

Handbook for Collaborative Reviews

Processes for Reviews by the
Middle States Commission on Higher Education
and Other Accreditors, Agencies, and
Organizations

Middle States Commission on Higher Education

[Blank page]



Handbook for Collaborative Reviews

Processes for Reviews by the
Middle States Commission on Higher Education and
Other Accreditors, Agencies, and Organizations

Middle States Commission on Higher Education

Published by the

Middle States Commission on Higher Education
3624 Market Street
Philadelphia, PA 19104

Telephone: 215-662-5606

Fax: 215-662-5501

www.msache.org

© 2002, Copyright by the
Middle States Commission on Higher Education

All rights reserved.

First edition.

This publication replaces
*Collaborative Evaluations by
Regional and Specialized Accrediting Agencies:
Guidelines and Procedures* (1997).

Permission is granted to colleges and universities
within the jurisdiction of the Middle States
Commission on Higher Education to photocopy
this handbook for the purposes of institutional
self-study and peer review. The text of this handbook
may be downloaded from the Commission's
website, and bound copies may be purchased
through the Publications Order Form,
also available on the website.

Printed in the United States of America

Contents

Acknowledgements	iv
Introduction	1
Purposes of Collaborative Review	2
What is a Collaborative Review?	3
An Overview of the Collaborative Review Process	4
Qualities That Foster Success	6
Initiating the Collaborative Review Process	7
The Collaborative Agreement	9
Preparing the Internal Institutional Review Document	15
Selecting the Team and the Chair	18
The Team Report and Recommendations	19
Accreditation and Other Actions Following Team Visits	20
Cooperation with Governmental Agencies	20
Collaborative Reviews with Other Organizations	23
Evaluating the Collaborative Review Process	24
Conclusion	25
Appendix:	
ASPA Code of Good Practice	26
Notes	30

Acknowledgements

The Commission is grateful for the leadership of Cynthia A. Davenport, Executive Director of the Association of Specialized and Professional Accreditors, and the support of that organization's membership, which endorsed the current *Handbook for Collaborative Reviews* at its meeting on April 8, 2002.

The following individuals contributed to developing this publication:

Carol L. Bobby, MSCHE Fellow (2000–01) and Executive Director, Council for Accreditation of Counseling and Related Educational Programs (CACREP); Jean Avnet Morse, MSCHE Executive Director; and George Santiago, Jr., MSCHE Executive Associate Director.

The representatives of specialized accreditors who reviewed drafts, included:

Cynthia A. Davenport; Karen P. Moynahan, Associate Director, National Office for Arts Accreditation; Michael B. Greenbaum, MSCHE Commissioner and Vice Chancellor/Chief Administrative Officer, Jewish Theological Seminary of America, who has chaired teams for the Association of Theological Schools; and Carol L. Bobby.

The *Handbook* updates *Collaborative Evaluations by Regional and Specialized Accrediting Agencies: Guidelines and Procedures*, which was the product of a national task force jointly created under the auspices of the Middle States Commission on Higher Education and ASPA. The members, with their affiliations as of 1997, included:

Cynthia A. Davenport, Executive Director, ASPA; Carol L. Bobby, Executive Director, CACREP; Larry A. Braskamp, Director, Council for Higher Education Accreditation; Jay Levrio, Director, Council on Podiatric Medical Evaluation; Marilyn Fay, Executive Director, Joint Review Committee on Education in Radiologic Technology; Stephen D. Spangehl, Associate Director, Commission on Institutions of Higher Education, North Central Association of Colleges and Schools; Peggy Maki, Associate Director, Commission on Institutions of Higher Education, New England Association of Schools and Colleges; Karen P. Moynahan, Associate Director, National Association of Schools of Theatre, Art, and Design; and Arturo U. Iriarte, MSCHE Executive Associate Director.

Handbook for Collaborative Reviews

Introduction

The *Handbook for Collaborative Reviews* outlines Middle States Commission on Higher Education (MSCHE) processes to facilitate “collaborative reviews” between MSCHE and other specialized and professional accreditors, governmental agencies, and other organizations that are selected by the institution being reviewed.

Creation of Collaborative Reviews

MSCHE first developed joint evaluations with specialized accreditors in 1952. These efforts laid a foundation for the types of reviews that MSCHE now conducts. The most significant feature of collaborative reviews today is that typically the institution produces one self-study report, and one visiting team issues a single report.

Guidelines for collaborative review were developed in 1997 by a national task force representing regional and specialized accreditors, the Association of Specialized and Professional Accreditors, and the Council for Higher Education Accreditation, as described on the Acknowledgement page. Their efforts resulted in the publication of *Collaborative Evaluations by Regional and Specialized Accrediting Agencies: Guidelines and Procedures*.

Pilot Project to Test Collaborative Reviews

MSCHE then conducted a four-year pilot project to test the guidelines. It included 21 institutional reviews and involved two-year, specialized, liberal arts, comprehensive, and doctorate-granting institutions. The participating specialized and professional accrediting agencies included the Association to Advance Collegiate Schools of Business (AACSB),

The most significant feature of collaborative reviews today is that typically the institution produces one self-study report, and one visiting team issues a

the Accreditation Board for Engineering and Technology (ABET), American Council on Pharmaceutical Education (ACPE), Association of Theological Schools in the U.S. and Canada (ATS), Accreditation Council on Optometric Education (ACOE), National Association of Schools of Art and Design (NASAD), National Association of Schools of Theatre (NAST), and the Puerto Rico Council on Higher Education (PRCHE). Most collaborative reviews involved only MSCHE and one partnering agency.

This handbook broadens the review processes to include collaboration with organizations other than specialized and professional accrediting agencies. The revised guidelines incorporate improvements developed during the pilot project and those suggested by the 102 institutional and agency representatives who were surveyed and/or interviewed by MSCHE to evaluate the pilot project. In addition, informal assessment and feedback from presidents and others following these visits, provided valuable information for revising the 1997 guidelines.

Purposes of Collaborative Review

The purpose of collaborative reviews is to provide better service to institutions:

- eliminating duplicative procedures by using one set of review materials for more than one reviewing organization;
- enabling institutions to improve their planning processes by integrating the various perspectives represented by the different reviewing entities in a single, coordinated process;
- reducing the financial cost of accreditation and otherwise conserving institutional resources;
- simplifying required data collection and analysis;
- providing a setting for the institution to initiate a consultative discussion about resource allocation if the institution perceives any conflict or competing demands between recommendations made by participating accrediting agencies; and
- integrating the self-study process at the institution.

Participants in the MSCHE pilot project agreed that collaborative reviews were successful in these areas.

In addition, collaborative reviews have been successful in:

- providing the expertise of more than one organization;
- assisting institutions in conducting their own integrated planning processes; and
- benefiting students and graduates by strengthening the processes of institutional and specialized accreditors as they coordinate their reviews to assist institutions.

What is a Collaborative Review?

A collaborative review is a cooperative process, in which an accredited institution invites institutional, specialized, or professional accrediting agencies; state or federal agencies; or other organizations to join with MSCHE in a review of the institution. These reviewing organizations may choose whether to participate.

The collaborative process usually involves the completion of one institutional self-study (or other similar process and document), one on-site review by a single visiting team, and one coordinated report by the visiting team. The institution satisfies each organization's accreditation or other standards and requirements in a manner acceptable to the organization, and the organizations cooperate to avoid duplication.

To varying degrees, depending on the participating agencies, the results of the collaborative review process inform the agencies and the public of significant strengths and weaknesses of the institution and its programs.

Each reviewing organization uses the same information in reaching its decision, but each also uses its own decision-making processes and standards, and it issues its own accreditation or other decision.

An accredited institution may invite collaboration by more than two reviewing organizations, but an institution applying for initial MSCHE accreditation is not eligible for collaborative review under these guidelines.

The reviewing organizations and the institution may waive or modify these guidelines. Flexibility is essential for the success of collaboration.

A collaborative review is a cooperative process, in which an accredited institution invites...other organizations to join with MSCHE in a review of the institution.

An Overview of the Collaborative Review Process

There will be features of the collaborative review that are familiar to programmatic, institutional, and other reviewing organizations. For example, there will be a self-study process undertaken by the institution and participating programs, a self-study document generated from this process, a team that will visit the campus, a team report written and shared with the institution, and accreditation or other decisions rendered by each of the collaborating organizations. If non-accrediting agencies are included, they also may have overlapping processes.

The size of a combined team should be smaller than it would be if there were two separate teams, because the evaluators will review for both organizations.

The major differences between non-collaborative and collaborative reviews will focus on aspects of the structure of the self-study process and document, the visiting team's composition, and the format of the final team report. These differences are explored below.

The institution will submit a proposed outline or design for the format of its self-study report to each organization as soon as possible to produce early agreement between the institution and the organizations on the format and content of the single document. Some institutions choose to submit a draft prior to the self-study preparation visit by the staff liaisons of the participating organizations. Other institutions may wait until after the self-study preparation visit in order to seek guidance after the liaisons have consulted with each other and with the institution.

Arrangements for the on-site visit will be coordinated by staff from each of the cooperating organizations. Institutions will appoint a liaison (perhaps the chair of the steering committee, possibly with involvement of another institutional representative), who will serve as the primary contact with the staff persons throughout the self-study process and visit.

The reviewing organizations will propose a roster of potential evaluators, composed of balanced representation from the organizations, who will form a single visiting team for the on-site collaborative review. The size of a combined team should be smaller than it would be if there were two separate teams, because the evaluators will review for both organizations.

The team will be selected early in the process, and it will be organized according to the nature of the self-study and the needs of each institution.

The team typically will be led by a single chair (or, based on unique needs, by co-chairs), selected by consensus of the organizations and the institution. The needs of each institution and the identity of the participating organizations will determine the choice of a chair. Should co-chairs be selected, it may be necessary for the partnering organizations to delineate the roles and responsibilities of each to avoid confusion and conflict.

The on-site evaluation will follow the procedures of each agency and additional/amended procedures agreed to by all that are described later in this document. Members of the collaborative team will work together in validating the self-study, requesting additional information, interviewing personnel, and reviewing the facilities.

Team members representing each agency will be assigned to areas of review that best correlate with that agency's standards and criteria, as well as with institutional needs. However, they should not be constrained by these assignments. The agenda and schedule for the visit should be structured to accommodate the needs of the institution and those of the participating organizations.

The collaborative team will develop a preliminary draft of the team report prior to its departure from the institution. This draft, which may serve as the basis for an oral exit report to the institution, will provide information about the institution and programs in a manner that generally meets the needs of all organizations involved in the visit. Team findings for institutional and programmatic improvement will be agreed upon and included in the report.

The representatives of each organization may file separate addenda to the collaborative report in order to provide information that may be specific to the needs of their respective organizations, or they may choose to include the information in a single team report. This team report, along with any separate addenda, will be used by organizations in their separate decision making processes.

Responsibility for preparing and/or assigning the preparation of the core team report rests with the team chair(s). The team members representing each reviewing organization may prepare sections of the report that affect only their organization, or they may be asked to prepare sections (i.e., facilities or student support services) for the benefit of all organizations .

Separate recommendations for action by each organization will result from the final report, but it is hoped that the joint nature of the process will promote agreement among the organizations on recommended actions, to the extent that their standards and processes overlap in such areas of joint concern as general education and the assessment of student learning. Recommendations in the report refer to each organization's standards and will describe specific areas for improvement.

The exit interview with the institution should include a discussion of the findings of the entire team. At the final session with the host institution, the chair will present an oral summary of all major points to be made in the written team report, omitting only the proposed action regarding accreditation. At the request of the institution, the members of the collaborative team will consider in their meetings during the visit the impact of the recommendations in the report on the institution's resources and will discuss their findings, if appropriate, during the exit interview. The institution may determine who attends the oral report session.

If one of the organization's policies permits or requires its representatives to inform the institution of its recommendation, then representatives of the other agency or agencies will clearly indicate that each organization acts independently of one another in determining final actions, and therefore the disclosed recommendation does not bind any other organization.

Qualities That Foster Success

1. The reviewing organizations may waive or modify the guidelines in this handbook. Flexibility is essential for the success of collaboration.
2. The chair or co-chairs and the staff liaisons to the collaborating organizations should consult frequently throughout the process.
3. The members of the visiting team that each organization appoints should interact and function as a single team, and they should be familiar with the standards of each organization.
4. Candor, clarity, and conviction should characterize the presentation when the oral report is given. It is highly desirable for the team chair/co-chairs (or other representatives of each collaborating agency) and the president of the host institution to meet for a debriefing session prior to the oral report or before the team chair/co-chairs leave(s) campus.

Initiating the Collaborative Review Process

The decision to pursue a collaborative review rests with the institution. Therefore, it is the institution's responsibility to contact each of the organizations that the institution wishes to collaborate. The institution's president or other appropriate institutional representatives will play a key role in this process and should make the first contact, either orally or in writing, with the reviewing organizations that will be invited to participate. Successful collaborative reviews require strong leadership, careful planning, and appropriate delegation of responsibility. These efforts require the continued support of the president throughout the collaborative review process.

The collaborative review process usually will apply to accredited institutions and not to those seeking candidacy for accreditation or initial accreditation, because it is in the best interest of the institution to focus all energies on meeting/addressing the standards for initial accreditation rather than focusing on dual processes. However, candidate institutions can participate in collaborative reviews if the institution and the participating organizations consent.

This might be appropriate, for example, when an institution wants to coordinate its review for continuing accreditation by a specialized agency with its review for initial accreditation by Middle States.

The institution might consider the following types of collaborative reviews:

- collaboration between MSCHE and a national institutional accrediting organization (e.g., Association of Theological Schools in the U.S. and Canada);
- collaboration between MSCHE and a programmatic accrediting organization that has an institutional focus (e.g., Council on Chiropractic Education);
- collaboration between MSCHE and one or more programmatic accrediting organizations (e.g., Association to Advance Collegiate Schools of Business and the Accreditation Council on Optometric Education);

Successful collaborative reviews require strong leadership, careful planning, and appropriate delegation of responsibility.

When more than two organizations will be involved, they should consider why collaboration among these organizations might be beneficial to the institution...

- collaboration between MSCHE and state or federal agencies (e.g., Puerto Rico Council on Higher Education);
- collaboration between MSCHE and other organizations (e.g., National Institute of Standards and Technology, which oversees the Malcolm Baldrige National Quality Award); or
- collaboration between MSCHE and other regional accrediting organizations, which may be useful when the development of a consortium university spans more than one region in its structure. (e.g. Western Governors University).

When is a Collaborative Review Useful?

Before selecting the form and substance of the collaborative evaluation, the institution should review the policies, procedures and standards of each partnering agency, as well as the following list of factors, to determine the appropriateness of initiating this process.

Q *Types of Collaborative Reviews and Number of Participating Organizations*

The size of the institution may influence the type of collaborative effort chosen by the institution. If the institution is a free-standing professional school, the choice might be to host a collaborative evaluation between the institutional accrediting organization and the specialized agency that offers standards for that particular professional program. However, a large state university that offers many professional degree programs may opt to have a collaborative review involving more than two organizations, or it may elect concurrent visits without full collaboration.

The decision about which and how many organizations to invite should be based upon careful consideration of the institution's specific situation and its objectives for the review in question and the policies, procedures and standards of the partnering agencies. It may be that collaborative reviews proceed more efficiently with only two collaborating partners. However, collaboration of more than two organizations is possible. When more than two organizations

will be involved, they should consider why collaboration among these organizations might be beneficial to the institution and how the organizations might best work together.

Collaborative reviews, based on MSCHE experience, appear to work best when the programs being reviewed by the specialized or professional accrediting agency are a significant component of the institution being reviewed.

Q *Timing of the Visit*

The review cycles of the participating organizations may be different. Therefore, the president of the institution may request that one or more of the participating organizations adjust its respective review cycle in order to facilitate a collaborative review. Further adjustment may be necessary to coordinate succeeding review cycles if the institution wishes these to be collaborative also. Therefore, it is important to contact all participating groups early—perhaps two years ahead of the review.

Middle States may postpone its review visit for up to two years to accommodate another agency or organization's cycle. Adjusting the Middle States review cycle would change the next review cycle 10 years hence. Middle States reserves the right to request an interim report on information needed to fulfill the Commission's public accountability role.

Therefore, it is important to contact all participating groups early—perhaps two years ahead of the review.

The Collaborative Agreement

When organizations agree to conduct a collaborative review visit, many issues should be agreed upon in advance. Experience suggests that it is helpful for the organizations and the institution to agree in writing and in advance on every step of the process in order to reduce misunderstandings later.

Creating the Collaborative Agreement

It may be useful to hold a meeting between the institution and staff of the participating organizations as soon as possible following the decision to pursue a collaborative review. The purpose of the

meeting, often held at the institution, is to discuss, negotiate, and agree on the conditions and agreements of the self-study format, on-site team composition, final team report structure, and decision-making protocol for each reviewing organization. It is also very useful for the co-chairs to make an early visit to the institution, even if such visits are not ordinarily required by the participating agencies.

The agreements reached during these meetings will provide a guide and timeline for all participants to follow. Some of these agreements are likely to be more general than others, allowing for flexibility.

The results of the meetings should be recorded in writing. However, a single document is not necessary. Instead, a series of letters, memoranda, and multiple agreements on specific issues may be used.

As reviewing organizations participate in more collaborative reviews, they will create more generic agreements that may be used in future reviews that are guided by their own procedures. For example, the Puerto Rico Council on Higher Education has published a list of all of its requirements that are not covered in MSCHE standards.

The following list should stimulate thinking about such issues, but should not be considered exhaustive. Either a reviewing organization and/or the institution may propose additional issues for advance agreement.

Q *Communication and Cooperation*

Who will represent each cooperating entity? How often will they meet, and on what subjects? Has the timing and coordination of every stage of the process been addressed? Continued communication between all partners is key to a successful collaborative review.

Q *The Calendar of Events*

The calendar should include, for example, when self-study preparation visits by staff might occur; when the final self-study report is to be mailed to team members; dates of the site visit; and the schedule for finishing the team's report and chair's confidential brief.

q ***Adherence to a Code of Good Practice***

For example, see Appendix.

q ***Self-Study Preparation Visit***

MSCHE requires a self-study preparation visit to the institution approximately 18 to 24 months prior to a regularly scheduled evaluation. Many specialized and professional accrediting agencies do not. It is highly desirable that the staff liaisons of all partnering organizations conduct the visit jointly.

q ***The Institution's Self-Study Process***

Steering committee and subcommittee structures should represent the total campus community and should include adequate faculty representation. Although some institutions elect to use existing committee structures, most institutions choose to create new structures because of the value of having fresh insights and judgments. Throughout the process, the entire campus community should be kept abreast of developments, with opportunities for input and feedback.

q ***The Self-Study Report***

The structure, organization, length, and style of the self-study report prepared by the institution will be governed by the design for the self-study, which is described below in the section, "Preparing the Internal Institutional Review Document." It also should include the method that will be used to address the standards of all agencies involved, the type of data that will be incorporated, the length of the final document, and possible addenda. According to an MSCHE survey, 82% of respondents agreed that the collaborative review process simplified the data collection processes required for accreditation.

q ***Supporting Materials***

It is useful to specify the scope and format of supporting materials (e.g., catalogs, handbooks, audits, and data compilations) that the institution should send to visiting team members in addition to the self-study report or materials available on-site.

q ***The Team and the Chair***

It is helpful for each agency to ensure that its team members understand the nature of collaborative review.

Early in the review process, the parties should agree upon the size of the team, the background and experience of the chair, and the nature of its membership are important, especially the areas of expertise or academic specialties to be represented. Team size can be reduced when evaluators from either accrediting agency serve in dual capacities (e.g., handling student services issues for each organization). According to the MSCHE survey of participants in its pilot project, 79% of respondents agreed that collaborative reviews reduce the total number of team members.

Other MSCHE published policies outline general requirements for the team, including the need for both academic and administrative representatives. The collaborative team as a whole (not just evaluators assigned by MSCHE) usually will include both academic and administrative representatives. In addition, if required by applicable law, a practitioner must be included on the team for the review of a single-purpose institution. A practitioner may be assigned to the team by either agency.

The MSA policy entitled “Conflict of Interest Guidelines for Team Chairs and Evaluators” (see Notes) addresses codes of good conduct and potential or actual conflicts of interest. Team members should follow the conflict of interest policy of the agency that they represent.

Q *Evaluator Training*

Participants in collaborative reviews have identified the training of chairs, co-chairs, and evaluators as essential. MSCHE provides annual training for new chairs and evaluators, as well as for those who need training in revised accreditation standards or those who have not served within three years. It is helpful for each agency to ensure that its team members understand the nature of collaborative review. When possible, members of specialized/professional, state, and federal agencies and other organizations may be invited to participate in MSCHE professional development activities.

q *Chair's Preliminary Visit*

MSCHE requires a preliminary visit to the institution by the chair not less than three months before the evaluation visit. Many specialized and professional accrediting agencies do not. It is highly desirable, should co-chairs be selected, that the co-chairs conduct this one-day preliminary visit jointly. Sometimes the chair(s) will elect to make earlier and/or additional visits because of the nature of the collaborative process.

Prior to the preliminary visit, the institution should share with the team chair or co-chairs the self-study design, a draft copy of the self-study report, and college catalogs. At the same time, copies of the draft self-study should be sent to the staff representatives for MSCHE and to each of the other agencies involved in the collaborative visit.

Should co-chairs be selected rather than one chair, the co-chairs should agree in advance on the responsibilities of each.

q *Team Structure and Deployment*

Interaction among team members will be critical. The evaluation team should be structured to maximize interaction among the representatives of all partnering agencies and the institution, ensuring that each member and each organization has clear responsibilities.

Specifying the review responsibilities for the team members who represent each organization improves the team's efficiency and coverage. For example, the agencies can agree in advance on which evaluators will cover certain areas and each agency's expectations for reporting. A typical MSCHE team might include the following areas of expertise: administration/finance, library/learning resources, student services, outcomes assessment, communication, arts/humanities, social sciences/human services, and life and physical sciences. Collaborative reviews should result in coordinated assignments, because many of these areas also are reviewed by specialized and professional accreditors, state and federal agencies, and other organizations.

q ***The Exit Report***

The exit report at the institution is the institution's first feedback from the team visit. It is important to the institution that the agencies agree on the protocol for conducting the exit report, such as the matters to be covered, who will present the findings, who is invited, and what will be the tone, structure, and content of the exit interview.

q ***The Team Report***

The issuance of one report by the collaborative team is one of the benefits of collaborative review. Because each organization has its own guidelines regarding how team reports and confidential briefs should be organized and prepared, the organizations should agree on the structure, organization, length, and style of the team report prepared by the site visit team.

An addendum to the collaborative team report may be provided to address programmatic issues affecting only one reviewing organization.

q ***Costs and Reimbursements***

Mechanics matter. Institutions want to know the cost of the visit, and the agencies will find it useful to agree in advance on the methods to be followed for billing the institution and reimbursing team members.

q ***Procedures after the Visit***

Although each agency may follow its own processes after the visit, some areas require advance agreement. For example, some of the issues that may arise include: When must the chair complete the team's report for consideration and decision by each agency? Do the agencies differ in their policies on the disclosure of findings?

q ***Evaluation***

MSCHE routinely mails each president or chancellor an evaluation form following a decennial evaluation visit to gauge satisfaction with the self-study process, the team visit, and the

team report. Collaborating agencies may wish to participate in the MSCHE process or to share with MSCHE their own feedback, analysis, and plans for improvement.

Preparing the Internal Institutional Review Document

In collaborative reviews, the institution prepares a single self-study report or similar document that satisfies the needs that the institution has defined for itself and the requirements of the participating organizations.

[T]he participating organizations agree to use joint materials whenever possible in order to eliminate duplicative documents and to eliminate requirements that are not essential for their review.

Although each reviewing organization has its own guidelines for the process and content of the self-study, the organizations should be flexible in order to help the institution produce one document. Although each organization, according to its policies and procedures, may require additional documentation and materials to supplement the self-study report, the participating organizations agree to use joint materials whenever possible in order to eliminate duplicative documents and to eliminate requirements that are not essential for their review.

The institution then uses the agencies' joint guidelines to create a self-study report that best represents its unique situation in terms of its mission and resources, strengths and concerns, and plans for the future.

An institution has three options for self-study design under MSCHE practices:

Comprehensive Model of Self-Study

The institution addresses every aspect of its programs that relates to accreditation standards such as educational outcomes, services, governing and supporting structures, and resources in relation to the institution's mission and goals.

[I]nstitutions and accreditors should consider analyzing ways in which data collection, reporting, and other areas, may be consolidated and/or reduced within their self-study processes.

Comprehensive Model with Special Emphasis Approach

This is a variant of the basic comprehensive self-study model which is particularly useful for institutions wishing to give some special attention, within the comprehensive format, to selected areas or issues that affect the institution.

In either of these two models, an institution should decide, with consultation from each agency, how best to address the standards for accreditation for all agencies involved. One approach is to create one self-study that satisfies the requirements of all participating organizations. Another approach is to create a core self-study supplemented by sections addressing programmatic issues pertinent to standards of the specialized, professional, state or federal agency, or other organizations.

In addition, institutions and accreditors should consider analyzing ways in which data collection, reporting, and other areas, may be consolidated and/or reduced within their self-study processes. General areas of interest to both MSCHE and other accrediting/licensing agencies include finance/administration, library/learning resources, student services, outcomes assessment, and planning. These areas may be a starting point in designing an approach to the self-study.

Selected Topics Model for Self-Study

This option enables the institution to devote concentrated attention to issues that the institution selects as being most important, without providing a comprehensive analysis of institutional programs and services and addressing all accreditation standards within the self-study report. The institution provides documentation relative to standards not addressed within the self-study report for analysis in advance of the on-site team visit.

Some accreditors permit only institutions with unique needs or ongoing institutional review processes that already include self-study and planning to follow the selected topics model. The precise method of using this approach for a collaborative review would be created by the organizations and the institution.

Institutions should consider what types of issues are of importance to both the specialized area and to the whole institution.

The benefit of selecting such issues is that the internal process of institutional review will help to integrate and coordinate the institution's mission and practices across different specialities, programs, and even separate colleges and schools within an institution.

Some examples of themes or special emphases that might be considered include:

- **Student Learning and Institutional Assessment:** Student learning and institutional assessment cuts across all programs, and the collaborative review can be used to ensure that there is coordination and consistency across programs, especially in achieving outcomes such as general education skills (to which all programs should contribute).
- **Mission:** How is the mission being accomplished across the institution? How are different programs working together to achieve the institutional mission?
- **Planning and Finances:** What processes are used to ensure planning that is coordinated with financial planning, and how are they coordinated to improve the performance of all programs? Are they working, and how can they be improved?
- **Undergraduate or Graduate Education** (assuming either one is sufficiently important within the institution to illuminate institutional practices for regional accreditors): What are the themes, practices, and accomplishments that should be interwoven? Are they achieved?
- **Branch Campuses and Other Locations:** Is institutional expansion coordinated to ensure uniform quality, sufficient support for faculty and students, appropriate resources, and other necessary results? The internal institutional review could address both the "home" campus and branches in addressing these areas and in relating them to the standards of institutional and specialized reviewers.
- **Modes of Delivering Learning:** The same issues that arise in branch campuses can be explored for distance/distributed learning, and for the expansion of education at levels such as certificates and non-credit learning.

- **Excellence of the Institution and Its Programs:** An institutional review can be directed toward satisfying the requirements of the Malcolm Baldrige National Quality Award, special funding initiatives of state or private agencies, or others. The institutional review could be used, perhaps with appropriate supplements, both by the organizations reviewing excellence and by the accreditors.

Single-purpose/Specialized Institutions

For single-purpose or specialized institutions, a comprehensive review usually would satisfy both types of accreditors, and special emphases of importance to the institution can be incorporated as part of the self-study.

Transregional Institutions

If an institution maintains a branch in a region of the United States other than the Middle States region, MSCHE involves the institutional accreditor in the other region(s) in the review of that branch. (See MSCHE policy statement, “Evaluation of Institutions Operating Interregionally.”) In that instance, it may be necessary for the institution’s self-study report to address transregional issues.

In all cases, however, the approach to self-study should be selected carefully in order to ensure the breadth of review needed for institutional accreditors as well as the coverage of specific areas needed by other reviewers and by the institution itself.

Selecting the Team and the Chair

In the initial meeting with the institution, the participating organizations will offer recommendations regarding the size and composition of the visiting team. The participating organizations will work with the institution to select the chair and the team, with consideration given to the background, experience and skills needed to form a team suitable to address the areas being reviewed.

Ordinarily, all team members will have prior accreditation experience. Whenever possible, team members (such as the financial reviewer), should meet the needs of more than one of the

participating organizations. The size of the institution and the number of programs included in the collaborative review will affect the number of evaluators required, but most collaborative reviews should require fewer overall team members than if separate visits were hosted for each participating organization.

If the collaboration involves an institutional accreditor and two or more other organizations, it may be easiest if the team chair is appointed from the institutional accreditor's pool of peer reviewers. When only two organizations collaborate, co-chairs may be appointed by each participating organization, or they may agree on a single chair. Experience in both institutional and specialized/professional accreditation is helpful for a chair.

The chair(s) will be responsible for coordinating the interaction of the participating organizations throughout the process, using as a guideline the collaborative agreement(s) described earlier.

If there are co-chairs, it is useful for them to make a preliminary visit to the institution, its president, and its trustees, as well as to consult with each other, before and during the visit, on the significant issues that the institution faces. It also is useful for the chairs jointly to debrief the president prior to the exit interview.

The Team Report and Recommendations

When the visit is concluded, the chair(s) will prepare a single report, directed to both the institution and the participating review organizations, developed from contributions by the entire visiting team. The final report will reflect the requirements of the organizations involved in the collaboration, as previously agreed upon.

When necessary to meet the specific concerns of one agency, additional sections may be appended, unless the team prepares separate reports. This supplementary material will ordinarily be prepared by those team members who represent the organization citing the specific concern.

Separate recommendations for action by each organization will be submitted to each organization.

Accreditation and Other Actions Following Team Visits

Each organization will make its own decision regarding accreditation or reaffirmation of accreditation. However, in instances involving serious divergences among the actions that team members recommend to each organization, the staff of the participating organizations should work together to identify issues and to resolve differences prior to the meeting of the decision-making body for each agency.

Each commission or agency is free to require the normal follow-up reports or other actions that are part of its regular procedures. Reviewing organizations may adopt similar decisions, but they will do so independently of each other.

The organizations will notify each other of their decisions.

Cooperation with Governmental Agencies

In order to be accredited, an MSCHE institution must demonstrate that it is authorized to operate as an educational institution and award postsecondary degrees authorized by an appropriate governmental organization or other agency as required by each of the jurisdictions or regions in which it operates.

After initial accreditation and state licensure of an institution, MSCHE and the state licensing agency continue to monitor the institution.

State practices vary, but typically the state focuses on state-level planning and coordinating for higher education, including final administrative decisions regarding continuing licensure and extension of licensure to include institutional changes.

As a non-governmental, peer review organization, the role of MSCHE is to assure the public that accredited institutions meet its standards, while simultaneously assisting its member institutions to assess themselves and to improve.

There is, of course, overlap between the state and private functions that can lead to several levels of cooperation between them. It may be possible to extend this cooperation by building upon a tradition that includes different types of coordination with state agencies:

Q *Reporting Requirements*

MSCHE has invited institutions to submit their existing state reports to MSCHE to satisfy similar MSCHE reporting requirements, including substantive institutional change proposals. The New York State Education Department (NYSED), for example, has worked with MSCHE to co-ordinate overlapping reporting requirements in the area of outcomes assessment.

Q *State Representative Working with the Visiting Team*

Another area of cooperation has been team visits. MSCHE always has invited state representatives to join visiting teams, and they do so at their option. Under its policy, “Working Relations Between State Agencies and the MSCHE” (see Notes), the state representative accompanies the team and participates in its meetings, but does not vote on the accreditation action recommended by the team.

Q *MSCHE Representatives Working with State Agencies*

When state agencies are reviewing an institution for re-licensure, or for specific reasons such as the introduction of new programs or other initiatives, state agencies have invited MSCHE and its evaluators to participate in state reviews. NYSED’s approach to quality assurance for distance higher education is one example: A consultant conducts a one-time institutional capability review (rather than a program-by-program review) of a college’s capability to plan, deliver, and evaluate distance education programs. MSCHE can be an active participant in the visit.

Q *State Agency Reliance on MSCHE Accreditation*

Some state agencies will accept reaffirmation of accreditation from MSCHE, their regional accreditor, as sufficient for continued licensure under certain conditions. For example, the New Jersey Commission on Higher Education will rely on MSCHE as long as MSCHE’s standards are similar to and encompass the state’s criteria for licensure. The institution provides the state agency with a copy of its self-study and supporting documents at the same time it provides these to

MSCHE, and the institution submits to the state agency a copy of the letter from MSCHE informing the institution of its accreditation status.

q ***Joint Review***

The 1995 “Memorandum of Understanding” between MSCHE and the Puerto Rico Council on Higher Education (PRCHE) represented a considerable degree of cooperation. The agreement was “designed to improve further the interactions of the two entities and to reduce duplication of effort in the review and evaluation of accredited public and private colleges and universities in Puerto Rico.” Consistent with Commonwealth law and MSCHE policy, PRCHE and MSCHE entered into this agreement to conduct collaborative/joint institutional reviews at the invitation of the institution.

Under the arrangement with Puerto Rico, the MSCHE staff liaison and the PRCHE higher education analyst conduct a joint self-study preparation visit, and they prepare an “Evaluation Process Agreement,” which delineates the parameters of the joint evaluation. The institution prepares a self-study design and self-study report addressing the standards for accreditation and licensure of the respective agencies. Should the self-study design or the self-study report “not fully address a requirement established by Law No. 17, PRCHE will request that the institution provide the relevant information needed for making the final determination of licensing renewal.”

With consultation, each agency selects members of the visiting team, using the areas of overlapping expertise of evaluators on the team to avoid duplication (e.g., student services, library or learning resources, and finance and administration). The joint team conducts one visit and issues one report. Again, should the team report not fully address a requirement under Law No. 17, PRCHE may require an addendum to the team report.

Separate recommendations are made to each agency, but members of PRCHE have joined MSCHE committee discussions in order to improve the information available to both agencies in reaching their final decisions.

MSCHE staff will work with the institution to accommodate its needs and suggestions for cooperation with governmental agencies.

MSCHE encourages institutions to consider pairing “excellence” or reviews, such as a Baldrige or other process, in a collaborative review.

q Other Types of Cooperation

If requested by an accredited member institution, MSCHE will consider other types of cooperation. This would be appropriate for situations in which the scope and nature of the accreditation and government review are similar or complementary.

For example, cooperative reviews could be negotiated for individual situations rather than requiring a state to adopt processes applicable to all of its institutions, as in Puerto Rico. Accreditors and state agencies could work with the institution in the early stages of collaboration to help the institution design its self-study to meet the needs of both agencies. A single team, rather than a combined team visiting simultaneously, could be used. It might not be necessary to have two team chairs.

MSCHE staff will work with the institution to accommodate its needs and suggestions for cooperation with governmental agencies.

Collaborative Reviews with Other Organizations

Institutions of higher education are increasingly seeking to pair their MSCHE self-study and campus visit evaluation processes with reviews by other organizations. These might be organizations that help the institution to achieve special recognition for excellence, such as the Malcolm Baldrige National Quality Award (see Notes).

MSCHE encourages institutions to consider pairing such “excellence” or other reviews in a collaborative review. The collaboration may include more than one other organization, and it even may include specialized accreditors and state agencies.

MSCHE will be flexible in order to promote collaborative reviews with such organizations. For example, it will cooperate with other organizations to use the same written materials, such as a self-study, and the same campus visiting team. As with other collaborative reviews, the decision-making process of each organization will operate independently, and each organization may deny the institution’s request for a collaborative reviews.

The flexibility of subject matter possible under the “comprehensive with special emphasis” or “selected topics” model should enable the institution to address agency requirements that differ from those of MSCHE.

The specific requirements of collaborating organizations will shape the elements of collaborative review described in this handbook.

Whether the institution elects a “comprehensive,” “comprehensive with special emphasis,” or “selected topics” model to self-study (discussed in the section entitled, “Preparing the Internal Institutional Review Document”) will depend on how closely the requirements of the collaborating organizations track MSCHE standards. The flexibility of subject matter possible under the “comprehensive with special emphasis” or “selected topics” model should enable the institution to address agency requirements that differ from those of MSCHE.

For example, the seven major examination categories of the education-based Baldrige Award include leadership, information and analysis, strategic and operational planning, human resource development and management, education and business process management, institution’s performance results and satisfaction of those receiving services. Because the Baldrige categories differ in some ways from the MSCHE standards, and because the Baldrige approach will not include the usual visiting team review of all accreditation standards, an institution would usually choose the MSCHE “selected topics” model to self-study, which is described in this handbook.

Evaluating the Collaborative Review Process

In order to ensure the continued success of collaborative activities among accrediting and other organizations, participating organizations should review the effectiveness of collaborative evaluations, either together or independently. Such review may take into consideration an assessment of the:

- pre-evaluation arrangements for the on-site visits;
- conduct of the pre-evaluation process, including the performance of the team, the degree and level of cooperation of team members;
- clarity with which policies of the collaborating organizations are articulated; and

q effects on the institution.

The organizations should use the information they collect to improve the process for future collaborative activities.

One example of an ongoing evaluation of collaborative reviews is the survey of representatives from institutions and reviewing agencies that the Middle States Commission on Higher Education conducts periodically. In addition, the MSCHE surveys each year the presidents of all institutions that have hosted team visits in the prior academic year, whether or not they were collaborative.

Conclusion

This handbook is an example of the evolution of accreditation to meet changing needs of higher education institutions. Joint reviews have been conducted successfully by MSCHE and many agencies since the procedures were first developed in the 1950s. True collaborative reviews between institutional and specialized/professional accreditors were introduced in 1997. Now the collaborative review model is being extended to include governmental agencies and other organizations.

MSCHE will continue to assess the success of the collaborative review process to ensure that it meets the needs of institutions and accreditors, and it will continue to revise the process to meet those needs.

Appendix

ASPA Code of Good Practice

Accrediting agencies participating in collaborative visits agree to abide by the Code of Good Practice as articulated below:

An accrediting organization participating in collaborative visits:

1. Pursues its mission, goals, and objectives, and conducts its operations in a trustworthy manner.
 - focuses primarily on educational quality, not narrow interests, or political action, or educational fashions.
 - demonstrates respect for the complex interrelationships involved in the pursuit of excellence by individual institutions or programs.
 - exhibits a system of checks and balances in its standards development and accreditation procedures.
 - maintains functional and operational autonomy.
 - avoids relationships and practices that would provoke questions about its overall objectivity and integrity.
 - analyzes criticism carefully and responds appropriately by explaining its policies and actions.
2. Maximizes service, productivity, and effectiveness in the accreditation relationship.
 - recognizes that teaching and learning, not accredited status, are the primary purposes institutions and programs.
 - respects the expertise and aspirations for high achievement already present and functioning in institutions and programs.
 - uses its understanding of the teaching and learning focus and the presence of expertise and aspirations as a basis for serving effectively at individual institutions and programs.

- q keeps the accreditation process as efficient and cost-effective as possible by minimizing the use of visits and reports, and by eliminating, wherever possible, duplication of effort between accreditation and other review processes.
- q works cooperatively with other accrediting agencies to avoid conflicting standards, and to minimize duplication of effort in the preparation of accreditation materials and the conduct of on-site visits.
- q provides the institution and programs with a thoughtful diagnostic analysis that assists the institution and programs in finding approaches and solutions, and that makes a clear distinction between what is required for accreditation and what is recommended for improvement of the institution or programs.

3. Respects and protects institutional autonomy.

- q works with issues of institutional autonomy in light of the commitment to mutual accountability implied by participation in accreditation, while at the same time, respecting the diversity of effective institutional and programmatic approaches to common goals, issues, challenges, and opportunities.
- q applies its standards and procedures with respect for the rights and responsibilities of institutions and programs to identify, designate, and control (a) their respective missions, goals, and objectives; (b) educational and philosophical principles and methodologies used to pursue functions implicit in the various missions, goals, and objectives; (c) specific choices and approaches to content; (d) agendas and areas of study pursued through scholarship, research, and policy developments; (e) specific personnel choices, staffing configuration, administrative structures, and other operational decisions; and (f) content, methodologies, and timing of tests, evaluations and assessments.
- q with respect to professional schools and programs, recognizes the ultimate authority of each academic community for its own educational policies while maintaining fundamental standards and fostering consideration of evolving needs and conditions in the profession and the communities it serves.

4. Maintains a broad perspective as the basis for wise decision making.

- q gathers and analyzes information and ideas from multiple sources and viewpoints concerning issues important to institutions, programs, professions, publics, governments, and others concerned with the content, scope, and effectiveness of its work.
- q uses the results of these analyses in formulating policies and procedures that promote substantive, effective teaching and learning, that protect the autonomy of institutions and programs, and that encourage trust and cooperation within and among various components of the larger higher education community.

5. Focuses accreditation reviews on the development of knowledge, skills, values, and competence.

- q concentrates on results in light of specific institutional and programmatic missions, goals, objectives, and contexts.
- q deals comprehensively with relationships and interdependencies among purposes, aspirations, curricula, operations, resources, and results.
- q considers techniques, methods, and resources primarily in light of outcomes identified and achieved and functions fulfilled.
- q has standards and assessment procedures that provide room for experimentation, encourage responsible innovation, and promote thoughtful evolution.

6. Exhibits integrity and professionalism in the conduct of its operations.

- q creates and documents its scope of authority, policies, and procedures to ensure governance and decision making under a framework of “laws not persons.”
- q exercises professional judgment in the context of its published standards, policies, and procedures.
- q demonstrates continuing care with policies, procedures, and operations regarding due process, conflict of interest, confidentiality, and consistent application of standards.

- q presents its materials and conducts its business with accuracy, skill, and sophistication sufficient to produce credibility for its role as an evaluator of educational quality.
 - q is quick to admit errors in any part of the evaluation process, and equally quick to rectify such errors.
 - q maintains sufficient financial, personnel, and other resources to carry out its operations effectively.
 - q provides accurate, clear, and timely information to the higher education community, the professions, and to the public concerning standards and procedures for accreditation, and the status of accredited institutions and programs.
 - q corrects inaccurate information about itself or its actions.
7. Has mechanisms to ensure that expertise and experience in the application of its standards procedures, and values are present in members of its visiting teams, commissions, and staff.
- q maintains a thorough and effective orientation, training, and professional development program for all accreditation personnel.
 - q works with institutions and programs to ensure that site teams represent a collection of expertise and experience appropriate for each specific review.
 - q conducts evaluations of personnel that involve responses from institutions and programs that have experienced the accreditation process.
 - q conducts evaluations of criteria and procedures that include responses from reviewers and those reviewed.

Notes

The Baldrige Award was established by Congress in 1987 to promote awareness of the importance of quality practices and initiatives for the improvement of the national economy. The award process is administered by the National Institute of Standards and Technology. Since its inception, the MBNQA and its criteria have proven to be very useful tools for those in the corporate sector who wish to improve their products and services (See Lehr, Jennifer K. and Brent D. Ruben. 1999. *Excellence in Higher Education: A Baldrige-Based Self-Assessment Guide for Higher Education. Assessment Update: Progress, Trends, and Practices in Higher Education*, vol. 11 (January-February), number 1, p. 1. (San Francisco: Jossey-Bass).

In 1992, the NIST began to examine the applicability and utility of the award for educational institutions. A new construct for educational institutions would provide a framework for assessing the level and extent of quality efforts on campus in areas important to educational excellence, and it would also provide a template for planning strategic directions for improvements (See Fisher, Donald C. 1995. *Baldrige on campus: The assessment workbook for higher education*, p. ix. New York: Quality Resources.)

* * *

Publications of the Middle States Commission on Higher Education:

[The following policy statements are available in *Policies and Procedures* a 3-ring binder. Each is available looseleaf in print only. A publication order form may be found at www.msache.org/pubs.html.]

— 1995. “Working Relations Between State Agencies and the Middle States Commission on Higher Education.”

— 1997. “Conflict of interest guidelines for members of the Commission on Higher Education.”

— 2000. “Evaluation of institutions operating interregionally.”

j:\collab02