Commission and Team Decision Indicators

Actions related to Reaffirmation of Accreditation

Decision	2001 Handbook	Indicators: CPR \rightarrow \rightarrow	$\rightarrow \rightarrow \rightarrow$ Indicators: EER
10 years	Meets all Standards at a substantial or exemplary	Mature development and integration of institutional mission into multiple aspects of the organization	• Extensive deployment of student learning outcomes at the course, program, and institutional levels
	• Shows clear evidence of being able to sustain strengths for 10 years	 Historically sound structures and processes for financial management, governance and leadership, short- and long-term strategic planning, policies, and institutional research Broadly deployed, insightful, and sustained systems to obtain and use student achievement data 	 Institution-wide, systematic assessment of learning outcomes with documentation over time of learning results in most academic and student services units Student achievement data systematically used by faculty to make effective improvements in learning, leading to cycles of improvement
		 Adequate and qualified faculty and staff and related policies, including support for professional development No problematic levels or trends in any capacity measures 	Learning outcome indicators tracked, including graduation and retention rates. No problematic trends in such measures or promising plans to deal effectively with problematic trends
		Complete response to prior Commission concerns	Complete response to CPR action letter issues
Reaffirm: $7 \rightarrow 8 \rightarrow 9 \rightarrow$	<u> </u>	• Institutional leadership shows significant understanding of, and engagement with, the WASC Core Commitments to Capacity and Educational Effectiveness	Institution can be designated within the region as exemplary in achieving and sustaining Core Commitments to Capacity and Educational Effectiveness
	+	• Recent or potentially tenuous status of compliance with any of the Standards. Some indications of fragility or partial understanding of key requirements, necessitating more frequent comprehensive review than ten years.	Incomplete implementation of assessment of student learning outcomes and assessment plans at course, program, or institutional levels Relatively recent or inconsistent use of achievement data
		• Pending or recent changes in leadership, governance, or organizational structures that have potential for unanticipated consequences	to improve learning • Problematic findings or sanction from one or more programmatic accrediting agencies with no response plan
		• Several recent substantive changes with potential	or inadequate plan
ea		impacts that require evaluation or verificationRecent emergence from under a WASC sanction	• Present or anticipated vacancies in key leadership positions, or patterns of instability in such roles
$\leftarrow_{\rm R}$		• New institution, recently granted Initial Accreditation, or other indications of limited familiarity with WASC	May be designated within the region as a promising institution that, with strong leadership and sustained commitments, will achieve exemplary status
	With Interim Report	• Issues or concerns that require monitoring and progress, supporting documentation, such as specific financial issue or specific planning issues.	which can be verified by means of a written report and /or es, leadership changes, agreements among key stakeholders,
	With Special Visit	• Issues or concerns that require monitoring and <i>on-site vel</i> deployment of insights among many stakeholders, e.g., fa comprehensive enrollment management planning; general of evidence") among many units.	

Sanctions and Other Actions

Decision	2001 Handbook	Indicators: CPR →	\rightarrow - \rightarrow Indicators: EER
Impose a Formal Notice of Concern [not a sanction and not public]	" in danger of being found in non-compliance with one or more Standards if current trends continue" OR "an institution on sanction has made substantial progress in addressing the issues that gave rise to the sanction but the issues have not been fully addressed."	Troubling trends in enrollments, retention, graduation, financial resources or management, or governance Inadequate short- or long-term strategic planning, budget projections, or responses to capital campaigns Instability or vacancies in critical leadership roles Inadequate participation of key campus constituencies in WASC review process Inadequate infrastructure to support assessment of student learning	 Troubling trends or inadequate information regarding student achievement Minimal or irregular assessment of learning Little or irregular use of achievement data to improve learning Sporadic and/or incomplete use of program review Inadequate institutional research processes or resources to support data-informed decisions
Issue a Warning [sanction/public]	" fails to meet one or more of the Standards"	 Evidence in the team report, supported by cited CFRs, that the institution fails to demonstrate the Core Commitment to Capacity Indications that the institution has resources and/or insights to solve the non-compliance issues in due time 	 Evidence in the team report, supported by cited CFRs, that the institution fails to demonstrate the Core Commitment to Educational Effectiveness Indications that institution has resources and/or insights to solve the non-compliance issues in due time
Impose Probation [sanction/public]	" serious issues of non- compliance with one or more Commission Standards"	Clear evidence in the team report, supported by several CFRs, that the institution falls significantly short of meeting the Standards relating to Capacity Evidence that previous sanctions have not led to full-scale endeavors to address inadequacies—through lack of financial resources, institutional will, and/or understanding	 Evidence that the institution has not addressed at sufficient levels the issues identified in the CPR action Clear evidence in the team report, supported by several CFRs, that the institution fails to meet the Standards relating to Educational Effectiveness Evidence, supported by institutional history, of slow or poorly sustained responses to prior Commission actions
Issue an Order to Show Cause [sanction/public]	" when placed on Warning or Probation has failed to make sufficient progress to come into compliance"	 History of continuing and significant non-compliance with multiple Standards along with a record of inadequate responses to previous Commission requirements Significant inadequacies of resources, leadership, governance, systems, processes, policies or planning that will shortly lead to an unsustainable institution, which cannot serve its students and other stakeholders The Commission can identify clear, decisive, urgent-yet-achievable steps that an institution can take in a short time to demonstrate why accreditation should not be terminated 	
Terminate Accreditation [public]		 Continuing and serious failure to meet the Core Commit previous Commission actions Serious lack of compliance with Standard One related to 	

FACTORS TO CONSIDER WHEN RECOMMENDING A SANCTION OR NOTICE OF CONCERN

The following factors may be considered by teams that are evaluating whether or not to impose a sanction or are trying to decide which action or sanction is most appropriate under the circumstances. The team should consider the evidence that supports its findings about the factors.

- 1. The depth of the institution's understanding of the nature and magnitude of the challenges it faces, and its acceptance of responsibility for addressing those challenges.
- 2. Concrete and achievable plans to address the challenges, including realistic timelines and milestones.
- 3. The institution's capacity to implement change and take actions that will fully address the challenges.
- 4. The ability of the institution's leadership (CEO and governing board) to build institutional support for plans to address the challenges and monitor progress in the implementation of plans.
- 5. The institution's record of addressing previous challenges in a meaningful and effective way (including previous concerns identified by the Commission).
- 6. The institution's record of integrity in its internal dealings and in its relationship with WASC.

Deferral of Action				
Defer Commission Action		• Commission requires additional institutional information to make an informed decision on the status of an institution or expects action by a relevant agency, which action could materially impact the institution's accredited status. (Commission sets a specific time limit for taking the requisite action, typically no more than one year, subsequent to receipt and analysis of the additional information.)		

Actions Related to Candidacy and Initial Accreditation

Decision	How to Become Accredited	Indicators: C&PR → → Indicators: EER
Grant Candidacy	"Meets all or nearly all of the Standards at a minimal level" [must have students enrolled]	 Institution both understands and complies with WASC Standards at a minimal level Many but not all units demonstrate engagement with Standards appropriate to their areas Resources, leadership, and planning suggest the institution will likely achieve Initial Accreditation within the designated four-year time period
Deny Candidacy		 Following both the CPR and EER for Candidacy, team reports substantiate that the institution fails to meet all or nearly all of the Standards even at a minimal level No clear indications that the institution can achieve even minimum compliance with all or nearly all of the Standards within the four-year period designated for Candidacy
Grant Initial Accreditation (for either 5 or 7 years)	"Meets all or nearly all of the Standards at a substantial level" [must have graduates of at least one program]	 Responsiveness to prior Commission requirements Stable and trusted leadership and sound governance structures; adequate and reliable resources; sustainability Capacity to assess student and organizational learning and to use results for improvement Time period: Strong on all indicators = 7 years; strong or somewhat strong in most indicators = 5 years
Deny Initial Accreditation		 Following either the CPR or both the CPR and EER for Initial Accreditation, team report substantiates that the institution fails to meet one or more of the Standards at a substantial level No clear indications that the institution can achieve substantial compliance with all or nearly all of the Standards within a foreseeable time period
Defer Commission Action		Provides additional time and guidance so that the institution can make progress in one or more areas, with the goal of meeting the Standards at the required level for Candidacy or Initial Accreditation

Actions Following a Special Visit

The following actions may be taken following a Special Visit: continue accreditation, remove a Formal Notice of Concern or sanction, or impose a FNC or sanction. These actions may be coupled as appropriate with additional Special Visits or Interim Reports. See above for explanations of actions and methods of monitoring.

In making the evaluation of the institution's status, the team and Commission should consider the following:

- Evidence of thorough response to the issues specified in the Commission's requirement for the special visit
- Evidence of resource allocations for any needed changes
- Evidence that any required changes are embedded in institutional culture and processes, showing promise of their sustainability
- Evidence of articulated insight into the issues that necessitated the special visit
- Support for resulting progress confirmed from the institution's highest needed levels of leadership or governance