



# FEDERAL COMPLIANCE FOR PEER REVIEWERS

**Effective for Federal Compliance Reviews Beginning September 1, 2020**

Comprehensive Evaluations for Candidacy, Initial Accreditation, Reaffirmation of Accreditation, Probation and Show-Cause

## EVALUATION OF FEDERAL COMPLIANCE COMPONENTS

The evaluation of the institution's Federal Compliance Filing is to be completed preliminarily by a Federal Compliance reviewer and then, subsequent to the on-site evaluation, finalized by the peer review team that conducts the visit. The team is ultimately responsible for the contents of the Federal Compliance Evaluation in its entirety. Refer to the [Federal Compliance Overview](#) for information about applicable HLC policies and explanations of each requirement, as well as expectations for communication between the Federal Compliance reviewer and the team. When a Federal Compliance reviewer is not assigned, the review is completed by the team.

## ASSURANCE SYSTEM INSTRUCTIONS

The Federal Compliance reviewer and/or the team should download the institutional materials from the Assurance System and separately review each Federal Compliance component using the instructions provided in this document. Their findings should

be entered in the Federal Compliance tab of the Assurance System.

**Federal Compliance reviewer:** Use the template provided in the Rationale section to enter the preliminary findings for each component of Federal Compliance. The findings should include one of the following conclusions for each component, as well as a rationale that fully supports the conclusion:

- The institution meets HLC's requirements.
- The institution meets HLC's requirements, but additional monitoring is recommended.
- The institution does not meet HLC's requirements and additional monitoring is recommended.

If the reviewer recommends monitoring for any Federal Compliance component, provide that information in the Interim Monitoring section. Describe what improvement is needed as well as how HLC would determine the institution has resolved the issue. In the Rating field, select the drop-down option that reflects the reviewer's preliminary findings.

Notify the team chair when the draft evaluation is complete, no later than one week before the team's on-site visit.

**Evaluation team:** 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. If necessary, adjust the rating, preliminary findings and rationale provided by the Federal Compliance reviewer. Ensure that one of the conclusions listed above is provided for each Federal Compliance component in the Rationale section. All information in the rationale should explain the conclusions ultimately selected. Specific instructions addressed directly to the evaluation team by the Federal Compliance Reviewer should be removed.

If the team finds that there are substantive issues related to the institution's compliance with the Criteria for Accreditation, address those issues within the appropriate Core Component sections of the Review tab.

The Federal Compliance evaluation will be accessible to the HLC staff liaison when the team chair submits the draft team report for review. It will also be included with the team report when the team chair sends the report to the institution for correction of errors of fact and when the team chair submits the final team report.

## FEDERAL COMPLIANCE REVIEW INSTRUCTIONS

### 1. ASSIGNMENT OF CREDITS, PROGRAM LENGTH AND TUITION

#### RELATED HLC REQUIREMENTS: CORE COMPONENT 3.A. AND ASSUMED PRACTICE B.1.

Contact the institution's Accreditation Liaison Officer after the Federal Compliance materials are received to request a sample of course and program materials. Contact the Team Chair to ensure the Addendum Tab is activated to enable the institution to upload these materials. This sample will be used to make a preliminary determination as to whether the institution adheres to its credit hour policy.

Review the documentation submitted by the institution and make a reasonable determination as to whether the institution's assignment of credit hours conforms to the institution's policy as well as commonly accepted practice in higher education:

- The institution's policy (or set of policies) and procedures for assignment of Credit Hour for all types of courses, disciplines, programs, credential levels, formats, regardless of modality.

- The institution's course or program credit assignment procedures and its representative sample approval documentation.
- The process the institution utilizes to verify length of academic period and compliance with credit hour requirements through course scheduling.

### 2. INSTITUTIONAL RECORDS OF STUDENT COMPLAINTS

#### RELATED HLC REQUIREMENTS: CORE COMPONENT 2.A. AND ASSUMED PRACTICES A.3., A.4.

Verify that the institution has a policy and procedure(s) for addressing student complaints.

### 3. PUBLICATION OF TRANSFER POLICIES

#### RELATED HLC REQUIREMENTS: CORE COMPONENT 2.A. AND ASSUMED PRACTICE A.5.D.

Verify that the institution has demonstrated it is appropriately disclosing its transfer policies to students and to the public.

- Review the institution's transfer policies.
- Review the list of articulation agreements the institution has in place, including articulation agreements at the institution level and for specific programs and how the institution publicly discloses information about those articulation agreements.
- The information the institution provides should explain any program-specific articulation agreements in place. Also, the information the institution provides should include whether the articulation agreement anticipates that the institution:
  - Accepts credits for courses offered by the other institution(s) in the articulation agreement.
  - Offers courses for which credits are accepted by the other institution(s) in the articulation agreements.
  - Both offers courses and accepts credits with the other institution(s) in the articulation agreement.
  - What specific credits articulate through the agreement (e.g., general education only, pre-professional nursing courses only, etc.).

## 4. PRACTICES FOR VERIFICATION OF STUDENT IDENTITY

### RELATED HLC REQUIREMENT: CORE COMPONENT 2.A.

1. If the institution does not have students enrolled in distance or correspondence courses, indicate this in the Assurance System.
2. If the institution does have students enrolled in distance or correspondence courses, confirm that the institution verifies the identity of students. Confirm that it appropriately discloses additional fees related to verification to students, and that the method of verification makes reasonable efforts to protect students' privacy.
  - Determine how the institution verifies that the student who enrolls in a course is the same student who submits assignments, takes exams and earns a final grade. The team should ensure that the institution's approach respects student privacy.
  - Check that any costs related to verification (e.g., fees associated with test proctoring) and charged directly to students are explained to the students prior to enrollment in distance or correspondence courses.

## 5. PUBLICATION OF STUDENT OUTCOME DATA

### RELATED HLC REQUIREMENTS: HLC POLICY FDCR.A.10.070 AND ASSUMED PRACTICE A.6.

Verify that the institution makes student outcome data available and easily accessible to the public. These data should be available on the institution's website and should be clearly labeled. Any technical terms in the data should be defined, and any necessary information on the method used to compile

the data should be included. Data may be provided at the institutional or departmental level or both, but the institution must disclose student outcome data that address the broad variety of its programs. Additionally, if an institution uses student placement rates in any marketing or recruitment content, it must also disclose these data.

## 6. STANDING WITH STATE AND OTHER ACCREDITING AGENCIES

### RELATED HLC REQUIREMENTS: CORE COMPONENT 2.B; ASSUMED PRACTICES A.7., C.4.

Verify that the institution discloses accurately to the public and HLC its relationship with any other specialized, professional or institutional accreditors and with all governing or coordinating bodies in states in which the institution may have a presence.

**Note:** If the team is recommending initial or continued accreditation status, and the institution is now or has been in the past five years under sanction or show-cause with, or has received an adverse action (i.e., withdrawal, suspension, denial or termination) from any other federally recognized specialized or institutional accreditor or a state entity, then the team must explain the sanction or adverse action of the other agency in the appropriate section of the team report and provide its rationale for recommending HLC status despite this action.

## REVIEW OF ADDITIONAL DOCUMENTS

If an institution submits an Appendix A, the Federal Compliance reviewer and ultimately the team considers the implications of these documents in relationship to the institution's current compliance with HLC requirements, including the Criteria for Accreditation and the Assumed Practices.