

# Insights from a SACSCOC Fifth Year Committee Evaluator

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# We Will Talk About:

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- How the process works
- Discussions and non-compliance findings on IE standards
- Helpful hints for institutions
- COVID-19 considerations

# The 5<sup>th</sup> Year Committee Process

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- Committee is made of 4 clusters which review multiple institutions.
- In December 2019, each cluster reviewed 11 institutions for a total of 44.
- Clusters review, discuss and come to agreement on referrals of “non-compliance” prior to meeting at SACSCOC Annual Meeting.
- At Annual Meeting, Committee meets for two days and reviews all institutions collectively to reach final decisions.
- From there, the Committee’s decisions go to Compliance & Reports Committee (aka “C & R” Committee).

# The 5<sup>th</sup> Year Committee Process

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Personal observations:

- Very organized and methodical process
- Reviewers/evaluators are very conscientious
- Much thought and discussion given to any referrals



# Standard 8.1

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The institution identifies, evaluates, and publishes goals and outcomes for student achievement appropriate to the institution's mission, the nature of the students it serves, and the kinds of programs offered. The institution uses multiple measures to document student success. (Student achievement) [CR]

# Non-Compliance: Standard 8.1

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- Reported on a different completion rate metric than what they had informed SACSCOC they would use.
- Failed to address completion rate metric at all.
- Presented data but no analysis in narrative.
- Failed to discuss improvements in student achievement.
  - *Narrative should include how the institution has tried to improve student achievement and what gains have been made over time.*
- Reported on only two metrics clearly.
  - *Did this adequately cover mission?*

# Non-Compliance: Standard 8.1

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- Baseline or target identified for metric not explained.
  - *Was it chosen by committee based on previous performance?*
  - *Was it tied to state performance measures?*
  - *Was it part of a strategic plan?*
- Reported unusual follow up reporting cycles and/or targets.
  - *No explanation provided for unusual timelines.*
  - *Determined dates for target achievement appeared random with no clarifying explanation or interim reporting for monitoring.*

# Non-Compliance: Standard 8.1

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- Institutions failed to publish student achievement data
  - On their own website (relied on a state system website, etc.)
  - Where publicly accessible
  - As the same standards discussed in submitted narrative



# Standard 8.2a

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8.2 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:

*8.2.a. student learning outcomes for each of its educational programs. (Student outcomes: educational programs)*

# Non-Compliance: Standard 8.2a

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- Not providing evidence of student learning outcomes for all educational programs
- No SLOs for stand alone certificate programs
- Questionable use of sampling
  - *Insufficient or not representative of (i.e. “appropriate” for) the institution OR*
  - *Sampling method was not explained or evident if no explanation provided*

# Non-Compliance: Standard 8.2a

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- Providing programmatic or administrative/operational outcomes but no student learning outcomes.
- Providing little or no completed cycle assessment data.



## Standard 14.4

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The institution (a) represents itself accurately to all U.S. Department of Education recognized accrediting agencies with which it holds accreditation and (b) informs those agencies of any change of accreditation status, including the imposition of public sanctions.

(See SACSCOC's policy "Accrediting Decisions of Other Agencies.")

*(Representation to other agencies)*

# Non-Compliance: Standard 14.4

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- No evidence that it describes itself identically to each agency in terms of purpose, governance, programs, degrees, diplomas, certificates, personnel, finances, and constituents.
- Documented process for consistent representation and description is not the same as evidence of doing so.
- No evidence of notifying accreditors of sanctions.

# Helpful Hints for Institutions

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- Do not underestimate the importance of the Institutional Summary.
- Make sure the educational programs, including certificates, are clearly identified.
  - *Be crystal clear on degrees and programs.*
  - *A table is a clear, easy way to present.*
- Do not write about what you do without providing documentation as evidence.
- Do not present inconsistencies between linked documentation, references in narrative, and what is on website.

# Helpful Hints for Institutions

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- For standard 8.1, beginning in spring 2020, completion rates reported to SACSCOC have to be disaggregated.
  - *Your president and SACSCOC liaison should have received a letter with details.*
- For QEP report, do not use active links. Be sure links connect to a PDF.
- For standard 14.4, include copies of self-study reports, letters to and from accreditors, confirmations from accreditor's website.
- For standard 14.4, do not skimp on evidence or assume no one receives referrals for this.

# Resources for Additional Information

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The Fifth Year Interim Report  
(multiple documents)

<https://sacscoc.org/accrediting-standards/institution-resources/the-fifth-year-interim-report/>

The Fifth-Year Interim Report Process:  
An Overview

<https://sacscoc.org/app/uploads/2019/09/Summary.The-Fifth-Year-Interim-Report.2018.pdf>

Standing Rules of SACSCOC  
C & R Committee

<https://sacscoc.org/pdf/081705/standingrules.pdf>



# COVID19 Considerations

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- **Strategic planning postponed.** Document discussion and approvals to demonstrate “ongoing” and “comprehensive” components of IE process.
- **Assessment plan modifications.** Some assessments continued as normal some not. Be logical in reasoning and clearly explain any assessment plan modifications. (Gen Ed external assessments, surveys, SLOs)
- **Accreditation cycle** may change.