PART II: THE CORE COMMITMENTS AND STANDARDS OF ACCREDITATION

Overview

The Core Commitments and Standards of Accreditation provide a foundation for institutional reviews and actions. The Core Commitments express the values underlying WASC accreditation, while the Standards build upon the Core Commitments, articulating broad principles of good practice. The Standards are explicated by the Criteria for Review (CFR), and the CFRs in turn are supported by Guidelines and Commission policies. Together, these elements provide a coherent basis for institutional review and at the same time assure quality and integrity.

Colleges and universities have been under increasing pressure to become more accountable for student academic achievement; to be more transparent in reporting the results of accreditation; and to demonstrate their contribution to the public good.
Understanding the WASC Standards

The WASC process begins by calling upon institutions to ground their activities in three Core Commitments. By affirming these Core Commitments and taking ownership of the accreditation process, institutions create learning environments that continuously strive for educational excellence and operational effectiveness in order to serve both students and the public good.

- **Core Commitment** to Student Learning and Success
- **Core Commitment** to Quality and Improvement
- **Core Commitment** to Institutional Integrity, Sustainability, and Accountability

**Standards of Accreditation**

The Standards of Accreditation consist of four broad, holistic statements that reflect widely accepted good practices in higher education. WASC institutions are diverse in terms of mission, character, and type. The Standards are broad enough to honor that diversity, respect institutional mission, and support institutional autonomy. At the same time, institutions must demonstrate that they are in substantial compliance with the four Standards and related Criteria for Review in order to become and remain accredited. The four Standards are:

- **Standard 1**: Defining Institutional Purposes and Ensuring Educational Objectives
- **Standard 2**: Achieving Educational Outcomes Through Core Functions
- **Standard 3**: Developing and Applying Resources and Organizational Structures to Ensure Quality and Sustainability
- **Standard 4**: Creating an Organization Committed to Quality Assurance, Institutional Learning, and Improvement

**Criteria for Review**

Thirty-nine Criteria for Review (CFR) are distributed across the four Standards. The CFRs under each Standard provide more specific statements about the meaning of the Standard. The CFRs are grouped under headings that identify major aspects of institutional functioning. The CFRs are cited by institutions in their institutional report, by peer reviewers in evaluating institutions, and by the Commission in making decisions about institutions. Many of the CFRs are cross-referenced to allow for ease in identifying related and connected CFRs.

**Guidelines**

Where Guidelines are provided, they assist institutions in interpreting the CFRs by offering examples of how institutions can address a particular Criterion For Review. An institution is welcome to employ different practices from those described in a particular Guideline; in that case, the institution is responsible for showing that it has addressed the intent of that Criterion in an equally effective way.

**Related Commission Policies and Resources**

Following some CFRs are references to policies of particular relevance to those CFRs and any related Guidelines. These references are not intended to be all-inclusive. Institutions are encouraged to become familiar with, and to review periodically, all Commission policies, which are binding on member institutions.

Following some CFRs are references to manuals and resource guides. WASC has published manuals on substantive change, how to become WASC-accredited, and procedures for international institutions that wish to pursue WASC accreditation. The procedures described in these manuals, like policies, are binding. Resource guides, offering principles and examples of good practice, address topics such as program review, transparency, graduate education, and the use of evidence. Resource guides are not binding; they are merely suggestive and intended to provide helpful information.

A complete list of WASC policies and resource guides is provided in Appendix E at the end of this Handbook, with a link to the WASC Web page for each policy.
Understanding the WASC Standards

Institutions accredited by WASC share a common set of commitments that focus on students, safeguard quality, and assure integrity, accountability, and transparency. Institutions demonstrate this commitment by adhering to the Standards of Accreditation. WASC institutions represent richness in diversity of mission, character, and type, and the WASC Standards are written in such a way as to honor that diversity by respecting institutional mission and preserving institutional autonomy. By affirming these Core Commitments, institutions create learning environments that continuously strive for educational excellence and operational effectiveness in order to serve the public good.

1. Core Commitments

The WASC process begins by calling upon institutions to ground their activities in three Core Commitments. By affirming these Core Commitments and taking ownership of the accreditation process, institutions create learning environments that continuously strive for educational excellence and operational effectiveness in order to serve both students and the public good.

- Core Commitment to Student Learning and Success
- Core Commitment to Quality and Improvement
- Core Commitment to Institutional Integrity, Sustainability, and Accountability

2. Standards of Accreditation

The Standards of Accreditation consist of four broad, holistic statements that reflect widely accepted good practices in higher education. WASC institutions are diverse in terms of mission, character, and type. The Standards are broad enough to honor that diversity, respect institutional mission, and support institutional autonomy. At the same time, institutions must demonstrate that they are in substantial compliance with the four Standards and related Criteria for Review in order to become and remain accredited. The four Standards are:

- **Standard 1**: Defining Institutional Purposes and Ensuring Educational Objectives
  - Institutional Purposes
  - Integrity and Transparency
  - The institution defines its purposes and establishes educational objectives aligned with those purposes. The institution has a clear and explicit sense of its essential values and character, its distinctive elements, and its place in both the higher education community and society, and its contribution to the public good. It functions with integrity, transparency, and autonomy.

- **Standard 2**: Achieving Educational Outcomes Through Core Functions
- **Standard 3**: Developing and Applying Resources and Organizational Structures to Ensure Quality and Sustainability
- **Standard 4**: Creating an Organization Committed to Quality Assurance, Institutional Learning, and Improvement
Core Commitment to Student Learning and Success

Institutions have clear educational goals and student learning outcomes. Institutions collect, analyze, and interpret valid and reliable evidence of learning as a way of assessing student achievement and success. Institutions support the success of all students and seek to understand and improve student success.

Core Commitment to Quality and Improvement

Institutions are committed to high standards of quality in all of their educational activities. They utilize appropriate evidence to improve teaching, learning, and overall institutional effectiveness. Through strategic and integrated planning, institutions demonstrate the capacity to fulfill their current commitments and future needs and opportunities.

Core Commitment to Institutional Integrity, Sustainability, and Accountability

Institutions recognize that the public has entrusted them with the critical responsibilities of upholding the values of higher education and contributing to the public good. They engage in sound business practices, demonstrate institutional integrity, operate in a transparent manner, and adapt to changing conditions.

3. Criteria for Review

Thirty-nine Criteria for Review (CFRs) are distributed across the four Standards. The CFRs under each Standard provide more specific statements about the meaning of the Standard. The CFRs are grouped under headings that identify major aspects of institutional functioning. The CFRs are cited by institutions in their institutional report, by peer reviewers in evaluating institutions, and by the Commission in making decisions about institutions. Many of the CFRs are cross-referenced to allow for ease in identifying related and connected CFRs.

GUIDELINES: The institution has a published mission statement that clearly describes its purposes. The institution’s purposes fall within recognized academic areas and/or disciplines.

4. Guidelines

Where Guidelines are provided, they assist institutions in interpreting the CFRs by offering examples of how institutions can address a particular Criterion for Review. An institution is welcome to employ different practices from those described in a particular Guideline; in that case, the institution is responsible for showing that it has addressed the intent of that Criterion for Review in an equally effective way.

5. Related Commission Policies and Resources

Following some CFRs are references to policies of particular relevance to those CFRs and any related Guidelines. These references are not intended to be all-inclusive. Institutions are encouraged to become familiar with, and to review periodically, all Commission policies, which are binding on member institutions.

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A complete list of WASC policies and resource guides will be provided in Appendix E when the final version of the Handbook is published, with a link to the WASC Web page for each policy.
STANDARD 1

Defining Institutional Purposes and Ensuring Educational Objectives

- Institutional Purposes
- Integrity and Transparency

The institution defines its purposes and establishes educational objectives aligned with those purposes. The institution has a clear and explicit sense of its essential values and character, its distinctive elements, its place in both the higher education community and society, and its contribution to the public good. It functions with integrity, transparency, and autonomy.

**Institutional Purposes**

Criteria for Review

1.1 The institution’s formally approved statements of purpose are appropriate for an institution of higher education and clearly define its essential values and character and ways in which it contributes to the public good.

**GUIDELINES:** The institution has a published mission statement that clearly describes its purposes. The institution’s purposes fall within recognized academic areas and/or disciplines.

1.2 Educational objectives are widely recognized throughout the institution, are consistent with stated purposes, and are demonstrably achieved. The institution regularly generates, evaluates, and makes public data about student achievement, including measures of retention and graduation, and evidence of student learning.

**GUIDELINES:** The institution has a published mission statement that clearly describes its purposes. The institution’s purposes fall within recognized academic areas and/or disciplines.

X CFR 2.4, 2.6, 2.10, 4.2

**Integrity and Transparency**

Criteria for Review

1.3 The institution publicly states its commitment to academic freedom for faculty, staff, and students, and acts accordingly. This commitment affirms that those in the academy are free to share their convictions and responsible conclusions with their colleagues and students in their teaching and writing.

**GUIDELINES:** The institution has published or has readily available policies on academic freedom. For those institutions that strive to instill specific beliefs and world views, policies clearly state how these views are implemented and ensure that these conditions are consistent with generally recognized principles of academic freedom. Due-process procedures are disseminated, demonstrating that faculty and students are protected in their quest for knowledge.

X CFR 3.2, 3.10

1.4 Consistent with its purposes and character, the institution demonstrates an appropriate response to the increasing diversity in society through its policies, its educational and co-curricular programs, its hiring and admissions criteria, and its administrative and organizational practices.

**GUIDELINES:** The institution has demonstrated institutional commitment to the principles enunciated in the WASC Diversity Policy.

X CFR 2.2a, 3.1
### Integrity and Transparency

#### Criteria for Review

<table>
<thead>
<tr>
<th>1.5</th>
<th>Even when supported by or affiliated with governmental, corporate, or religious organizations, the institution has education as its primary purpose and operates as an academic institution with appropriate autonomy.</th>
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<tbody>
<tr>
<td>Independent Government Boards Policy</td>
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<tr>
<td><strong>GUIDELINES:</strong> The institution does not experience interference in substantive decisions or educational functions by governmental, religious, corporate, or other external bodies that have a relationship to the institution.</td>
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<tr>
<td>X CFR 3.6-3.10</td>
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<tr>
<th>1.6</th>
<th>The institution truthfully represents its academic goals, programs, services, and costs to students and to the larger public. The institution demonstrates that its academic programs can be completed in a timely fashion. The institution treats students fairly and equitably through established policies and procedures addressing student conduct, grievances, human subjects in research, disability, and financial matters, including refunds and financial aid.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GUIDELINES:</strong> The institution has published or has readily available policies on student grievances and complaints, refunds, etc. The institution does not have a history of adverse findings against it with respect to violation of these policies. Records of student complaints are maintained for a six-year period. The institution clearly defines and distinguishes between the different types of credits it offers and between degree and non-degree credit, and accurately identifies the type and meaning of the credit awarded in its transcripts. The institution’s policy on grading and student evaluation is clearly stated and provides opportunity for appeal as needed.</td>
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<td>X CFR 2.12</td>
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<tr>
<th>1.7</th>
<th>The institution exhibits integrity and transparency in its operations, as demonstrated by the adoption and implementation of appropriate policies and procedures, sound business practices, and regular evaluation of its performance in these areas. The institution’s finances are regularly audited by qualified independent auditors.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GUIDELINES:</strong> The institution is committed to honest and open communication with the Accrediting Commission; to undertaking the accreditation review process with seriousness and candor; to informing the Commission promptly of any matter that could materially affect the accreditation status of the institution; and to abiding by Commission policies and procedures, including all substantive change policies.</td>
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<td>X CFR 3.4, 3.6, 3.7</td>
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<tr>
<th>1.8</th>
<th>The institution is committed to honest and open communication with the Accrediting Commission; to undertaking the accreditation review process with seriousness and candor; to informing the Commission promptly of any matter that could materially affect the accreditation status of the institution; and to abiding by Commission policies and procedures, including all substantive change policies.</th>
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<tbody>
<tr>
<td>Compliance Audit Policy</td>
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<td>Complaints and Third Party Comments Policy</td>
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<tr>
<td>Degree-Level Approval Policy</td>
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<tr>
<td>Disclosure of Accrediting Documents and Commission Actions Policy</td>
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<td>Honorary Degrees Policy</td>
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<td>Legal Fees Policy</td>
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<tr>
<td>Maintenance of Accreditation Records Policy</td>
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<tr>
<td>Matters Under Litigation Policy</td>
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<td>Substantive Change Policy; Substantive Change Manual</td>
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<tr>
<td>Unannounced Visits Policy</td>
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</tbody>
</table>
STANDARD 2
Achieving Educational Outcomes Through Core Functions

- Teaching and Learning
- Scholarship and Creative Activity
- Student Learning and Success

The institution achieves its purposes and attains its educational outcomes at the institutional and program level through the core functions of teaching and learning, scholarship and creative activity, and support for student learning and success. The institution demonstrates that these core functions are performed effectively by evaluating valid and reliable evidence of learning and by supporting the success of every student.

### Teaching and Learning
Criteria for Review

<table>
<thead>
<tr>
<th>2.1</th>
<th>The institution's educational programs are appropriate in content, standards of performance, rigor, and nomenclature for the degree level awarded, regardless of mode of delivery. They are staffed by sufficient numbers of faculty qualified for the type and level of curriculum offered.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2</td>
<td>All degrees—undergraduate and graduate—awarded by the institution are clearly defined in terms of entry-level requirements and levels of student achievement necessary for graduation that represent more than simply an accumulation of courses or credits. The institution has both a coherent philosophy, expressive of its mission, which guides the meaning of its degrees and processes that ensure the quality and integrity of its degrees.</td>
</tr>
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</table>

#### GUIDELINES:
The content, length, and standards of the institution’s academic programs conform to recognized disciplinary or professional standards and are subject to peer review.

X CFR 3.1

| 2.2a | Baccalaureate programs engage students in an integrated course of study of sufficient breadth and depth to prepare them for work, citizenship, and life-long learning. These programs ensure the development of core competencies including, but not limited to, written and oral communication, quantitative reasoning, information literacy, and critical thinking. In addition, baccalaureate programs actively foster creativity, innovation, an appreciation for diversity, ethical and civic responsibility, civic engagement, and the ability to work with others. Baccalaureate programs also ensure breadth for all students in cultural and aesthetic, social and political, and scientific and technical knowledge expected of educated persons. Undergraduate degrees include significant in-depth study in a given area of knowledge (typically described in terms of a program or major). |

#### GUIDELINES:
The institution has a program of General Education that is integrated throughout the curriculum, including at the upper division level, consisting of a minimum of 45 semester units (or the equivalent), together with significant study in depth in a given area of knowledge (typically described as a major).

X CFR 3.1-3.3, 4.3-4.4

- Distance Education Policy
- Credit Hour Policy
- Credit for Prior Experiential Learning Policy
- Degree Definitions Policy
- Dual Degree Policy
- Joint Degree Policy
- Study Abroad Policy
- Transfer Credit Policy

X CFR 3.1-3.3, 4.3-4.4
### Teaching and Learning

#### Criteria for Review

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Guidelines</th>
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<tr>
<td>2.2b. The institution's graduate programs establish clearly stated outcomes differentiated from and more advanced than undergraduate programs in terms of admissions, curricula, standards of performance, and student learning outcomes. Graduate programs foster students' active engagement with the literature of the field and create a culture that promotes the importance of scholarship and/or professional practice. Ordinarily, a baccalaureate degree is required for admission to a graduate program.</td>
<td><strong>GUIDELINES:</strong> Institutions offering graduate-level programs employ, at least, one full-time faculty member for each graduate degree program offered and have a preponderance of the faculty holding the relevant terminal degree in the discipline. Institutions demonstrate that there is a sufficient number of faculty members to exert collective responsibility for the development and evaluation of the curricula, academic policies, and teaching and mentoring of students.</td>
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<tr>
<td>2.3 The institution's student learning outcomes and standards of performance are clearly stated at the course, program, and institutional level. These outcomes and standards are reflected in academic programs, policies, and curricula, and are aligned with advisement, library, and information and technology resources, and the wider learning environment.</td>
<td><strong>GUIDELINES:</strong> The institution is responsible for ensuring that out-of-class learning experiences, such as clinical work, service learning, and internships, are adequately resourced, well developed, and subject to appropriate oversight.</td>
</tr>
<tr>
<td>2.4 The institution's student learning outcomes and standards of performance are developed by faculty and widely shared among faculty, students, staff, and (where appropriate) external stakeholders. The institution's faculty take collective responsibility for establishing appropriate standards of performance and demonstrating through assessment the achievement of these standards.</td>
<td><strong>GUIDELINES:</strong> Student learning outcomes are reflected in course syllabi.</td>
</tr>
<tr>
<td>2.5 The institution's academic programs actively involve students in learning, take into account students' prior knowledge of the subject matter, challenge students to meet high standards of performance, offer opportunities for them to practice, generalize, and apply what they have learned, and provide them with appropriate and ongoing feedback about their performance and how it can be improved.</td>
<td><strong>GUIDELINES:</strong> The institution has an assessment infrastructure adequate to assess student learning at program and institution levels.</td>
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<tr>
<td>2.6 The institution demonstrates that its graduates consistently achieve its stated learning outcomes and established standards of performance. The institution ensures that its expectations for student learning are embedded in the standards that faculty use to evaluate student work.</td>
<td><strong>GUIDELINES:</strong> The institution has an assessment infrastructure adequate to assess student learning at program and institution levels.</td>
</tr>
<tr>
<td>2.7 All programs offered by the institution are subject to systematic program review. The program review process includes, but is not limited to, analyses of student achievement of the program's learning outcomes; retention and graduation rates; and, where appropriate, results of licensing examination and placement, and evidence from external constituencies such as employers and professional organizations.</td>
<td><strong>GUIDELINES:</strong> The institution has an assessment infrastructure adequate to assess student learning at program and institution levels.</td>
</tr>
</tbody>
</table>
**Scholarship and Creative Activity**

Criteria for Review

<table>
<thead>
<tr>
<th>GUIDELINES: Where appropriate, the institution includes in its policies for faculty promotion and tenure the recognition of scholarship related to teaching, learning, assessment, and co-curricular learning.</th>
<th>X CFR 3.2</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.8 The institution clearly defines expectations for research, scholarship, and creative activity for its students and all categories of faculty. The institution actively values and promotes scholarship, creative activity, and curricular and instructional innovation, and their dissemination appropriate to the institution's purposes and character.</td>
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<td>2.9 The institution recognizes and promotes appropriate linkages among scholarship, teaching, assessment, student learning, and service.</td>
<td>X CFR 3.2</td>
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</table>

**Student Learning and Success**

Criteria for Review

<table>
<thead>
<tr>
<th>GUIDELINES: The institution benchmarks its retention and graduation rates against its own aspirations as well as the rates of peer institutions.</th>
<th>X CFR 4.1-4.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.10 The institution demonstrates that students make timely progress toward the completion of their degrees and that an acceptable proportion of students complete their degrees in a timely fashion, given the institution's mission, the nature of the students it serves, and the kinds of programs it offers. The institution collects and analyzes student data, disaggregated by appropriate demographic categories and areas of study. It tracks achievement, satisfaction, and the extent to which the campus climate supports student success. The institution regularly identifies the characteristics of its students; assesses their preparation, needs, and experiences; and uses these data to improve student achievement.</td>
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<tr>
<td>2.11 Consistent with its purposes, the institution offers co-curricular programs that are aligned with its academic goals, integrated with academic programs, and designed to support all students' personal and professional development. The institution assesses the effectiveness of its co-curricular programs and uses the results for improvement.</td>
<td>X CFR 4.3-4.5</td>
</tr>
<tr>
<td>2.12 The institution ensures that all students understand the requirements of their academic programs and receive timely, useful, and complete information and advising about relevant academic requirements.</td>
<td>GUIDELINES: Recruiting materials and advertising truthfully portray the institution. Students have ready access to accurate, current, and complete information about admissions, degree requirements, course offerings, and educational costs. X CFR 1.6</td>
</tr>
<tr>
<td>Institutional Disclosure of Information for Students Policy</td>
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<tr>
<td>2.13 The institution provides academic and other student support services such as tutoring, services for students with disabilities, financial aid counseling, career counseling and placement, residential life, athletics, and other services and programs as appropriate, which meet the needs of the specific types of students that the institution serves and the programs it offers.</td>
<td>X CFR 3.1</td>
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<tr>
<td>Collegiate Athletics Policy</td>
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<td>International Students Policy</td>
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<td>2.14 Institutions that serve transfer students provide clear and accurate information about transfer requirements, ensure equitable treatment under academic policies, provide such students access to student services, and ensure that they are not unduly disadvantaged by transfer requirements.</td>
<td>GUIDELINES: Formal policies or articulation agreements are developed with feeder institutions that minimize the loss of credits through transfer credits. X CFR 1.6</td>
</tr>
<tr>
<td>Transfer Credit Policy</td>
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<td>Prior Experiential Learning Policy</td>
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STANDARD 3

Developing and Applying Resources and Organizational Structures to Ensure Quality and Sustainability

The institution sustains its operations and supports the achievement of its educational objectives through investments in human, physical, fiscal, technological, and information resources and through an appropriate and effective set of organizational and decision-making structures. These key resources and organizational structures promote the achievement of institutional purposes and educational objectives and create a high-quality environment for learning.

Faculty and Staff
Criteria for Review

<table>
<thead>
<tr>
<th>3.1 The institution employs faculty and staff with substantial and continuing commitment to the institution. The faculty and staff are sufficient in number, professional qualification, and diversity and to achieve the institution's educational objectives, establish and oversee academic policies, and ensure the integrity and continuity of its academic and co-curricular programs wherever and however delivered.</th>
<th>GUIDELINES: The institution has a faculty staffing plan that ensures that all faculty roles and responsibilities are fulfilled and includes a sufficient number of full-time faculty members with appropriate backgrounds by discipline and degree level.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collective Bargaining Policy</td>
<td>X CFR 2.1, 2.2b</td>
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<tr>
<td>Diversity Policy</td>
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<tr>
<th>3.2 Faculty and staff recruitment, hiring, orientation, workload, incentive, and evaluation practices are aligned with institutional purposes and educational objectives. Evaluation processes are systematic and are used to improve teaching and learning. For instructional faculty and other teaching staff, evaluation involves the consideration of evidence of teaching effectiveness, including peer and student evaluations of instruction.</th>
<th>X CFR 1.7, 4.3-4.4</th>
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<tr>
<th>3.3 The institution maintains appropriate and sufficiently supported faculty and staff development activities designed to improve teaching, learning, and assessment consistent with the institution's educational objectives.</th>
<th>GUIDELINES: The institution engages full-time, non-tenure-track, adjunct, and part-time faculty members in such processes as assessment, program review, and faculty development.</th>
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<td>X CFR 2.1, 2.2b, 4.4</td>
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</table>
### Fiscal, Physical, and Information Resources

**Criteria for Review**

**3.4** The institution is financially stable and has unqualified independent financial audits and resources sufficient to ensure long-term viability. Resource planning and development include realistic budgeting, enrollment management, and diversification of revenue sources. Resource planning is integrated with all other institutional planning. Resources are aligned with educational purposes and objectives.

**GUIDELINES:** An institution has not experienced an operational deficit for a minimum of three years. If an institution has an accumulated deficit, it has realistic plans to eliminate that deficit.

*X CFR 1.1, 1.2, 2.10, 4.6, 4.7*

**3.5** The institution provides access to information and technology resources sufficient in scope, quality, currency, and kind at physical sites and online, as appropriate, to support its academic offerings and the research and scholarship of its faculty, staff, and students. These information resources, services, and facilities are consistent with the institution's educational objectives and are aligned with student learning outcomes.

**GUIDELINES:** The institution provides training and support for faculty members who use technology in instruction. Institutions offering graduate programs have sufficient fiscal, physical, information, and technology resources and structures to sustain these programs and to create and maintain a graduate-level academic culture.

*Distance Education Policy*

*X CFR 1.2, 1.2, 2.2*

### Organizational Structures and Decision-Making Processes

**Criteria for Review**

**3.6** The institution’s leadership, at all levels, is characterized by integrity, high performance, appropriate responsibility, and accountability.

**3.7** The institution’s organizational structures and decision-making processes are clear and consistent with its purposes, support effective decision making, and place priority on sustaining institutional capacity and educational effectiveness.

**GUIDELINES:** The institution establishes clear roles, responsibilities, and lines of authority.

*Independent Governing Boards Policy*
*Institutional Units in a System Policy*
*Institutions with Related Entities Policy*

**3.8** The institution has an independent governing board or similar authority that, consistent with its legal and fiduciary authority, exercises appropriate oversight over institutional integrity, policies, and ongoing operations, including hiring and evaluating the chief executive officer.

**GUIDELINES:** The governing body comprises members with the diverse qualifications required to govern an institution of higher learning. It regularly engages in Self-review and training to enhance its effectiveness.

*X CFR 1.5-1.7*

**3.9** The institution has a full-time chief executive officer and a chief financial officer whose primary or full-time responsibilities are to the institution. In addition, the institution has a sufficient number of other qualified administrators to provide effective educational leadership and management.

**GUIDELINES:** The institution clearly defines the governance roles, rights, and responsibilities of all categories of full- and part-time faculty.

*X CFR 2.1, 2.4, 2.5, 4.3, 4.4*
Creating an Organization Committed to Quality Assurance, Institutional Learning, and Improvement

- Quality Assurance Processes

- Institutional Learning and Improvement

The institution engages in sustained, evidence-based, and participatory self-reflection about how effectively it is accomplishing its purposes and achieving its educational objectives. The institution considers the changing environment of higher education in envisioning its future. These activities inform both institutional planning and systematic evaluations of educational effectiveness. The results of institutional inquiry, research, and data collection are used to establish priorities, to plan, and to improve quality and effectiveness.

### Quality Assurance Processes

<table>
<thead>
<tr>
<th>Criteria for Review</th>
<th>X CFR 2.7, 2.10</th>
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<tr>
<td>4.1 The institution employs a deliberate set of quality-assurance processes in both academic and non-academic areas, including new curriculum and program approval processes, periodic program review, assessment of student learning, and other forms of ongoing evaluation. These processes include: collecting, analyzing, and interpreting data; tracking learning results over time; using comparative data from external sources; and improving structures, services, processes, curricula, pedagogy, and learning results.</td>
<td>X CFR 2.7, 2.10</td>
</tr>
<tr>
<td>Resource Guide to Program Review</td>
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4.2 The institution has institutional research capacity consistent with its purposes and characteristics. Data are disseminated internally and externally in a timely manner, and analyzed, interpreted, and incorporated in institutional review, planning, and decision-making. Periodic reviews are conducted to ensure the effectiveness of the institutional research function and the suitability and usefulness of the data generated.

| X CFR 1.2, 2.10 |
### Institutional Learning and Improvement

#### Criteria for Review

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<tr>
<th>4.3 Leadership at all levels, including faculty, staff, and administration, is committed to improvement based on the results of inquiry, evidence, and evaluation. Assessment of teaching, learning, and the campus environment—in support of academic and co-curricular objectives—is undertaken, used for improvement, and incorporated into institutional planning processes.</th>
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<tr>
<td><strong>GUIDELINES:</strong> The institution has clear, well-established policies and practices—for gathering, analyzing, and interpreting information—that create a culture of evidence and improvement.</td>
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<td>X CFR 2.2-2.6</td>
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<tr>
<th>4.4 The institution, with significant faculty involvement, engages in ongoing inquiry into the processes of teaching and learning, and the conditions and practices that ensure that the standards of performance established by the institution are being achieved. The faculty takes responsibility for evaluating the effectiveness of teaching and learning processes and uses the results for improvement of student learning and success. The findings from such inquiries are applied to the design and improvement of curricula, pedagogy, and assessment methodology.</th>
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<tr>
<td><strong>GUIDELINES:</strong> Periodic analysis of grades and evaluation procedures are conducted to assess the rigor and effectiveness of grading policies and practices.</td>
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<td>X CFR 2.2-2.6</td>
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<th>4.5 Appropriate stakeholders, including alumni, employers, practitioners, students, and others designated by the institution, are regularly involved in the assessment and alignment of educational programs.</th>
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<td>X CFR 2.6, 2.7</td>
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<th>4.6 The institution periodically engages its multiple constituencies, including the governing board, faculty, staff, and others, in institutional reflection and planning processes that are based on the examination of data and evidence. These processes assess the institution's strategic position, articulate priorities, examine the alignment of its purposes, core functions, and resources, and define the future direction of the institution.</th>
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<td>X CFR 1.1, 3.4</td>
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<th>4.7 Within the context of its mission and structural and financial realities, the institution considers changes that are currently taking place and are anticipated to take place within the institution and higher education environment as part of its planning, new program development, and resource allocation.</th>
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<td>X CFR 1.1, 2.1, 3.4</td>
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The Commission has put in place multiple approaches to quality assurance. Standing committees focus on specific aspects of institutional functioning; these committees are described below. The institutional review process (IRP) for reaffirmation of accreditation, described in detail in the following section of this Handbook, is at the heart of WASC's quality-assurance processes. In addition, all WASC-accredited institutions submit detailed annual reports. Under some circumstances, special visits and/or interim reports may also be requested.

WASC also offers educational programming to assist institutions in developing expertise in areas relevant to the Standards. Information on educational programming may be found at www.wascsenior.org/seminars.

Standing Committees
WASC has five standing-committees:

- The Eligibility Review Committee (ERC) conducts reviews of the applications received from institutions seeking WASC accreditation to determine whether an institution has the potential to meet the Standards and other requirements.

- The Financial Review Committee (FRC) conducts reviews of financial data to evaluate the financial viability of institutions and identifies institutions that may require follow-up action or monitoring.

- The Interim Report Committee (IRC) reviews interim reports and supporting documents, following up on recommendations that have been made in a Commission action letter or previous Interim Report.

- The Retention and Graduation Committee (RGC) reviews institutions' reports on retention and graduation rates and time to degree at both the undergraduate and graduate levels, if necessary making suggestions for improvement and follow-up steps, including areas to be addressed in an institution's next comprehensive review.

- The Substantive Change Committee (SCC) reviews proposals for changes that may significantly affect an institution's quality, objectives, scope, or control. The Commission requires prior approval of institutional substantive changes in degree programs, methods of delivery, and organizational changes.

The committees are comprised of representatives of institutions in the region who are appointed by the President and/or Executive Vice President of WASC. For reaccreditation, all committees play a role, but the Financial Review and Retention and Graduation Committees are of particular importance. Their reports become a key part of the accreditation history that institutions are asked to review during the self-study and discuss in their institutional report.
The Institutional Review Process

This section is designed to assist institutions as they address WASC's 2013 Standards of Accreditation for reaffirmation of accreditation. It provides a description of the steps involved in an institution's reaccreditation process, the components that need to be included in the institutional report, interactions with the evaluation team, and other details.

The institutional review process (IRP) described below applies to institutions that are seeking reaffirmation of accreditation. Other models apply for institutions seeking eligibility, candidacy, or initial accreditation, and for international institutions. At the Commission's discretion, institutions may be directed to follow a process that differs from the one described in the pages that follow, and those institutions will be guided by other documents describing those reviews.

All institutions need to demonstrate that they are in substantial compliance with the 2013 Standards of Accreditation and with those federal regulations that the Commission is required to oversee the implementation of. Within this context, the goal of the process is the improvement of student learning, student success, and institutional effectiveness.

Institutions can typically expect to spend two to three years pursuing reaffirmation of WASC accreditation. Briefly stated, the IRP involves an analysis of the institution's financial status by the Financial Review Committee; an analysis of its retention and graduation rates by the Retention and Graduation Committee; an off-site review by an evaluation team; and a visit to the institution by the evaluation team. These steps are followed by a Commission decision on an institution's reaccreditation. A description of these steps in roughly chronological order follows.

Student success includes not only strong retention and degree completion rates, but also high-quality learning. It means that students are prepared for success in their personal, civic, and professional lives, and that they embody the values and behaviors that make their institution distinctive.
Overview of the Institutional Review Process

The IRP has been redesigned in significant ways to build on the work already accomplished in the institution's last cycle of review and to focus the goals of the process on ensuring and improving student success and student learning. This redesign includes:

- Shortening the time frame for completion of the process from 5 years to fewer than 3 years
- Reducing the number of stages in the process from 3 to 2
- Streamlining the process into a day-long off-site review followed by a visit

### Preparation for the IRP

<table>
<thead>
<tr>
<th>Objective</th>
<th>How</th>
<th>When</th>
<th>What is reviewed by the team</th>
<th>Outcome</th>
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<tr>
<td>Workshop</td>
<td>3 semesters prior to off-site review to prepare institution for the IRP</td>
<td>2015-2018 (2) 3 semesters prior 2013-2014</td>
<td>Institutional report submitted 3 months prior to off-site review</td>
<td></td>
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<tr>
<td>Off-site reviews of retention and graduation and key financial indicators</td>
<td></td>
<td>2015 workshop 40 days after 2015 peer proposal</td>
<td>Summary regarding scope and length of the visit and composition of the team is communicated to the institution</td>
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### STEP 1: Off-site Review (1 day)

- Determine scope of the visit and identify any issues related to compliance with the Standards
- Team conducts off-site review including video conferences with institutional representatives
- Institutional report submitted 3 months prior to off-site review
- Evaluation areas identified in the off-site review and verify compliance with the Standards
- Visit to the institution by the team

### STEP 2: Visit (1 to 3 days)

- Preliminary team report
- Additional information from institution
- Final team report
- Confidential team recommendation to Commission

**Fewer than 3 years**

**Commission action taken at next scheduled meeting**

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Preparation for the Institutional Review Process

Institutional Review Process Workshop: Three semesters prior to the off-site review, institutions send a team consisting of their accreditation liaison officer (ALO) and other key leaders to this workshop. The workshop is designed for the entire cohort of institutions coming up for review in three semesters' time. The workshop addresses the overall structure of the institutional review and the tasks that institutions will be expected to undertake, such as the Self-review under the Standards (see Appendix A) and the Compliance Audit Checklist (see Appendix B). In addition to group activities and networking with other members of the cohort, the workshop offers an opportunity for teams to consult individually with their WASC staff liaison and to plan for the institution's reaccreditation.

In preparation for the workshop, institutions are expected to review their accreditation history. This includes the most recent team report and all Commission action letters received since the last reaffirmation; documents submitted to WASC since the last review for reaffirmation of accreditation; and WASC responses where applicable (e.g., recommendations related to substantive changes or an interim report).

The Self-Study

The self-study is the institution's process of gathering data and reflecting on its current functioning and effectiveness under the Standards. At the beginning of the IRP, the self-study provides the necessary preparation for later steps, but self-study continues throughout the two to three years of review for reaffirmation. A candid self-study, with broad engagement of the institutional community, provides the foundation for a high-quality institutional report.

Early in the self-study, the institution undertakes the Self-review under the Standards and completes the Compliance Audit Checklist. The Self-review under the Standards worksheet (Appendix A) offers a guide to the four Standards of Accreditation, the Criteria for Review under each Standard, and Guidelines. The questions it poses are designed to prompt conversation on institutional capacity and infrastructure, strengths, weaknesses, priorities, and plans for ensuring compliance with the Standards and institutional improvement.

The Compliance Audit Checklist (Appendix B) asks the institution to inventory its policies, procedures, systems, and documents. The Compliance Audit Checklist can help an institution identify those policies or processes that may need updating or replacement. When carrying out the Self-review under the Standards and completing the Compliance Audit Checklist, institutions are reminded that they need to include all degree levels, instructional modalities (e.g., online, hybrid), and locations.

Both the completed Self-review under the Standards worksheet and Compliance Audit Checklist, with links to supporting documentation, are submitted as exhibits with the institutional report. Their more important function, however, is to provide concrete prompts that help the institution to think collectively about its current status, its vision for the future, and what it may need to do to build on areas of strength, ensure improvement in areas of weakness, demonstrate compliance with federal regulations and WASC requirements, and accomplish a successful reaffirmation of accreditation.

Instead of beginning with the Self-review under the Standards and Compliance Audit Checklist, some institutions may prefer to frame their self-study around their own priorities and planning (e.g., strategic, financial, and/or academic). The accreditation review may then be adapted to support those goals. Some institutions administer surveys or conduct focus groups to identify top campus priorities.
Such approaches have the advantage of putting the emphasis on the institution's goals and then integrating them with WASC expectations; thus they may inspire broader campus engagement, stronger commitment to the process, and greater returns on the effort and resources invested. However, the institution chooses to begin, explicit attention to the Standards and documented compliance with federal laws and regulations are required.

After these initial steps, the focus of the self-study shifts to the specific components that form the institutional report. These components are described in detail below, along with prompts that can stimulate inquiry and reflection. Following the evaluation team's off-site review of the institutional report and exhibits, the self-study turns to preparation for the on-site review and ways the institution can respond to questions the team has raised or information it has requested for the visit.

Another essential element at the outset of the self-study is practical planning for how the institution will launch and conduct the accreditation review. Such planning addresses the financial and human resources that will be needed, the structures that will support progress, the timeline and milestones that must be met, and metrics that are available or must be generated. To the extent possible, institutions are encouraged to make use of existing resources, e.g., standing committees, an assessment office, program review, and institutional research, before introducing new processes.

The Institutional Report

Overview: The institutional report is based on the findings of the institution's self-study and includes the components described below. However, the institution may structure its report in the way it finds best suited to tell its story, reordering and perhaps combining these components as needed. A suggested order for the components follows:

- Introduction: Institutional Context; Response to Previous Commission Actions
- Compliance with WASC Standards and Federal Regulations; Self-review under the Standards: Compliance Audit
- Degree Programs: Meaning, Quality, and Integrity of Degrees
- Educational Quality: Student Learning, Core Competencies, and Standards of Performance at Graduation
- Student Success: Student Learning, Retention, and Graduation
- Quality Assurance and Improvement: Program Review; Assessment; Use of Data and Evidence
- Sustainability: Financial Viability; Preparing for the Changing Higher Education Environment
- Institution-specific Theme(s) (optional)
- Conclusion: Reflection and Plans for Improvement

The required and optional components of the institutional report are described below. Numbering is provided for ease of reference; it does not indicate relative value or a required order of presentation. In general, each component should include a discussion of the topic within the context of the institution; analyses undertaken; a self-assessment and reflection; areas of strength or significant progress and areas of challenge; and next steps, as appropriate. When plans are described, targets, metrics, and timelines should be included, as appropriate.

Length of the Report and Citation of Standards: The institutional report narrative is typically 12,000 to 18,000 words (approximately 50-75 pages double-spaced) in length. In the body of the report, it is helpful to hyperlink to relevant documents in the exhibits in order to support each assertion and to provide easy navigation for evaluators.

References to the Standards of Accreditation and citations of specific CFRs are included, as appropriate, in the body of the report. It is not necessary to cite all the CFRs because these will have been addressed in the Self-review under the Standards. Instead, the institutional report can cite only those CFRs of direct relevance to the topic under discussion (i.e., meaning of degrees, student learning and achievement, student success, quality assurance, planning for the future, and possibly an additional theme). Institutions may cite others, as relevant to their narratives.

When the institutional report is submitted, it should include a letter, signed by the president/chancellor, affirming the accuracy of the information presented and the institution's intention to comply fully with WASC Standards and policies (see Appendix C for the template letter).
Components of the Institutional Report

1: Introduction to the Institutional Report: Institutional Context; Response to Previous Commission Actions (CFR 1.1, 1.8)

This component offers a succinct history of the institution and an overview of the institution's capacity, infrastructure, and operations. Activities such as distance education, hybrid courses, and off-campus instructional locations are integrated into this discussion. Special attention is given to significant changes since the last accreditation review, e.g., in mission, student demographics, structure, instructional modalities, finances, and other institution-level matters. This is also the place to provide a description of institutional values, the qualities of the educational experience that make graduates of this institution unique, and how the institution is addressing its contribution to the public good (see Public Good policy). If a theme(s) is included, it is introduced here with an explanation of how it was selected and where in the report the theme appears.

As part of this component, the institution also reviews the most recent team report and action letter and responds to Commission recommendations. As relevant, substantive change reviews, annual and interim reports, and trends or patterns of complaints against the institution, if any, may be discussed. This overview of its accreditation history, operations, strengths, and challenges can help the institution identify issues and anticipate questions that evaluation team members may pose as the institutional review proceeds.

It should be noted that responses to the Retention and Graduation Committee (component 5) and Financial Review Committee (component 7) are to be discussed in other components of the narrative.

Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

■ What does the institution perceive as its strengths and challenges based, for example, on internal planning and evaluation?
■ How has the institution responded to earlier WASC recommendations?
■ How does the institution demonstrate its contribution to the public good?
■ What are the institution’s current priorities and plans?
■ How did the institution prepare for this review? Who was involved? What was the process? How did this work connect with existing priorities and projects?
■ What theme(s), if any, will be discussed and where in the report do they appear?
■ Has the institution provided any additional guidance that will help readers follow the organization of the report?

2: Compliance with Standards: Self-review Under the Standards; the Compliance Audit

Federal law requires every institution coming under review for reaffirmation of accreditation to demonstrate that it is in substantial compliance with the Standards and CFRs of the accrediting association. In addition, the Commission requires that the institution have in place policies and procedures considered essential for sound academic practice.

WASC provides two documents—the Self-review under the Standards and the Compliance Audit Checklist—to assist institutions in reflecting and reporting on their compliance with these expectations. In addition, these documents will assist institutions in identifying strengths and areas for improvement. The worksheet for the Self-review and the checklist for the compliance audit are located in Appendices A and B of this Handbook.

Institutions need to complete both forms and include them among the exhibits that accompany the institutional report when it is submitted. An analysis and discussion of the institution's self-assessment and any plans emerging from these two exercises are discussed in the narrative for this component of the institutional report.

The Self-review under the Standards systematically walks the institution through each of WASC’s Standards, CFRs, and Guidelines. It prompts the institution to consider where it stands in relation to capacity and educational effectiveness. As part of the self-study, the Self-review can stimulate useful conversations about the institution’s strengths, weaknesses, and future efforts.

Working through the Compliance Audit Checklist gives the institution an opportunity to inventory existing policies and procedures, highlight strengths, identify gaps, and note where documents may need to be updated or revised. This is also when institutions should check for compliance with WASC policies (see Appendix E).

Once the compliance audit has been completed and verified, subsequent reviews require only a notation of changes since the last review. The
evaluation team will review compliance during the off-site review and verify compliance during the visit.

Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

- Who participated in the Self-review under the Standards? What perspectives did different constituencies contribute?
- What was learned from the Self-review under the Standards? What are the institution's strengths and challenges? What issues and areas of improvement emerged?
- What was learned from the Compliance Audit Checklist? What are priorities in terms of creating, updating, or revising policies and procedures?
- What plans are in place to address areas needing improvement? What resources, fiscal or otherwise, may be required?

3: Degree Programs: Meaning, Quality, and Integrity of Degrees (CFRs 1.2, 2.2-4, 2.6, 2.7, 4.3)

Institutions are expected to define the meaning of the undergraduate and graduate degrees they confer and to ensure their quality and integrity. "Quality" and "integrity" have many definitions; in this context WASC understands them to mean a rich, coherent, and challenging educational experience, together with assurance that students consistently meet the standards of performance that the institution has set for that educational experience.

Traditionally, institutions have described their degrees either very generally (i.e., as something of self-evident value) or very concretely (in terms of specific degree requirements and preparation for specific professions). This component of the institutional report asks for something different: a holistic exploration of the middle ground between those two extremes, expressed in terms of the outcomes for students and the institutional mechanisms that support those outcomes. Defining the meaning of higher degrees can provide clarity for institutions, for students, and for a public that seeks to understand what unique educational experience will be had at that particular institution and what makes the investment in that experience worthwhile.

CFR 2.2 indicates that the degree as a whole should be more than the sum of its traditional parts: courses, credits, and grades. Exploring the meaning of a degree thus involves addressing questions about what the institution expects its students—undergraduates and graduates alike—to know and be able to do upon graduation, and how graduates embody the distinct values and traditions of the institution through their dispositions and future plans. It leads to analysis of how effectively courses, curricula, the co-curriculum, and other experiences are structured, sequenced, and delivered so that students achieve learning outcomes at the expected levels of performance in core competencies, in their majors or fields of specialization, in general education, and in areas distinctive to the institution. It means ensuring alignment among all these elements, and maintaining an assessment infrastructure that enables the institution to diagnose problems and make improvements when needed. Not least of all, it means developing the language to communicate clearly about the degree—what it demands and what it offers—to internal and external audiences.

Institutions may wish to draw on existing resources that can be used to understand and articulate the meaning of degrees. These include, for example, AAC&U's LEAP outcomes, the VALUE rubrics (which align with the LEAP outcomes), high-impact practices (or HIPS), and findings from NSSE, UCUES, CIRP, or the CSEQ (see Appendix F: Glossary for information on these resources). Institution-level learning outcomes (ILOs) may also play a useful role in defining the meaning of degrees. Identifying common outcomes at the division or school level rather than the institution level may make sense for some institutions.

Another resource is the draft Degree Qualifications Profile (DQP), developed with funding from the Lumina Foundation. This framework describes the meaning of three postsecondary degrees: associate, baccalaureate, and master's. The DQP lays out five broad areas of learning appropriate to postsecondary education and defines increasingly sophisticated levels of performance in these five areas. The DQP sets forth these expectations for content and proficiency at a high level of generality, on the assumption that there are many paths to the same goal. The DQP offers institutions—and the public—a point of reference and a common framework for talking about the meaning of degrees, but without prescriptions or standardization.

WASC does not require institutions to use the DQP or any other specific framework or resource. Rather, institutions are encouraged to develop their own strategies for articulating the meaning of their degrees in ways that make sense for their mission, values, and student populations.
Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

■ What does it mean for a graduate to hold a degree from the institution, i.e., what are the distinctive experiences and learning outcomes? For each degree level offered, what level of proficiency is expected? What is the overall student experience? How do these outcomes flow from the mission? (CFRs 1.1, 1.2, 2.1, 2.2) [Note: The discussion may focus on institutional learning outcomes that apply to all degree levels, or on the meaning of the degree at each level offered, i.e., associate, baccalaureate, master's, doctoral.]

■ What are the processes used at the institution to ensure the quality and rigor of the degrees offered? How are these degrees evaluated to assure that the degrees awarded meet institutional standards of quality and consistency? (CFRs 2.6, 2.7, 4.1, 4.3, 4.4, 4.6)

■ What was identified in the process of considering the meaning, quality, and integrity of the degrees that may require deeper reflection, changes, restructuring, etc.? What will be done as a result? What resources will be required?

■ What role does program review play in assessing the quality, meaning, and integrity of the institution's degree programs? (CFRs 2.7, 4.1)

4: Educational Quality: Student Learning, Core Competencies, and Standards of Performance at Graduation (CFRs 2.2, 2.4, 2.6, 2.7, 4.3)

Institutions of higher education have a responsibility to document that students acquire knowledge and develop higher-order intellectual skills appropriate to the level of the degree earned. This documentation is a matter of validating institutional quality and providing accountability as well as setting the conditions for improvement of learning.

In the 2013 Handbook, CFR 2.2a states that baccalaureate programs must: "ensure the development of core competencies including, but not limited to, written and oral communication, quantitative reasoning, information literacy, and critical thinking."

The institutional review process calls upon institutions to ensure that, upon graduation, students have achieved a defined level of performance in these five core competencies. If they wish, institutions may create their own limited list of essential higher-order competencies beyond the five listed above. They may also report student performance in majors or professional fields and in terms of institution-level learning outcomes that make the institution's graduates distinctive.

In all cases, the institution defines the core competencies for itself, sets the standard of student performance expected for each at graduation, and gathers evidence (which can be based on sampling) using the assessment methods of its choice. The institution analyzes the evidence according to its own judgment, reports on levels of performance in a way that makes sense for the institution (e.g., as a single score, or within ranges or qualitative categories), contextualizes the findings according to the mission and priorities of the institution, and formulates its own plans for improvement, if needed.

The five core competencies listed in the Handbook are relevant in virtually any field of study, though different fields may define these outcomes in different ways and may also include other outcomes. At many institutions, it is the assessment of learning in the major or professional field that engages faculty and produces the most useful findings. Thus institutions may wish to embed assessment of core competencies in assessment of the major or professional field. Capstones, portfolios, research projects, signature assignments, internships, and comprehensive examinations provide rich evidence that can be analyzed for multiple outcomes, both specialized and common to all programs, at a point close to graduation as determined by the institution. Whatever the expectations and findings, they need to be contextualized and discussed in this component of the institutional report.

It is the institution's responsibility to set standards of performance at graduation that are appropriate to the institution's mission, programs offered, student characteristics, and other criteria. The Commission is not seeking a minimum standard of performance that students would already meet upon entry or upon completion of lower-division general education courses. Nor does it seek a level common to all institutions irrespective of mission. Rather, the Commission seeks a standard of performance that is appropriately ambitious, that faculty and students can take pride in, and that can be explained and demonstrated to external audiences. If a given competency is not a priority for the institution or a particular field of study, expectations may legitimately be lower. Within the context of the institution's mission, the evaluation team then weighs the appropriateness of outcomes, standards, and evidence of attainment.
Standards of performance are best set through internal discussion among faculty and other campus educators. Although it is not required, institutions may benefit from external perspectives and collaboration with other institutions, e.g., through benchmarking or use of comparative data. For example, an institution may join a consortium that shares assessment findings and calibrates desired levels of performance.

Graduate programs and graduate-only institutions are expected to define and assess the generic intellectual competencies that are foundational in their field. CFR 2.2b, which refers to graduate programs, calls for expectations that are "clearly . . . differentiated from and more advanced than undergraduate programs in terms of . . . standards of performance and student learning outcomes." Graduate programs also set standards of performance, choose assessment methods, interpret the results, and act on findings in ways that make sense for the program and institution.

Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

- What knowledge, skills, values, and attitudes should students possess when they graduate with a degree from the institution? What are the key learning outcomes for each level of degree?
- For undergraduate programs, how do the institution's key learning outcomes align with the core competencies set forth in CFR 2.2a? (CFRs 2.3, 2.4)
- For graduate programs, how are graduate level outcomes developed? How do these outcomes align with CFR 2.2b? (CFRs 2.3, 2.4)
- What are the standards of performance for students? How are these standards set, communicated, and validated? (CFR 2.6)
- What methods are used to assess student learning and achievement of these standards? When is learning assessed in these areas (e.g., close to graduation or at some other milestone?) (CFRs 2.4, 2.6, 4.3)
- What evidence is there that key learning outcomes are being met? (CFR 2.6)
- What steps are taken when achievement gaps are identified? How are teaching and learning improved as a result of assessment findings? (CFRs 2.4, 2.6, 4.3, 4.4)
- What role does program review play in assessing and improving the quality of learning? (CFRs 2.7, 4.1)
- How deeply embedded is learning-centeredness across the institution? What is the evidence? (CFRs 4.1-4.3)

5: Student Success: Student Learning, Retention, and Graduation (CFRs 1.2, 2.7, 2.13)

Student success includes not only strong retention and degree completion rates, but also high-quality learning. It means that students are prepared for success in their personal, civic, and professional lives, and that they embody the values and behaviors that make their institution distinctive. Institutions' definitions of success will differ, given their unique missions, traditions, programs, and the characteristics of the students served.

The institution's Retention and Graduation Review report, submitted to the Retention and Graduation Committee prior to the off-site review, provides a foundation and point of departure for this component. If the institution has strong retention and graduation rates, this portion of the report may be relatively brief. If the Retention and Graduation Committee Review or an earlier team report has identified challenges, the institution will need to respond in more detail.

In either case, this component needs to address, explicitly, the learning and personal development dimensions of student success. Since aggregate data can mask disparities among student subpopulations, institutions are advised to disaggregate their data, including but going beyond the demographic characteristics required by the retention and graduation template. For example, analysis using several variables (such as students' choice of major, participation in research, study abroad, leadership roles, admission to honor societies, pass rates on licensure examinations, and admission to graduate programs) may yield useful information.

While student success is the responsibility of the entire institution, student affairs and academic support can play a particularly critical role. Here, too, a well-developed assessment infrastructure can provide the data to document and improve student success.
Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

- How is student success defined (accounting for both completion and learning), given the distinctive mission, values, and programs offered, and the characteristics of the students being served? (CFRs 2.4, 2.6, 2.10, 2.13)
- How is student success promoted, including both completion and learning? What has been learned about different student subpopulations as a result of disaggregating data? (CFRs 2.3, 2.10-2.14)
- What role does program review play in assessing and improving student success? (CFRs 2.7, 4.1)
- Which programs are particularly effective in retaining and graduating their majors? What can be learned from them? What is the students' experience like? (CFRs 2.6, 2.10, 2.13)
- How well do students meet the institution's definition of student success? In what ways does the institution need to improve so that more students are successful? What is the timeline for improvement? How will these goals be achieved? (CFRs 2.6, 4.1-4.4)

6: Quality Assurance and Improvement: Program Review; Assessment; Use of Data and Evidence (CFRs 2.4, 2.6, 2.7, 2.10, 4.1-4.7)

Successful quality improvement efforts are broadly participatory, iterative, and evidence-based. This component of the institutional report includes a discussion of three basic tools of quality improvement—program review, assessment of student learning, and data collection and analysis—and presents the ways these tools inform the institution's decision making. Additionally, institutions are welcome to discuss other quality improvement approaches that have made a difference, if they wish.

Program review remains a priority for WASC. It is a natural nexus and point of integration for the collection of data and findings about the meaning of the degree, the quality of learning, core competencies, standards of student performance, retention, graduation, and overall student success. Because of the commitment of students to their degree programs and the loyalty of faculty to their disciplines, program review has great power to influence the quality of the educational experience. Program review can also provide insight into desirable future directions for the program and the institution.

In addition to implementing systematic program review, institutions are expected to periodically assess the effectiveness of their program review process. They can do so, for example, by reviewing the quality and consistency of follow-up after program reviews; determining the effectiveness with which the program review addresses achievement of program learning outcomes; and tracing how recommendations are integrated into institutional planning and budgeting.

Assessment, along with program review, is an essential tool that supports the goals and values of the accreditation process. "Assessing the assessment" should not crowd out the work of understanding student learning and using evidence to improve it. However, good practice suggests that it is wise to step back periodically, ask evaluative questions about each stage of the assessment cycle, and seek ways to make assessment more effective, efficient, and economical.

Data provide the foundation for effective program review, assessment of student learning, and other quality improvement strategies. However, to have an impact, data need to be turned into evidence and communicated in useful formats. The discussion of data collection, analysis, and use can include, for example, information about resources provided by the institutional research office (if one exists), software used to generate reports, access to data, processes for making meaning out of data (see the WASC Evidence Guide for more information), and mechanisms for communicating data and findings.

Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

- How have the results of program review been used to inform decision making and improve instruction and student learning outcomes? (CFRs 2.7, 4.1, 4.3, 4.4)
- What was identified in the process of examining the institution's program review process that may require deeper reflection, changes, restructuring? What will be done as a result? What resources will be required? (CFRs 2.7, 4.1, 4.4, 4.6)
- What has the program or institution learned as it carried out assessments of students' learning? How have assessment protocols, faculty development, choices of instruments, or other aspects of assessment changed as a result? (CFR 4.1)
- How adequate is the institutional research function? How effectively does it support and inform institutional decision-making, planning, and improvement? How well does it support assessment of student learning? (CFRs 4.2-4.7)
7: Sustainability: Financial Viability; Preparing for the Changing Higher Education Environment

(CFRs 3.4, 3.7, 4.1, 4.3-4.7)

To survive and thrive, institutions must not only cope with the present, but also plan for the future. In this component, WASC asks each institution first to describe its current status as a viable, sustainable organization; and second, to evaluate how it is poised to address fundamental changes facing higher education in the decade to come. In other words, what is the institution’s vision of a 21st century education, and what role will the institution play?

At its most basic, “sustainability” means the ability to support and maintain, to keep something intact and functioning properly. Institutional sustainability has at least two dimensions. Fiscal sustainability—that is, adequacy of financial resources and the appropriate alignment of those resources—is fundamental and has always been critical in any institutional review. Indeed, financial exigency has historically been regional accreditors’ single most frequent cause for sanctions. In a highly volatile financial environment, assurance of financial sustainability becomes even more critical.

In this component, the institution presents its current financial position. If the Financial Review Committee has raised any issues or made recommendations, the institution presents its response in this section of the report. Plans should include targets, metrics, and timelines.

A second facet of financial sustainability is alignment. It is essential that resources be allocated in alignment with the institution’s priorities. For an educational institution, clearly, a top priority is student learning and success; thus resource allocation needs to support educational effectiveness, along with other activities that advance knowledge, develop human capital, and allow the institution to learn, adapt, and thrive.

A third dimension of sustainability is the institution’s ability to read the evolving higher education landscape and anticipate ways in which the institution itself may need to change. New technologies, economic pressures, public concern about the quality of learning, demographic shifts, student preparation for college, new skills and knowledge needed for success, and alternatives to traditional degrees—all these shifts and many others are rapidly transforming the social, economic, and political environment in which higher education functions.

The task here is for institutions to develop a vision of their role in 21st century higher education. The choices institutions make in the face of these bracing conditions will influence their long-term success.

Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

- Under Standard 3, institutions are expected to "develop and apply resources and organizational structures to ensure sustainability." How can the institution demonstrate that its operations will remain financially sustainable over the next seven to 10 years? (CFRs 3.4 and 4.6)

- What has the Financial Review Committee said about the institution’s financial position? What is the response to these recommendations? (CFR 3.4)

- How well do financial allocations align with institutional priorities, particularly those related to the meaning, quality, and integrity of degrees offered; student learning and success; and processes for quality assurance, accountability, and improvement? (CFRs 3.4, 4.3)

- Under Standard 2, how does the institution identify and enhance the competencies that students will need to succeed in the future? (CFRs 1.2, 2.2)

- What role does program review play in developing a vision of 21st century education for individual programs and for the institution as a whole? (CFR 4.7)

- In what ways can the institution ensure that educational effectiveness will continue during the period from the present to the next reaffirmation of accreditation? What systems and processes are in place? How deeply embedded are these initiatives in institutional systems and culture? How is educational effectiveness prioritized in the institution’s formal plans? (CFRs 3.1-3.10, 4.1, 4.2, 4.6)

- How does the institution demonstrate that it is a learning organization? What evidence can be put forward? (CFRs 4.3-4.7)

- What resources have been committed to assessment of learning and improvement of student performance? How are decisions about levels of support made? How is support maintained even in times of constrained resources? (CFRs 3.6, 3.7, 4.3, 4.4)

- Of the changes taking place globally, nationally, locally, and in higher education, which ones will affect the institution most strongly in the next seven to 10 years? What is the institution’s vision of education for the coming decade? For the more distant future? How is the institution anticipating, planning for, and adapting to such changes? (CFRs 4.6, 4.7)

- What specific skills does the institution possess or need to develop in order to engage with developments impacting its future, including those occurring globally? (CFRs 3.1, 3.2, 4.6, 4.7)
8: Institution-specific Theme(s) (optional)  
(CFRs as appropriate)

The accreditation review is an opportunity for institutions to align their own priorities with WASC's quality improvement process. In the 2001 Handbook, the theme-based approach to self-study offered institutions the clearest opportunity for this kind of campus-wide engagement and improvement, and the vast majority of institutions took advantage of it. Thus the 2013 Handbook continues to offer this option. In addition to addressing the components described above, institutions may identify and study one or two themes that are specific to the institution and of critical importance. The theme may emerge from institutional planning or other processes; in any case, it should connect to the Standards.

If the institutional report includes a theme, the component on institutional context is the place to introduce the theme and orient the reader to the part(s) of the institutional report where the theme will be developed. Origins of the theme, analysis, recommendations for action, and related steps can be included as a separate component of the institutional report, or the theme can be woven into one of the other components, as appropriate. Whatever the institution decides, it is helpful to inform the WASC staff liaison of the theme early on, so that an individual with relevant background can be included on the evaluation team.

Prompts: The following prompts may be helpful in getting started, but the institution is not required to follow these prompts or respond to them directly.

- What one or two themes would advance institutional priorities and add value to the accreditation review?

- What are the institution's goals or outcomes in pursuing this theme? What is the timeline, what evidence and metrics will show progress, and what resources (financial, human, other) will be required?

9: Conclusion: Reflection and Plans for Improvement

In this concluding component, the institution assesses the impact of the self-study, reflects on what it has learned in the course of the self-study, and discusses what it plans to do next. This is also the place to highlight what the institution has learned about key areas of exemplary institutional performance.

Exhibits

Exhibits are attached to the institutional report and support the narrative. By being selective about what to include, an institution can avoid excessive documentation, which can be challenging for institutions to collect and for evaluation team members and the Commission to read.

The exhibits include the following items:

- A. Completed Self-Review under the Standards worksheet with a summary of areas identified as needing to be addressed and plans to address them.
- B. Completed Compliance Audit Checklist with an explanation for any missing documents.
- C. Required data exhibits.
- D. Institution-selected exhibits that support the institutional report's narrative.

Program review remains a priority for WASC. It is a natural nexus and point of integration for the collection of data and findings about the meaning of the degree, the quality of learning, core competencies, standards of student performance, retention, graduation, and overall student success.
Interactions with the Evaluation Team

Throughout the institutional review process, representatives of the institution interact with evaluation team members and WASC staff. Interaction with the Commission occurs at the end of the institutional review process when the Commission makes a decision about the institution’s accreditation status.

The evaluation team, composed primarily of experienced educators from peer institutions as well as other experts identified to address specific needs of the institution, has the responsibility to evaluate the institution under the Standards of Accreditation. The evaluation team’s work involves: reading the institutional report, exhibits, and other documents; participating in the off-site review; conducting a visit; and preparing a report of its findings and recommendations.

Every institution seeking candidacy, initial accreditation, or reaccreditation has a WASC staff liaison. The liaison, together with other staff members, provides support and guidance to the institution, the evaluation team, and the Commission throughout the review process.

The Off-site Review

The focus of the off-site review is to make preliminary findings based upon the institutional report and supplementary documents. The institution submits its institutional report and exhibits 12 weeks prior to the off-site review. The evaluation team then convenes to evaluate the institution and its compliance with the Standards. The evaluation team incorporates into its analysis the findings of the Retention and Graduation and Financial Review Committees.

During the course of the one-day review, the evaluation team engages in conversations with institutional representatives via video conference. At the end of the off-site review, evaluation team members share impressions, note issues for follow-up, formulate questions for the on-site review, and identify additional documents they may wish to examine before or during the visit. The evaluation team also either confirms the scheduling of the visit that the institution has requested (one or two semesters later) or it recommends a different interval.

Following the off-site review, the institution receives a summary regarding the scope and length of the visit, the composition of the team, and additional narrative or documents that the team may wish to see before or at the time of the visit. WASC staff then work with the institution to make arrangements for the visit.

The Visit

The visit takes place one to two semesters after the off-site review. The preferred interval is suggested by the institution in its outline of the institutional report and subsequently confirmed or rescheduled by the team. During the visit, evaluation team members meet with campus representatives to follow up on outstanding issues and verify or revise preliminary findings concerning both compliance and improvement. The institution has an opportunity to demonstrate how it has responded to issues raised or questions asked at the time of the off-site review and to fill any gaps in the picture it wishes to present of itself.

Following the visit, the team shares its draft team report with the institution for correction of errors of fact. The team then finalizes the team report and forwards it to the Commission for action.