

## Compliance Assignment Guidelines

Each member of the Institutional Effectiveness team has been designated as a team leader for one or multiple Core Requirements, Comprehensive Standards, or Federal Requirements. The team leader has overall responsibility for the formulation of the response to the criterion. The following steps outline the process for conducting the compliance audit and to begin to draft the response. At the end of the document are examples of Compliance, Partial Compliance, and Non-Compliance.

- Step 1:**       **Who are the knowledgeable individuals?** Identify who should participate in formulating the response to the criterion and gather the participants together.
- Step 2:**       **What does the criterion mean?** The participants should begin their analysis by careful interpretation of the criterion to understand *each aspect* and what information and data must be assembled to document compliance.

For example: *3.9.3 The institution provides services supporting its mission with qualified personnel to ensure the quality and effectiveness of its student affairs programs.* This standard covers four critical issues:

- The relationship of the student affairs services and programs to the mission of the institution;
- The qualifications of student affairs services and programs personnel;
- The quality of student affairs services and programs; and
- The effectiveness of student affairs services and programs.

The *Resource Manual for the Principles of Accreditation: Foundations for Quality Enhancement* is a good starting point. Each criterion has a section for: Rationale and Notes, Relevant Questions for Consideration, and Sample Documentation.

- Step 3:**       **Identify sources of evidence.** Evidence may be contained in items such as (this is not an exhaustive list):
- University catalogs;
  - organizational chart;
  - bylaws, meeting minutes;
  - descriptions of institutional effectiveness methods and results;
  - evaluations and documents addressing student achievement (e.g., accreditation reports, program reviews, annual reports);
  - faculty files containing credentials denoting qualifications;
  - documentation that describes the library holdings and services as well as other learning resources, services, and facilities available to students, including electronic access to information;
  - description of off-campus/distance learning programs and faculty, staff, and learning resources to support them;
  - documentation of all consortium memberships and other inter-institutional agreements for providing instruction or sharing resources;

- handbooks: student, faculty, recruitment & hiring;
- UFF contract; and
- Financial audits, financial statements.

**Step 4: Evaluate the sources of evidence.** You must ensure that the evidence presented has the following characteristics:

- **Reliability.** The evidence can be consistently interpreted.
- **Currency.** The information supports an assessment of the current status of the institution.
- **Verifiability.** The meaning assigned to the evidence can be corroborated, and the information can be replicated.
- **Coherence.** The evidence is orderly, logical, and consistent with other patterns of evidence presented.
- **Relevance.** The evidence directly addresses the requirement or standard under consideration and should provide the basis for the institution's actions designed to achieve compliance.
- **Representativeness.** Evidence must reflect a larger body of evidence and not an isolated case.

**Step 5: Analyze the evidence.** Evidence should entail interpretation and reflection; you should need to think about its meaning and be able to interpret it appropriately to support a conclusion. In many cases, the evidence must represent a combination of trend and “snapshot” data. Whenever possible, you should draw conclusions from multiple indicators.

**Step 6: Judgment of extent of compliance.** Determine if we are in compliance with *each aspect* of the criterion. You have three alternatives in describing your determination:

- **Compliance.** The institution concludes that it complies with *each aspect* of the requirement or standard and supports this judgment in a narrative response supported by documentation.
- **Partial Compliance.** The institution judges that it complies *with some but not all aspects* of the requirement or standard and supports this judgment in a narrative response supported by documentation justifying its claim of partial compliance, an explanation for its partial non-compliance, and a detailed action plan for bringing the institution into compliance that includes a list of documents to be presented to support compliance and a date for completing the plan.
- **Non-Compliance.** The institution determines that it does not comply with any aspect of the requirement or standard and provides a thorough explanation for its non-compliance and a detailed action plan for bringing the institution into compliance that includes a list of documents to be presented to support compliance and a date for completion of the plan.

**Step 7: Making the Case for Compliance.**

- **For judgments of compliance and partial compliance:** Draft a convincing narrative explaining how the evidence to be submitted supports the claim of compliance for each aspect of the criterion. The narrative should include a summary as well as an interpretation of extensive or complex documents and data cited as supporting the claim.
- **For judgments of partial compliance and non-compliance:** Provide the reason for non-compliance. Prepare a draft action plan for all aspects of the criterion for which we are in non-compliance. The action plan must contain a description of plans to comply, a list of documents that will be used to demonstrate future compliance, responsible parties, and timeline.

Be sure to identify areas where evidence may be insufficient to demonstrate compliance and develop strategies to address these gaps.

## Examples of Narratives for the Compliance Certification

### **Full Compliance**

**CS 3.2.5:** Members of the governing board can be dismissed only for cause and by due process.

- Compliance
- Partial Compliance
- Non-Compliance

“By-laws of the state board for INSTITUTION,” found in the System Policy Manual, page 2C-1, state: “If any state board member substantially fails to perform the duties of his or her office without sufficient excuse shown to the Board, the state board shall at its next regularly scheduled meeting cause the fact of such failure to be recorded in the minutes of their proceedings and certify the same to the Governor, and the office of the board member shall thereupon be vacant.” (NOTE: the institution would want to include any pertinent part of such example.)

Concerning the local board, the System Policy Manual states: “Failure to attend meetings of the INSTITUTION’s board shall constitute cause for the removal and replacement of a board member. The board shall make this determination, and if it is determined that it is in the based interest of the INSTITUTION to have a replacement, the board shall notify the appropriate sponsoring political subdivision of the need for a replacement” (pages 2A-17).

**Supporting documents:** Supporting documents: “By-Laws of the State Board for INSTITUTIONS,” *System Policy Manual*, Section 2C, pages 2C-1 to 2C-7; Administrative Relationships and Responsibilities,” *System Policy Manual*, Section 2A, IX, pages 2A-9 to 2A-26 Members of the governing board can be dismissed only for cause

## **Partial Compliance**

**CS 3.5.1:** The institution identifies competencies within the general education core and provides evidence that graduates have attained those college-level competencies.

- Compliance
- Partial Compliance
- Non-Compliance

For at least five years, the INSTITUTION has used the eight General Education outcomes specified by the State College system in the document cited below. However, the INSTITUTION's only evidence that graduates have achieved these goals is their successful completion of the required general education courses in each degree or certificate program. By System policy, Career Studies Certificate students are not required to achieve these goals in order to graduate. INSTITUTION no longer considers this enough evidence that students are achieving the general education goals that the institution has set for them. In addition, the institution has decided to define specific competencies within the context of these goals in order to better assess student achievement in the general education core. For these reasons, INSTITUTION is partially compliant with this standard.

**Action Plan for Compliance.** Several steps will be taken in order to comply with this standard. First, INSTITUTION will specify competencies within the framework of the System General Education Goals that it expects graduates to be able to demonstrate by the time they graduate. Then, each program and discipline will specify which of these competencies are covered within that program or discipline, in which courses these competencies are covered, and what their expected student outcomes are for those competencies. Next, each program/discipline will decide which measures will be used to assess those competencies and begin to systematically measure how students are performing in those competencies. Comparisons of the measurements against the program expectations will then be used to make program/discipline instructional decisions on a consistent basis.

The INSTITUTION has adopted a post-test instrument to measure graduate competencies in mathematics, reading, and locating information; this instrument is the nationally used TEST assessment from VENDOR. It has been used to assess Summer 2002 graduates and will be used to test Fall 2002 and Spring 2003 graduates as well. The INSTITUTION will begin implementation of this test as a pre-test measure of entering student skills in Fall 2003. The System is working on system-wide measures of graduate competencies in writing, technology/information literacy, critical thinking, mathematical analysis, oral communication, and scientific literacy. The INSTITUTION will use the measures developed by the System, as well as its own measures, to fully assess graduates' general education competencies by 2005.

**Supporting documents:** "General Education Outcomes," *College Catalog, 1999-2001*, page 30; "Requirements for Graduation," *College Catalog, 1999-2001*, page 35; and *Programs of Study*.

## **Non-Compliance**

**CS 3.2.14:** The institution's policies are clear concerning ownership of materials, compensation, copyright issues, and the use of revenue derived from the creation and production of all intellectual property. This applies to students, faculty, and staff.

- Compliance
- Partial Compliance
- Non-Compliance

The INSTITUTION is not in compliance with this requirement because it currently has no written and approved policy regarding ownership of materials, compensation, copyright issues, and the use of revenue derived from the creation and production of any intellectual property by faculty, staff or students.

**Action Plan:** A policy statement regarding ownership of materials, compensation, copyright issues, and the use of revenue derived from the creation and production of all intellectual property is now being developed, and it will be presented to the Faculty-Staff Council for review and approval as its opening meeting in September 2003. The policy will then be presented to the President for approval, and in turn, presented to the Board of Trustees in October 2003 for its approval. Once the Board has adopted the policy, it will be incorporated into the *Faculty* and *Staff Handbooks* and will make reference to the fact that the policy also applies to any intellectual property developed by students.