EVALUATIVE FRAMEWORK FOR THE HLC CRITERIA

Policy Change Adopted on Second Reading

The Higher Learning Commission (HLC) Board of Trustees ("the Board") adopted this policy on second reading at its meeting on November 1–2, 2018.

Background

The current Evaluative Framework for the HLC Criteria has been applied by peer reviewers since January 2013, concurrent with the adoption of the Criteria for Accreditation now in effect. While the evaluative framework is generally sound, peer reviewers and institutions have expressed confusion related to the findings of "met" and "met with concerns." The adopted policy change details the conditions that would warrant a finding of "met" or "met with concerns." It also clarifies that while a finding of "met with concerns" would require follow-up monitoring by HLC, not all opportunities for improvement warrant that finding.

HLC circulated these policy changes to the membership and other interested parties after the Board's June meeting. No comments were received.

Note: The adopted policy also includes changes related to HLC's plan to phase out the AQIP Pathway. In a separate policy action, the Board adopted these and other policy changes related to the AQIP Pathway.

Implementation

This policy is effective immediately.

Adopted Policy

Wording that was deleted or revised is shown as strikethrough (~~old wording~~); new language, whether through addition or revision, is shown in bold (**new wording**). These revisions have been made on HLC's website at hlcommission.org/policies.

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

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

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

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

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

Core Components. The institution meets the Core Component if:

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

Criteria for Accreditation. The institution meets the Criterion if:

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

Revision History: February 2012 (effective January 2013), November 2018

Notes: Formerly policy number 1.1(a)2, 2013 – 1.1(a)1, 1.1(a)1.1. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013.

Related Policies: INST.F.10.010 Routine Monitoring and Data Collection