Accreditation in the USA: origins, developments and future prospects
Improving the managerial effectiveness of higher education institutions

Accreditation in the USA: origins, developments and future prospects

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<tr>
<td>CHEA</td>
<td>Council for Higher Education Accreditation</td>
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<td>C-RAC</td>
<td>Council of Regional Accrediting Commissions</td>
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<td>MSA</td>
<td>Middle States Association of Schools and Colleges</td>
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<td>NCA</td>
<td>North Central Association</td>
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<td>NCATE</td>
<td>National Council for Accreditation of Teacher Education</td>
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<td>NEASC</td>
<td>New England Association of Schools and Colleges</td>
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<td>NWA</td>
<td>Northwest Association of Schools and Colleges</td>
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<td>SACS</td>
<td>Southern Association of Colleges and Schools</td>
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<td>WASC</td>
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SUMMARY

Throughout the last two decades, governments around the world have raised new questions about the quality and relevance of their systems of higher education. This new questioning, and a general shift towards more formal systems of quality assurance, can be seen as a response to the increased size, complexity and diversity of the higher education sector under conditions approaching mass higher education.

In the USA, the story of accreditation is both old and new. Accreditation agencies were established in the USA in the early years of the twentieth century, a response at the time to growing numbers of institutions and to the uncertainties these new institutions posed in terms of whether academic standards were consistent across all institutions. Accrediting policy and practice have been elaborated and become more complex since those early years, but the core issues have remained every bit as important. Agencies that have responsibility for quality assurance must have defensible standards; they must follow transparent and fair evaluation procedures that are directed to important educational questions. But what form should such standards and procedures take? How can they be specific enough to allow monitoring yet general enough to allow institutional flexibility?

In recent years, many of the policy debates surrounding accreditation have focused on whether academic standards in new institutions – especially, distance education providers and proprietary, profit-making institutions – are comparable to those of traditional educational institutions. The policy issues that these ‘new’ institutions raise are challenging, but they can also be seen as being variations on the long-standing tensions that quality assurance
agencies have faced about the adequacy and appropriateness of their standards and procedures.

This study analyzes the accreditation experience in the USA. It gives special emphasis to the issues and decisions that surrounded the development of evaluation procedures and standards, including the different actions taken by accrediting agencies at different times. A case study of an institution’s recent experience with accreditation review is included, as a way to offer the institutional perspective on the accrediting process.

Attention is given to the broader questions of co-operation between accreditation and government, the effect of accrediting requirements on the ways that universities function, and the arguments that can be made about accreditation’s overall role and impact. It also reviews some early steps that have been taken by USA accrediting agencies to address the issues of educational quality that are raised by the rapidly expanding role of information technology.

The study begins with a review of the circumstances surrounding the initial development of accreditation early in the twentieth century, the period when the regional organization of accreditation first developed. It then pays attention to the major changes in procedure and standards that occurred over the following decades, especially the responses that were necessary due to the rapid expansion of enrolments and institutions between the 1950s and the 1970s. Finally, analysis turns to the ways that accrediting agencies have confronted questions about the adequacy and appropriateness of their procedures during the past decade. Some discussion is offered on several new approaches to self-study and site visits that the accrediting agencies are developing at present.
Summary

Quality assurance agencies in all countries can expect to face continuing tensions in carrying out their responsibilities to society. This publication may offer some lessons and insights from the lengthy USA experience on ways to address those continuing responsibilities.
I. INTRODUCTION

Throughout the past two decades, governments around the world have raised new questions about the quality and relevance of their systems of higher education. This new attention to quality assurance represents a long-term trend, part of each country’s response to the increased size, complexity and diversity of higher education as enrolment expands to points approaching mass higher education.

In the United States of America, quality assurance has a long record of experience, extending back to the early years of the twentieth century when accreditation agencies were established. Their initial mandate was limited, directed towards establishing a common basis for admitting students and for allowing students to transfer between institutions. Accrediting practice has changed dramatically since those early years, affected both by major growth in higher education and by changes in the way that state and federal governments have become involved in monitoring accountability for higher education.

The issues that accreditation faces today are new in some respects. There is much debate, for example, about how to evaluate the academic standards of institutions that rely on electronic, on-line methods of delivery to distant students and, also, the new institutions that are part of proprietary, profit-making corporations. The policy issues that these new approaches raise are challenging, but they can also be seen as variations on the long-standing tensions that accrediting agencies have faced. Significantly, the questions for accreditation activity still focus on the adequacy and appropriateness of an institution’s practices and whether those practices achieve good results.
Defining accreditation

Accreditation is a difficult term to use because countries differ in how the term is defined. In American usage, accreditation is seen as a mark of quality. It is awarded on the basis of a process by which an educational institution (or an academic programme) provides information to an outside body that independently evaluates that information and makes a public statement about the worth or quality of the institution or programme. The central role of accreditation, then, is to publicly attest to the worth of an educational institution or academic programme.

Accreditation processes in the USA are decentralized; a large number of independent, non-governmental agencies carry out this role. Through a network of accreditation agencies, almost every institution of higher education in the USA is accredited or, if new, in the initial stages of becoming accredited.

Accrediting agencies organize and conduct institutional reviews and, with information from those reviews, they make decisions on whether or not to accredit an institution. These decisions are publicly announced and have consequences for the institution involved, for other institutions (e.g. whether they will allow credit and degree recognition) and for certain government agencies (e.g. whether the institution is eligible to participate in certain government programmes). Almost all institutions of higher education in the USA undergo accreditation review, both initially and then on a regular schedule of periodic reviews. If conditions have deteriorated, re-accreditation can be denied.
The structure of accreditation in the USA

Two different types of organizations carry out the accrediting role:

- Institutional accrediting agencies (also called regional accrediting agencies), which review and accredit the educational capability of entire universities and colleges. These agencies are organized regionally.

- Programme accrediting agencies (sometimes called specialized accrediting agencies), which review and accredit academic programmes, especially those related to professional specializations (e.g. law, nursing, engineering).

In the USA today, there are at least 50 accrediting agencies, including 11 that evaluate entire institutions of higher education and another 40 or so that evaluate specific academic programmes. Annex 1 offers a listing of the six agencies, organized on a regional basis, that accredit entire institutions. Two of these agencies have separate commissions for two-year and four-year institutions, which is why these agencies are sometimes said to total eight in number. These regional agencies are the most widely known accrediting agencies in the USA and, often, it is their practices that are being described when general descriptions of American accrediting practice are found in the literature on quality assurance. In the last few years, these regional agencies have begun to meet regularly to consider ways to co-ordinate their activities, coming together as the Council of Regional Accrediting Commissions (C-RAC).

It might be noted, too, that five other agencies conduct accreditation of entire institutions, each with a focus on a special type of institution (bible colleges, theological schools, distance education schools, independent schools and rabbinical schools).
Another organization, the Council for Higher Education Accreditation (CHEA), adds to the overall picture: CHEA represents the views of accrediting agencies generally in the USA, with individual accrediting agencies as its membership. CHEA’s web site includes reference listings and links to all recognized accrediting agencies in the USA, including both institutional accreditors and programme accrediting agencies.

Annex 2 lists some examples of the accrediting agencies that focus on specific academic programme areas. The accrediting agencies for engineering, business, and medicine, for example, are well known internationally. About 40 agencies exist, mostly to set standards and monitor educational programmes in professional fields of study.

In USA usage, an academic programme is an entire programme of study leading to either an associate degree, a baccalaureate degree, a master’s degree, or a doctoral degree. Not all programmes of study are subject to accreditation. Those programmes that are subject to accreditation review are found especially in programmes tied to health care (e.g. medicine, dentistry, pharmacy, public health, nursing), the performing arts (e.g. art, music, dance), teacher preparation (e.g. high-school teachers, school counsellors) and other professions (e.g. architecture, engineering, law).

Both types of accreditation take responsibility for conducting a two-stage quality assurance process that, first, develops standards for assessing quality and, then, monitors the educational offerings of universities and colleges to ensure that those standards are met. As a general rule, these agencies work separately and set their own procedures. However, there have been numerous initiatives, especially from the 1970s onward, to have accrediting agencies harmonize their standards and activities. Also, when two agencies
have activities that relate to the same institution, they sometimes conduct joint visits.

It is important to understand that this system of accreditation is privately organized and maintained. Most of these agencies limit their activities entirely to accreditation reviews. As private, non-profit associations, accrediting agencies are financially self-supporting. Accrediting agencies receive, from each member institution, annual dues that support the agency’s work. Budgets and staffing are modest; one regional agency, for example, has an annual operating budget of just under $2 million, with a staff of 12 persons. On this basis, it monitors about 160 institutions, with a combined enrolment of over 650,000 students.

Accrediting agencies operate wholly apart from any governmental body and do not require government approval or receive government funding. It can be noted, too, that the division of labour and geographical jurisdictions on which the regional accrediting agencies operate have emerged over time, not by any central directive. Similarly, co-ordination among the agencies is voluntary, and depends on willingness of each institution or programme to agree to coordinated activity.

For almost a century, as the process of accreditation has evolved and changed, universities and colleges have continued to accept accreditation as a legitimate mechanism for providing assurances to the public about the quality of higher education. Colleges and universities are the members of regional accrediting organizations and participate in the shaping of their policies and procedures. The formal authority of accrediting agencies rests with elected Commissions, typically made up of 15 to 25 elected members that represent different academic institutions and academic positions, and that also include several ‘public’ members. The Commissions
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have the authority to set policy; the staff role is to carry out those policies.

As membership-based agencies, regional accreditation depends, in turn, on the voluntary acceptance of their procedures by member universities and colleges. This ‘bottom-up’ orientation reflects a distinctively American cultural style. It is one in which accreditation has not been shaped by government but, instead, by collective decisions among college and university leaders as to how they might fulfil their responsibilities to demonstrate accountability to the public.

Consistent with this approach are the general assumptions on which accreditation processes are based, including: first, that each academic institution should define its educational purposes and be evaluated primarily according to those purposes, and not by any single common standard; second, that the institution itself should play a major role in accreditation through a self-study process; and third, that persons with academic expertise should participate in the inspection visits that allow accrediting bodies to validate quality.

Accreditation, along with many other aspects of higher education, thus reflects a typically American preference for ‘bottom-up’ solutions, where decisions are made by individual institutions or programmes. Implicit in this approach, too, is a sense of caution or distrust about any forms of external accountability. A governmental form of accreditation review would be very unpopular. So, too, this cautious attitude towards external accountability helps explain the small staff of accrediting agencies and their reliance on the voluntary services of site visitors that are distinctive aspects of quality assurance in the USA.
Purposes of this study

This publication reviews the accreditation experience in the USA in some detail. It emphasizes the choices made by accrediting agencies at different times as to how they would conduct evaluations and what standards they would use. The issues and circumstances surrounding the initial development of accreditation early in the twentieth century are reviewed in Chapter 2. Chapters 3 and 4 trace major changes in procedure and standards from the 1950s to the present, examining the evolution of monitoring procedures and standards, respectively. Chapter 5 offers a case example, designed to illustrate an institution’s experiences with accreditation. Attention is given, in Chapter 6, to some of the challenges that the twenty-first century is posing for accreditation procedures as growing complexity, globalization and advances in instructional uses of electronic technology allow new forms of educational provision to emerge. The overall impact of accreditation, and the continuing tensions that voluntary accreditation faces in its relationship to government, are assessed in Chapter 7.

The concluding chapter offers lessons from this lengthy USA experience about some enduring issues in quality assurance that may be of value to governmental officials in other countries. The objective is not to provide a history but, instead, a resource for quality assurance agencies wishing to re-examine their own role and strategies. It should be understood that this record of USA experience is based in specific times, traditions, and challenges, and decisions about quality assurance need to be made according to each country’s circumstances.

As the long USA experience illustrates, the original purposes for which agencies were established may be different from the advantages they currently offer. For the USA, the organization of
accrediting activity by region emerged because of historical factors, geography and existing institutional patterns of informal cooperation. Today, however, the regional structure is useful as a decentralized approach that allows a much expanded system of higher education with almost 15 million students to be monitored in an effective manner. No remote bureaucracy must be confronted if problems arise. Staff of each regional agency are in touch with members, and often serve as part of visiting teams; such direct contact with members, and with the review process, would be difficult if a single national organization existed. Issues of co-ordination develop, of course, but they can be addressed on an orderly basis and, in any event, are considered by most observers to be the lesser of two evils.

Two other points should be made. First, for purposes of clarity in reviewing a long history of accrediting experience, this publication gives the most attention to the practices of regional accrediting agencies, with some attention to the practices of programme accrediting agencies when pertinent differences arise. Second, this publication attempts to cover the general points likely to be of greatest relevance to readers from other countries. In view of the autonomy that each agency has, it is difficult to generalize on many points and it was not possible to make reference to many exceptions or to distinctive practices that have been developed. Because all agencies have detailed publications, and most make their publications available through their Internet web sites, it is prudent for the reader to look directly at a specific agency’s procedures for a more specific understanding of accrediting decisions and practices.
II. THE DEVELOPMENT OF ACCREDITATION:
THE EARLY YEARS

The development of USA accreditation is a story of experience that has accumulated over about a century’s time. Key processes and structural forms were initially developed during a few decades early in the twentieth century. These procedures have been modified many times and additional accrediting agencies have been established over the years, but many aspects of the original approach endured. As is true with many other ‘inventions’, particularly in areas of public policy, accreditation developed initially to solve a specific problem narrower than the role it later acquired. Its initial structural form has lasted, even though its historical context and early rationale may no longer be relevant.

It is valuable to understand the way accreditation began, not only to examine the peculiarities of its origins but also to understand how certain approaches were chosen. The early structure of accrediting agencies, their governance arrangements and operating methods, and the way they related to government all provide the historical underpinning of the elaborate accreditation system that can be observed today.

The origins of accreditation are reviewed in this chapter, following a short history of higher education’s own development during the twentieth century. Two related stories are told: how regional accrediting began, and how programme accrediting began. It should be acknowledged that these historical reviews depend heavily on detailed accounts prepared by Young (1983), Glidden (1983), Bemis (1983), Rudolph (1990), and Geiger (1970).
The historical context

Anyone familiar with higher education in the USA today understands that it is a very large enterprise. Almost 15 million students enrol for formal study each year, and their education takes place in a wide variety of settings. More than 4,000 institutions of higher education offer instruction leading to degrees that range from two-year associate’s degrees to doctoral degrees requiring eight or more years of study beyond high school.

Most USA institutions of higher education are quite large. Many state universities enrol 30,000 or more students, and typically are part of large state-wide systems of universities that, together, may enrol 200,000 students and more. Similarly, many community colleges enrol 30,000 or more students and are part of multi-institutional systems that extend their programmes widely across urban and metropolitan areas of the USA.

Adding still greater complexity, literally thousands of private institutions offer instruction in higher education. Some are prestigious, traditional colleges or universities founded centuries ago. Others are private colleges and universities that were established in the last century to serve distinctive groups or growing urban areas, sometimes to offer unusual approaches to instruction. This traditional segment of the private sector has long held the general respect of academics and the public. The private sector also includes a newer segment, made up of thousands of small institutions that provide job-oriented certificate programmes; many of these institutions are organized as proprietary, profit-seeking entities. A small number of proprietary institutions have sizeable overall enrolments based on multiple locations throughout the USA. In the past decade, a few other private institutions have emerged that offer
degree instruction either wholly or extensively through electronic delivery methods; some are subsidiary units of large corporations.

The system of quality assurance for USA higher education is complex and, undoubtedly, confusing to outside observers. No single agency takes responsibility for quality assurance and the federal government has a limited, indirect role. State governments have general responsibilities for providing education, but a limited role in quality assurance, mainly to authorize educational institutions to operate within the state and to license entry into certain professions. Instead, independent accreditation agencies have the central role in ensuring educational quality in higher education. Here, too, confusion is not easily avoided. No single nationwide accreditation agency exists. The primary accrediting agencies are regionally organized, each with separate jurisdictions. Collectively, they accredit education in all states, but work independently of each other, and their procedures differ in many respects. Overlapping accrediting responsibilities exist, especially between the work of regional agencies, which monitor the activities of entire institutions, and the work of programme accrediting agencies, which monitor and accredit specific academic programmes, or disciplines, located within those same institutions.

Does this make sense? Can the USA structure of quality assurance offer any guidance to other countries? Are certain elements worthy of adoption, and can they be thought of separately from the overall structure of accreditation as it currently exists? Most American commentators would respond that, complex as it is, this approach to accreditation does serve a salutary purpose, protecting the public interest as well as any other approach could, especially for such a large and varied higher education system. Many would argue that USA higher education is responsive to change and accomplishes its
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public purposes at low cost and in a manner that protects the ability of educators to make their own decisions about how to organize and administer educational programmes.

This review begins by tracing the development of higher education during the past century, moving from the point when accreditation was established to developments affecting accreditation today. Annex 3 offers a framework for reviewing this history of higher education. It is organized to coincide roughly with the major periods in accreditation’s development that are described later in this chapter.

As can be seen, higher education was already a substantial activity back in 1900, when accreditation agencies were first established. More than 237,000 students were enrolled at the time, a total that represented a doubling compared to 1880, when 116,000 students were enrolled. There also had been an increase of 166 institutions during that 20-year period. As these figures suggest, then, accreditation came into existence following a period of growth in higher education. Growth had taken place unevenly, however. The USA population was initially concentrated in New England and along the Atlantic coast but by the late nineteenth century, industrialization had spurred major population growth westward, especially to such states as Illinois, Ohio, Michigan, and Wisconsin. Many state universities were founded in the 1870s and 1890s, following federal legislation in 1862 and in 1890 that encouraged their development.

In 1900, higher education was dominated by private colleges, usually with enrolments of under 1,000 students and restricting themselves to traditional areas of instruction. Harvard, Yale, and Princeton were still colleges. There were a number of private junior colleges as well as many normal schools, which were directed towards the preparation of schoolteachers; because of their close ties to the school system, normal schools were not seen as part of higher
Several public universities had been established, especially in the South and the Mid-West, but enrolments were relatively small (Rudolph, 1990).

After 1900, growth continued and, as Annex 3 shows, enrolment increased substantially over the next three decades. However, the economic depression of the 1930s and then the Second World War had an important constraining influence on the development of higher education, with total enrolment even dropping for some years during the war.

The moderate growth between 1930 and 1950 contrasted sharply with the period of dramatic growth that took place after 1950. As thousands of troops returned home after the end of the Second World War, the US Congress responded with legislation to support full-time college study for all veterans who wanted it. The Serviceman’s Readjustment Act of 1952, popularly known as the GI Bill, set in motion a major period of enrolment growth and institutional expansion. By 1980, enrolments had grown to 11.6 million, an increase that was almost five times the already large total in 1950 of 2.7 million.

Demand for advanced study also expanded rapidly, as seen in the comparison between 14,969 master’s degrees awarded in 1930 and the 298,081 master’s degrees awarded in 1980. Study at the doctorate level also mushroomed, from 2,299 degrees in 1930 to 6,420 degrees in 1950 and to 32,615 doctoral degrees by 1980.

In the period after 1950, enrolment in the public sector of higher education expanded rapidly, including the transformation of normal schools (which had been limited to teacher education) into multi-purpose state colleges and universities and the opening of thousands of community colleges, especially in the fastest growing states. By 1980, community colleges and other two-year institutions accounted
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for one-third of all enrolment. In 1980, the public sector accounted for 80 per cent of all enrolment, a strong contrast with private higher education’s dominance at the beginning of the twentieth century. Private institutions had dropped from a 50 per cent share of enrolment in 1950 to a 20 per cent share in 1980.

This record of enrolment expansion for higher education outpaced population growth in the country as a whole. Evidence for this point is found in the steady rise in the percentage of the age group that enrolled in college. Although there are differing definitions and sources over time, remarkable gains in participation rates can be seen. In 1890, only 1.7 per cent of 18-24 year olds were enrolled in college; in 1900, the percentage had risen just a little, to 2.3 per cent. This contrasts with the widening participation reflected in the following figures (NCES, 2000) that show the percentage of 18 to 24 year olds who were enrolled in college for each year:

- 1930 7.2 per cent
- 1950 14.2 per cent
- 1967 25.5 per cent
- 1990 34.6 per cent

This historical pattern of development should be kept in mind as accreditation’s own history is reviewed. In the early years of the twentieth century, enrolments had grown to a size that warranted some form of co-ordinated action among institutions, but higher education was still so small that private, regionally based co-operation was sufficient. By mid-century, new conditions had emerged, approaching the stage of mass higher education, and USA universities and colleges offered a complex array of higher education offerings. In its further growth since 1950, higher education has become a ‘mature industry’ and a complex system, operating in a country with
a large population, a large land mass, and a governmental system that focuses education decisions at the state level.

In the following pages, accreditation’s own development will be reviewed against this historical context. The chapters that follow will then examine several aspects of accreditation’s history in greater detail.

The early years of regional accreditation

Accreditation’s origins are found in the activities and concerns of several regionally based associations of colleges and universities that were established late in the nineteenth century. Organized for different purposes, these associations later took on accreditation functions. Between 1885 and 1895, four regional associations, made up of senior officers of colleges and secondary schools, were established, with memberships covering New England, the Middle Atlantic states, the North Central states and the Southern states, respectively. The North-West Association was established somewhat later, in 1917.

The initial purposes of these associations were to establish closer relations between college administrators and administrators of secondary schools and, also, to establish standards regarding what constituted adequate preparation for college study. It was a time of growth. The number of young people wishing to enter college had increased and the number of colleges also increased, especially as state universities had begun to develop. At the time, there was no single approach to how secondary-level study was organized or, even, for the number of years of study it should include. Not all states operated separate secondary schools (i.e. high schools) and, consequently, some colleges provided their own preparatory instruction for aspiring students. Colleges and universities set their
own admissions requirements, although some New England colleges had developed a common entrance examination (Rudolph, 1990). Informal agreements and direct knowledge among educators within a limited geographic area had long been relied upon in selecting students; as the number of applicants grew, however, a college official’s ability to have personal knowledge of the applicant, or of the strength of the applicant’s preparation, was no longer possible. So too, rightly or wrongly, some parts of the country were thought to offer weak secondary preparation. Colleges eventually realized that they shared this problem and, therefore, that they might develop a new basis for deciding whether applicants were properly prepared for college study.

The new approach, as they developed it, was to define standards for membership in their associations and then extend admissions offers only to students applying from member institutions. To implement this approach, the associations found it necessary to grapple with defining what constituted acceptable secondary preparation. It also was necessary to make clear distinctions between those schools that generally provided an adequate preparation for their students and those that did not.

In 1905, the North Central Association (NCA) took the lead in this effort by certifying, or accrediting, secondary schools. It followed this action with efforts to ‘accredit’ colleges as well, developing standards by 1909 and issuing its first list of ‘accredited’ institutions in 1913. Accreditation, in this context, meant that institutions were recognized as worthwhile and suitable for membership in the regional association because they provided worthy preparation for their students.

Such distinctions became the basis for defining eligibility for membership in the other regional associations as well. For example,
the Southern Association of Colleges and Schools (SACS), formed in 1895, issued its first list of ‘accredited’ institutions of higher education in 1919. Thus, membership criteria were established and meetings took place within each of these associations as they tried to define what preparation standards they needed and how they could distinguish among different schools.

These initial decisions, then, had emerged out of the need for articulation between institutions under conditions of enrolment growth. College officials needed a firm basis on which to evaluate the worthiness of applicants from institutions that they had no direct knowledge of, including applicants from high schools as well as a number of students who wished to ‘transfer’ from one college to another. The regional associations filled this need by defining what institutions were acceptable and trustworthy, at least by standards with which they were comfortable.

Co-ordination among these regional associations soon developed as a way to help provide a basis for judging applicants from other parts of the country. One record of this development is found in a 1906 meeting that was held among regional associations and several college associations. The meeting was arranged to discuss ways to develop common terms and standards for admission to college. One specific purpose was to agree upon methods for accommodating students ‘migrating’ from one institution to another and from one region to another. Recommendations emerged from the meeting that regional associations should accept credentials from member schools in other regions, with this agreement to be based on the development of common definitions and standards for admission. Implementation of these plans unfolded over the next 20 years, through continuing meetings and association actions.
It should be recognized that the standards that were used during this embryonic form of accreditation were established mainly to define membership and distinguish between secondary-level study and college-level study. The standards were quite basic and were based on information provided by the institutions themselves. Standards focused on a few generally acceptable factors such as the number of faculty, the length of the educational programme, and the number of years of secondary attendance that were required for admission (Petersen, 1978).

This initial phase of accreditation’s development had a critical, long-term outcome: it had established a central role for private regional associations in setting definitions and standards. The legitimacy of these associations to carry out this role was widely accepted, even as criticism was heard on the shortcomings of the information they used for making decisions. Notably, these standards represented institution-to-institution agreements, not governmental actions.

Also to be recognized is that the accrediting function was quite limited in scope. Decisions were made on the basis of rudimentary information supplied by the colleges themselves and mainly about their resources and policies. There were no inspection visits, nor were institutions required to undergo any form of review or self-assessment. Inevitably, too, the limits of the available information meant that the personal judgements of existing members continued to play a role in decisions.

Furthermore, this form of accreditation only extended to colleges and universities. Completely excluded from attention were the private junior colleges then in existence and the state-sponsored normal schools, responsible for preparing schoolteachers. Nor did this effort extend all across the country; several regional associations
only began serving an accreditation function in the late 1940s. The Western College Association, with members in California and Hawaii, began its accrediting activities only in 1948. The New England Association (NEASC) took on an accrediting function only in 1952 (Bemis, 1983, p. 168).

At best, then, the earliest form of accreditation resolved issues of whether to enrol students from other schools or colleges; it certainly did not address any wider issues of educational quality. Little or no attention was directed to student experience and achievement.

By the late 1920s and early 1930s, recognition of the limited value of these standards led to new initiatives to establish stronger procedures as a basis for accreditation. The North Central Association (NCA) again took the lead: it conducted a research project which resulted in a recommendation that, instead of using a few numerical facts, each institution should be judged qualitatively, on a ‘total pattern’ of activities and in accordance with its own stated purposes. This change in approach, later adopted by other regional accrediting associations, has become a philosophical cornerstone of USA accreditation in higher education. As Geiger has commented (1970, pp. xiv-xv), this emphasis on the institution’s own purposes “…undergirds regional and professional accrediting to this day.”

With this new emphasis on understanding the total pattern of an institution’s activities in light of its stated purposes, regional accrediting agencies turned their attention to the necessity of each college and university developing general descriptive language for what it wished to accomplish and how well it was meeting these aims. Factual information, while still needed, became less important as a factor in determining whether a college or university would receive accreditation. Notably, the emphasis was now squarely on the institution – its purposes and plans, its resources and capability.
The next major stage of development in regional accreditation emerged after the Second World War, when the accompanying boom in enrolment and rapid expansion in the number and type of institutions put new pressures on accreditation. During the 1950s, 1960s and 1970s, regional accrediting agencies revised and modified both their standards and their evaluation procedures a number of times, although they maintained the same general approach. During the 1980s and 1990s, still more changes were made, especially to focus on what students were achieving in their studies. This new emphasis on student outcomes reflected several changes in higher education itself, including a greater diversity in students and their interests as well as a greater diversity in how institutions delivered instruction. These developments in institutional accreditation since 1950 are discussed at greater length in the following chapters.

The origins of programme accreditation

The initial development of programme accreditation (sometimes called specialized accreditation) also occurred in the early twentieth century, during approximately the same time period as with regional accreditation. In fact, some overlapping activities and common meetings took place throughout this early period.

The reason for action was different, however. With programme accreditation, the precipitating issue was a concern with how well the colleges and universities were preparing their graduates. As Glidden has said, “specialized accreditation was born out of the concern of a profession about the quality of educational programmes that were preparing its practitioners” (1983, p. 187). The concern was with the quality of graduates, not the quality of preparation for college study. The spur to action arose from evidence that the schools were offering poor training.
The medical profession was the first to act. Between 1876 and 1903, representatives of medical colleges had taken several steps to create a register of schools that met certain agreed-upon standards of quality. They also undertook visits to member colleges to assess quality. The leadership role shifted in the early 1900s, however, when the American Medical Association (AMA) – a membership association made up of individual practitioners rather than educators – established a Council on Medical Education and in 1905 developed its own ten-category rating system for medical schools. In 1907, it issued a list of acceptable schools based on its own inspection visits. These and subsequent actions by the American Medical Association are the basis for what would become programme accreditation in medicine as well as in other professional fields (Glidden, 1983).

Compared to regional accrediting agencies, the focus of concern was very different, as was the perspective of those who judged the educational programmes. Under this programme-focused model, individual members of the profession, through collective efforts of research and direct inspection, took on the responsibility for determining the quality of the educational programmes that were preparing future practitioners. They developed standards of good practice, and then carried out inspections of the extent to which specific programmes met those standards. Notably, their findings were made public and had an immediate impact on the programmes of medical training that were in existence at the time (Young, 1983, p. 3). Eventually, the AMA worked in co-operation with representatives of medical colleges, but the pattern was set for individual practitioner groups to take the lead in setting standards.

Following a similar pattern of development, the law schools association developed a system of school visits and standards for legal education beginning in 1900. The American Bar Association –
the practitioner organization – began its own inspection activities in 1921. From that time onward, it published an annual list of the law schools that met its minimum standards (Glidden, 1983, p. 189).

Other professional groups followed this lead. By 1930, several other professional areas – among them, dentistry, architecture, library science, music, nursing, teacher education, collegiate business education – also had accreditation-like activities, including campus visits and published lists. By 1951, 22 programme accrediting agencies were formally recognized.

As this early history suggests, a basic tension in this approach to ensuring the quality of specific academic programmes existed between practitioners – those already launched in the profession – and the educators in colleges and universities who design and administer programmes to train new practitioners. The context was one in which strong public criticisms were being heard about the poor quality of medical education, most notably through a widely publicized Flexner Report, issued in 1910, which had been harsh in its criticism and specific in its recommendations about ways to eliminate sub-standard medical training.

Although practitioners in all affected professional areas co-operate with educators in developing standards and educational practices, conflicts arise regularly. This early history set the pattern of dominance of programme accrediting by practitioners, rather than by educators, that continues today.

As with the early forms of regional accrediting, the methods on which programme accrediting was based during these early decades were limited. Institutional self-studies were not required. Inspection requirements were not in place to check on programmes, although occasional visits were carried out by staff members; music was the
pioneer, where peer reviewers were sent on site visits from early in its accrediting experience.

The period since 1950, following the Second World War, saw a rapid expansion in the number of programme accrediting agencies. From a total of 22 programme accrediting agencies in 1950, the number of recognized programme accrediting agencies more than doubled to 47 agencies by 1982. This expansion was, in part, a reflection of increased enrolments generally. Substantial enrolment growth in fields that offered master's and doctoral-level preparation for the professions also spurred this development. Another factor was that an increasing number of professional fields sought to gain the status to be had by controlling the accreditation of programmes and, thereby, entry into their profession. By 1980, dozens of allied health professions had organizations that accredited academic programmes under a single Committee on Allied Health Education, which co-ordinated the work of individual groups. With these and other new accrediting agencies, the dominant pattern continued that practitioner groups set the standards for accreditation although, often, educator-based groups participated in the process (in some cases taking charge; in others, sharing the responsibility with a practitioner counterpart).

**Lasting patterns**

Present-day readers who have direct experience with quality assurance in the current context may have noticed some familiar patterns underlying these general stories of accreditation's origins.

1. The first stages of accreditation experience were not sophisticated. Initial steps were to define terms in the absence of relevant information.
2. Accreditation developed as a response to a limited problem, much narrower than the mandate it eventually acquired.

3. Accreditation procedures were not put in place quickly. They developed over time, building in a slow and uneven pattern.

4. Accrediting agencies, as a new organizational form, gained a lasting role when they successfully addressed their initial challenges. A broader mandate could develop only gradually, particularly because operating resources only allowed attention to a limited set of problems.

5. Interestingly, the initial ‘problem’ was with recognizing the worth of student credentials and the need for rules to define the movement of students from one institution to another. This is, fundamentally, a problem that requires inter-institutional cooperation and, eventually, harmonization of policies.

6. Once a certain level of legitimacy and operating success is achieved, efforts seem to shift towards adapting what is there rather than starting anew. Reliance on regional associations for accrediting institutions and also on practitioner associations for accrediting professionally-focused academic programmes are both historically derived patterns. Although they may cause confusion and some problems, these structures hold. Alternative structures have not been offered to challenge these arrangements.

7. Procedures for quality assurance were refined over time, almost through a natural progression. Initially, there was pressure to solve an immediate problem. Soon after, however, there was new pressure to develop standards and evidence-gathering procedures acceptable to the expectations of the time. In hindsight, these developments almost represent a logical unfolding of the
implications for how the broad problem of quality assurance must be addressed.

8. Given the differences among institutions of higher education, pressures to establish direct inspection techniques also emerged rather soon, and site visits quickly became a part of accreditation procedure.

9. Accreditation procedures developed and became more detailed over decades, not years. Some associations developed procedures at a much delayed pace, compared to others.

10. Regarding programme accreditation, early experience revealed a tension between practitioners and educators and, also, the forging of an uneasy alliance between these different groups. It is notable that even after the practitioner associations took on the dominant role, and despite the conflicts between them, both practitioners and educators were active, particularly in accrediting activity during the early years. Today, those tensions continue, but so also does the pattern of collaboration between practitioners and educators on accrediting matters.
III. HOW ACCREDITING PROCEDURES DEVELOPED AFTER THE 1950s

Accreditation is broadly accepted in USA higher education today. It is generally recognized among the public, too, as a system in which an academic institution or programme is evaluated by an independent agency that makes a public statement about its quality. Although numerous agencies carry out accreditation, and differ somewhat in their procedures, most follow a common overall pattern. In fact, the USA accreditation process has exhibited considerable structural continuity over the past four decades (cf. Petersen, 1978).

Common elements of accreditation procedure include the use of self-studies, in which the institution (or academic programme) gathers information and prepares a self-analysis, as well as the use of site visit teams, in which other educators visit the institution, evaluate its programme, and prepare a confidential report. These elements are also found in the quality assurance processes for higher education institutions of many other countries (Westerheijden, Brennan and Maassen, 1994).

Accreditation includes many of the same steps as any systematic evaluation procedure: evidence is gathered, and the evidence is used to answer questions. To establish a strong evaluation procedure, however, there are many implementation decisions to be made and decisions that affect both the integrity and the effectiveness of the process. As USA accrediting agencies refined and adapted their basic procedures after the 1950s, they made many consequential decisions about procedure, especially with respect to how evidence was to be gathered, how accrediting procedures could accommodate different institutional missions and changes in circumstances, and how fairness and objectivity of accrediting procedures could be maintained.
This chapter describes and assesses some major decisions that regional accrediting agencies and programme accrediting agencies have made on three broad issues in selecting an evaluation procedure:

- Gathering evidence: What is appropriate evidence for accrediting an educational programme? What is the best, most objective process for gathering information about a programme?

- Offering flexibility: How can accrediting judgements be made for programmes that differ in their purposes and operations? How can new circumstances be accommodated?

- Ensuring fairness: What procedures are necessary to ensure fair treatment and due process to institutions and programmes? What is the proper role of expert judgement and how can the disinterestedness of experts be assured?

Perspective can be gained on these procedural issues by reviewing the decisions made by USA accreditation agencies over the past five decades. Chapter 4 will add to this review by examining changes that agencies made in the standards they had used as the framework for their evaluative procedures. Chapter 5 will present a case example of how accreditation requirements are experienced by an academic institution.

**Gathering evidence**

Although it is now considered a core part of accreditation review, the self-study process emerged in USA accreditation only during the 1950s, long after accreditation agencies had been in operation. Before the 1950s, accrediting agencies required institutional members to file informational reports on a regular basis. There had been no requirements for becoming re-accredited, so the reports just
provided an update on changes that had been made. For the few occasions when questions rose based on the reports, the accrediting agency could ask staff or others to make brief inspection visits to a university or college.

The requirement for self-study developed during the 1950s, the period following the Second World War when enrolments were growing rapidly. USA institutions of higher education were becoming larger and more complex, sometimes taking on different missions. New institutions also were being established at a fast pace; in many states, it was said that a new community college was opening each month. This was the era when USA higher education moved from elite to mass higher education.

Accrediting agencies responded to this period of rapid expansion in several ways. One response was to require that existing institutions undergo a process of periodic review. No longer could an institution, once accredited, continue to be accredited automatically into the future. From this point, accreditation would only be granted for a limited period and could be extended only by satisfactory completion of a new review, which had to be conducted at regular intervals. Based on the review, the institution could have its accreditation reaffirmed or denied, if conditions had deteriorated.

This new requirement allowed accrediting agencies to gain better oversight of new institutions as well as those other institutions that may have made significant changes over time. In 1957, after several years of discussion, the North Central Association was the first regional accrediting agency to adopt the requirement that each member institution must be reassessed by the accrediting agency on a regular basis, at the least every 10 years. Other regional accrediting agencies gradually followed suit.
Gradually, too, new methods were developed by which periodic review would take place. Accrediting agencies established another new requirement, that institutions must engage in a self-study as part of the periodic review process. Some regional associations required a formal self-study in the 1950s, although others adopted this requirement much later. The North Central Association (NCA), for example, adopted a requirement for self-study only in the mid-1970s.

Under the mandate for self-study, the earlier requirements that institutions provide short reports, or updates, on their activities to the accrediting agencies now became more formal and much more extensive. Accredited institutions, as part of the periodic review process, were now expected to conduct a lengthy internal review and assessment of their academic programmes and administrative operations. As the self-study process was developed, this requirement was expanded further and called for a comprehensive look at the strengths and weaknesses of each area of institutional activity. Over time, too, the review came to be tied to the accrediting agency’s standards, with questions applicable to each standard.

Another new requirement – for site visits – was introduced, building on the earlier tradition of occasional visits conducted by accrediting agency staff. It was argued that site visits were necessary in order to judge whether an institution or programme was in compliance with the accrediting agency’s standards and criteria. The team visit would provide an objective basis for making this judgement. It is significant to note, however, that, procedurally, the accrediting agencies arranged that the self-study was completed first, and the site visit came afterwards when it would make use of the institutionally prepared self-study. Thus, it was the institution’s analysis and sense of important issues that provided the initial focus
of attention for site visitors. So, too, rather conventional procedures were developed for how the visits were to be carried out.

A typical schedule of activities for a site visit is shown in Annex 15. For most accrediting agencies, the visiting team’s method of inquiry is structured around meetings with a number of campus representatives. The site visitors receive the self-study and review it in advance, particularly in the area where they have special responsibility or expertise. To a great extent, the site visit serves to corroborate or clarify what was in the self-study although, to be sure, the site visit team is expected to come to its own conclusions, wherever indicated. Teams generally have found most matters covered in the self-study to be unobjectionable but typically identify areas where more information is needed.

Site visit teams, also called peer review teams, have grown to be a key part of USA accreditation. It should be understood that members of site visit teams are not experts in a narrow sense; that is, they are not hired or trained specifically as evaluators. Rather, members of accrediting teams are ‘amateur’ evaluators in a sense, professionals who are in the same field (or are knowledgeable about it) and have an interest in helping to evaluate academic institutions. For regional accrediting agencies, site visitors typically are educators who are accomplished and well-regarded teachers and administrators in institutions similar to those being evaluated. For programme accrediting agencies, members of site visit teams typically include both educators and well-respected professionals in the field who have an interest in educating the next generation that will enter their profession. Collectively, they bring different types of real-world knowledge and experience that helps them judge important components of a programme or institution. A dean or college president in the USA might be part of a regional accrediting team at
least once a year, for example, considering it as a duty or responsibility to the academic community.

Site visit teams for regional accrediting agencies often include specialists in several different administrative functions (e.g. admissions, financial operations, fund-raising, student records, student services), faculty in a variety of disciplines that match the institution’s major academic offerings, as well as administrators who have experience at similar types of institutions.

Visiting teams assembled by programme accrediting agencies typically are more specialized. They include members of the profession who are actively practising in the field as well as academics in the discipline; often, they include two or three public members. For some programme agencies, the composition of the visiting team might be arranged so that each of the discipline’s subspecialities is represented (e.g. in music or medicine).

It was only in the late 1960s and 1970s, then, that the three evaluative procedures most commonly associated with USA accreditation were in place: the requirement for periodic review and reaffirmation of accreditation; the requirement for institutional self-study; and the requirement for site visits. Together, these developments had important, long-term consequences for accreditation and for higher education. Obviously, institutions now needed to be more diligent, being sure to maintain sufficient levels of quality in all aspects of their operations that would come under scrutiny during periodic review. They also needed to devote considerable institutional resources to completing a self-study on a regular basis; for most institutions, this also meant that they had to develop a stronger programme of internal research and information gathering.
Another consequence was more indirect. Because institutions were now expected to describe changes made since the last time accreditation was renewed, this expectation introduced new pressure to resolve any problems that existed before and inevitably also to show that programmes were staying up to date. As these requirements were implemented over the next decades, accrediting language and actions increasingly placed greater burden on institutions to show change from one visit to another, sometimes to improve their programmes and other times to be able to justify their continued existence. In its 1984 criteria for accreditation, for example, the Southern Association (SACS) stipulated that existing programmes “...should be evaluated periodically for quality and need” and stated that new programmes should be considered “...only after the institution has completed a needs assessment and identified resources to support the programmes” (SACS, 1984, p. 14).

This push for improvement, while laudable, nevertheless introduced a new direction and expanded purpose for accreditation. The initial purpose of accreditation, at the beginning of the twentieth century, had been much narrower, to solve inter-institutional problems in evaluating student credentials. By the 1930s, this role had expanded to one that involved quality assurance, largely through the use of broader criteria for judging quality. In this context, then, it can be seen that the new requirements that institutions must be re-accredited at regular intervals and, each time, must undergo a self-assessment and an external evaluation visit, had two broad effects. While the new requirements expanded the quality assurance role for accrediting agencies, they also marked the first signs of a push for renewal and improvement. Concerns with improvement had been implicit in the earlier work of accrediting agencies, but the requirements for periodic review and self-study gave new focus and urgency to this aspect of accrediting practice. The tensions between
the quality assurance role and the ‘improvement’ role of accrediting can be seen in various debates over accreditation during the last century, continuing even up to the present day.

For universities and colleges, the self-study posed a significant new burden. In the early years – the late 1950s and the 1960s, especially – not all campuses had a strong capacity for conducting internal studies. Many had reporting systems that could not be cross-referenced with each other; incomplete reporting was frequent, except in the most basic areas of information. Completing the self-study was a lengthy process – a challenge to institutional effectiveness in itself because it required that an ad hoc group work together under deadlines over a period that may stretch for two years.

For accrediting agencies themselves, the new requirements for periodic review and self-study meant a significant redirection of effort. A master calendar of required self-studies, encompassing all member institutions, had to be developed and followed. For the North Central Association, with almost 1,000 accredited institutions in its membership, this has meant that, on average, at least 100 self-studies and visits have to be arranged each year in order to ensure that every institution is visited at least every 10 years.

Most accrediting agencies began to organize and publish handbooks on accreditation, book-length manuals that assembled advice, resource suggestions and possible formats for various aspects of the self-study, along with official agency statements about its standards and its requirements for self-study and for hosting a visiting team. The 1983 edition of the New England Association’s handbook, for example, offered questions that might guide the self-study. Regarding the administration, it included the following questions (NEASC, 1983, pp. 32, 35-37):
• What are the responsibilities of each principal administrator?
• What are the procedures for selection of department chairpersons, deans and other administrative officers?
• How is the president advised? Describe advisory groups, internal or external.
• How is the administrative ‘team’ organized to promote participation in policy formation, communication of policy, and responsiveness to the various constituencies? Are there procedures for the periodic evaluation of the administrative team?

Questions in this document with respect to academic programmes included:

• How is a new curricular proposal developed, considered at decision-making levels, and finally adopted? Is this process clearly defined in written form and understood by all parties involved?
• In what ways are members of the faculty chosen for the committees or agencies responsible for curriculum control and administration?
• To what extent do local or regional needs and resources have an impact on course offerings (NEACS, 1983, pp. 32, 35-37)?

Most accrediting agencies also tried to assist institutions by organizing training workshops that would describe an ideal self-study process and allow participants to raise questions and exchange information with others about to undertake self-studies of their own. For many agencies, training is limited, mainly offering an orientation and informal discussion about good practices. Some agencies offer more systematic training for their evaluators, including detailed workbooks, simulation exercises, or systematic practice with good evaluator techniques (Kells, 1988, p. 163).

Programme accrediting agencies have also seen their evaluation procedures evolve over the years. However, their experience is
different, largely because their point of departure is distinctive: programme-focused standards are based on the best judgements of practising professionals regarding the characteristics of programmes that will produce well-qualified entrants to the profession. This is their reference point, in contrast to the way that regional accrediting agencies allow institutions to develop their own vision of what education they wish to offer. As a result, changes made by programme accrediting agencies have emerged primarily from changing conceptions of what constitutes best practice in their professional field. In the past two decades, for example, several programme accrediting agencies have moved towards a focus on the skills and competences needed by their graduates.

**Offering flexibility**

The requirements for periodic review and self-study have not been welcomed by all academic institutions. Many universities have felt that they were accomplishing their goals and resented the formality of preparing a new self-study again and again. Large institutions often complained about the burdens of self-study, especially to co-ordinate the preparation of information across many relatively autonomous units. Small institutions complained too, arguing that the burden on their limited staff was excessive. Institutions have also complained about the cumulative burden of preparing self-studies and hosting site visits from multiple accrediting agencies; for large institutions, three or more programme accrediting reviews might take place in a single year (El-Khawas, 1992).

Programme accrediting agencies have discussed these concerns but, compared to actions of regional accrediting, have offered limited response. In large part, this is due to the different focus and purposes
of programme accrediting. First of all, the focus is on academic programmes, not institutions, and thus there is limited variation in size. Second, programme accrediting operates on a belief that there are broadly generalizable standards for what is good academic preparation for entry into a profession. Thus, the quality of an academic programme and, especially, the quality of its graduates, is the focus and little flexibility is possible on whether this is achieved. This is especially the case with those programme accrediting agencies that have linked accrediting standards to specific skills or competences. There is one point on which some programme accrediting agencies offer flexibility, however: some allow an institution to choose which of its programmes will be subject to accreditation review. In teacher education, for example, NCATE, the teacher accrediting agency, allows a school of education to designate which departments or programmes will be subject to accreditation.

Regional accrediting agencies have held fast to their requirement that a self-study be completed but, in order to respond to complaints about burden and to make their requirements more acceptable, they have sought to allow flexibility by encouraging institutions to consider different approaches to the self-study. The agencies have also tried to adjust their procedures to acknowledge differences among institutions.

Regional accrediting agencies have tried to maintain a single set of standards and rules while also acknowledging important differences in institutional type and mission. This tension has not been entirely settled, even today. At issue is whether expectations and requirements can be uniform across differing types of institutions, and whether all institutions need to provide comparable forms of evidence. This is pertinent especially to regional accreditation, where the entire institution is being evaluated. Even
when it is acknowledged that there are important differences among institutions, difficult issues remain: what distinctions, and how many, are to be accommodated and how distinctive can expectations be?

Responses have taken different forms. Some accrediting agencies have created separate subunits for different types of institutions. For example, the Western Association of Schools and Colleges (WASC) has one accrediting commission to review community and junior colleges and another commission to review colleges and universities offering a baccalaureate or higher degree. The two separate commissions establish their own standards and monitor policies for each type of institution. They are similar in many respects but different in others.

Accrediting procedures make other adjustments to respect differences in institutional mission, allowing each institution to be judged in terms of its own chosen mission. A school of music, in this view, would be judged on different grounds than a school of engineering. Under this approach, the accrediting agency still examines whether a clear and coherently stated mission exists, whether there is evidence that this mission is being accomplished, and whether the institution has the resources necessary to be able to accomplish this mission in the near future. This approach, which had strong advocates during the 1970s, is still found in the practices of regional accrediting agencies.

Some intrinsic aspects of accreditation’s evaluation procedures lend flexibility. For example, present accreditation practice continues to look both to strengths and weaknesses of the institution. This approach gives flexibility because, even as evidence is assembled, there is room for applying discretionary judgement in the weighing of the evidence. Where certain areas are weak, the tradition of organizing evidence and reports that balance strengths and
weaknesses serves to soften the impact of negative information as long as there are offsetting factors.

Another approach makes small adjustments for institutional differences. Under this approach, the accrediting agency applies a single set of standards and criteria but, where possible in the accrediting review process, small adjustments are made to reflect institutional differences. For example, the accrediting review team may be composed of educators from similar institutions. A team sent to evaluate a small, relatively new college would not be made up of educators from the largest, most prestigious universities. A very prestigious university, in turn, would expect that its visiting team were made up of persons from similar institutional backgrounds. So, too, judgements about each institution are made in light of what can be expected for its size and relative resources.

None of these approaches is entirely satisfactory. Problems of institutional differences continue to create tensions in accrediting procedures. In the 1980s, with the introduction of outcomes assessment, a new solution appeared, one of shifting the focus from the institution’s structure and activities to its accomplishments: regardless of how an institution is organized, do its outcomes and results meet standards satisfactorily?

Several regional accrediting agencies have also offered different options for how a self-study could be conducted. This approach was developed partly in response to the growing diversity of institutions, and partly also in response to complaints from institutions about the burden of repeated accreditation visits. The New England Association, for example, offers several options for self-study, designed to make the necessary process be of greater value to the host institution (NEACS, 1989, pp. 17-19). An interesting option, called Current Special Study Evaluation, allows for the possibility of making
use of a comprehensive or intensive study that the institution already is conducting. Another option that also is much in tune with ongoing institutional operations is the Continuing Institutional Research Evaluation. With this option, the institution may ask the New England Association to accept a product from the institution’s regular programme of institutional research, provided that it covers the general topics required in the accreditation self-study.

Annex 14 gives other examples of the types of options that regional accrediting agencies allow. As it shows, regional accrediting agencies have taken different positions, with some maintaining a strong preference for comprehensive self-studies. Others allow for alternative approaches, but place the burden on the individual institution to propose an alternative model and state its rationale.

Accrediting agencies have tried to align their information-reporting requirements with other data-collection requirements that academic institutions face. Most try to use definitions and requirements that are consistent with definitions and requirements of mandated federal surveys, for example. Other ways to reduce the reporting burden have also been tried. At least one programme accredits does not require a site visit but does require its members to submit data that the agency submits to detailed analysis. An option under discussion at present is to allow institutions to prepare and submit necessary baseline data electronically and not as part of a printed report. WASC currently allows for this option. This change, reflecting the fact that most USA institutions of higher education have electronic data management systems, is likely to be adopted by other accrediting agencies over time. In a similar direction, a foundation-funded project has supported a number of public universities in an experiment to produce a completely electronic ‘portfolio’ of information that would meet accrediting requirements
while also informing students, families and the institution’s surrounding community about its activities.

Regional accrediting agencies have also attempted to give some relief to institutions in terms of the amount of work they must go through to organize a self-study and site visit. In some instances, regional accreditors have allowed institutions to combine the self-study and visit that is required for the regional agency with a similar set of requirements by a programme accrediting agency. This occurs most often when the institution limits its programmes to those covered by the programme agency, for example, a school of art or a school of medicine.

In 2000, WASC made two noteworthy changes as part of an effort to improve the self-study and site visit process. First, to give more focus to site visits, WASC has called for two separate visits. The first visit will address issues of institutional capacity and resources, while the second visit, several months later, will be addressed exclusively to the educational programme and to issues of educational effectiveness. In another example, WASC will now use a greater variety of techniques in the site visits, especially to introduce audit-like procedures and opportunities to look more closely at academic instruction.

Although accrediting agencies have taken various steps to offer flexibility in approach, most institutions would still consider accreditation requirements to be burdensome. Agency standards remain numerous. The WASC standards that were in place during the 1990s (summarized in Annex 6), which are typical of accrediting agency practice, included only nine accreditation standards but, because each has several subcategories, a total of 41 subparts must be considered by an institution that is undergoing accreditation review.
In conducting a self-study, institutions are constrained. Whether all subcategories seem important or not, institutions generally feel an obligation to give attention to each. As with students preparing for an examination, they fear being seen as unprepared on any specific point, even if unimportant. The tensions between agencies and institutions are likely to continue, although new efforts by regional accrediting agencies to offer flexibility may represent some progress.

**Ensuring fairness**

As with any agency that carries out a quasi-public function, accrediting agencies have a responsibility to operate with even-handed procedures. Over time, they have developed policies of disclosure, complaint and appeal procedures, and other means to try to honour this obligation.

A particular vulnerability, in terms of ensuring fairness, rests with the self-study process, and especially with the use of site visitors who, as already noted, are ‘amateurs’ at evaluation. Recognizing that the credibility of the accrediting process could be jeopardized by even an occasional lapse, accrediting agencies have tried to address the difficulties inherent in relying on site visitor judgement by developing procedures designed to avoid reviewer bias.

Programme accrediting agencies have been especially vigilant, in part because many serve fields that have a relatively small number of professionals. Many programme accrediting agencies have detailed procedures, for example, regarding how peer review teams are formed and trained, and how decisions are reached (El-Khawas, 1993b).
The following procedures are among those that both programme accrediting agencies and regional accrediting agencies use in forming and working with site visit teams:

- reviewers are selected only by nomination and interview;
- a formal roster is maintained of peer reviewers;
- evaluations are completed on team members and only those with good evaluations are asked to join new teams;
- reviewers are given formal training;
- institutions are able to approve the list of team members;
- reviewers use checklists and standard forms during visits;
- reviewers are given detailed guidelines for report preparation;
- institutions have the option of responding to the team report;
- appeal processes have been developed.

Some agencies take another step and restrict site visitors to a reporting role. Site visitors observe and report (possibly, on forms) about the evidence they saw during the visit, but do not make judgements or recommendations. Instead, the agency’s Commission evaluates each site visit report, and reaches a decision. The Commission makes its recommendations for several institutions at the same time, seeing and comparing the evidence given in reports submitted for several programmes. This helps to ensure that standards are applied consistently across different institutional settings.

Several procedures are designed to allow institutions to have a role in the choice of reviewers. Some agencies give an institution a list of possible site visitors, and allow the institution to select from the list those they wish to have on the visit. Other agencies compile a proposed team but then allow an institution to approve the selection or raise objections to certain nominees. There are several good reasons that a specific person might not be appropriate for a specific
visit, including reasons that may be confidential, for example, related to hiring decisions. Therefore, all agencies generally ask institutions to evaluate each of the site visitors following the visit, as a way to surface concerns that might have affected a visitor's objectivity.

By these steps, accrediting agencies have taken the site visit, which in essence is a qualitative process, and have tried to make it as objective as possible. They rely on expert judgement but it is judgement that is bounded, both by clear standards and by procedural safeguards. Today's mood – with the enormous capacity of computers to 'crunch' numbers – is one in which informed opinion or judgement is sometimes thought to be outdated. Thus far, accreditation has held to its core reliance on expert judgement.

**Concluding comments**

This chapter offers a capsule history of how USA accrediting agencies have developed their evaluation procedures since the 1950s. It also describes some ways they have tried to address some general tensions inherent in making public judgements about educational programmes.

As this account shows, USA accreditation went through a gradual elaboration of its procedures for evaluating institutions and academic programmes. Over time, with variation by agency, accreditation moved towards more formalized procedures for gathering evidence. To be reaffirmed, or given continuing accreditation, all institutions have to undergo periodic review. To fulfil the requirements for this review, institutions must conduct a detailed internal review of their operations and host a site visit by an agency-appointed evaluation team. By the late 1970s, self-study had become a widely recognized part of the accrediting process, linked with the device of a site visit and with the requirement that all institutions must undergo self-
How accrediting procedures developed after the 1950s

study periodically in order to have their accreditation status reaffirmed.

Even as procedures were refined, accrediting agencies still sought to maintain a balance of qualitative and quantitative evidence: they used numerical information, but as interpreted by informed opinion. No requirements for scores or rankings were developed. At the same time, accrediting agencies took steps to keep opinion appropriately bounded. Site visit judgements are made in the context of specific standards and evaluation procedures.

An important strength of USA accreditation is its conscientious attention to procedural safeguards to ensure high standards of objectivity. The commitment to such procedures is vitally important, as they help each institution or programme being reviewed to have confidence that it will be treated fairly. They contribute to the integrity of the entire process.

What stands out, especially when contrasted with quality assurance practices in some other countries, is the significance of the decision to allow institutions to take the initiative in assessing themselves through the self-study. The university prepares its own statement first; it does not just submit to an inspection. While it works within a framework of agency requirements, the university has the opportunity to organize and interpret information about itself, and to balance statements about shortcomings with statements about its plans for overcoming them.

This decision – to require institutional self-studies as the basis for external review – is among the most far-reaching decisions that accrediting agencies made as they developed their approach to evaluation. It is both effective and efficient as an approach. It allows a depth of information to be available; it gives valuable background
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and helps frame issues for site visitors who can quickly gain a sense of the institution and identify where they might focus their queries. It also respects the institution and, as a practical reality, it recognizes that a review process should result in the institution taking responsibility for change. Because of the self-study, the entire accrediting review does not just result in a score or a final decision; it satisfies the need for a public statement about the quality of the institution's practices while it also allows institutions to have a new understanding of actions they might take to improve practice.
IV. HOW STANDARDS EVOLVED

A critical element in accreditation is the use of evaluative standards or guidelines. Accreditation processes examine many administrative and academic processes found at a university. However, the information that is gathered does not speak for itself; an evaluative judgement must be made, and the evidence that was gathered must be interpreted in light of some prior questions, or standards. This use of evidence, judged against accrediting standards, leads to decisions that have important consequences for universities, for students, and for the public good.

Although they are not widely discussed in most analyses of quality assurance, evaluative standards are central to any quality assurance process. For USA accreditation, detailed accrediting standards provide the essential framework that guides institutional self-study, site visits, as well as all actions of an accrediting commission.

This chapter reviews ways that accrediting standards have changed in the USA since the 1950s. While the previous chapter looked at the evolution of accrediting procedures in general, this chapter looks more closely at four developments in the use of standards: initially, a focus on organizational characteristics; the introduction of additional requirements concerning eligibility and substantive change; later, an emphasis on results; and recently, a simplification or consolidation phase that seems to be emerging. Most of these developments relate to regional accrediting agencies, although attention is given to evolution of standards among programme accrediting agencies as well.

This review illustrates some of the issues that arise in developing good standards as well as some of the different choices made by USA
accrediting agencies over time. The review also documents a continuing commitment on the part of accrediting agencies to develop standards where needed, but also to be sufficiently flexible to accommodate different types of institutions and circumstances.

**Standards seen as characteristics of good practice**

Accrediting agencies have a long history of requiring institutions to provide evidence about what they do. When USA accrediting agencies got under way, early in the twentieth century, they required very specific information on the college's structure and programmes. Standards were limited in number, generally relied on available information, and were usually quantitative. During the 1920s, for example, typical requirements asked for information on the number and capacity of classroom buildings, the number of volumes in the library, the number and credentials of academic staff, and the size of the annual budget. The purpose, generally speaking, was to ensure that academic institutions had adequate organizational resources or sources of stability that could support a quality education. Notably, the focus was on the institution, and not on students nor on learning and instruction.

This approach was criticized on several grounds: first, it was said to give too much attention to fragmented information that, while 'countable', was not necessarily meaningful. Second, it did not allow for differences in institutional mission and type. Third, these measures gave too much emphasis to 'inputs' or 'resources' rather than to what use was made of them. Adding to these arguments, undoubtedly, was the fact that, as experience accumulated with accreditation and with lists of accredited institutions, it became increasingly evident that most institutions offered programmes of good quality and deserved to be accredited, even if they failed to
meet certain prescriptive requirements. The requirements themselves were increasingly seen as not meaningful.

By the 1930s, with the North Central Association taking the lead, the idea of a single set of standards was dropped. The NCA instead decided to focus on the ‘total pattern’ of an institution’s activity and to take into account the purposes that the institution itself had chosen. A small, religiously affiliated college may have very different purposes than one of the Mid-West’s large state universities, it was recognized, and should be judged according to its own purposes.

To implement this new approach, the NCA revised its approach to accreditation review. Evidence gathered about an institution was to be assessed in terms of the overall pattern the evidence presented, instead of the previous emphasis on meeting each specific standard. Standards were from then on known as ‘criteria’ to reflect their change in purpose. Under this ‘holistic’ approach, an institution could be deficient in one area but have offsetting strengths in other areas.

This attention to a university’s overall pattern of activity was adopted by the NCA and used throughout the 1930s and 1940s (NCA, 1997, p. 4). Other regional accrediting agencies took similar actions during this period. Notably, although they took steps to offer greater flexibility in how their standards were interpreted, they did not change their wording from ‘standards’ to ‘criteria’. Numerical information continued to be used but it was given less importance. Qualitative judgement became more important. Still, the focus was on the institution, its organizational strengths and distinctive educational offerings and mission.

In retrospect, it can be said that this ‘holistic’ emphasis may have slowed but did not stop a gradual process of increased detail in accrediting requirements. The wording changed, the guidance
became more flexible, but the number of standards grew. Most accrediting agencies today work with quite detailed standards, intended to reflect both the general responsibilities that all institutions or programmes should meet, and the criteria by which to judge whether those standards are met. The Northwest Association (NWA), for example, currently has nine standards, with a total of 45 subparts (Northwest Association, 1999).

Programme accrediting agencies – the agencies that evaluate a specific disciplinary or professional area of study – have followed much the same pattern of development in their standards. Starting from accrediting-like external reviews for a small number of professions in the early 1900s, programme accrediting developed slowly until after the Second World War. As higher education expanded rapidly during the 1950s and 1960s, the number of programme accrediting agencies increased, and each has developed and refined its standards over the following decades. Standards are both numerous and exacting. The accrediting agency that monitors programmes in physical therapy, as an example, has more than 40 specific evaluative criteria. These standards address issues related to (1) the organization, administration, and governance of the programme; (2) faculty qualifications, teaching loads and other responsibilities; (3) admission, retention, and performance of students; (4) curriculum content; (5) adequacy of supporting resources, including the library, laboratory facilities, and equipment; and (6) financial resources.

Two aspects of the development of programme accreditation are distinctive: first, they have always had a focus on preparation for professional practice. Even as they gradually developed standards related to good institutional procedures and practices, the programme accrediting agencies have maintained a practice-focused
How standards evolved

perspective. Thus, they have interpreted educational quality in terms of how effectively new entrants to the profession have been prepared for their responsibilities.

A second distinctive aspect of the evolution of standards among programme accrediting agencies is the way that, in the 1980s and 1990s, a number of agencies (for example, in business and in architecture) adopted a competency focus as the basis for sound preparation of their graduates. Building on their long tradition of addressing preparation needs of the profession, these agencies conducted projects that identified the behavioural skills or competences needed in their professional field. They then undertook a process that revised accrediting standards to focus on these competences and also required member programmes to restructure their curricula in ways that explicitly develop these competences.

The evolution of standards for programmes in architecture provides an illustration (National Architecture Accrediting Board, Conditions and Procedures, 1991, pp. 4-5). As early as 1902, following the precedents established in law and medicine, practitioner groups had developed an examination system in Illinois for graduates of four-year programmes in architecture. By 1914, minimum standards for architecture programmes were established. In 1940, a national board was created in order to oversee accreditation of schools of architecture on a national basis. While numerous revisions of this basic approach occurred over the next several decades, a significant new approach was adopted in 1982. The board’s new mandate was to apply “achievement-oriented performance criteria” in its evaluation of architecture programmes. Under this approach, each school “…is responsible for seeing that each graduate completes a liberal studies requirement and attains the necessary achievement for each of the …major areas” of the programme. Criteria are grouped under four
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major headings: Fundamental knowledge; design; communication; and practice. Levels of accomplishment are stipulated for 54 different areas of practice.

Use of detailed standards raises the long-standing question of whether accrediting agencies are excessively quantitative and prescriptive in their requirements. The agencies are sensitive to these concerns. However, their standards do generally have a great deal of detail. There may be a balance to be achieved in this respect. Trying to avoid overly prescriptive statements, most agencies make no mention of specific numbers in their standards, but instead offer general language, for example, that a programme should be ‘of sufficient size to achieve the defined mission’ or that a programme must have faculty with qualifications that are ‘adequate to provide supervision of clinical practice’.

A number of accrediting agencies, especially in professional fields, have specific, quantitative standards, especially as related to faculty. Some suggest a minimum number of full-time faculty members that a programme should have; others suggest that the faculty/student ratio in the programme should not exceed a certain number. Such requirements have been frequently criticized. Taken out of context, they seem to be objectionably prescriptive. It should be acknowledged, however, that these rules have typically emerged when poor practices (e.g. too few faculty to support a programme or excessive numbers of students in relation to faculty) have been found in many settings.

Notable in the evolution of standards, generally, is the fact that accrediting agencies have acted responsibly to keep their standards up to date. Most have adopted a pattern of frequent review and updating of their standards. These reviews allow members to make suggestions and raise concerns that lead to changes. In essence, the
accrediting agencies are following their own advice; their call for universities and colleges to engage in continuing self-scrutiny and renewal has become part of their own organizational culture. In consequence, the history of each accreditation agency throughout the past 50 years includes continued modifications of standards and practices, often representing small changes or specific clarifications and, occasionally, setting major new directions.

The NCA’s recent history, for example, includes several revisions or reformulations of its policies. After it revised its requirements in the mid-1970s, for example, its Commission authorized further changes in 1981 and then again in 1987. In the early 1990s, it made further revisions to many parts of its procedure, resulting in a major restructuring of its Handbook on Accreditation. By the spring of 2000, it announced still another change, based on a project called Academic Quality Improvement Project (AQIP).

Adding to the structure of accreditation review

A major point in the evolution of standards occurred during the 1950s, when enrolments were growing rapidly and many new institutions came into existence. As one of their responses to this period of expansion, accrediting agencies adopted several new rules that added to the overall structure of regulation. Two areas especially should be noted: first, they put in place new conditions of eligibility, that is, baseline requirements that institutions must meet before they can be considered for accreditation and, second, they developed rules that stipulated the types of institutional changes that require agency notification outside of the normal schedule of external review.

The introduction of basic conditions for eligibility served, in part, as a screening device. It allowed regional accrediting agencies to undertake formal accrediting reviews only with institutions that had
shown adequate preparation for accreditation review and, too, only with institutions that had made serious progress towards offering a quality educational programme. An example of basic conditions of eligibility, formulated by the Southern Association, is shown in Annex 5. These criteria detail the organizational characteristics that would be expected of an institution getting ready to undergo an initial accreditation review.

Requirements for eligibility, which continue in place today, represent an additional set of standards that all member institutions have to meet. Several regional accrediting agencies remind member institutions that, in conducting a self-study, they need to meet the terms of both the basic eligibility conditions and the accrediting standards.

Policies on major change were also introduced, adding further to the requirements that accrediting agencies imposed on institutions. Here, too, these policies were developed during the post-Second World War period. In response to enrolment growth and to a growing diversity of student interests, higher education institutions adopted many changes in their programmes, ranging from modest revisions to core curricula to other, far-reaching changes in the structure of instruction and the locations in which education is offered. In some instances, new ‘satellite’ locations were established. Other institutions established unusual time schedules, including ‘weekend’ colleges that compressed academic instruction into Friday evenings and Saturdays. Fieldwork became a popular supplement to classroom-based instruction, as institutions developed internship opportunities, placements with employers, or study and work projects in other settings.

Accrediting commissions found that they needed clear guidelines about what changes triggered a need to inform the accrediting
agencies and what changes did not trigger such a requirement. In response, several regional agencies developed a policy on substantive change, which was added to their accreditation standards. These policies described the circumstances that would be considered a change of such magnitude or seriousness that an institution would be required to report the change to the accrediting agency even before implementing the change.

Procedures developed by the New England Association, shown in Annex 8, illustrate a typical approach. It spells out the requirements for prior notification about certain types of institutional changes considered to be substantive, i.e. changes that would significantly affect the nature of the institution, its mission, objectives, its educational programme or allocation of resources. In NEASC’s view, “…substantive changes initiated subsequent to the most recent evaluation are not automatically included in the institution’s accreditation” (NEASC, Criteria…, 1997). Thus, NEASC recognizes the right of institutions to make such changes, but reserves for itself the right to determine whether the change would affect the institution’s accreditation.

NEASC also established a category of limited change that would not require Commission review. It did not, however, provide specific guidance about how limited change would be determined. Under its procedures, such changes could be approved by the Director of NEASC without a full review but also could include conditions such as requiring the institution to disclose the trial nature of a change.

The North Central Association (NCA) is more explicit in distinguishing between the two types of change. Changes that did not require prior notification are those that stay “…within the mission and scope of the institution (e.g. changing personnel, redefining course requirements, or initiating joint programmes between two
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... accredited institutions). Changes that must be reported to the NCA are listed in its 1997 Handbook, and include:

- changes in educational programmes (e.g. adding a different degree level, initiating a significant new academic programme that requires substantial new financial investment);
- changes in locations (e.g. opening or closing an instructional site); relations with other institutions/groups (e.g. contracting, mergers, changes in institutional affiliation);
- relationships with students/faculty/administration/governing body (e.g. changing the nature of the student body, significant reduction in programmes or faculty, highly publicized controversies); and
- financial and ethical matters (e.g. concerns about financial viability, serious legal or financial investigations, disasters affecting physical facilities) (NCA, 1997, pp. 162-163).

The NCA has stated its obligation to “...seek assurance that institutional changes ...are both appropriate to the institution and within the institution’s capability of providing with quality” (p. 161). The NCA specifies that certain changes require either an on-site visit, an evaluator panel, or a continuing monitoring process. For significant changes, institutions are required to inform the NCA in writing and to expect a period of at least six months for Commission review before the change can be approved.

**Emphasis on results**

From the 1980s onward, regional accrediting agencies began to adopt a dramatically different approach to accrediting standards. Accrediting agencies had grown tired of the continuing criticisms that they focused on ‘inputs’ and resources and did not consider actual results. Under the new approach, accrediting standards began...
to shift away from a focus on desirable organizational characteristics and, instead, paid new attention to the actual results or ‘outcomes’ of institutional effort.

During the late 1970s and early 1980s, each of the regional agencies went through their own revision procedures, and adopted different approaches, but, in general, there was movement on the part of all regional agencies towards asking about results and accomplishments, not just for discussion about the ‘inputs’ or ‘resources’ available.

Regional accrediting agencies developed standards that called for new, quantitative evidence on student learning and student accomplishments. This puts much greater emphasis on students, and what they actually accomplish through their studies.

This emphasis on results represents a major change of direction for regional accrediting agencies, carrying several implications. First, the shift towards standards requiring institutions to assess results or outcomes gives a strong push to the general trend towards expecting institutions to not only have good programmes, but to work towards continuously improving them. The focus on results easily leads to increasing pressure to improve. As a second implication, this outcomes emphasis at least potentially could tip the balance of accrediting reviews towards greater use of quantitative evidence. To meet these new expectations, institutions need to develop and monitor detailed sets of data (Banta et al., 1993). In fact, however, as the work on results has developed, accrediting agencies have allowed for very different implementation strategies. Some accrediting agencies emphasized the new results-oriented approach but mandated only that steps be taken in this direction. They still allowed for institutional discretion on the details.
A relatively simple approach was to focus on rates of degree completion, that is the percentage of students that receive their intended degree within a specific period of time. This is not easy in actual practice, because many USA students study part-time, change their degree objectives, transfer between institutions, or interrupt their studies. This approach is also criticized for offering a limited view of an institution’s ‘results’ or accomplishments because it ignores variation in level of student accomplishment or achievement in other, more specific outcomes.

Some accrediting agencies took a different approach, focusing on process. Thus, their requirement was that institutions develop and implement an assessment process. These agencies did not stipulate what kind of outcomes must be studied, but they did require that some process be developed and that the institution demonstrate that it is using results from its assessment research to improve its academic programmes.

For the Southern Association, new attention to results led the agency to a decision to emphasize the concept of ‘institutional effectiveness’. As its 1984 Criteria for Accreditation explained:

“...Traditionally, accreditation has focused attention almost exclusively upon institutional resources and processes. It has usually been assumed that, if an institution has certain resources and uses certain processes, effective education will occur. A comprehensive approach to accreditation, however, takes into account not only the resources and processes of education ... but also the evaluation of the results of education and plans for the improvement of the institution's programmes” (SACS, 1984, p. 10).

SACS’ criteria required that universities and colleges establish planning and evaluation procedures that would allow them to define
their expected educational results and to describe how well they were meeting their expectations.

SACS has continued to press for such self-conscious examination of institutional effectiveness. By the late 1990s, its requirements had become more demanding. It not only called for institutional planning and evaluation but further stipulated that it be “...systematic, broad-based, interrelated and appropriate to the institution”. SACS also required that the evaluative activities encompass educational goals at all academic levels, and that the institution demonstrate that it uses the results of its evaluations “...to improve educational programmes, services and operations” (SACS, Criteria for Accreditation, 1998, p. 20).

Another, more ambitious approach to outcomes assessment is one that focuses on the actual competences that students should possess upon completion of their studies. This approach, which has not been required by regional accrediting agencies, has been adopted by some of the agencies that accredit specific academic programmes (for example, in architecture and physical therapy). Under this competency-based approach, degree requirements are performance based, as are accrediting standards. In architecture, for example, accrediting review teams examine an elaborate display of actual student work, with projects chosen to demonstrate the programme’s standards on dozens of different criteria (Brennan, El-Khawas, and Shah, 1994).

This orientation towards results and outcomes continues today. The idea of evaluating outcomes has been accepted in principle but its practical problems are substantial. Debate continues on how to define outcomes, how to document them and how to reconcile different student circumstances. So far, typical institutional responses have been limited. They meet the new requirement by
gathering evidence from follow-up studies of graduates to document the extent to which graduates have been successful in finding career-related employment or satisfaction with their studies. Sometimes, they compile data on the pass rates on licensing examinations of recent graduates. One-time surveys of currently enrolled students are sometimes conducted, also.

A consolidation phase

Another major development appeared in the late 1990s, an approach that might be called ‘streamlining’ or consolidation. It involves actions by several of the regional accrediting agencies to refocus the emphasis of accreditation review. Two changes are most prominent:

First, steps to simplify requirements in order to reduce the burden on institutions due to the accrediting process. Efforts to pare back requirements have especially focused on accreditation standards that emphasize matters of institutional compliance in meeting basic standards of good practice.

Second, efforts to give more attention during accreditation reviews to issues of educational effectiveness and learning outcomes.

Several new directions have been launched in 2000 and 2001. The Western Association (WASC), for example, issued a new Accreditation Handbook, with sharply revised standards, in March 2001. The North Central Association, in 2000, launched an experimental approach that could establish new site visit and self-study procedures while it also changes NCA’s standards. The New England Association (NEASC) began a comment period in November 2000 on its proposed revisions in accrediting standards. The Southern Association (SACS), as another example, also has proposed changes undergoing review.
Collectively, many new steps can be seen, with inevitable experimentation and modification likely to take place in the near future. These new actions appear to signal a new, consolidation phase for the standards used by regional accrediting agencies. A synthesis may be developing, one that combines accrediting’s long-term focus on how universities are organized and the more recent attention to what outcomes, or results, the university produces for its students and other constituencies.

A simpler structure for accrediting review may develop, building on what has been learned over the past few decades. The new approach accepts all of the reforms of the 1980s and 1990s with respect to the importance of learning outcomes and results. However, it also recognizes that, despite continuing complaints about the emphasis on institutional characteristics, there nevertheless are important elements of organizational capacity in support of good educational results. Having and maintaining sufficient institutional capacity must be monitored, then, even as more demanding levels of educational effectiveness must be sought.

Three examples can be described. One new approach is the experimental project announced in 2000 by the North Central Association (NCA), the Academic Quality Improvement Project (or, AQIP). Some of its features are outlined in Annex 16. One of the project’s purposes is to try out an alternative process for accrediting review, one that may be more flexible and geared to institutional mission and goals, and that may be more supportive of an institution’s own processes of self-assessment and improvement. It also seeks to test whether new ‘quality criteria’ modelled after national principles developed with the Malcolm Baldrige National Quality Awards can be useful to institutions and to the accrediting process. This is a most promising project that offers a strong new direction. At the
same time, it should still provide the NCA with continuing assurance of an institution’s focus on institutional quality and quality improvement.

The NCA anticipates that as many as one-third of its accredited members may participate in this three-year experiment of shorter and more focused self-studies and a flexible schedule of external site visits. Institutions will be able to choose when to schedule external site visits. Notably, too, feedback from the accrediting agency will include the use of comparisons between the performance of the institution being reviewed and other, similar institutions. These comparisons will draw on the experimental ‘quality criteria’ that the project has developed. As another new element, information from the institutional self-assessments is to be made available to the public.

The new accrediting standards approved by the Western Association (WASC) provide a second example. Only four standards are included, a significant reduction from the nine standards of its previous approach, shown in Annex 6. The new approach seeks to reduce the amount of time that institutions spend in reviewing their general operations while expecting stronger institutional attention to internal review processes in support of educational improvement.

The new WASC approach speaks of the necessity of each institution having core commitments to two issues defining quality: institutional capacity and educational effectiveness. For accrediting review purposes, they are expressed in terms of four standards:

Standard 1: Defining institutional purposes and ensuring educational objectives;
Standard 2: Achieving educational objectives through core functions;
Standard 3: Developing and applying resources and organizational structures to ensure sustainability;
Standard 4: Creating an organization committed to learning and improvement.

As can be noted, WASC is establishing a new framework for accreditation that is broad, with clear-sighted purposes. The new standards are quite encompassing in their language and their accompanying criteria are detailed. This new framework focuses on outcomes and results, yet appropriately addresses issues of ‘organizational capacity’ in the context of how they are used. It is not a matter of having resources; these standards call for a demonstration that the resources are put to use effectively.

A third example – proposed criteria being discussed by the Southern Association of Colleges and Schools (SACS) – also suggests that a synthesis and consolidation is taking place in the standards used by regional accrediting agencies. In September 2000, SACS proposed new criteria for accreditation. Here too, the new approach is intended to simplify accrediting reviews and give institutions greater flexibility. Instead of numerous prescriptive criteria, the review process will be guided by a few, broader principles and institutions will develop a ‘prospectus’ that presents their own approach to improvement. SACS has long had a strong emphasis on institutional effectiveness, which continues under its new approach, even as its requirements become more flexible.

**Concluding comments**

Summing up, it is evident that different issues arise when accrediting agencies try to set standards for evaluating academic programmes. Throughout the past 50 years, regional accrediting agencies have tried to address some of these issues. Their experience
suggests that a focus on institutional structures, processes and resources has its limits, but that specific, quantitative information has its limits too. The most recent approaches – looking at student outcomes or institutional outcomes – may offer a distinctive contribution. It seems that this latest approach has made an important distinction: the goal is not simply good practice or a record of improvement. Institutional effectiveness is to be sought through processes that cause the institution to assemble evidence related to the critical organizational supports necessary to produce good educational outcomes. What seems to be enduring, too, is that any quantitative information will always need to be put into perspective. The use of judgement remains central.

Has there been movement towards clear, explicit standards? Has the American accrediting experience led to a level of sophistication and wisdom such that explicit benchmarks and standards can be promulgated? No, the agencies would say, for good reason. Their experience has shown that the successful pursuit of higher learning is complex, and can be organized in many ways. Their experience seems to suggest that broad principles are best. Narrowly crafted wording may only offer superficial assurance; the real task of judging quality is complex, and is achievable when general criteria are applied in a holistic manner, and in a way that relies on the collective judgement of several persons of good experience and good faith.

The recent emphasis on outputs and outcomes has raised this question of explicit standards once more. Could explicit standards with regard to student learning outcomes make it unnecessary to give attention to the ‘inputs’ that have long been criticized in accreditation practice? Based on the most recent reforms announced by several regional accrediting agencies, it seems that the regional agencies are not taking this view, and would not support an exclusive
focus on outcomes, however defined. The Western Association reforms, for example, make it clear that attention to outcomes alone is not considered a sufficient basis for judging educational quality. It has clearly stated that it is equally concerned with outcomes and with institutional capacity to provide a programme of good quality. On both aspects, the Western Association also makes it clear that many sub-components need to be examined in order to understand issues of quality.

Thus, the lesson from the years of accrediting experience in the USA in developing standards is to be cautious about finding firm answers. One must recognize the complexity by which educational offerings can be organized and, consequently, that it may not be possible to develop a specific, single standard on issues of monitoring and defining educational quality.
V. FROM THE INSTITUTION’S PERSPECTIVE

The actions and objectives of accreditation officials have received attention in previous chapters. This chapter offers a change in perspective: relevant issues in accreditation are discussed as they are experienced by academic institutions themselves. A case study is presented that describes the process by which a typical university undergoes accreditation review by a regional accrediting agency. The case illustrates a generally satisfactory process in which no major issues had to be addressed. In the commentary that follows, several tensions in the accreditation process are discussed, again from the perspective of the academic institution. It highlights the criticisms and concerns that have been raised in general debates about quality assurance.

In the case study, four major steps are given attention: the design of a self-study, the actual conduct of the self-study, the site visit, and the decisions that result. Annex 11 summarizes the objectives for each of these steps in the accrediting review process. Considerations in organizing these steps are raised, and areas of flexibility are noted as well. Where appropriate, the case makes use of sample documents found in the annex.

The accrediting review that is described below is not a one-time process. Rather, it is a periodic review that an institution expects to conduct every five to ten years, depending on the regional agency’s rules. Thus, the visit that is described is but one link in a long chain of reviews and communication with the regional accrediting agency. The case description, which represents a composite of the actual experiences of several universities and uses a pseudonym, reflects the accrediting requirements used by the Western Association of Schools and Colleges (WASC) during the 1990s (Annex 6).
Institutions are obligated to pay the actual expenses incurred for conducting site visits. To be sure, these expenses are modest and mainly include a small administrative fee to the accrediting agency (often, about $2,000), the actual travel expenses of team members (but no honoraria or other payments), and reproduction and mailing costs for reports that are prepared. These costs are incurred only for the year in which site visits will be made. It should be noted that, in addition, accredited institutions always carry the obligation of paying annual dues to support their regional accrediting agency. The annual amount varies by the size of the institution (in some instances based on enrolment, in other instances on the size of the annual budget for educational expenditures); for one regional agency, for example, dues range from a low of $1,500 a year to a high of almost $10,000 a year for very large institutions.

The setting: Small State University

Small State University is located in California, and thus subject to the accreditation process organized by the senior commission of the Western Association of Schools and Colleges (WASC). In 1996, it had an enrolment of about 13,000 students, including about 8,900 students pursuing a baccalaureate degree, and 4,100 students pursuing the master's degree. Small State University receives most of its operating funds from the state government, based on a student-based funding formula. The university is located in a medium-sized city that has had a stable and growing economy based on light industry and technical services firms. Most of the university's students live and work in the city and its surrounding suburbs.

Students tend to have practical, career-directed goals, with business studies, engineering, teacher education, nursing and social work as the most popular study fields. The university, which grew steadily since its founding in 1961, encountered a slowdown in
growth after 1990. Enrolment since 1990 has been relatively stable, although there was some decline in the number of baccalaureate students during this time, offset by growth in master’s-level programmes. The university has six master’s-level programmes that are accredited by programme accrediting agencies, including: electrical engineering; mechanical engineering; nursing; social work; secondary education; and school counselling. Its president, who was appointed by the University’s 15-member governing board one year ago, has prior experience as academic vice-president of two other universities within the state system.

Annex 12 outlines the accreditation history of Small State University. It reflects the general elements of the accreditation process, as well as some dimensions specific to Small State University’s experience. All accrediting institutions are asked to maintain such a historical summary, and routinely submit it as part of their self-study. Small State University’s accreditation history begins with its initial application shortly after it opened in 1961. It shows, in outline form, the general steps in gaining accreditation and the way that accreditation is typically granted only after the university has been in operation for about six years. Annex 4 offers more detail on the steps taken during this initial period by an institution seeking to become accredited for the first time.

During the period prior to initial accreditation, an institution applies to the agency and, after demonstrating that it meets basic requirements for eligibility, is approved as a ‘candidate’ for accreditation. An example of basic requirements for eligibility is shown in Annex 5. Only after a satisfactory site visit and a positive agency decision is an institution able to say that it is ‘accredited’. All regional accrediting agencies have some form of probationary or candidacy phase, although the actual vocabulary differs somewhat among the agencies.
Small State University’s accreditation history also shows a record of an ‘interim’ visit and follow-up report that occurred during the 1970s. This interim visit took place because some problems had been found with the university’s procedures for monitoring student drop-out; the follow-up report addressed the university’s response and corrective action. The problems must have been resolved because no further actions were taken. In the 1980s and 1990s, more routine events occurred: accreditation visits took place on a normal schedule and, at each point, accreditation was reaffirmed without any qualifications or extra visits needed. The latest visit was scheduled for 1998, which meant that the university began the process, described below, in 1996.

Part I: Designing the self-study

Small State University was scheduled for a 10-year periodic review by WASC in October 1998. Thus, two years earlier, in the autumn of 1996, the university’s president asked the academic vice-president to develop a plan to prepare for the self-study and the site visit. He expressed his hope that the review could be used as a general planning exercise for the university as well, especially to identify new programme directions that might increase overall enrolment.

The first steps were to build a schedule and to design a process for carrying out the extensive self-study required by WASC. As with most universities, the university planned to allow a period of at least 18 months for conducting the self-study. This included: two to four months for planning a study that would suit its circumstances; 14 months (including intensive work during one summer) to carry out the self-study based on the work of nine or more separate work groups; and two to four months for circulating a draft report, organizing discussions, pulling together reactions and comments,
and preparing a final report. *Annex 13* shows the schedule developed by Small State University.

The academic vice-president immediately formed a 15-person planning group to design the self-study. The group included the academic vice-president (who chaired the group), the chairpersons of four academic programmes, six senior faculty (one from each of the university’s constituent schools), and one senior staff member from each of four administrative offices: institutional research; admissions; business affairs; and academic planning. Over the next four weeks the planning group had three meetings in which it reviewed relevant facts about the university, developed an initial list of priority concerns, and proposed ways that the self-study might be organized. The planning group agreed that several important institutional concerns, which had initially been raised by the president, should be included in the study, including:

- the need to improve student retention in the first two years of baccalaureate study;
- possible new directions for undergraduate and graduate programmes; and
- development of a coherent plan for improving information technology resources, especially in support of academic programmes.

The planning group also considered several alternatives for how to organize the self-study so that it might best serve the university’s interests. It initially thought that it would propose a focused visit, one of the different options that WASC allowed as a way to offer universities greater flexibility in meeting accrediting requirements. This would give Small State University the opportunity to combine the planning work for the regional self-study with some preliminary work for accrediting visits that were scheduled in the next two years.
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for social work and for nursing. After gathering information and holding a range of conversations, however, it decided against this approach. Although a focused visit could offer some time-saving and reduce the university’s overall workload for meeting accrediting requirements, the planning group felt that it was too risky. There were problems with the social work programme and the time period offered by the regional accrediting agency’s schedule may not have been sufficient for fixing those problems. By keeping the accrediting procedures separate, it would still be able to resolve the problems in the social work programme before the visit of the social work accrediting agency.

Two weeks later, the planning group met with a WASC staff member to clarify WASC requirements and determine whether WASC concurred with its plan and the areas of emphasis it had proposed. When the WASC staff expressed surprise that the university had not chosen one of the different options that WASC now allowed, the planning group explained its reasoning in choosing the conventional option.

With agreement between the group and the WASC staff person, the planning group went back and completed a detailed self-study design and schedule, which it presented to the president. The president and academic vice-president discussed this plan for the self-study in a series of meetings: with the Dean’s Council at its regular Tuesday morning meeting, with senior staff at a regular weekly meeting, and with all faculty at the next Faculty Senate meeting, held once a month. Some modifications were made, primarily to avoid certain time-pressured points in the academic calendar, but the plan generally met with approval.

The self-study model that the university decided to follow was conventional in design (see Annex 11). The university would prepare
From the institution’s perspective

its self-study according to the nine accreditation standards (shown in *Annex 6*) that it was required to address. In turn, the self-study effort was organized into a sequence of nine work groups. Each work group would gather information and develop a section of the self-study report that corresponded to one of the accreditation standards.

A Steering Committee was appointed to provide co-ordination and overall direction for the self-study. It was composed of 12 members, and included six faculty members, four administrators, one student, and one alumnus (a graduate operating a small business in the city). Of the six faculty members, three had been on the planning group and had shown both interest and dependability in working on the issues raised by the self-study; the three others were nominated by department chairpersons who had been on the planning group and who wanted their subject area to be represented but could not meet the needed time commitment themselves. The four administrators had also been on the planning group and, thus, had already developed a good understanding of what their offices must do to complete the self-study in their respective areas. Each of the faculty members on the Steering Committee was allotted ‘released time’ in order to work with the Committee; that is, they were released from a certain portion of their regular teaching duties.

The chair of the Steering Committee was a well-liked faculty member who had taught mathematics and statistics at the university for the past 15 years and who previously had served on the university’s Faculty Senate and Curriculum Committees. The nine work groups were to be chaired by the four administrators and five of the faculty. Although the academic vice-president was not a member of the Steering Committee, the Committee worked very closely with him throughout the self-study period.
Part II: Carrying out the self-study

The Steering Committee for the SSU self-study had allowed 14 months (including one summer term) for carrying out its self-study and preparing a report. During that time, the Steering Committee planned to meet twice a month. One meeting, relatively short, was directed to a review of the scheduling and flow of tasks. The other monthly meeting was designed to review information emerging from the work groups and data-collection activities.

The general time schedule was printed in diagrammatic form and circulated widely across the university. The major segments of the schedule included:

Phase I: Set goals and review available information (three months);
Phase II: Work groups to gather and interpret information relevant to their assigned topic (six months);
Phase III: Seek reactions and comments on work group reports (three months);
Phase IV: Prepare final report and circulate for comment (two months).

WASC required that the self-study report be sent to WASC at least two months before the site visit. During those two months, preparations could be made for hosting the site visit team.

This schedule included several unusual elements that the planning group had agreed upon because they would be useful to Small State University’s current circumstances. In phase I, for example, a relatively long time was allowed for reviewing information about how well the university was doing. The intention was to use this review as an opportunity for a general, university-wide discussion about the status of the university and possible new directions for its programmes. Thus, after the Steering Committee reviewed several
rounds of data made available by the institutional research office, it organized and held a two-day Workshop where about half of the university’s faculty and staff, meeting in small groups, discussed various aspects of the information and identified issues that they felt needed attention.

The Workshop was an activity the university chose to hold; it was not mandated by the accrediting agency. For the university, it served several purposes: it helped to inform many staff and instructors about the self-study and its requirements, and the upcoming self-study visit. More importantly, it provided a unique opportunity to get the majority of the university’s faculty and staff engaged in discussing what the university was accomplishing and what it knew about itself. In doing so, it also met a need for university-wide communication, a sensitive area at the university and for the new president because the Faculty Senate had censured the previous president for not offering such communication.

This sensitivity to the importance of university-wide communication was also reflected in the numerous opportunities that the Steering Committee set, late in the schedule, for discussing and hearing reactions to the draft reports of each work group and the full draft report. Although all universities routinely allow for open comment and discussion as a self-study report is developed, the many meetings and the lengthy period planned at Small State University were more extensive than usual, reflecting a decision that the Steering Committee made that was appropriate to the university’s own recent history and circumstances.

Another unusual aspect of Small State University’s self-study was the emphasis the Steering Committee gave to assessing information the university already had available. This reflected the existence of an especially strong university office for institutional research and
the fact that the university had recently completed a comprehensive
planning review that had been required by the university governing
board. That document, updated and modified in a few ways, could
meet the informational requirements of the self-study. Because it
had been prepared under tight deadlines, there had not been a chance
for the wealth of information it obtained to be discussed widely.
This information-rich planning document thus offered a logical
starting point for the self-study process. The research office spent
several weeks reformatting many sections of the data in order to
follow the formats suggested by the accrediting agency. Later, it
learned that the earlier format would have been acceptable.

The nine work groups got down to work shortly after the initial
Workshop. A first task was to identify new information, including
new surveys, that would be needed. An early decision that emerged
from the work group discussions, readily agreed to by the Steering
Committee, was to conduct a survey of the university’s recent
graduates. This survey would ascertain the success that recent
graduates had in job placement and would obtain comments on their
university preparation as well. An alumni survey was needed for the
two academic programmes (social work and nursing) that were
scheduled for programme accrediting visits in the near future, so it
made sense to conduct a full alumni survey that could suffice for
both the regional agency and for the programme accrediting agencies.

Over the next several months, each group organized its activities
differently but all groups generally spent much time reviewing
documents, making queries and conducting interviews with various
faculty and staff. Each group regularly met to discuss and interpret
what it was learning. Writing assignments were divided among the
group members as well. Their most intensive work was with analysis
and writing. Some of this work was carried out during the summer
months, when faculty representatives could devote their full
attention to the self-study tasks. This schedule also gave them needed
time to prepare draft work-group reports in advance of the open
hearings scheduled for April and May.

The final two phases of the self-study – reaction and comment,
then preparation of the final report – were extremely busy for the
Steering Committee, as it had promised to attend all hearings on
work-group reports as well as to host open sessions to discuss the
draft final report at each of the six schools within the university. The
Steering Committee was surprised at how unrealistic it had been in
setting this schedule. The logistics alone of organizing these meetings
and keeping a record of what comments were made at each session
were daunting. It was also under pressure during these months to
finalize all parts of the report.

Sometimes members had to meet with deans or other
administrators to seek resolution of certain issues that had surfaced
and that called for prompt attention. In one school, for example, a
look at the pattern of course completion showed that a large
proportion of students was failing the introduction-level course
required for all students. The Steering Committee brought this
problem to the attention of the dean for that school, who agreed to
take several steps to improve the situation right away.

Developing the report’s section on recommendations proved to
be difficult. The accrediting agency expects to see recommendations
as a sign that each university has taken the self-study seriously and is
committed to improving its programmes. As the Steering Committee
began to consider some possible recommendations, however, deep
differences emerged among the Committee members as to how
specific those recommendations should be. Some members of the
Steering Committee felt that the report should not point out any of
the university’s major shortcomings but instead should offer only
mild, unobjectionable suggestions. Others thought it better to direct the attention of the site visit team to certain shortcomings, especially the issues surrounding faculty workload, which the administration had seemed to be reluctant to address. Amidst grumbling and argument that lasted over three meetings, the Steering Committee finally acknowledged that, because it could not predict what the visiting team would do, it was best to put mild, unobjectionable suggestions in its report. The president and academic vice-president quickly concurred with this approach.

The full report was about 200 pages in length and organized in shiny binders. The main body of the report was organized according to each of WASC’s nine accrediting standards (see Annex 6). In the materials prepared for each standard, there were three sections of narrative:

- description, which explained how the institution would achieve its institutional objectives;
- self-appraisal, which provided an analytic evaluation of the university’s performance in the relevant areas, especially giving attention to areas where change or improvement was needed; and
- a plan of action, where indicated, which specified what steps the university would take to correct a problem.

The sections that focused on standards covered more than 150 pages of the report; the section on educational programmes, the most important standard, covered more than 60 pages alone.

Several preliminary chapters preceded the sections on the standards. These chapters, following WASC guidelines, gave information on how the self-study was conducted (including a certification that there was broad participation), a factual description of the university and its history, summary data on the university
(following a WASC format), and a statement on how the university had responded to the recommendations made in the evaluation report of the last site visit team. Annexes and a list of supplementary materials were included at the end of the report.

The report was made available to the members of the university’s governing board at the same time that copies were sent to the accrediting agency. Final site visit preparations followed, with the visit scheduled two months later.

Part III: Hosting the site visit

Following long-set plans, the visiting team arrived on a Sunday, with lodging arranged in a nearby hotel. The team was chaired by the president of a medium-sized, public university in Texas. The chairman, whose own academic discipline was physics, was very experienced with accrediting site visits, having served on 10 site visit teams over 15 years for the North Central Association and as chair of two site visits for WASC. The team included 10 members, all of whom had previous experience in making site visits for WASC. Six had attended WASC workshops on effective techniques for site visits. Following standard procedure, a staff member of WASC joined the team for this meeting and accompanied the team during the entire site visit.

The team held its initial meeting on Sunday afternoon, in a meeting room at the hotel. After introductions were made – because most members of the team had not met before – it reviewed the schedule for the next three days and confirmed the subject areas to which each member had been assigned. Each team member would take special responsibility for gathering needed information relevant to his/her assigned area and, by the end of the second day’s visit, begin to prepare the first draft of the site visit report that related to that
area. Accordingly, each team member needed to attend the scheduled meetings pertinent to his/her assigned area, ask for special meetings as needed, and give close attention to relevant evidence and issues that arose during the visit.

The specific assignments, mainly determined in advance by the team chairman, were arranged primarily to coincide with WASC’s accrediting standards, while also taking into account the specific areas of expertise of team members. Three members of the team had administrative expertise (in business affairs, in admissions and records, and in personnel matters, respectively) and were given assignments that related to their expertise. The team also included a librarian, a dean of nursing at another university in California, and four faculty members from a range of disciplines.

This initial organizing session ended with comments by the chair about conducting site visits in an ethical and professional manner. The staff member from WASC also reviewed several procedural matters. The team then met with senior administrators, faculty and board members of the university at a dinner held in the president’s house.

The following two days were spent in meetings designed to give the team members direct opportunities to review the institution’s administrative operations and educational programmes. The schedule had been developed jointly by the team chairperson, the WASC staff person and the university’s staff liaison, based on the accrediting agency’s suggested schedule (Annex 15). Throughout the next two days, individual members of the team met for hour-long meetings with selected administrative and academic departments. The team chairman met with several members of the university’s board of trustees and, separately, with the board chair and then with the chair of the board’s finance committee. He also met with a group of six
businessmen from the surrounding community. Several group meetings were also scheduled. Two open sessions were held with faculty members, over lunch. Two informal sessions were held with students, including one session with 17 undergraduates and another session with 24 students who were in their final year of studies. Four members of the team held a closed meeting with the 15 members of the Faculty Senate, a meeting that had not originally been on the schedule but was deemed valuable during the course of the visit. No classroom visits were made, although the university liaison person had invited members of the team to do so.

Built into the schedule also were several slots of unplanned time, as well as times set for planning and review meetings for the team. A room was set aside for this purpose, and about 30 different documents had been placed in the room. Utilizing these resources, each member of the team prepared his/her section of the team report after consulting with others. During the early meetings, team members exchanged information and identified areas where more inquiry or documentation was needed.

Late Tuesday, the team had a general review meeting and work session. It decided on most of the points to be covered in the draft report and also on the team’s general recommendation with respect to the university’s reaffirmation of accreditation. The team member who had reviewed the university’s financial operations, and who had interviewed six members of administrative staff, raised several concerns and argued that they were sufficiently significant that he wished to propose a limited form of reaffirmation or, if others did not agree, proposed that he would file a minority report. Both options are allowed by the agency’s procedures.

After lengthy discussion, the team decided that no separate treatment of the issues related to Standard 9 (Financial Resources)
was necessary. Although the concerns the team member raised did represent areas where good practices were not in place, the majority of the team determined that the university’s financial practices as a whole were not out of line with accrediting standards. The team member was advised, nonetheless, to specify his concerns in the written recommendations of the site visit report. The meeting ended with final assignments and further tasks being agreed upon, and the chair reminded all that their report and, especially, their recommendation about accreditation status, should remain confidential.

As scheduled, the president of Small State University met with the visiting team on Thursday morning for what is generally termed an ‘exit interview’. Exercising an option given to presidents, he chose to have the vice-president and six deans join him in the otherwise confidential meeting. Pleasantries were exchanged and courtesies acknowledged for a smoothly run evaluation visit. The team chairman then offered a summary oral report, about 10 minutes in length. He made generally laudatory comments, and commended the fact that the self-study had included specific recommendations that had helped their visit to be productive.

He also raised several concerns. The library’s holdings and services for both faculty members and students were thought to be falling behind, especially in its reference materials and its use of electronic sources. The librarian serving on the team offered details, noting that certain journal serials were incomplete, that the library did not currently receive a number of journals considered essential to the support of the university’s expanding engineering programmes and that, although business students at most first-rate universities now routinely have access to on-line reference search services, the library at Small State University did not have such services nor a plan for
obtaining them in the near future. The conversation shifted to administrative services. Another team member voiced concern that sound financial accounting practices were jeopardized by the use of part-time staff and students. He urged that they be replaced by experienced, full-time employees.

The visiting team’s chairperson turned the conversation to the educational programme and reported that the team was impressed with the quality of teaching and learning at the university, especially its innovative programmes in writing and community-based nursing. It regretted, however, that resources had been limited with respect to instructional improvement and faculty development, including budgets for travel to professional meetings. This was especially problematic, it felt, with respect to graduate degree programmes. Following WASC rules of procedure, the site visit team did not disclose its overall recommendation about reaccreditation.

The rest of the ‘exit’ meeting was ritual. The president, having experience with accreditation review at two other institutions, was aware that this was no time to debate matters. Almost by formula, he thanked the team for its thorough and careful work, acknowledged the shortcomings reported, and assured it that the university was aware of these matters and planning ways to address them. The president and the team then proceeded to a public meeting attended by about 80 members of the university community, including about 25 faculty and the students interviewed by the team. The team chair and the president each offered brief general remarks and a small reception was then held in the next room.

Part IV: Decisions

Limited communication between WASC and Small State University followed the visit. After about three weeks, the president received a
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draft of the team’s report, with the option of responding with a formal rejoinder of his own. In the section of the report criticizing the financial office arrangements, the report’s language seemed overstated, even implying unethical behaviour; the president considered preparing a formal written response to its somewhat intemperate tone but decided to approve the report without doing so, concerned that more harm than good would come from calling further attention to the issue. The president was disturbed, nevertheless, and wondered whether this deficiency would jeopardize the university’s renewal of accreditation.

Three months later, the president was invited to attend the WASC Commission meeting, when it acted on the university’s status by reaffirming its accreditation and determining that the next visit could be expected in ten years’ time, the maximum interval allowed. The president was relieved to hear of this good outcome. Formal written notice of the Commission’s action arrived two weeks later, just after senior university officials had held a large and decidedly informal celebration. Two years of university effort had finally come to a close. The team report, and all accompanying self-study materials, were stored in the vice-president’s office, and the president’s secretary was charged with remembering to send an interim report in about two years on the university’s progress with respect to the ‘weaknesses’ noted by the site visit team in its written report.

Commentary: Accreditation issues from the university’s perspective

Several points about accrediting procedure are reflected in this case description of one university’s experience during the 1990s. From the university’s perspective, one set of issues relates to the ambiguities and uncertainties that surround the accrediting process, both as the university tries to follow self-study guidelines and as the university tries to guess what the accreditation outcome will be.
Another major issue is the burden that the accrediting process represents, especially in comparison to the benefits it offers.

From the university’s point of view, the uncertainties and ambiguities are considerable, despite the extensive efforts that WASC and other regional accrediting agencies have taken to provide guidance. Even with continuing efforts by the accreditors to have specific, clear requirements, their guidelines still seem to be generic when a specific university tries to use them. The requirements are written to apply to a wide range of circumstances and, in fact, as the accreditors work towards allowing room for different institutional styles and circumstances, the language of requirements often becomes more difficult for a university to interpret and apply to its own circumstances.

At Small State University, there were many instances in which the wording of the accrediting standards could be interpreted in varying ways and, under one set of interpretations, could lead to criticism of the university. For example, the work group on Standard 5 (which relates to faculty members) had serious and acrimonious debates over whether the university was to be criticized for its faculty hiring policies. Throughout the past decade, the university had hired part-time faculty to teach an increasing share of courses, especially introductory courses in writing and foreign language. This practice, which resulted in about 35 per cent of writing and foreign-language courses being taught by part-time faculty, was similar to what many other USA universities had been doing. Yet, Standard 5 included language that stipulated that a university should have a full-time component of faculty “...of sufficient size to ensure the exercise of its responsibility”. Some members of the university community argued that the university’s extensive use of part-time faculty needed to be criticized in the self-study report based on the language in
Standard 5, which implied that problems could arise when the full-time component of faculty was not ‘of sufficient size’. Others countered that the language in the accrediting standard was too vague and did not offer the basis for self-criticism, especially when no direct evidence of damage could be offered.

As these and other issues were settled, the overall result was that the self-study was generally positive, at best alluding to areas where some concerns had been raised. Some issues had already become the subject of specific, sometimes immediate, corrective efforts. Was this a good outcome, or the outcome that accrediting agencies expect? Clearly, the requirement for conducting a self-study had led to open discussion of some issues the university ought to be evaluating.

However, it also appears that there is a limit to what a self-assessment can accomplish when an external agency needs to be informed. The ‘compliance’ aspect of the self-study causes the debate to be tempered. Thus, with the issue of part-time faculty, as with other issues that the self-study raised, the realities of needing to report to an accrediting agency helped shape the debate and the report language. As was seen when the Steering Committee discussed the nature of the report’s recommendations, the necessity of reporting to an outside agency, and the fear that punitive consequences could result, led the Committee to choose to offer only mild comments and suggestions.

From the university’s perspective, considerable ambiguity and uncertainty arise even with the site visit. The site visit team arrives and asks numerous questions. While necessary for the team, such questioning raises concern among university representatives, especially because of the fear that the university could be faulted, even in areas where the site visit team has made incorrect judgements.
Again, a compliance mentality is evident; staff may be instructed to answer questions dutifully but it is difficult to do so without knowing why the questions are being asked. Understandable fears that a misstatement by a staff member could cause harm can easily lead to excessive caution. In addition, despite elaborate efforts by accrediting agencies to give training and orientation to site visitors, some personal or idiosyncratic factors can emerge. In Small State University’s case, the team member giving attention to financial affairs obviously had strong feelings on the use of part-time staff, even though he had not convinced his team that the issue was serious enough to affect its overall conclusions. Hearing those comments during the exit interview, the university’s president was concerned, but still did not know how serious the issues were.

In the site team’s final exit interview, the limited comments made by the team – most of which seemed to cover safe topics or areas where there was strong team consensus – still produced uncertainty. The university could not know whether these comments foreshadowed serious criticism and negative action or, instead, were just friendly suggestions.

Other considerations are at play for the accrediting agency. The evaluation team’s report is only one component of accrediting review, and the agency needs to ensure that the site visit report conforms with agency rules and procedures and, especially, that the recommendation about accrediting status is consistent with general agency practices. The report and recommendation are still subject to final action by the agency’s full Commission. Once the Commission takes action at its next scheduled meeting, the university can be formally notified about its accreditation.

From Small State University’s perspective, the decision stages, while orderly, bring considerable discomfort because uncertainty
extends through several months. The brief, terse verbal report by the visiting team chairman at the end of the visit had pointed to concerns but had not indicated whether they were considered to be so serious as to threaten the university’s accreditation status. Similarly, language critical of several aspects of university functioning was included in the draft written report that the president received for review two months later, but there was no indication as to whether the negative remarks would affect the university’s accrediting status. Uncertainty continued for another month, until the president heard the formal action taken by the accrediting commission at its regular meeting. From the university’s perspective, the gap of time between the exit interview – which only gave it clues as to what the formal report would say – to the final steps was long, punctuated by generalized hopes and stabbing fears that troublesome issues might still be raised.

The issues of cost and burden to universities are also difficult. Advocates of regional accreditation rightly point out that, without regional accreditation, it is likely that USA institutions of higher education would be required to undergo external scrutiny organized by either state or federal government. Most agree that such a prospect is unwelcome to American academic traditions and would, in any event, be more burdensome than any process conducted by voluntary regional agencies.

Certainly, too, most university presidents can point to some ways that an accreditation self-study and visit were useful to the university. With Small State University’s self-study, planners were clever in designing several aspects of the study so that they would offer useful benefits for the university. The planners chose to link the alumni survey conducted for the WASC review with the requirements for alumni data that they would soon need for programme accrediting
agencies in two disciplinary areas. They were also able to use the extensive array of existing information they already had as the basis for WASC information requirements.

As is true with most self-studies, the university could acknowledge that many small programme improvements were made – often, quietly – over the course of the self-study. Typically, a work group identifies an area of poor practice and, citing the upcoming site visit as the basis for urgency, gets the necessary approvals to resolve the problems it has identified. At Small State University, some weaknesses in record keeping had appeared with records of previous faculty evaluations that had been collected but not analyzed or filed properly in some departments. A task force was appointed to catch up with this backlog of processing. In nursing, several staff vacancies that had not been filled were now put on a fast schedule for new hiring.

So, too, the initial workshops, which spurred a degree of participation among faculty and staff that was much more extensive than typical for a self-study, proved to be a highly successful initiative in improving internal university communications. Many faculty were impressed that the president had shown himself to be very knowledgeable about the university’s academic strengths and weaknesses and many expressed appreciation that the president had engaged in general conversation with faculty several times during the workshops. Following this good experience, the president began hosting monthly lunches for small groups of faculty, a practice that continued long after the accrediting review was completed.

From the president’s point of view, one potential benefit did not emerge. At the outset, the president had hoped that the self-study would offer ideas on how to improve student retention and make better use of information technology. Somehow these purposes were neglected, in large part because they did not fit well within any of the
accrediting standards that were the focus of so much of the Steering Committee’s work. The president recognized that this was probably inevitable but recognized, too, that almost two years had passed, but with little progress made on these two important priorities he had already identified.

Moreover, those involved with the self-study process at Small State University would have readily acknowledged that the costs and burden in preparing an accrediting self-study are considerable. Regional accrediting agencies receive an annual fee from all member institutions, calculated on the basis of an institution’s enrolment. In addition, the institution covers the expenses of preparing the self-study as well as the travel and related expenses of members of the site visit team. The university’s direct costs were limited, primarily expenses associated with holding workshops, hearings, and other meetings and the expenses of producing several versions of the reports, including a large number of copies of the final self-study report.

For many universities, the costs for preparing data to meet the information requirements set by accrediting agencies can be considerable. For Small State University, some of this cost was reduced by the fact that a comprehensive planning exercise, recently completed, could be used for much of the needed information. Even so, new surveys were conducted of alumni and also of a large sample of university personnel. Despite claims by accrediting agencies that they seek to reduce the data-reporting burden, universities with many academic programmes and multiple sources of revenue must still organize a substantial amount of information in order to complete a self-study. Typically, special studies are conducted as well.

The greatest cost, however, is the commitment of extensive staff time to conduct the self-study. As with Small State University, close
to two years of effort is typically needed. The 15 members of the Steering Committee spent about one-third of their time on self-study tasks, including more time during the summer months and somewhat less time during the academic year. Each of the nine work groups had from seven to nine members, thus requiring continuing time commitments of another 70 or so persons. Four members of staff were assigned to support the work of the Steering Committee and the work groups, with additional help on specific projects. The extensive participation that accrediting agencies require, as part of self-studies, also has a cost: at Small State University, a total of eight days was spent, over the entire effort, in workshops and hearings to solicit wide involvement in reviewing the status of the university and the direction being taken by the draft self-study report.

A common defence of such extensive effort is that a university that has completed a self-study has gained the benefit of a focused, comprehensive self-examination of its accomplishments, its opportunities and its weaknesses. It is often said that such scrutiny, if an outside firm were paid for conducting it, would be very expensive. Even so, the compliance issue must be considered: to what extent did the self-study come to conclusions that were tailored to the needs of fulfilling an external requirement for review? Did the tensions of confronting certain issues according to the self-study schedule actually deepen the tensions and make constructive solutions more difficult? Were the insights gained actually put to good use by the university? Did key members of the university build on what was learned to shape improvement efforts? Too often, it appears that, once the tensions of waiting for a favourable external decision are over, the actual insights and recommendations of the self-study are largely forgotten.
The self-study requirement is a burden, certainly, and may not have optimal results, but it must be acknowledged that administrators at most universities see the process as useful. In a 1992 survey (El-Khawas, 1992), only 1 to 3 per cent of college administrators characterized accreditation as not useful. About one-half of administrators at public universities (and slightly fewer, about 4 in 10, at private universities) stated that accreditation was very useful. University officials find that accrediting can be a useful impetus for review and change. It may yield only a few concrete benefits but it still provides a good basis for renewal in outlook, allowing staff and instructors to keep informed on changing views on good academic practice.
VI. NEW CHALLENGES FOR ACCREDITATION

As the twenty-first century begins, American higher education is entering a particularly active period of change. In many settings, enrolment is increasing, and new student interests are being given attention. Technological developments have spurred a range of new initiatives, affecting academic programmes and methods of instruction. Internal forces – stronger management controls, pressures for efficiency, and the likely retirement of a significant proportion of today’s professorate – are bringing about still other changes. Many institutions are also experiencing the effects of globalization, the long-term process by which national boundaries no longer limit the market for students or the number of institutions who may be active in any specific location.

Among the pressures, the greatest prospect for a deep transformation of higher education may be found in the opportunities presented by advances in electronic-based learning. Over the past decade, information technology has become more widely understood and many educational applications have been developed. A dizzying variety of electronically-based academic programmes have emerged, causing excitement and optimism about potential breakthroughs in how education can be delivered to new and wider audiences.

Accrediting agencies have found it necessary to keep abreast of developments in electronic learning and, especially, to consider what issues they raise for monitoring quality. How can programmes be evaluated under these new circumstances? Are new standards needed? Will new restrictions be necessary? Can agencies accommodate distance and other electronic technologies within their regular quality assurance processes, or are new, separate approaches needed? Who will monitor the quality of technology-based learning: accrediting agencies, the government, or some new entity?
This chapter reviews several new developments in electronic learning in the USA, with special attention to the issues that accrediting agencies need to consider. It also discusses accreditation’s response so far, first as related to the guidance given to academic institutions and, second, as related to accrediting’s relationships with government.

A changing landscape

Although computers have been in use for decades in American higher education, it was the development of the Internet and the widespread adoption of web-based information technologies that have most dramatically opened new opportunities for electronic learning. Today, close to 2 million USA students are enrolled each year in distance learning courses if all forms of delivery – from mail correspondence to television-based to Internet-based methods – are included. These offerings are not concentrated in only a few institutions; rather, experimentation seems to be quite widespread: more than half of all existing USA institutions offer some distance courses. Most situations may involve only a few students or a limited number of offerings, but a few pioneering institutions already enrol thousands of students under these new approaches.

New institutions and new programmes based on electronic technology are being announced at a rapid pace. Capturing the most media attention are the newest forms and most path-breaking structures. Especially notable are corporate universities, sponsored and supported by multinational business corporations. A well-recognized and successful example is Motorola University, which operates about 100 learning sites, both in and outside of the USA. Other corporations – Disney, Toyota, IBM, among them – have also established distance-based learning institutions. Most of the learning
offered under these arrangements is not at degree-granting level, however. Despite their use of the term ‘university’ most of the educational activities of corporate universities are short courses that offer corporate training or other forms of workplace-specific education available only to their own employees.

Also drawing media attention are new institutions specifically formed to make use of new technology. Here, too, there is more variety of approach than is generally recognized. Most, but not all, of these ‘new’ institutions have been organized as profit-making entities. Most embrace the use of on-line learning and other forward-looking instructional methods, but many of these new institutions are, as yet, not exclusively or even primarily dependent on electronic delivery of academic programmes. The University of Phoenix, for example, often described as an on-line university, offers a distinctive academic approach but most of its current programmes are based in classrooms, with face-to-face instruction.

Many of the new profit-making institutions are best described as specialized rather than general-purpose institutions. They have identified specialized market niches, often limited to specific types of learners (e.g. mid-level professionals, or adults who have completed part of a degree programme and now wish to finish their studies) or a limited number of study areas, usually those that have been judged to have high demand (e.g. information technology, management, teacher education). The on-line baccalaureate programmes offered by DeVry Institutes, for example, are available only in business and information technology and they accept only students who have already completed at least 24 credits (i.e. equal to about a year of full-time college study) earned at traditional institutions.

Another distinctive feature is that many new institutions offer their programmes, following the same instructional approach, in a...
large number of locations around the country. These institutions follow a curriculum model in which the content of study programmes is designed by one set of staff, while instruction is ‘delivered’ by others, often on short-term contracts, who follow the prescribed curriculum design and are evaluated on the basis of their instructional skills. Rio Salado College and the University of Phoenix, for example, use this approach.

Some of the new forms are, in fact, consortia of existing institutions. This is true of Western Governors University, which has grown out of an agreement among the governors of several Western states to organize access to on-line learning and, gradually, to build up its own enrolments in distance learning courses. Other new forms, although they use the word ‘university’ in their names, only serve as ‘access’ sites, providing links to distance offerings but not providing their own learning. Kentucky Virtual University, for example, does not offer its own on-line courses but provides links so that interested consumers can learn about and access a wide variety of providers of distance learning. More than half of the states in the USA have some form of state-wide ‘virtual’ university, but generally only offer access to and information on on-line learning opportunities offered by other providers. Commercial forms of such access sites have emerged in recent years, too (Salmi, 2001, p. 7).

There are significant developments, too, among existing, traditional-style institutions in their use of electronic technology for delivering academic instruction. It is in this arena that the greatest impact of on-line learning may take place. Most large USA universities, including many that are well resourced, are developing on-line learning programmes, often in collaborative agreements among several strong universities. A long-standing precedent for such collaboration is found in the National Technological University
(NTU), which is a non-profit institution that offers graduate-level engineering programmes through an alliance of more than 50 universities.

A few institutions have moved rapidly ahead. The University of Maryland University College, starting from its extensive experience in delivering instruction around the world under contract to the USA military, is already accommodating a large volume of enrolment by distance methods.

Some traditional institutions are developing on-line courses on their own, but many others are partnering with commercial firms that have, for example, designed and tested software programmes geared to course delivery. Other institutions have made organizational changes to anticipate the opportunities generated by distance learning. Several major universities, including Columbia University, Cornell University, and New York University, have established for-profit subsidiaries to offer on-line learning.

Thus, both traditional and ‘new’ providers are active in considering ways to develop electronically based learning. Stable patterns have not yet emerged among these institutions, however, and further change can be expected. As these early developments make clear, distance learning will pose a number of challenges for accrediting agencies, charged with publicly attesting to matters of educational quality in all higher education offerings.

**New rules for academic institutions**

One challenge for accreditation is to provide guidance to academic institutions. Accrediting agencies need to take a leadership role, helping to explore and identify the distinctive ways that instruction
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may change and the issues that must be addressed if standards of quality are to be maintained.

Accrediting organizations have already taken a number of actions to respond to this new challenge. Individual accrediting agencies have issued new guidelines. For example in 1999, AACSB, the International Association for Management Education, developed a statement identifying key quality issues in distance education. Other agencies have also issued statements.

Regional accrediting agencies have taken an especially constructive stance, in that they have deliberately sought to promote co-operation and consistency across the regions. This was the model that they adopted with the Western Governors University (WGU), a ‘new’ institution that has dispersed facilities and offers courses that originate from institutions in several regions. A consortium of four regional agencies have jointly worked together to evaluate WGU during the two preliminary steps for accreditation – to gain eligibility and then to gain candidacy – under the rules of accrediting agencies. The four-agency consortium jointly granted candidacy to WGU in December 2000 and continues to work with WGU as it moves along the monitoring process over the next few years. WGU might become a model for other joint action by accrediting agencies, because the WGU approach is not unique. Other distance learning initiatives are also expected to operate across regions. The USA Open University may be the next case; it has initially opened in the Middle States region but has plans to offer instruction more broadly across the country.

Another joint initiative has been for the regional accrediting agencies to work together to develop consistent language and procedures for addressing issues related to distance learning. The eight commissions involved in regional accrediting (listed in Annex 1) have established a formal mechanism for co-operation, called the
Committee of Regional Accrediting Commissions (C-RAC). In March, 2001, this committee issued a joint statement and Guidelines on the Evaluation of Electronically Offered Degree and Certificate Programmes (Committee, 2000) which offer thoughtful and detailed guidance on the special issues that arise with new forms of learning. Excerpts from these Guidelines are shown in Annex 10.

In the introduction to these Guidelines, the agencies are explicit about the approach they have taken as their fundamental perspective on quality issues related to distance learning. They state a clear view that principles of educational quality are the same in either form of programme delivery. Thus, the specific applications may differ but in each instance they follow consistent issues about delivery of a programme of strong quality. This core principle is applied to five areas of institutional activity:

- institutional context and commitment;
- curriculum and instruction;
- faculty support;
- student support; and
- evaluation and assessment.

Thus, for example, under curriculum and instruction, the Guidelines state that the institution has the obligation to offer a coherent plan for students to complete all parts of an academic programme of study. It makes the additional point that students need to be notified if all requirements will not be available electronically. Similarly, under student support, the Guidelines state the general point that the institution must ascertain, prior to admission, that the student is qualified. It makes the additional point that, with on-line learning, this includes ensuring that students will have the technical competences needed for electronic learning.
In part, this general stance by regional accrediting agencies is consistent with their long history of adjustments to new modes of learning in higher education. Many other structural changes have occurred – the development of branch campuses, the introduction of evening programmes, weekend colleges and other alternative formats, and even ‘distance’ learning by correspondence through the mails. Regional accrediting agencies have thus had continuing opportunities to consider how to recognize learning experiences of students based on non-traditional methods.

Another relevant precedent is the way that accrediting agencies addressed challenges to quality that arose with respect to prior learning. Over time, guidelines were worked out that made explicit what the expectations and processes should be to evaluate and properly incorporate such learning experiences into a programme.

Other precedents in accreditation policy are also germane, including, for example, policies regarding substantive change, policies on courses offered in other countries, or procedures for new institutions to gain initial accreditation.

Over years of experience, accrediting agencies developed responses to these changes, e.g. in requirements that ‘substantive changes’ be reported on a prior basis. This provision is triggered, for example, when an existing institution decides to undertake distance learning. So, too, for new institutions specifically organized to operate by distance methods, whether wholly or in part, the regular procedures of accrediting agencies provide an already tested framework for evaluating their planned educational approach in terms of long-term accrediting standards. Thus, for example, the Western Governors University has gone through the usual steps for a new institution wishing to gain accreditation. The expectation at Western Governors University is that it will complete the process that occurs
for all new institutions and that it will attain accredited status within the four to five-year period that is typical for other institutions.

New understandings with government

As described more fully in the next chapter, the federal government largely defers to accrediting agencies on matters of educational quality in higher education. The USA Government outlines its general expectations on issues of educational quality but relies on the accrediting agencies that it officially recognizes with respect to how quality is to be monitored and evaluated at colleges and universities. Because distance learning and other forms of ‘new’ instructional delivery have raised new questions for the government, accrediting agencies have found that they must develop new understandings with government and must consider whether they need to take on new roles in helping address governmental questions on the educational quality of distance learning.

The government has two different concerns. One set of questions arises from the narrow issue of accountability for delivering federal aid to students. How can the government be assured that federal aid actually reaches students and, in turn, that students who receive federal aid are engaged in course learning of an appropriate amount and nature? With distance learning, where there is a lack of face-to-face contact, there are new opportunities for student cheating and fewer mechanisms to monitor student progress. What processes ensure that students are submitting their own work? What institutional procedures are needed to ensure satisfactory student progress and to avoid high drop-out or non-completion?

Government also has a broader concern. Because the government relies on accrediting’s expert role in evaluating education quality, the government must be assured that accrediting agencies can
adequately monitor distance learning. In particular, how can the government be assured that evaluative processes that use general standards, self-studies and site visits fit with distance learning?

The possibility of institutional misconduct, whether due to poor practices or to fraudulent actions, has new dimensions with degree programmes based on distance learning, especially when offered by new, profit-making institutions. How can quality be assessed in terms of the institutional commitment and organizational capability that must exist, especially to sustain operations throughout the time needed for students to complete a course of study? Corporate sponsors of distance learning may change their priorities and wish to cut back on programmes within months, yet they need to maintain programmes long enough for students to graduate. If frequent changes in programmes are to be expected as technology changes, how will accrediting agencies monitor such changes? What adjustments will accrediting agencies need to make in the extended time periods they currently allow between accrediting reviews?

As accrediting agencies try to adapt to the realities of distance learning, the government could become impatient, and could seek new regulations or, even, alternative forms of quality review for distance learning. A major issue for accrediting agencies, then, is whether they can adapt their evaluative practices in a way that allows government to continue to have confidence in their practices (Eaton, 2001).

Thus far, both the federal government and the accrediting community have taken a cautious approach to these issues. The government’s posture is visible, for example, in a ‘demonstration project’ it has sponsored with a small number of institutions that offer courses in distance instruction. This includes some universities that enrol more than 25,000 students in traditional instruction while
they also enrol several hundred students in distance learning. Under the demonstration project, these institutions, already experienced in administering student aid, will show how they adapt their current administrative and accountability-directed procedures to this new population of students.

This project addresses the ‘narrow’ accountability question noted above, the need to safeguard the delivery of federal student aid. Many aspects of the broader issue – of whether the federal government (and state governments) can have confidence in accrediting processes for evaluation of distance-based learning – are not settled.

On the government side, the questions reside with the National Advisory Committee on Institutional Quality and Integrity, a legislatively mandated committee that advises the USA Secretary of Education. A primary role of this Committee is to help the Secretary set the terms for declaring post-secondary institutions to be eligible to receive federal funds and, in particular, to have their students receive federal financial aid. It also sets and enforces standards by which accrediting agencies are ‘recognized’ as reliable sources for determining the educational quality of institutions of higher education.

This Committee has discussed issues of distance learning at several meetings, and accrediting officials have had opportunities to present their views and to describe their own actions in response to distance learning. So far, the National Advisory Committee has not recommended any changes in the government’s current practice of relying on accrediting agencies for determinations of quality.
Concluding comments

In reviewing the initial experience of government and accreditors with the challenges posed by electronically based learning, it generally appears that responses have been satisfactory. Accrediting agencies have worked together and, initially, have affirmed that they can hold to long-established principles even as they are applied to the new circumstances of distance learning. More experience will be necessary, however, to test whether this basic assumption holds. This may become problematic if distance methods of delivering tertiary-level education change in substantial ways. So far, the accrediting community has been flexible and open-minded. Further modifications may be needed in how general principles are to be interpreted. Therefore, the possibility remains that a fundamentally new approach will be needed, possibly separate accrediting processes, once the full dimensions of distance learning are more evident.

As of now, and despite the prospect of a continuing evolution of policy, on-line institutions in the USA face a favourable situation in terms of their interest in acquiring accreditation status. The public expects all institutions, electronic or traditional, to have regional (or national) accreditation, and all of the regional accrediting agencies have procedures in place to evaluate the educational offerings and institutional capacities of on-line institutions. The guidelines developed jointly by the regional accrediting commissions are not binding on individual commissions, but they nevertheless display the principles of ‘fair play’ by which on-line learning can be assessed. With a systematic framework established by the guidelines, on-line institutions can work with accrediting agencies throughout an accreditation review process to ensure that the unusual aspects of electronic learning are evaluated fairly.
In all their years of developing standards and guidelines, accrediting agencies have certainly learned that change is a constant in higher education. Time and again, academic programmes and institutions have encountered new challenges and have developed new methods and possibilities for learning. At the present time, accrediting agencies have been wise to build on their prior experience. Wise too, in light of the new complexities of distance learning, is their strategic decision to work closely with each other and also in close relationship with government in considering responses to the issues raised by distance learning.
VII. ACCREDITATION’S ROLE AND IMPACT

Different views can be offered about the overall role and impact of the USA system of voluntary accreditation, based in the work of numerous independent, non-governmental agencies, each with a limited mandate and limited resources. Criticism can be readily found in the literature on higher education in the USA. Governmental agencies and legislators have complained about the slowness with which accrediting agencies respond to certain issues. University administrators have complained about the burdens that their institutions must contend with as part of the accreditation process. Individuals – from students and parents to academics to members of the press – have complained that accrediting agencies typically do not adequately address complaints that individuals bring to them and do not give full explanations for their actions.

To put such complaints in perspective, it should be acknowledged that criticism is inevitable in any enterprise that addresses public issues. Accrediting agencies are especially vulnerable to the external scrutiny and the traditions of openness that are part of American public life. That said, the pattern of complaints deserves to be assessed. It is not the fact of complaints, but their pattern, their main themes and their overall prevalence that must be considered. One also could point out that accreditation agencies have long been criticized but their fundamental purposes and actions have not been attacked. They have not been criticized for ineptness, for dishonest practices, for losing records or for excessive fees. Areas where they are criticized mainly involve decisions that are defensible and principled, decisions that have been developed through open debate that involves the full membership, agency officials, and their Commissions.
A second point needs to be raised. This relates to the central role they have achieved in the overall structure by which higher education is monitored in the USA. Voluntary accreditation, based on a long tradition of co-operation among academic institutions, stands together with agencies of the federal government and state governments as a partner in providing necessary oversight. Accrediting agencies are formally recognized in both federal and state law for this shared responsibility. This role and set of working relationships represent a remarkable accomplishment for voluntary agencies, especially in an area of public concern such as quality assurance and accountability. As this chapter details, this record of accomplishment must be considered when criticisms of accreditation are aired.

At the same time, it can also be acknowledged that accrediting agencies have been very instrumental in spurring academic change and improvement within institutions of higher education. Their expectations for periodic review, for example, have spurred the development of strong internal systems of research and self-assessment. Their questioning of how new initiatives relate to an institution’s overall mission has served a helpful role in shaping educationally useful innovation. The emphasis they place on developing good evidence has supported better decisions and better planning for new academic programmes.

So, too, as a large and increasingly diverse system of higher education has encountered new challenges, accrediting agencies have been instrumental in considering their implications and suggesting directions of appropriate response. Accrediting agencies have played a ‘steering’ role in this area, that is, helping higher education find methods that adapt to new demands without imposing restrictions or demands for immediate action. Accrediting agencies have been
deeply involved in sorting out a constructive response to most of
the major changes faced by higher education in the past several
decades, from developing ways in the 1960s to recognize prior
learning, to addressing methods of on-line delivery of instruction at
present. In these and other areas, agencies have helped the entire
system of higher education deal with change constructively while
also upholding needed dimensions of quality.

In this chapter, these three different areas of impact – serving
governmental interests, strengthening universities and colleges, and
facilitating response to changing demands – are discussed. Together,
they offer a unique story of strong influence exerted by quite small,
voluntary agencies.

Partnering with government

To understand the full picture for quality assurance in the USA, it
is necessary to look at a range of external quality-assurance practices
that exist, governmental and non-governmental. Included are:

- Federal government: regulations linked to eligibility for federal
  programmes, including financial aid;
- State government: regulations linked to funding of public
  universities and colleges; authorization of institutions to operate
  and offer programmes; licensing or certification of individuals
  entering certain professions;
- Regional accreditation: oversight of the educational capability of
  universities and colleges;
- Programme accreditation: oversight of academic programmes
  awarding degrees in specific fields.

With respect to the federal government, the USA tradition has
long been one in which the federal government maintained an at-a-
distance relationship with universities. This is true in large part because the individual states have the major responsibility for education. Another factor is the existence of many private universities and colleges, including some that were founded during the colonial period – before the USA Government itself was established.

As a result of the long-term expansion of USA higher education that took place from the end of the Second World War, the federal government also expanded its involvement with higher education. Today, the federal government is responsible for the financial support of a large portion of the nation’s research carried on by universities; it is responsible too for the great majority of the student grants and loans that support university-level studies. Notably, however, despite this expansion of the federal role, the arms-length relationship between the federal government and higher education has continued. The explanation for this continuity is found in the role that accreditation agencies have come to play in supporting the government’s programmes while reserving significant oversight responsibilities to the academic community itself.

The basis of accreditation’s involvement with the federal government is technically a narrow one, which begins with the necessity that the federal government must determine whether an academic institution is ‘eligible’ to participate in federal programmes, especially programmes that offer financial assistance to students to pursue studies at any of thousands of institutions, public and private, all around the country. Today, about half of all students receive financial aid, so universities, colleges or institutes generally want to receive such eligibility.

In a series of actions since the 1960s, the US Department of Education, the federal agency responsible for education (which has undergone several name changes over the years), has established an
indirect process for determining the eligibility of individual institutions to participate in federal programmes. It has directed that institutions are eligible for participation if they meet two fundamental conditions: (1) they are authorized or licensed by the state in which they were located; and (2) they are accredited by one of the nationally recognized accrediting bodies determined to be reliable authorities on the quality of education that higher education institutions offer.

This federal decision established what is called the ‘Triad’, a division of labour among federal government, state government, and accreditation that has continued until the present day. Indeed, formal language recognizing the Triad and its complementary roles was embedded in federal laws passed in 1992 and 1998 in support of higher education. As one observer has stated:

“The Triad proceeds on the basis that private organizations grant accreditation while [the Department of Education] grants institutional eligibility and certification. These are distinct activities with distinct purposes. Accreditation by private groups, [Education Department] certification of institutions, and state licensure … each represent a different path to the same superordinate goal: high quality education and a sound investment of public monies” (Eaton, 1997).

Complementary roles are envisioned under this arrangement, with various tasks based on each partner “...doing what it does best and following its natural functions” (Eaton, 1997). Thus, accreditation agencies take major responsibility for determining quality as it is tied to substantive educational issues, including, for example, curricula, faculty, educational facilities, support services and admissions policies. In contrast, issues directly related to the public interest, especially pertaining to financial and administrative activities of institutions, are appropriately the arena of government
action and enforcement. The states and the federal government further divide these tasks, with the states taking initial responsibility for authorizing institutions to operate and, separately, for licensing individuals to practise in certain professions.

Without this partnership, the USA Department of Education would have a large, complex task in determining which institutions, out of a total of more than 5,000 institutions, are properly considered a ‘post-secondary’ institution and whether each continues to offer an academic programme of sound educational quality. Instead, state governments provide oversight of minimum, or threshold, capabilities, and a nationwide network of accrediting agencies fulfils the ongoing quality assurance tasks related to educational quality. Because the federal government defers to states for authorizing institutions to operate and defers to accrediting agencies on matters of educational quality, the government’s oversight role can be directed to issues related to responsible financial management of federal funds.

To be sure, there are disputes from time to time between federal officials and accrediting officials over various aspects of this partnership, and such disputes continue at present. Tensions have arisen, for example, over the sanctions that accrediting agencies employ. In a reflection of the attempt by accrediting agencies to help institutions improve, they have developed a number of sanctions that, while calling for corrective actions, avoid the punitive action of revoking or denying accreditation. With minor variations by agency, the range of their possible actions include:

- accredit;
- accredit, with specific conditions;
- issue a warning that deficiencies exist that threaten accreditation;
- place on probation, due to continuing deficiencies;
• issue a show cause order, in which the institution must reply to specific concerns and demonstrate why accreditation should not be revoked;
• revoke accreditation.

From the accrediting agency perspective, this range offers a set of graduated actions that allows agencies to match their actions to the range of concerns that may arise when an educational institution is evaluated. Problems with misleading admissions practices, for example, may be addressed by an action that allows the institution to be accredited but that places specific conditions on its admissions procedures. Alternatively, an institution with financial problems that do not affect its academic programmes may be allowed to continue its programmes but be placed on probation until its financial problems are resolved. So, too, a show cause order represents a serious warning that allows the institution a final chance to remedy serious problems; it allows the accrediting agency to alert an institution to the prospect that accreditation will be revoked unless major changes are made quickly.

In fact, accrediting agencies often make use of informal steps, other than the formal actions that have been listed. A visit may be made to a college’s president, for example, alerting the president to potential trouble spots. The dates of routine reviews can be adjusted and additional visits and reporting requirements can be imposed if problems need closer monitoring. A college is likely to take such informal steps seriously, even though no public statement was made. Nevertheless, the overall picture is one in which accrediting agencies rarely take formal punitive action. A review prepared by the Chronicle of Higher Education in January 2001 found that only about 100 institutions, out of a total of nearly 3,000 regionally accredited institutions, had received some form of sanction between 1997 and
2000. Most sanctions involved warnings or being put on probation; only five institutions had their accredited status revoked.

From the federal government's perspective, however, the range of sanctions, and the infrequent use of negative actions, raise problems, particularly when they allow questionable institutions to continue operation for an extended period. In 1999, the US Department of Education adjusted its own rules in this regard, making it harder for a college to take more than two years to remedy problems before losing accreditation. The Department now requires accrediting agencies to take action within two years once an institution is found to be out of compliance with agency standards.

Often, the disagreements that emerge between the federal government and the accreditation agencies are related to new conditions or new types of institutions. In other cases, issues emerge around ‘boundary’ issues, that is, differences over what role belongs to each partner. In the past decade, for example, the federal government pushed to expand accreditation’s role in administrative oversight of universities. However, it met with sharp disagreement from accrediting agencies and from the higher education community in general. Overall, the partnership stands as a remarkable, and efficient, mechanism for accomplishing several public purposes.

In brief, the existence of voluntary accreditation, with its long-term expertise and high degree of legitimacy, serves the public interest in substantial ways. It provides the government with an enormous saving of resources. Even if the government were to duplicate the process, it would have to go to great lengths to have the same level of acceptance, if it could be achieved at all.

Another benefit might be best understood only when difficulties arise, for example when problems are identified (e.g. with fraudulent
‘diploma’ mills) or new situations must be addressed (e.g. with distance learning). At such times, having several entities collectively responsible for quality assurance is especially useful. State officials, federal officials and accrediting agency officials can work with each other to sort through the problem and evaluate potential solutions; they can share information that each has available. This pattern has been especially useful, for example, as issues related to quality assurance for distance learning have been addressed by all members of the ‘Triad’. On this and other issues, each partner gains from having allies that can provide different perspectives and expertise.

Sometimes too, accrediting agencies can serve to help governmental bodies resist political pressures. Such benefits of the ‘Triad’ arrangement are tremendously valuable to the process of quality assurance as a whole, even though they are not readily appreciated in ‘normal’ times when the multiple arrangement may otherwise seem overlapping, wasteful and confusing.

A similar benefit can be described with respect to the links between accrediting agencies and state governments, the other side of the ‘Triad’ partnership. State governments have the primary responsibility for education in the USA. The individual states are the primary funding source for public institutions of higher education, providing them with almost all funding in support of instruction and with a major share of support for research. In carrying out their oversight responsibilities that are related to this funding role, states have always imposed accountability requirements, related primarily to fiscal and administrative management and, secondarily, to issues of meeting needs of the state’s economy. Some state governments go further with their oversight role and periodically make decisions about which public institutions of higher education, and how many,
may operate in their state, where they can be located, and what mission they will be granted.

The individual states also carry responsibility for the ‘baseline’ quality assurance role of using the state’s legal powers to monitor and restrict institutions and, where necessary, to prevent fraudulent practices. This baseline role includes the responsibility to enforce minimum standards of quality when authorizing institutions to offer academic programmes. This authorizing role affects the ability of both public and private universities and colleges to operate within the state. The states also have the responsibility to safeguard the quality of preparation for certain professions, through licensing of individuals ready to enter practice.

Some observers (e.g. Ewell, 1993) believe that this monitoring role of the states is gradually expanding, with a slow accretion of additional requirements and closer monitoring in most states. Of interest, in the context of quality assurance, is the fact that a number of states have developed monitoring systems based on performance indicators (Kezar and El-Khawas, forthcoming). Over time, such monitoring systems could pose a conflict with accrediting agency actions. Thus, for example, a state might declare a certain institution to be deficient because of matters that directly bear on academic quality, such as low completion rates or poor planning. Will accrediting agencies be expected to take action too, possibly to undertake an investigatory site visit ahead of the normally scheduled visiting plan? The potential for such developments and, consequently, for new relationships between accrediting agencies and individual states certainly exists, and trends in this direction might be expected in the near future. As yet, however, most states are still experimenting with their use of performance measures and no single direction has emerged. Some states gather information and issue results but only
for public information and disclosure purposes. Other states have tried to link performance measures to funding proposals but, generally, have found that such measures get considered along with other factors, including legislative priorities and regional needs.

While all of the 50 states have some sort of oversight function for higher education institutions, the states differ significantly in the size and sophistication of their activity to monitor higher education. In many respects they, like the federal government, defer to accrediting agencies for oversight of matters related to educational quality. In both areas of state activity – authorizing institutions and licensing individuals – regional and programme accrediting agencies have worked out co-operative relationships with the states. Sharing of information with states when there is evidence of poor institutional practice – sometimes involving fraudulent, ‘diploma’ mills – has been helpful to the states while it also helps accrediting agencies avoid spending much of their own time on such matters. For programme accrediting agencies, the relationship with state officials has most often focused on sharing of information and perspectives about ongoing needs in the workforce or changing requirements in professional preparation.

Dialogue between accreditors and states has been especially vigorous in recent years, for example, with respect to teacher education. As state legislators and governors, as well as school districts and school boards, have expressed discontent with the quality of elementary and secondary education, active debate has focused on what mechanisms should be in place to ensure strong preparation of new teachers and good mechanisms for continuing the professional development of practising teachers.
Promoting good practice within academic institutions

To understand another dimension to accreditation’s role and impact, it is necessary to look within higher education to the varied internal processes that support quality assurance and, over time, the maintenance and improvement of academic quality. Both regional and programme accrediting agencies have played a significant role in supporting and giving direction to ongoing improvements in the quality of USA higher education.

There are, in fact, two distinct processes of quality assurance in the USA. One looks outward to external accountability. It is complemented by separate processes that look inward, examining educational practice and results for purposes of improvement. As an important policy statement on accountability, Graham, Lyman, and Trow (1995) argued, the internal perspective focuses on academic concerns and is centred on what internal actors must do to improve learning. As they explain:

“In external accountability, there is the obligation of colleges and universities … to provide assurance that they are pursuing their missions faithfully, that they are using their resources honestly and responsibly, and that they are meeting legitimate expectations.

In internal accountability, there is … rather detailed evidence of how they are carrying out their mission, how well they are performing, what they are doing to assess their own effectiveness and identify where improvement is needed, and what they are doing to make those improvements”.

This distinction directs attention to the considerable amount of activity that routinely occurs within USA academic institutions as part of internal accountability, including:
Accreditation’s role and impact

- review and oversight by the university’s governing board;
- new programme planning and development, which takes place on a continuing basis;
- programme review, which affects all programmes over a five-year period;
- student assessment methods, evaluating the experiences of new students, continuing students, and alumni satisfaction and success;
- student evaluations of each course in which they are enrolled;
- evaluation of individual academics and staff, conducted confidentially but focused on performance and achievements.

As this listing suggests, internal accountability involves a number of overlapping processes. In any single year, an institution conducts numerous programme reviews, conducts some assessment activity, has all scheduled courses evaluated, and faculty and staff undergo yearly evaluation of their accomplishments. The institution’s governing board may conduct other reviews as well.

USA universities and colleges are substantially committed to internal accountability. A 1993 survey found, for example, that more than 80 per cent conducted regular programme reviews; more than 90 per cent of universities and colleges had systematic activities to assess student outcomes and use the results to improve student learning (El-Khawas, 1993).

Programme review is an important process for USA campuses. Programme review is a system in which each academic department, or programme, invites outside experts to review and comment on the programme in order to suggest ways to strengthen it (Brennan, El-Khawas and Shah, 1994). This system, organized by universities themselves, gives outside experts considerable freedom in how they review a programme. Reviewers comment on the programme’s own self-study report in whatever manner they wish. They offer whatever suggestions they wish for how the programme can be strengthened.
Increasingly too, it has become normal practice for most USA universities and colleges to employ strategic management procedures: identifying priorities, planning carefully to promote those priorities, monitoring operations more closely and establishing various benchmarks and indicators for their own use. This increased self-scrutiny extends not only to administration but also to academic programmes (Banta et al., 1993) and is conducted wholly apart from accreditation.

As is evident, universities and colleges have several internal review mechanisms that supplement accreditation reviews. Strengthened planning and review mechanisms are due, in part, to the institutions themselves, which have recognized the advantages of managing themselves well, being able to anticipate and adapt to changes in student interests and in the needs of their surrounding communities. At the same time, it is also fair to say that accrediting agencies have spurred and given direction to the increased use of planning and internal review. For decades, accrediting agencies have imposed requirements for periodic self-appraisal by academic institutions and programmes. The requirement to report on academic programme strengths and weaknesses at regular intervals has undoubtedly led many institutions to organize their own information reporting systems for effective self-assessment purposes.

For decades, the Southern Association of Colleges and Schools (SACS) has been a leader among regional accrediting agencies in having standards that explicitly emphasize the importance of planning. In the 1984 edition of its *Criteria for Accreditation*, SACS included a standard on Institutional Effectiveness that included a requirement that each institution “...must define its expected educational results and describe how the achievement of these results will be ascertained” (SACS, 1984, p. 10). Further, it specified that each
institution must develop procedures that will allow it to evaluate the extent to which it is meeting its educational goals. As SACS argued:

“Traditionally, accreditation has focused attention almost exclusively upon institutional resources and processes. It has usually been assumed that, if an institution has certain resources and uses certain processes, effective education will occur. A comprehensive approach ..., however, takes into account not only the resources and processes of education ... but also the evaluation of the results of education and plans for the improvement of the institution’s programmes” (SACS, 1984, p. 10).

Throughout the 1980s and 1990s, all of the regional accrediting agencies became more explicit in their requirements that accredited institutions make use of good planning procedures, both to evaluate programmes and to assess student progress and achievement. Annex 7 offers some examples of current accrediting standards related to planning, including strengthened and more detailed language found in the 1998 criteria used by SACS as well as the standards on planning employed by the New England Association (NEASC).

**Addressing changing demands**

There is a third area in which accreditation has had a salutary effect: helping higher education institutions to confront and respond to change. Throughout the past several decades, USA higher education has found it necessary to address new challenges, especially the need to respond to adult learners by bringing educational programmes to new locations – from corporate offices and rented store fronts to ‘satellite’ locations – in order to offer education at convenient times and locations. Because adults had often already begun post-secondary study, new policies were needed to fit their ‘prior learning’ into a coherent programme of study. As student interests changed, still
other innovations were made to offer field experience, service learning and other forms of non-traditional learning. Some academic institutions have developed corporate partnerships, others have established academic programmes in other countries. In the late 1990s, as Chapter 6 has described, methods of delivering instruction were experimented with, taking advantage of options afforded by electronic technology.

Accrediting has played what might be called a ‘brokering’ role as such innovations developed. Always, there is a period of uncertainty – new ideas are offered, but there is no clarity about how they might best be addressed. Existing policies need to be re-examined, and new policies developed. While innovators deserve to be recognized, it is also true that accrediting agencies have greatly assisted their task. Accrediting agencies serve as a public voice and advocate for changes that will improve educational practice. Yet, appropriately, they also offer a voice for using caution when planning change. Accrediting rules provide an external perspective, a mechanism that helps institutions to hear other views on changes that they are considering, sometimes affording them access to other approaches or refinements that result in better changes.

For higher education as a whole, then, accrediting agencies have allowed necessary processes of innovation and response to changing circumstances to move forward in an orderly way. Institutions may experiment with new approaches, but must submit their plans to an outside review provided by accreditation agencies. Over time, as new innovations become more broadly understood and accepted, the new practices typically find expression in accrediting guidelines. Annex 9 offers excerpts from the policies related to off-campus sites and other alternative offerings, as found in the current standards of the Middle States Association (MSA).
By such methods, accrediting agencies not only guide the development of innovative practices but also serve to lend credibility to emerging forms of educational innovation. Necessarily too, they set certain terms of good practice and encourage certain types of practices, while other practices are discouraged or banned. This represents a soft approach, perhaps, compared to such policy alternatives as governmental mandates, but it has proved useful in the USA for supporting innovation without stifling it. It could be argued, too, that such external support for innovation, along with accrediting’s push for good planning and self-assessment, offers an important element in the generally strong level of innovation and self-improvement that characterizes USA higher education.

Concluding comments

It is the broad picture of quality assurance – linking various forms of internal reviews, state-level scrutiny, federal oversight, and voluntary accrediting – that offers a strong and dynamic context in which USA institutions and programmes know they will be scrutinized for their educational quality. The questions and concerns that are the essence of accrediting and other quality assurance mechanisms are not distant and irregular, but instead are built into the normal routine of educators and educational institutions on a continuing basis.

Accreditation occupies a special ‘space’ in the oversight of USA universities and colleges. Taken in broad perspective, its achievements have been to:

- lend its credibility to government and simplify the government’s task;
- prod universities to have an internal ethic of change and improvements; and
- support and help shape the ways that innovations get introduced.
Its role is broadly acknowledged and accepted, a status and credibility that has been earned over decades of effectively serving public purposes. It occupies a classic ‘in-between’ role of an intermediary organization in the public arena: on the one hand, it advocates and promotes the purposes that are sometimes pursued by government; on the other hand, and equally forcefully, it advocates the special needs of the higher education institutions. For the government, accrediting agencies offer an expert role on educational matters. They translate and implement some of the quality assurance concerns that government may raise, but in ways that are compatible with academic life. Their success in carrying out this delicate, intermediary role has given accrediting agencies tremendous credibility and a strong record of achievement, especially remarkable when one considers their small size and modest resources.

Accreditation has proved to be a resilient device, as demonstrated by the collective history of accrediting agencies and the many instances in which new issues have emerged and been successfully addressed. More often than realized, issues have been resolved through co-operation between accrediting agencies and government, each working within their respective areas of strength.
VIII. LESSONS

It would be easy to conclude that the USA experience with accreditation is unique and cannot offer a model for other countries. The structures that exist are based on events that occurred long ago in the history of USA higher education. They make sense today largely because of the unusually narrow role that the USA federal government plays in higher education. So too, the issues of size and scale that arise for USA higher education are not comparable to those faced by much smaller countries or those with much smaller systems of higher education. Perhaps too, the USA accreditation experience has taken shape in periods before electronic communications made new models and approaches possible.

Yet, one should not dismiss the relevance of this history too quickly. Quality assurance models, as with systems of higher education themselves, are organized to fulfil long-term societal needs. They need to confront enduring issues, such as the need to define and maintain standards of quality and the equally important need to spur often large, established institutions to keep their programmes up to date and responsive to changing constituency needs. A system that has a long track record undoubtedly reflects an accumulation of practical experience and operational wisdom, aside from its longevity.

For governmental officials who must take responsibility for designing – or revising – their approaches to quality assurance, many issues found in the USA story of accreditation might be addressed. The experience of other countries, including those with quite recent experience, can also be examined for what perspective they can offer. Such comparisons will identify situations where certain approaches have been experimented with but then dropped, or where a strong governmental approach has met with resistance, both visible and beneath the surface. In such a context, the elements of successful
long-term practice that can be seen in the USA experience do deserve some scrutiny.

As with any area of public policy, designing a policy solution calls for careful consideration of what are the primary goals or objectives for a new policy and, also, of what methods will have the best prospect of reaching those goals. The length of time allowable for reaching objectives must be considered, along with constraints and opportunities that are embedded in the country's actual circumstances.

In light of the USA experience, one implication is that a long time horizon is needed. Building an effective system of quality assurance depends on achieving credibility among all important constituencies. This is not a simple, quickly achieved task. Building an effective system calls for a gradual development and refinement of procedures as new situations and challenges are confronted. It also takes time to develop wide experience and understanding of quality assurance methods.

What does this experience offer by way of guidance to other countries that wish to develop, or review, their approach to quality assurance? Several practical issues can be discussed, including: ways to organize and structure a quality assurance agency; and methods by which a quality assurance agency can enlist the support of key stakeholders and build consensus on its procedures. Other lessons might be drawn as well, especially with respect to the long-term goals that an agency might pursue and the ways that it can maintain credibility with all relevant parties.

In structuring an agency, the USA experience suggests that long-term purposes actually influence the operational decisions that are made. Because the USA experience is one in which improved educational practice is sought, and in which academic perspectives
and participation are important, accrediting agencies are organized as very small staff units that rely for much of their actual monitoring on volunteer services from members of the academic community. Regional accrediting agencies typically have a limited number of staff, perhaps 12 to 20 in all, and an annual operating budget of $2 million to $3 million, mainly covering staff salaries, office expenses and the holding of two or three meetings each year. Professional staff have varied backgrounds but generally have doctoral-level education, have worked at academic institutions, have good organizational skills, and are circumspect and professional in demeanour. With programme accrediting, staff often possess degrees and training specific to the professional area of interest, for example, in engineering or nursing.

Reflecting a strong philosophical commitment to academic decision-making, all accrediting agencies rely on elected commissions as the source of their formal authority. It is the commissions that establish, review, and act on accrediting policies. These commissions normally include 12 to 25 educators from a representative array of educational institutions in each region, as well as a small number of ‘public’ members who may have corporate or governmental responsibilities within the region. Commission members serve without compensation and have limited terms, often for a duration of three to eight years, so that a wide range of perspectives and educational experiences can be heard. The members of a regional accrediting agency are the accredited institutions in the region; these members vote to elect members of the commission and vote to support or reject changes in policy that are proposed.

It is the accrediting commission that actually makes the formal vote on every action, whether to grant accreditation for a certain period, to issue sanctions or revoke accreditation, to change existing standards and policies, and to assess fees on member institutions. In turn, staff organize the cycles of accreditation review, the preparation
of site visit reports and other documentation to support decision-making by the commission, and any work needed to review and possibly revise policies. The site visit teams make recommendations, but it is the commission that votes on those recommendations.

The work of accrediting agencies relies heavily on the participation of a substantial number of persons who serve as site visitors. Programme accrediting agencies call on persons in the specific profession, including those who have academic experience as well as practitioners. Regional accrediting agencies generally call on persons (both in and out of their region) with academic or administrative experience in higher education, including those with specialist training (e.g. in financial management, libraries, educational technology), senior administrators such as presidents or deans, and members of the professorate.

As can be seen, the composition of site visits and the way that accrediting commissions are formed reflect the importance of academic participation in the work of accrediting agencies. These organizational facts thus support the need of the agencies to maintain active ties to their stakeholders, especially the leadership of academic institutions that make up their membership. Consistent with these continuing ties to academe are the actions that accrediting agencies regularly take to review and update their standards and procedures. As noted earlier, agency policies have been reviewed and revised on a regular basis over the years. Each time, the agency’s commission takes the lead by identifying certain issues for major attention but, otherwise, a widely participative process is carried out. The Western Association, for example, in organizing its recent reform plans, called for wide participation in its review. It published two different documents that outlined possible new directions, organized its regular meetings around discussion of possible changes, sought the views of governmental agency staff and had its staff make numerous
public presentations about the direction and substance of possible changes.

In all of their procedures, then, an overriding commitment can be seen. Accrediting agencies are based in academic perspectives. They conduct a policing role, but it is one in which consensus on the standards and procedures they employ are derived from the collective views of academics. Their long-term credibility is based in this strong reliance on academic views and widespread academic participation in their work. Consistent with this philosophy, they are also membership organizations and rely on the decisions of academic institutions to continue their memberships. Similarly, their operating budgets depend almost entirely on revenues based on annual dues paid by member institutions.

The ‘voluntary’ nature of accrediting is most apparent in this membership connection; each individual college and university decides whether to be a member and whether to seek accreditation. For programme accrediting, for example, there have been rare instances when groups of universities were sufficiently dissatisfied with the directions and purposes of a programme accrediting agency that they, collectively, withdrew their memberships and then formed a new accrediting agency with a somewhat different approach and philosophy. This process occurred with programme accrediting related to business management programmes and nursing programmes during the 1990s, for example.

What does the USA experience suggest in terms of the proper goals for a system of quality assurance? There is no obvious answer. Certainly, one concrete approach is to adopt a competency-based model, following on the decisions of some programme accrediting agencies in the USA to focus on the important skills and competences that university graduates should possess. These are important
outcomes and could well be crafted to reflect national priorities and the pressing needs of economic development. However, this approach may not be sufficient, as it does not address other aspects of university purposes, such as conducting research and being of public service. Nor does it sufficiently examine the issues of ‘institutional capacity’ that are currently receiving new attention among USA regional accrediting agencies.

The history of USA accreditation shows that specific agency goals have changed over time. Initial goals dealt only with certain aspects of what can be achieved by quality assurance systems. Other goals took on more importance at other times. In the beginning, the standards for accepting students were a focus of attention. Ways of determining whether to accept students who wished to ‘transfer’ between institutions was another early concern. Much later, pressure had built for attention to outcomes, to whether the preparation of university graduates was adequate for the needs of the economy.

Two possible implications might be drawn from this experience with changing goals. First, it is possible that the most realistic objectives for quality assurance are those that focus on establishing good processes. As circumstances and needs change, it could be argued, the central purposes of quality assurance can be achieved if strong procedures have been developed to monitor institutional practice, to identify areas of weakness and to assess what measures will lead to improvement. Good experience can, when necessary, be turned towards new goals. Under this approach, it becomes more important to generate experience with quality assurance – both at governmental level and within universities – than to have a refined and comprehensive design for quality assurance. Success, then, is found in the development of good processes for monitoring quality. Gaining familiarity, and comfort, with quality assurance on the part of educators and government officials is an important benefit, likely to yield continuing dividends.
Another implication is that, because there are many aspects to quality assurance, an incrementalist approach can be productive. Whether by design or by accident, it may be realistic for any system of quality assurance to formalize ways of accomplishing certain goals at one time and move on to other goals as circumstances warrant. Issues in facilitating the transfer of students from one institution to another, for example, may have limited salience in some settings and some periods, but be very important in others. Issues of minimum standards may need to be tackled first in situations where there are clear indications that low standards are an endemic and serious problem. Instead, issues in defining “fitness for purpose” tend to arise in the context of higher education systems that have undergone a substantial degree of differentiation, so these issues may not be priorities in other settings. It may not be realistic, given other important priorities, to expect that a complete ‘package’ of all the desirable elements of quality assurance can be assembled at a single time.

It is in the incrementalist mode, too, that the debate between ‘accountability’ and ‘improvement’ can best be assessed. Too often, debate has cast these as opposites, at war with each other. Approaches that represent one side of this debate are assumed to undercut the other. A system once in place is praised if it has achieved some degree of balance between these opposite poles, and is criticized if new directions will tip the balance inappropriately. Realistically, however, it should be recognized that any full model of quality assurance needs to include diverse elements related to accountability as well as multiple approaches to improvement. In the incrementalist perspective, either improvement or accountability, or both, can be given direct attention at any one time.

Certainly it appears that USA accrediting agencies have witnessed some contrasting seasons with respect to the balance between
improvement and accountability goals. Their experience during the 1990s, for example, offers direct examples of how quality assurance systems may work towards a balance of the two goals. Over the past decade, regional accrediting agencies have had to modify their requirements to accept more responsibility with respect to federal monitoring roles but, at the same time, most have also moved forward with reforms that could strengthen the self-improvement role of accrediting reviews.

Another key issue in the design of a policy for quality assurance is to decide on what methods and what devices are needed to accomplish goals. In this regard, the USA experience offers a clear alternative. Throughout this publication, the models of quality assurance that have been described tend to follow a general form, despite differences in their specific details. Thus, for example, the USA approach has been one that relies heavily on the involvement of members of the academic community. Expertise on educational matters and direct experience in administering educational institutions are prized, whether in the choices of site visitors or in the appointment of members of accrediting commissions or, even, in the selections made for membership on governmental advisory bodies that offer advice on quality assurance matters. New approaches to quality assurance have consistently developed through participatory processes within the academic community, not by laws or regulations developed by others.

The core processes that are found in USA accreditation also reflect a reliance on academic perspectives. Accrediting reviews, at least in the past few decades, have started with institutional self-studies, conducted in a manner that allows the institution to offer its own interpretation and analysis of its situation. Accreditation procedures have never relied on external measures – rankings, scores, or the like
Lessons

– as the basis for quality assurance. Instead, peer review is a key mechanism for monitoring or ‘auditing’ institutional practice. Peer judgement is generally provided in a ‘holistic’ manner, not through checklists or other prescribed formats

Underlying the USA approach, too, is a dislike for constraints. The process, instead, values serious effort and voluntary participation in quality assurance activities. Agencies have quite detailed standards, but they allow institutions to make their case for how the standards may be met in unusual ways. As Chapter 3 demonstrated, accrediting agencies have taken many steps to offer flexibility to institutions in how they can meet accrediting requirements.

It is in this context that the USA approach to the use of quantitative information can be understood. Observers will readily note that great care is taken, in debates on accreditation, to emphasize that accrediting standards do not rely excessively on quantitative information. Yet, it is also true that institutions are required to submit a substantial amount of quantitative information to accrediting agencies, and in a precise format and level of detail. What this reflects, it seems, is the necessity of having such information but the desire to not allow it to constrain, or delimit, the way that issues of quality assurance are to be evaluated. Information must be disclosed, but there is respect too for the importance of careful interpretation of that information according to specific circumstances.

This dislike of constraints, which seems to be present throughout the history of USA accreditation, may be a result of the way that the USA Government does not directly monitor higher education. It may still have relevance for other countries, however, because it represents a system that has been constructed on the basis of a consistent underlying philosophy about how complex organizations, such as universities, can be influenced to serve public goals. It is a
system that, despite its confusing structure and complicated processes, has achieved a considerable degree of success. The test, then, may be whether the areas of strength that USA accreditation has achieved are also the areas that are sought in other countries.

One of those strengths lies in the wide participation and familiarity with methods of evaluating quality that are found at most USA universities. The sophistication of university planning processes today is in substantial degree a product of the continued, long-term expectations that accrediting agencies have imposed on institutions for being able to monitor, evaluate and report on their own operations and accomplishments. Accreditation’s approach has been one of identifying the need for the proper ‘infrastructure’ by which institutions could be monitored. Today, this offers a strong capability that can lend itself to institutional improvement with or without external directives.

A related strength is the way that accrediting processes in the USA are supportive of differences in institutional mission and purpose. The experience of other countries suggests that it is quite easy for a quality assurance to be designed that ‘advantages’ one set of institutions over another. While a differentiated system of higher education may not be desired in all country settings, in those situations where it is preferred, it would be counter-productive to organize a coherent system of quality assurance that presses institutions towards a single model, or systematically disadvantages certain types of institutions.
REFERENCES


References


Note: All documents cited in the text that are published by accrediting agencies can be accessed through the respective agency web sites, listed in Annexes 1 and 2.

**For further reading**


ANNEX 1. REGIONAL AGENCIES THAT CONDUCT INSTITUTIONAL ACCREDITATION IN HIGHER EDUCATION, 1999-2000 (INCLUDING 6 AGENCIES AND 8 COMMISSIONS)

1. Middle States Association of Colleges and Schools (MSA)
   Commission on Higher Education
   Jean Avnet Morse, Executive Director
   3624 Market Street
   Philadelphia, PA 19104
   Phone: 215-662-5606
   Fax: 215-662-5501
   Web site: http://www.msache.org

   The Middle States Association was established in 1887. It accredits institutions of higher education in five states – Delaware, Maryland, New Jersey, New York, Pennsylvania – and in the District of Columbia, Puerto Rico, the US Virgin Islands, and Panama. MSA members also include several free-standing American-style institutions abroad that are chartered in one of the states in the region.

2. New England Association of Schools and Colleges (NEASC)
   209 Burlington Road
   Bedford, MA 07130-1433
   Phone: 781-271-0022
   Fax: 781-271-0950
   Web site: http://www.neasc.org

   The New England Association, founded in 1885, is the oldest regional accrediting organization in the USA. It serves public and independent schools, colleges and universities in the six states of Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont and 86 American/international schools around the globe.

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International Institute for Educational Planning  www.unesco.org/iiep
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It operates with two commissions:

Commission on Institutions of Higher Education, Charles M. Cook, Director
Commission on Technical and Career Institutions, Richard E. Mandeville, Director

3. North Central Association of Colleges and Schools (NCA)
   Higher Learning Commission
   Steven D. Crow, Executive Director
   30 North LaSalle, Suite 2400
   Chicago, IL 60602-2504
   Phone: 312-263-0456
   Fax: 312-263-7462
   Web: http://www.higherlearningcommission.org

   The North Central Association was established in 1895. It accredits institutions of higher education in 19 states: Arizona, Arkansas, Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, New Mexico, North Dakota, Ohio, Oklahoma, South Dakota, West Virginia, Wisconsin, and Wyoming. It also accredits American Dependents’ Schools operated overseas for the children of American military and civilian personnel and Navajo Nation schools.

4. Northwest Association of Schools and Colleges
   Commission on Colleges
   Sandra Elman, Executive Director
   11130 NE 33rd Place, Suite 120
   Bellevue, WA 98004
   Phone: 425-827-2005
   Fax: 425-827-3395
   Web site: http://www.cocnasc.org
The Northwest Association was established in 1917. It serves accredited and candidate institutions of higher education in seven states: Alaska, Idaho, Montana, Nevada, Oregon, Utah and Washington.

5. Southern Association of Colleges and Schools (SACS)
   Commission on Colleges
   James T. Rogers, Executive Director
   1866 Southern Lane
   Decatur, GA 30033-4097
   Phone: 404-679-4500
   Fax: 404-679-4558
   Web site: http://www.sacscoc.org

   The Southern Association was established in 1895. It accredits institutions of higher education in 11 states (Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas and Virginia) and in Latin America for those institutions of higher education that award associate, baccalaureate, master's or doctoral degrees.

6. Western Association of Schools and Colleges (WASC)
   985 Atlantic Avenue, Suite 100
   Alameda, CA 94501
   Phone: 510 748 9001
   Fax: 510 748 9797
   Web site: http://www.wascweb.org

   The Western Association was established in 1962, incorporating a predecessor organization, the Western College Association, that accredited only four-year institutions. WASC accredits institutions of higher education in two states (California and Hawaii) and in the territories of Guam, American Samoa, Federated States of Micronesia, Republic of Palau, Commonwealth of the Northern Marianas Islands,
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and also in the Pacific Basin and East Asia where American/international schools or colleges may apply to it for service.

It operates with two commissions:

Accrediting Commission for Community and Junior Colleges,
David B. Wolf, Executive Director
Accrediting Commission for Senior Colleges and Universities,
Ralph A. Wolff, Executive Director

Source: Addresses are taken from the web site for the Council on Higher Education Accreditation at http://www.chea.org
Additional information is taken directly from agency publications.
ANNEX 2. PROGRAMME ACCREDITATION AGENCIES – SELECTED EXAMPLES

American Library Association (ALA)
   Committee on Accreditation
   Ann O’Neill, Director
   Office for Accreditation
   50 East Huron Street
   Chicago, IL 60611
   Phone: 800-545-2433
   Fax: 312-280-2433
   Web site: http://www.ala.org/accreditation.html

American Psychological Association (APA)
   Committee on Accreditation
   Susan Zlotlow, Director
   Office of Programme Consultation and Accreditation
   750 First Street, NE
   Washington, DC 20002-4242
   Phone: 202-336-5979
   Fax: 202-336-5978
   Web site: http://www.apa.org

Association of American Law Schools (AALS)
   Carl Monk, Executive Director
   1201 Connecticut Avenue NW, Suite 800
   Washington, DC 20036-2605
   Phone: 202-296-8851
   Fax: 202-296-8869
   Web site: www.aals.org

International Institute for Educational Planning    www.unesco.org/iiep
Commission on Accreditation in Physical Therapy Education
American Physical Therapy Association
Mary Jane Harris, Director
1111 North Fairfax Street
Alexandria, VA 22314
Phone: 703-706-3245
Fax: 703-838-8910
Web site: www.apta.org

Commission on Accreditation of Allied Health Education Programme
(CAAHEP)
Kathleen Megivern, Executive Director
35 East Wacker Drive, Suite 1970
Chicago, IL 60601-2208
Phone: 312-553-9355
Fax: 312-553-9616
Web site: http://www.caahep.org

Council on Social Work Education (CSWE)
Division of Standards and Accreditation
Nancy Randolph, Director
1725 Duke Street, Suite 500
Alexandria, VA 22314
Phone: 703-519-2044
Fax: 703-739-9048
Web site: http://www.cswe.org

Liaison Committee on Medical Education (LCME)
In even-numbered years beginning each 1 July, contact:
David P. Stevens, M.D.
AAMC Secretary to the LCME
Vice President, Medical School Standards and Assessment
Association of American Medical Colleges
2450 N Street, NW
Annexes

Washington, DC 20037
Phone: 202-828-0596
Fax: 202-828-1125
Web site: www.lcme.org

In odd-numbered years beginning each 1 July, contact:
Frank A. Simon, M.D.
AMA Secretary to the LCME
Assistant Vice President, Medical Education
American Medical Association
515 North State Street
Chicago, IL 60610
Phone: 312-464-4657
Fax: 312-464-5830
Web site: http://www.lcme.org

National Association of Schools of Music (NASM)
Samuel Hope, Executive Director
11250 Roger Bacon Drive, Suite 21
Reston, VA 20190
Phone: 703-437-0700
Fax: 703-437-6312
Web site: http://www.arts-accredit.org

National Council for Accreditation of Teacher Education (NCATE)
Arthur E. Wise, President
2010 Massachusetts Ave., NW, Suite 500
Washington, DC 20036-1023
Phone: 202-466-7496
Fax: 202-296-6620
Web site: www.ncate.org

Source: Taken from the web site of the Council on Higher Education Accreditation (CHEA) at http://www.chea.org
The web site gives a listing of 50 programme accrediting agencies.
ANNEX 3. KEY PERIODS IN THE DEVELOPMENT OF USA HIGHER EDUCATION

1900 to 1930

Enrolment grew from 237,000 in 1900 to 1,100,000 in 1930. During this period, enrolment grew faster than the population. The number of institutions grew from 977 to 1,409. Relatively few professors held doctorate degrees.

In 1900, 27,000 bachelor's degrees, 1,583 master's degrees and only 54 doctorate degrees were awarded. By 1930, bachelor's degrees totalled 122,484, master's degrees totalled 14,969, and doctorate degrees totalled 2,299.

1930 to 1950

Enrolment grew from 1,100,000 to 2,700,000 in 1950, even though total enrolment had declined during the Second World War. The number of institutions grew from 1,409 to 1,851.

In 1950, 432,058 bachelor's degrees were awarded, along with 58,183 master's degrees and 6,420 doctoral degrees.

1950 to 1980

Enrolment grew from 2,700,000 to 11,600,000 in 1980. The number of institutions grew from 1,851 to 3,152. Many had been branch campuses but grew to significant size and gained independent status. The number of community colleges expanded rapidly. The GI Bill (1952) supported college study for almost 4 million veterans.

In 1980, 929,417 bachelor's degrees were awarded, along with 298,081 master's degrees and 32,615 doctorate degrees.
1980 to 2000

Enrolment grew from 11,600,000 to approximately 14.5 million. The number of institutions grew from 3,152 to almost 4,000.

In 1998, 1,184,406 bachelor’s degrees, 439,164 master’s degrees and 46,010 doctorate degrees were awarded.

Web site: http://nces.ed.gov/pubs2001/Digest00/
ANNEX 4. THE PROCESS FOR GAINING INITIAL ACCREDITATION (WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES)

Step I: Eligibility

An academic institution offering programmes leading to a baccalaureate or higher degree may apply to WASC. To do so, and to proceed to ‘candidacy’ status, the institution must meet WASC’s basic criteria for eligibility. The institution submits an eligibility report, which includes its response to each of the eligibility criteria and also a summary report form, which gives basic data about the institution.

Step II: Application for candidacy

If WASC determines that eligibility criteria have been met, the institution may submit a formal application for candidacy. The institution prepares a self-study (normally, one year or more), and arranges for an evaluation site visit. The site visit report is evaluated, and the WASC Commission may approve the institution’s candidacy.

Step III: Candidate for accreditation

This is an affiliation with WASC which “indicates that an institution has achieved initial recognition and is progressing toward accreditation.” (p. 173). Candidacy is awarded for three years, renewable. Maximum period: six years. Candidates for accreditation must submit annual reports and keep WASC informed of any significant changes or developments.

An evaluation site visit is made after three years, to ascertain that reasonable progress is being made towards accreditation.
Step IV: Initial accreditation

An institution may apply for initial accreditation when it has met eligibility and candidacy requirements and after it has graduated at least one class of students who have completed the full cycle of the institution's programmes.

A self-study and evaluation site visit are conducted; the WASC Commission must approve granting initial accreditation and determines the time when the next self-study and site visit must be conducted.

ANNEX 5. BASIC CONDITIONS OF ELIGIBILITY
(SACS, 1998)

To be eligible to apply for candidacy, an institution must:

1. agree that it will comply with the SACS Criteria for Accreditation, with SACS disclosure policies, and with SACS requests and decisions;

2. have formal authority from an appropriate government agency to award degrees;

3. have a governing board of at least five members, which has the authority and duty to ensure that the mission of the institution is implemented;

4. have a chief executive officer whose primary responsibility is to the institution;

5. be in operation and have students enrolled in degree programmes at the time of the SACS committee visit;

6. offer one or more degree programmes based on at least two academic years at the associate level, at least four academic years at the post-baccalaureate level;

7. have a clearly defined, published statement of purpose appropriate to an institution of higher education;

8. have an appropriate plan, as well as a functioning planning and evaluation process, which identifies and integrates projected educational, physical and financial development, and incorporates procedures for programme review and institutional improvement;
9. have published admissions policies compatible with its stated purpose;

10. include, in all undergraduate degree programmes, a substantial component of general education courses at the collegiate level;

11. have full-time faculty in sufficient number adequate to provide effective teaching, advising and scholarly or creative activity;

12. have sufficient learning resources or, through formal agreements or appropriate technology, ensure the provision of and ready access to adequate learning resources and services to support the courses, programmes and degrees offered;

13. have an adequate financial base to accomplish its purpose at an acceptable level of quality on a continuing basis.

ANNEX 6. WASC ACCREDITING STANDARDS, 1997

There are nine general standards, with 41 categories of detailed standards. Adding together all subparts, there are more than 250 points to be considered in conducting a self-study.

Standard one: Institutional integrity

1.A Integrity in pursuit of truth (5 subparts)
1.B Integrity in respect for persons (8 subparts)
1.C Integrity in institutional relations (6 subparts)
1.D Integrity in institutional operations (4 subparts)
1.E Integrity in relationships with the WASC Commission (6 subparts)

Standard two: Institutional purposes, planning, and effectiveness

2.A Clarity of purposes (5 subparts)
2.B Institutional planning (6 subparts)
2.C Institutional effectiveness (3 subparts)

Standard three: Governance and administration

3.A The Governing board (14 subparts)
3.B Administration (4 subparts)
3.C Faculty (2 subparts)
3.D Students (3 subparts)

Standard four: Educational programmes

4.A General requirements (10 subparts)
4.B Undergraduate programmes (14 subparts)
4.C Graduate degrees (13 subparts)
4.D Research (6 subparts)
4.E Special programmes and courses for credit (6 subparts)
4.F Academic planning (7 subparts)
4.G Non-credit courses and programmes (4 subparts)
4.H Admissions and retention (10 subparts)
4.I Academic credit and records (9 subparts)
4.J Public service (4 subparts)

**Standard five: Faculty and staff**

5.A Faculty role in academic programmes (8 subparts)
5.B Faculty selection and evaluation (9 subparts)
5.C Faculty welfare and development (6 subparts)
5.D Staff selection and policies (5 subparts)

**Standard six: Library, computing, and other information and learning resources**

6.A General requirements (7 subparts)
6.B Quality of holdings (5 subparts)
6.C Acquisitions and bibliographic services (4 subparts)
6.D Availability and use (6 subparts)
6.E Facilities (4 subparts)
6.F Information technology (7 subparts)

**Standard seven: Student services and the co-curricular learning environment**

7.A Co-curricular educational growth (16 subparts)
7.B Co-ordination and administration (5 subparts)
Standard eight: Physical resources

8.A Instructional and support facilities (7 subparts)
8.B Equipment is sufficient to facilitate the educational objectives of the institution (3 subparts)
8.C Physical resource planning (4 subparts)

Standard nine: Financial resources

9.A Sufficiency of financial resources (7 subparts)
9.B Financial planning (5 subparts)
9.C Financial management (10 subparts)
9.D Fund-raising and development (1 subpart)

Southern Association of Colleges and Schools:

3.1 Planning and evaluation: educational programmes

Educational activities of an institution include teaching, research, and public service. Planning and evaluation for these activities must be systematic, broad-based, interrelated and appropriate to the institution. The institution must define its expected educational results and describe its methods for analyzing the results.

The institution must develop guidelines and procedures to evaluate educational effectiveness, including the quality of student learning and of research and service. This evaluation must encompass educational goals at all academic levels and research and service functions of the institution.

The evaluation of academic programmes should involve gathering and analyzing both quantitative and qualitative data that demonstrate student achievement.

The institution must evaluate its success with respect to student achievement in relation to purpose, including, as appropriate, consideration of course completion, state licensing examinations, and job placement rates.
3.2 Planning and evaluation: administrative and educational support services

In addition to providing evidence of planning and evaluation in its educational programme, the institution must demonstrate planning and evaluation in its administrative and educational support services. For each administrative and educational support service unit, the institution must:

- establish a clearly defined purpose which supports the institution’s purpose and goals;
- formulate goals which support the purpose of each unit;
- develop and implement procedures to evaluate the extent to which these goals are being achieved in each unit;
- use the results of the evaluations to improve administrative and educational support services.

Each unit, in its planning and evaluation processes, should consider internal and external factors and develop evaluation methods which will yield information useful to the planning processes of that unit.

3.3 Institutional research

Institutional research must be an integral part of the institution’s planning and evaluation process. It must be effective in collecting and analyzing data and disseminating results. An institution must regularly evaluate the effectiveness of its institutional research process and use its findings for the improvement of its process.

The institutional research process should include ongoing timely data collection, analysis and dissemination; use of external studies and reports; design and implementation of internal studies related to students, personnel, facilities, equipment, programme, services and fiscal resources; development of databases suitable for
longitudinal studies and statistical analyses; and related activities in support of planning, evaluation and management.

Institutions must assign administrative responsibility for conducting institutional research, allocate adequate resources, and allow access to relevant information.


New England Association of Schools and Colleges:

**Standard two – Planning and evaluation**

2.1 The institution undertakes planning and evaluation appropriate to its needs to accomplish and improve the achievement of its mission and purposes.

2.2 Planning and evaluation are systematic, broad-based, interrelated, and appropriate to the institution’s circumstances. They involve the participation of individuals and groups responsible for the achievement of institutional purposes. The institution allocates sufficient resources for its planning and evaluation efforts.

2.3 The institution undertakes both short- and long-term planning, including candid and realistic analyses of internal and external opportunities and constraints. It responds to financial and other contingencies, establishes feasible priorities, and develops a realistic course of action to achieve identified objectives. Institutional decision-making, particularly the allocation of resources, is consistent with planning priorities. The institution systematically collects and uses data necessary to support its planning efforts and to enhance institutional effectiveness.
2.4 The institution evaluates the achievement of its mission and purposes, giving primary focus to the realization of its educational objectives. Its evaluative procedures are appropriate and effective for addressing its unique circumstances. To the extent possible, evaluation enables the institution to demonstrate through verifiable means its attainment of purposes and objectives both inside and outside the classroom.

2.5 The institution systematically applies information obtained through its evaluation activities to inform institutional planning, thereby enhancing institutional effectiveness especially as it relates to student achievement.

2.6 The institution determines the effectiveness of its planning and evaluation activities on an ongoing basis. Results of these activities are used to revise and further enhance the institution’s implementation of its purposes and objectives.

A. Types of substantive change

Substantive changes include, but are not limited to, the following:

- changes in legal status or in form of control of the institution, including merging with another institution and changes in ownership;
- introducing courses or programmes at a degree level above that at which accreditation is held…;
- joining separate units into a single accreditable institution, or dividing an institution into two or more separately accreditable units;
- changes in geographical setting, including removal of an institution to a new location or establishment of a branch campus…;
- establishing external degree programmes;
- engaging another organization to provide direct instructional services;
- dropping or reducing programmes to an extent that the institution’s mission is not being accomplished;
- adding courses or programmes that represent a significant departure in the content or method of delivery from those that were offered when the institution was most recently evaluated, such as distance learning or correspondence courses;
- from clock hours to credit hours or vice versa;
- substantially increasing:
  a. the number of credit hours awarded for successful completion of a programme; or
  b. the length of a programme;
    significantly departing from the stated mission, population served, objectives or educational programmes operative at the time of the most recent evaluation.
B. Accreditation procedures for substantive changes

1. Notice to the Commission

Prior to change. An institution must notify the Commission early in the institution’s planning. Implicit in this notice will be a request for a visit by a member of the Commission’s staff for discussion of plans and procedures.

Upon commitment to change. If an institution decides to proceed with the change, it must provide a report to the Commission at least six months prior to the date of its implementation or, in the case of branch campuses, at least 90 days prior to the date of its implementation.

The report will include the following:

Justification of changes. A detailed description and analysis of the change, including authorization by the appropriate state, private, and/or independent board(s). The following should be included:

- purposes of change, relationship of change to development of the institution in terms of need and clientele, timetable for implementing;
- descriptions of changes in programme or institutional design;
- faculty and staff needs, qualifications of faculty;
- library and other learning resources and facilities required for change;
- physical plant expansion and equipment required for the change;
- indication of financial support available and projection of needs over the next few years, including estimates of additional costs;
- if the proposed change involves distance education, indication that the institution has followed the “Principles of good practice for electronically offered academic degree and Certificate programmes.”
2. **Projection of future developments**

A brief look at the future, indicating any general developments anticipated in terms of the institution and/or the substantive change.

The report should go beyond description to include analysis and evaluation. Assessment of institutional strengths, concerns, suggested responses to concerns identified, and long-range plans should be included.

3. **Evaluation by the Commission**

Upon receipt of the report, the Commission will schedule its review of the change, the scope of its evaluation to be determined by the magnitude of the change and the need to measure its impact on the total institution. The Commission may act to:

- require a focused visit or other measures to ensure adequacy of information on which to base a decision (in cases where the substantive change is a change in ownership, a site visit will be taken as soon as practicable, but no later than six months after the change in ownership);
- require an on-site evaluation involving the entire institution;
- approve the change without conditions;
- approve the change with conditions specified;
- disapprove the proposed change.

4. **Determination of status**

Only after a determination by the Commission of the acceptability of the institution’s plans may the institution consider such substantive changes not to have affected the validity of its institutional accreditation.
If the plans are disapproved, the institution has the right to proceed with the change, but the change will not have accredited status and the institution will have to state this fact in its publicity. Further Commission action may be necessary to determine whether the institution’s accreditation has been jeopardized by the change. During any change the institution should take the steps necessary to assure an orderly transition consistent with the policies and procedures of the Commission.

The [Middle States] Commission on Higher Education recognizes that many institutions of higher education provide offerings at locations other than the main campus and through modalities other than in traditional, on-campus, lecture-style classrooms. All activities should fit within the institution’s mission and the institution should provide the same level of quality and service as the offerings on the institution’s main campus.

Each institution is responsible for all activities conducted in its name or under its sponsorship.

The Commission ensures the quality of these off-campus and alternative offerings by reviewing or visiting such programmes as part of the institution’s decennial review, or more frequently if the Commission determines that such reviews and visits are necessary.

The discussion of offerings at branch campuses, additional locations, etc. should consider all relevant provisions of Characteristics of excellence and should include both data and analysis of such topics as the following:

- consistence of programmes with institutional mission;
- location;
- student profile;
- faculty profile;
- outcomes assessment of student learning and programme effectiveness;
• appropriateness and adequacy of library and other learning resources;
• student services;
• adequacy of resources;
• participation of faculty and staff in institution-wide management;
• names of on-site administrators.

All off-campus and alternative offerings must be included within the scope of accreditation, and institutions may be required to obtain prior approval before implementing some of these activities.

The Commission on Higher Education defines a branch campus as a location of an institution that is geographically apart and independent of the main campus of the institution.

The location is independent if the location:

• offers courses in educational programmes leading to a degree, certificate, or other recognized educational credential;
• has its own faculty and administrative or supervisory organization; and
• has its own budgetary and hiring authority.

The Commission considers a branch campus to be a significant part of an institution’s identity and operations. Therefore, the Commission will conduct a visit to all existing branch campuses as part of the decennial review. To ensure that branch campuses are given appropriate consideration by the institution itself, the self-study should address the branch campuses and any plans for additional branches.

Source: Excerpts from Designs for Excellence, Seventh Edition, Chapter 6. The Middle States Commission on Higher Education. See the MSA web site for the full text.
ANNEX 10. GUIDELINES ON DISTANCE LEARNING – SELECTED ELEMENTS

These Guidelines were approved by the Council of Regionally Accrediting Commissions (C-RAC) in March 2001. Designed to reflect “…current best practice in electronically offered programming…” they will be considered by each regional accrediting agency for adoption and implementation. The Guidelines address five areas of institutional activity relevant to distance education. Under each area there are descriptions of essential elements of best practice and questions designed to review distance education activities. Elements are excerpted as follows:

1. Institutional context and commitment

(a) In its content, purposes, organization, and enrolment history, the programme is consistent with the institution’s role and mission.

(b) The appropriate accreditation commission should be notified and consulted whether an electronically offered programme represents a major change. The offering of distributed programmes can...have an impact on both the institution and its accreditation status.

(c) The institution’s budgets and policy statements reflect its commitment to the students for whom its electronically offered programmes are designed.

(d) The institution assures adequacy of technical and physical plant facilities including appropriate staffing and technical assistance, to support its electronically offered programmes.

(e) The internal organizational structure which enables the development, co-ordination, support, and oversight of electronically offered programmes will ordinarily include capability to:
• provide the required information technologies;
• provide training and support to participating instructors and students;
• assure that ...programmes and courses meet institution-wide standards;
• maintain appropriate academic oversight;
• maintain consistency with the institution’s academic planning and oversight.

(f) In its articulation and transfer policies, the institution judges courses and programmes on their learning outcomes, and the resources brought to bear on their achievement, not on modes of delivery.

(g) The institution strives to assure a consistent and coherent technical framework for students and faculty. When a change is necessary, it is introduced in a way that minimizes the impact on students and faculty.

(h) The institution provides students with technical support for each hardware, software and delivery system required.

(i) The selection of technologies is based on appropriateness for the students and the curriculum programme documentation should include specific consideration of the match between technology and programme.

(j) The institution observes the legal and regulatory requirements of the jurisdictions in which it operates.

2. Curriculum and instruction

(a) The institution assures that each programme results in collegiate-level learning, outcomes appropriate to the degree or certificate, that the programme is coherent and complete.

(b) Academically qualified persons participate fully in the decisions concerning programme curricula and programme oversight.
(c) In designing an electronically offered programme, the institution includes all courses necessary to complete the programme, provides a coherent plan for the student to access all courses necessary to complete the programme, or clearly notifies students of requirements not included in the electronic offering.

(d) Although elements of a programme may be supplied by partners, the responsibility for performance remains with the institution awarding the degree or certificate.

(e) The importance of appropriate interaction between instructor and students and among students is reflected in the design of the programme and its courses, and in the technical facilities and services provided.

3. Faculty support

(a) The institution and its participating faculty have considered issues of workload, compensation, ownership of intellectual property and the implications for the faculty member’s evaluation.

(b) The institution provides an ongoing programme of appropriate technical design, and production support for participating faculty members.

(c) The institution provides to those responsible for programme development orientation and training in the uses of the programme’s technologies.

(d) The institution provides to those working directly with students the orientation and training to help them become proficient in the uses of the technologies for these purposes.
4. Student support

(a) The institution has a commitment to continuation of the programme sufficient to enable all admitted students to complete a degree or certificate in a publicized time-frame.

(b) Prior to admitting a student to the programme, the institution:
   • ascertains that the student is qualified to be admitted;
   • informs the prospective student concerning required access, technical competences required, programme costs, curriculum design and time-frame, library and other learning services available, other support services, arrangements for interaction with the faculty and fellow students;
   • assists the student in understanding the nature and potential challenges of learning in the programme;
   • informs the prospective student about the estimated time for programme completion.

(c) The institution recognizes that appropriate services must be available for students: information, advising, financial aid, secure payment arrangements, timely intervention regarding student progress, tutoring, career counselling and placement, academic progress, information library resources, bookstore services, ongoing technical support, referrals for learning challenges and personal counselling.

(d) The institution recognizes that a sense of community is important and the programme takes this factor into account.

5. Evaluation and assessment

(a) As a component of the institution’s overall assessment activities, assessment of student achievement is conducted in each course and, at the completion of the programme, by comparing student performance to the intended learning outcomes.
(b) When examinations are employed, they take place in circumstances that include firm student identification.

(c) Documented procedures assure that security of personal information is protected in the conduct of assessments and evaluations and in the dissemination of results.

(d) Overall programme effectiveness is determined by such measures as: intended outcomes, student intent, student retention, student satisfaction, faculty satisfaction, access to students not previously served, library and learning resources are used appropriately, cost-effectiveness to its students.

(e) The institution conducts a programme of continual self-evaluation directed toward programme improvement.

(f) Institutional evaluation of electronically offered programmes takes place in the context of the regular evaluation of all academic programmes.

Source: Statement and Guidelines developed by the Council of Regionally Accrediting Commissions (C-RAC), draft guidelines dated September 2000. The final Guidelines, approved March 2001, include some changes.
ANNEX 11. STEPS IN AN INSTITUTIONAL ACCREDITATION REVIEW

Step I: Design the self-study

Objectives: Define the nature and scope of the self-study
- establish a Steering Committee and work groups;
- set a schedule for completion of all tasks.

Key tasks: Organize a planning committee to develop a plan
- identify a scope of work for each of the work groups;
- obtain approval of the accreditation agency for the general plan;
- alert and involve relevant constituencies;
- organize a steering committee; determine the composition of work groups.

Step II: Conduct the self-study

Objectives: Assemble and analyze information relevant to accreditation standards
- produce a self-study report that outlines processes and accomplishments;
- engage a range of faculty and staff in review of the report.

Key tasks: Assemble information from existing information and records
- carry out new studies;
- write analytical narratives that relate information to each of the accrediting agency’s standards;
- organize hearings, open meetings and other forums to inform faculty and staff about the self-study and obtain comments.
Step III: Carry out the site visit

Objective: Host and facilitate the work of the site visit team

Key tasks: Set schedules, commit institutional personnel to the schedule
- arrange logistics for the site visit: meeting rooms; hotel and travel; food; materials, etc.;
- brief institutional representatives;
- organize and host four days of meetings.

Step IV: Decisions

Objective: Obtain accreditation, or renewal of accredited status

Key tasks: Site visit team to submit its evaluation report
- institution to respond to the report and raise any objections;
- accrediting agency’s commission to review report and decide about accreditation status.

### ANNEX 12. ACCREDITATION HISTORY OF SMALL STATE UNIVERSITY

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1961</td>
<td>Small State University, with authorization and its initial financial appropriations from the state of California, enrols its first students. Small State University applies for accreditation.</td>
</tr>
<tr>
<td>1962</td>
<td>Small State University is granted candidacy status by WASC.</td>
</tr>
<tr>
<td>1965</td>
<td>Self-study and evaluation site visit; candidacy renewed.</td>
</tr>
<tr>
<td>1967</td>
<td>Small State University applies for accreditation.</td>
</tr>
<tr>
<td>1968</td>
<td>Self-study and evaluation site visit; Small State University is granted its initial accreditation by WASC. The next visit is scheduled for five years’ time.</td>
</tr>
</tbody>
</table>
| 1973 | First regular accreditation review:  
  - evaluation site visit;  
  - WASC Commission reaffirms accreditation but asks for an interim visit in one year to address several matters outlined in the Commission’s November 17, 1973 letter. |
| 1974 | Interim visit. |
| 1975 | Follow-up report sent to WASC by Small State University. |
| 1978 | Second regular accreditation review:  
  - evaluation site visit;  
1979 Small State University sends notice of its proposal to offer master's degrees in business:
• special site visit;
• WASC Commission approves this change in programme offerings.

1988 Third regular accreditation review:
• evaluation site visit;
• WASC Commission reaffirms accreditation, schedules next review for 1996.

1989 Small State University sends notification to WASC that a new president has been appointed.

1995 Small State University sends notification to WASC that a new president has been appointed.

1998 Fourth regular accreditation review:
• evaluation site visit;
• WASC Commission reaffirms accreditation, schedules next review for 2008.
**ANNEX 13. SMALL STATE UNIVERSITY: SCHEDULE FOR COMPLETING ACCREDITING SELF-STUDY**

<table>
<thead>
<tr>
<th>Stage of the study</th>
<th>Time needed</th>
<th>Calendar plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planning</td>
<td>Two to four months</td>
<td>September 1996</td>
</tr>
<tr>
<td>Conduct self-study</td>
<td>Fourteen months</td>
<td>January 1997 -</td>
</tr>
<tr>
<td>Comment period</td>
<td>Two months</td>
<td>April-May 1998</td>
</tr>
<tr>
<td>Final report</td>
<td>Two months</td>
<td>June-July 1998</td>
</tr>
<tr>
<td>Site visit</td>
<td>Two months later</td>
<td>October 1998</td>
</tr>
</tbody>
</table>

Total time needed: Twenty-two to twenty-four months
ANNEX 14. THREE DIFFERENT APPROACHES TO COMPLETING A SELF-STUDY

Northwest Association of Schools and Colleges:

The self-study presented to the Commission must be of a comprehensive type, must evaluate the entire institution, and must address each of the Commission’s standards. The Commission recognizes that the self-study process is more beneficial to the institution when it is undertaken in response to significant needs felt by the campus community. Accordingly, a variety of approaches to self-study is acceptable. An institution is permitted to propose some variation in the design of the self-study which it considers to be of intrinsic value as long as the overarching purposes of a comprehensive self-study are met and all Commission standards are addressed.


North Central Association:

A ‘special emphases’ self-study is an option for accredited, established, well-functioning institutions that are willing to commit serious attention to a select group of critical issues in order to contribute to institutional improvement and educational excellence. The special emphases self-study process may be an opportunity to reconsider and revise the institution’s mission; to study enrolment trends; to initiate a more complex system of assessing student outcomes; to assess the impact of a new governance system; to work on a long-range plan; to evaluate and revise such a plan. A special emphases self-study should lead to concrete change in the area covered.
In August 1997 the Commission approved experimentation with the evaluation processes for comprehensive visits with the following understandings:

- experiment only with strong institutions in low-risk situations;
- outline unique aspects in a memo of understanding;
- provide special training/orientation to teams;
- conduct a formal evaluation of the experiment;
- ensure that the experiment will do no harm and that the evaluators will be held harmless.


**Middle States Association, Commission on Higher Education:**

There are four major models for self-study. Within these models, there are many possible approaches. Any particular approach falls somewhere between a fully comprehensive self-study approach and one which is narrowly focused.

*The Comprehensive model:* enables a college or university to appraise every aspect of its programmes and services, governing and supporting structures, resources, and educational outcomes in relation to the institution’s mission and goals.

*The Comprehensive with Special emphasis model:* is particularly useful for institutions wishing to give special attention to selected areas or issues that affect the institution. The topic may be one of the categories from *Characteristics* [i.e. Standards] or an issue of special interest such as general education, computers and other technologies, or outcomes assessment.
The Selected topics model: involves more concentrated attention to certain selected areas, units, or aspects of the institution. The selected topic(s) should encompass the entire institution and be sufficiently general. An example might be a full curricular review of the institution’s current strategic planning process.

The Alternative self-study model: available only to accredited institutions, it may result in a series of self-studies or institutional audit. A self-study approach that is focused on a current issue. Another approach may be related to the specialized nature of the institution.

ANNEX 15.  SAMPLE SCHEDULE FOR SITE VISIT

Day 1 (Sunday)

Site visit team arrives; holds initial organizing session.

Dinner or reception for the site visit team and key representatives of the university (optional).

Day 2 (Monday)

All team members meet for a general discussion with the university president and academic vice-president.

Team members hold individual hour-long meetings with university representatives.

Team chairman meets with several members of the board of trustees.

Lunch meeting: All team members and members of faculty in three of the university’s schools (engineering, business studies, liberal arts).

All team members meet with students to hear general comments and ask questions.

More hour-long meetings between individual team members and university representatives.

Dinner and work session for site visit team and WASC staff person. Discuss the day’s meetings, review progress, identify needed information.
Day 3 (Tuesday)

Team members hold individual hour-long meetings with university representatives.

Team chairman meets with several members of the business community.

Lunch meeting: All team members and members of faculty in three of the university’s schools (nursing, social work, and education).

Team members meet with a second group of students – all of whom are in their last year of study – to hear general comments and ask questions.

Team members meet with a (pre-arranged) group of alumni, mainly recent graduates.

Some team members hold further meetings, make class visits or conduct interviews that they requested after the pre-arranged meetings were completed; other team members review records and documentation and complete their sections of the team report.

Dinner and team work session. Team reviews accomplishments and agrees on a tentative draft report, including a decision about the team’s confidential recommendation with respect to accreditation status.

Day 4 (Wednesday)

All members of the site visit team hold a final meeting with the president and, if the president wishes, with other senior administrators. The team chairman offers summary comments, including suggestions and comments which the team has agreed upon.
and, if necessary, identifies the WASC standard(s) where the university appears not to be in compliance. The president may raise questions for clarification. The visiting team does not reveal its recommendation with respect to accreditation status.

The Project: Institutions accredited by NCA may participate in a three-year experimental project being conducted by the NCA's Academic Quality Improvement Project with support from the Pew Charitable Trusts. AQIP’s goal is to design an innovative, more challenging alternative to current re-accreditation, one that engages institutions by increasing the tangible benefits it brings to them.

Institutions will assess themselves initially through an Interest Exploration and a Comprehensive Self-Assessment, then will engage in a continuing review that includes an institutional Strategy Forum, held every three to five years.

Among its objectives, the AQIP project seeks to allow an institution, working with peers, to comprehensively analyze its quality systems, and specifically measure its progress against the targets it set for itself using the Quality Criteria developed by the project.

Aspects of the Process include:

The institution conducts a comprehensive summative evaluation review in two to four months using the Quality Criteria and a Strategy Forum.

In an overview, it summarizes its progress on the goals it established in its Strategy Forum.
Accreditation in the USA: origins, developments and future prospects

It presents its findings in the form of a written 50-75-page report. Much of the report's content should consist of material generated as part of the institution’s ongoing quality initiatives.

NCA provides a report with constructive feedback to the institution on its appraisal of its own quality progress, using a scoring metric that ensures consistency in ratings (among raters and between successive reviews) and allows the institution to see, confidentially, its own progress and its relative position among peers. The institution will use this feedback in preparing for its next Strategy Forum.

As frequently as the institution wishes, but no less frequently than once every seven years, AQIP conducts an on-site confirmation/review of the institution’s quality systems as part of the Institutional Quality Review.

Information is made available to the public to document the institution’s commitment to quality and its achievements, thereby enhancing the institution’s reputation.

The Institutional Quality Review provides NCA with continuing assurance of the institution’s focus on and progress in quality improvement.


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