# Table of Contents

Introduction ....................................................................................................................... 1

1 The Role of the Federal Government ......................................................................... 3

2 The Role of the Accrediting Commission Staff ........................................................... 4
   2.1 Communication with the Institution ...................................................................... 4
   2.2 Team Chair Selection ......................................................................................... 4
   2.3 Team Selection ..................................................................................................... 4
   2.4 Team Training ....................................................................................................... 4
   2.5 Materials from the ACCJC and College ............................................................. 5
   2.6 Role of the ACCJC Liaison .................................................................................. 5

3 The Role of the Peer Review Team Member .............................................................. 6
   3.1 Peer Review ......................................................................................................... 6
   3.2 Conflict of Interest .............................................................................................. 6
   3.3 Expectations of Peer Reviewers ......................................................................... 7
   3.4 Multi-College/Multi-Unit Districts or Systems ................................................... 8

4 The Role of the Team Chair ....................................................................................... 9
   4.1 Communication with Institution ......................................................................... 9
   4.2 Correspondence with the Team ......................................................................... 9
   4.3 Manager of the Peer Review Team Visit ............................................................ 9
   4.4 Author of the Peer Review Team Report .......................................................... 10

5 Before the Peer Review Team Visit ......................................................................... 11
   5.1 Analysis of the Institutional Self Evaluation Report ......................................... 11
   5.2 Team Training .................................................................................................... 11
   5.3 Team Assignments .............................................................................................. 11
   5.4 The Guide to Institutional Self-Evaluation, Improvement, and Peer Review .... 12
   5.5 The Role of the ACCJC Liaison ......................................................................... 13

6 During the Site Visit .................................................................................................. 14
   6.1 Initial Meeting of the Peer Review Team ......................................................... 14
   6.2 Meeting with Institutional Staff .......................................................................... 15
   6.3 Remainder of the Visit ....................................................................................... 15
   6.4 Team Meetings during the Visit ......................................................................... 15
   6.5 Team Recommendations and Commendations ................................................ 15
   6.6 Exit Report at Conclusion of the Team Visit ...................................................... 16
   6.7 The Role of the ACCJC Liaison ......................................................................... 16
7 After the Peer Review Team Visit ................................................................. 17
7.1 Team and College Review of the Draft Peer Review Team Report ....... 17
7.2 The Role of the ACCJC Liaison .................................................................. 17
7.3 Expenses and Reimbursements to Peer Reviewers .............................. 17
7.4 Evaluation of Team Members, Team Chair, and the Visit .................... 18
8 The Comprehensive Peer Review Team Report........................................ 19
8.1 Preparing the Peer Review Team Report ............................................ 19
8.2 Considerations for the Report ............................................................... 19
9 Principles of Effective Recommendations and Commendations............... 21
10 Special Issues ............................................................................................ 26
10.1 Distance Education and Correspondence Education ......................... 26
10.2 Records of Student Complaints ............................................................ 28
10.3 Off-Campus Sites .................................................................................. 28
10.4 Checklist for Compliance with Federal Regulations and Commission Policies ................................................................. 29
11 Outline of the Peer Review Team Site Visit ........................................... 30
Introduction

The Team Training Manual is designed to be used by persons serving as peer reviewers visiting institutions that have completed an institutional self-evaluation. It is intended for use with the Guide to Institutional Self-Evaluation, Improvement, and Peer Review, which provides additional and important information for peer review teams regarding Accreditation Standards, and Commission and federal policies. The format of the team visit described in this Manual is used by all teams visiting institutions seeking candidacy, initial accreditation, or reaffirmation of accreditation.

Private, non-governmental accreditation is based on a model of peer review that involves both internal and external analysis of an institution. The accreditation paradigm includes the following elements:

- standards of good practice that are accepted by member institutions;
- internal, self-evaluation by the institution at periodic intervals;
- assessment of the self-evaluation and the institution against the Commission’s Standards by a peer review team with recommendations to the institution and the Commission;
- decision by an independent Commission regarding the accreditation status of the institution;
- follow-up by the institution to address the institution’s own plans for improvement as well as the team’s recommendations identified in the peer review team processes;
- further review and decision by the Commission; and
- possible follow-up visits by Commission representatives.

As a peer reviewer, you will conduct a careful analysis of the Institutional Self-Evaluation Report (ISER), the evidence provided by the institution, and a team visit.

The team:

- reviews the institution using the Eligibility Requirements, Accreditation Standards, and Commission policies (together Commission’s Standards);
- reviews evidence that supports the narrative of the ISER;
- notes areas that may have been inadequately recognized by the college itself;
- verifies that the college has set expectations (institution-set standards) for satisfactory student achievement (successful course completion; program, certificate and degree completion; graduation and transfer rates; licensure
pass rates; and job placement), determines that the standards are reasonable, and reviews the institution’s actions in regard to its performance on its standards; and

- reinforces the college’s commitment to educational quality and institutional effectiveness.
1 The Role of the Federal Government

The 2008 Higher Education Opportunities Act, and subsequent changes to federal regulations by the U.S. Department of Education (ED), put into law several requirements for accrediting agencies that seek federal recognition. The ACCJC holds ED recognition and therefore will ensure institutions adhere to certain federal regulations. Through ED recognition, ACCJC’s member institutions qualify for a variety of federal financial aid programs. Each time federal regulations change, the Commission may need to revise its compliance components and the requirements to which institutions must conform. Therefore, all teams that conduct peer review visits are required by federal law to examine the following:

- the institution’s continued compliance with the Commission Standards;
- the institution’s distance education and correspondence education programs and support services to students;
- the off-campus locations where 50% or more of a program is offered;
- data on Student Achievement
- data on Student Learning;
- data on student success with respect to student achievement in relation to the institution’s mission (institution-set standards)
- data on the institution’s fiscal condition including increases or decreases in revenues and enrollments;
- records of formal student complaints;
- all student and public information the college releases about its credit requirements for programs, certificates, and degrees; length of programs; costs; student degree/certificate completion rates; transfer rates; job placement; licensure pass rates; and federally required campus crime statistics; and
- information on the health of the financial aid program(s) on the campus including loan default and repayment rates over the past three years, plans to reduce those rates where needed, reviews of financial aid program(s), and audits of same.
2 The Role of the Accrediting Commission Staff

2.1 Communication with the Institution

About two years before the anticipated date of the comprehensive team visit, the staff liaison advises the institution of its upcoming comprehensive review process and provides training to the college on its Institutional Self-Evaluation Report (ISER). The college and Commission staff work together to confirm dates for the visit.

2.2 Team Chair Selection

The Commission staff invites volunteers to serve as chairs of peer review teams. Team chairs are selected based on their expertise and accreditation experience, taking into consideration the mission, culture, and uniqueness of the institution. Team chairs generally have experience as a chief executive officer of an institution; others with senior level executive leadership experience may also chair.

2.3 Team Selection

The staff liaison develops the peer review teams from a roster of experienced educators from across the region, who have exhibited leadership, a commitment to peer-based accreditation, and balanced judgment. In compliance with federal regulations, teams comprise both academics and administrators. An average team has three academics; instructional and student services administrators, a chief executive officer, a financial services administrator, and a researcher.

2.4 Team Training

All team members and the team chair must attend a Team Training on using the Accreditation Standards and the Guide to Institutional Self-Evaluation, Peer Review, and Improvement prior to the visit. Team training helps all peer reviewers understand how to conduct the review in the context of the institution’s mission and provides time for the chair to work with the team. Training topics also include interpreting the standards, writing effective recommendations and commendations, and Commission policies and federal regulations.

During the training session, the team will spend a significant portion of its time with the team to discuss its preliminary observations based on a holistic review of the ISER. The team members are expected to have completed Assignment 1 prior to Team Training per the Chair’s instructions.
2.5 Materials from the ACCJC and College

The Commission provides resources on a cloud for the team members, including manuals and other resources necessary to conduct a complete review. Sixty days before the Comprehensive Review, the college sends to the Commission an electronic copy of the Institutional Self-Evaluation Report, college catalog, most recent class schedule, and institutional data in support of its petition for reaffirmation of accreditation. The Commission will upload this information to its cloud for the Team Chair and Team Members.

2.6 Role of the ACCJC Liaison

One of the vice presidents at ACCJC serves as the staff liaison to the college and to the team. The primary role of the liaison is to support the team and the college through the peer review process. The ACCJC staff liaison is not a member of the peer review team and therefore will not review the college, nor influence the team on findings. The staff liaison abides by the Policy on Conflict of Interest for Commissioners, Evaluation Team Members, Consultants, Administrative Staff, and Other Commission Representatives. Expenses of the liaison are covered by ACCJC and not the College.
3 The Role of the Peer Review Team Member

3.1 Peer Review

The review team provides an independent, peer review of an institution. The team uses the Eligibility Requirements, Accreditation Standards, and Commission policies to prepare a report for the institution’s use, which analyzes the adequacy of its resources, the effectiveness of its procedures, the quality of its performance in pursuit of its stated mission and goals, and its evidence of student achievement and student learning. The team seeks to verify quality and integrity and to encourage continuous improvement of institutional performance. The role of the peer reviewer is to determine that the college continues to meet the Eligibility Requirements, Accreditation Standards, and Commission policies, provide guidance for institutional improvement, acknowledge areas of excellence, and provide a findings by which the Commission will make a decision on the accredited status of the institution.

3.2 Conflict of Interest

The Commission makes a special effort to maintain the integrity of the accreditation process. To this end, peer reviewers are expected to disclose any possible conflict of interest before accepting an assignment. Commission policy identifies the following conditions under which a peer reviewer should decline an invitation to serve or ask for an assignment to another team. As prescribed by the Commission’s Policy on Conflict of Interest for Commissioners, Evaluation Team Members, Consultants, Administrative Staff, and Other Agency Representatives, the Commission will not knowingly invite or assign participation in the evaluation of an institution to anyone who has:

- any current or prior employment at the institution/district/system being evaluated;
- current or prior candidacy for employment at the institution/district/system being evaluated;
- any current or prior service as a paid consultant or other business relationship with the institution/district/system being evaluated;
- any written agreement with an institution/district/system that may create a conflict or the appearance of a conflict of interest with the institution/district/system;
- personal or financial interest in the ownership or operation of the institution/district/system;
- close personal or familial relationships with a member of the institution/district/system;
- other personal or professional connections that would create either a conflict or the appearance of a conflict of interest; or
• received any remuneration, honoraria, honorary degrees, honors or other awards from the institution/district/system.

A conflict of interest arising from one of the relationships described above typically expires five years after the relationships ends. Team members or team chairs who have any questions about possible conflict of interest should contact the ACCJC staff.

3.3 Expectations of Peer Reviewers

Peer Reviewers are expected to:

• have a working knowledge of the Eligibility Requirements (ERs), Accreditation Standards, and pertinent Commission policies;

• understand that institutions are accredited using ACCJC’s Accreditation Standards rather than the regulations or requirements of other groups. (see Note 1 below)¹

• understand that peer review is the basis of the accreditation process;

• remember that team members are peers who represent the Commission;

• review the college in the context of its mission;

• maintain objectivity and flexibility by refraining from imposing the opinions and beliefs of others and having a willingness to appreciate the uniqueness and individuality of the institution being evaluated;

• rely on evidence in making judgments about the institution;

• communicate clearly and concisely, both orally and in writing;

• work as part of a team; and

• maintain confidentiality. (See Note 2 below)²

¹ Note 1: As a voluntary, nongovernmental agency, the Commission does not exercise the regulatory control of state and federal governments, nor apply their mandates regarding collective bargaining, affirmative action, health and safety regulations, etc. Furthermore, the Commission does not enforce the standards of specialized accrediting agencies or other nongovernmental organizations, nor the laws and regulations of state agencies although institutions may wish to review the publications of such other agencies as part of the self-evaluation process. The Commission has its own standards and expects that institutions and teams will apply them with integrity, openness, and an attitude of concern for students and the public interest.

² Note 2: The Commission’s Policy on Commission Good Practice in Relations with Member Institutions requires that team members keep confidential “...all institutional information examined or heard before, during, and after the team visit and after the Commission acts.” The Policy on Public Disclosure and Confidentiality in the Accreditation Process requires peer review team members “to refrain from discussing information obtained in the course of service as a peer review team member. Sources of information that should remain confidential include the current Institutional Self-Evaluation Report; previous peer review team reports; interviews and written communication with campus personnel, students, governing board members, and community members; evidentiary documents; and peer review team discussions.”

7
3.4 Multi-College/Multi-Unit Districts or Systems

The Commission schedules the comprehensive review for the colleges in multi-college districts/systems simultaneously. The Commission requires that a description of the college and district/system delineation of responsibility and authority in multi-college district/system (sometimes called a “Functional Map”) be provided with the Institutional Self-Evaluation Report. Its purpose is to provide teams with a clear description of roles and responsibilities in areas which are addressed by the Accreditation Standards, and to provide the Commission with a consistent picture of this delineation so that it can understand how an institution meets Accreditation Standards as well as make appropriate recommendations for improvement.

In order to facilitate peer review team evaluation of multi-college districts or systems, a “chair of chairs” will be identified to lead the district review team. Team members may be selected from amongst the members of the college teams, or a separate (from the college chairs and teams) district team with a district Team Chair may be assigned. The size and structure of the district/system review depends on the needs and size of the district/system. In large, multi-college districts/systems, visits to institutions may be augmented by a separate district/system team.

In either case, the chair-of-chairs is asked to consult with the other Team Chairs in preparation for the Comprehensive Review, and to develop a strategy for coordinating meetings and interviews with district/system representatives and Board members such that unnecessary redundancies are eliminated. Accreditation standards cover many aspects of administrative operations, finance, and governance as well as academic matters and in multi-college districts, the district’s adherence to standards is necessary for the colleges to meet standards. In addition, Standard IV directly addresses district or system/college relationships.

The Commission has a policy and procedure for team visits to multi-college districts/systems. This policy can be found on the ACCJC website at: https://accjc.org/wp-content/uploads/Evaluation-of-Institutions-Multi.pdf.
4  The Role of the Team Chair

The team chair organizes the visit, makes necessary arrangements for the team, speaks for the team, and is the author of the peer review team report that the Commission will review in its decision making process. Prior to the visit, the team chair contacts the institution and members of the team to ensure that needed resources will be available and that members are appropriately assigned. During the peer review visit, the team chair organizes team discussions, sees that all necessary contacts are made, sees to the needs of the team, and assures that the team’s time is used effectively. At the conclusion of the visit, the team chair conducts an Exit Report with members of the college community. At this meeting the team chair summarizes the major findings of the team but does not reveal the exact wording of team recommendations or commendations.

4.1  Communication with Institution

In preparation for the Comprehensive Review, the team chair is expected to conduct a pre-review conversation (either via phone or videoconference) with the college CEO. The purpose of this conversation is to help the Team Chair and college CEO to develop a collegial relationship, built upon the common goal of assisting the college within the context of the comprehensive review. The pre-review conversation also allows the CEO an opportunity to notify the Team Chair of major changes that may have occurred since the Institutional Self-Evaluation Report was completed and that may materially affect the course of the team’s review.

4.2  Correspondence with the Team

The team chair corresponds with the team members to welcome them to the team, to make assignments, to gather information in preparation for the Comprehensive Review, to provide information about travel and accommodations, to indicate the team schedule, and to set the tone for the entire visit.

4.3  Manager of the Peer Review Team Visit

The team chair is responsible to the Commission for the successful completion of the peer review team visit. In this capacity, the team chair guides the team during the visit, ensuring that the institutional outcomes are assessed in light of the institution’s mission and the Accreditation Standards, and that team members have the support necessary to complete their assignments.

Communication between the institution and the team should only occur through the team chair and/or the Commission office. Contacts by individuals from the institution regarding the team’s activity, findings, or conduct should always be referred to the team chair or the Commission office.
4.4 Author of the Peer Review Team Report

The team chair is responsible for writing a clear, concise, well-organized and coherent document that will stand up under the careful scrutiny of a wide variety of readers. The report should honestly reflect the views of the team, identifying strengths of the institution and areas of excellence, noting the limitations and difficulties which the college may be experiencing, and supporting the plans and potential it has for overcoming them. When individual reports from team members are well written, the team chair can often use major portions in the final report. However, team members should understand that the team chair is expected to produce a coherent, unified account of the team’s findings. In doing so, the team chair has considerable editorial latitude in constructing the final report.
Before the Peer Review Team Visit

5.1 Analysis of the Institutional Self Evaluation Report

Each peer reviewer will look at how the Institutional Self Evaluation Report (ISER) was developed, written, and edited; what evidence exists of broad involvement by campus constituencies; and the nature and quality of the evidence offered in support of the college’s assertions. Evidence cited in the Report should provide the means for determining the extent to which the institution meets or exceeds the Eligibility Requirements (ERs), Accreditation Standards, and Commission policies.

Peer reviewers should verify that the evidence referenced in the ISER clearly demonstrates that the institution meets or exceeds the ERs, Accreditation Standards, and Commission policies and that the institution is achieving its mission, educational goals, and objectives. The college should provide evidence that systematic and effective institutional planning and evaluation are being incorporated into institutional decision-making and resource allocation processes. In its ISER, the college should also identify issues of concern to the institution.

Team chairs will provide two homework assignments to facilitate the review of the ISER, drafting components of the peer review team report, and to help prepare for the Comprehensive Review. Team members must follow the schedule set forth by the team chair to ensure a meaningful review process and must be all deadlines as set by the team chair.

5.2 Team Training

Each peer reviewer is expected to attend a one-day Peer Review Team Training event. Commission staff will facilitate the workshop and will provide team members with tools that will help them conduct an effective and successful team visit. During the workshop, teams will spend significant time together to discuss initial observations of the institution based on the first reading of the ISER. Team members must complete Assignment 1 prior to team training.

5.3 Team Assignments

The peer review team is expected to read, understand, and analyze the college Institutional Self-Evaluation Report (ISER) prior to the visit. To facilitate the Team ISER Review, the Team Chair provides team members written assignments (“homework”) that must be completed per the Chair’s due dates prior to the visit. These include:

- Assignment 1: General Observations and Initial Assessment
- Assignment 2: Initial Findings and Evidence of Assigned Standard
Assignment 1: General Observations and Initial Assessment

The first team assignment should help the team acquire an overview of the ISER and develop a broad, holistic understanding of the ISER. This assignment will require the team members to read the entire Report and any supporting evidence supplied by the college in advance of the visit, keep a high-level, holistic perspective of the institution and its mission, and focus on their preliminary observations and impressions. At this point, it is not necessary to evaluate the evidence for alignment with Standards; instead, team members will consider the evidence to enhance their understanding of the institution and the ISER narrative. Assignment 1 will be the basis for a team discussion during the team training workshop to norm observations and support team dialogue and deliberations.

Assignment 2: Initial Findings and Evidence of Assigned Standard

The second team assignment should help the team member go more deeply into the ISER by working directly with the Standard(s) he or she has been assigned. The assignment is intended to:

a) assist team members to write the first draft of their assigned Standards of the Peer Review Team Report;

b) to document assessment of whether the college meets Standards based on the narrative and evidence team members reviewed in their assigned area; and

c) to identify areas where further clarification is required or additional evidence is needed in order to obtain information that team members were unable to gain from a desk review of the ISER and evidence, in order to confirm the college meets the standard.

Assignment 2 will aid the Team Chair and Vice Chair to request reasonable additional data or evidence from the institution prior to the visit.

These assignments help the team prepare for the visit. The team chair will use the written assignments the team members have produced to frame discussions during the team training workshop, and to produce the first draft of the Peer Review Team Report. The Commission provides a template to the team chairs for the Peer Review Team Report.

5.4 The Guide to Institutional Self-Evaluation, Improvement, and Peer Review

Reference to the Guide to Institutional Self-Evaluation, Improvement, and Peer Review was made in the Introduction to this Manual. This Guide is designed to be used by institutions conducting a self-evaluation and preparing an ISER as well as by teams conducting a comprehensive evaluation visit. The Guide is meant to provoke thoughtful consideration about how the institution
aligns its policies and practices with the Accreditation Standards, and it is also intended to provide guidance for a holistic, systemic review of an institution and its quality. This common Guide, used both by the college and by the peer review team, is predicated on the belief that both institutional members and team members use the Standards to assess the institution, and that they should be using the same tools to conduct that assessment.

5.5 The Role of the ACCJC Liaison

Before the visit begins, the liaison has helped to prepare the team by selecting a team chair and team members and by assisting during Chair Training and Team Training workshops. The liaison serves as a resource to the team chair and the College. He/She can answer questions about logistics, the peer review process, etc. The liaison also reads the ISER and becomes familiar with the College. The liaison can bring perspective to the team regarding the culture and concerns of the institution.

Because the liaison serves as a resource for the team, he/she will be copied on all communications between the team chair, team assistant, and College.
During the Site Visit

The peer review team visit is the culmination of a great deal of work by many individuals at the institution being visited. If implemented well, the self-evaluation process will be of great value to the institution. Peer reviewers need to be sensitive to the impact of their presence on the multiple internal and external stakeholders who interact with the college.

For peer reviewers, the team experience provides an opportunity to make a professional contribution which is not duplicated by any other experience. Working together with a group of colleagues, team members are able to become part of the life of an institution in a very positive way.

Peer review teams have the responsibility of determining whether the institution meets or exceeds the ERs, Accreditation Standards, and Commission policies and providing guidance to the institution in the form of recommendations to meet Standards or recommendations for improving the effectiveness of the institution, or commendations to recognize areas of exceptional practice. The team’s judgment about the integrity and educational quality of the institution assists the Commission in making its decision on the accredited status of the college. A positive outcome assures the public that the college is accomplishing its mission and educational purposes. Peer reviewers must refrain from making comments about “how we do it on my campus,” making negative statements about the institution’s compliance with Standards, or acting in a manner that could be interpreted as being authoritarian or autocratic.

As noted above, the team will be looking for evidence that the institution can demonstrate and support its assertions. In addition, the team will seek evidence of quality regarding the policies referenced in the Commission’s Standards, particularly, those that are part of the federal regulations checklist. These policies are found on the ACCJC website.

Initial Meeting of the Peer Review Team

The team chair will communicate with the team early in the process to set expectations for the team and will provide assignments which assist with the analysis of the college’s Institutional Self-Evaluation Report (ISER). Prior to the visit, at its first team meeting, the team reviews assignments, examines supplementary materials, and discusses themes and initial findings of the ISER. Team members should come to this meeting prepared to summarize the key issues they have identified in their primary areas of responsibility, present drafts of questions for interviews, share lists of those individuals or groups to be interviewed, and present lists of additional evidence needed for review.
6.2 Meeting with Institutional Staff

Early in the visit, the team meets with administrators, the ALO, the self-evaluation steering committee, and other members of the college staff most involved in preparation of the ISER. Team members can clarify questions they have about the institutional self-evaluation. If team members determine there are other individuals they would like to meet with, they should work with the Team Assistant to schedule those meetings. It is important to keep scheduled meetings with institutional staff.

6.3 Remainder of the Visit

Team members continue to meet with college personnel, arrange to review distance education (DE) courses per the ACCJC DE review protocol, attend team meetings scheduled by the team chair, and review documents. The team will schedule one or more open forums where administrators, faculty, staff, and students of the college may meet with team members on aspects of the self-evaluation. These sessions should be informal listening sessions, not large meetings for formal presentations by special groups. It is not required that all team members attend these forums; however, a robust turnout signals the team’s support and encouragement for the college.

The college will provide assigned members of the team access to the formal file of student complaints to ascertain that the files demonstrate accurate implementation of the complaint policies and procedures of the institution per the federal regulations checklist. The ACCJC staff liaison may also ask team members to look into a specific complaint against the institution in accordance with the Commission’s Policy on Student and Public Complaints Against the Institution to verify that the institution addressed the issue. Occasionally, someone at the institution challenges the accreditation process, self-evaluation, or visit. Information concerning these situations should be brought to the attention of the team chair.

6.4 Team Meetings during the Visit

The team holds meetings several times during the visit to summarize the work accomplished, to share concerns, and to plan for the remainder of the visit. On the final day, the team meets to review findings, recommendations, commendations, and completes its written work on the peer review team report.

6.5 Team Recommendations and Commendations

The team will finalize its recommendations for institutional improvement or for resolution of deficiencies at the end of the visit. The team will also finalize its commendations where the college exceeds Standards. The team chair will
share the subject of these recommendations and commendations with the institution’s CEO during their private meetings. However, given that the team chair has not yet edited and reviewed the complete report, neither the chair nor members of the team should share the exact wording of the team recommendations or commendations with the institution or anyone else.

6.6 Exit Report at Conclusion of the Team Visit

The team chair conducts a final exit report with members of the college community. All team members are expected to be present. At this meeting, the team chair provides an exit report that articulates the major team findings but does not share specific recommendations. While team members are expected to be present for this final meeting, the team chair is the spokesperson for the team. The exit report should not be filmed or recorded by the institution.

Team members should depart at the end of this meeting. Expressing thanks for assistance, enjoyment at meeting people, or observing institutional activities is appropriate, but team members should avoid engaging in extended conversations about the visit or the team’s findings. Team members should not respond to questions from the college community or the press any time after the visit.

6.7 The Role of the ACCJC Liaison

The liaison supports the peer review process by being present during the team visit to the extent that the schedule allows, serving as an ACCJC resource for the team chair and assisting with any matters that arise as needed. The liaison is a resource for the team to help with interpretation of Standards and to answer questions. He/She may participate in interviews as an observer. The liaison can also review drafts of the report as they develop, ensuring the report stays focused on ACCJC Standards. He/She also ensures that conclusions, commendations, and recommendations are consistent with the findings, supported by details in the narrative, and are relevant to ACCJC Standards and policies. The ACCJC staff liaison is not a deciding member of the peer review team and therefore will avoid evaluating the college and influencing the team’s findings. He/She will, however, point out if there are inconsistencies between the findings and the conclusions or areas of the draft report that may be unclear or misunderstood by an audience.
7 After the Peer Review Team Visit

7.1 Team and College Review of the Draft Peer Review Team Report

Following the team visit and prior to the submission of the peer review team report to the Commission, the team chair submits a draft of the report to team members for comment. After the team chair revises the report in response to the comments as appropriate, he/she sends the draft report to the ACCJC staff liaison for review and then sends a final draft to the CEO of the institution for correction of any factual errors. It is very important that team members communicate with the team chair about the draft in a timely manner.

7.2 The Role of the ACCJC Liaison

The liaison assists the team chair in the final preparation of the draft report for the Commission. He/She will review the report for consistency to ensure that the report stays focused on ACCJC Eligibility Requirement, Accreditation Standards, and Commission policies. The liaison will also review the report for consistency, checking to make sure that conclusions, recommendations, and commendations are supported by details in the findings. After the institution’s CEO has had an opportunity to check the report for errors of fact, the liaison ensures that the completed draft Peer Review Team Report, ISER, and the institution’s electronic evidence documents are available to the Commission for their decision-making process.

7.3 Expenses and Reimbursements to Peer Reviewers

The ACCJC reimburses each team member for necessary travel, food, and lodging expenses. Typically, the time commitment for team members is four days/three nights or five days/four nights, depending on the size and complexity of the college under review and depending on the distance that team members must travel to get to the college. The team chair will inform the team the date and time when team members are expected to arrive for the initial team meeting and the date and time of the final exit report, after which team members return to their home institutions. Exceptions to the arrival-and-departure scenario set by the team chair must be pre-approved both by the team chair, who needs to know when team members will arrive and depart, and by Commission office staff, who need to be aware of exceptions when they process the expense reimbursements. Team members who require travel arrangements outside the arrival-and-departure times established by the team chair should not make airline or hotel reservations until after they receive confirmation from ACCJC staff that they have been approved for such arrangements.

Peer reviewers receive expense reimbursement forms as part of the packet of information from the Commission office. Team members make their own travel
and lodging reservations as directed by the team chair and are reimbursed after the visit. Team members must attach original receipts for transportation, lodging, and meals to the expense form. Team members must secure approval in advance from Commission staff for rental cars. All expenses claimed by the team must be submitted with original receipts within 30 days of the visit.

Individual peer reviewers will be reimbursed by ACCJC. Ultimately, however, the host institution incurs the total cost of the team’s visit. ACCJC staff will invoice the college for the total amount of the expenses claimed by the team. Because the college bears the cost of the visit, ACCJC is respectful of the impact a peer review visit can have on an institution’s financial resources. Accordingly, the Expense Reimbursement Form explains allowable and unallowable expenses, which team members should review before making reservations. Personal expenses not listed as allowable expenses on the reimbursement form are the responsibility of the team member.

7.4 Evaluation of Team Members, Team Chair, and the Visit

As part of its ongoing efforts to ensure the effectiveness of the peer review process and provide opportunities for member feedback and input, the Commission asks that each team member participate in a brief (approximately 5 minutes) evaluation survey at the conclusion of the visit. The survey will be distributed to all team members via email. ACCJC staff use the survey results to guide and inform improvements to the peer review process.
8 The Comprehensive Peer Review Team Report

8.1 Preparing the Peer Review Team Report

The peer review team report is not usually a long document. It should be a constructive document that the Commission can use in making a decision about the accredited status of the institution as well as a document that the institution can use for improvement. The report should:

- evaluate the institution in light of its own stated mission and objectives, the Eligibility Requirements, Accreditation Standards, and Commission policies;
- provide a fair and useful estimate of the effectiveness of the institution;
- emphasize student achievement and student learning outcomes;
- make favorable comments and provide evidence to support conclusions when commendations are made;
- provide evidence to support conclusions and the recommendations of the team;
- avoid naming individuals, either in praise or blame. Comment, if necessary, on the office, not the officeholder;
- avoid being too prescriptive, leaving the specific remedy to be developed and implemented by the institution;
- serve the institution well for the next six or seven years; and
- be comprehensive in its scope.

8.2 Considerations for the Report

In preparing the written report, consider the following:

- **Internal Consistency**
  Does the report have internal consistency and flow logically, with no mixed or conflicting messages?

- **Clarity**
  Does the report say exactly what is intended so that there can be no accidental or deliberate misinterpretation?

- **Perspective**
  Does the language of the report clearly represent observations, findings, conclusions and recommendations as coming from the team as a whole, not just one member or one point of view?
• **Institutional Focus**
  Does the report deal fairly with the entire institution, without advocating selectively for constituency or other special interests?

• **Documentation**
  Does the narrative of the report support the recommendations and commendations? Do the observations, findings, and conclusions clearly state the context or evidence on which the recommendations or commendations are based? Are the specific Standards correctly cited to refer the institution to statements of best practice and Commission expectations?

• **Tone**
  Is the tone of the report appropriate to the circumstances and the intended effect? The report should encourage the institution to take appropriate actions and to engage in continuous institutional improvement. Accreditation employs the language of diplomacy, while being direct and clear as to meaning. Unduly harsh criticism or punitive language can affect the climate of an institution and can be harmful to individuals.

• **Restraint**
  Does the report stray into enforcement or advocacy of matters outside the purview of the Commission’s standards of good practice? Advocacy of other positions, state or local regulations, objectives, or compliance requirements, no matter how praiseworthy or fashionable, must be cast within the language of the Commission’s Standards.

• **Audience**
  Consider who might read the report, and with what purposes in mind. The document will be available on the college’s website after the Commission makes its decision on the accredited status of the institution, and will be available to any public member, including the press, government agency, or legislator. Review the report through public eyes.
9 **Principles of Effective Recommendations and Commendations**

One of the most challenging tasks of the peer review team is drafting recommendations to the college. The team needs to choose a level of generality or specificity that best serves the college’s needs. The Commission believes that recommendations that are tightly linked to the Standards and Commission policies and that call for a thoughtful response by the institution are preferable to an extensive list of many details of how the institution is to achieve compliance or improve.

In writing recommendations, be thoughtful about the institution’s need for either specific language or more general language. A brief diagnostic statement of the problem, linked to appropriate Standard language is usually sufficient, leaving the specific remedy to be worked out by the institution.

The content of the findings and conclusions sections of the peer review team report should logically and clearly set the stage for any recommendation that the team wishes to make. It should be clear by someone reading the finding and conclusion sections for the standards cited in a recommendation why the recommendation exists.

All recommendations should be followed by a citation of the Standard(s) in question, assuring that the institution will understand what is being recommended and which Standard(s) are related. The peer review team should review all draft recommendations as a group during and at the conclusion of the team visit, but the chair is required to consider editing them later to improve clarity and eliminate any inconsistencies that may exist.

Commendations should be tied to a specific standard(s) and should be reserved for things the college is doing that go above and beyond the bench of what is required to meet the standard(s). One way to decide whether something should be a commendation is to think, is what the college is doing in the context of a standard something that is conference worthy and others could benefit from? Since commendations go on the Commission’s action letter, it’s important that they meet this high bar.

1. **Recommendations should set expectations that an institution take an action or complete a task using language such as “complete the program review,” “implement the new budgetary process,” etc.**

Recommendations that tell an institution to “design a new budgetary process” often result in an institution’s failure to implement the recommendation, and recommendations that tell an institution to “review” or “consider” something frequently result in no action or improvement.
2. **Recommendations should reference Accreditation Standards.**

Both the college and the Commission should be able to tell at a glance which ER(s), Standard(s), and Commission policies are being addressed. This can be accomplished by using language from the Standard and citing the Standard at the end of the recommendation (i.e., Standard II.A.6, ER 20, Policy on Distance Education and on Correspondence Education). An example of a recommendation with appropriate Standards cited follows.

“...should establish clear, written policies and procedures delineating roles and responsibilities of the various campus constituencies that participate in institutional governance.

*(Standards IV.A.2, IV.A.3)*

Although ERs are cross-referenced in the Standards, they should not be cited for recommendations to improve institutional effectiveness. ERs may be cited for recommendations to meet Standards only if the team determines that the institution does not meet the Eligibility Requirement in addition to not meeting the related Standard.

3. **Recommendations should flow logically and clearly from the observations, findings, and conclusions in the peer review team report.**

The college will have difficulty responding to and understanding the rationale for a recommendation that has no prior reference in the report. The team should cite evidence it uses to conclude non-compliance with accreditation requirements or to conclude a need for improvement.

4. **Recommendations should make it clear whether they are designed to bring the institution to a level that meets the Standard (“In order to meet the Standards, the team recommends that the college...”) or whether they are designed to strengthen a condition that already meets the Standard (“In order to increase effectiveness, the team recommends that the college...”).**

The conclusion sections of the peer review team report should provide an overall summary finding for each section of the Standards, including a statement on whether or not the institution meets the Standard. The recommendation should flow logically from such a statement. (“The College meets the Standards”; “The College meets the Standards except . . . “; or “The College does not meet the Standard.”)

5. **Recommendations which relate to several Standards can be combined into overarching recommendations.**

This will help to avoid repeating recommendations over and over for each relevant Standard. The team should carefully check Standard references when recommendations are combined since sometimes in the consolidation process, the links to specific Standards are weakened or
lost. It is important for such overarching recommendations that the findings for each referenced Standard describe the related deficiency that is impacting the College’s ability to meet the Standard.

Overarching recommendations should be presented in their complete form after the Standard section where they first occur and referenced thereafter. This sample combined recommendation has been carefully linked to the Standards.

**Sample Recommendation 1:**

“In order to meet the Standards, the team recommends that the college institutionalize its planning, program review, and budgeting processes by implementing and regularly using them. (Standards I.B.5, I.B.9, II.A.2, II.B.3, and II.C.1)”

**Sample Reference:**

*See Recommendation 1*

6. **The report should be consistent in its stance on key issues.**

Complimenting a college and making a recommendation on the same issue elsewhere in the report leads to confusion, and such inconsistencies will only serve to weaken the usefulness of the report. Commendations should be consistent with the findings and evidence, and conclusions sections of the Peer Review Team Report, as should recommendations.

7. **Clarity and Directness.**

Colleges benefit most from clear and direct team statements that don’t “beat around the bush” and that don’t leave room for a good deal of debate about the team’s intent or meaning. It is challenging, but necessary, to be as direct as possible.

8. **Recommendations should not contain references that are not part of the ERs, Accreditation Standards, and Commission policies.**

Terms like “Americans with Disabilities Act (ADA),” “shared governance,” “matriculation,” and “collegial consultation” have specific meaning in the systems which govern some member institutions. While the principles included in these terms may be embodied in the Accreditation Standards, avoid creating confusion that may result from the use of these specialized terms.

The following examples of poorly-written recommendations use terms that derive their meaning from sources other than the Standards:
“The team recommends that the college review and validate instruments for cultural bias, meeting matriculation guidelines, and regulating cutoff scores.”

“The college should complete its Minimum Qualifications equivalency review of faculty.”

9. Recommendations should not be based on the standards of governmental agencies, the legislature, or organizations.

The relevant standards for the team are those of the ACCJC. Team member concerns about compliance with external laws or regulations can creep into a team’s recommendations, as in the following example of an inappropriate recommendation.

“The College President should ensure the full implementation of the new college quantitative program model and ensure implementation of the Accountability Model derived from Assembly Bill 1725.”

10. Recommendations should be diplomatic, but not to the point of vagueness.

The college needs to know what the problem is and not be put in the position of trying to guess what the appropriate response might be. The same comment might be made about recommendations which are clichés, or unsupported generalities. Some examples of what not to write are:

“The Physical Science building has numerous safety problems.” “The College needs to do planning.”

“Cultural diversity needs to be clarified and communicated to the College community.”

11. Recommendations should not contain a “Standards dump” of every loosely related Standard imaginable.

Recommendations are intended to give clear direction on the areas where the college needs improvement. Such “Standards dumps” may confuse or overwhelm the college. Cite only those Standards that will be directly impacted by the recommended action, not those that will be indirectly impacted.

12. Recommendations should not be prescriptive.

Describing how a problem should be solved should be left up to the institution. Note how these recommendations are written; they are not to be emulated.
“The ventilation fan in the Central Duplicating area should be replaced with a heavy-duty model.”

“The college should have a Diversity/Affirmative Action Officer on campus in order to coordinate training for faculty screening committees and to provide multicultural awareness training for all staff.”

13. Recommendations should not tell the college to “continue to” engage in a particular activity.

Recommendations are intended to provide advice in areas where the college needs direction that will enable it to meet the Standards or improve. Recommending that a college “continue” implies that it is already working on improvements. Such recommendations are moot.

14. Commendations should be for practices directly tied to a standard(s) that exceeds what is required of the standard(s).

Commendations should only be identified when the college exceeds the standard(s). Commendations are for things the college is doing that go above and beyond the benchmark of what is required to meet the standard(s).
10 Special Issues

10.1 Distance Education and Correspondence Education

Introduction

The Commission Policy on Distance Education and on Correspondence Education (in compliance with federal regulation 34 CFR § 602.3) specifies that all learning opportunities provided by accredited institutions must have equivalent quality, accountability, and focus on student outcomes, regardless of mode of delivery.

In an effort to assist with the review of Distance Education courses as part of a peer review visit during spring 2021, ACCJC has developed the following temporary provisions for the review of Distance Education courses.

ACCJC upholds its commitment to academic quality and continuous improvement. At the same time, ACCJC recognizes the challenges colleges have faced, because of COVID-19, with rapidly moving instructional courses into the distance education modality. ACCJC is also aware of the likelihood that many of these courses, which have adapted quickly for the distance education modality, will go back to being offered only in the face-to-face modality as soon as permitted.

In light of these circumstances, the review of Distance Education courses, as part of a spring 2021 visit, will occur in two separate cohorts:

1) Courses previously approved to be taught 100% online for the distance education modality prior to COVID-19 that would normally be scheduled as a distance education course; and

2) All other distance education courses offered 100% online in the distance education modality as part of the college’s response to COVID-19.

The review of two separate cohorts will allow teams to target any possible recommendations to a particular cohort of courses, which will better assist the college with the most effective and appropriate response.

Guidelines for Reviewing Distance Education

The guidelines below are suggested activities intended to promote consistency (1) in the way that institutions prepare for the peer review team, and (2) in the way that peer review teams observe distance education, especially online classes.

- The team chair will appoint one or two team members to observe a randomly selected cadre of distance education classes from the semester prior to the team visit.
• The college will work with the Team Chair regarding the random selection of fully online distance education classes to observe. The college should select no fewer than 15 separate sections but no more than 10% of the total number of distance education sections offered in one semester.

• The college will provide peer reviewers with access to archived distance education classes from the semester immediately preceding the semester of the visit, affording them the opportunity to observe “regular and substantive” interaction through a full semester, quarter, or shortened term. Review of archived classes also ensures that the reviewers’ presence in the online class will not interfere with the instruction or the course design.

• The college should provide access to archived online sections from the semester or quarter immediately preceding the visit, so assigned team members will be able to conduct their observations of the courses as part of the desk review of the evidence prior to the actual visit.

• Peer reviewers should be allowed access as an instructor or teaching assistant so that they will be able to observe all facets of instructor interactions with students. Considering the sensitive nature of such observations and acting in accordance with the Commission Policy on Public Disclosure and Confidentiality in the Accreditation Process, the peer reviewers will maintain confidentiality throughout the observations and report writing.

• Peer reviewers should evaluate the courses using the institution’s own definitions and expectations for regular and substantive interaction.

• Peer reviewers should triangulate their findings by confirming their observations through interviews with faculty and students who participate in distance education, and with managers or administrators who oversee distance education, and by using those interviews to uncover the root of deficiencies that they may have found in their observations.

• In keeping with federal policy §602.17(g), peer reviewers should be able to ensure that effective student verification processes are being employed; that student privacy is protected; and that, if there are any additional charges for these service, the college has written policies that students will be notified of such charges at the time of registration or enrollment.

When it comes to determining if a recommendations pertaining to distance education is necessary, and the type of recommendation, compliance or improvement, the peer review team needs to consider several factors. For example, if a team finds that less than half of the online classes observed demonstrated evidence of regular and substantive interaction, the team should explore through its interviews with members of the college community,
including faculty, students, and administrators, and review of all evidence, the issues pertaining to the low percentage. It could be, if less than half of a college’s online classes demonstrate regular and substantive interaction, that the institution is experiencing challenges with one or more of the following: publishing or implementing policies and procedures related to distance education, ensuring professional development opportunities for online instructors, establishing accountability measures to monitor and ensure regular and substantive interaction, or embracing adjunct instructors in professional development and course development opportunities.

In considering recommendations, the team will want to clearly identify the Standards in which the institution is deficient or needs to improve. The team will want to ensure that in the discussion of the findings for those standards, the deficiency or area to improve in distance education is specifically called out in the team report.

The team will want to document the challenges carefully in its findings and then write recommendations appropriate to the identified issues. In the Peer Review Team Report, the team must ensure that its responses to the checklist questions pertaining to the Policy on Distance Education and on Correspondence Education are consistent with its findings and recommendations in the body of the report.

10.2 Records of Student Complaints
(Addressed in the College’s response to the Policy on Student and Public Complaints against Institutions)

Teams will review the formal complaints/grievances filed by members of the institution (faculty, staff, students) to determine that relevant policies and procedures are being followed and whether patterns to the complaints are obvious that could indicate a need to be addressed by the institution. The institution is expected to provide, for the team’s review, complaint files for the period since the last comprehensive visit. The team will also ascertain whether the college website informs the public how to file a complaint with the ACCJC.

10.3 Off-Campus Sites
(Addressed in Standards II.A, II.B, II.C, and III.B)

Members of the team, as determined by the team chair, should visit any off-campus sites where 50% or more of a program can be completed to verify that equitable services are provided and proper administrative oversight is established.
10.4 Checklist for Compliance with Federal Regulations and Commission Policies

A Checklist for teams to use to when evaluating institutional compliance with Federal Regulations and Commission policies, in addition to what is specifically evaluated within the language of the Accreditation Standards, is provided to the team chair for use during the peer review team visit. For each category, team members are asked to evaluate the specifics of federal regulations or Commission policies, reach a conclusion regarding the institution’s compliance, and provide appropriate narrative. **NOTE: This checklist will become part of the Peer Review Team Report.**
11 Outline of the Peer Review Team Site Visit

This section outlines the important characteristics and processes of a team visit. While each visit has its own unique characteristics and context, there is a fairly predictable pattern of events.

I. Before the Visit

A. Information from the Commission Office
   1. Invitation to serve on a peer review team
   2. Notice of Team Training Workshop
   3. Team Training Workshop and resources
      a. Team Training Manual
      c. Team Training Materials
   4. Team roster

B. Information from the institution—at least eight weeks before the visit
   1. Institutional Self-Evaluation Report (ISER)
   2. Electronic evidence documents

C. Information from the Team Chair
   1. Introductory information and welcome
   2. Team survey for making assignments
   3. Team member overview of the ISER (Assignment 1) and Team Member analysis of assigned Standards (Assignment 2)
   4. Team schedules, logistical arrangements, and other matters of interest

D. Team Member Activities before the Visit
   1. Attend mandatory Team Training workshop
   2. Read Commission manuals, guides, and related materials
   3. Read entire ISER and related materials
   4. Review electronic evidence provided by the institution
   5. Respond promptly to team chair requests for information and reports
6. Prepare analyses of the ISER as directed by the team chair (Assignments 1 and 2).
7. Prepare lists of individuals/groups for interviews to give to the team chair
8. Prepare analytical questions regarding the ISER.
9. Make appropriate travel arrangements

II. During the Visit

A. The First Team Meeting
   1. Arrive on time
   2. Bring appropriate reports or analyses, according to team chair instructions
   3. Discuss initial team reactions to the ISER, identify common concerns or themes, and determine team approach to institutional issues

B. The First Day
   1. Attend opening meetings, campus tours as scheduled
   2. Become familiar with documents presented electronically and in the team room; examine those documents relevant to the areas of primary and secondary responsibility
   3. Schedule and conduct meetings and appointments, including evening and off-campus locations and distance education programs and services
   4. Participate in team meetings as scheduled
   5. Confer with other team members as needed
   6. Visit centers and review DE/CE courses as appropriate
   7. Begin team discussion of core institutional themes
   8. Organize findings of first day activity and identify issues/questions for second day focus
   9. Continue writing first draft of report to team chair

C. The Second Day
   1. Continuation of first day activities with special focus to:
      a. Complete validation of areas not addressed the previous day
      b. Pursue any issues delegated by the team chair
c. Conduct cross-validation of evidence for which conflicting information is provided

d. Conduct careful evaluation of institutional evidence to support assertions made in the ISER

e. Coordinate findings with other team members

2. Team meetings and discussion of core themes
   a. Identify key team recommendations
   b. Confirm that all Standards are being addressed by the team
   c. Develop framework for the peer review team report
   d. Submit assigned Standard Team Member drafts
   e. Complete assigned Standard team member drafts
   f. Develop formal recommendations and/or commendations

D. The Third Day
   1. Complete gathering final information or evaluation of evidence
   2. The final team meeting
      a. Review team member findings, reports, and recommendations/commendations
      b. Agree on team recommendations/commendations
      c. Submit final assigned Standard team member drafts to team chair
   3. Attend final exit report meeting and leave campus promptly

III. After the Visit
   A. Send Expense Form (with original receipts) to Commission office within 30 days
   B. Review team chair’s draft of the peer review team report
   C. Complete the Appraisal of the Team Chair and Evaluation Visit