



## PEAQ Comprehensive Evaluations for Reaffirmation of Accreditation: Documents Supporting the Preparation of the Team Report

This set of materials should be used by teams conducting PEAQ comprehensive evaluations for reaffirmation of accreditation beginning in January 2013. The documents are based on the new Criteria for Accreditation and also reflect changes in process related to the preparation of team reports. All earlier reports and templates are now obsolete and should not be used as models for preparing team reports.

The following documents are included in this packet:

- Annotated Template for the Team Report for the Comprehensive Visit (included in this pdf). This document includes embedded instructions for preparing the various sections of the team report. Instructions are noted in blue.
- [Template for the Team Report for the Comprehensive Visit](#) (Word file provided as a link to this pdf). This template should be used in preparing the team report.
- [Multi-Campus Report](#) (Word file provided as a link to this pdf). This report should be used only when applicable to the specific visit. If used, it should be attached to the report as Appendix D.
- [Embedded Change Report](#) (Word file provided as a link to this pdf). This report should be used only if applicable to the specific visit. If used, it should be submitted with the report as a separate document, rather than as an appendix.
- Protocol for Reviewing Distance Education and Correspondence Education (included in this pdf). This document is applicable when reviewing distance or correspondence education.
- Submission Procedures: PEAQ Comprehensive Visit Team Report (included in this pdf). This document provides instructions for the electronic submission of the draft and final team reports.

The team should also obtain the separate Federal Compliance packet, "[Documents Supporting the Preparation of Institutional and Team Materials to Address the Federal Compliance Requirements](#)." The team worksheet provided in that packet should be included with the team report as Appendix C.





## Annotated Template

# Team Report for the Comprehensive Visit

The team chair should use this document as a guide in completing the team report template. **Instructions are noted in blue.**

### Summary of Changes and Important Notes to the Report Template

1. The Criteria section has been revised to reflect the new criteria and the new evaluative protocol (met, met with concerns, not met).
2. Teams provide their findings in evidence statements. Evidence statements are typically 3-4 sentences in length and include the context, the evidence, and the finding of team. Some evidence statements may need further support with bulleted evidence sentences that address each Core Component and include the sub-components as appropriate to the institution. The team should provide evidence statements that address institutional strengths, needed institutional improvements, and accreditation concerns. The statements in total must lead to and support the team determination on the Core Component and Criterion. The writing of evidentiary statements has been replaced with this approach.
3. The team will **no longer provide a separate Advancement Section of the team report**. Advice and consultation is now addressed in the summary for each Criterion.
4. The team's recommendation, including any applicable monitoring, is stated at the end of the report, not at the end of each Criterion.
5. The list of documents reviewed and meetings and interviews held are now appendices to the report.
6. The Federal Compliance worksheets should be included in the report in one appendix.
7. Multi-campus reports, if applicable, should be included in the report in an appendix.
8. Teams should be sure to address the following question with regard to Criterion Four, Core Component 4.B: Are the measures of student learning chosen by the institution appropriate? Are the goals for the student learning established by the institution rigorous? Has the institution taken appropriate follow-up action after evaluating its assessment data?
9. Embedded changes require separate documentation (institutional change application and embedded change report template) and separate action. Thus, the embedded change report

SHOULD NOT be included in the report as an appendix. The embedded change report should stand on its own as an argument. Further, it should be separated from the report and submitted to [changerequests@hlcommission.org](mailto:changerequests@hlcommission.org). Teams may cite evidence from the institution's self-study report and the team report; however, critical evidence should be repeated in the embedded change report template.

**Important - Formatting Note**

To change the headers and footers in the template:

- Click on View Option in Menu Bar
- Choose Headers and Footers
- Scroll down to second page
- Replace standard header with name of institution and visit number
- Replace the date in the standard footer with the submission date of the version of the report

**STANDARD COVER SHEET**

**REPORT OF A COMPREHENSIVE EVALUATION VISIT**

TO

NAME OF INSTITUTION

City, State

Date of Visit

FOR

**The Higher Learning Commission**

A commission of the North Central Association

**EVALUATION TEAM**

First and Last Name, Title, Affiliation, City, State ZIP Code

First and Last Name, Title, Affiliation, City, State ZIP Code

First and Last Name, Title, Affiliation, City, State ZIP Code

First and Last Name, Title, Affiliation, City, State ZIP Code

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**NOTE:** Embedded changes require the completion of a separate report template. Completed embedded change reports should accompany, rather than be attached to, the team report. Embedded changes require a separate review and action by IAC.

## I. CONTEXT AND NATURE OF VISIT

### A. Purpose of Visit

Include a statement such as the example below that indicates the primary purpose of the evaluation. You should reflect all the elements in the visit description.

Example: The team conducted a comprehensive evaluation visit that included a multi-campus review and an embedded change review.

### B. Institutional Context

### C. Unique Aspects or Additions to the Visit

1. List the specific additional evaluations conducted as part of the visit. These may include a multi-campus visit, distance education review, an embedded change request, additional location confirmation visit, campus evaluation visit, etc. Separate documents are included with this report packet.
2. Also list any unique aspects to the review, such as met with high school instructors, met virtually with overseas faculty, met with contractual partner for new distance education offerings.

Simply provide a list in this section, as the topics will be elaborated on below or in separate documents.

### D. Additional Locations or Branch Campuses Visited (if applicable)

### E. Distance Delivery Reviewed

If applicable, summarize the distance and correspondence education reviewed as part of this evaluation.

Reviewers are required to evaluate an institution's distance and correspondence education as part of the comprehensive evaluation and to ensure that the institution's stipulations on distance and correspondence education are accurate. The "Protocol for Reviewing Distance Education and Correspondence Education" is included with this report packet.

Do not include the team's commentary or evaluation findings in this section; these belong in the Criterion section. See the Criterion section for more information.

## II. COMMITMENT TO PEER REVIEW

### A. Comprehensiveness of the Self-Study Process

### B. Integrity of the Self-Study Report

### C. Adequacy of Progress in Addressing Previously Identified Challenges

### D. Notification of Evaluation Visit and Solicitation of Third-Party Comment

### III. COMPLIANCE WITH FEDERAL REQUIREMENTS

See the separate Federal Compliance packet, “Documents Supporting the Preparation of Institutional and Team Materials to Address the Federal Compliance Requirements,” in preparing this section. The team’s worksheet should be included with the report as an appendix.

### IV. FULFILLMENT OF THE CRITERIA FOR ACCREDITATION

#### Instructions for Completing this Section

#### Determining a Core Component is Met, Met with Concerns, and Not Met

The team conducts its review and determines whether the Core Component is Met, Met with Concerns, or Not Met. The team incorporates its review of the Sub-components into the review of the related Core Component. Beneath each Core Component, the team provides its findings in **evidence statements**. Evidence statements are typically 2-3 sentences in length and include the context, the evidence, and the finding of team. Some evidence statements may need further support with bulleted evidence sentences that address the Core Component and include the sub-components as appropriate to the institution. Each evidence statement should address only one topic.

The evidence statements should present an accurate assessment of the institution in relation to the Core Component, including both positive and negative findings. However, the balance of the statements should support the overall determination of the team for that Core Component and for the Criterion. The statements in total must lead to and support the team determination on the Core Component and Criterion. **Note:** In some cases, a single area may be of such concern that it alone shifts the balance to a Core Component being Met with Concerns or Not Met.

The word **concern** needs some definition. The Commission assumes that institutions that meet the Criteria and Core Components can always improve and that evaluation teams will routinely identify issues and comment on ways an institution might or even should improve in relationship to the Criteria. These are not accreditation concerns.

Concerns, as defined in relationship to the Criteria, are accreditation issues that require the Commission to intervene and monitor the institution to ensure that issues have been resolved. When a team determines that a **Core Component is Met**, improvements may be indicated, but no monitoring should be recommended.

However, when a team determines that a Core Component is met, but identifies an issue that **must be improved** and requires Commission monitoring at the level of a monitoring report or focused visit, the team should indicate that the **Core Component is “Met with Concerns”** and recommend the appropriate monitoring. Often such issues are more pervasive or chronic; they may have been cited in previous evaluations and improvements have not been made or the improvements made are not sufficient.

If there are multiple issues that indicate deep, systemic problems at the institution or the evidence is so lacking that it fails to demonstrate that the institution fulfills the Core Component, the team will

indicate that the Core Component is “**Not Met.**”

**Evidence for Each Core Component.** Following the determination of each Core Component, the team presents evidence that supports its determination. Evidence should be provided in evidence statements as defined above.

### **Determining a Criterion is Met, Met with Concerns, and Not Met**

**Criterion Is Met.** If all of the Core Components are met, the Criterion is met.

**Criterion Is Met with Concerns.** If any Core Component is met with concerns, the team must find that the Criterion is met with concerns. In Part V of the team report, the team will recommend monitoring appropriate to the concerns. If the team identifies serious concerns with one or more Core Components or finds that multiple Core Components are met with concerns, the team chair should consult with the Commission staff liaison to determine whether the team should recommend that the institution be on Notice.

A note on recommendations for monitoring. Please keep in mind that all institutions undergoing PEAQ evaluations will transition into the Standard, Open, or AQIP Pathway at the conclusion of the current evaluation process. Institutions in the Standard or Open Pathway will have a review within four years of the current comprehensive evaluation. Institutions in AQIP have frequently interactions with the Commission as a part of this Pathway. Therefore, the past practice of monitoring institutions through progress reports is not useful in this new approach to reaffirmation and the progress report option has been eliminated. Monitoring options are limited to monitoring reports and focused visits.

**Criterion Is Not Met.** If any Core Component is not met, the Criterion is not met. In these instances, the team will recommend either probation or withdrawal of accreditation.

**Summary Statement on Each Criterion.** Following the determination of each Criterion, the team summarizes its findings and observations on the overall Criterion, including strengths, opportunities for improvement, and advice. If the Criterion is met with concerns or the Criterion is not met, the team summarizes its rationale and evidence. The team’s recommendation is made in Part V of the team report.

### **Incorporating Review of Distance and Correspondence Education and Branch Campuses into the Criteria Section.**

**CRITERION ONE: MISSION.** The institution’s mission is clear and articulated publicly; it guides the institution’s operations.

**Core Component 1A:** The institution’s mission is broadly understood within the institution and guides its operations.

**Subcomponent 1.** The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.

**Subcomponent 2.** The institution’s academic programs, student support services, and enrollment profile are consistent with its stated mission.



**Subcomponent 3.** The institution's planning and budgeting priorities align with and support the mission.

- Team Determination:**
- Core Component is met
  - Core Component is met with concerns
  - Core Component is not met

**Evidence:**

- Provide evidence statements that address institutional strengths, needed institutional improvements, and accreditation concerns. The statements in total must lead to and support the team determination on the Core Component and Criterion.

**Core Component 1B:** The mission is articulated publicly.

**Subcomponent 1.** The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.

**Subcomponent 2.** The mission document or documents are current and explain the extent of the institution's emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.

**Subcomponent 3.** The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.

- Team Determination:**
- Core Component is met
  - Core Component is met with concerns
  - Core Component is not met

**Evidence:**

- Provide evidence statements that address institutional strengths, needed institutional improvements, and accreditation concerns. The statements in total must lead to and support the team determination on the Core Component and Criterion.

**Core Component 1C:** The institution understands the relationship between its mission and the diversity of society.

**Subcomponent 1.** The institution addresses its role in a multicultural society.

**Subcomponent 2.** The institution's processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.

- Team Determination:**
- Core Component is met
  - Core Component is met with concerns
  - Core Component is not met

**Evidence:**

- Provide evidence statements that address institutional strengths, needed institutional improvements, and accreditation concerns. The statements in total must lead to and support the team determination on the Core Component and Criterion.

**Core Component 1D:** The institution's mission demonstrates commitment to the public good.

**Subcomponent 1.** Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.

**Subcomponent 2.** The institution's educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.

**Subcomponent 3.** The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

**Team Determination:**

- Core Component is met
- Core Component is met with concerns
- Core Component is not met

**Evidence:**

- Provide evidence statements that address institutional strengths, needed institutional improvements, and accreditation concerns. The statements in total must lead to and support the team determination on the Core Component and Criterion.

**Team Determination on Criterion One:**

- Criterion is met
  - Criterion is met with concerns
  - Criterion is not met

**Summary Statement on Criterion:**

Summarize the team's findings and observations on the overall Criterion, including strengths, opportunities for improvement, and advice. If the Criterion is met with concerns or the Criterion is not met, the team summarizes its rationale and evidence. The team's recommendation is made in Part Five of the team report.

**The team report template continues in the pattern above  
through Criteria 2, 3, 4, and 5.**

## V. TEAM RECOMMENDATION

If the team has determined that a Core Component and thus a Criterion is Not Met, the team must call for probation or withdrawal in the Sanction and Adverse Action section below. If the team has determined that the concerns for one or more Core Components and thus one or more Criteria are met with such concern that the team is recommending On Notice, this recommendation should be included in the Sanction and Adverse Action section below. Monitoring on a Core Component(s) in the form of a report or focused visit should be included in the Criterion-related monitoring section below. Monitoring on a Federal Compliance requirement in the form of a report or focused visit should be included in the Federal Compliance monitoring section below.

### A. Affiliation Status

1. **Recommendation:**
2. **Timing for Next Comprehensive Evaluation:**
3. **Rationale:**
4. **Criterion-related Monitoring Required (report, focused visit):**  
(specify type of monitoring and rationale for each monitoring required)  
  
Monitoring:  
Rationale:
5. **Federal Compliance Monitoring Required (report, focused visit):**  
(specify type of monitoring and rationale for each monitoring required)  
  
Monitoring:  
Rationale:

### B. Commission Sanction or Adverse Action (on notice, probation, withdrawal)

## VI. EMBEDDED CHANGES IN AFFILIATION STATUS

Did the team review any of the following types of change in the course of its evaluation? Check Yes or No for each type of change.

- |                              |                             |  |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Legal Status                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Degree Level                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Program Change                         |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Distance or Correspondence Education   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Contractual or Consortial Arrangements |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Mission or Student Body                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Clock or Credit Hour                   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Additional Locations or Campuses       |

- Yes                       No    Access to Notification
- Yes                       No    Access to Expedited Desk Review
- Yes                       No    Teach-out Arrangement
- Yes                       No    Other Change ([explain below](#))

If you answered Yes to any of the types of changes, do not address the embedded change(s) in this report. Embedded changes require separate documentation (institutional change application and embedded change report template) and separate action. Thus, the embedded change report SHOULD NOT be included in the report as an appendix. The embedded change report should stand on its own as an argument. Further, it should be separated from the report and submitted to [changerequests@hlcommission.org](mailto:changerequests@hlcommission.org). Teams may cite evidence from the institution's self-study report and the team report; however, critical evidence should be repeated in the embedded change report template. [Contact the liaison for more information.](#)

## VII. ADDITIONAL COMMENTS AND EXPLANATIONS

## **Appendix A**

### **Interactions with Constituencies**

## **Appendix B**

### **Principal Documents, Materials, and Web Pages Reviewed**

## **Appendix C**

### **Federal Compliance Worksheet**

See the separate Federal Compliance packet, “Documents Supporting the Preparation of Institutional and Team Materials to Address the Federal Compliance Requirements,” in preparing this section. The team’s worksheet from that packet should be included here. 🌿



## Protocol for Reviewing Distance Delivery during Comprehensive Evaluation and Quality Checkup Visits

In addition to reviewing distance delivery through its substantive change processes, the Commission reviews the quality of distance-delivered programs during comprehensive evaluation and Quality Checkup visits. This document provides background on the Commission's policies related to distance delivery and the protocol for reviewing distance-delivered programs, both distance and correspondence education, during accreditation visits.

### Background

#### ***Purpose of the Review***

The Commission no longer requires approval of individual distance-delivered courses and programs, and reviewers no longer recommend approval of individual distance-delivered courses and programs. Instead, the Commission and reviewers evaluate the institution's capacity for a specific level of distance-delivered education.

**Substantive Change Review.** Through the substantive change process, the Commission determines whether an institution may initiate or expand distance or correspondence education by examining an institution's a) commitment to, planning for, and implementation of distance delivery; (b) current and ongoing capacity and resources to implement high-quality educational offerings and services through distance delivery; and (c) effective systems for sustaining and improving high-quality distance-delivered education through effective assessment, evaluation, and improvement processes. The Commission may conduct a substantive change review within a comprehensive evaluation or Quality Checkup visit.

**Comprehensive Evaluation and Quality Checkup Visits.** The Commission reviews the ongoing quality of distance-delivered education during comprehensive evaluation and Quality Checkup visits. During these accreditation visits, peer reviewers examine the institution's capacity to provide education to its students and the quality of its performance in doing so, whether via distance delivery or traditional face-to-face modes. Comprehensive reviews examine curriculum; staffing; support services; access to appropriate laboratory and library resources; processes for ongoing planning, evaluation, and improvement; and all other facets of quality higher education for all instruction wherever and however delivered. In addition, the peer reviewers affirm that the institution is operating within its approved limits for distance and correspondence education.

#### ***Definitions of Distance and Correspondence Education***

In 2010, the Commission adjusted its definition of "Distance Delivery" to encompass both distance and correspondence education, thus aligning with the Federal Government's definitions. The following are the Federal definitions (2009) of distance and correspondence education:

##### **Correspondence education means:**

- (1) Education provided through one or more courses by an institution under which the institution provides instructional materials, by mail or electronic transmission, including examinations on the materials, to students who are separated from the instructor.
- (2) Interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student.



- (3) Correspondence courses are typically self-paced.
- (4) Correspondence education is not distance education.

**Distance Education means** education that uses one or more of the technologies listed in paragraphs (1) through (4) to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

- (1) The internet;
- (2) One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
- (3) Audio conferencing; or
- (4) Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3).

***Definitions of Distance-Delivered Courses and Programs***

The Commission uses the following definitions for the purpose of applying its policy on distance delivery to its accredited and candidate institutions:

**Distance-delivered courses** are those in which all or the vast majority (typically 75% or more) of the instruction and interaction occurs via electronic communication, correspondence, or equivalent mechanisms, with the faculty and students physically separated from each other.

**Distance-delivered programs** are those certificate or degree programs in which 50% or more of the required courses may be taken as distance-delivered courses.

***Distance-delivered Percentage Brackets***

The Commission has assigned percentage brackets to institutions that reflect the scope of the institution’s distance delivery based on the percentage of total degree programs. The chart below identifies the percentage brackets for determining the scope of distance delivery by an institution. The Commission determines the appropriate bracket for each institution based on the information an institution provides in its Annual Institutional Data Update to the Commission or when it seeks and receives approval of a proposed change.

<b>Percentage Bracket</b>	<b>Percentage of Distance-Delivered Offerings (calculations are based on degree programs, not certificates)</b>
3	Up to 100% of total degree programs
2	Up to 20% of total degree programs
1	Up to 5% of total degree programs
0	No activity

**Initiation** occurs and a substantive change review is required when the institution:

- plans to initiate its first distance education degree program, even when it has been approved to offer distance education certificates or correspondence education degree programs or certificates;

## Protocol for Reviewing Distance Delivery during Comprehensive Evaluation and Quality Checkup Visits

- plans to initiate its first correspondence education degree program, even when it has been approved to offer correspondence education certificates or distance education degree programs or certificates;
- has initiated four distance education certificates and plans to initiate a fifth, unless the institution has already been reviewed and approved to offer one or more distance education degree programs; or
- has initiated four correspondence education certificates and plans to initiate a fifth, unless the institution has already been reviewed and approved to offer one or more correspondence education degree programs.

**Expansion** occurs and a substantive change review is required when the institution:

- plans to increase its current activity in distance education degree programs or its current activity in correspondence education degree programs to a higher Percentage Bracket.

In addition, the Commission may require a substantive change evaluation if the institution has never had a focused review of distance or correspondence degree or certificate programs and is offering one or more programs or five or more certificates or has a significant annual increase in enrollment.

### **Protocol for Reviewing Distance Delivery**

During comprehensive evaluation and Quality Checkup visits, one or more trained members of the team should examine distance-delivered education and incorporate the results of the review in the comprehensive evaluation or Checkup visit report as instructed in the appropriate team report template.

The evaluation should include a review of elements 1-7 below, which are linked to the revised Criteria and Core Components. The focus of the evaluation is to assure the institutional capacity; educational quality; student learning and success; and effective planning, evaluation, and improvement processes, including those for assessing and improving student learning, persistence, and completion. In conducting the evaluation, reviewers should:

- Review the scope, number, and types of distance and correspondence education programs offered by the institution as provided in the Commission's data information and the institution's evaluation materials. Alert the institution to any discrepancies.
- Review the institution's history and approvals for conducting distance and correspondence education. Alert the institution and the Commission if the institution is operating outside its approval limits.
- Secure access to the institution's learning management system. Evaluate a sample of programs and courses within the system to assure educational quality, student support, and verification of student identity. This review should also serve the purposes of the Federal Compliance review.

Peer reviewers should anticipate needing a few hours to a half day to conduct the review of distance delivery and may choose to conduct a portion or the majority of the evaluation electronically prior to the on-site visit. In addition, questions pertaining to distance delivery should be incorporated into other appropriate meetings and interviews during the evaluation.

In conducting the evaluation, Peer reviewers should refer to the appropriate report template and reviewer guide.

In all cases, reviewers will consider the following:

- 1. Scope of Distance-delivered Courses and Programs (*Criteria 1, 2, 3, and 5; Core Components 1.B, 1.D, 2.A, 2.B., 3.A., 3.C, 5.A, 5.C*)**

- a. The scope of distance-delivered degree and diploma programs in relationship to total degree programs and the percentage bracket the institution is authorized to operate within as set by the Commission.
  - b. The scope of the institution's distance-delivered courses and programs (degree, diploma, certificate) and their relationship to and impact on the institution, its constituencies, and its mission.
  - c. Organizational structures in place to ensure effective oversight, implementation, and management of the institution's distance-delivered offerings.
  - d. Consortial or contractual arrangements in conjunction with distance-delivered offerings and processes to assure their integrity and quality.
- 2. Institution's History with Distance-Delivered Offerings (Criteria 1, 4, and 5; Core Components 1.A, 1.B, 4.A., 4.C, 5.C., 5.D.)**
- a. The institution's experience with distance-delivered offerings.
  - b. Plans for future growth short-term and long-term and for managing growth.
- 3. Institutional Planning for Distance-Delivered Offerings. (Criteria 2, 3, 4, and 5; Core Components 2.A, 2.B, 3.A, 4.A, 5.A, 5.B, 5.C)**
- a. Processes for determining the need to offer or to expand programs via distance delivery.
  - b. Processes for planning and managing financial resources and their allocation for distance-delivered offerings.
  - c. Processes to assure that promotion, marketing, and enrollment of its distance-delivered offerings are appropriate, accurate, and transparent to students and the public.
- 4. Curriculum and Instructional Design (Criteria 2, 3 and 4; Core Components 2.E, 3.A, 3.B, 3.C., 4.A)**
- a. Processes for developing, approving, and assuring quality curricula for distance-delivered programs.
  - b. Processes for technology maintenance, upgrades, back up, remote services, and for communicating changes in software, hardware or technical systems to students and faculty.
  - c. Processes to provide convenient, reliable, and timely services to students or faculty needing technical assistance, and to communicate information about these services.
- 5. Staffing and Faculty Support (Criteria 2, 3, and 4; Core Components 2.D, 2.E, 3.C, 3.D)**
- a. Processes to ensure sufficient faculty and staff for distance-delivered programs.
  - b. Processes for selecting, training, and orienting faculty for distance delivery.
  - c. Practices and procedures of distance delivery faculty and staff and their alignment with those of face-to-face faculty and staff and with institutional policies and processes.
- 6. Student Support (Criteria 2, 3, and 4; Core Components 2.A, 3.C, 3.D., 3.E, 4.C)**
- a. Access to necessary student and support services.
  - b. Appropriate materials and communications for students regarding distance-delivered programs.
  - c. Access to faculty, including processes that promote interactions among distance delivery students and faculty.
  - d. Processes that protect student identity and personal information and assure student authentication and identity.

7. **Evaluation and Assessment (Criteria 3, 4, and 5; Core Components 3.A, 4.A, 4.B, 4.C, 5.A, 5.C, 5.D)**
  - a. Processes to evaluate and improve quality in distance-delivered offerings.
  - b. Processes for assessing and improving student learning and evaluating and improving student retention and completion.
  - c. Assessment and evaluation methods used for distance-delivered offerings and their equivalence to those used in traditional face-to-face offerings.

### ***Incorporating the Evaluation into the Report***

Reviewers should follow the outline provided in the comprehensive evaluation and Quality Checkup report templates.

**Comprehensive evaluation report.** In the comprehensive evaluation report, reviewers will provide a summary of the review conducted and a summary of the scope of the institution's distance education and correspondence education offerings in the distance delivery section of Part 1. In addition, the team will affirm that the institution is operating within the approved percentage bracket of distance and correspondence education in relationship to total degree programs. In the appropriate criterion sections, the team should include 5-7 separate evidentiary statements that specifically address distance delivery. The team's findings on distance delivery should become part of the deliberations on the Criteria and should bear as appropriate on the accreditation recommendation.

**Quality Checkup visit report.** In the Quality Checkup report, reviewers will provide its conclusions on distance and correspondence education in the designated section. In addition, the team will affirm that the institution is operating within the approved percentage bracket of distance and correspondence education in relationship to total degree programs.

### **Protocol for Evaluating Change Requests Embedded in Comprehensive Reviews**

If an institution has requested that a substantive change review on distance delivery be conducted as part of a comprehensive review or Quality Checkup visit, the institution will provide a completed *Distance Delivery Change Application* in addition to its other self-evaluation materials. In addition, the team will complete a separate embedded change report and recommendation. The applications and report templates can be found on the Commission's Web page ([www.ncahlc.org](http://www.ncahlc.org)). 🌿



## Submission Procedures: PEAQ Comprehensive Visit Team Report

This document provides the Commission's protocols for the electronic submission of team reports. If you have questions about these protocols, contact the Commission staff liaison or Joan Mitchanis at [jmitchanis@hlcommission.org](mailto:jmitchanis@hlcommission.org).

### File Name

Name the file "(Name of Institution) (Draft or Final) Team Report mm-yy" (mm-yy are the month and year of the evaluation). For example: Narnia U Draft Team Report 10-12.

### File Format

The team report should be submitted in MS Word format.

### Timeline for Submitting the Report

The Team Chair should send the draft team report to the assigned Commission staff liaison for comment and feedback before sending it to the institution for corrections of errors of fact. Should the draft report reflect the team's misinterpretation of Commission policy or practice, the draft report should be modified to correct the misinterpretation. If a change is made in the report under these circumstances, or if a change is made in the report because of clarifying information provided by the institution, the team chair will confer with team members before sending the final report to the Commission.

The timeline below outlines the schedule and responsibilities for writing, revising, and submitting the drafts of team reports.

- **On-site or within one week after the visit**  
Team members send final contributions for the report to the team chair within one week of the visit. (The team chair may require some submissions on-site.)
- **Four weeks after the visit**  
The team chair completes the first draft of the team report and e-mails it to the team and the Commission staff liaison whose name appears on the ESS. The email address is the first initial and last name of the staff liaison, e.g., [rappleson@hlcommission.org](mailto:rappleson@hlcommission.org). The subject line for the email should be Draft Team Report—(Institution's Name) and (Liaison's Surname). For example: Draft Team Report, Narnia U, Appleson.
- **Five weeks after the visit**  
The Commission staff liaison contacts the team chair to discuss the draft team report. Team members e-mail comments on the draft team report to the team chair.

- **Six weeks after the visit**  
The team chair completes the revised draft of team report and sends the electronic file to the chief executive officer of the organization. A cover letter states the deadline for submitting corrections of errors of fact (within two weeks). If comments from the chief executive officer suggest substantive changes in the draft, the team chair may need to confer with the staff liaison and team members before preparing the final report.
- **Eight weeks after the visit**  
The chief executive officer of the institution sends corrections of errors of fact to the team chair.
- **Nine weeks after the visit**  
The team chair makes final corrections and sends e-version of full team report, to the Commission at [finalreport@hlcommission.org](mailto:finalreport@hlcommission.org). (Note: this is a different email address from the one used for the draft report.) The Commission will send the team report to the institution and to all team members.

**Note:** When sending an e-version of the final report to the Commission, the subject line for the email should read: Final Team Report, (Institution's Name), (Liaison's Surname). For example: Final Team Report, Narnia U, Appleson. 🌿