the primary purpose of HLC-affiliated institutions must be higher education.

**Revised policy:** Jurisdiction (INST.B.10.010)

# CRITERIA FOR ACCREDITATION
## *Policy Number CRRT.B.10.010*

*In February 2019, HLC's Board of Trustees adopted revisions to the Criteria for Accreditation that go into effect on September 1, 2020. The revised Criteria address redundancies among Core Components and provide clarification and elaboration in needed areas that were identified through feedback from institutions and peer reviewers. The revised Criteria are provided in full below. The current Criteria are available at hlcommission.org/criteria.*

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 1 / 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 articulated publicly and operationalized throughout the institution.

1. The mission was developed through a process suited to the context of the institution.

2. The mission and related statements are current and reference 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 and related statements identify the nature, scope and intended constituents of the higher education offerings and services the institution provides.

4. The institution's academic offerings, student support services and enrollment profile are consistent with its stated mission.

5. The institution clearly articulates its mission through public information, such as statements of purpose, vision, values, goals, plans or institutional priorities.

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

1. The institution's actions and decisions demonstrate that its educational role is to serve the public, not solely the institution or any superordinate entity.

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 external constituencies and responds to their needs as its mission and capacity allow.

**1.C.** The institution provides opportunities for civic engagement in a diverse, multicultural society and globally connected world, as appropriate within its mission and for the constituencies it serves.

1. The institution encourages curricular or cocurricular activities that prepare students for informed citizenship and workplace success.

2. The institution's processes and activities demonstrate inclusive and equitable treatment of diverse populations.

3. The institution fosters a climate of respect among all students, faculty, staff and administrators from a range of diverse backgrounds, ideas and perspectives.

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# CRITERION 2 / INTEGRITY: ETHICAL AND RESPONSIBLE CONDUCT

The institution acts with integrity; its conduct is ethical and responsible.

## Core Components

**2.A.** The institution establishes and follows policies and processes to ensure fair and ethical behavior on the part of its governing board, administration, faculty and staff.

1. The institution develops and the governing board adopts the mission.

2. The institution operates with integrity in its financial, academic, human resources and auxiliary functions.

**2.B.** The institution presents itself clearly and completely to its students and to the public.

1. The institution ensures the accuracy of any representations it makes regarding academic offerings, requirements, faculty and staff, costs to students, governance structure and accreditation relationships.

2. The institution ensures evidence is available to support any claims it makes regarding its contributions to the educational experience through research, community engagement, experiential learning, religious or spiritual purpose and economic development.

**2.C.** The governing board of the institution is autonomous to make decisions in the best interest of the institution in compliance with board policies and to ensure the institution's integrity.

1. The governing board is trained and knowledgeable so that it makes informed decisions with respect to the institution's financial and academic policies and practices; the board meets its legal and fiduciary responsibilities.

2. The governing board's deliberations reflect priorities to preserve and enhance the institution.

3. The governing board reviews the reasonable and relevant interests of the institution's internal and external constituencies during its decision-making deliberations.

4. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests or other external parties.

5. The governing board delegates day-to-day management of the institution to the institution's administration and expects the institution's faculty to oversee academic matters.

**2.D.** The institution is committed to academic freedom and freedom of expression in 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, staff and students.

1. Institutions supporting basic and applied research maintain professional standards and provide oversight ensuring regulatory compliance, ethical behavior and fiscal accountability.

2. The institution provides effective support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff and students.

3. The institution provides students guidance in the ethics of research and use of information resources.

4. The institution enforces policies on academic honesty and integrity.

# CRITERION 3 / TEACHING AND LEARNING: QUALITY, RESOURCES, AND SUPPORT

The institution provides quality education, wherever and however its offerings are delivered.

## Core Components

**3.A.** The rigor of the institution's academic offerings is appropriate to higher education.

1. Courses and programs are current and require levels of student performance appropriate to the credential 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 offers programs that engage students in collecting, analyzing and communicating information; in mastering modes of intellectual inquiry or creative work; and in developing skills adaptable to changing environments.

1. The general education program is appropriate to the mission, educational offerings and degree levels of the institution. The institution articulates the purposes, content and intended learning outcomes of its undergraduate general education requirements.

2. 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. The education offered by the institution recognizes the human and cultural diversity and provides students with growth opportunities and lifelong skills to live and work in a multicultural world.

4. The faculty and students contribute to scholarship, creative work and the discovery of knowledge to the extent appropriate to their offerings 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 strives to ensure that the overall composition of its faculty and staff reflects human diversity as appropriate within its mission and for the constituencies it serves.

2. 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, assessment of student learning, and establishment of academic credentials for instructional staff.

3. All instructors are appropriately qualified, including those in dual credit, contractual and consortial offerings.

4. Instructors are evaluated regularly in accordance with established institutional policies and procedures.

5. 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.

6. Instructors are accessible for student inquiry.

7. Staff members providing student support services, such as tutoring, financial aid advising, academic advising and cocurricular activities are appropriately qualified, trained and supported in their professional development.

**3.D.** The institution provides support for student learning and resources for 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 offerings 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 and museum collections, as appropriate to the institution's offerings).

## CRITERION 4 / 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 ensures the quality of its educational offerings.

1. The institution maintains a practice of regular program reviews and acts upon the findings.

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 ensure 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 ensures 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 ensures that the credentials 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.

**4.B.** The institution engages in ongoing assessment of student learning as part of its commitment to the educational outcomes of its students.

1. The institution has effective processes for assessment of student learning and for achievement of learning goals in academic and cocurricular offerings.

2. The institution uses the information gained from assessment to improve student learning.

3. The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty, instructional and other relevant staff members.

**4.C.** The institution pursues educational improvement through goals and strategies that improve 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, 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 5. INSTITUTIONAL EFFECTIVENESS, RESOURCES AND PLANNING

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

## Core Components

**5.A.** Through its administrative structures and collaborative processes, the institution's leadership demonstrates that it is effective and enables the institution to fulfill its mission.

1. Shared governance at the institution engages its internal constituencies—including its governing board, administration, faculty, staff and students—through planning, policies and procedures.

2. The institution's administration uses data to reach informed decisions in the best interests of the institution and its constituents.

3. The institution's administration ensures that faculty and, when appropriate, staff and students are involved in setting academic requirements, policy and processes through effective collaborative structures.

**5.B.** The institution's resource base supports its educational offerings and its plans for maintaining and strengthening their quality in the future.

1. The institution has qualified and trained operational staff and infrastructure sufficient to support its operations wherever and however programs are delivered.

2. The goals incorporated into the mission and any related statements are realistic in light of the institution's organization, resources and opportunities.

3. The institution has a well-developed process in place for budgeting and for monitoring its finances.

4. The institution's fiscal allocations ensure that its educational purposes are achieved.

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

1. The institution allocates its resources in alignment with its mission and priorities, including, as applicable, its comprehensive research enterprise, associated institutes and affiliated centers.

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, including fluctuations in the institution's sources of revenue and enrollment.

5. Institutional planning anticipates evolving external factors, such as technology advancements, demographic shifts, globalization, the economy and state support.

6. The institution implements its plans to systematically improve its operations and student outcomes.

**PREPARING FOR THE REVISED CRITERIA**

HLC has provided multiple resources to help institutions and peer reviewers prepare for the revised Criteria, including the following:

**Crosswalk Between the Current and Revised Criteria**
hlcommission.org/criteria-crosswalk: These charts provide a summary of how the Core Components have been merged and reorganized in the revised Criteria.

**Video Presentations on the Criteria**
hlcommission.org/criteria-videos: These presentations walk through each Criterion in detail, with discussions of their content, context and intent.

# DETERMINING WHETHER AN INSTITUTION MEETS THE CRITERIA

HLC reviews institutions against the Criteria and Core Components according to the evaluative framework described in HLC policy (INST.A.10.020):

### 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 to the extent opportunities for improvement exist, peer review or a decision-making body has determined that monitoring is not required; 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, and peer review or a decision-making body has determined that monitoring is required to assure that the institution ameliorates the concerns.

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.

### 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 to the extent opportunities for improvement exist, peer review or a decision-making body has determined that monitoring is not required; 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, and peer review or a decision-making body has determined that monitoring is required to assure that the institution ameliorates the concerns.

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. For purposes of compliance with the Criteria for Accreditation, findings of "met" and "met with concerns" both constitute compliance.

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.

# GLOSSARY OF CRITERIA TERMINOLOGY

This glossary explains how these words are used within the Criteria for Accreditation. Its intent is not to prescribe how institutions must use a particular word or phrase locally, but rather to offer a means to ensure a consistent reading of the meaning and expectations of the Criteria for Accreditation. It is not part of the Criteria policy and will be updated as needed to respond to questions and feedback from institutions and peer reviewers.

### ACADEMIC FREEDOM / 2.D.

The ability to engage differences of opinion, evaluate evidence and form one's own grounded judgments about the relative value of competing perspectives. This definition implies not just freedom from constraint but also freedom for faculty, staff and students to work within a scholarly community to develop intellectual and personal qualities.

### ACADEMIC OFFERINGS

Any educational experience offered at an institution for academic credit. This includes, but is not limited to, degree and certificate programs and courses.

### APPROPRIATE TO HIGHER EDUCATION / 3.A.

Curricular and cocurricular programming of the quality and rigor for the degree level that prepares students to think critically and function successfully. It is distinctly different from K-12 education.

### AUTONOMOUS / 2.C.

The institution's governing board acts independently of any other entity in determining the course of direction and policies for the institution.

## AUXILIARY / 2.A.

Activities and services related to, but not intrinsic to, educational functions: dining services, student housing, faculty or staff housing, intercollegiate athletics, student stores, a Public Radio station, etc. In many institutions, "auxiliary" simultaneously denotes a segregated budget and dedicated revenues.

## CAPACITY / 1.A., 5.C.

An institution's ability to effectively deliver its educational offerings. Determining capacity refers to an institution's demonstrable ability to establish and maintain academic quality. Indicators of sufficient capacity may include, but are not limited to, the following:

- Financial resources to support academic offerings at start-up and in the future.

- Evidence of planning that allocates necessary resources and shows ongoing development.

- Alignment of academic offerings with the institution's mission and evidence of the institution's long-term commitment.

- Evidence of new or revised policies and procedures that demonstrate commitment and sustainability.

- Qualified faculty and staff to serve students.

- Learning environments (whether classrooms, laboratories, studios or online infrastructure) with technological resources and equipment.

- Print and electronic media and support for the access and use of the technological resources across modalities.

## CIVIC ENGAGEMENT / 1.C.

Community service or any number of other efforts (by individuals or groups) intended to address issues of public or community concern.

## COCURRICULAR / 3.C., 4.B.

Learning activities, programs and experiences that reinforce the institution's mission and values and complement the formal curriculum. Examples: Study abroad, student-faculty research experiences, service learning, professional clubs or organization, athletics, honor societies, career services, etc.

## CONSORTIAL ARRANGEMENT / 3.A., 3.C.

An arrangement in which an HLC-accredited institution develops an agreement with an institution or group of institutions, all of which are accredited by accreditors recognized by the U.S. Department of Education—that is, the consortial party(ies)—through which the consortial party(ies) agree to provide some portion of one or more educational programs (i.e., degrees or certificates offered for academic credit) offered by the HLC-accredited institution.

## CONTROL / 2.B.

The entity that is responsible for the fiscal and operational oversight of an institution and its programs. Control also includes the structure and organizational arrangements of an institution. Examples include, but are not limited to, the following:

- The state board or agency that oversees a public university.

- The board of trustees that oversees a private, nonprofit college.

- The parent corporation of a private, for-profit college.

- The public board authorized by Congress to oversee an institution under federal control.

- Religious bodies and tribal councils.

## DUAL CREDIT / 3.C., 4.A.

Courses taught to high school students for which the students receive both high school credit and college credit. These courses or programs are offered under a variety of names; the Core Components that refer to "dual credit" apply to all of them as they involve the accredited institution's responsibility for the quality of its offerings.

## GOOD PRACTICE / 4.B., 4.C.

Practice that is based in the use of processes, methods and measures that have been determined to be successful by empirical research, professional organizations and/or institutional peers.

## INFORMED CITIZENSHIP / 1.C.

Having sufficient and reliable information about issues of public concern and having the knowledge and skills to make reasonable judgments and decisions about them.

## OPERATIONAL STAFF / 5.B.

Personnel who support the academic enterprise, such as those who may work in the areas of finance, human resources, facilities, dining/catering, information technology, planning, security, student services, academic support, etc.

## PUBLIC / 1.A.

In phrases such as "makes available to the public" or "states publicly," this refers to people in general, including current and potential students. In phrases such as "the public good," the Criteria refer to public, as opposed to private, good.

## PUBLIC INFORMATION / 1.A.

Information publicly available on websites or other materials that are available freely to the public, without having to ask specifically for it.

## STUDENT OUTCOMES / 5.C.

Education-specific results to measure against the objectives or standards for the educational offerings. Examples could be results from licensure or standardized exams, course and program persistence, graduation rates and workforce data.

## SUPERORDINATE ENTITY / 1.B.

An entity situated hierarchically above the institution, which includes but is not limited to state boards, private owners, corporate parents, Tribal councils or religious denominations.

## UNDUE INFLUENCE / 2.C.

Overreach, suspicious transactions and relationships that are exclusive (without oversight) that could yield influence over the institution's governing board.

## WHEREVER AND HOWEVER DELIVERED / 2.E., 5.B.

All modes of delivery of academic offerings and all locations, modalities and venues, including but not limited to the main campus, additional locations, distance delivery, dual credit and contractual or consortial arrangements.

# CRITERIA GUIDELINES

### Determining Qualified Faculty
hlcommission.org/qualified-faculty

HLC's *Determining Qualified Faculty* provides guidance to institutions and peer reviewers in evaluating the qualifications of faculty, including full-time, part-time, adjunct, temporary and/or non-tenure-track faculty. The guidelines highlight the Criteria for Accreditation and Assumed Practices that speak to the importance of institutions accredited by HLC employing qualified faculty for the varied and essential roles faculty members perform.

### Dual Credit
hlcommission.org/dual-credit

*Dual Credit Guidelines for Institutions and Peer Reviewers* offers institutions and peer reviewers formal guidance on the evaluation of dual credit activity at member institutions. HLC defines dual credit courses as "courses taught to high school students for which the students receive both high school credit and college credit." Dual credit programs are reviewed during an institution's comprehensive evaluation, but also may be reviewed at other times if concerns about the programs arise.

### School of Record
hlcommission.org/school-of-record

Institutions acting as a School of Record must be able to ensure academic integrity and transparency in the transcription of coursework taken abroad by students. They also must ensure appropriately trained personnel are evaluating such courses or programs and that the institution has established processes for evaluation that are applied in a consistent fashion. *School of Record Guidelines* highlights the Criteria and Assumed Practices relevant for these institutions.

### Two-Year Institutions Seeking to Offer the Baccalaureate Degree
hlcommission.org/baccalaureate

Before launching baccalaureate programs, two-year institutions must seek HLC approval through a substantive change request. As more two-year institutions seek to offer baccalaureate degrees, HLC has developed guidelines, *Two-Year Institutions Seeking to Offer the Baccalaureate Degree: Considerations of Readiness*, to assist these institutions in an internal review of readiness. The guidelines also serve as a reference to peer reviewers who may be asked to evaluate the change requests.

# PROVIDING EVIDENCE FOR THE CRITERIA

*Note: The following information is available as a separate document at* hlcommission.org/criteria.

An institution has to provide a narrative and supporting evidence that demonstrate it meets HLC's Criteria for Accreditation. A team of peer reviewers evaluates the institution to validate its argument and determine if each Core Component of the Criteria is met. HLC provides suggestions to assist institutions in thinking about possible sources of evidence. These suggestions should not be viewed by institutions or peer reviewers as an exhaustive list or be used as a checklist when preparing institutional materials or conducting a review.

## IDENTIFYING EVIDENCE

The evidence an institution provides to demonstrate that it complies with HLC's Criteria should do the following:

- Substantiate the facts and arguments presented in its institutional narrative.

- Respond to the prior peer review team's concerns and recommendations.

- Explain any nuances specific to the institution.

- Strengthen the institution's overall record of compliance with HLC's requirements.

- Affirm the institution's overall academic quality and financial sustainability and integrity.

HLC encourages institutions to provide thorough evidence and ensure that the sources it selects are relevant and persuasive. To identify compelling evidence, it may be helpful to consider the three categories of evidence presented in Black's Law: clear, corroborating and circumstantial.

### Clear evidence

Clear evidence is precise, explicit and tends to directly establish the point it is presented to support. Institutions should provide clear evidence of their compliance with each Core Component.

*Example: Clear evidence that a president was duly appointed by an institution's board would be a board resolution or meeting minutes showing a motion and vote to hire the president.*

### Corroborating evidence

Corroborating evidence is supplementary to evidence already given and tends to strengthen or confirm it. This type of evidence can be useful in illustrating points made in the institution's narrative, but it may not be persuasive to peer reviewers on its own.

*Example: Corroborating evidence that a president was duly appointed by an institution's board would be a copy of the offer letter addressed to the president.*

### Circumstantial evidence

Circumstantial evidence establishes a condition of surrounding circumstances, from which the principal fact may be inferred. This type of evidence is never sufficient on its own.

*Example: Circumstantial evidence that a president was duly appointed by an institution's board would be a copy of a letter from the president to the chair of the board, accepting the presidential appointment.*

Finally, institutions should remember the peer review team will base much of its recommendations on the evidence presented. In order to identify whether any gaps exist in the institution's evidence, it is recommended institutions analyze each Core Component from the perspective of the peer review team. Peer reviewers will consider all materials presented and ask questions if they determine information is missing, but it is ultimately the institution's responsibility to present evidence of their compliance with the Criteria.

## POSSIBLE SOURCES OF EVIDENCE

The following are examples of the types of information institutions may present in addressing the Core Components. This list was developed based on input from institutions and peer reviewers.

### Criterion 1. Mission

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

**1.A.** The institution's mission is articulated publicly and operationalized throughout the institution.

**Examples**

- Documentation of the history, development and adoption of the institution's mission statement.

- Documentation that the mission statement is regularly reviewed by the administration and reviewed and approved by the governing board.

- Documentation that academic programs, student support services and planning and budgeting priorities align with the mission (e.g., documents with budget allocations to instruction, student services, etc.).

- Enrollment profile.

- Information about new student, employee, and board member orientation that imparts the mission.

- Information about where the mission statement, purpose, vision, values, plans and goals are located and their accessibility to staff, faculty, students and the general public.

- Documentation of the policies and actions implemented or discontinued to achieve clearer alignment between an institution's practices and its mission.

- Recruitment materials.

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

**Examples**

- The institution's mission documents, if they specifically address the institution's role in the community.

- List of efforts, programs and certificates that meet community or constituent needs.

- Information about the institution's sustainability program.

- A list of partnerships and consulting arrangements with local businesses.

- Documentation of public events and series the community is able to attend.

- Documentation of the utilization of campus facilities by the community.

- Engagement of faculty, staff, and students in the community (i.e., community service, service-learning, etc.).

**1.C.** The institution provides opportunities for civic engagement in a diverse, multicultural society and globally connected world, as appropriate within its mission and for the constituencies it serves.

**Examples**

- Documentation of course-based activities that promote civic engagement, including alternative spring break experiences, capstone experiences, community service projects, international service projects, professional or clinical practicum, community-based student employment, organized mission- or faith-based services in the community, military service or entrepreneurship.

- Documentation of student or residential-life-based service or experiences, such as service clubs, fraternity or sorority service projects, athletic team service

activities, resident advisor employment or residential life service projects, or institution-led volunteer experiences.

- Documentation of extramural and independent volunteer or community service activities, including arts- and culture-based activities, children/youth-based service, human rights service or advocacy, public health and public policy-based activities, environmental and sustainability activities, food security/hunger-relief volunteering, church-based community service, or political campaign volunteering.

- Documentation of how diversity and inclusion are addressed in the institution's mission documents and strategic plan.

- Student demographics and enrollment strategies that demonstrate a focus on diversity and inclusion.

- List of on-campus centers, offices and committees that address societal diversity, inclusion, and/or global awareness.

- List of student organizations that support societal diversity, inclusion, and/or global awareness.

- Listing of activities that the institution hosts or participates in that emphasize diversity, inclusion, and/or global awareness.

## Criterion 2. Integrity: Ethical and Responsible Conduct

The institution acts with integrity; its conduct is ethical and responsible.

**2.A.** The institution establishes and follows policies and processes to ensure fair and ethical behavior on the part of its governing board, administration, faculty and staff.

**Important**

Please note that the sources are not exhaustive, and institutions may provide different information relevant to their specific context and mission. The examples will not be applicable to all institutions. Further, institutions are not required to use these examples, and peer reviewers should defer to institutional preference instead of requiring the sources listed. This document is not intended to serve as a checklist.

**Examples**

- Hiring qualifications and processes for faculty and staff, including a search committee procedure or handbook.

- External (independent) and internal audits since last comprehensive evaluation.

- Investment policy and documentation demonstrating compliance.

- Internal budget control policies.

- Bond rating since last comprehensive evaluation, if available.

- Schedule of and minutes for board audit and/or finance committee meetings.

- Documentation supporting ongoing training related to integrity issues and ethical behavior for all employees and board members (e.g., sexual harassment, sexual assault, campus- safety, etc.).

- Annual conflict of interest affirmation forms signed by board and senior leadership.

- Handbooks for employees (staff and/or faculty), students, student athletes (if applicable).

- List of auxiliary functions and information about each (e.g., dining services, residential life, bookstore, parking, student health services).

- Grievance policy for faculty, staff and students if not delineated in faculty, staff and student handbooks.

- Academic catalog.

- Institutional policies on non-discrimination, anti-harassment, FERPA, anti-nepotism, intellectual property, Title IX, etc.

**2.B.** The institution presents itself clearly and completely to its students and to the public.

**Examples**

- Academic catalog that includes program requirements for all degree levels.

- Course schedule for all degree levels offered.

- Published list of all current accreditations and statuses.

- Listing of tuition and fees and net price calculator.

- Faculty and staff roster.

- Recruitment and admissions documents for prospective students indicating requirements for institutional and program entry.

- Information pertaining to the entity that is responsible for the fiscal and operational oversight of the institution.

- Sample evaluations of activities that support the learning claimed in activity.

- A sample of academic student organizations and clubs demonstrating the diversity of groups on campus.

- Agendas and minutes from student athlete advisory committee and/or student government association.

- Information about athletic academic services.

- A list of fine arts offerings.

- Documentation of partnerships with internal and external entities to offer community service opportunities or service-learning experiences.

- Documentation of any volunteer clubs and detail of student participation.

- Campus newspapers, magazines, radio programming, and/or cable TV shows.

- List of cultural events and research and academic symposiums.

- Study abroad opportunities.

**2.C.** The governing board of the institution is autonomous to make decisions in the best interest of the institution in compliance with board policies and to ensure the institution's integrity.

**Examples**

- Board manual, policies and bylaws, including a conflict of interest policy.

- List and bios of board members.

- Documentation of the selection process for board members and for selection of chair, vice- chair, etc.

- Dates, agendas and minutes of board meetings for multiple years (and town hall or community meetings with the board).

- On-boarding and orientation process for new board members.

- Information about professional development and training for board members.

- Board approval of planning and budgeting documents.

- Board selection, evaluation, and right to terminate president of institution.

- Board self-evaluation.

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

**Examples**

- Institutional learning principles.

- Listing of activities supported and sponsored by the institution that allow for a discussion of varying views and opinions.

- Policy on freedom of expression and/or academic freedom.

- Course listing including the range of options for general education courses.

- Policies and procedures for peaceful assembly of students.

- Statement on censorship.

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

**Examples**

- Research opportunities and policies.

- Policy on academic integrity.

- Protocol, bylaws, and training documentation for Institutional Review Board (or similar entity).

- Institutional animal care and research policy, if appropriate.

- Training programs on plagiarism, citations, use of library resources, online research, etc.

- Applicable policies and procedures in student and faculty handbooks, including student honor code.

- Judicial affairs or student conduct meeting and training agendas.

- Information about sponsored program and grant office.

- Documentation of research symposia, highlighting faculty and student scholarship.

**Criterion 3. Teaching and Learning: Quality, Resources and Support**

The institution provides quality education, wherever and however its offerings are delivered.

**3.A.** The rigor of the institution's academic offerings is appropriate to higher education.

**Examples**

- Academic catalog.

- Documentation that the institution is in compliance with federal policy for credit hour requirements, where appropriate.

- Agendas and minutes from graduate council, faculty senate and/or curriculum review committee meetings.

- Examples of course- and program-learning goals for each degree level across all modes and locations.

- A syllabus template or guidelines for course outlines.

- Documentation that supports the method in which the institution determines program levels, e.g., Bloom's Taxonomy of Learning Domains or other methodology or framework.

- Program-level admission requirements.

- External reviews conducted of programs.

- Documentation of any linkages between undergraduate and graduate level programs and differentiation of student learning outcomes by level.

**3.B.** The institution offers programs that engage students in collecting, analyzing and communicating information; in mastering modes of intellectual inquiry or creative work; and in developing skills adaptable to changing environments.

**Examples**

- Documentation of the process for developing curriculum and course outlines.

- List of graduate and undergraduate internship and practicum program sites.

- Agendas and minutes of committees related to educational programs.

- Departmental improvement plans.

- Agendas, minutes and activities of multicultural committees.

- General education learning goals and curriculum.

- Notification from the state that the institution meets the state requirements for general education coursework, if applicable.

- Notable faculty and student achievements relative to scholarship and creative work.

- Dual credit guidelines.

- Documentation that programs meet programmatic accreditation requirements.

- Research symposia.

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

**Examples**

- Statement on faculty expectations and minimum qualifications.

- Student-to-faculty ratio (overall, on-ground, online).

- Faculty handbook.

- Summary of qualifications of Student Affairs staff.

- Documentation of professional development and training opportunities for staff and faculty, including support for instructional design.

- Sabbatical policy.

- Complete faculty roster (full-time, part-time, adjunct, online, dual credit) with information on highest degree and teaching content area with evidence of courses taught.

- Guidelines and process for hiring faculty (includes full-time, part-time, adjunct, online, dual credit) that are in compliance with HLC and specialized accreditors, as appropriate.

- Faculty and staff professional development plans and annual evaluations.

- Orientation program for all faculty (includes full-time, part-time, adjunct, online, dual credit).

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

**Examples**

- Student handbook.

- Academic catalog.

- List of student support services, disability services, financial aid, advising, career counseling, campus childcare, cocurricular activities and health services (include for all modalities).

- Information about writing and math assistance, tutoring programs, or other support provided to students.

- Schedule or documentation of student activities, programming and organizations.

- List of veterans' affairs office activities.

- Listing of remedial or developmental courses.

- Documentation on how campus advising works (matriculation through graduation).

- Information about computer labs, clinical sites, scientific labs and performance spaces.

- First-year experience program (academic and cocurricular).

- Documentation of undergraduate and graduate student processes and research.

- Documentation of programming offered by residence life and student affairs.

- Plagiarism and academic integrity training.

- Information about libraries and resources (e.g., interlibrary loan, reference services, Ask a Librarian).

- Information about utilization of data from internal resources and external national surveys, such as the National Survey of Student Engagement or Community College Survey of Student Engagement.

### Criterion 4. 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.

**4.A.** The institution ensures the quality of its educational offerings.

**Examples**

- Program review policy, processes, schedule and guidelines.

- Sample program review.

- Program advisory board agendas and minutes. Curriculum review committee minutes.

- Transfer credit policies, course equivalency guides, and credit validation process for prior learning and third-party providers.

- Transfer student resources.

- Advanced Placement and College Level Examination Program policies and procedures.

- Academic catalog, specifically information about transfer credit and experiential learning.

- Internal and external curricular review process.

- Guidelines for hiring faculty and a hiring process.

- Dual credit programs and guidelines.

- Published list of all current accreditations and statuses.

- Data on where students go after graduation, 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).

- State degree requirements and evidence of compliance.

- Documentation of a process for reviewing, approving and implementing new programs.

- Licensure or certification exam results.

- Surveys of alumni.

- Articulation agreements with other institutions.

- Documentation of engagement of faculty, academic administration, and governing board in academic program review process.

**4.B.** The institution engages in ongoing assessment of student learning as part of its commitment to the educational outcomes of its students.

**Examples**

- General education and course, program- and institutional-level learning goals and outcomes.

- Annual reports of the assessment process.

- Faculty senate minutes.

- Curriculum maps.

- Faculty expectations and evaluation processes.

- Assessment and/or curriculum committee minutes.

- Meeting minutes and agendas demonstrating departmental use of assessment data with evidence of action taken based on review and analysis of data.

- Institutional learning outcomes and rubrics.

- Documentation of cocurricular assessment and improvements based on data.

- Assessment plan and/or process and calendar/ cycle.

- Documents and reports using direct measures for assessment of student learning.

**4.C.** The institution pursues educational improvement through goals and strategies that improve retention, persistence and completion rates in its degree and certificate programs.

**Examples**

- Current rates of and goals for institutional persistence, retention and completion (include the institution's definitions of these terms).

- Strategies or initiatives implemented based on review and analysis of data to make improvements in persistence, retention and completion, such as agendas, meeting minutes and action items of units working in these areas.

- Enrollment management plan.

- Documentation of a consortium for student retention data exchange.

- Information about the institution's student success center.

- Documentation of utilization of datasets to make improvements.

- Analysis of graduation and retention rates by distinctive student populations (e.g., age, gender, race, ethnicity, first-generation status).

- Documentation of campus services to support student needs (e.g., writing center, math tutoring, study skills, time management, etc.).

- Suspension and probation trends.

- Student advising procedures and policies.

- Participation in Federal TRiO programs as it relates to persistence, completion, and retention, if applicable.

- Student exit survey results and action taken to address as applicable.

## Criterion 5. Institutional Effectiveness, Resources and Planning

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

**5.A.** Through its administrative structures and collaborative processes, the institution's leadership demonstrates that it is effective and enables the institution to fulfill its mission.

### Examples

- List of campus committees and teams, such as faculty or university senate, assessment committee, general education committee, library committee, etc.

- Bylaws, policies, procedures and schedules for the institution's faculty or university senate, student government association, staff senate or council, and governing board.

- Documentation outlining the organizational structure.

- Document resolutions and meeting minutes of different constituent groups.

- Agendas and minutes of governing board demonstrating knowledge and oversight of finances and academic functions.

**5.B.** The institution's resource base supports its educational offerings and its plans for maintaining and strengthening their quality in the future.

### Examples

- Independent audited financial statements and Composite Financial Index patterns for multiple years.

- Documentation of investments in facilities and technology, including deferred maintenance.

- Campus master plan including additions and deferred maintenance.

- Policy for faculty and staff credentials.

- Information about training and professional development for faculty and staff.

- Documentation of strategic plan investments.

- Budget requests and procedures delineating flow of decision making.

- Projected budgets/Pro-forma.

- Compliance with bank covenants and lines of credit.

- Endowment drawdown policy.

- Process for monitoring expenses.

- Mission statement and activities of institution's foundation or advancement office.

- Fundraising documentation and results.

- Enrollment plan, current enrollment and projections.

- Allocation of budget for instruction, strategic plan, mission, professional development, etc.

- Duration and amount of grants received by the institution.

- Evidence of linkage to planning initiatives related to current educational programs.

- Collective bargaining agreement(s).

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

### Examples

- History and process of strategic plan creation and constituencies involved.

- Annual updates to strategic plan.

- Budget requests and procedure for budget planning.

- Budget allocation by major area.

- Budget projections for multiple years.

- Enrollment management plan.

- Environmental scan results.

- Evidence of resources used to aid in planning activities, such as, state reports on demographics, industry/vocational employment demands, etc.

- Facilities and technology plans.

- Evidence of attainment of strategic planning goals.

- Documentation delineating linkage between planning, budgeting and evaluation/assessment.

- Retention and completion data and reports.

- Student success data and reports.

- Documentation of institutional effectiveness plans and strategies, including goals and measurable outcomes for identified functional areas.

- Student learning and academic program assessment documentation.

- Documentation regarding assessments of and satisfaction with facilities, libraries, technology, human resources, security, and other services (e.g., counseling, dining, residence life, student recreation, student activities, parking, etc.).

- Key performance indicators/dashboard.

- Meeting minutes, agendas and/or task lists indicating review and analysis of data to inform improvements of operational activities (e.g., counseling, residence life, information technology, parking, student activities).
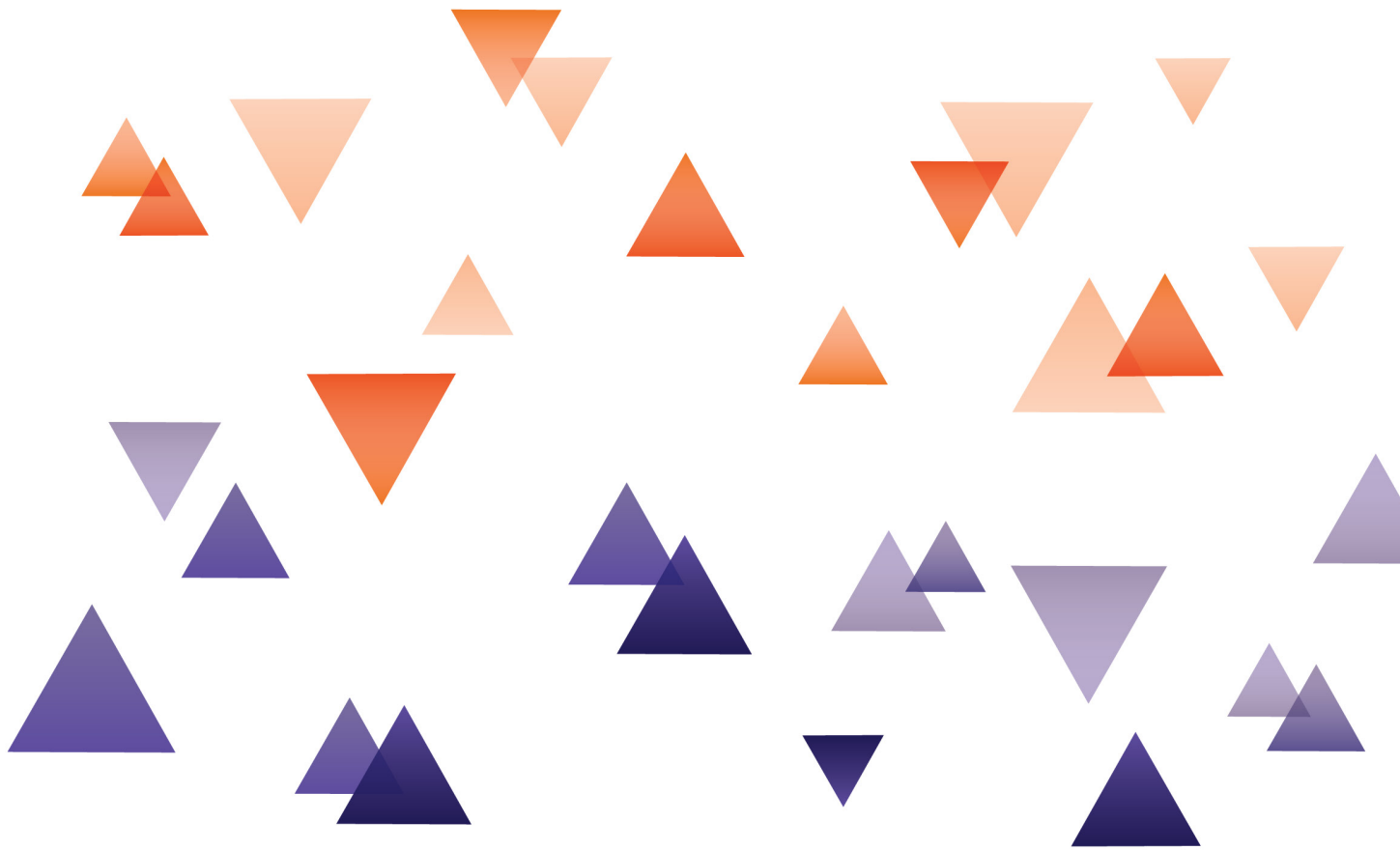
# ASSUMED PRACTICES
## *Policy Number CRRT.B.10.020*

*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

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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 remains in compliance at all times with state laws including laws related to authorization of educational activities and consumer protection wherever it does business and state law applies.

11. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.

12. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.

## 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.)

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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.

d. 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. Qualified faculty members are identified primarily by credentials, but other factors, including but not limited to equivalent experience, may be considered by the institution in determining whether a faculty member is qualified. 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. Faculty teaching general education courses, or other non-occupational courses, hold a master's degree or higher in the discipline or subfield. If a faculty member holds a master's degree or higher in a discipline or subfield other than that in which he or she is teaching, that faculty member should have completed a minimum of 18 graduate credit hours in the discipline or subfield in which they teach.

b. Instructors teaching in graduate programs should hold the terminal degree determined by the discipline and have a record of research, scholarship or achievement appropriate for the graduate program.

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

d. Faculty participate substantially in:

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

   b. assurance of consistency in the level and quality of instruction and in the expectations of student performance;

   c. establishment of the academic qualifications for instructional personnel;

   d. 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.

## 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.

## 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.)

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

# OBLIGATIONS OF AFFILIATION
## Policy Number: INST.B.30.020

*The Obligations of Affiliation below include changes adopted by HLC's Board of Trustees in June 2019 that will go into effect on September 1, 2020. Policy wording to be deleted or revised is shown as strikethrough (old wording); new policy language, whether through addition or revision, is shown in bold (**new wording**).*

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 website, linking users directly to the institution's status on the Commission's website.

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 website a telephone number that includes an option for both current students and the public to speak with a representative of the institution.

**Find It Online**
hlcommission.org/obligations

12. **The institution ensures that any information submitted to the Commission generally will not include unredacted personally identifiable information (PII). If the institution submits information with unredacted PII because it is necessary for evaluative purposes or otherwise, it will clearly identify the information as such, if applicable.**

~~12~~ 13. The institution submits timely payment of dues and fees and accepts the fact of surcharges for late payment.

~~13~~ 14. 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.

~~14~~ 15. The institution agrees that in the event it, or any third party with which the institution has a current or former contractual relationship, takes legal action against the Higher Learning Commission related to any accreditation action, and the institution or third party withdraws from that action or loses its case, to the extent allowed by state and tribal law the institution shall be responsible for all expenses, including but not limited to attorney, expert witness, and related fees, incurred by the Commission in defending the action.

## 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 Accreditation Status along with the reason for the Administrative Probation.

## PERSONALLY IDENTIFIABLE INFORMATION GUIDELINES

hlcommission.org/pii

HLC has provided guidelines on personally identifiable information (PII) to help institutions and peer reviewers prepare for the policy change that goes into effect in September 2020. PII is any information about an individual that allows the individual to be specifically identified. This includes, but is not limited to: name, address, telephone number, birthday, email, social security number, bank information, etc. A document does not include PII if personal information is de-identified or is provided in the aggregate.

When submitting information and documents to HLC, institutions are asked to carefully consider whether information or documents containing PII must be included. If the information or documents must be included for evaluative purposes, institutions should redact the PII where possible. If redaction of the PII will interfere with the evaluative value of the document, institutions should clearly identify the document as containing PII (for example, through a cover page or prominent notation on the document). Institutions are not expected to redact or identify information or documents where the only PII included is employee or Board member names and work contact information.
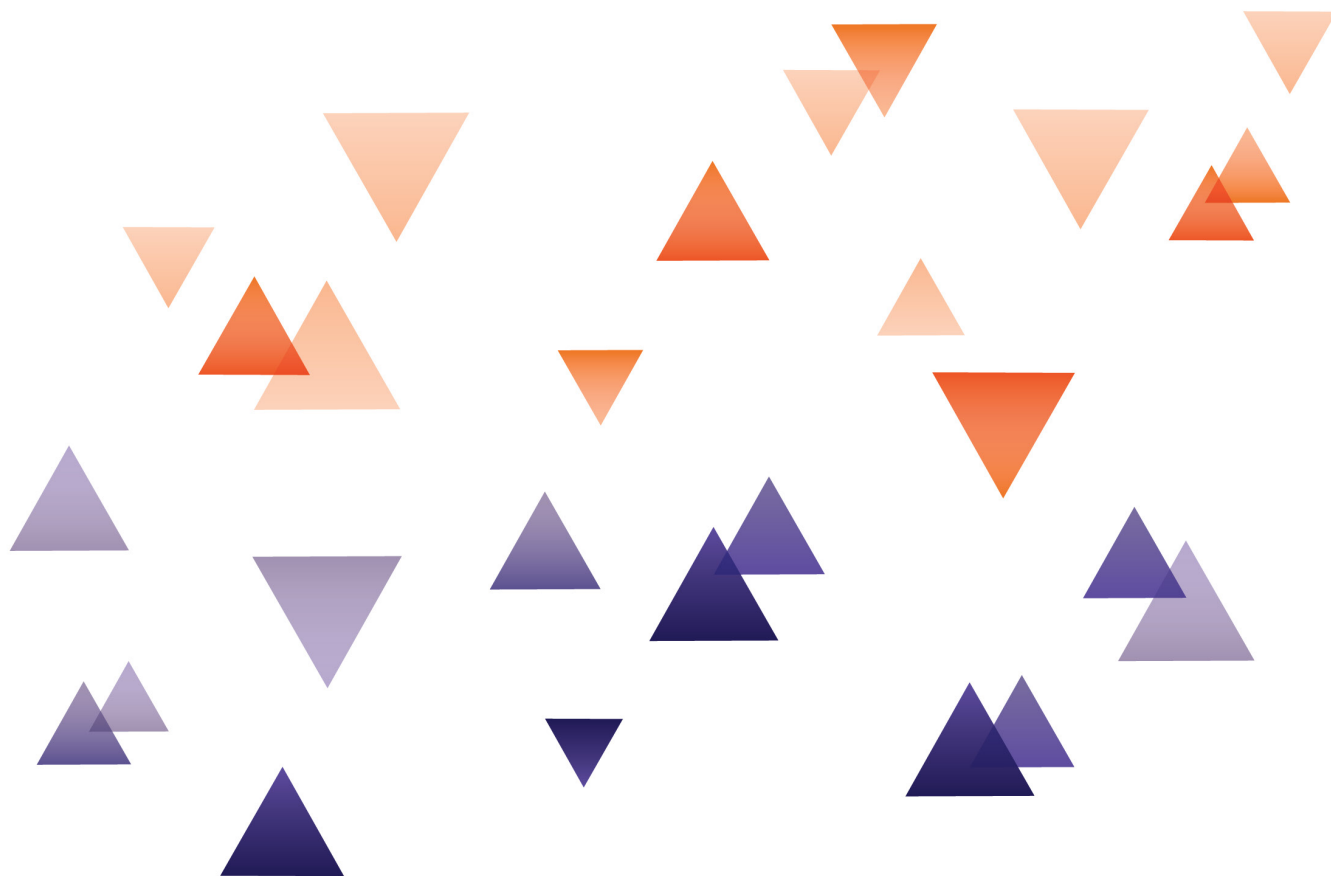
# PROCEDURES

## GUIDING VALUES

*The Higher Learning Commission's Criteria for Accreditation reflect a set of guiding values. HLC articulates these guiding values so as to offer a better understanding of the Criteria and the intentions that underlie them.*

The responsibility for assuring the quality of an institution rests first with the institution itself. Institutional accreditation assesses the capacity of an institution to assure its own quality and expects it to produce evidence that it does so.

Many of the Criteria for Accreditation should be understood in this light. HLC expects the governing board to ensure quality through its governance structures, with appropriate degrees of involvement and delegation. HLC emphasizes planning because planning is critical to sustaining quality. Assessment of student learning and focus on persistence and completion are ways in which the institution improves and thus assures the quality of its teaching and learning.

HLC expects that institutions have the standards, the processes and the will for quality assurance in depth and throughout its educational offerings.

## 1 FOCUS ON STUDENT LEARNING

For the purpose of accreditation, HLC regards the teaching mission of any institution as primary. Institutions will have other missions, such as research, health care and public service, and these other missions may have a shaping and highly valuable effect on the education that the institution provides. In the accreditation process, these missions should be recognized and considered in relation to the teaching mission.

**Find It Online**
hlcommission.org/guiding-values

A focus on student learning encompasses every aspect of students' experience at an institution: how they are recruited and admitted; costs they are charged and how they are supported by financial aid; how well they are informed and guided before and through their work at the institution; the breadth, depth, currency and relevance of the learning they are offered; their education through cocurricular offerings; the effectiveness of their programs; and what happens to them after they leave the institution.

# 2 EDUCATION AS A PUBLIC PURPOSE

Every educational institution serves a public purpose. Public or state-supported institutions make that assumption readily. Not-for-profit institutions receive their tax-exempt status on the basis of an assumption that they serve a public purpose. And although it may appear that a for-profit institution does not require a public purpose, because education is a public good its provision serves a public purpose and entails societal obligations. Furthermore, the provision of higher education requires a more complex standard of care than, for instance, the provision of dry-cleaning services. What the students buy, with money, time and effort, is not merely a good, like a credential, but experiences that have the potential to transform lives, or to harm them. What institutions do constitutes a solemn responsibility for which they should hold themselves accountable.

# 3 EDUCATION FOR A DIVERSE, TECHNOLOGICAL, GLOBALLY CONNECTED WORLD

A contemporary education must recognize contemporary circumstances: the diversity of U.S. society, the diversity of the world in which students live, and the centrality of technology and the global dynamic to life in the 21st century. More than ever, students should be prepared for lifelong learning and for the likelihood that no job or occupation will last a lifetime. Even for the most technical qualification, students need the civic learning and broader intellectual capabilities that underlie success in the workforce. HLC distinguishes higher education in part on the basis of its reach beyond narrow vocational training to a broader intellectual and social context.

# 4 A CULTURE OF CONTINUOUS IMPROVEMENT

Continuous improvement is the alternative to stagnation. Minimum standards are necessary but far from sufficient to achieve acceptable quality in higher education, and the strongest institutions will stay strong through ongoing aspiration. HLC includes improvement as one of two major strands in all its pathways, the other being assurance that member institutions meet the Criteria and the Federal Requirements.

A process of assessment is essential to continuous improvement, and therefore a commitment to assessment should be deeply embedded in an institution's activities. Assessment applies not only to student learning and educational outcomes but to an institution's approach to improvement of institutional effectiveness.

For student learning, a commitment to assessment would mean assessment at the program level that proceeds from clear goals, involves faculty at all points in the process, and analyzes the assessment results; it would also mean that the institution improves its programs or ancillary services or other operations on the basis of those analyses. Institutions committed to improvement review their programs regularly and seek external judgment, advice or benchmarks in their assessments. Because in recent years the issues of persistence and completion have become central to public concern about higher education, the current Criteria direct attention to them as possible indicators of quality and foci for improvement, without prescribing either the measures or outcomes.

Innovation is an aspect of improvement and essential in a time of rapid change and challenge; through its Criteria and processes HLC seeks to support innovation for improvement in all facets of institutional practice.

# 5 EVIDENCE-BASED INSTITUTIONAL LEARNING AND SELF-PRESENTATION

Assessment and the processes an institution learns from should be well grounded in evidence. Statements of belief and intention have important roles in an institution's presentation of itself, but for the quality assurance function of accreditation, evidence is critical.

Institutions should be able to select evidence based on their particular purposes and circumstances. At the same time, many of the Assumed Practices within the Criteria require certain specified evidence.

## 6 INTEGRITY, TRANSPARENCY AND ETHICAL BEHAVIOR OR PRACTICE

HLC understands integrity broadly, including wholeness and coherence at one end of the spectrum and ethical behavior at the other. Integrity means doing what the mission calls for and not doing what it does not call for: governance systems that are freely, independently and rigorously focused on the welfare of the institution and its students; scrupulous avoidance of misleading statements or practices; full disclosure of information to students before students make any commitment to the institution, even a commitment to receive more information; and clear, explicit requirements for ethical practice by all members of the institutional community in all its activities.

## 7 GOVERNANCE FOR THE WELL-BEING OF THE INSTITUTION

The well-being of an institution requires that its governing board place that well-being above the interests of its own members and the interests of any other entity. Because HLC accredits the educational institution itself and not the state system, religious organization, corporation, medical center or other entity that may own it, HLC holds the governing board of an institution accountable for the key aspects of the institution's operations. The governing board must have the independent authority for such accountability and must also hold itself independent of undue influence from individuals, be they donors, elected officials, supporters of athletics, shareholders, or others with personal or political interests.

Governance of a quality institution of higher education will include a significant role for faculty, in particular with regard to currency and sufficiency of the curriculum, expectations for student performance, qualifications of the instructional staff, and adequacy of resources for instructional support.

## 8 PLANNING AND MANAGEMENT OF RESOURCES TO ENSURE INSTITUTIONAL SUSTAINABILITY

HLC does not privilege wealth. Students do expect, however, that an institution will be in operation for the duration of their degree programs. Therefore, HLC is obliged to seek information regarding an institution's sustainability and, to that end, wise management of its resources. HLC also watches for signs that an institution's financial challenges are eroding the quality of its programs to the point of endangering the institution's ability to meet the Criteria. Careful mid- and long-range planning must undergird an institution's budgetary and financial decisions.

## 9 MISSION-CENTERED EVALUATION

HLC understands and values deeply the diversity of its institutions, which begins from the diversity of their missions. Accordingly, mission in some degree governs each of the Criteria. HLC holds many expectations for all institutions regardless of mission, but it expects that differences in mission will shape wide differences in how the expectations are addressed and met.

## 10 ACCREDITATION THROUGH PEER REVIEW

Peer review is the defining characteristic of accreditation and essential for a judgment-based process in a highly complex field. But self-regulation can be met with public skepticism. Therefore, peer review for accreditation must (1) be collegial, in the sense of absolute openness in the relationship between an institution and the peer reviewers assigned to it as well as between the institution and HLC; (2) be firm in maintaining high standards, not mistaking leniency for kindness or inclusiveness; and (3) be cognizant of the dual role of peer reviewers in both assuring and advancing institutional quality.

# 🏛 ACCREDITATION LIAISON OFFICER ROLE

*HLC asks each accredited and candidate institution to identify an Accreditation Liaison Officer (ALO). Along with the institution's chief executive officer (CEO), the ALO is a primary contact point between HLC and institution. They receive communications from HLC regarding policies, procedures and professional development opportunities, and are responsible for coordinating efforts to ensure their institution meets its obligations of HLC affiliation.*

## RESPONSIBILITIES

1. Serving as a recipient of HLC communications regarding the institution's accreditation, in addition to the CEO.

2. Disseminating information and answering questions about HLC policies and procedures for all audiences within the institution.

3. Staying current with HLC policies and procedures.

4. Providing oversight and direction for the institution's Data Update Coordinator to ensure the currency, accuracy and timeliness of information submitted to HLC as part of the Institutional Update.

5. Providing oversight and direction for the timely submission of substantive change requests and reports required by HLC policy.

6. Facilitating responses to HLC inquiries, including complaints referred by HLC staff to the CEO.

7. Maintaining the institution's file of official documents and reports related to the institution's relationship with HLC.

8. Providing comments to HLC as requested in its consideration of proposed policies, procedures and issues affecting the accreditation relationship.

9. Ensuring that any changes in basic institutional information or to the primary institutional contacts (including the CEO, ALO, Data Update Coordinator and Chief Financial Officer) are reported to HLC.

10. Ensuring that the institution meets its financial obligations to HLC through the timely payment of dues and fees.

## RESOURCES

### ALO TRAINING

HLC has developed online and in-person trainings for ALOs to learn more about their role and the expectations and processes for HLC accreditation. See hlcommission.org/alo-training for more information and upcoming offerings.

### INSTITUTIONAL STATUS AND REQUIREMENTS REPORT

The Institutional Status and Requirements (ISR) Report is a resource to allow ALOs or CEOs to review information regarding the institution's accreditation relationship with HLC. This report is intended to inform the institution only and is not available to the public. The report may be requested by the ALO or CEO of the institution by using the request form at hlcommission.org/isr-request.

Features of the ISR Report include complete institutional history with HLC, information on the status of current or upcoming accreditation events, and information on the institution's designated Pathway for Reaffirmation of Accreditation and related events.

### HLCOMMISSION.ORG

HLC's website, at hlcommission.org, provides in-depth information regarding HLC's policies, procedures and programs and events.

### HLC STAFF LIAISON

HLC assigns each accredited and candidate institution a vice president of accreditation relations, also known as a staff liaison, who serves as an institution's primary contact. ALOs should contact their institution's staff liaison with questions related to the institution's status with HLC and any accreditation process. Staff liaisons are available by

email or phone and are available to visit with institutions to discuss more substantive issues related to accreditation.

A staff liaison's responsibilities include the following:

**Advising the institution about the policies and procedures of HLC.**

- Providing historical information about the institution's relationship with HLC.

- Identifying HLC resources that may help the institution manage its accreditation.

- Facilitating accreditation processes.

- Managing expectations related to institutional change.

- Advising on the institutional preparation for upcoming evaluations.

- Counseling an institution regarding the transition to a new Pathway for Reaffirmation of Accreditation.

**Coordinating the peer review and decision-making process.**

- Identifying and preparing peer review teams for institutional evaluations.

- Reviewing reports and finalizing documents to facilitate decision making by established HLC decision-making bodies.
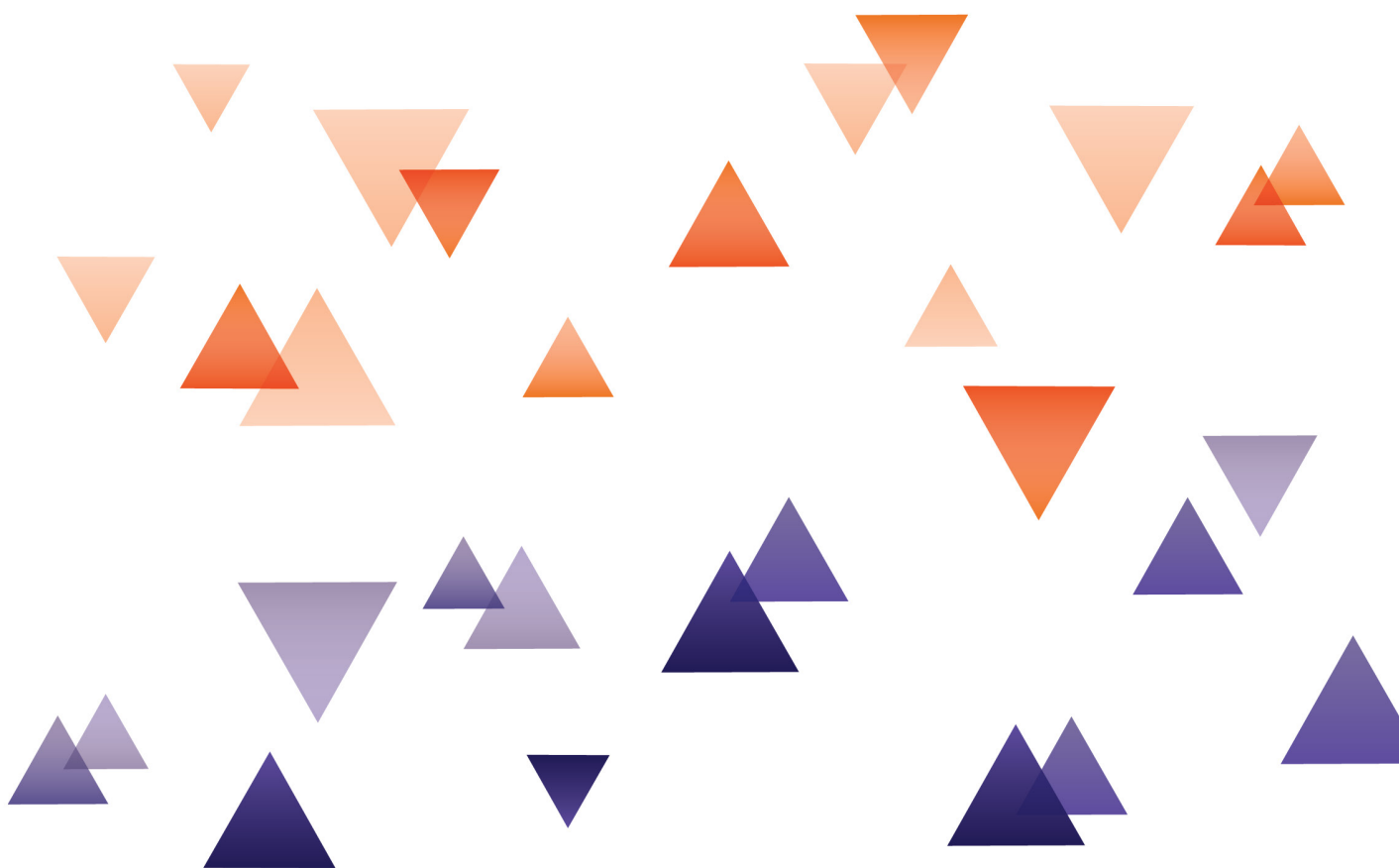
# 👥 PEER CORPS

*HLC relies upon the work of peer reviewers for its accrediting activities. Members of the Peer Corps play various roles in all stages of the accreditation process. These volunteers generously share their knowledge and experience to assure and advance institutional quality. The Peer Corps currently consists of approximately 2,000 faculty, administrators and staff who are currently employed or recently retired from an HLC-accredited institution.*

## REMINDERS FOR CURRENT PEER REVIEWERS

### Peer Reviewer Profiles

All peer reviewers are required to maintain an up-to-date profile in HLC's online Peer Reviewer Data Update System (PRDUS). The profile includes contact information, education history, work experience and other expertise. It is used by HLC staff members to set review teams and communicate with peer reviewers. Review and update your profile at prdus.hlcommission.org.

*Please Note: HLC shares training registration information via email. To ensure you receive these notifications, whitelist HLC's main email addresses (see page 5) and keep your contact information up-to-date in the Peer Reviewer Data Update System.*

### Online Team Resources

HLC provides peer review guidelines and report templates on its website at hlcommission.org/team-resources. Information is organized by the type of review. Peer reviewers should always check this page before beginning a review to ensure they have the most current form or report template.

### Peer Reviewer Evaluations

In an effort to provide feedback to peer reviewers about their volunteer service, HLC collects information on reviewer performance after comprehensive evaluations. After final action is taken on a comprehensive evaluation, each member of the review team receives an email with links to evaluate their fellow team members. The evaluation is intended to provide reviewers with feedback about their performance on the key skills and attributes necessary for excellent peer review; it is meant to be constructive, not punitive. These evaluations also help HLC determine how to develop and refine its Peer Corps training and annual conference programs.

## BECOMING A PEER REVIEWER

HLC is not currently seeking new peer reviewers, as the Corps is adequately staffed to meet the needs of HLC's membership. Those who meet the minimum qualifications and fill any of the areas of need identified within the Corps are encouraged to apply during the next application period.

### Minimum Qualifications

* At least five years of experience in higher education.

* Master's or other appropriate terminal degree; doctorate preferred.

* Currently employed by or recently retired (within two years) from an institution accredited by and in good standing with HLC.

### Application Process

Applicants complete an online application and submit a letter describing relevant experience, a curriculum vitae or resume, and the names and contact information for two professional references. Additional details are available at hlcommission.org/peer.

# PATHWAYS FOR REAFFIRMATION OF ACCREDITATION

*Through HLC's Pathways for Reaffirmation of Accreditation, accredited institutions complete periodic reviews on a 10-year cycle to ensure they continue to meet the Criteria for Accreditation and pursue institutional improvement. These reviews take place concurrently with HLC's regular oversight activities, such as the Institutional Update, substantive change requests, institutional monitoring and other processes. There are currently two primary pathways: Standard and Open. The AQIP Pathway will be phased out at the end of the 2019–20 academic year.*

## STANDARD PATHWAY

The Standard Pathway follows a 10-year cycle. Quality assurance and institutional improvement are integrated into comprehensive evaluations conducted during the cycle, as well as through interim monitoring as required.

### Comprehensive Evaluations

Comprehensive evaluations are conducted twice in the Standard Pathway, once in Year 4 and again in Year 10. The comprehensive evaluation includes an Assurance Review, a Student Opinion Survey, an on-site visit by a team of HLC peer reviewers, and a multi-campus visit, if applicable. A Federal Compliance Review also is required during the Year 10 evaluation and any Year 4 evaluation involving Reaffirmation of Accreditation.

The institution submits an Assurance Filing that demonstrates the institution is in compliance with HLC's Criteria for Accreditation and has demonstrated institutional improvement efforts. In addition, if a previous evaluation identified an area of the institution as needing improvement, the Assurance Filing should specifically address the institution's response to those concerns.

Both comprehensive evaluations follow the same general process, but the Year 10 evaluation leads to actions by an HLC decision-making body regarding the reaffirmation of the institution's accreditation and its pathway eligibility.

Most Year 4 evaluations do not include such action, but instead determine if follow-up monitoring is necessary. An exception to this rule is made in the case of institutions that are undergoing their first comprehensive evaluation following Initial Accreditation or removal of Probation.

In these cases, Reaffirmation of Accreditation will be considered as part of the Year 4 comprehensive evaluation. If reaffirmation is granted, the institution moves to Year 5 of the Standard Pathway cycle (a change of pathway is not an outcome of a Year 4 review).

### Institutional Resources

#### Q&A Webinar

During these one-hour webinars, participants may ask questions about any topic related to the Standard Pathway, including the Assurance System, embedded improvement, monitoring, and so forth. This is not a formal presentation and attendees are encouraged to participate fully in an open exchange. Representatives from all institutions on the Standard Pathway are welcome. Upcoming webinars are listed at hlcommission.org/calendar.

#### Standard Pathway Seminars

Institutions that are within two years of a comprehensive evaluation are invited to attend a one-day, in-person seminar on addressing improvement in the Assurance Argument. At the seminar, institutional teams develop strategies to demonstrate improvement within the Criteria for Accreditation. Attendees receive assistance in formulating improvement plans and feedback on plans that have been drafted. Upcoming seminars are listed at hlcommission.org/calendar.

**Find It Online**
hlcommission.org/standard

**HLC Staff Liaison Improvement Plan Review**

HLC staff liaisons are available to review and provide feedback on an institution's improvement plan during the academic year preceding the comprehensive evaluation. The staff liaison's comments are intended to clarify expectations regarding the issues to be addressed within the Assurance Argument. For instance, an institution's HLC staff liaison may point out an area of concern the institution had missed in formulating its plan.

**Sample Assurance Arguments**

hlcommission.org/assurance-samples

Institutions can access demonstration sites that present full Assurance Filings, with Assurance Arguments and Evidence Files. They are intended to help institutions become familiar with the Assurance System and provide examples of how evidence may be organized and linked in the Assurance Argument.

**Assurance System Training Resources**

hlcommission.org/assurance-system

This webpage provides a general overview of accessing and using the Assurance System, as well as links to the user manual, training webinar and frequently asked questions.

# OPEN PATHWAY

The Open Pathway follows a 10-year cycle, with an Assurance Review in Year 4 and a comprehensive evaluation in Year 10. The Open Pathway also includes a separate improvement component, the Quality Initiative, that affords institutions the opportunity to pursue improvement projects that meet their current needs and aspirations.

## Assurance Review

In Year 4, institutions complete Assurance Reviews to ensure they are continuing to meet the Criteria for Accreditation. The institution submits an Assurance Filing that demonstrates the institution is in compliance with the Criteria and has pursued institutional improvement efforts. A peer review team evaluates these materials and makes a recommendation to the Institutional Actions Council on whether the institution is eligible to continue on the Open Pathway if monitoring is required.

Year 4 Assurance Reviews do not typically include an on-site visit, unless requested by the peer review team. In addition, institutions are not required to complete a Student Opinion Survey or Federal Compliance Review.

Note: HLC provides guidance for preparing institutional materials and conducting the Year 4 Assurance Review at hlcommission.org/open.

## Quality Initiative

Between Years 5 and 9, institutions on the Open Pathway undertake a Quality Initiative. The Quality Initiative is an independent project, separate from other review processes. Projects may begin and be completed during this period, or an institution may continue a project that is already in progress or achieve a key milestone in the course of a longer project.

Institutions submit a formal proposal for the project, which is reviewed and approved by a panel of peer reviewers. At the end of the Quality Initiative period, institutions then submit a formal report on the results of the project. A panel of peer reviewers evaluates the report and determines whether the institution has made a genuine effort to achieve the goals of the Quality Initiative.

### Demonstrating and Recognizing "Genuine Effort"

The criteria that peer reviewers use to evaluate an institution's Quality Initiative project include the following:

- An evaluation of the project's scope and significance (for example, as demonstrated by its alignment with the institution's mission, its connection to the campus's strategic plans, or in relation to its relevance or timeliness for the institution).

- A clear expression of the purpose of the project (for example, as demonstrated by clearly set and explicit goals, the identification of important milestones, or the presence of effective processes to evaluate the outcomes).

- Evidence of the institution's commitment and capacity (for example, by the presence of key personnel and the appropriate allocation of resources).

- An appropriate timeline that is consistent with the project's goals, aligned with the institution's other priorities, and reasonable within existing constraints.

The Quality Initiative Report documents how the institution has pursued its activities, allocated its resources, and collected sufficient evidence to demonstrate its effort

**Find It Online**
hlcommission.org/open

to accomplish the goals outlined in its Quality Initiative proposal. Peer reviewers evaluate the report in relation to the institution's proposal, whether or not those objectives were actually realized. A positive evaluation of the institution's efforts will be designated as "genuine effort," which conveys HLC's recognition of the project's value in relation to the effort made to improve operations or outcomes at an institution.

## Comprehensive Evaluation

In Year 10, institutions on the Open Pathway undergo a comprehensive evaluation that results in actions taken by an HLC decision-making body regarding the reaffirmation of the institution's accreditation and its pathway eligibility. The comprehensive evaluation includes an Assurance Review, a review of Federal Compliance requirements, a Student Opinion Survey and an on-site visit by a team of HLC peer reviewers. The evaluation may also include a multi-campus visit, if applicable.

During the decision-making process, the panel report from the evaluation of the institution's Quality Initiative Report will be sent to the Institutional Actions Council (IAC) along with the documentation from the comprehensive evaluation. The IAC will use the report to help determine the institution's eligibility to choose its pathway.

## Institutional Resources

### Sample Assurance Arguments

hlcommission.org/assurance-samples

Institutions can access demonstration sites that present full Assurance Filings, with Assurance Arguments and Evidence Files. They are intended to help institutions become familiar with the Assurance System and provide examples of how evidence may be organized and linked in the Assurance Argument.

### Assurance System Training Resources

hlcommission.org/assurance-system

This webpage provides a general overview of accessing and using the Assurance System, as well as links to the user manual, training webinar and frequently asked questions.

### AQIP Pathway Transition

During an evaluation of the pathways in 2017, HLC noted a sharp decrease in the number of institutions choosing to participate in the AQIP Pathway. While HLC and its Board of Trustees are fully committed to continuous quality improvement efforts, this decline signaled that HLC must rethink the way it supports such efforts. Therefore, HLC began the process of phasing out the AQIP Pathway and transitioning institutions to other pathways in 2018. The final AQIP Pathway reviews will be conducted during the 2019–20 academic year, and institutions will be fully transitioned to the Standard and Open Pathways by the start of the 2020–21 academic year. HLC is working with institutions to make the transition as smooth as possible.

# STANDARD PATHWAY CYCLE

**YEARS 1-3**

## PREPARE ASSURANCE FILING

**Institution:** May contribute documents to Evidence File and begin writing Assurance Argument for Year 4 comprehensive evaluation.

**YEAR 4**

## COMPREHENSIVE EVALUATION

**Institution:** Submit comprehensive evaluation materials.

**Peer Review:** Conduct comprehensive evaluation (with visit).

**HLC Decision Making:** Take action on comprehensive evaluation.

**YEARS 5-9**

## PREPARE ASSURANCE FILING

**Institution:** May contribute documents to Evidence File and begin writing Assurance Argument for Year 10 comprehensive evaluation.

**YEAR 10**

## COMPREHENSIVE EVALUATION FOR REAFFIRMATION

**Institution:** Submit comprehensive evaluation materials.

**Peer Review:** Conduct comprehensive evaluation (with visit).

**HLC Decision Making:** Take action on comprehensive evaluation and Reaffirmation of Accreditation.

Institutions may choose any pathway at the time of reaffirmation, unless they meet one or more of the conditions that would require placement on the Standard Pathway.

# OPEN PATHWAY CYCLE

**YEARS 1-3**

## PREPARE ASSURANCE FILING

**Institution:** May contribute documents to Evidence File and begin writing Assurance Argument for Year 4 Assurance Review.

↓

**YEAR 4**

## ASSURANCE REVIEW

**Institution:** Submit Assurance Filing (Assurance Argument and Evidence File).

**Peer Review:** Conduct Assurance Review (no visit).

**HLC Decision Making:** Acceptance of or action on Assurance Review.

↓

**YEARS 5-7**

## QUALITY INITIATIVE PROPOSAL

**Institution:** Submit Quality Initiative Proposal no later than August 31 of Year 7. May also begin preparing Assurance Filing for Year 10 comprehensive evaluation.

**Peer Review:** Review Quality Initiative Proposal.

↓

**YEARS 7-9**

## QUALITY INITIATIVE REPORT

**Institution:** Submit Quality Initiative Report no later than August 31 of Year 9. May also continue preparing Assuring Filing for Year 10 comprehensive evaluation.

**Peer Review:** Review Quality Initiative Report.

↓

**YEAR 10**

## COMPREHENSIVE EVALUATION

**Institution:** Submit comprehensive evaluation materials.

**Peer Review:** Conduct comprehensive evaluation (with visit).

**HLC Decision Making:** Take action on comprehensive evaluation and Reaffirmation of Accreditation.

Institutions may choose any pathway at the time of reaffirmation, unless they meet one or more of the conditions that would require placement on the Standard Pathway.

# FEDERAL COMPLIANCE

*As a federally recognized accrediting agency, HLC is required to assure that all of its member institutions are complying with the expectations of specific federal regulations. Compliance with these requirements by both institutions and HLC is necessary to ensure that institutions accredited by HLC are eligible for federal financial aid.*

## WHEN FEDERAL COMPLIANCE IS REVIEWED

HLC reviews an institution's compliance with federal requirements at multiple points in the accreditation relationship. Federal Compliance Reviews are conducted as part of the following evaluations:

- Comprehensive evaluations for Reaffirmation of Accreditation, regardless of when they occur.
- Comprehensive evaluations for institutions applying for candidacy or initial accreditation.
- Sanction visits for institutions on Probation (except if Probation is extended) and Show Cause.
- Advisory visits arising from questions of compliance with one or more federal requirements.

HLC may also require an institution to submit documentation related to one or more federal requirements, without an on-site evaluation necessarily occurring, whether as part of routine monitoring or under HLC's policy on Special Monitoring.

## AREAS ADDRESSED

Based on feedback from the membership and the Peer Corps and many conversations with representatives from the U.S. Department of Education, HLC significantly streamlined the Federal Compliance process in 2019. The new process cuts out redundancies related to areas that are already reviewed as part of other HLC requirements and processes and highlights the areas where information is required only for Federal Compliance.

The following areas are addressed in the Federal Compliance Process:

- Assignment of Credits, Program Length and Tuition, Assignment of Credit Hours and Clock Hours
- Institutional Records of Student Complaints

- Publication of Transfer Policies
- Practices for Verification of Student Identity
- Publication of Student Outcome Data
- Standing With State and Other Accrediting Agencies

## FEDERAL COMPLIANCE PROCESS

Institutions must submit that Federal Compliance Filing in the Assurance System before their on-site visit by a team of HLC peer reviewers. HLC will make the Federal Compliance documents available in the system six months before the institution's lock date, and HLC recommends that institutions begin compiling the necessary documentation at that point. These materials should be uploaded to the Assurance System prior to the institution's lock date.

When the institution's Assurance Filing is locked and released to the peer review team, a Federal Compliance reviewer evaluates the materials in advance of the visit and refers any issues to the on-ground team for further exploration and confirmation.

While conducting the visit, the peer review team determines whether the preliminary findings made by the Federal Compliance reviewer accurately represent the institution's compliance with all applicable requirements and requests additional documentation from the institution, if needed. If the team has concerns about the institution's compliance with federal requirements, they may recommend follow-up monitoring. This recommendation would go to an HLC decision-making body for review and final action.

**Find It Online**
hlcommission.org/federal-compliance

# ⬚ INSTITUTIONAL CHANGE

*HLC recognizes that change at institutions of higher education is constant, and it supports change to improve educational quality. HLC has outlined specific conditions under which an institution needs to inform HLC of change or obtain authorization before implementing changes.*

## TYPES OF CHANGE

Substantive changes in the following areas typically require HLC notification or prior approval:

- Academic programs, including competency-based education programs
- Access to HLC's Notification Program for Additional Locations
- Branch campuses and additional locations
- Clock or credit hours
- Contractual arrangements
- Corporate control, structure or organization
- Distance delivery
- Length of term affecting allocation of credit
- Mission or student body

Visit hlcommission.org/change for a detailed list of changes that require notification or prior approval and HLC's procedures for each. For additional information, contact changerequests@hlcommission.org.

HLC provides applications for changes that require prior HLC approval. These applications are available at hlcommission.org/change. HLC updates the applications annually, on or about September 1. However, if an application form was accessed more than 90 days prior to filing, institutions are encouraged to check HLC's website to ensure that there have been no changes to the form in the intervening time.

Most change requests are subject to a fee. HLC's fee schedule can be found online at hlcommission.org/dues. The fee schedule is updated annually, with the new or revised fees effective on September 1.

## REVIEW PROCESSES

HLC will determine the appropriate process for review of an institution's proposed change: Desk Review, Change Panel or Change Visit. Institutions requesting approval of a Change in Control, Structure or Organization will undergo a Fact-Finding Review, which can take a variety of forms depending on the nature of the request.

Recommendations from Desk Reviews, Change Panels and Change Visits are forwarded to the Institutional Actions Council (IAC) for final action. If a change request is denied, an institution may choose to resubmit the change application, addressing issues raised by the IAC, no sooner than six months after the decision unless the waiting period is waived by the IAC. HLC's Board of Trustees takes final action on requests for approval of a change in an institution's control, structure or organization.

### Desk Review

A Desk Review consists of a review conducted by HLC staff. If staff recommends that the request be approved, it is sent to the IAC for final action. If staff recommends denial, the institution is given an opportunity to review the recommendation prior to its consideration by the decision-making body. The average timeframe for this review is approximately three months.

### Change Panel

A Change Panel is made up of three HLC peer reviewers who review institutional change applications. The average timeframe for this review is six months. The Change Panel may seek additional information from the institution if such information is being sought to explain or clarify the

**Find It Online**
hlcommission.org/change

materials provided by the institution in its application for change. The panel may recommend that the change be approved, approved with modification or denied. The institution is given an opportunity to review the recommendation and provide an institutional response prior to consideration of the recommendation by the IAC. Alternatively, the panel may recommend that the change be further evaluated by an on-site evaluation team, either through a Change Visit or during a previously scheduled focused visit or comprehensive evaluation.

### Change Visit

A Change Visit involves a team of two or more HLC peer reviewers who review an institution's change application and conduct an on-site visit. The average timeframe for this review is nine months. The visit date is set for three months or more after the receipt of the change application. The peer review team may recommend that the change be approved, approved with modifications or denied. The institution is given an opportunity to review the recommendation and provide an institutional response prior to consideration of the recommendation by the IAC.

In some instances, an institution's HLC staff liaison will embed the review of a change request into an upcoming comprehensive evaluation or a previously scheduled Change Visit. Decision making for the embedded review will occur in conjunction with the associated visit. A request to embed the review of a change application into a comprehensive evaluation must be submitted at least six months in advance of the comprehensive evaluation visit.

### Review of Change of Control, Structure or Governance

An institution may be required to receive HLC approval prior to undergoing a transaction that affects, or may affect, how corporate control, structure or governance occurs at the institution. Such change requests follow a separate process and require different types of documentation. The fee schedule for Change of Control, Structure or Organization requests is also different from other change requests. The final action for these requests is made by HLC's Board of Trustees rather than the IAC. Institutions considering this type of change should contact their HLC staff liaison as early in the process as possible. More information is available at hlcommission.org/control.

## CERTIFICATE PROGRAM SCREENING FORM AND APPLICATION

Institutions are required to notify HLC or obtain prior HLC approval for all certificate or diploma programs. Institutions that are planning a new certificate or diploma program should complete the certificate program screening form, which will help determine whether prior HLC approval or notification for the program is required. Institutions also should ensure that all existing certificate or diploma programs have been previously screened through the form.

If prior approval is required, the screening form will provide instructions for submitting the change request to HLC. In most cases, this will involve submitting the Certificate Program Application, but the institution may be asked to submit additional or different applications depending on specific elements of the program. For example, an institution may need to apply for approval of a contractual arrangement related to the program. If an institution is offering a competency-based education (CBE) certificate program, it may be required to submit a CBE program application instead of the certificate application.

If HLC notification is required, completion of the screening form fulfills that requirement. The form will send the user an email indicating that the institution's HLC accreditation already encompasses its offering of the program. Institutions should keep such messages for their records.

Links to the screening form and application are available at hlcommission.org/academic-programs.

## LOCATION AND CAMPUS UPDATE SYSTEM

Institutions use the Location and Campus Update System to update HLC's records about their existing additional locations and existing branch campuses. In addition, institutions that are in the Notification Program for Additional Locations may use this system to request new additional locations. HLC gives an institution's Chief Executive Officer and Accreditation Liaison Officer access to the system by default, and institutions also may identify a Location Coordinator to manage information in the system. The Location and Campus Update System is available at lcu.hlcommission.org.

# OFF-CAMPUS ACTIVITIES

*New locations for institutions are established through HLC's institutional change process. Once approved and established, these locations are monitored through peer review visits and are subject to a decision-making process depending on the location type.*

## DEFINITIONS

### Campus or Branch Campus (same as the federal definition)

A location of an institution that is geographically apart and independent of the main campus. HLC considers a location of an institution to be independent of the main campus if the location has all four of the following attributes:

- It is permanent in nature.
- It offers courses in educational programs leading to a degree, certificate, or other recognized educational credential.
- It has its own faculty and administrative or supervisory organization.
- It has its own budgetary and hiring authority.

### Additional Location

A place, geographically separate from any main or branch campus, where instruction takes place and students can do one or more of the following:

- Complete 50% or more of the courses leading to a degree program.
- Complete 50% or more of the courses leading to a Title IV eligible certificate.
- Complete 50% or more of a degree completion program (even if the degree completion program provides less than 50% of the courses leading to the degree).

There is no base or threshold number of students or distance from the campus necessary for a facility to qualify as an additional location under this definition.

An additional location typically does not have a full range of administrative and student services staffed by the facility's personnel. Such services may be provided from the main campus or another campus.

A facility may provide access to instruction requiring students to be present at a physical location that receives interactive TV, video or online teaching. It is considered an additional location when 50% or more of a distance delivery program is available through one or more of these modalities at that facility. Note: This requirement does not apply for locations in which there is a general computer lab that students might use for distance delivery courses.

An additional location has active status when students are enrolled. Its status is inactive when students are not enrolled. The status can change between active and inactive without approval from HLC. However, a location may only be classified as inactive with no student enrollment for a maximum of two consecutive years. At that point, HLC will require the institution to close the location.

## FOLLOW-UP REVIEWS OF APPROVED OFF-CAMPUS ACTIVITIES

After a new additional location or branch campus has been approved by HLC through its institutional change process, HLC conducts a follow-up review—known as an additional location confirmation visit or campus evaluation visit—within six months of the matriculation of students and the initiation of instruction at the location or campus. Both types of reviews involve an on-site visit by HLC peer reviewers.

### Additional Location Confirmation Visit

An additional location confirmation visit is conducted for each of the first three active additional locations opened by an institution. The visit is meant to confirm

**Find It Online**
hlcommission.org/locations

the accuracy of the information provided to HLC concerning the quality and oversight of the education at the additional location when HLC originally approved it. Further monitoring of an institution's additional locations through HLC's established monitoring processes may be recommended. Such recommendations will be reviewed and acted upon by an HLC decision-making body.

### Campus Evaluation Visit

A campus evaluation visit is conducted for each new campus or branch campus opened by an institution. The visit is meant to (1) assure the quality of the campus and its educational programs in meeting the needs of its defined constituencies and (2) assure the institution's capacity to sustain that quality. Further monitoring of a campus or closure of a campus may be recommended. Such recommendation will be reviewed and acted upon by an HLC decision-making body.

## ONGOING REVIEWS

HLC also evaluates an institution's off-campus activities at various points during the Standard and Open Pathway cycles. These reviews are known as multi-location and multi-campus visits.

### Multi-location Visit

If an institution has at least three active additional locations, HLC will conduct on-site visits of a representative sample of the additional locations in Years 3 and 8 for institutions on the Open or Standard Pathways. The visit is made by one HLC peer reviewer and is meant to confirm the continuing effective oversight by the institution of its additional locations. Further monitoring of an institution's additional locations through HLC's established monitoring processes may be recommended. Such recommendations will be reviewed and acted upon by an HLC decision-making body.

### Multi-campus Visit

A multi-campus visit is included as part of the comprehensive evaluation for institutions with one or more branch campuses. Members of the peer review team conducting the comprehensive evaluation will visit a sampling of the institution's branch campuses to ensure (1) the quality of the institution's extended operations and its educational offerings in meeting the needs of its defined constituencies and (2) the capacity to sustain that quality. Further monitoring of an institution's branch campuses through HLC's established monitoring processes may be recommended. Such recommendations will be reviewed and acted upon by an HLC decision-making body.

## RECLASSIFYING A BRANCH CAMPUS AS AN ADDITIONAL LOCATION

If an institution decreases its operation at an approved branch campus to the point where it would be considered an additional location, the institution should contact HLC to change its location classification. To do so, the institution should submit a letter explaining why the location no longer meets the branch campus definition and confirming that it has all the elements of the additional location definition. The letter should also include the exact name and street address of the branch campus in question.

Submit this information as a single PDF file to changerequests@hlcommission.org.

Note: Once a branch campus has been reclassified as an additional location, the action cannot be reversed. In the event that the institution wishes to reclassify that location to a branch campus, it will have to reapply for the branch campus designation and host a campus evaluation visit upon approval.
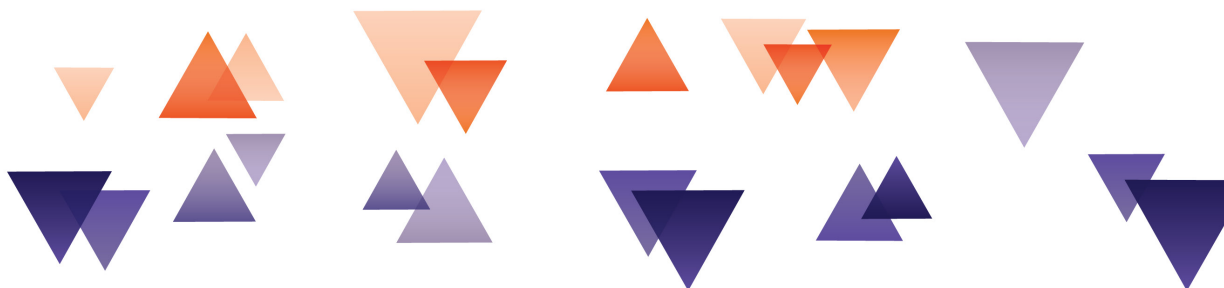
# INSTITUTIONAL UPDATE
## and Financial/Non-financial Indicators

## INSTITUTIONAL UPDATE

HLC requires accredited and candidate institutions to provide annual updates on organizational health through the Institutional Update. It is held each year in late February or early March. In preparation for the Institutional Update, HLC shares a guide in January that includes the Institutional Update questions, definitions of terms and answers to frequently asked questions. HLC also asks Accreditation Liaison Officers to complete the Contact Update Survey in order to ensure that HLC has the correct contact information on file for the individuals who are responsible for preparing and submitting the Update. These individuals include the Chief Executive Officer, Accreditation Liaison Officer, Chief Financial Officer and Data Update Coordinator.

The information provided to HLC through the Institutional Update serves multiple purposes:

- Certain financial and non-financial indicators of organizational health are reviewed to determine whether there are any trends that suggest the need for HLC follow-up.

- Some information is used to update the Statement of Accreditation Status posted on HLC's website.

- Some information is collected and monitored in compliance with federal requirements.

- Student enrollment and instructional location data are used to calculate HLC membership dues.

**Note:** Some changes to information in the Institutional Update may require review through HLC's policies and procedures on institutional change. This may be the case for changes to the institution's active additional locations or branch campuses or to its contractual or consortial arrangements.

## FINANCIAL INDICATORS

HLC reviews the financial data submitted in the Institutional Update to determine whether an institution operates with integrity in its financial functions (see Criterion 2, Core Component 2.A.).

The financial data submitted in the Institutional Update generate a Composite Financial Index (CFI). For private institutions, HLC uses the financial ratios provided by the U.S. Department of Education, and for public institutions, HLC relies on the financial ratios recommended in Strategic Financial Analysis for *Higher Education: Identifying, Measuring & Reporting Financial Risks* (Seventh Edition), by KPMG LLP; Prager, Sealy & Co., LLC; Attain LLC.

## NON-FINANCIAL INDICATORS

HLC reviews non-financial data submitted in the Institutional Update for the following indicator conditions and requests responses from institutions when certain indicator conditions occur.

**Note:** "Small institutions" are those with fewer than 1,000 students while "large institutions" are those with 1,000 students or more.

1. **Enrollment Changes**
   Three-year increase or decrease in enrollment of 80% or more for small institutions or 40% or more for large institutions.

2. **Degrees Awarded**
   Three-year increase or decrease in degrees awarded of 75% or more for small institutions and 65% or more for large institutions.

3. **Full-time Faculty Changes**
   Three-year decrease in the headcount of full-time faculty (not full-time equivalent) of 75% or more for small institutions or 50% or more for large institutions.

4. **Minimal Full-time Faculty**
   The headcount of full-time faculty (not full-time equivalent) divided by the number of degree programs offered is less than one.

**Find It Online**
hlcommission.org/indicators

## 5. Student to Teacher Ratio

The number of undergraduate full-time equivalent students divided by the number of undergraduate full-time equivalent faculty is greater than or equal to 35.

**Note:** Does not apply to graduate-only institutions.

## 6. Weak Graduation/Persistence Rates Compared to Peers

The number of full-time equivalent undergraduate students divided by undergraduate degrees awarded places the institution in the bottom five percent of the institution's peers. Peer groups are either two-year small or large undergraduate institutions or four-year small or large undergraduate institutions.

**Note:** Does not apply to graduate-only institutions.
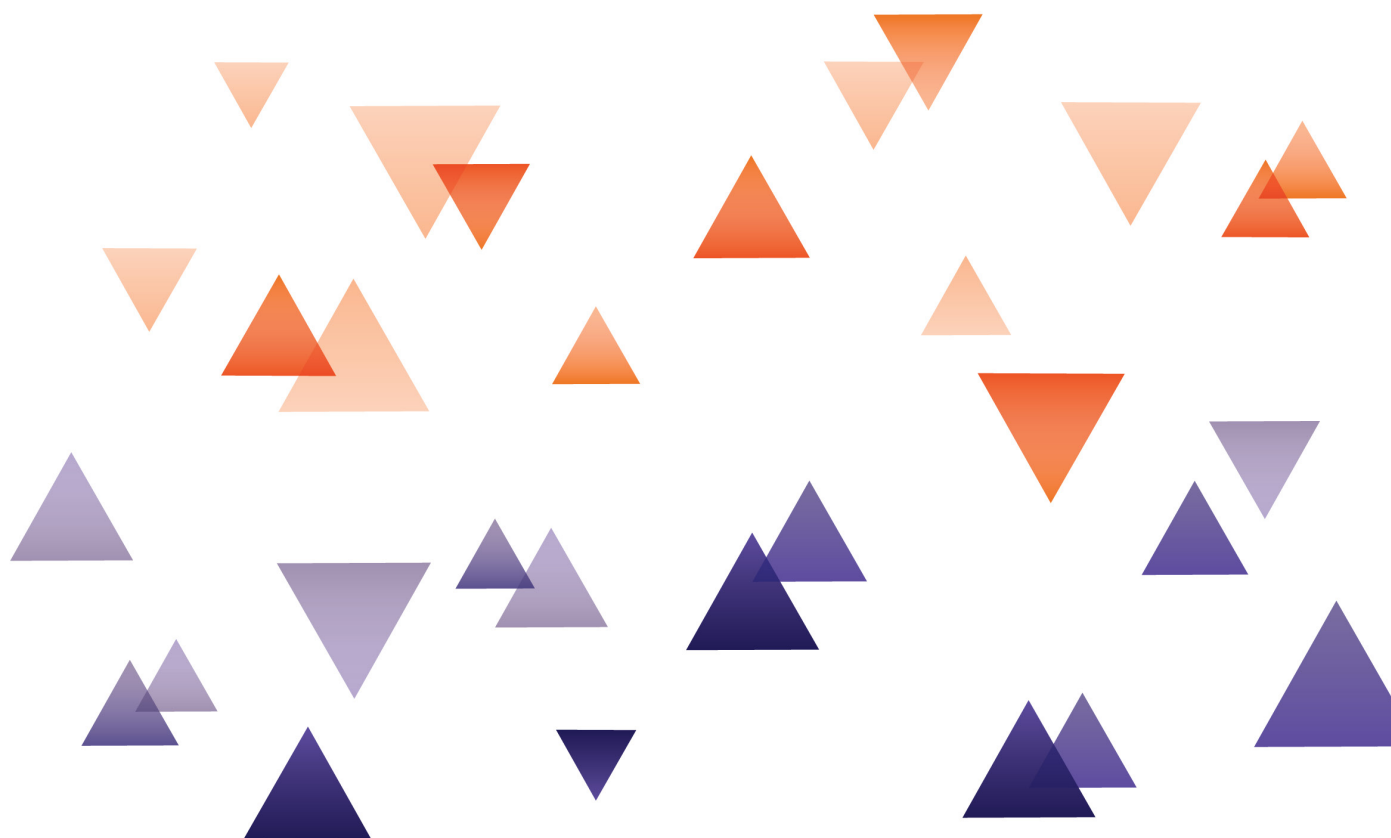
# 🔍 MONITORING

*HLC relies on frequent contact with affiliated institutions to ensure quality higher education. Between comprehensive evaluations, institutions maintain an ongoing accreditation status by notifying HLC of substantive change, filing required reports and hosting any necessary visits. HLC also may require an interim report or focused visit in circumstances where HLC has concluded that it should review the institution's progress in addressing a concern.*

## INTERIM REPORT

HLC may require an interim report when its goal is to receive specific, important information from the institution, track how the institution is progressing in coping with certain changes or challenges, or receive evidence that plans came to fruition.

Institutions are notified of a required interim report either through staff action or an action by an HLC decision-making body. The Action Letter will identify the due date, the related Core Components and the areas of focus. This information is also included in the institution's Institutional Status and Requirements (ISR) Report. HLC may require an institution to submit the interim report so that it can be reviewed through staff analysis, or HLC may embed the report in a previously scheduled comprehensive evaluation or focused visit. The staff analysis or peer review team will ascertain whether the institution has satisfactorily addressed the monitoring issue(s). If the analysis shows that the institution has not satisfactorily addressed the monitoring issue, additional monitoring will be required.

## FOCUSED VISIT

Focused visits occur between comprehensive evaluations and examine specific aspects of an institution. A focused visit reviews specific developments or follows up on

concerns identified by a previous evaluation process and is not primarily concerned with determining whether an institution fulfills the Criteria for Accreditation.

Institutions are notified of a required focused visit either through staff action or an action by an HLC decision-making body. The Action Letter will identify the time period for the visit, the related Core Components and the areas of focus. This information is also included in the institution's ISR Report. HLC will work with the institution to set the date for the on-site visit, which will be conducted by a team of two peer reviewers. Institutions are required to submit a Focused Visit Report demonstrating the institution's progress in addressing the areas of focus, with supporting evidence and documentation. The team's role is to evaluate the areas specified as the focus of the visit and to provide HLC with a report on developments related to those areas. Recommendations from the team go to the Institutional Actions Council for final action.

**Find It Online**
hlcommission.org/interim-report
hlcommission.org/focused-visit

# DECISION MAKING

*Decision-making bodies comprised of institutional representatives and public members take actions on HLC-affiliated institutions. HLC's decision-making process ensures due process through multiple opportunities for institutions to respond to findings or recommendations, as well as transparency with the timely publication of all final actions.*

## DECISION-MAKING BODIES

Unless otherwise specified, the decision-making bodies are representative of HLC's member institutions, with attention to institutional type, control, size and geographical distribution. All decision-making bodies abide by HLC's conflict of interest policies. HLC's three decision-making bodies are:

### Institutional Actions Council

The IAC is composed of approximately 140 members representing HLC member institutions and the public. Members are appointed by the Board of Trustees to serve four-year terms (see the IAC roster on page 7). The IAC has the authority to act on substantive change cases, recommendations following interim monitoring, mid-cycle pathway reviews, biennial evaluations and cases of Reaffirmation of Accreditation, including pathway placement. Some cases heard by the IAC require Board action. In these instances, the IAC submits a recommendation to the Board for consideration. The Board may either adopt the recommendation of the IAC as its action or may take another action provided by HLC policy.

### Board of Trustees

The Board is made up of at least 15 and no more than 21 members representing institutions and the public. Trustees are elected by HLC member institutions to serve four-year terms (see the Board roster on page 6).

Cases that require final action by the Board include granting or denying an institution candidacy or initial accreditation; issuing or withdrawing a sanction; withdrawing status from an accredited institution; issuing or removing a Show-Cause Order; initiating a reconsideration process; and approving or denying a Change of Control, Structure or Organization request.

### Appeals Body

The Appeals Body is selected by the Board of Trustees to be available to serve on Appeal Panels. Although many actions by the Board are considered final actions, an institution may appeal an adverse action of the Board prior to the action becoming final. In these instances, an Appeal Panel hears the case and has the authority to affirm, amend or remand the action of the Board.

### Decision-Making Process

The decision-making process begins once an evaluation concludes. A peer review report that includes a recommendation is submitted to an HLC decision-making body. Unless a case is required by policy to go directly to the Board of Trustees for consideration and action, most cases are sent to the IAC for final action or for a secondary review prior to action being taken by the Board of Trustees.

Each year the IAC reviews more than 1,000 cases in two settings. The first setting is called a meeting, which is held via webinar with a committee of IAC members. Representatives from the institutions are not present at these meetings. The decisions of IAC meeting committees

**Please Note**
The decision-making processes for individual cases are dependent upon HLC policy. Please review HLC policies to determine how the process might change based on institutional circumstances.

are final unless the Board of Trustees is required by policy to take final action.

The second type of setting is a hearing. HLC policy requires that certain cases go to an IAC hearing rather than a meeting. Representatives from both the institution and peer review team, along with a committee of IAC members, are physically present at these hearings. The IAC hearing committee will make a recommendation to the Board of Trustees for final action.

A committee of IAC members is selected for each meeting and hearing to be responsible for reading the entire record related to each case. Approximately every six weeks, IAC committees review cases in a meeting format. Hearings are timed to occur in advance of Board meetings.

An action taken by the IAC is considered a final action unless the case requires review by the Board of Trustees. If the case requires action by the Board, the IAC includes a recommendation with the report sent to the Board of Trustees for final action.

The Board meets in person three times a year to take action on institutional cases, to approve and adopt changes to HLC policy, and to conduct other regular business. The Board may also take institutional actions at other times during the year, via teleconference or mail ballots, as necessary.

Approximately two weeks after a final action by the IAC or Board of Trustees, an Action Letter is sent to the institution. The Action Letter relays the final action to the institution.

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 HLC's appeals procedures. Adverse actions are those that withdraw or deny accreditation or candidacy. An Appeal Panel will hear the case and decide to affirm, amend or remand the adverse action to the Board. If the panel affirms or amends the action, the Board will review and act to implement the panel's decision. If the panel remands the action to the Board for additional consideration, the Board will, after taking into account the panel's explanation of its reasons for remanding the action, act to affirm, amend, or reverse its original adverse action.
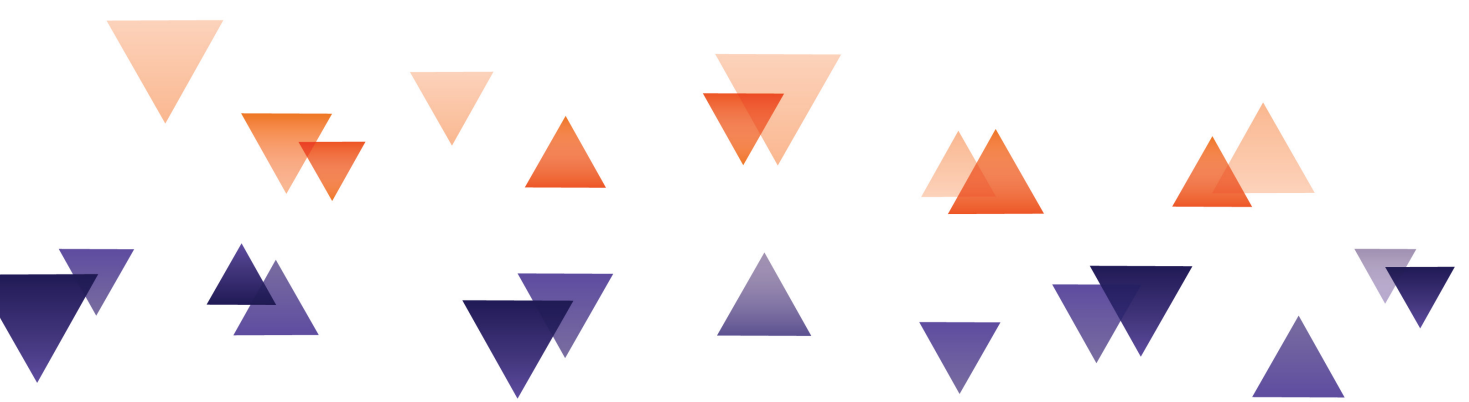
### Institutional Response

Institutions are offered an opportunity to respond after each evaluation and at each stage of the decision-making process. Each decision-making body considers the institutional response as part of the full record of the case, along with the recommendation of the peer review team.

**Find It Online**
hlcommission.org/decision-making

# PUBLIC INFORMATION ABOUT HLC AFFILIATION

## COMMUNICATIONS BY HLC

HLC seeks to clearly and openly communicate the actions of its decision-making bodies to its member institutions and the public. HLC publishes a full list of actions taken by the Institutional Actions Council and Board of Trustees on its website within 30 days of action. HLC also provides an online Directory of Institutions that includes the following information about current and former affiliated institutions:

- A 15-year history of reviews conducted by HLC and the actions that resulted.

- The Action Letter from the last comprehensive evaluation. This practice began in 2013.

- A Public Disclosure Notice, if applicable, explaining particular actions regarding sanctions; initial accreditation; candidacy; denial of change of control, structure or organization; or other issues.

## COMMUNICATIONS BY INSTITUTIONS

### Mark of Affiliation

As part of HLC's Obligations of Affiliation (see page 46), each institution is required to display the Mark of Affiliation on its website with HTML code provided by HLC. The Mark of Affiliation reflects the institution's current accreditation status and links visitors to the institution's Statement of Accreditation Status on the HLC website. An institution's domain name must be registered with HLC to enable the functionality of the interactive Mark of Affiliation. Requests for the Mark of Affiliation guidelines and HTML code, as well as notification of domain changes, can be directed to info@hlcommission.org.

### Use of HLC Logos and Images

HLC logos, including the leaf, are reserved for HLC-produced materials. HLC logos and images are not allowed on materials or websites presented by affiliated institutions. This also prohibits use of the logo in social media posts, email signatures and other digital reproductions not originating from HLC.

For catalogs, brochures, advertisements and other promotional material, accredited institutions are encouraged to use this statement: "(Institution name) is accredited by the Higher Learning Commission (www.hlcommission.org), a regional accreditation agency recognized by the U.S. Department of Education."

For candidate institutions, status should be stated as: "(Institution name) is a candidate with the Higher Learning Commission (www.hlcommission.org), a regional accreditation agency recognized by the U.S. Department of Education."

**Find It Online**
hlcommission.org/recent-actions
hlcommission.org/directory

# PROGRAMS AND EVENTS

## HLC'S ACADEMIES

*HLC's Academies are multi-year, mentor-facilitated programs aimed at assisting HLC-accredited institutions to define, develop and implement comprehensive strategies for institutional improvement.*

Designed and led by experienced practitioners and supported by SparQ, an online platform for project management, resource sharing, discussion and discovery, the Academies provide a framework and guidance for developing customized projects focused on leading areas of concern in higher education. The programs are adaptive to the needs of the wide range of institutional types served by HLC and support improvement within the context of an institution's mission, vision and goals.

### STUDENT SUCCESS ACADEMY

The Student Success Academy is designed for institutions seeking to establish sustainable structures that support students' achievement of their higher education goals. The Academy offers a structured program that aims to help institutions design an integrated approach to student learning and student success—one that is sensitive to each institution's resources and priorities and to the realities of its student populations. Participating institutions learn how to engage multiple stakeholders in supporting student success in the development and implementation of a comprehensive student success plan.

### ASSESSMENT ACADEMY

The Assessment Academy is tailored for institutions interested in developing an ongoing commitment to assessing and improving student learning. The Academy offers each institution personalized guidance in developing, documenting and implementing a systematic assessment plan. Institutions participating in the Assessment Academy are presented with new ideas and techniques for influencing institutional culture, increasing capacity to assess student learning and using assessment data to improve student learning.

### APPLYING TO THE ACADEMIES

The Academies are open to all institutions accredited by HLC. For more information, including application criteria and timelines, visit hlcommission.org/academies.

# 🗓 ANNUAL CONFERENCE AND WORKSHOPS

## ANNUAL CONFERENCE

HLC's annual conference is one of the largest events of its kind in higher education, with approximately 4,000 administrators and faculty members attending each year. The five days of programming cover a broad range of topics, including HLC policies and guidelines, institutional experiences with accreditation processes and best practices, assessment of student learning, quality improvement, student success, professional development and more.

### 2021 ANNUAL CONFERENCE

The 2021 HLC Annual Conference will be held April 9–13 in Chicago. The event will feature insights from those driving progress and evolution in higher education. The Call for Proposals for the 2021 conference opens in July 2020.

## WORKSHOPS

HLC's workshops offer intensive, hands-on learning opportunities for administrators, faculty and staff members at HLC-accredited and candidate institutions. Under the guidance of expert practitioners, participants learn, develop and advance their practice as well as the quality of their institution.

### 2020–21 WORKSHOP OFFERINGS

HLC offers programs for individual participants and for teams of colleagues.

### Accreditation Processes and Roles

**Accreditation Program**
one-day event / offered at the annual conference: April 2021

**Standard Pathway Seminar**
one-day event / offered once a year: TBD

### Assessment Of Student Learning

**Assessing General Education Workshop**
two-day event / offered once a year: September 2020

**Program Assessment Workshop**
two-day event / offered once a year: May 2021

**Cocurricular Assessment Workshop**
two-day event / offered once a year: May 2021

### Strategy

**Advancing Strategy Workshop**
two-day event / offered once a year: June 2021

**Effective Administrators Workshop**
one-day event / offered at the annual conference: April 2021

### Student Success

**Supporting Student Success Workshop**
one-day event / offered at the annual conference: April 2021

HLC continues to create new professional development events with input from member institutions. For more information, visit hlcommission.org/workshops.

### Stay Connected
Follow HLC on Twitter and LinkedIn for the latest news and conversation on HLC events.

🖥 hlcommission.org/workshops

🐦 @hlcommission

in linkedin.com/company/ hlcommission

# ACCREDITATION LIAISON OFFICER TRAINING RESOURCES

*To support the success of its institutions, HLC provides opportunities for training designed for Accreditation Liaison Officers (ALOs). Throughout the year, ALOs have access to webinars, in-person trainings and a recently launched online course for new ALOs that provides an orientation to the role and covers specific topics in accreditation.*

## ONLINE COURSE FOR NEW ALOS

### An Introduction to the Role at HLC

Offered quarterly, this self-paced course provides an orientation to the ALO role and its various responsibilities. It features a series of modules covering regional accreditation and peer review, as well as expectations of regular data reporting to HLC, tips for managing the role on campus from experienced ALOs, and more.

## IN-PERSON TRAINING

### Accreditation Program, 2021 Annual Conference

This workshop for ALOs is designed with two tracks: an orientation track for those new to accreditation, and a track for experienced ALOs preparing for an upcoming comprehensive evaluation. This program also incorporates extensive training on the Criteria for Accreditation and features the Assurance Clinics, which provide an opportunity for institutions with an approaching Assurance Review or comprehensive evaluation to receive feedback on their Assurance Argument from an experienced peer reviewer.

## WEBINARS

### The ALO Toolbox

In this webinar, HLC staff provide an overview of HLC resources available to an institution's ALO. The session provides ALOs with the information and resources they need to understand the role and comply with information and data deadlines required by HLC.

### Tips to Navigate Substantive Change

HLC staff provide an overview of several aspects of substantive change requiring some level of oversight by HLC, including types of change, defining "significant departure," screening forms and more.

### Hosting a Multi-location Visit

In this webinar, HLC staff provide an overview of multi-location visits, including a timeline for the process, guidance for writing the institutional report, and tips for visit preparation. (Once scheduled, this webinar is available for institutions with a multi-location visit in the upcoming academic year.)

### Standard Pathway Q&A

This webinar is an opportunity for institutions to ask questions of HLC staff on any topic related to the Standard Pathway, including the Assurance System, embedded improvement and monitoring.

### Federal Compliance Overview

In this webinar, HLC staff cover the key federal requirements that are reviewed during the course of HLC comprehensive evaluations as well as in other contexts.

### Webinars on the Criteria for Accreditation

HLC staff provide in-depth reviews of each of the Criteria for Accreditation, with discussions of their content, context, intent and revisions going into effect September 1, 2020. The sessions will also provide information about the types of evidence institutions might use in their Assurance Arguments.

**Find It Online**
hlcommission.org/alo-training

# PEER REVIEWER TRAINING

*HLC provides in-person training for new peer reviewers as well as several "refresher" webinars throughout the year for reviewers and team chairs with upcoming visits.*

## IN-PERSON TRAINING

### Standard and Open Pathways Training for Peer Reviewers

This program provides an intensive training for new peer reviewers serving in the Peer Corps. By the end of the program, participants will know how to review an institution's Assurance Argument, identify evidence, write solid evidence statements and work successfully with the team and chair to meet important deadlines in the process.

### Peer Corps Program at the HLC Annual Conference

Current members of HLC's Peer Corps receive professional development and specialized training. The program will include updates on HLC policies and procedures and good practices for conducting and leading evaluations. Special training sessions will be offered for new team chairs, presidents, new Institutional Actions Council members, and substantive change reviewers and chairs.

## WEBINARS

### Pathways Refresher for Peer Reviewers

HLC staff review Pathways processes and procedures and provide updates on recent HLC policy changes for reviewers with upcoming visits.

### Pathways Refresher for Team Chairs

HLC staff and an experienced peer reviewer offer a brief review of Standard and Open Pathways processes and alert chairs to recent changes in HLC policy.
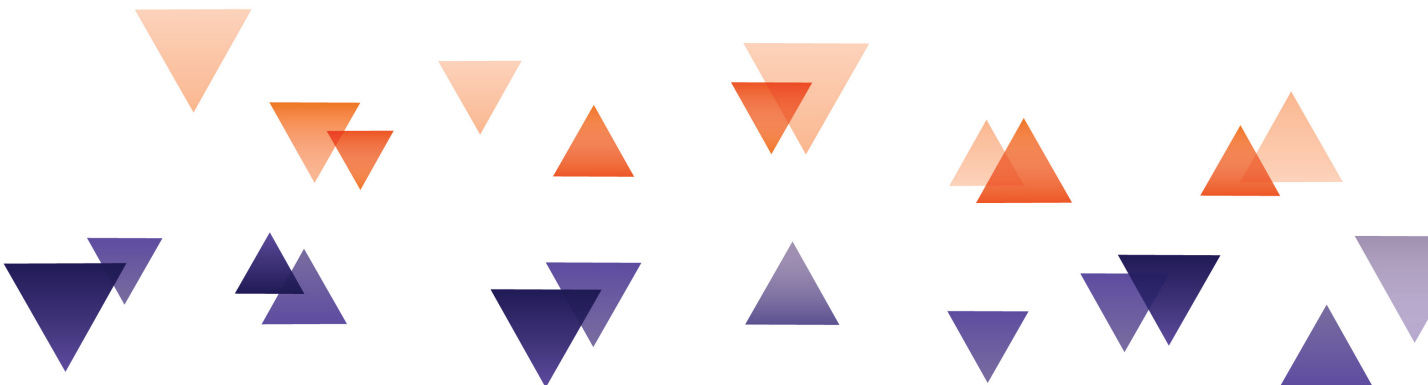
### Federal Compliance Training for Team Chairs

Hosted by HLC staff, this webinar is intended to update team chairs on recent changes to the Federal Compliance process, forms and technology.

**Find It Online**
hlcommission.org/calendar

# RESOURCES

# INSTITUTIONAL EXAMPLES

## ACCREDITATION PROCESSES

The institutions listed below have agreed to share their recent experiences going through HLC evaluation processes. These are examples of how individual institutions have approached these processes and are not intended to be models of how to conduct the accreditation process. HLC thanks the institutional representatives for their willingness to be listed in this resource.

### STANDARD PATHWAY

### Comprehensive Evaluation

**BridgeValley Community and Technical College**
Control: Public
Highest Degree: Associate's
Headcount: 1,689

Contact: Dr. Carol Perry, Accreditation Liaison Officer
Email: carol.perry@bridgevalley.edu
Phone: 304.633.5234

**Harding University**
Control: Private, Not-for-Profit
Highest Degree: Doctoral
Headcount: 5,121

Contact: Julie A. Hixson-Wallace, Vice President for Accreditation and Institutional Effectiveness
Email: jahixson@harding.edu
Phone: 501.279.4024

**Rock Valley College**
Control: Public
Highest Degree: Associate's
Headcount: 6,244

Contact: Dr. Lisa Mehlig, Exccecutive Director of Assessment/Outcomes
Email: l.mehlig@rockvalleycollege.edu
Phone: 815.921.4070

**West Virginia School of Osteopathic Medicine**
Control: Public
Highest Degree: Doctoral
Headcount: 841

Contact: Tracey Anderson, Director of Accreditation
Email: tanderson1@osteo.wvsom.edu
Phone: 304.647.6334

### OPEN PATHWAY

### Comprehensive Evaluation

**Bemidji State University**
Control: Public
Highest Degree: Master's
Headcount: 4,733

Contact: Randy Westhoff, Professor of Mathematics
Email: rwesthoff@bemidjistate.edu
Phone: 218.755.2900

**University of Michigan-Flint**
Control: Public
Highest Degree: Doctoral
Headcount: 6,762

Contact: Stephen Turner, Associate Provost and
Dean of Graduate Programs
Email: swturner@umich.edu
Phone: 810.762.3171

**University of Wisconsin-Madison**
Control: Public
Highest Degree: Doctoral
Headcount: 44,411

Contact: Jocelyn Milner, Vice Provost for
Academic Affairs
Email: jocelyn.milner@wisc.edu
Phone: 608.263.5658

## Assurance Review
**Calvin University**
Control: Private, Not-for-Profit
Highest Degree: Master's
Headcount: 3,657

Contact: Laura DeHaan, Dean for Academic
Administration
Email: ldehaan@calvin.edu
Phone: 616.334.6343

**Nicolet Area Technical College**
Control: Public
Highest Degree: Associate's
Headcount: 859

Contact: Kate Ferrel, Executive Vice
President– Academic and Student Affairs
Email: kferrel@nicoletcollege.edu
Phone: 715.365.4416

**University of Arkansas at Monticello**
Control: Public
Highest Degree: Master's
Headcount: 2,736

Contact: Daniel Boice, Library Director
Email: boice@uamont.edu
Phone: 870.460.1480

**University of Charleston**
Control: Private, Not-for-Profit
Highest Degree: Doctoral
Headcount: 2,603

Contact: Beth Pauley, Assistant Provost for
Assessment and Accreditation
Email: bethpauley@ucwv.edu
Phone: 304.357.4809

**University of Missouri-Columbia**
Control: Public
Highest Degree: Doctoral
Headcount: 29,389

Contact: Matthew Martens, Associate Provost
Email: martensmp@missouri.edu
Phone: 573.882.3089

**University of Wisconsin-La Crosse**
Control: Public
Highest Degree: Doctoral
Headcount: 10,341

Contact: Natalie Walleser Solverson, Director of
Institutional Research, Assessment and Planning
Email: nsolverson@uwlax.edu
Phone: 608.785.8006

# HLC ACADEMY PROJECTS

The institutions listed below have agreed to share their
recent experiences going through HLC's Academies.
HLC thanks the institutional representatives for their
willingness to be listed in this resource.

## ASSESSMENT OF STUDENT LEARNING
**Adler Graduate School**
Control: Private, Not-for-Profit
Highest Degree: Master's
Headcount: 317

Contact: Nicole Randick, Director of Assessment
and Online Learning
Email: nicole.randick@alfredadler.edu
Phone: 630.418.3439

**Barton County Community College**
Control: Public
Highest Degree: Associate's
Headcount: 4,339

Contact: Joseph Harrington, Coordinator of
Assessment and Instructor of Mathematics
Email: harringtonj@bartonccc.edu
Phone: 620.792.9334

**Bismarck State College**
Control: Public
Highest Degree: Bachelor's
Headcount: 3,778

Contact: Kara Welk, Institutional Assessment
Coordinator
Email: kara.welk@bismarckstate.edu

**Buena Vista University**
Control: Private, Not-For-Profit
Highest Degree: Master's
Headcount: 1,773

Contact: Jamii Claiborne, Director of Assessment,
Faculty Development
Email: claiborne@bvu.edu
Phone: 712.749.1212

**Henry Ford College**
Control: Public
Highest Degree: Bachelor's
Headcount: 1,327

Contact: Deborah Zopf, Pre-Education Program
Director, Mathematics Instructor
Email: dzopf@hfcc.edu
Phone: 313.845.6430

**Institute of American Indian and Alaska Native
Culture and Arts Development**
Control: Tribal
Highest Degree: Master's
Headcount: 373

Contact: Lara Evans, Associate Dean for Academic
Affairs
Email: levans@iaia.edu
Phone: 504.424.2389

**Kettering College**
Control: Private, Not-for-Profit
Highest Degree: Dctoral
Headcount: 839

Contact: Vail McGuire, Professor of English
Email: vail.mcguire@kc.edu

**South Dakota State University**
Control: Public
Highest Degree: Doctoral
Headcount: 10,874

Contact: Mary Kay Helling, Vice Provost for
Academic Affairs
Email: mary.helling@sdstate.edu

**Southwest Minnesota State University**
Control: Public
Highest Degree: Specialist's
Headcount: 2,497

Contact: Jeffrey Bell, Assessment Coordinator
Email: jeffrey.w.bell@smsu.edu
Phone: 507.537.6370

**University of Science and Arts of Oklahoma**
Control: Public
Highest Degree: Bachelor's
Headcount: 854

Contact: Donna Gower, Interim Vice President
of Academic Affairs
Email: dgower@usao.edu
Phone: 405.574.1309

# ONLINE HLC RESOURCES

## CORONAVIRUS (COVID-19)

Updates regarding HLC's response
hlcommission.org/coronavirus

## HLC POLICIES

All Policies
hlcommission.org/policies

Proposed Policy Changes
hlcommission.org/proposed-policies

Adopted Policy Changes
hlcommission.org/adopted-policies

Assumed Practices
hlcommission.org/assumed-practices

Criteria for Accreditation
hlcommission.org/criteria

Obligations of Affiliation
hlcommission.org/obligations

## ACCREDITATION STATUS

Directory of Institutions (search to find an institution's Statement of Accreditation Status)
hlcommission.org/directory

Request an Institutional Status and Requirements (ISR) Report
hlcommission.org/isr-request

Request a Letter From HLC to Verify Accreditation Status
hlcommission.org/letter-request

## ACCREDITATION PROCEDURES

Accreditation Liaison Officer Role
hlcommission.org/alo

Comprehensive Evaluation
hlcommission.org/comprehensive

Dues and Fees Schedule
hlcommission.org/dues

Federal Compliance
hlcommission.org/federal-compliance

Financial and Non-financial Indicators
hlcommission.org/indicators

Focused Visit
hlcommission.org/focused-visit

Institutional Change
hlcommission.org/change

Institutional Update
hlcommission.org/update

Interim Report
hlcommission.org/interim-report

Off-Campus Activities
hlcommission.org/locations

Open Pathway
hlcommission.org/open

Standard Pathway
hlcommission.org/standard

### Online Systems

Assurance System
assurance.hlcommission.org

> Training and User Support Resources
> hlcommission.org/assurance-system

Institutional Update
inst-update.hlcommission.org

Location and Campus Update
lcu.hlcommission.org

Online Bill Payment
epay.hlcommission.org

## PEER REVIEW

Peer Reviewer Application
hlcommission.org/peer

Team Report Templates and Guidelines
hlcommission.org/team-resources

**Online Systems**

Assurance System
assurance.hlcommission.org

> Training and User Support Resources
> hlcommission.org/assurance-system

HLC Portal
hlcportal.org

Peer Reviewer Data Update System (PRDUS)
prdus.hlcommission.org

## DECISION MAKING

Decision-Making Bodies and Processes
hlcommission.org/decision-making

Recent Institutional Actions
hlcommission.org/actions

## HLC PROGRAMS AND EVENTS
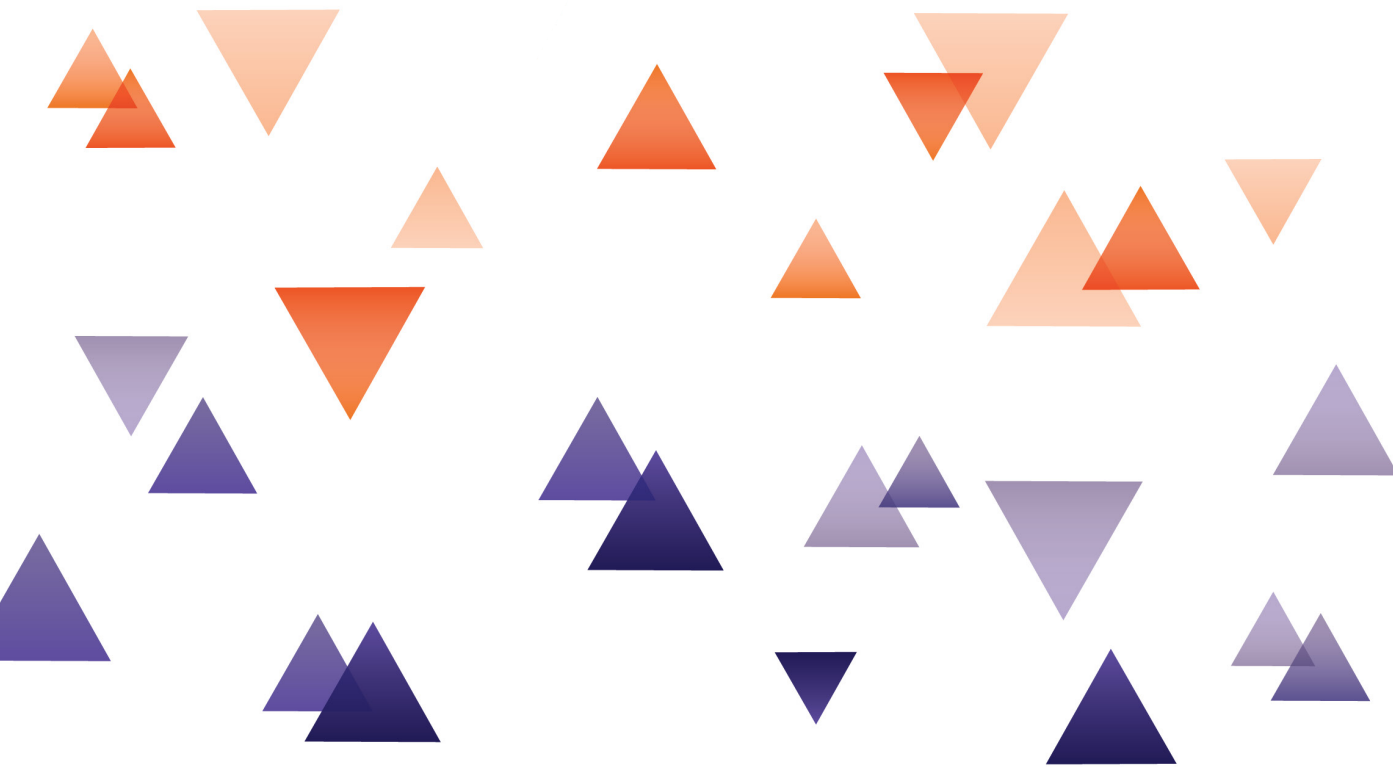
Academies
hlcommission.org/academies

> SparQ
> Sparq.hlcommission.org

Annual Conference
hlcommission.org/conference

Calendar of Events
hlcommission.org/calendar

Standard Pathway Seminars
hlcommission.org/standard-resources

Workshops
hlcommission.org/workshops

# AZ GLOSSARY OF HLC TERMINOLOGY

## ABOUT ACCREDITATION

### accreditation agency

A nongovernmental body established to administer accrediting procedures.

### accreditation, institutional

Accreditation that evaluates an entire educational institution and accredits it as a whole.

### accreditation, national

A type of institutional accreditation primarily for religious colleges and universities, private trade and technical schools, private business colleges, and colleges focusing on health-related fields, as well as institutions offering programs primarily through distance delivery and home study.

### accreditation, regional

A type of institutional accreditation provided by accrediting agencies recognized by the U.S. Department of Education.

### accreditation, specialized (also called program accreditation)

Accreditation of units, schools or programs within a larger educational institution or for the sole program or area of concentration of an independent, specialized institution.

### accredited status

Status that indicates an institution meets HLC's Criteria for Accreditation.

### maintain accreditation

Actively participate, as an institution, in HLC's accreditation processes to ensure the institution meets the Criteria for Accreditation.

### Notice

A sanction signifying an institution is pursuing a course of action that could result in its being unable to meet one or more of the Criteria for Accreditation.

### Obligations of Affiliation

The responsibilities that institutions affiliated with HLC are required to fulfill in order to maintain their affiliation.

### Probation

A sanction signifying that an institution no longer meets one or more of the Criteria for Accreditation. While on probation, an institution remains accredited.

### Public Disclosure Notice (PDN)

A document HLC may post to explain to the public a particular situation at an affiliated institution.

### Reaffirmation of Accreditation

An action by an HLC decision-making body confirming an institution meets all of the requirements necessary to keep its accredited status with HLC.

### Show-Cause Order

An order by HLC's Board of Trustees requiring an institution to show cause as to why its accredited status should not be removed.

### Statement of Accreditation Status (SAS)

A public summary of the relationship between the institution and HLC that identifies the nature of the institution, the conditions of affiliation, and the degree levels included in accreditation.

### stipulations

Conditions placed on an institution's development of new activities or programs.

## ABOUT HLC

### Accreditation Liaison Officer (ALO)

An individual identified by the chief executive officer of the institution to be second in the line of communication (behind the CEO) with HLC regarding policies, practices and other accreditation matters.

## Assumed Practices

A set of practices shared by institutions of higher education that is unlikely to vary by institutional mission or context. Institutions must meet the Assumed Practices to obtain accreditation with HLC.

## Board of Trustees

The governing body of HLC, made up of 15 to 21 representatives from HLC member institutions and the public.

## Core Components

Subcategories of each Criterion for Accreditation that are reviewed in order to determine whether an institution meets each Criterion.

## Criteria for Accreditation

The framework for determining an institution's accreditation.

## Data Update Coordinator

The individual appointed by the institution's CEO to be responsible for the accuracy and completion of the Institutional Update. The Coordinator serves as the contact between the institution and HLC regarding the Institutional Update and is responsible for the timely submission of the Institutional Update.

## Higher Learning Commission (HLC)

One of six regional accreditors in the United States, HLC accredits degree-granting institutions in a 19-state region.

## Institutional Status and Requirements (ISR) Report

A resource available to an institution's CEO or Accreditation Liaison Officer that includes the complete institutional history with HLC, information on the status of current and upcoming accreditation events, and information on the institution's designated pathway and related events.

## Institutional Update

An online report completed annually by affiliated institutions regarding institutional health.

## staff liaison

One of HLC's Vice Presidents of Accreditation Relations who serves as a resource for affiliated institutions.

## ELIGIBILITY AND CANDIDACY

### candidacy

Preaccreditation status offering affiliation, not membership, with HLC.

### Candidate for Accreditation

An institution with the preaccredited candidacy status that has met HLC's Eligibility Requirements and shows evidence that it is making progress toward meeting all the Criteria for Accreditation.

### Candidacy Program

The steps an institution must follow to gain candidacy with HLC.

### Eligibility Filing

Documentation submitted by an institution considering affiliation with HLC that demonstrates that it meets the Eligibility Requirements.

### Eligibility Process

The process by which HLC determines whether a non-affiliated institution is ready to begin the Candidacy Program.

### Eligibility Requirements

A set of requirements an institution must meet before it is granted candidacy.

### Initial Accreditation

An accreditation status for institutions in their first years of accreditation. Institutions in candidacy must undergo a comprehensive evaluation to ensure they meet the Assumed Practices and the Criteria for Accreditation in full to move to Initial Accreditation.

## ACCREDITATION PROCESS

### advisory visit

In response to rapidly changing dynamics at an institution, HLC may send a team of peer reviewers to visit the institution. HLC determines the scope of the team's inquiry and informs the institution.

### Assurance Argument

A narrative in which the institution explains how it meets HLC's Criteria for Accreditation, which is supported by linked documents in the Evidence File.

## Assurance Filing

Created and submitted by the institution, the filing includes the Assurance Argument with embedded links to documents in the Evidence File.

## Assurance Review

The peer review evaluation of the Assurance Filing.

## Assurance System

An online system used by institutions to provide an Assurance Argument or Systems Portfolio and evidentiary materials and used by peer reviewers to complete the Assurance Review or Comprehensive Quality Review.

## comprehensive evaluation

The process used to determine whether an institution meets or continues to meet the Criteria for Accreditation. The comprehensive evaluation includes an Assurance Review, an on-site visit, a student survey and a multi-campus visit, if applicable. Comprehensive evaluations for candidacy, initial accreditation and Reaffirmation of Accreditation also include a Federal Compliance Review.

## dual credit courses

Courses taught to high school students for which the students receive both high school credit and college credit.

## Evaluation Summary Sheet

A document created prior to each evaluation that includes contact information for the institution and peer review team members and other information pertinent to the evaluation.

## Evidence File

Documents used in the Assurance Filing that support the institution's Assurance Argument.

## Federal Compliance Requirements

Requirements that HLC is obliged to enforce as part of its recognition by the U.S. Department of Education.

## financial indicators

Financial data provided by an institution through the Institutional Update that allow HLC to determine if the institution is operating with integrity in its financial functions.

## focused visit

A team visit that occurs between comprehensive evaluations to examine specific aspects of an institution as a form of special monitoring.

## interim report

A report filed by an institution between comprehensive evaluations to provide updates to HLC on 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.

## multi-campus visit

A visit to a selection of an institution's additional campuses that occurs as part of the comprehensive evaluation.

## multi-location visit

A visit to a selection of off-campus additional locations of an institution with three or more active additional locations, occurring once every five years.

## non-financial indicators

Data provided by an institution through the Institutional Update that help HLC determine if the institution may be at risk of not meeting components of the Criteria for Accreditation.

## personally identifiable information (PII)

Information about an individual that allows the individual to be specifically identified. PII includes, but is not limited to: name, address, telephone number, birthday, email, Social Security number, bank information, etc.

## Provisional Plan

A plan that details the arrangements an institution makes for students when it intends to cease operating as an educational institution or when it undergoes other circumstances that require a Teach-Out Agreement. If the institution is closing entirely or closing campus(es) or additional location(s), and it has students in academic programs at that location, then the Provisional Plan will need to include arrangements for teaching out of those students so that they can complete their academic program. If the institution is prepared to stay open or keep the branch campus(es) or additional location(s) open and if it will continue to have sufficient resources, it may teach out those students that are within one year of graduation and assist other students in transferring to other institutions. If it does not have sufficient resources to accommodate current students through graduation or transfer, it must have a teach-out agreement with another accredited institution to be the teach-out receiving institution.

### related entity

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.

### Student Opinion Survey

An online survey conducted by HLC as part of comprehensive evaluations. The opinions and data gathered assist peer reviewers in developing questions for their meetings during the on-site visit.

### Teach-Out Agreement

An agreement made between the institution required to teach-out students and each teach-out receiving institution identified in the former institution's Provisional Plan. Teach-out agreements are required as part of a Provisional Plan for certain situations as described in HLC policy. The institution required to teach-out students should ensure that the teach-out agreement is binding as a written contract or letter of agreement with the teach-out receiving institution. The agreement should be detailed about the obligations being undertaken by each party and should be signed by an appropriate authorized representative of each institution. A teach-out agreement is with one or more institutions nearby or online that have the same academic programs to provide courses to those students who can reasonably complete their academic programs within no more than one year from the date the institution that is required to teach-out students closes.

## OPEN PATHWAY

### Open Pathway

A pathway for maintaining accreditation with HLC that features a 10-year reaffirmation cycle where quality assurance and quality improvement are addressed separately.

### Quality Initiative

A major quality improvement effort conducted by institutions between Years 5 and 9 of the Open Pathway that addresses a current concern or aspiration specific to the institution.

### Quality Initiative Proposal

A proposal submitted by an institution on the Open Pathway explaining the major improvement effort the institution will undertake as its Quality Initiative.

### Quality Initiative Report

A report submitted by an institution on the Open Pathway upon completing its Quality Initiative that reflects on accomplishments, documents achievements and strategies, and defines new priorities and challenges.

## STANDARD PATHWAY

### Assurance Argument Improvement Plan Feedback

In the academic year preceding the comprehensive evaluation, institutions on the Standard Pathway receive an invitation from HLC to submit an improvement plan for feedback. The institution's staff liaison provides comments intended to clarify expectations regarding the issues to be addressed within the Assurance Argument.

### Standard Pathway

A pathway for maintaining accreditation with HLC that features a 10-year reaffirmation cycle where quality assurance and quality improvement are integrated for comprehensive evaluations.

## INSTITUTIONAL CHANGE

### additional location

A place, geographically separate from any main or branch campus, where instruction takes place and students can do one or more of the following:

- Complete 50% or more of the courses leading to a degree program.
- Complete 50% or more of the courses leading to a Title IV eligible certificate.
- Complete 50% or more of a degree completion program (even if the degree completion program provides less than 50% of the courses leading to the degree).

There is no base or threshold number of students or distance from the campus necessary for a facility to qualify as an additional location under this definition.

An additional location typically does not have a full range of administrative and student services staffed by the facility's personnel. Such services may be provided from the main campus or another campus.

A facility may provide access to instruction requiring students to be present at a physical location that receives interactive TV, video or online teaching. It is considered an additional location when 50 percent or more of a distance delivery program is available through one or more of these modalities at that facility. Note: This requirement does not apply for locations in which there is a general computer lab that students might use for distance delivery courses.

An additional location has active status when students are enrolled. Its status is inactive when students are not enrolled. The status can change between active and inactive without approval from HLC. However, a location may only be classified as inactive with no student enrollment for a maximum of two consecutive years. At that point, HLC will require the institution to close the location.

### additional location confirmation visit

A visit to an institution's new additional location to confirm it is operating as described in the institution's original change request.

### campus/branch campus

A location of an institution that is geographically apart and independent of the main campus. HLC considers a location of an institution to be independent of the main campus if the location has all four of the following attributes:

- It is permanent in nature.
- It offers courses in educational programs leading to a degree, certificate or other recognized educational credential.
- It has its own faculty and administrative or supervisory organization.
- It has its own budgetary and hiring authority.

### campus evaluation visit

A visit to a new campus or branch after the campus has been approved by HLC and within six months of matriculation to assure the quality of the campus and its programs in meeting the needs of the institution's constituencies and to assure the capacity to sustain that quality.

### change of control

A transaction that affects, or may affect, corporate control, structure or governance at an accredited or candidate institution.

### Change Panel

A panel of three or more peer reviewers that evaluates a substantive change application submitted by an institution.

### Change Visit

An on-site visit by a peer review team in response to one or more substantive change applications submitted by an institution.

### contractual arrangement

An arrangement in which the institution outsources some portion of its educational programs—that is, degrees or certificates offered for academic credit (including instruction, oversight of the curriculum, assurance of the consistency in the level and quality of instruction and in expectations of student performance and/or the establishment of the academic qualifications for instructional personnel)—to:

1. An unaccredited institution.
2. An institution that is not accredited by an accreditor recognized by the U.S. Department of Education.
3. A corporation or other entity.

### Contractual Arrangement Screening Form

An online form used by institutions to initiate the process of adding or updating contractual arrangements.

### correspondence education

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.

Interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student. Correspondence courses are typically self-paced. Correspondence education is not distance education.

### Desk Review

An evaluation conducted by an HLC official of a change requested by the institution.

### distance-delivered courses

Courses in which at least 75 percent of the instruction and interaction occurs via electronic communication, correspondence or equivalent mechanisms, with the faculty and students physically separated from each other.

### distance-delivered programs

Certificate or degree programs in which 50 percent or more of the required courses may be taken as distance-delivered courses.

### distance education

Education that uses one or more of the technologies listed below to deliver instruction to students who are separated from the instructor and to support regular and substantive

interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

1. The internet.

2. One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite or wireless communications devices.

3. Audio conferencing.

4. Video cassettes, DVDs and CD-ROMs, if the cassettes, DVDs or CD-ROMs are used in a course in conjunction with any of the technologies listed above.

### Location and Campus Update System

An online system used by institutions to update existing locations and branch campuses. Institutions in the Notification Program may also use it to request new additional locations.

### Notification Program for Additional Locations

A program for qualified institutions to request approval for opening new additional locations through an expedited process.

## PEER REVIEW

### exit session

A meeting between the peer review team and the CEO of the institution at the conclusion of a visit.

### Peer Corps

The group of faculty, administrators and public members from within HLC's 19-state region who evaluate whether institutions are meeting the Criteria for Accreditation and participate in HLC decision-making bodies.

### peer review team

A group of peer reviewers conducting an evaluation on behalf of HLC.

### peer reviewer

A member of HLC's Peer Corps who may also serve as a member of HLC decision-making bodies.

### Peer Reviewer Data Update System (PRDUS)

The online system used by the Peer Corps that provides peer reviewers an avenue to update contact information, view scheduled visits and update availability.

### team chair

The leader of a peer review team, who handles contacting the institution and HLC on behalf of the team.

### team report

A report submitted by the peer review team to HLC documenting its findings and recommendation following an evaluation.

## DECISION MAKING

### Action Letter

Official correspondence from HLC to an institution detailing an action taken by one of HLC's decision-making bodies regarding that institution.

### adverse action

An action by HLC's Board of Trustees that withdraws or denies accreditation or candidacy.

### Appeals Body

A group of 15 Institutional Actions Council members appointed by the Board of Trustees.

### Appeals Panel

A group of five individuals selected from the Appeals Body by HLC's president that hears an institution's appeal to an adverse action by the Board of Trustees.

### Institutional Actions Council (IAC)

HLC's decision-making body made up of experienced peer reviewers and representatives of the public.

### institutional response

An institution's written response to a peer review team or Institutional Actions Council recommendation.

### official action

An official HLC decision made by the HLC staff, the Institutional Actions Council or HLC's Board of Trustees.

## PROGRAMS AND EVENTS

### Academies

Multi-year, mentor-facilitated programs that help HLC-accredited institutions define, develop and implement comprehensive strategies for institutional improvement. See also Academies.

### annual conference

A multi-day event featuring numerous presentations focused on accreditation and higher learning topics.

### Standard Pathway Q&A Webinars

Webinars providing the opportunity to ask questions about any topic related to the Standard Pathway, including the Assurance System, embedded improvement, monitoring, and so forth.

### Standard Pathway Seminars

Seminars on addressing improvement in the Assurance Argument that provide institutions on the Standard Pathway with assistance in formulating improvement plans and feedback on plans that have been drafted.

### workshops

Events ranging from one to three days that provide intensive, hands-on learning opportunities for individual professionals and teams of colleagues from HLC-accredited or candidate institutions.

## ACADEMIES

### Academy cohort

Institutions taking part in an Academy are grouped together in cohorts that complete the Academy experience together.

### Academy mentors

A group of trained individuals with expertise in either Academy topic, who facilitate team thinking throughout the Academy experience.

### Academy Project

A multi-faceted project focused on initiating, implementing and evaluating change related to assessment or student success. Academy teams can undertake one or more projects while participating, but it is advisable for teams to focus on one project at a time.

### Academy Roundtable

A multi-day event at which Academy teams conduct focused, guided work on their strategic Academy Projects and goals.

### Academy team

Faculty, staff and administrators from an institution who conceptualize, design and implement the institution's Academy Project.

### Academy team lead

A member of the Academy team who serves as the main point of contact for the Quality Services staff, Primary Mentor and Scholar.

### Assessment Academy

A four-year program of in-person and virtual events tailored for institutions interested in developing an ongoing commitment to assessing and improving student learning.

### Consolidated Response

The combined feedback from an Academy team's Primary Mentor and a Scholar to the team's Project Update in SparQ.

### Data Discovery

A mentor-led event in the Persistence and Completion Academy at which the institution studies its current data sets and the structures currently in place to assure campus-wide engagement in data analysis and planning.

### Event Facilitator

A Primary Mentor selected to facilitate conversations and activities at various Academy events.

### Impact Report

The Academy team's culminating report, posted at the end of the Academy cycle, summarizing the trends that occurred throughout the project and detailing the outcomes.

### Inventory (Student Success Academy)

A process of collecting and evaluating institutional data related to student populations, student success initiatives, institutional policies and procedures, or staff and faculty engagement in student success.

### Letter of Agreement

A document signed by the institution's president and HLC's president outlining the expectations of each party throughout the Academy experience.

### Mentor Consultation

An Academy event, typically conducted virtually, in which the Primary Mentor reviews the Academy team's progress and offers recommendations for the team's project development and sustainability.

### Mentor Response

Response provided by the Primary Mentor regarding the progress of the Academy team's project as communicated in the team's Project Update in SparQ.

### Midpoint Roundtable (Assessment Academy)

A multi-day event where Academy teams reflect on and evaluate their progress, refine their Academy Projects, and receive in-person mentoring.

### Orientation Workshop or Webinar

An event presented by HLC to prepare the institutional representatives heading the Academy effort to assemble and lead an effective Academy team.

### Primary Mentor

An experienced practitioner in assessing student learning and/or student success, assigned to guide particular Academy teams for the duration of their participation in the Academy. The role of the Primary Mentor is to facilitate team thinking and a project-based approach to addressing assessment or student success. The Academy team's Primary Mentor is responsible for completing the Primary Response to each Project Update.

### Project Updates

Posts to SparQ by Academy teams documenting the learning outcomes, accomplishments and results of their continuing work on the Academy Project.

### Results Forum (Assessment Academy)

A multi-day event at the end of the Academy cycle when teams evaluate the impact of their Academy Project, showcase accomplishments, share best practices, and design strategies to sustain their progress.

### Scholar

A subject-matter expert on the topic of assessment of student learning and/or student success contracted by HLC to offer additional guidance to Academy teams on their Project Updates.

### Senior Scholar

A subject-matter expert contracted by HLC to consult on the design of the curriculum and activities for all Academy components and to offer additional comments on Project Updates.

### SparQ

The online tool for project management, resource sharing, discussion and discovery. Academy teams document progress, receive Mentor and Scholar feedback, share new ideas and build a community of shared learning.

### Stewardship Forum (Student Success Academy)

A multi-day event at the end of the Academy cycle where teams share their accomplishments and findings, compare practices and benchmarks, and define strategies to sustain their student success efforts.

### Student Success Academy

A three-year program of in-person and virtual events designed for institutions seeking to establish sustainable structures that support students' achievement of their higher education goals.