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This handbook is intended for the use of evaluation teams and institutions hosting a decennial evaluation visit. It should be used in conjunction with other Commission publications, such as Self-Study: Creating a Useful Process and Report, Characteristics of Excellence, and Verification of Compliance with Accreditation-Relevant Federal Regulations, which are available online at www.msche.org. Evaluation teams and institutions should also familiarize themselves with the Commission’s Policies, Guidelines, and Procedures, available at www.msche.org by clicking on the Policies button.

Chapter 1 provides an overview of the decennial evaluation visit, the self-study models, team responsibilities, and team composition. Each of the subsequent chapters in the handbook represents a sequential step in the evaluation process, following the typical time line for decennial review evaluation visits. Other useful tools found in Chapters 2 to 7 include:

**Highlights of Responsibilities**

A section outlining the respective responsibilities of the chair, the institution, and evaluation team members can be found in each of the chapters where applicable. Read carefully the sections outlining your responsibility as a chair, institution, or evaluation team member. However, you need to familiarize yourself with the responsibilities of others to understand what the Commission expects from each.

**Reminders**

At the end of each section, when applicable, there is a list of reminders related to the activities covered in that chapter for which chairs, institutions, and evaluation team members are responsible. These reminders are not intended to be a simple checklist. However, they are a useful tool to ensure that key actions that need to take place before, during, and after the visit are completed. These reminders can also be used as a quick reference guide for each step of the process.

**Appendices**

Attached at the end of the document are several appendices that include useful forms, samples, and more detailed procedures for conducting selected topics documents reviews.

**Team Findings**

Chapter 5 provides a guide for the different types of team findings regarding compliance with the accreditation standards and the related actions the team may propose. Chairs, evaluation team members, and institutions should familiarize themselves with what each finding and related action means, such as the difference between suggestions, recommendations, and requirements. This can help evaluators as they read the self-study report and conduct the evaluation visit, as well as help the institution understand the team report.
Templates

Chapter 6 provides sample templates for preparing team reports.

Time lines

Time lines for the process can be found in Chapters 1, 2, and 7.
Chapter 1

The Visiting Team

The evaluation process consists of two interrelated phases: a self-study, conducted by an institution, and peer review, conducted by an evaluation team. This handbook provides detailed guidance to institutions, evaluation team members, and team chairs engaged in these self-study and peer review processes. Evaluation team members and team chairs are volunteers who are selected from the academic community within the Middle States region and throughout the nation to assist in ensuring the quality of higher education institutions and to help them improve.

Definition of Accreditation

At every stage, the chair and evaluators should consider their role within the context of the following working definition of MSCHE accreditation:

Middle States accreditation is an expression of confidence in an institution's mission and goals, its performance, and its resources. Based upon the results of institutional review by trained peer reviewers assigned by the Commission, accreditation attests to the judgment of the Commission on Higher Education that an institution has met the following criteria:

- has a mission appropriate to higher education;
- is guided by well-defined and appropriate goals, including goals for student learning;
- has established conditions and procedures under which its mission and goals can be realized;
- assesses both institutional effectiveness and student learning outcomes, and uses the results for improvement;
- is accomplishing its mission and goals substantially;
- is organized, staffed, and supported so that it can be expected to continue to accomplish its mission and goals; and
- meets the requirements of affiliation and accreditation standards of the Middle States Commission on Higher Education.

The Commission applies its standards in order to make responsible judgments about the institutional and educational effectiveness of each college and university, consistent with each institution's own mission and other unique characteristics. The Commission is not intended to be an agency for the enforcement of government policies, except as required by the Commission's status as a federally-recognized accrediting organization.

The Evaluation Process

Interaction between the Commission and an institution during the evaluation process can be summarized as follows:
The institution examines itself and communicates its findings to its internal and external constituents and to the Commission through the self-study report;

The institution submits documentation for verification of its compliance with the accreditation-relevant provisions of the Higher Education Opportunity Act of 2008;

A team of trained peer reviewers, appointed by the Commission, evaluates and advises the institution through the evaluation team report;

The institution replies to the team report in a written response addressed to the Commission;

The team chair submits a confidential brief to the Commission, summarizing the team report and conveying the team's proposal for accreditation action;

The Commission staff and the Commission's Committee on Evaluation Reports carefully review the institutional self-study document, the evaluation team report, the institution's formal response, and the chair's brief to formulate a proposed action to the Commission;

The full Commission, after considering information gained in the preceding stages, takes formal accreditation action; and

The institution continues to consider and act on the results of its own self-study and the advice it has received as part of its ongoing planning and improvement processes.

Self-Study

An institution spends approximately 18 to 24 months conducting an intensive self-study. The purposes of self-study are to clarify the institution's mission and objectives, to conduct a thorough analysis of its resources and effectiveness in attaining those objectives and fulfilling its mission, to demonstrate whether the institution meets the accreditation standards, and to identify ways in which the educational effectiveness of the institution can be strengthened.

An ideal self-study involves as many faculty, administrators, trustees, and students as feasible in order to reflect on purposes, performance, and effectiveness; to examine strengths as well as weaknesses; and to begin to work on solutions to challenges for improving the institution. A well-planned and clearly focused self-study culminates in a report that constitutes a realistic planning document.

Peer Review

The peer review process begins when the Commission selects a team of trained, experienced and appropriate peer reviewers to visit the institution and conduct an on-site evaluation, based upon the institution's self-study report and the Commission's primary document, Characteristics of Excellence in Higher Education. The chair and other members of the evaluation team, who are selected for their qualifications, are expected to contribute to a thoughtful assessment of the institution within the framework of accreditation standards as well as the mission and goals of the institution. They will evaluate the analysis in the self-study document and draw upon the insights the team gains from on-site interviews. Additional (compliance) reviewers verify the institution's compliance with the accreditation-relevant provisions of the Higher Education Opportunity Act of 2008 in an off-site review. These reviewers do not participate in the visit to the institution.

Self-Study Models

An institution seeking initial accreditation will conduct an in-depth assessment of all aspects of the institution using a comprehensive approach to self-study. An institution being evaluated for reaffirmation of accreditation may select another self-study model that serves its current needs. Evaluators should first note the type of
self-study that the institution has prepared; comprehensive (or comprehensive with emphasis); selected topics; or concurrent self-study.

The comprehensive self-study enables an institution to appraise every aspect of its programs and services, governing and supporting structures, resources, and educational outcomes in relation to the institution’s mission and goals.

The comprehensive with emphasis self-study is a variant of the basic comprehensive model. This type of self-study attends to all the standards as would any comprehensive self-study, but it adds additional focus on particular standards or topics of particular interest to the institution. This self-study model is appropriate for an institution wishing to give special attention to selected issues that affect it.

The selected topics self-study allows an already-accredited institution to devote concentrated attention to selected issues, without having to provide comprehensive analysis of institutional programs and services and without having to address all accreditation standards within the self-study report. Prior to or during the actual evaluation visit, the institution will present documentation to demonstrate compliance with those accreditation standards that are not addressed substantially within the selected topics self-study.

The self-study prepared for a concurrent visit enables an institution to participate in a cooperative review process in which the accredited institution requests that institutional, specialized, or professional accrediting organizations; state or federal agencies; or any other organization conduct its review at the same time as the Middle States evaluation. The institution may prepare separate self-study documents or a single report that addresses both MSCHE standards and the standards of the second accrediting or authorizing agency. A request to conduct a concurrent review must be made in writing and approved by MSCHE before submission of the self-study design. This request must include a rationale for the concurrent review, benefits to the institution, and a detailed plan of how the institution intends to structure its reports to address all concerned standards and criteria. Each request will be reviewed by Commission staff who will inform the institution if the request is approved.

The purpose of concurrent self-study and team visits is to avoid duplication of effort and resources. The institution is expected to satisfy each organization’s accreditation or other standards and requirements in a manner acceptable to that organization.

Evaluation Team Ethics

Conflicts of Interest

The Commission relies on the personal and professional integrity of individuals to refuse any assignment when there is even the slightest potential for a conflict of interest. Under current policy, the Commission staff will not knowingly assign an individual as a participant in an evaluation if any of the circumstances delineated in the Commission’s conflict of interest policy apply. For more information, see the Commission’s policy statement, Conflict of Interest: Peer Evaluators and Commissioners.

To ensure that evaluation team chairs and team members understand the Commission’s policy on conflicts of interest, each person will receive a copy of the policy statement and be asked to sign a conflict of interest statement each time he or she serves on a team.

Employment or Consultation at Institutions

The institution is expected to respect the process by not engaging any team member as a consultant or considering a team member for permanent employment for one year following the evaluation.
Personal Conduct

The Commission will not tolerate any instance of unprofessional or unethical conduct, including instances of substance abuse or of sexual or other forms of harassment.

Confidentiality

To safeguard the openness of the peer review process, the Commission is obliged to maintain the confidentiality of information it receives as part of evaluation and accreditation processes, consistent with the policy statement on collegiality and public communication in the accreditation process.

This confidentiality extends to a wide range of items, including all evaluation materials provided by the institution, exhibit files, notes and observations from interviews, discussions of team members, discussion with state higher education representatives, team observations, recommendations to the Commission, the chair’s brief, and the Evaluation Committee’s discussion.

Once an action is taken by the Commission it is posted to the Statement of Accreditation Status and list of actions on the Commission’s website in accordance with policy.

The Commission’s latest policies, procedures, and guidelines can be viewed under the Policies button at www.msche.org.
Selecting the Chair

The Commission’s procedure for selecting team chairs is described in its guidelines on *Selection of Peer Evaluators*. In the self-study design that the institution prepares before the self-study itself begins, the institution is invited to include recommendations concerning the type of chair and types of evaluation team members it believes should visit the institution at the conclusion of the self-study process. Based on these suggestions and other factors, Commission staff attempt to find potential chairs that best match the needs of the institutions being evaluated.

Early in the spring, the Commission staff contacts the chief executive of each institution being evaluated during the next academic year to propose a potential chair for the evaluation team. After the chief executive affirms that there is no conflict of interest with the proposed chair, the Commission staff invites the proposed chair to serve and provides that individual with information on the institution. Figure 2 illustrates some of the expectations that institutions might have for the chair of their evaluation team.

In the event that the person being proposed to serve as chair is unable to serve, the Commission staff proposes additional names to the chief executive of the institution being evaluated. After the proposed chair accepts, the institution is notified and further information is sent to both the chair and the institution.

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**Figure 1**

What Institutions Expect of Teams and Chairs

- Respect for time and effort put into a self-study;
- Respect for the institution’s expertise about itself;
- Collegiality with appropriate professional distance;
- Fairness and integrity;
- Expertise in applying standards and interpreting institutional conditions;
- Thorough preparation and earnest interest in the story of the institution;
- Consistency with role expectations and conduct of the visit; and
- No conflict of interest.
Setting Dates for the Preliminary Visit and the Evaluation Visit

Once confirmed, the team chair should contact the institution’s president to select dates for the visits, including the chair’s preliminary visit and the evaluation team visit.

The institution should notify the Commission staff of the date for the team visit as soon as it has been set so that staff can begin to invite team members. Assembling evaluation teams is a complicated process. Early information about the dates selected helps staff to produce an early roster of prospective team members for the chair and institution to review at the time of the preliminary visit.

Setting Team Visit Dates

Evaluation visits are usually four days, beginning on a Sunday afternoon and ending on the following Wednesday afternoon. Visits should be scheduled to avoid conflicts with holidays or special institutional events. The visit should occur while classes are in session.

The dates for the team visit may be influenced by the institution’s interest in receiving its accreditation decision by a certain time. Ordinarily, accreditation decisions are made at the November meeting for institutions visited between April 16 and September 1 of a given year, at the March meeting for those visited between September 2 and December 15, and at the June meeting for visits between December 16 and April 15. Figure 2 illustrates a typical timeline for a spring evaluation visit.

Setting Dates for the Chair’s Preliminary Visit

The chair and the institution also must set a date for the chair’s preliminary visit. The preliminary visit should occur at least four months before the evaluation visit. Ordinarily, the chair makes a single preliminary visit; however, there are certain circumstances that may require two visits. The date for the preliminary visit should also be communicated at once to the Commission office.

The type of self-study selected by an institution may affect the scheduling of the preliminary visit. For example, if an institution has undertaken a selected topics approach to self-study, and it has been determined that the review of documentation relative to the accreditation standards not encompassed by the selected topics self-study will take place during the chair’s preliminary visit, the chair may want to schedule this visit 5-7 months in advance of the full team visit. One or more generalist evaluators usually are assigned primary responsibility for this document review, and they work under the guidance of the chair.

Advance Planning and other Preliminary Arrangements

Document Review for Selected Topics Self-Studies. Prior to the preliminary visit, the Middle States staff member assigned as a liaison to an institution will arrange a conference call that includes the chair, the generalist evaluator(s), representatives from the institution, and the staff liaison to discuss arrangements and logistics for the visit, as well as to answer any questions or concerns. If documents will be reviewed during the preliminary visit, it may be necessary to extend the length of the chair’s preliminary visit beyond the typical one-day visit. Even if the review of documentation occurs at the time of the scheduled full team visit, the chair and/or the designated generalist evaluator(s) may want to consider arriving a day or two early in order to conduct the review.

Accommodations. The host institution should make early reservations for the team accommodations, providing an individual room for each team member. Team membership will vary, depending upon the size and complexity of the institution as well as whether branch campuses
and other sites will be visited prior to or concurrent with the team visit. There may be occasions when evaluation teams will include a state education agency representative, or a representative of the system office. Therefore, at least 10 rooms should be reserved until the team size has been confirmed. Somewhat different procedures may be needed for multi-campus institutions.

**Off-Campus Sites.** After the date of the team visit is set, the Commission staff will send the chair and the institution a list of branch campuses and other off-campus sites including study aboard programs in some instances, so that the chair, in consultation with staff and the institution, can decide which off-campus sites to visit as part of the decennial review.

---

**Figure 2**

**From the Chair’s Appointment to the Team Visit**

<table>
<thead>
<tr>
<th>9 – 12 months before the visit</th>
<th>Fall prior to team visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>The chair accepts the appointment.</td>
<td>New chairs and evaluators attend orientation sessions sponsored by the Commission.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Within 2 weeks after chair appointment</th>
<th>Two months before team visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Commission mails confirmation and information regarding visits to off-campus sites to the chair and the institution.</td>
<td>The chair notifies team members of practical arrangements for travel, etc., and the institution works with team members to finalize arrangements.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Within 1 month after chair appointment</th>
<th>At least 6 weeks before team visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>The chair and the institution set dates for the chair’s preliminary visit, the team visit, and the document review for a selected topics self-study. The institution and the chair develop an agenda for the chair’s preliminary visit. The institution notifies the Commission of the team visit dates. The institution sends the approved self-study design to the chair.</td>
<td>Staff finalizes the roster of the visiting team.</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>At least 4 months before full team visit</th>
<th>6 weeks before visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>The chair makes a preliminary visit to discuss campus readiness, practical arrangements, visits to off-campus sites, the team roster, contact information, agenda for team visit, arrangements for interviews, and an oral exit interview at the conclusion of the team visit. If the institution so elects, a document review for a selected topics self-study may occur simultaneously.</td>
<td>Team members receive information from the Commission, self-study documents from the institution, and assignments from the chair. For selected topics, document reviewers receive a document roadmap, if the document review is scheduled for the time of the visit.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Immediately after chair’s preliminary visit</th>
<th>Before team visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>The chair and Commission staff discuss any concerns relating to the self-study report and other matters.</td>
<td>Team members review Commission standards and the entire self-study, prepare analyses and questions, advise the chair of requests for on-campus interviews, advise the institution of requests for additional information or documents, prepare questions for the campus visit, and prepare a draft report.</td>
</tr>
</tbody>
</table>
Selecting and Confirming the Team

The Commission’s procedures for selecting evaluation team members are described in its guidelines, Selection of Peer Evaluators. The Commission staff assembles a team roster appropriate to each institution’s self-study model. After all team members have been invited and confirmed, the Commission staff sends the chair and the institution a roster of evaluation team members and copies of their evaluator data forms for a review of whether there are any conflicts of interest. If possible, the team roster is sent to the host institution and to the team chair prior to the preliminary visit.

Sometimes, invited evaluators are unable to confirm their participation in a timely manner or replacements are needed. This delays completion of the team roster, which will be shared with the institution and the chair as soon as each invited person has confirmed his or her participation.

The Chair’s Responsibilities

The chair is responsible for reviewing the team composition in order to understand the Commission’s rationale for making selections, to relate the team’s composition to the self-study design and the self-study document, and to decide how the various team members will be deployed.

The chair examines the evaluator data forms and other information provided by the Commission staff, makes preliminary assignments based on the expertise and experience of each individual, and consults with team members well in advance of the visit to ensure that they are comfortable with their assignments. Figure 4 illustrates the roles of the team chair as organizer, facilitator, coach, and leader.

Institution’s Responsibilities

When the institution receives the roster of evaluators assigned to the team, it should review the list to determine if any of the evaluators might present a conflict of interest. The institution should consult with the chair and Commission staff if there are concerns or questions regarding the composition of the team.

Other Participants Accompanying Evaluation Teams

Sometimes, teams will include participants who are not Commission representatives or who have dual responsibilities. These participants accompanying teams may include representatives from state education agencies, university systems, or evaluation team associates. Team participants who are not full team members have access to all materials relevant to the evaluation and may participate, under the general guidance of the team chair, in campus interviews. The chair determines the extent to which such participants contribute to the team’s discussion. However, they do not contribute directly to the team’s report to the institution, nor do they have a voice in determining the team’s proposed action to the Commission.

Representatives from State Education Agencies/University Systems

The Commission maintains good working relationships with the state education agencies and university systems in the Middle States region without compromising its independence as a non-governmental organization. State and system education agencies are notified when the dates for evaluation visits to institutions in their states are established each year. If the Commission receives names of individuals who will represent appropriate state or other agencies, these individuals will be included in the official team roster and accompany the team at the agencies’ expense.
State representatives typically have specific responsibilities that are different from those of the MSCHE team members. They provide information about the relationship between the institution and either the state education agency or the system office. They also provide assistance in interpreting state education regulations. Although these representatives serve as a resource to the team, they may make their own separate reports to their respective agencies or systems.

For additional information concerning the participation of representatives from state education agencies in the evaluation visit, refer to the policy statement on Government Agencies and the Middle States Commission on Higher Education.

**Evaluation Team Associates**

The team may be accompanied by an evaluation team associate, such as an educator from overseas who is interested in the peer review process or a faculty member or administrator of a candidate or member institution who recognizes service on a Middle States evaluation team as an opportunity for professional development. Both the host institution and the chair must agree to have an associate join the evaluation team. The associate's expenses are paid by his or her own institution. The role of an associate is described in the Commission's policy statement on *Evaluation Team Associates*.

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**Figure 3**

**The Roles of the Team Chair**

**Leader**
- The team and the institution look to YOU as the embodiment of the Middle States system and as arbiter of the ethics of peer review

**Facilitator/Coach**
- Develop the strategy for the team visit
- Review with the team the role of team members and the ground rules for the visit
- Review with the team *Characteristics of Excellence* and related accreditation materials

**Organizer**
- Set dates for visits
- Conduct preliminary visit
- Manage communications
- Final report
- Review visit arrangements
- Review documents
- Make team assignments
- Chair's brief
- Analyze self-study
- Oral exit interview
- Eval. Committee Meeting

Adapted from a presentation by Patricia McGuire, Trinity University, Washington, DC
Chair’s Review of the Self-Study Design and Draft Self-Study Report

In order to ensure the adequacy of the self-study to support the work of the team, the chair reviews the self-study design and a draft of the self-study report.

The Self-Study Design

When the chair is appointed, the institution sends the chair its self-study design. The design indicates the form of the institution’s self-study and the rationale, scope, expected outcomes, research questions, institutional participants, preferred types of evaluators, and timetable for the self-study process.

Draft Self-Study Report

At least two weeks before the preliminary visit, the chair should receive a substantive draft of the self-study document to review. The chair reviews and analyzes the draft to determine whether the self-study document is adequate to support the work of the evaluation team. If the chair has questions about the draft self-study or if it appears seriously flawed, the chair will contact both the Commission staff member assigned to the institution and the institution itself.

Although the Commission relies on the chair’s judgment of adequacy and consults with the institution, the staff has responsibility for the final decision whether to proceed with or postpone the evaluation. Evaluation visits may be delayed at the Commission’s discretion based on the institution's preparedness, not based on any perceived weakness and potential for failing to meet accreditation standards.
Chapter 3

The Team Chair’s Preliminary Visit

The team chair’s preliminary visit assists the institution in understanding how the team will operate, and it assists the chair in planning how best to deploy the team. It introduces the chair to the institution, its people, and its environment so that the chair and team can begin the evaluation visit efficiently and effectively.

The purpose of the preliminary visit is to ensure that the self-study process and document will support a useful team visit and to address practical preparation for the visit.

Preliminary Visit Activities

The activities for the chair and the institution described below may require adjustments if an institution has undertaken a selected topics approach to self-study, especially if the document review for the selected topics self-study will occur during the preliminary visit.

Facilities

The chair should be given a tour of those places where the team members will spend much of their time, such as the meeting facilities. The chair also should visit the hotel where the team will be housed.

Meetings

The institution’s chief executive officer should have an opportunity to give the chair a confidential briefing on any institutional issues. In addition, the chair should meet with at least the following groups of people during the preliminary visit:

- representatives of the institution’s governing board;
- key administrative officers;
- the self-study steering committee; and
- student and faculty representatives.

Topics to Discuss

Generally, institutional representatives should be asked how they are involved in the self-study and in preparation for the evaluation team visit, what they expect to achieve from the process, and what they hope the team will do. Institutional representatives should be asked to identify the key people on campus with whom team members should meet. Discussions with the steering committee should focus on the draft self-study document.

Specific Discussion Topics

The chair and appropriate institutional representatives should discuss at least the following specific topics:

- the clarity and adequacy of the draft self-study document;
- whether the team is free of any known conflicts of interest;
- if applicable, when visits to branch campuses, additional locations, and study abroad programs should be scheduled; what transportation will be provided;
- confirmation that the institution will make the self-study materials available to the team members and to the Commission at least six weeks prior to the team visit;
the facilities and services that the institution will provide for the team visit, including the following:

- team accommodations (separate rooms only, all in one place) and how the institution will arrange to be billed directly for housing costs (Note: Team members are responsible for their personal expenses.)
- a conference room at the hotel, available at all times for the use of team members
- a room on campus for team conferences and for providing documents for team members to review, and one or two smaller rooms in which to conduct interviews or to meet in small groups
- meals and snacks (both on campus and off campus)
- identification of someone on campus responsible for making appointments for team members with campus personnel during the team visit
- a designated telephone number on campus which team members can leave with their offices and homes
- computers and printers, both on campus and at the hotel, for the team to use and the designation of a technology support person; and

- developing the team visit schedule, including the following:
  - the agenda for team meetings on campus. The team visit should include a “get acquainted” session and meetings with various groups on campus, such as the self-study steering committee, students, the faculty council, senior administrators, the board of trustees, and other groups and individuals relevant to the self-study topics. Simultaneous meetings and interviews will be scheduled for separate team members. Daily meetings should be scheduled between the chair and the chief executive officer, usually including a meeting on the first day of the team visit. The chair might schedule an “open walk-in meeting” for any member of the institution who wants to meet with team members.
  - which institutional representatives will be present at the exit interview, when the chair will make an oral report to the institution about the evaluation visit. Given the participatory nature of the process on campus, there should be broad institutional representation at the exit interview.

Special Considerations

Depending on the type of institution and the type of self-study, some of the following special considerations may be relevant.

Off-campus Sites

The Commission staff will indicate to the chair and the institution how many sites must be visited. These must include each branch campus, usually one-third of the additional locations, and at least one study abroad site if the institution’s study abroad programs collectively enroll more than 200 students annually. The Commission may, at its discretion, determine that a different number of off-campus sites is representative and appropriate for a particular institution in special circumstances.

If sites must be visited, the Commission staff, in consultation with the chair and the institution, will determine which additional locations and/or study abroad locations are to be visited as part of the evaluation. These visits will occur either prior to or concurrent with the team visit in order to enable the chair to complete the team report before the Commission’s required deadline. Team members visiting off-campus sites should receive instructions from the chair in advance on how to conduct their visits.

Selected Topics Document Review

At the chair’s preliminary visit for a selected topics self-study, the chair will focus on topics selected by the institution for its self-study and will gather general information about the
The report of the generalist evaluators is shared with the institution soon after the visit. It is also provided to the team chair so that its findings can be integrated into or appended to the final team report, together with the document roadmap.

(See Appendix 1, “Guidelines for Generalist Evaluators Conducting a Document Review for the Selected Topics Model,” and Appendix 2, “Selected Topics Self-Study Formats for Use by Institutions and Team Chairs/Evaluators.”)

## Following the Preliminary Visit

### Vouchers and Questions

Immediately after the visit, the chair should submit the expense voucher to the Commission office. The expense form is included in the letter from the Commission confirming the chair’s assignment, and can also be found on the Commission’s website, www.msche.org.

### Communications with Commission staff

The chair and/or the chief executive officer should contact the Commission staff immediately after the preliminary visit if there are questions about the institution’s preparation for the evaluation, if there are significant questions about the team roster, if there is an imbalance in the proposed team, or if there are other concerns or suggestions.
Reminders for Team Chairs

The Preliminary Visit

Prior to the Preliminary Visit

▶ Have you been in contact with the institution to set dates for the preliminary visit and the full evaluation team visit?
▶ Have you communicated the dates for the preliminary and evaluation visits to the Commission office?
▶ Have you received and reviewed the institution’s self-study design?
▶ Have you reviewed the institution’s draft self-study (which you should receive at least two weeks prior to the preliminary visit) and, if applicable, the preliminary list, from the Commission office, of branch campuses and other off-campus sites to be visited as a part of the decennial review?
▶ Have you developed, in consultation with the host institution, a schedule and an agenda for the preliminary visit?

Additional Reminders for Selected Topics Model

▶ Have you reviewed the guidelines for generalist evaluators conducting a document review?
▶ Have the dates been set for document review during or prior to the chair’s preliminary visit or the team visit? Have reviewers been assigned?
▶ Has the Commission staff liaison scheduled a telephone conference call prior to the document review that will involve the liaison, team chair, the generalist(s), and institutional representatives? [Note: You should have received and reviewed the draft self-study and the documentation roadmap prior to the telephone conference call.]
▶ If the document review will occur during the preliminary visit, have you allotted sufficient time to meet with the generalist(s) before and after their review?

Following the Preliminary Visit

▶ Have you submitted your expense voucher, with original receipts, to the Commission office for expenses incurred during the preliminary visit?
▶ If not previously communicated, have you contacted Commission staff regarding any perceived conflicts of interest among the team members?

Additional Reminders for Selected Topics Model

▶ If the selected topics document review was conducted during the preliminary visit, did the Commission’s Accreditation Services staff make available to you within three weeks following the visit the final report relative to the document review? (If you were a document reviewer, did you submit the document review report to the Commission within two weeks following the visit?)
Reminders for Institutions

The Preliminary Visit

Prior to the Preliminary Visit
- Has the institution sent a copy of its self-study design to the team chair?
- Has the team chair been in contact with the institution to set dates for the preliminary visit and the full team evaluation visit?
- Has the institution sent a copy of its draft self-study to the team chair at least two weeks prior to the team chair’s preliminary visit?
- Has the institution consulted with the team chair to develop a schedule and agenda for the preliminary visit?
- Has the institution identified hotel accommodations for the team to be shown to the team chair during the preliminary visit?

Additional Reminders for Selected Topics Model
- Has the institution reviewed and used the Commission’s guidelines for institutions developing a documentation roadmap and prepared a roadmap prior to the document review?
- Has a document review been scheduled before or during the chair’s preliminary visit?
- Has the Commission staff liaison scheduled a telephone conference call prior to the documentation review that will involve the liaison, team chair, the generalist evaluator(s), and institutional representatives?

Following the Preliminary Visit
- If not previously communicated, has the institution contacted Commission staff regarding any perceived conflicts of interest among the team members?

Additional Reminders for Selected Topics Model
- If the selected topics document review was conducted during the preliminary visit, has the Commission’s Accreditation Services Staff made available to the institution within three weeks following the visit the final report relative to the document review? Has the institution discussed with the chair how it plans to address any open issues from that review?
Chapter 4

Preparation for the Team Visit

Orientation for Chairs and Evaluators

First-time team members and chairs as well as evaluators who have not served on a team for three or more years are expected to participate in training for an orientation to the evaluation process, with special emphasis on interpreting and applying the standards, evaluating the self-study report, and understanding the evaluator’s roles and responsibilities in the accreditation process.

Documents and Communications

Commission’s Responsibilities

At least six weeks prior to the evaluation team visit, the Commission staff sends materials to team members, including a copy of Team Visits: Conducting and Hosting an Evaluation Visit, Characteristics of Excellence in Higher Education, and other documents. A roster identifying the team members is sent to the institution, the team chair, and all team members as soon as the team assignments are completed. Team members should begin studying these documents as soon as they are received.

Staff also may send team members copies of policy statements and guidelines that relate to the accreditation process in general or to the particular circumstances of the institution being evaluated. Policies may include documents such as the Middle States travel policy or the range of Commission actions for accreditation decisions. All Commission policies are posted on the Commission’s website, www.msche.org.

Guidelines are not standards against which every institution must be measured. Rather, they identify principles and describe practices drawn from cumulative academic experiences that have proven to be useful. They all require thoughtful study, because they affect the work of the team.

In order to help institutions demonstrate compliance with the Commission’s Requirements of Affiliation and with the accreditation-relevant provisions of the Higher Education Opportunity Act of 2008 and to assist evaluation teams in completing their work, the Commission has developed two separate processes that come together in the evaluation team report.

The Commission provides on its website (www.msche.org) a certification statement to be used by an institution to certify that it meets the MSCHE Requirements of Affiliation. The institution submits this statement with its self-study report as described below.

The Commission also verifies an institution’s compliance with the accreditation-relevant provisions of the Higher Education Opportunity Act of 2008. The Commission staff communicates a review schedule to the institution and to designated compliance reviewers, monitors the uploading by the institution of its information for the verification of compliance, monitors the completion by the reviewers of the verification process, and then informs the team chair that the reviewers’ report is available on the Commission’s portal.
Chair’s Responsibilities

Following the preliminary visit, the chair contacts team members telling them where they will be housed, the time and place of the first meeting, when they can reasonably expect to complete the visit, and other practical information. The team chair and the institution will have decided during the preliminary visit whether the institution is expected to contact team members directly about travel, hotel, dietary restrictions, interview schedules, or other matters. The chair will consult with team members regarding the agenda for the visit, including the arrival time and place of the initial team meeting.

As soon as possible after receiving the team roster, including information on each team member’s area of expertise, the chair should designate additional team assignments for each team member to ensure that all standards are covered. If the review of the institution’s compliance with accreditation-relevant federal regulations determined that further evaluation of compliance is needed by the team, additional team assignments should be made accordingly.

The chair usually discusses assignments with evaluators either before or after they are made, but each person must be flexible and prepared to cover multiple areas. Receiving a specific assignment does not diminish the need for each team member to study the entire self-study document thoroughly.

These communications also can be used to help orient the team members to the institution, to reinforce their responsibilities during the visit, and to discuss the institution’s expectations for the visit.

In consultation with Commission staff and the institution, the team chair will determine which off-campus sites (branch campuses and additional locations) are to be visited and the schedule for these visits if they are to occur outside of the team visit dates. The chair will provide special guidance for evaluators visiting off-campus sites to include advising the evaluators in setting meetings with on-site faculty, staff, and students, in order to evaluate available resources at these sites and their compliance with the standards for accreditation.

First-time evaluators may be assigned by the chair to work with an experienced evaluator, who will help to provide guidance throughout the process. Chairs also may elect to have a brief orientation session with first-time evaluators prior to the initial full team meeting.

Institution’s Responsibilities

By the deadline indicated by the Commission, the institution uploads documentation to the Commission’s portal for a review of its compliance with the accreditation-relevant provisions of the Higher Education Opportunity Act of 2008, as described in Verification of Compliance with Accreditation-Relevant Federal Regulations, available on the Commission’s website.

Six weeks prior to the team visit, the institution sends materials to each member of the evaluation team, including the following documents (and sends two sets to the Commission office):

- The self-study report, including the certification statement regarding the Commission’s Requirements of Affiliation attached to the executive summary;
- The most recent Institutional Profile submitted to the Commission;
- Supporting documents essential to understanding the self-study, such as institutional catalogs, organizational charts, and faculty and student handbooks. For electronic catalogs and/or handbooks, please identify the URL within the letter or memorandum of transmittal and at appropriate places within the text of the self-study;
The institutional financial plan for the current and succeeding years covered by the institution's strategic plan (Plans might vary depending on the institution and might include such things as budgets, pro forma projections, and strategic plans tied to the budget.);

The two most recent audited financial statements and management letters;

The financial information submitted to IPEDS for the three previous years;

Actual enrollment for the current year and the three previous years (if not included within the self-study report); and

Projected enrollment for the period covered by the institution's financial plan (if not included within the self-study report).

At least four weeks before the visit, the institution sends each team member:

- a detailed campus map and directions to the campus;
- transportation information; and
- a request that team members inform the institution of travel plans and contact information.

**Team Member Preparation and Responsibilities**

Team members should prepare themselves for their role as evaluators by studying in advance the materials from the Commission staff, the chair, and the institution, including *Characteristics of Excellence in Higher Education*. The Commission considers advance preparation essential; any team member who cannot prepare thoroughly should withdraw from the team and contact Commission staff.

Special attention should be devoted to understanding the institution's entire self-study document, not just the team member's assigned areas. Other suggestions for how team members should consider their role are outlined in Figure 5.

After team members have received their assignments from the chair, they should analyze the material and begin to develop a list of questions to ask during the visit. In some instances, consultation with the team chair may be warranted. If appropriate, team members, after consulting with the chair, can request additional material from the institution for review before the visit.

**Understanding the Self-Study**

To prepare for the team visit, the chair and team members must review the institution's entire self-study document. This report is the major source of information about the institution. It defines the context in which the institution will be evaluated, and it is the focus of team discussions during the visit. It represents serious work by the institution and therefore requires an appropriately serious response.

**Self-Study Organization**

As described in Chapter 1, the type of self-study an institution has chosen will affect the structure of the self-study report. In some instances, the organization of a comprehensive or comprehensive with emphasis self-study will not correspond directly to individual standards. For example, the self-study might follow a thematic structure or it might group several standards together into one section. A standard may be addressed in more than one section of the self-study, or it may be addressed jointly with other standards. Therefore, team members should examine the entire self-study document and coordinate their findings with other team members.
Figure 4

Tips for the Successful Evaluator

► You are invited because of your expertise, but remember the “peer” in “peer review.”

► Expect to be thoroughly prepared in advance of the visit:
  - **know** Characteristics and other MSCHE documents, thoroughly
  - **analyze** the institution’s self-study
  - **be ready** to engage appropriately in the interview process

► Cooperate with the team chair in site visit arrangements, and maintain collegiality with other team members.

► Prepare each interview with care, and record notes carefully.

► **Interview, do not deliver monologues!**
  - [If you hear yourself talking for more than three minutes, stop! Ask questions. Don’t make speeches.]

► Refrain from making statements comparing this institution to yours.

► Avoid prescriptive pronouncements.

► Make every effort to understand the institution’s mission, goals, and strategies.

► Make certain that evaluative comments are rooted in Characteristics and MSCHE policies.

► Write your portion of the team report clearly, succinctly, and with appropriate references to Characteristics and MSCHE policies, and with clear descriptions of evidence (preferably documents) on which conclusions are based.

► Be insightful and constructive, and avoid being harshly judgmental.

Adapted from a presentation by Patricia McGuire, Trinity University, Washington, DC

Reviewing the Self-Study

Applying the Standards and Using the Fundamental Elements

To be eligible for candidacy status, initial accreditation, or reaffirmation of accreditation, an institution must demonstrate that it meets or continues to meet the Commission’s ten Requirements of Affiliation published in the prefatory materials for Characteristics of Excellence in Higher Education as well as the accreditation standards published in this document.

In reviewing the self-study report, evaluators should ensure that the Requirements of Affiliation are met and consider how the self-study addresses the Commission’s standards and the fundamental elements that together constitute, comprise, and encompass each standard. The institution and evaluators will use these elements, within the context of institutional mission, to demonstrate or to determine compliance with the standard. Both
the institution and evaluators must consider the totality that is created by these elements and any other relevant institutional information or analysis. Where an institution does not evidence a particular fundamental element, the institution may demonstrate through alternative information and analysis that it meets the standard.

Optional Analysis and Evidence, the final section of each standard, provides additional examples of documentation and analyses that an institution might carry out, relative to the particular accreditation standard. The information is provided for the institution to use, as it deems appropriate. The list is not comprehensive, and institutions are not required to provide the information that is listed.

Because each institution is governed by its own mission, goals, and objectives, all of the standards do not apply in equal proportion to all institutions. When reviewing the self-study report, team members should bear in mind that each institution is expected to address in its self-study, within the framework of accreditation standards, such questions as:

- What are the institution’s mission, goals, and objectives, and what educational obligations has it assumed?
- Are these appropriate in its present time and place and for its present constituency?
- Are all the institution’s activities consistent with its mission, goals, and objectives?
- Are its programs and activities designed to achieve its goals?
- Is there solid evidence that they are being achieved?
- Are the human, physical, and fiscal resources needed to achieve institutional aims available now? Are they likely to be available for the foreseeable future?

The effective self-study will:

1. Emphasize the role of planning and assessment (Standards 2, 7, and 14) in the institution’s achieving its mission and in advancing and renewing itself.
2. Link the accreditation standards to the institution’s specific mission and context.
3. Use existing documentation for reference and analysis as much as possible.

Team members should prepare in advance the questions for use during the team visit. In reviewing the self-study, evaluators should consider questions such as these:

- What are the institution’s strengths and weaknesses?
- Did the institution appropriately involve its internal constituents throughout the self-study process? The involvement of external constituents also may be considered appropriate.
- What else is there to know about the institution, and where on campus should additional information be sought?
- Are all operations—such as branch campuses, additional locations, distance and correspondence education, and certificate programs—addressed sufficiently?
- Is the evidence on outcomes, including the assessment of student learning, adequate to support a judgment on the institution’s effectiveness in achieving its objectives?
- Are assessment processes, strategic planning, and the budget linked appropriately?
- At what point(s) does the self-study need further interpretation or elaboration?
- Are there inconsistencies that need clarification?
Who are the people to be interviewed? What additional information should they provide?

What additional documents should be examined?

Are there questions concerning the institution's finances that can be shared in advance with the institution for feedback and discussion during the evaluation visit?

Note: If a team member requires additional information or clarification before the visit, the team member should consult with the chair to discuss the nature of the request and the process for making the request to the institution. Ordinarily all such requests should come from the chair.

Third-Party Comments

The Middle States Commission on Higher Education recognizes the value of the perspective of students, institutional employees, and others in the institutional community and therefore expects that the broader community be involved in accreditation and self-evaluation processes. Institutions are expected to publicize their self-study activities to all campus constituencies and to invite comments to assist in the self-study or Periodic Review Report processes.

The Commission publishes on its website (www.msche.org/institutions_evaluations_schedule.asp) the names of institutions preparing for an evaluation and invites third-party comment on those institutions. Third-party comments should relate to whether the institution's performance is consistent with the Commission’s Requirements of Affiliation, accreditation standards, and expectations for institutional conduct.

Comments are due to the Commission no later than six weeks prior to the scheduled visit, and the Commission office will review and forward to the institution those comments that are relevant to the Requirements of Affiliation or to the accreditation standards.

The institution is given an opportunity to respond to the comments through the self-study report, Periodic Review Report, a Commission-requested follow-up report, or separately. An institution also may provide evidence to demonstrate whether it can or does meet the standards.

The team chair may designate one or more team members to review the comments in the context of the visit and self-study materials.

The chair should consider the comments to be supplemental information, but it is not the responsibility of the chair or the team as a whole to resolve the concerns outlined in the comments. If the team identifies any area of concern, it should recommend to the Commission an appropriate course of action.

However, the team should not suggest an action based solely on the comments; areas of concern or non-compliance must be verified through the visit process or in the self-study documents.

Developing a Preliminary Draft Report

Preparing a preliminary draft report before the visit, noting initial impressions and assessments of the institution’s self-study report, will assist team members in focusing their notes, observations, and team discussion during the visit. The initial draft, as revised during the visit, should be used as the nucleus of the written report each member makes to the chair before leaving the campus at the end of the visit.

Related Entities Policy

Some institutions with complex governing structures might be subject to the MSCHERelated Entities policy (see the Self-Study handbook and the Commission’s policy on
The self-study report of an institution with a related entity should describe and analyze the relationship of that entity whenever appropriate in its discussion of the institution’s compliance with the Commission’s standards. Team members should evaluate this description and analysis and should ensure that a signed certification statement from the related entity is attached to the self-study report.

**Travel and Housing Information**

Note: HEOA compliance reviewers conduct their review off-site and do not travel to the institution.

**Travel**

Team members should make travel arrangements early and communicate their plans to the chair and host institution. Everyone should arrive before the opening session and plan to stay through the oral report at the end of the visit. Team members should confirm the schedule of on-campus events with the chair prior to finalizing travel arrangements.

The Commission reimburses reasonable travel expenses, including transportation, meals, and any necessary in-transit lodging for team members, but not for others who work with teams (e.g., team associates or representatives from state agencies or university systems). Evaluators should balance the need for economy and the efficient use of time; they are urged to use public transportation or coach for air and rail travel, if practicable. In some instances, arriving on a Saturday might save the institution money on airfare, beyond the cost of an extra day’s stay in the hotel. The Commission’s Guidelines on Travel Expense, provided with the materials that the Commission distributes and available on the Commission’s website, contain instructions relating to travel and housing.

**Housing**

The host institution normally pays for all meals and room charges directly. If the institution and the Commission have made other arrangements, the team chair will advise team members of the alternate arrangements.
The team visit usually begins on a Sunday afternoon and concludes with an oral report given by the chair to the institutional community midday on the following Wednesday. The visit begins with an initial team meeting, the host's get-acquainted program, and the first working session of the team. The principal activities for the two days which follow include interviews with people on campus and scheduled daily team meetings. Finally, team members prepare their individual reports and assist in preparing the oral and written reports.

The chair is responsible for overall coordination with the institution. The chair reviews and analyzes the self-study document, deploys the team, coordinates team members' activities during the visit, advises the team, makes an oral report to the institution at the end of the visit, and prepares the team's written report.

Pre-Arrival Communications

In addition to the communications described in Chapter 4, the chair may contact team members with reminders and clarifications. These may include:

- Clarifying questions regarding initial team assignments;
- Emphasizing the obligation of each team member to review the entire self-study document;
- Reminding team members to bring preliminary drafts and notes of their preliminary analyses;
- Ensuring that the team is familiar with *Characteristics of Excellence in Higher Education*;
- Providing guidance on the overall evaluation process, including campus interviews, team schedules, expectations, and the evaluation process;
- Making arrangements for the initial team meeting and team meetings during the visit; and
- Providing additional guidance for evaluators visiting off-campus sites.

Report format

The chair usually outlines how team members should write their reports. The format for draft reports is designed to elicit from individual team members drafts that will contribute to a coherent final team report. (See templates for evaluation team reports in Chapter 6.)

Team Visit Schedule

A typical evaluation schedule for a visit of four days is illustrated in Figure 5. The chair will develop the schedule in advance in consultation with team members, and will communicate it to the institution. If necessary, changes and adjustments can be made to the team visit schedule as the visit progresses.
Figure 5

Typical Team Visit Schedule

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Morning</th>
<th>Afternoon/Evening</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>• Arrive</td>
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<tr>
<td></td>
<td></td>
<td>• Initial Team Meeting &amp; Orientation</td>
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<tr>
<td></td>
<td></td>
<td>• Institution's Get-acquainted Program</td>
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<tr>
<td></td>
<td></td>
<td>• First Working Session <em>(Review of self-study; visit planning)</em></td>
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<tr>
<td>Day 2</td>
<td>• Chair and President Meeting</td>
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<tr>
<td></td>
<td>• Interviews and Visits</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Brief Team Meeting <em>(Optional)</em></td>
<td></td>
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<tr>
<td></td>
<td>• Lunch with Campus Constituents <em>(Faculty/staff/students/trustees)</em></td>
<td></td>
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<tr>
<td></td>
<td>• Interviews and Visits</td>
<td></td>
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<tr>
<td></td>
<td>• Team Dinner</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Team Meeting <em>(Review, discuss, plan)</em></td>
<td></td>
</tr>
<tr>
<td>Day 3</td>
<td>• Chair and President Meeting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Interviews and Visits</td>
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<tr>
<td></td>
<td>• Brief Team Meeting</td>
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<tr>
<td></td>
<td>• Lunch with Campus Constituents <em>(Faculty/staff/students/trustees)</em></td>
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<td>• Interviews and Visits</td>
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<td></td>
<td>• Team Dinner</td>
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</tr>
<tr>
<td></td>
<td>• Team Meeting <em>(Review findings; reach consensus)</em></td>
<td></td>
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<tr>
<td></td>
<td>• Independent Report Writing</td>
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<tr>
<td>Day 4</td>
<td>• Finish Independent Report Writing</td>
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<tr>
<td></td>
<td>• Chair Prepares Oral Report</td>
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<tr>
<td></td>
<td>• Chair and President Discuss Oral Report</td>
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<tr>
<td></td>
<td>• Oral Summary for Institutional Representatives</td>
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<tr>
<td></td>
<td>• Leave Campus</td>
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<tr>
<td></td>
<td>• Leave Campus</td>
<td></td>
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</tbody>
</table>
Team Member’s Responsibilities

Team members should not compare the institution they are observing with their home campuses but should respect the mission and goals of each institution. The Commission evaluates each institution based on evidence demonstrating that the institution has achieved its own stated objectives and has complied with accreditation standards.

Institutions have different goals and cultures and will demonstrate compliance in different ways. Team members should not be drawn into debates on the relative merits of specific approaches to problems. The Commission neither prescribes nor recommends specific practices for areas such as collective bargaining, teaching loads, or class size. However, the Commission is concerned with the impact of whatever arrangements the institution has adopted on the quality and effectiveness of its educational work. Therefore, the central question team members seek to answer is whether the institution meets accreditation standards and whether a given program, procedure, curriculum, or other activity functions effectively in light of the institution’s stated mission, goals, and objectives.

Evaluators should approach their tasks as peers who are professionals, not as inspectors. They must avoid the trivial, remembering that a fair evaluation notes strengths as well as weaknesses. If the aim is to find fault and weaknesses with the institution, or to compare everything with home campuses as the main frame of reference, more harm than good can be done. The visit is an intellectual voyage that requires judgment and peer review; it is not simply an exercise in determining compliance.

Off-campus Sites and Distance and Correspondence Education

Evaluators assigned to visit branch campuses or other off-campus sites, including study abroad locations, should consult the appropriate sections of Characteristics of Excellence in Higher Education. If evaluators are not able or expected to join the main campus site visit, the chair will provide them with specific guidance. An evaluator must review distance and correspondence education programs, in accordance with MSCHE standards as well as federal regulations within the Higher Education Opportunity Act of 2008.

Evaluators should verify what the institution indicates in its self-study report regarding those sites. Visits with faculty, staff, and students at the site should be arranged in advance, as appropriate to the location.

Initial impressions and draft report

Team members are encouraged to bring their notes on initial analyses of the institution’s self-study to discuss during the initial team meeting. They should also bring a draft of the report in their assigned area of the standards which will be revised and supplemented during the visit.

Initial Team Meeting

The chair is responsible for the initial team meeting, which should start at least two hours prior to the get-acquainted program with institutional representatives and can continue after that program. This initial meeting enables the chair to introduce team members to their colleagues, discuss the institution’s self-study approach and model, gather first impressions about the institution’s self-study, confirm the team assignments that were previously sent to team members, and establish or refine the visit schedule.

The following should be covered during the initial team meeting:
Reminders for Team Chairs
Prior to the Evaluation Visit

- Have you contacted team members regarding their individual team assignments (primary and secondary), and have you informed them of the time and place of the initial team meeting?
- Have you contacted individual team members regarding transportation logistics and other arrangements? Or, have you made certain that the institution will be in contact with individual members of the team regarding these matters?
- Have all necessary transportation arrangements been made by the institution: airport/train station to hotel, hotel to institution, etc.?
- Have meetings with specific groups (Board of Trustees, Steering Committee, etc.) been set in advance? Have you arranged for meetings and interviews requested by individual team members?
- Have you developed a suggested format for the draft reports to be submitted by team members? (See Chapter 6 for team report templates.)
- Have you reviewed the HEQCO compliance reviewers’ report for additional assignments to team members, if necessary?

Additional Reminders for Selected Topics Model
- Have you discussed with the institution any areas identified by the document reviewers for further attention before or during the team visit?
- If the document review will occur around the time of the evaluation visit, have you made appropriate arrangements?

Review of Pre-visit Preparations

Team members should review together the questions in “Reviewing the Self-Study” (Chapter 4). In addition, they may wish to revisit the assignment of team members, the schedule of interviews, and the documents they wish the institution to provide in the document room.

Context for Team Discussions

Team discussions must be held in the context of the institution’s mission, goals, and objectives, looking for solid evidence and analysis that lead a team to conclude that the institution is or is not complying with the Commission’s standards for accreditation, achieving its stated goals, and fulfilling its mission.

Confidentiality

All evaluation materials, conferences, and conclusions, including the team’s final proposal for Commission action, are confidential. The chair may share with the team any last minute or confidential information that is pertinent. Paper and electronic notes not related to the report should be destroyed after the team visit.
Reminders for Evaluators
Prior to the Evaluation Visit

- Have you reviewed carefully the institution’s mission statement, vision statement, and institutional goals?
- Have you reviewed the Commission’s statement of standards in *Characteristics of Excellence in Higher Education* (and other policy statements, if pertinent) with particular attention to those sections related to your primary and secondary areas of responsibility? MSCHE policy statements can be viewed at www.msche.org.
- Have you read the entire self-study carefully, with particular attention to those topics that the chair assigned to you?
- Have you reviewed the supplementary materials that the institution sent to you (e.g., the catalog, handbooks, etc.)?
- Do you understand the self-study approach that the institution used and the ways in which that approach may affect the work of the team?
- Have you prepared a list of the individuals or groups you wish to interview?
- Based on your review of the self-study and MSCHE materials, have you developed:
  - preliminary questions regarding the overall self-study and institution?
  - initial written impressions in assigned areas?
  - preliminary questions for your areas of particular responsibility?
  - a list of self-study resource documents to be reviewed?
  - a list of other documents to be requested in advance?
  - a preliminary draft of your report?
- Have you informed the institution of your travel plans and transportation arrangements?
- Do you have the necessary information regarding travel and housing arrangements, as well as the time and place of the initial team meeting?

Financial Reviewers
- Optional: Have you prepared a preliminary assessment of the institution’s finances, identified any issues, and shared them with the institution for feedback and discussion during the evaluation visit?

Additional Reminders for Generalist Evaluators for Selected Topics with Concurrent Document Reviews:
- Have you reviewed the Commission’s guidelines for generalist evaluators conducting a document review, found in Appendix 1?
- Has a telephone conference call been scheduled prior to the documentation review that will involve the Commission staff liaison, the team chair, the designated generalist evaluator(s), and institutional representatives? [Note: You should receive the institution’s draft self-study and documentation roadmap prior to the telephone conference call.]
Reminders for Institutions
Prior to the Evaluation Visit

- Has the institution handled all logistical arrangements (overnight accommodations, team meeting room, resource room, equipment, transportation arrangements, etc.)?
- Has the institution been in contact with each team member regarding travel plans and transportation arrangements, and any special needs (dietary restrictions, etc.)?
- Has the institution submitted the requested HEOA compliance verification documentation to the MSCHE offices by the requested deadline?
- Has the institution sent, at least six weeks before the team visit, the following material to the team:
  - The self-study report, including the Certification Statement attached to the Executive Summary
  - The most recent Institutional Profile submitted to the Commission
  - Supporting documents essential to understanding the self-study, such as institutional catalogs, organizational charts, and faculty and student handbooks (For electronic catalogs and/or handbooks, please identify the URL within the letter or memorandum of transmittal and at appropriate places within the self-study text.)
  - The institutional financial plan for the current year and the succeeding years covered by the institution's strategic plan (Plan might vary depending on the institution and might include such things as budgets, pro forma projections, and strategic plans tied to the budget.)
  - Actual enrollment for the current year and the three previous years (if not included in the self-study report)
  - Projected enrollment for the period covered by the institution's financial plan (if not included in the self-study report)
- In addition, has the institution sent one set of these additional financial documents to the member of the team assigned to review financial information and two sets to the Commission?
  - The two most recent audited financial statements and management letters
  - The financial information submitted to IPEDS for the three previous years
- Has the institution sent two complete sets of the final self-study materials mentioned above to the Middle States Commission on Higher Education?
- At least four weeks prior to the evaluation visit, has the institution sent each member of the team a detailed campus map, directions to the campus, along with any other logistical information?

Additional Reminders for Selected Topics Model:

- Has the institution reviewed and used the Commission’s guidelines for institutions developing a documentation roadmap and prepared a roadmap prior to the document review?
- Has a document review been scheduled?
- Has a telephone conference call been scheduled prior to the documentation review that will involve the Commission staff liaison, team chair, designated generalist evaluator(s), and institutional representatives?


**Discussion of Preliminary Analyses**

The chair leads a discussion of preliminary impressions of the self-study materials, encouraging colleagues to express their views, identifying any blind spots and biases, discussing the questions and observations each team member has compiled from an analysis of the institution's materials, and guarding against a priori conclusions while establishing working hypotheses as points of departure for the team's work on the first day. Any additional assignments to complete verification of HEOA compliance are discussed at this time.

**Activities During the Visit**

The chair coordinates team members’ activities, sets the timetable for each day, assigns individual responsibilities for interviews, and provides guidance to team members on the types of interviews they should conduct:

- Team members should use both formal and informal contacts for their discussions;
- Group interviews in some cases are productive and time-saving; and
- Classroom visits are not a useful means of assessing overall institutional teaching and learning outcomes and should not be conducted. Reliable judgments on the quality of instruction that is characteristic of the institution as a whole cannot be made through visits to only a few classes. Analysis of outcomes data presented in the institutional self-study or available on campus will provide more trustworthy evidence.

**Other Participants**

Those participants accompanying teams who are not full team members are described in Chapter 2 and participate in the visit within parameters set by the team chair. They have access to all materials relevant to the evaluation and may participate in team discussions. However, they do not contribute directly to the team's report to the institution, nor do they have a voice in determining its proposal to the Commission regarding accreditation.

**Host’s Get-acquainted Program**

The host institution sponsors a get-acquainted program, which may be a reception, a dinner, or both. It usually occurs on the first evening of the team visit. The informal setting of the get-acquainted program is the team's first contact with the institution and sets the tone for the evaluation. The program should be simple and brief, not elaborate or expensive. Because the team visit is not a social occasion, it is important to guard the team's time and the institution's financial resources.

**Chair’s Responsibilities**

The chair should meet with diverse groups and individuals in order to gain a good understanding of the institution. These meetings include:

**President.** The first conference, whether alone or in the presence of others, should be a working session with the president as the chief executive officer. The chair should maintain contact with the president throughout the visit, checking to see if he or she perceives any issues with the evaluation as it is progressing.

**Board of Trustees.** Either alone or with other team members, the chair must confer with representatives of the Board of Trustees; the institution's president ordinarily should not be present at this meeting.

**Other Institutional Representatives.** To get a multi-dimensional view of the institution, rather than limiting contacts and interviews to high-level officers, the chair should also interview representative faculty, staff, and students.
Special Consideration for Selected Topics
Document Review During the Team Visit. If the document review associated with a selected topics self-study is conducted during or immediately prior to the evaluation team visit, the team chair and designated generalist evaluator(s) will review the documentation and verify institutional compliance with those standards that are not substantively reflected in the self-study, pursuant to the instructions in Appendix 1. If the generalist reviewers also will be involved in the review of the self-study and the campus visit, they should arrive in sufficient time to complete document review before the team arrives.

Team Members’ Responsibilities

Types of Campus Interviews. Members of the evaluation team should interview the institution's officers, division and/or department heads, staff members, faculty, and students, paying careful attention to balance and representation among those interviewed. The variety of approaches, backgrounds, and experiences of team members should be used to diversify the types of interviews and interviewees.

Conducting Campus Interviews. The Commission expects the team to conduct campus interviews as inquiries in the spirit of peers who are professionals, rather than as inspectors, and to ascertain how well the institution’s educational goals and objectives are realized. The substance and form of interviews should be related directly to Characteristics of Excellence in Higher Education and to the self-study.

Scheduling Interviews. In scheduling interviews, allow sufficient time to follow leads, to collect impressions widely, to check information adequately, and to compare perceptions. Team members should circulate around the campus, meeting people and gathering information. Group interviews are often both productive and time-saving. The interview schedule can be supplemented and modified as necessary during the visit.

Taking Notes. Careful notes are important. They should build on or modify those made during the first analysis of the self-study document and initial draft and can be used in the development of the final team report.

Team Discussions

The major strength of an evaluation is the interactive work of the team; it pays to spend considerable time in team discussions. This is one reason that all team members should be lodged at the same location. Rather than reach decisions individually or by vote, team members should pool resources, engage and question each other, and perhaps even debate until they reach consensus. These discussions are also key to preparing team members for their role in developing the final report.

Chair’s Responsibilities

Conducting Team meetings

The team chair carefully organizes team meetings, determining in advance what will be accomplished at each working session.

Lead discussions. The chair should not monopolize the discussions but must provide firm leadership.

Team member reports. The chair should call upon each team member for a brief report, encourage discussion, and ensure that all comments are germane to the issue under consideration.

Length of meetings. Team meetings are held in the evenings. Therefore, the chair should establish in advance, and adhere to, a reasonable closing hour.
Oversight of Team Progress

As the visit proceeds, the chair should ensure that the team is making progress toward completing its assigned campus interviews in order to make certain that the range of people to be interviewed is as complete as possible and that no one who must be seen is omitted.

Providing Guidance to Team Members

Through the team meetings and throughout the visit, the chair will offer guidance to the team members. For example, the chair may:

- point out that the team must apply the standards in *Characteristics of Excellence in Higher Education* and MSCHE policies in light of the stated mission and goals of each institution;
- remind team members that their focus as representatives of the Middle States Commission on Higher Education is always on the institution as a whole;
- set a deadline for team members to submit their reports to the chair;
- remind evaluators to cite specific documents or other evidence as justification for all observations, conclusions, and recommendations and to list all individuals interviewed; and
- prepare the team for what is expected during the final team meeting.

Team Members’ Responsibilities

Meeting Attendance. Members should attend all team meetings punctually and be mindful of the other team members’ time when offering comments.

Report Preparation. Members should record reactions, judgments, and questions and work on reports throughout the visit. During the team meetings, team members should be prepared to report briefly their observations, reactions and judgments. In the areas assigned to them by the chair, using the agreed-upon format and within the deadlines set by the chair, team members should be prepared to give written reports that include evidence on which their conclusions are based.

Final Team Preparation for the Oral Exit Report

Prior to the visit, team members draft their section or sections of the team report based on the self-study materials. During the visit they revise and complete those drafts on the basis of their interviews, document reviews and the team’s discussions. As the visit nears its end, the team prepares its report for presentation to the institution in the oral exit report that concludes the visit. That oral report then serves as the basis for the written report submitted to the institution after the visit. Although the team chair presents the exit report and finalizes the written report, all team members are responsible for the entire team report.

The production of the team report is truly a group effort. All members should be present at and actively engaged in discussion during the final meeting or meetings at which the report is developed. Prior to the discussion each member reads carefully the drafts of all sections of the report, which are usually collated by the chair. The chair then moderates discussion of each section and of members’ comments and questions, ensuring that all viewpoints are expressed and heard. The team must reach consensus on the essential content of the report, including the team’s significant findings, the determination of compliance for each standard, and the significant accomplishments, suggestions, recommendations and, if any, requirements that are being given to the institution. The chair explains to team members exactly what will be included in the oral report and how it will be delivered.

The collaborative preparation of the team report and the sharing of its essential content with the
institution at the close of the visit are vital and valuable components of peer review.

Types of Findings

In deciding what to include in the final report, team members and the chair should distinguish clearly among the different types of findings described below.

Specific documents or other evidence must be cited as justification for all observations and conclusions, and all individuals interviewed should be listed, using the format that the chair selects.

**Significant Accomplishments**

Team members should make general observations about the institution and about the quality and substance of the self-study report. With regard to specific standards, if appropriate, teams also should identify an institution’s significant accomplishments, significant progress, or exemplary/innovative practices.

**Non-Binding Suggestions for Improvements**

An important part of accreditation and quality enhancement processes is the opportunity for the team to offer non-binding suggestions for improvements. Team members may make suggestions for institutional improvement, based on accreditation standards, the collective professional experiences of the team members, or the Commission’s various published guidelines which have been developed with peer input.

**Findings Leading to Recommendations**

Recommendations indicate that institutional action is needed for the institution to continue to meet one or more of the standards in Characteristics of Excellence in Higher Education. Recommendations should be based on the team’s explicit findings of fact and should reference the appropriate accreditation standard. Recommendations do not signify non-compliance and are consistent with the reaffirmation of accreditation, and the institution must consider and respond to all recommendations in its subsequent Periodic Review Report (or sooner, if the Commission requests a progress report or monitoring report).

- **Recommendations to be addressed within the Periodic Review Report**
  All of the team’s recommendations must be addressed in the institution’s next Periodic Review Report (PRR), which occurs in five years.

- **Recommendations that need Follow-Up Action**
  If the team finds that an institution needs to address an issue prior to the PRR in order to assure continuing compliance, the team should propose follow-up such as:

  - **A Progress Report** is appropriate if the Commission should be assured that the institution is carrying out activities that were planned or were being implemented at the time of the team visit. [Time limit: 6-24 months from the date of the Commission action.]

  - **A Monitoring Report** is appropriate if there is potential for the institution to be in future non-compliance with one or more accreditation standards; when issues are more complex or more numerous; or when the issues require a substantive, detailed report. [Time limit: 6-24 months from the date of the Commission action.]

**Findings Leading to Requirements**

Requirements indicate that the institution does not comply with one or more standards in Characteristics of Excellence in Higher Education. Therefore, the team report should state specifically in what ways the institution fails to meet a standard and specify particular steps that should be taken in order to meet the Commission’s standards.
When one or more requirements are stated, the team must propose an action other than reaffirmation of accreditation. Possible actions include:

**Warning.** The Commission acts to warn an institution that its accreditation may be in jeopardy when the institution is not in compliance with one or more Commission standards. Warning indicates that the institution has the capacity to make appropriate improvements within a reasonable period of time and the institution has the capacity to sustain itself in the long term. A monitoring report is required to demonstrate that the institution has made appropriate improvements to bring itself into compliance, and a small team visit follows submission of the report.

**Probation.** The Commission places an institution on probation when, in the Commission's judgment, the institution is not in compliance with one or more Commission standards and the non-compliance is sufficiently serious, extensive, or acute that it raises concern about one or more of the following:

1. the adequacy of the education provided by the institution;
2. the institution's capacity to make appropriate improvements in a timely fashion; or
3. the institution's capacity to sustain itself in the long term.

Probation is often, but need not always be, preceded by an action of warning or postponement. If the Commission had previously postponed a decision or placed the institution on warning, the Commission may place the institution on probation if it determines that the institution has failed to address satisfactorily the Commission's concerns in the prior action of postponement or warning regarding compliance with Commission standards. This action is accompanied by a request for a monitoring report, and a small team visit follows submission of the report. Probation may, but need not always, precede an action of Show Cause. A visit is always required for a Show Cause action.

**Supplements to Team Findings When Further Information is Needed**

**Postpone Action Pending Receipt of a Supplemental Information Report**

On very rare occasions, the Commission postpones a decision and requests a supplemental information report when it has determined that there is insufficient information to substantiate institutional compliance with one or more accreditation standards. Supplemental information reports are intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial actions. If a team determines that there is insufficient information, the team chair should contact the institution's Commission liaison to discuss the situation. Determining compliance is a peer responsibility, not a staff responsibility, but the liaison can help interpret the Commission's standards and guidelines.

**Visits**

A team may include in its proposed action the need for an on-site review in order to verify an institution's status or progress. Unless there is a finding of non-compliance, the team may distinguish between a required visit (“a visit will follow...”) and an optional visit (“a visit may follow...”).

Visits may be conducted by a member of the Commission staff, by an individual evaluator, or by a small team or a full team, depending on the nature and number of the Commission's concerns.
Oral Report to the Institution and Conclusion of the Visit

In a final session with the president and other representatives of the host institution, the chair presents an oral version of the written evaluation report. All team members should be present at this session.

The oral report session is often open to all members of the internal campus community. However, because this exit report is an internal event, external parties such as the press should not be present. Furthermore, the session should not be videotaped or otherwise recorded, or transmitted in any way beyond the campus community. During this oral presentation, the chair makes no reference to the team's proposal regarding an accreditation action because the team's proposal is only the first step in the Commission's overall process of review.

At the conclusion of the oral report, the team promptly leaves the campus. There is no opportunity for questions and answers or further interaction between the team and the institution.

Chair’s Responsibility

Prior to the oral report, the team chair should meet privately with the institution’s president to review the team’s primary findings. This session also can be used to review the calendar of events that will follow the visit, including dates on which the institution will receive and respond to the draft and final team reports.

Presenting the oral report is one of the most important and challenging aspects of chairing a team. The presentation should include a careful and complete summary of the written report, except for the team’s proposal to the Commission. The content and tone of the oral report must be consistent with the written report, include all information relevant to compliance with the Commission’s standards and the team’s recommendations and requirements, if any.

Team Members’ Final On-Site Responsibilities

Written Individual Reports

Before leaving the campus, team members must complete and give to the chair their written reports for their assigned areas of responsibility and any other areas in which they have been asked to contribute. The final report is only as good as the information that team members provide.

Final Meeting

Team members should attend the oral report to the institution.

Completion of Team Members’ Responsibilities

After team members have submitted their final reports to the team chair, attended the presentation of the chair’s oral report to the institution, and submitted their expense voucher, their responsibility to both the institution and the Commission ends. Questions after the visit about any part of the evaluation process should be directed to the Commission office.

Confidentiality and Press Inquiries

All evaluation materials, conferences, and conclusions are confidential, and the proposal regarding accreditation must not be communicated to anyone outside the team. The team’s conclusions are subject to review and possible modification by the Commission.

Confusion and embarrassment could be created by communicating the team’s proposal to the institution. Furthermore, the team’s proposed accreditation action must not appear in the report itself; it belongs only in the brief that the chair prepares as a confidential document for the Commission.
Reminders for Evaluators
During the Visit and After

**During the Visit**
- Have your interviews exposed you to a variety of perspectives on key issues?
- Have team discussions allowed you to check and verify your findings with other team members?
- Do you understand the formal guidelines for your written report, as set by the chair? (See Chapter 6)
- Does your written report reflect and make reference to *Characteristics of Excellence in Higher Education* where appropriate?
- Are all areas where the institution does not meet one or more accreditation standards clearly supported by findings and documentation?
- Does your individual written report make a clear distinction between suggestions and recommendations for institutional improvement, and requirements regarding institutional compliance with MSCHE standards?
- Does your individual report list all of the individuals interviewed during the visit?

**After the Evaluation Visit**
- Have you submitted your expense voucher, with original receipts, to the Commission office for expenses incurred during the evaluation visit?
- Have you provided feedback about the team chair?

Any inquiries from the press or other agencies or persons should be directed to the Director for Communications and Public Relations of the Commission.

**Immediately Following the Team Visit**

**Chair’s Responsibilities**

*Team Report*
The chair should send the final version of the team report to all team members.

*Letters of Appreciation*
The chair may wish to send a courtesy letter to each team member’s president, or to the board chair if the team member is a president. If the team member’s contribution was outstanding, a commendation is always welcome.

**Chair and Team Members’ Responsibilities**

Please take into account the following when submitting expense reports:

- **An expense voucher** for the evaluation visit is sent to team members and is available on the Commission’s website. It is important that the chair and team members report their expenses immediately following the visit. Receipts must accompany all vouchers.
Reminders for Chairs
During the Visit and After

During the Visit
- Have you met regularly with the institution's president?
- Have you discussed with the team the type of self-study that the institution conducted and its implications for the team's evaluative work?
- Has there been an early opportunity during the visit to get feedback from the institution regarding any issues that appear not to have been adequately covered in the self-study?
- Have you followed up on any issues identified by the HEOA compliance reviewer?
- Have you scheduled nightly meetings to discuss findings and remaining concerns?
- Do the team members understand the proposed report format?

The Oral Report
- Have you met privately with the institution's president, prior to the presentation of the oral report, to review the team's primary findings?
- Have you prepared an oral report which is consistent in content and tone with the findings, suggestions, recommendations, and requirements that will be cited in the team's written report?
- Have you checked your prepared remarks to ensure that no reference will be made to the team's proposal to the Commission for accreditation action?

Following the Evaluation Visit
- Have you submitted an expense voucher, with original receipts, to the Commission office for expenses incurred during the evaluation visit?
- Have you sent letters of appreciation to the chief executive officers of each evaluator's home campus?
- Have you sent the evaluation report to the institution to correct factual errors?
- Have you uploaded the team report and confidential brief to the Commission's portal?
- Have you sent the team report to the team members?
- Have you sent evaluations of team members to the Commission office?
- Have you noted the date and time of the MSCHE Committee on Evaluation Reports meeting, in which you are expected to participate?
Evaluators are expected to pay for all personal items, such as newspapers, alcohol, dry cleaning and laundry, and movies in hotel rooms. If charges for these items appear on expense vouchers, they will be deducted from claims for reimbursement. Telephone calls and certain other items are subject to the current guidelines published in “Travel Expense Guidelines,” available from the Commission office and on the Commission’s website.

- **Payments from the institution.** No payments should be made by or accepted from the host institution.

- **Other Participants.** The Commission will not provide expense vouchers to those who are working with the team, such as state education agency representatives, other agency representatives, or team associates. They must report their expenses to their own organization or institution.

- **Honorarium.** In addition to reimbursement for expenses, evaluators assigned by the Middle States Commission on Higher Education will receive a modest honorarium to defray personal expenses. The current amounts are listed in the Schedule of Dues and Fees, available at www.msche.org.

- **Timely Submission of Vouchers.** The travel expense guidelines provided by the Commission contain instructions relating to travel and housing, and a copy is available on the Commission’s website.

The Commission invoices institutions for expenses related to the team visit. As a courtesy to the institution, timely billing is imperative. Therefore, if team members do not submit expense vouchers and receipts within one month after the last day of the campus visit, the honorarium will be paid, but the team member may forfeit travel expense reimbursement.

The Commission reserves the right to disallow all or part of a traveler’s expenses if, in its opinion, the traveler did not fulfill his or her obligations associated with the assignment or event.

- **Evaluation of Team Chair.** Team members assigned by the Commission will receive a form requesting brief and candid feedback about the team chair. This form, to be completed after the team visit, will be held in confidence.

- **Evaluation of Team Members.** The chair’s evaluation of team members should be completed and submitted along with the completed expense voucher, immediately following the visit. This form, to be submitted after the team visit, will be held in confidence.

**Institution’s Responsibilities**

**Housing and Meals**

The host institution normally pays all room and meal charges directly, unless the Commission has made special arrangements. If the latter applies, the chair will be notified of the arrangements.
Chapter 6

The Evaluation Team Report and the Institutional Response

The written team report initiates a process that includes opportunities for the institution to review and comment. The process culminates in review by the Commission’s Committee on Evaluation Reports and final action by the Commission.

The Commission staff will notify the chair and the institution of the date the final report is due to be uploaded to the Commission's portal and the due date for the institution's response to the team report. The Commission staff will also notify the chair of the date and location for the chair's presentation of the confidential brief to the Commission's Committee on Evaluation Reports.

The chair is responsible for finalizing the team report and should do so immediately following the visit. Both the chair and the institution share responsibilities for distributing the team report in its draft and final stages.

Characteristics of the Report

The peer review process begins with individual team members reading the self-study materials on their own prior to the visit, continues through the collaborative work during the team’s time at the institution, and culminates in the consensus on the essential content of the oral exit report reached by the team at the end of the visit. The written report, finalized by the chair after the visit, reflects that team consensus and repeats all of the essential content conveyed to the institution in the oral exit report. It is a well-organized and cogent document that reflects a logical progression from the team's findings about the institution's compliance with Commission standards, through the team's statement of the institution's significant accomplishments, to the suggestions and recommendations (and, if necessary, requirements) that the team decides to offer the institution.

An effective team report:

- accurately reflects all of the essential content agreed upon by the team and conveyed to the institution in the oral version of the report presented at the close of the team visit;
- blends the sections drafted by different team members into a seamless document written in a single team “voice;”
- provides evidence to support its assertions;
- is consistent in tone throughout;
- is consistent in content across its sections;
- provides an objective evaluation of the institution's significant accomplishments and challenges at an appropriate level of detail;
- affirms the institution's strengths and provides advice from peers for facing challenges and continuously improving;
- informs the Commission of the ways in which the institution meets the Commission's standards; and
- does not report on differences of opinion among team members.
Report Format and Style

In order to make the team report most useful to the institution, the team report will ordinarily follow the organization of the self-study rather than the organization of Characteristics of Excellence in Higher Education. Figures 6 and 7 provide a template for chairs to use in preparing the team report.

It is important that the report notes within each subject area covered by the institution which accreditation standards the section addresses in whole or in part, and what suggestions, recommendations, and/or requirements relate to each accreditation standard.

If one or more standards are covered by one chapter of the self-study, the standards covered and the suggestions, recommendations, and/or requirements regarding those standards should be made clear in the report.

If a self-study is organized thematically, a standard may be relevant to different topics or themes in the self-study, and the report should cross-reference the other chapters where that standard is also addressed.

Content of the Report

The team report should be checked to ensure that it:

- speaks directly to the accreditation standards;
- responds to the approach used by the institution in its self-study;
- covers all activities of the institution;
- carefully distinguishes among the team’s:
  - suggestions for improvements
  - recommendations, if the institution is at risk of non-compliance with the Commission’s standards
  - requirements that an institution must act on in order to comply with the Commission’s standards;
- provides a rationale and evidence for the team’s recommendations and requirements;
- includes everything necessary to support proposed actions;
- recognizes other sources of information supplied by the institution during the visit;
- emphasizes the importance of outcomes and the assessment of both overall institutional effectiveness and student learning;
- does not contain long descriptions of what the institution already knows;
- is consistent with the content and tone of the oral report presented during the evaluation visit (The written report should not raise issues, such as deficiencies in meeting the Commission’s standards, that were not cited during the oral report.);

In addition, the chair should ensure that the report has not:

- been written in a highly prescriptive tone;
- named individuals, either in praise or blame;
- advocated or advised against unionization or any other mode of collective bargaining, nor appeared to question the particular political or ecclesiastical sponsorship of the institution (The team’s observations should be concerned with these subjects only if they affect the institution’s freedom to pursue its objectives without limitations that diminish academic effectiveness.);
- advocated or advised against specialized accreditation or cited the formulas or requirements of any other agencies (The criteria of other accrediting organizations are often useful to an institution, but the Commission does not specifically endorse the standards of these other organizations.)
Team Report Template for Comprehensive or Comprehensive with Emphases Self-Studies

I. Content and Nature of the Visit

- institutional overview;
- scope of institution at the time of the evaluation (information drawn from the most recent Statement of Accreditation Status that the Commission sends to the chair prior to the visit), including:
  - degree level(s) offered
  - branch campuses (Note: all must be visited)
  - additional locations (Mark with "*" those that were visited)
  - distance or correspondence education programs; and
- self-study process and report (self-study design/model, level of participation)

II. Affirmation of Continued Compliance with Requirements of Affiliation

- Based on a review of the self-study, interviews, the Certification Statement supplied by the institution and/or other institutional documents, the team affirms that the institution continues to meet the Requirements of Affiliation in Characteristics of Excellence. (The Certification Statement should have been included with the executive summary of the self-study.) If the institution continues to meet the Requirements of Affiliation, no further details are necessary. If the team cannot affirm continued compliance with Requirements of Affiliation, specific details must be provided.

III. Compliance with Federal Requirements; Issues Relative to State Regulatory or Other Accrediting Agency Requirements

- The compliance reviewer's report should be attached to the team report;
- If the HEOA compliance review determined that the institution is in compliance, the team should state the following: "Based on the separate verification of compliance with accreditation-relevant provisions of the Higher Education Opportunity Act of 2008 and, as necessary, review of the self-study, certification by the institution, other institutional documents, and/or interviews, the team affirms that the institution meets all relevant federal and state regulations and the requirements of other Department of Education recognized accreditors;"
- If the team conducted additional review to verify compliance, that should be explained and, if compliance was verified, that should be explicitly stated;
- If after additional review the team cannot affirm compliance with the federal requirements, specific details must be provided; and
- If the team is aware of any issues relative to state regulatory requirements or the institution's status with other (e.g., programmatic) accrediting agencies, those issues should be noted here.

IV. Evaluation Overview

- Within this narrative section, the team should provide an overview of its evaluation and analysis, including noteworthy areas of progress or improvement, as well as institutional aspects worthy of commendation. This Evaluation Overview should reflect and be consistent with the details provided in section V of the report.

V. Compliance with Accreditation Standards

- This section of the team report will usually follow the organizational structure of the institution's self-study (e.g., related standards have been grouped together). Regardless of structure, an explicit statement of whether or not the institution meets the standard should be provided for each standard under review.

VI. Conclusion

- This section allows the team to thank the institution, provide any summary statement as appropriate, and remind the institution of the next steps in the process. Do NOT include or allude to the action the team is proposing to the Commission.

  Common wording for the team report and exit interview might include: “The team again thanks the institution, and we hope that the institution will be open to the ideas contained in this report, all of which are being offered in the spirit of collegiality and peer review. As a reminder, the next steps in the evaluation process are as follows:

  The institution replies to the team report in a written response addressed to the Commission;
  The team chair submits a confidential brief to the Commission, summarizing the team report and conveying the team’s proposal for accreditation action;
  The Commission staff and the Commission’s Committee on Evaluation Reports carefully review the institutional self-study document, the evaluation team report, the institution’s formal response, and the chair’s brief to formulate a proposed action to the Commission; and
  The full Commission, after considering information gained in the preceding steps, takes formal accreditation action and notifies the institution.”
Figure 7

Example of Section V in a Team Report

(The template for Standard 1 is provided as an example here, and this format should be replicated for other standards.)

Standard 1: Mission and Goals

If the team finds compliance, state:
“In the team’s judgment, the institution appears to meet this standard.”

- Summary of evidence and findings
  Based on a review of the self-study, other institutional documents, and interviews with faculty, staff, students, and others, the team developed the following conclusions relative to the standard:
  (include narrative or bulleted points that reflect, collectively, the fundamental elements of the standard)

Include the following, as appropriate, for each standard:
- Significant accomplishments, significant progress, or exemplary/innovative practices
- Non-binding suggestions for Improvement (“Suggestions”)
- Recommendations

If the team cannot affirm compliance, state:
“In the team’s judgment, the institution does not appear to meet this standard.”

- Summary of evidence and findings
  Based on a review of the self-study, other institutional documents, and interviews with faculty, staff, students, and others, the team developed the following conclusions relative to the standard:
  (include narrative or bulleted points that reflect, collectively, the fundamental elements of the standard)

- Requirements
  (institutional actions needed to achieve compliance with the standard; “requirements” must be given and necessitate Commission action of Warning or Probation)

Include the following, as appropriate, for each standard:
- Non-binding suggestions for Improvement (“Suggestions”)
- Recommendations
  (institutional action needed for the institution to continue to meet the standards in Characteristics of Excellence in Higher Education)
advanced the personal educational theories of the chair or the team members as solutions to problems that have been identified; and

revealed what the team’s specific proposal to the Commission for accreditation action will be (Although the Commission relies heavily on the team’s proposal for Commission action, it may modify the proposed action. The institution could be confused and embarrassed by communicating a proposal for action which is later modified by the Commission.)

The Draft of the Evaluation Team Report

A summary of the reporting deadlines associated with the team report, the chair’s brief, the Committee on Evaluation Reports, the Commission action, and the Statement of Accreditation Status appears in Figure 8.

Chair’s Responsibilities

- Within 10 business days of the visit, the first draft of the team report should be completed and a copy sent to the president of the institution. (Chairs may wish to send earlier drafts to team members for feedback);
- It must be marked clearly as “DRAFT” and bear the date on which the report was sent; and
- Do not send a copy of the draft to the Commission office.

Institution’s Responsibilities

- The institution must send to the chair, within 10 business days after receipt of the draft team report, its suggested corrections to errors of fact or ambiguous statements;
- If the institution does not provide a written response to the chair within the 10-day period, the chair may use the draft without changes.

[Note: This response to the team’s draft report is distinct from the formal substantive institutional response to the final team report that the institution will submit prior to Commission consideration.]

The Final Team Report

The chair must seriously consider all proposed corrections of factual errors submitted by the institution, but the final determination of the content of the team report rests with the chair. The final team report is addressed, by the chair, to the faculty, administration, Board of Trustees, staff, and students of the institution, and uploaded to the Commission’s portal.

Distribution of Reports

If the institution wishes to send copies to state education agency representatives, the head of multi-unit and regional systems, the chief executive officer of any other accrediting agency involved in joint evaluations, evaluation team associates, or any person who is not a member of the MSCHE team, the decision and the costs are those of the institution. The Commission itself does not share evaluation team reports with government or other public or private agencies or individuals, unless explicitly permitted in writing by the institution to do so or as required under the Commission’s recognition by the U.S. Secretary of Education. (See the Commission’s policy on Public Communication in the Accreditation Process.)
### Reporting Deadlines

Following is a summary of the various deadlines for reporting within the evaluation process:

<table>
<thead>
<tr>
<th>EVENT</th>
<th>DEADLINES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commission notifies the chair and the institution of due dates for submission of final team report, confidential brief and institutional response</td>
<td>Within 5 business days of visit conclusion</td>
</tr>
<tr>
<td>Chair sends draft report to institution for correction of factual errors</td>
<td>Within 10 business days of visit conclusion</td>
</tr>
<tr>
<td>Institution returns corrected draft to the chair</td>
<td>Within 10 business days of receipt of the draft</td>
</tr>
<tr>
<td>Chair uploads final report to the Commission's portal</td>
<td>Within 5 business days of receipt of corrected draft</td>
</tr>
<tr>
<td>Chair uploads a confidential brief to the Commission's portal</td>
<td>Immediately after the final report is completed</td>
</tr>
<tr>
<td>Institution prepares formal institutional response to the team and uploads to the Commission's portal</td>
<td>The Commission office notifies the institution of the due date for the institutional response.</td>
</tr>
</tbody>
</table>

**If the preceding schedule is not met, the Commission may postpone consideration of the institution's status until its next regular meeting.**

<table>
<thead>
<tr>
<th>EVENT</th>
<th>DEADLINES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair attends the meeting of the Committee on Evaluation Reports</td>
<td>Commission notifies the chair of the meeting date</td>
</tr>
<tr>
<td>Commission Action</td>
<td>Next regularly scheduled Commission meeting</td>
</tr>
<tr>
<td>Institution's corrections to the revised Statement of Accreditation Status</td>
<td>Immediately upon receipt</td>
</tr>
<tr>
<td>Institution distributes the team evaluation report and the Commission action widely among its constituents</td>
<td>Immediately upon notification of the Commission action</td>
</tr>
</tbody>
</table>
The Institution’s Formal Response

The institution is given an opportunity to submit a thoughtful written response to the team report before the Commission acts on the report. The institutional response is a crucial part of the evaluation process. If the institution has no major disagreement with the overall report, the response can state that the institution accepts the report as written. However, the institution should be aware that this is the institution’s final opportunity to provide the Commission with any additional information or analyses prior to the Commission taking an action on the institution’s accreditation. The Commission will consider additional information or analyses that differ from those of the team.

The institutional response should be submitted in the form of a letter addressed to the Middle States Commission on Higher Education, in care of the President. If the institutional response is not received within the appropriate timeframe as outlined by the Commission staff, the Commission may choose not to act on the evaluation team report, or it may act without the response.

The Chair’s Confidential Brief

Immediately following completion of the final draft of the evaluation report, the chair should prepare a confidential brief that summarizes the evaluation report including the team’s recommendations and, if any, requirements, and adds the action proposed to the Commission (a template is available on the Commission’s website). There should be clear continuity between the team’s findings, its recommendations, and, if any, requirements to the institution, and the accreditation action it proposes to the Commission.

Chair’s Responsibilities

The chair’s brief should be no more than two pages. It is a condensation of the evaluation report. Therefore, it cannot substantively differ from the content or tone of the team report. All recommendations and, if any, requirements described in the team report must appear in the brief and no new ones may be added.

The team proposal for action must be explicit and should comply with the Commission’s policies on Range of Commission Actions on Accreditation and Standardized Language for Commission Actions on Accreditation.

If a request for follow-up is included, the reasons must be given. The request for a progress report or monitoring report should specify the date by which it is due, in keeping with the Commission’s calendar (normally April 1, October 1 or December 1 if no visit is to follow submission of the report, and March 1, September 1, or November 1 if a visit is to follow).

The brief is needed well in advance of the subsequent committee and Commission meetings. The Commission’s Committee on Evaluation Reports may modify the proposal to the Commission in light of issues raised in the institutional response and/or Committee deliberations.

Reminders for Institutions

After the Evaluation Visit

- Has the institution sent its suggested corrections (errors of fact or ambiguous statements) to the chair in writing within 10 business days after receipt of the draft report?
- Has the institution uploaded its formal substantive institutional response to the Commission’s portal after the team report is finalized?
Chapter 7

Commission Review and Action

After the chair submits the confidential brief to the Commission proposing a specific Commission action, he or she participates in the meeting of the Commission's Committee on Evaluation Reports at which the institution is considered. That Committee reads pertinent documents, discusses the institution, and submits recommendations to the full Commission. The Commission takes final action at its next meeting and distributes a formal statement of the action.

**Review by the Commission’s Committee on Evaluation Reports**

Members of the Commission and team chairs comprise an *ad hoc* Committee on Evaluation Reports. Commission staff members also are present at these meetings to serve as a resource and to assist in promoting consistency of decisions. Chairs may be asked on occasion to serve as readers for other reports at these meetings.

At the Committee meeting, the team chair summarizes the confidential brief, noting key institutional strengths, areas of concern, and any especially noteworthy institutional characteristics or recent trends, and proposes the action that the Committee should recommend to the Commission. A Commissioner reader, to whom all materials have been made available, will comment, agreeing or disagreeing with the proposed action. Commission staff makes additional comments. The proposed action is discussed by everyone present until agreement is reached on the recommendation to the entire Commission.

**Commission Actions**

When the Commission meets to make formal accreditation decisions, it reviews the relevant material from the institution, the team's report and proposal for action, the institutional response, and the Committee on Evaluation Reports’ proposed action before it takes final action, consistent with its policy statement on the *Range of Commission Actions on Accreditation*.

An institution may elect to appeal certain negative actions under the Commission's published guidelines. The appellant may file an appeal to be reviewed by a hearing panel of non-Commissioners in accordance with these procedures. See *Procedures for Appeals from Adverse Accrediting Actions* on the Commission’s website for more information.

**Public Disclosure**

Within 30 days after the Commission makes its decision on accreditation, the Commission staff sends notification of the Commission's action to the institution, the U.S. Department of Education, appropriate state agencies, other regional and national accrediting organizations, the American Council on Education (ACE), and the Council for Higher Education Accreditation (CHEA).

The staff also prepares an updated Statement of Accreditation Status (SAS), which serves as the
Commission's official public statement of an institution's current status and recent accreditation history. Any required follow-up activities, including specific issues or topics, are noted.

If the Commission takes an action of Warning, Probation, or Show Cause, it also will issue a Public Disclosure Statement, pursuant to its policy on Public Communication in the Accreditation Process.

Use and Distribution of the Evaluation Team Report

Every Middle States evaluation report is produced by a peer review team. The purpose of the team is to validate the institution's self-study, to assess compliance with accreditation standards, and to make recommendations to the institution regarding ways in which it can improve its effectiveness. Team members rely upon their own knowledge and observation of academic excellence, derived from their direct experience, and the Commission relies on the judgment of the team members as part of the peer review process.

An evaluation team report is intended to stimulate further discussion and action within the institution. The report should be studied open-mindedly and seriously by appropriate constituencies, because it is the thoughtful product of qualified and trained professionals. Except as required by Commission action, the institution may accept or reject the team's suggestions, based on its own careful review and clear rationale for whatever course it follows. However, the institution must respond to all recommendations emanating from the team report and the self-study document in the Periodic Review Report, which is submitted five years after the decennial evaluation. The institution may also be required to address recommendations in a follow-up report prior to the PRR.

The Commission's policy on Public Communication in the Accreditation Process requires the institution to make the report readily available or to distribute it as widely as possible on campus, because the report is addressed to an institution's entire constituency – the administration, trustees, faculty, students, and staff.

When distributing the report, the institution should indicate that the report does not constitute a summary of the entire evaluation process; it is only the report of the team that visited the institution. Because the Commission's review processes sometimes result in an accrediting action other than the one proposed by the team, misunderstandings may occur if it is not clear that the report is only one piece of a much larger whole that includes the institutional self-study, the site visit, the Commission's committee review, and deliberations of the full Commission.

The institution also may distribute copies of the report to others at its discretion. However, if an institution uses the report in a manner that creates a misleading impression (such as using selected excerpts), the Commission reserves the right to release the full report and to make appropriate statements to the public. Excerpts, when used, should be verbatim or reasonable paraphrases and must accurately reflect the entire report in its balance of strengths and team concerns.

As part of the accrediting process, confidential copies of the evaluation team report are distributed to the members of the evaluation team (but not to evaluation team associates) and to Commissioners. Unless explicitly permitted by the institution or required by Commission policies or applicable law, the Commission does not share evaluation team reports or other documents in the accreditation process directly with any of an institution's constituencies, with governmental or any other public or private agency, or with individuals.
Invoiced Charges to the Institution

In addition to the standard evaluation fee, the Commission will send an invoice to the institution for the following specific evaluation costs:

- Chair’s honorarium;
- Honorarium to each team member appointed by the Commission, payable when notification is received that each has completed the assignment; and
- Reimbursement for actual travel costs for the chair and MSCHE team members.

Additional information concerning specific fees and costs associated with evaluation visits can be found in the Commission’s Schedule of Dues and Fees, which is available on the Commission’s website.

The institution also pays for meals and lodging. The chair and the host institution must make every effort to keep costs within reason. The institution normally pays for all meals and room charges directly unless it has made other arrangements with the Commission. As noted, expenses should not be reported directly to the institution, nor should team members accept any form of direct reimbursement from the institution.
Appendix 1

Guidelines for Generalist Evaluators
Conducting a Document Review for the Selected Topics Model

The selected topics model allows an already accredited institution to devote concentrated attention to selected issues, without the need to provide comprehensive analysis of institutional programs and services and without the need to address all accreditation standards within the self-study report. The defining characteristic of this self-study model is that the review of compliance with those accreditation standards not addressed within the selected topics occurs in a manner that distinguishes and separates it from the evaluation team visit focused on the selected topics.

For the selected topics model, the institution assembles, or otherwise makes accessible on site, existing documentation relative to those accreditation standards that the selected topics self-study either does not address at all or addresses only partially. In addition, the institution provides to the Commission and to those conducting the review a “roadmap” that connects specific documents to particular accreditation standards.

Options for When to Conduct the Review

The institution, in consultation with Commission staff and the team chair, selects one of two timing options for the review of documentation relative to standards not encompassed by the selected topics self-study. In Option 1, which most institutions prefer, the review occurs concurrent with the team chair’s preliminary visit. In Option 2, the review occurs concurrent with the full team visit.

Option 1: Review During the Chair’s Preliminary Visit

The standard preliminary visit of the team chair includes meetings with institutional representatives to discuss the draft self-study and plans for the team visit. In Selected Topics Option 1, one or more designated generalist evaluator(s), using the roadmap provided by the institution, review the assembled documentation to verify institutional compliance with those standards that are not substantively addressed in the self-study. This option may necessitate extending the length of the chair’s preliminary visit.

The designated generalist evaluator(s) prepare a brief written report, affirming that the institution meets each accreditation standard under review, noting any areas where compliance is in question. This summary report identifies any standards for which the institution will need to provide further or updated information at the time of the team visit. This summary report does not include recommendations for improvement. The report is shared with the institution and with members of the evaluation team. Any written response to the summary report is incorporated into the institution’s formal response to the final evaluation team report.

The generalist evaluator(s), if the chair and Commission staff determine it to be appropriate, may participate in the full evaluation team visit. The findings and conclusions of the early document review are provided to the team, incorporated into the final
team report, and appended to the final team report.

**Option 2: Review Concurrent with the Full Team Visit**

The preliminary visit of the team chair is conducted in the usual manner. Concurrent with the full team visit, one or more generalist evaluator(s), using the roadmap provided by the institution, review the assembled documentation to verify institutional compliance with those standards that are not substantively addressed in the self-study. If needed to verify compliance, additional information may be requested during the visit.

The generalist evaluator(s) prepare(s) a brief written report, affirming that the institution meets accreditation standards under review, noting any area where compliance is in question. Otherwise, the report simply affirms that there is sufficient documentation to conclude that the institution meets the specified accreditation standards. This summary report, which does not include recommendations for improvement, is shared with the institution and with members of the evaluation team.

**The Generalist Evaluator Review Process**

The size and profile of the evaluation team is tailored to the selected topics; the full team visit focuses exclusively on the selected topics of the institution's self-study and the related accreditation standards. The findings and conclusions of the report prepared by the generalist evaluator(s) are incorporated into the team report, and the summary report is appended to the final team report.

Working under the general guidance of the team chair, one or more generalist evaluators, using the roadmap provided by the institution, review the assembled documentation to verify institutional compliance with those standards that are not substantively addressed in the self-study.

The generalist evaluator(s) prepare(s) a brief written report, affirming that the institution meets the accreditation standards or noting any areas where compliance is in question. This summary report identifies any standards for which the institution will need to provide further or updated information at the time of the team visit.

This summary report is uploaded to the Commission's portal where it is made available to the institution and members of the evaluation team. If the summary report includes a request for additional information, the institution provides this information at the time of the full team visit. Any written response to the summary report is incorporated into the institution's formal response to the final evaluation team report.

**The Documentation Roadmap**

A documentation roadmap begins by identifying for each of the 14 accreditation standards, whether the standard is:

1) substantively addressed within the self-study,
2) partially addressed within the self-study, or
3) not addressed within the self-study.

The roadmap then lists documents that provide evidence of compliance with standards in the latter two categories. It should include the highlights of particularly relevant sections of those documents. It guides the reviewer, identifying what the institution believes each document demonstrates relative to that accreditation standard and its fundamental elements.

The institution uploads the final version to the Commission's portal at least 15 business days prior to the scheduled document review.
**Suggested Strategy for the Document Reviewer(s)**

1) Following the roadmap, proceed standard by standard through the documents noted therein. Review and have at hand the relevant accreditation standard, including fundamental elements. Use the standard and fundamental elements as a frame of reference and inquiry in reviewing the documents the institution has identified as relevant to that standard. Be guided by the direction provided in the annotation for each document.

2) Consult with institutional representatives if there are substantive questions about the documents or if critically important documents seem not to be included.

3) Keep notes relative to the review of each standard and the institution’s related documentation.

4) Make a preliminary determination as to whether the institution meets the standard, in light of the documentation provided. Remember that there need not be specific, separate evidence for each fundamental element. However, the assembled documentation should provide sufficient evidence that the institution meets the standard.

5) After completing the document review, revisit all preliminary determinations and make any changes that are warranted based on further reflection and consideration.

6) Draft the summary document review report. Complete the report with input from the other generalist evaluator(s), if any, and the team chair, if he or she is participating in the document review.

7) If the report identifies standards for which compliance cannot be affirmed, the report must state that additional documentation will need to be provided at the time of the full team visit. When this is the case, the generalist evaluator(s) must inform the team chair as soon as possible. In such instances, the team chair should discuss the document review report with the institution’s president at the earliest opportunity.

8) Within 15 business days, upload the final report to the Commission’s portal.
Appendix 2

Selected Topics Self-Study Formats
For Use by Institutions and by Team Chairs and Evaluators

The attached forms provide a uniform format to be used by institutions engaged in a selected topics self-study.

Form A: Documentation Roadmap and Self-Study Overview

Form B: Documentation Roadmap for Standards Partially Addressed within the Self-Study
(Note: This form may or may not be applicable to your self-study.)

Form C: Documentation Roadmap for Standards Not Addressed within the Self-Study

Form D: Selected Topics Self-Study Format for Generalist Evaluators or Team Chairs
Summary Document Review Report
### Form A Template

**Documentation Roadmap and Self-Study Overview**

<table>
<thead>
<tr>
<th>The Standards</th>
<th>Substantively Addressed Within the Self-Study</th>
<th>Partially Addressed* Within the Self-Study</th>
<th>Not Addressed**</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Mission, Goals, And Objectives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Planning, Resource Allocation and Institutional Renewal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Institutional Resources</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Leadership and Governance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Administration</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Integrity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Institutional Assessment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Student Admissions and Retention</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Student Support Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Faculty</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Educational Offerings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. General Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Related Educational Activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Assessment of Student Learning</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Complete Form B for these Standards.
** Complete Form C for these Standards.
### Form B Template

**Documentation Roadmap for Standards**  
**Partially Addressed within the Self-Study**

<table>
<thead>
<tr>
<th>Institution Name:</th>
<th>XYZ University (A Comprehensive Institution)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Selected topic(s) of our self-study:</td>
<td>Undergraduate Education</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standard</th>
<th>Documents Provided</th>
<th>Brief Annotation</th>
<th>Self-Study Chapters</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Educational Offerings</td>
<td>Student Learning Assessment Plan (pp. 24-27): Licensure Exam Results, Placement Program Results</td>
<td>Demonstrates program outcomes for graduate education</td>
<td>Chapter 2</td>
</tr>
</tbody>
</table>

**Example**
### Example

<table>
<thead>
<tr>
<th>Standard</th>
<th>Documents Provided</th>
<th>Brief Annotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Institutional Resources</td>
<td>Budget Instructions; 2002 Facilities Master Plan, especially pp. 30-35</td>
<td>Demonstrates annual budget process.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The institution has a facilities plan, and the update section shows how the plan has been implemented.</td>
</tr>
</tbody>
</table>
Form D Template

Summary Document Review Report
For Generalist Evaluators or Team Chairs

Institution Name: _______________________________________________________
Team Chair: ___________________________________________________________________
Generalist Evaluator(s): _______________________________________________________
Date of Documentation Review: _____________________________

(Please append to this report a list of any additional documents not cited in the roadmap that were included as part of this review.)

Summary Overview

(Provide brief summary statements on the documentation review, including adequacy of documents, clarity and usefulness of the roadmap, and overall conclusions.)

For Standards Not Addressed within the Selected Topics Self-Study

Standard (# and name):

YES, the documentation demonstrates compliance with this standard.
or
NO, the documentation does not demonstrate compliance or is incomplete.

Brief Summary Analysis, Comments, Details, or Explanation:
[may include suggestions or recommendations to be addressed in the PRR]
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If any additional documentation should be provided at the time of the full team visit, please specify:
________________________________________________________________________
________________________________________________________________________
Summary Document Review Report
For Generalist Evaluators or Team Chairs

For Standards Partially Addressed within the Selected Topics Self-Study

Standard (# and name):

The documentation demonstrates compliance with this standard relative to these program/service/functional areas:
(e.g., graduate programs; off-campus operations; the entire institution)

During the evaluation visit, the team will need to verify, through the self-study, other institutional documents, and interviews that the institution complies with this standard relative to these program/service/functional areas:
(e.g., undergraduate programs; the entire institution)

Brief Summary Analysis, Comments, Details, or Explanation:
[may include suggestions or recommendations to be addressed in the PRR]
## Appendix 3

### Summary of Actions a Team May Propose to the Commission

#### Guidelines for Determining Recommendations, Requirements, and Proposed Commission Actions:

**Decennial Evaluations and Periodic Review Reports (PRRs)**

<table>
<thead>
<tr>
<th>Does the institution meet the Standards?</th>
<th>Then the team shares the following with the institution in the team report:</th>
<th>And the team proposes the following confidentially to the Commission and only in the Chair’s confidential Brief:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td>The team must provide this to the institution for each standard evaluated:</td>
<td>The team must propose that the Commission take this action:</td>
</tr>
<tr>
<td></td>
<td>And the team may, at its option, provide this to the institution:</td>
<td>And the team may, at its option, propose that the Commission take this action:</td>
</tr>
<tr>
<td></td>
<td>1. Discuss significant accomplishments/progress or exemplary/innovative practices;</td>
<td>To reaffirm accreditation</td>
</tr>
<tr>
<td></td>
<td>2. Offer suggestion(s) for institutional improvement and/or make recommendations</td>
<td>To commend the institution for progress to date and/or the quality of its self-study/PRR process and/or the quality of the self-study/PRR document</td>
</tr>
<tr>
<td><strong>Yes, the team is confident that the institution meets the standards, but the team wants the institution to focus its attention on improvements in certain areas over the next few years.</strong></td>
<td>Make Recommendation(s) (See Page 59)</td>
<td>To reaffirm accreditation</td>
</tr>
<tr>
<td></td>
<td>1. Discuss significant accomplishments, significant progress or exemplary/innovative practices;</td>
<td>To commend the institution for progress to date and/or the quality of its self-study/PRR process and/or the quality of the self-study/PRR document</td>
</tr>
<tr>
<td></td>
<td>2. Offer suggestion(s) for institutional improvement</td>
<td></td>
</tr>
<tr>
<td><strong>Yes, but assurance is needed that the institution is carrying out activities planned or being implemented.</strong></td>
<td>Make Recommendation(s) (See Page 59)</td>
<td>To reaffirm accreditation and to request a progress report due [date*], documenting [specific issues; tie explicitly to standards]</td>
</tr>
<tr>
<td></td>
<td>1. Discuss significant accomplishments, significant progress or exemplary/innovative practices;</td>
<td>To commend the institution for progress to date and/or the quality of its self-study/PRR process and/or the quality of the self-study/PRR document</td>
</tr>
<tr>
<td></td>
<td>2. Offer suggestion(s) for institutional improvement</td>
<td></td>
</tr>
<tr>
<td><strong>Yes, but the team has concerns about continued institutional compliance with one or more standards.</strong></td>
<td>Make Recommendation(s) (See Page 59)</td>
<td>To reaffirm accreditation and to request a monitoring report due [date*], documenting [specific issues that need attention or emphasis; tie explicitly to standards]</td>
</tr>
<tr>
<td></td>
<td>1. Discuss significant accomplishments, significant progress or exemplary/innovative practices;</td>
<td>To commend the institution for progress to date and/or the quality of its self-study/PRR process and/or the quality of the self-study/PRR document</td>
</tr>
<tr>
<td></td>
<td>2. Offer suggestion(s) for institutional improvement</td>
<td></td>
</tr>
</tbody>
</table>
### Definitions

**Suggestions**
An important part of accreditation and quality enhancement processes is the opportunity for evaluators to offer collegial advice for institutional consideration in the form of non-binding suggestions for improvements. Evaluators may make suggestions for institutional improvement, based on accreditation standards, their professional experiences, or the Commission's published guidelines that have been developed with peer input.

**Recommendations**
Recommendations indicate that institutional action is needed for the institution to continue to meet one or more of the standards in *Characteristics of Excellence in Higher Education*. They should be based on evaluators' explicit findings of fact and should reference the appropriate accreditation standard or requirement of affiliation. Recommendations are consistent with reaffirmation of accreditation. The institution must consider all recommendations and describe its response to them in its subsequent Periodic Review Report (or sooner, if the Commission requests a Progress Report or Monitoring Report).

**Requirements**
Requirements indicate that the institution does not comply with one or more accreditation standards or requirements of affiliation in *Characteristics of Excellence in Higher Education*. Evaluators should state specifically in what ways the institution fails to meet a standard or a requirement of affiliation and specify particular steps that should be taken in order to meet the standard or requirement of affiliation. A proposal for reaffirmation of accreditation cannot be made if requirements are stated.

<table>
<thead>
<tr>
<th>If the team's answer is:</th>
<th>The team must provide this to the institution for each standard evaluated:</th>
<th>And the team may, at its option, provide this to the institution:</th>
<th>The team must propose that the Commission take this action:</th>
<th>And the team may, at its option, propose that the Commission take this action:</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, the institution is not in compliance with one or more standards, but the team has confidence in the institution’s ability to come into compliance within two years</td>
<td>Make Requirement(s) (See below)</td>
<td>1. Offer suggestion(s) for institutional improvement 2. Make Recommendation(s)</td>
<td>To warn the institution that its accreditation may be in jeopardy due to insufficient evidence of compliance with standard(s) [number(s)] and to request a monitoring report due [date*] documenting that the institution has achieved and can sustain ongoing compliance with standard(s) [number(s)], including but not limited to [specific issues that need attention; tie explicitly to standards]. To direct a prompt Commission liaison guidance visit. A visit will follow submission of the monitoring report.</td>
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<td>No, the institution is not in compliance with one or more standards, and the team has concerns about the institution’s ability to come into compliance within two years</td>
<td>Make Requirement(s) (See below)</td>
<td>1. Offer suggestion(s) for institutional improvement 2. Make Recommendation(s)</td>
<td>To place the institution on probation due to insufficient evidence of compliance with standard(s) [number(s)] and to request a monitoring report due [date*] documenting that the institution has achieved and can sustain ongoing compliance with standard(s) [number(s)], including but not limited to [specific issues that need attention; tie explicitly to standards]. To direct a prompt Commission liaison guidance visit. A visit will follow submission of the monitoring report.</td>
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