Procedure

Title: Accreditation	**Number:** A1300.00
Type: Administrative	

Responsible: Executive Director of Institutional Effectiveness
Related Policies: A1300
Linked Procedures: A1300.05, A1300.10, A1300.15, A1300.20, A1300.25, A1300.30, A1300.35
Related Laws: ICCB Sections 1501.302, 1501.303, 1501.305, 1501.313,1050.30
Related Standards: ICCB Recognition Standard 1.4b Accreditation & Credentialing
HLC Criterion: 5: Institutional Effectiveness, Resources, and Planning

Statement

The College is committed to continuously improving the quality of its programs and services. The College is further committed to demonstrating that its programs and services meet assurance standards set forth by professional organizations, the Illinois Community College Board and the Higher Learning Commission (HLC), the College's institutional accrediting body.

To these ends, and in observance of the legal requirements of the Illinois Community College Board and in specialized program requirements, the procedures and guidelines contained in this document will be used to assist employees throughout the accreditation process.

Roles and Responsibilities

1. **Executive Director of Institutional Effectiveness (EDIE):**
   o oversees the College's *HLC* accreditation by collaborating with the ALO and senior leaders.
   o assists the senior leaders with specialized *program* accreditation activities.

2. **HLC Accreditation Liaison Officer (ALO):**
   o serves as a recipient of HLC communications regarding the institution's accreditation, in addition to the CEO.
   o remains current with HLC accreditation policies and procedures.
   o provides comments to the HLC as requested
   o facilitate responses to HLC inquiries, including complaints referred by HLC staff to the CEO.
   o disseminates information and answers questions about HLC policies and procedures for all audiences within the institution.

o   maintains the institution's file of official documents and reports related to the institution's relationship with the HLC.

3. **Shared Governance Teams**:
   o   consist of employees from all areas of the college, including administration, faculty, and staff
   o   support accreditation processes within the College
   o   participate in data collection, self-evaluation, and report writing
   o   assist the ALO and/or the program accreditation teams with activities related to accreditation, such as site visits and student and employee interviews.

4. **Program Accreditation Teams:**
   o   consist of employees from the program undergoing *specialized program accreditation*, including administration, faculty, and staff
   o   support a specific *program's* accreditation
   o   participate in data collection, self-evaluation, report writing, and various accreditation activities, such as site visits and student and employee interviews.

Preparing for Accreditation

1. **Develop Accreditation Timeline**:
   o   Determine the appropriate accrediting body for the programs and objectives of the College (e.g., regional, specialized programmatic accreditation).
   o   The ALO or Dean will notify the President's Cabinet of the intention to seek new or affirm existing accreditation. Notification will include:
       o   Name of program undergoing accreditation for specialized program accreditation
       o   Name of accreditation authority (association or agency)
       o   Schedule of events, including:
           ▪   identification of teams responsible for written report and evidence, in accordance with the standards of the self-evaluation
           ▪   timeline for drafts, final edits, and submission
           ▪   dates for periodic check-in meetings with the EDIE
       o   Schedule of off-campus activities with the accreditor (when appropriate)
       o   Schedule of on-campus visit(s) and activities with the accreditor
       o   Outline of anticipated requests:
           ▪   Meeting dates for sessions with reviewers
           ▪   Other expectations of the President, Cabinet members, and their employees, such as survey implementation and analysis, document preparation, technology requests, etc.

- o Contact name, phone number and e-mail address for the lead party in the program seeking specialized program accreditation

2. **Self-Assessment**:
   - o Based on the accreditation requirements of the accrediting body, the Shared Governance Teams or Program Accreditation Team start the self-evaluation process, including the following:
     - o collect information and documentation about institutional or program performance, student outcomes, and resources with the assistance of the Office of Institutional Effectiveness.
     - o analyze institutional procedures, available resources, and standard adherence in great detail
     - o identify areas where the College or program may not fully meet accreditation standards and requirements
     - o create action plans to address deficiencies and improve compliance
     - o draft written standards responses according to the accreditation body's standards and requirements
     - o post all evidence according to the accrediting body's requirements, such as in an evidence room on a website or specialized software.

Submitting the Accreditation Report

1. **Submission Deadline**:
   - o The Lead (ALO, Dean/Chair) ensures the following:
     - o accreditation report is formatted according to the specifications of the accrediting body, including charts, required documents, and appendices
     - o the final report to the accrediting organization before the due date
     - o confirmation the final report was received by the accrediting body

2. **Review and Feedback**:
   - o The Lead (ALO, Dean/Chair) works with the accrediting body for comments, clarifications, and additional documentation needed.

Post-Accreditation Review

1. **Reaction to the findings**:
   - o The Lead (ALO, Dean/Chair), in collaboration with the EDIE, facilitates the College or program to:
     - o address any conclusions or suggestions made by the accrediting body
     - o develop and carry out corrective action plans as necessary
     - o post accreditation information and documentation on the College website.

Ongoing Maintenance of Accreditation

1. **Regular Updates**:
   - The Lead (ALO, Dean/Chair) collaborates with employees to submit ongoing/regular reports required by the accreditor between accreditation reviews.

2. **Compliance Monitoring**:
   - The Lead (ALO, Dean/Chair):
     - collaborates with employees to continuously monitor and assess the College's or programs' adherence to accreditation standards/requirements.
     - ensures a process is in place to continually enhance the College's or program's operations between accreditation updates/renewals.

Conclusion

Shawnee Community College's accreditation process is important for upholding the College's commitment to high-quality instruction and continuous improvement. By adhering to this procedure, the College makes sure that its accreditation status is secure and consistent with its vision and objectives.

Change Log		
Date	Description of Change	Responsible Party
2.29.24	Initial Adoption	