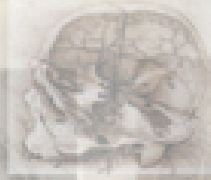
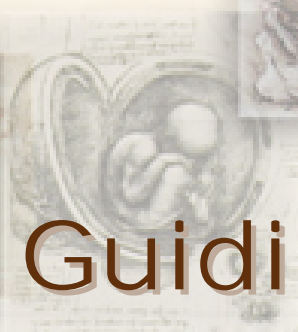
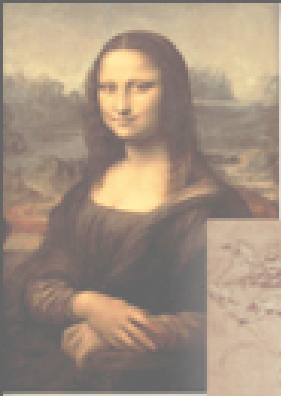


The Principles of Accreditation



Foundations for
Quality Enhancement



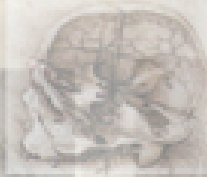
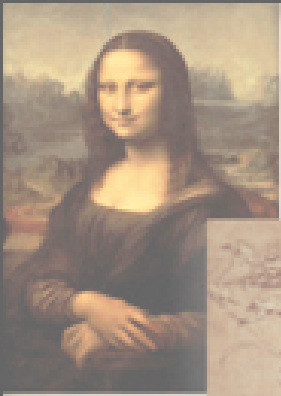
Two Guiding Principles:

- **Integrity**
- **Quality Enhancement**



Compliance Certification

- **Core Requirements**
 - **Twelve Basic Requirements which all institutions must meet to remain accredited**
 - **Core Requirement 12 is the Quality Enhancement Plan**



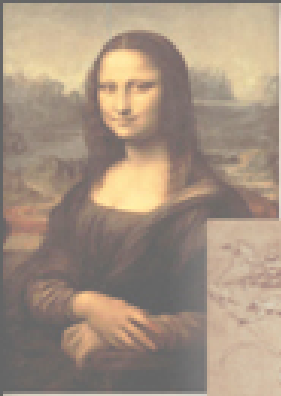
Compliance Certification

- **Comprehensive Standards**
 - Institutional Mission
 - Governance
 - Institutional Effectiveness
 - Student Learning Outcomes
 - Educational Programs
 - Faculty
 - Resources
- **Federal Requirements**



Compliance Certification

- **What must we do?**
 - **Establish a Leadership Team to guide the process**
 - **Establish a Compliance Committee to write the report**
 - **Publish the report in an electronic form**
 - **Establish a QEP Committee to research and write the Quality Enhancement Plan**



Compliance ↔ QEP

- **Mission (Core Requirement 2.4)**
- **Strategic Plan (Core Requirement 2.5)**
- **Assessment (Core Requirement 2.5)**
- **Student Learning (Comprehensive Standards 3.3.1, 3.4.1, 3.5.1)**



Quality Enhancement Plan

- **Core Requirement 2.12**
The institution has developed an acceptable Quality Enhancement Plan and demonstrates that the plan is part of an ongoing planning and evaluation process.
- **Relates to**
 - **CR 2.4 (Mission)**
 - **CR 2.5 (Institutional Effectiveness)**
 - **CS 3.3.1 (Institutional Effectiveness)**
 - **CS 3.4.1 (Program and Learning Outcomes)**
 - **CS 3.5.1 (General Education Competencies)**



Quality Enhancement Plan

- **Focus**
- **Capability**
- **Assessment**
- **Involvement**



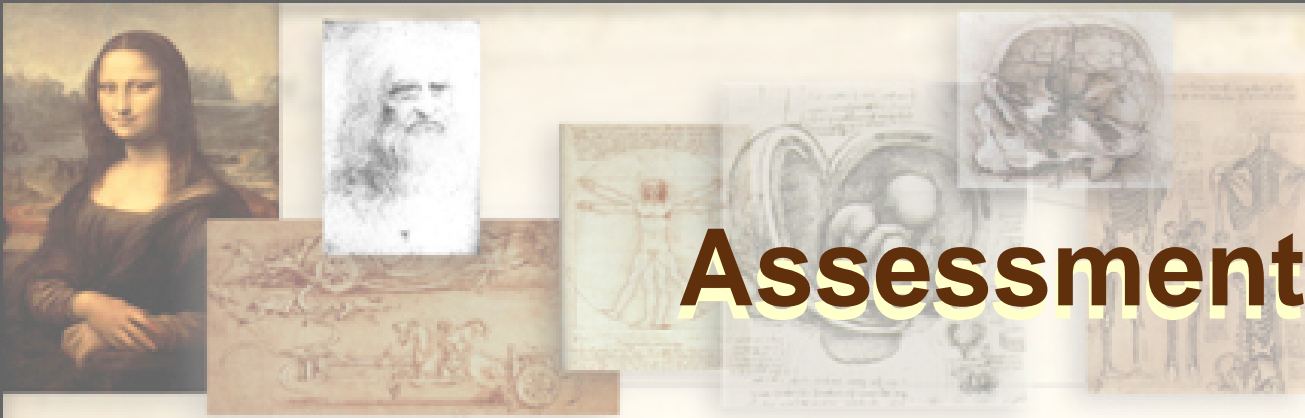
Focus

- **Critical Issue Related to Student Learning Outcomes**
- **Based Upon a Critical Analysis**
- **Plan Benefits**



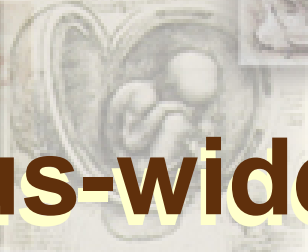
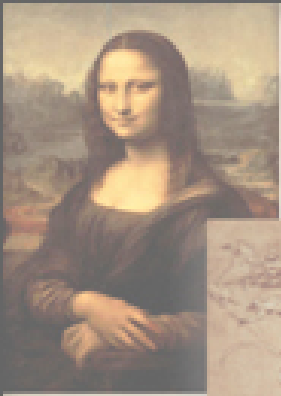
Capabilities

- **Process and Methods for Arriving at the Plan**
- **Timeline**
- **Qualified Administrator**
- **Budget and Physical Resources**
- **Integration into Administration Processes**



Assessment

- **Student Learning**
- **Administrative Goals**
- **Integration Into Assessment Processes**



Campus-wide Involvement

- **Development**
 - Faculty
 - Staff
 - Students
 - Administrators
 - Community
- **Implementation**



**We need your
help!**



Timeline

- **Step 1: Orientation of Leadership Team**
 - **January 2007**
- **Step 2: Submit Compliance Certification**
 - **March 2008**
- **Step 3: Off-site Review of Compliance**
 - **May 2008**
- **Step 4: Submit the QEP**
 - **Six weeks prior to on-site visit**
- **Step 5: Onsite peer review**
 - **September 2008**
- **Step 6: Review by Commission on Colleges**
 - **June 2009**



What happens in each step of the
Timeline?

- ***Step 1: Orientation of Leadership Team***
 - In January of 2007 the Leadership Team from Northwest-Shoals will attend a workshop at SACS headquarters in Atlanta to be briefed on the accreditation process.



What happens in each step of the Timeline?

- ***Step 2: Submit Compliance Certification***
 - In Spring of 2008, approximately six months before the reaffirmation visit, NW-SCC will submit a **Compliance Certification** document that demonstrates its judgment of the extent of its compliance with each of the **Core Requirements, Comprehensive Standards, and Federal Regulations** as presented in the *Principles*.



What happens in each step of the
Timeline?

- ***Step 3: Off-site Review of Compliance***
 - In May 2008 an off-site committee will review NW-SCC's Compliance Certification document and will advise an on-site review committee by making observations about the information in the document and by determining NW-SCC's compliance with standards.



What happens in each step of the
Timeline?

- ***Step 4: Submit the QEP***
 - **Six weeks prior to the fall 2008 on-site visit, NW-SCC will submit its Quality Enhancement Plan which is a document that describes a carefully designed and *focused* course of action that addresses a well-defined topic or issue related to *enhancing student learning*.**



What happens in each step of the
Timeline?

- ***Step 5: On-site peer review visit***
 - In the fall of 2008, SACS will appoint an on-site committee of professional peers to visit NW-SCC and assess the institution. The committee will write a report to provide the basis for the Commission to either reaffirm or withdraw accreditation.



The On-site Committee Visit:

- **In a three-day visit the committee will:**
 - **Examine data**
 - **Conduct interviews to evaluate the QEP and ascertain whether NW-SCC is in compliance with the *Principles***
 - **Offer written advice to NW-SCC**
 - **Complete a draft report**
 - **Present an oral summary in an exit report**



What happens in each step of the Timeline?

- **Step 6: Review by Commission on Colleges**

- In June 2009, the Commission on Compliance and Reports will review the findings of the on-site committee and recommend action to the Executive Council of the Commission and this Council will in turn recommend action to the Commission which makes the final decision and announces it in December 2009.



?? Questions ??