

Procedures for Maintaining and Seeking Specialized Accreditation

Florida Agriculture and Mechanical University (FAMU) is committed to seeking and obtaining accreditation for those programs where graduating from an accredited program is a requirement for practice in the profession. The University will also seek accreditation in other selected programs where accreditation is not required, but offers an advantage to graduates or is otherwise considered advantageous as a verification of meeting standards of quality. Requests to seek initial accreditation should be conveyed through the Dean to the Office of Program Quality within the Division of Strategic Planning, Analysis, and Institutional Effectiveness (SPAIE-PQ). Actions to come into compliance with accreditation standards are the responsibility of the College or School, although the Division of Strategic Planning, Analysis, and Institutional Effectiveness (SPAIE) and the Provost's Office will provide some oversight and assistance in accreditation activities as outlined in this document.

Compliance with accreditation activities should be an on-going pursuit for continuous improvement, rather than an activity that occurs only when a self-study or site visit is due. Many standards, such as faculty scholarship, curriculum, assessment, licensure pass rates and strategic planning, require sustained effort over a period of time, and cannot be accomplished within a short time just prior to accreditation. These are, in fact, the standards usually cited for FAMU programs. Therefore, deans of each college/school should ensure that units maintain continuous readiness for accreditation. Units must also stay abreast of changes in accreditation requirements.

In order to promote successful outcomes for accreditation, please adhere to the following guidelines:

- Faculty and administrators should be engaged as reviewers for the accrediting body so that they are familiar with the expectations, and translate that knowledge to their own unit.
- Faculty and administrators **must** attend training provided by the accrediting bodies for development of self-studies, prior to developing their self-studies.
- Each unit with specialized accreditation should perform an accreditation audit, devise an action plan to address deficiencies and work on those action plans **every year**, to meet the goal of maximum accreditation with no deficiencies.
- Each unit will utilize the accreditation timeline of activities to ensure that accreditation activities are occurring **regularly** to promote successful initial accreditation or reaffirmation.

Goal for Specialized Accreditation

Maximum period of accreditation with no interim reports and no areas of partial or non-compliance.

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Initial Preparation – Timeline of Accreditation Activities

Three Years Prior to Accreditation Visit

- Develop a curriculum map and identify target courses in which assessment of student learning outcomes will occur.
- Schedule a meeting with the Office of University Assessment to review annual assessment results. Identify areas for improvement and target courses in which these changes will be made. One year after implementation, review changes and assess improvements.
- Begin collecting and compiling compliance data.

Two Years Prior to Accreditation Visit

- Review accreditation criteria and standards that will apply to your program and site visit.
- Conduct internal accreditation audit and develop plan of action to address any gaps.
- Schedule meeting with the dean, chair, and faculty to determine resources needed for initial/reaffirmation and the onsite visit, if needed.
- Schedule an initial meeting with SPAIE-PQ and the Provost to discuss the program's internal Accreditation Audit and Action Plan. Be prepared to discuss the recommendations from the last accreditation report and any issues that must be resolved in order to facilitate a successful accreditation outcome. If additional faculty positions are essential in order to meet accreditation criteria, those should be discussed at this meeting.

One Year Prior to Accreditation Visit

- Submit to SPAIE-PQ a **complete** listing of costs for the accreditation, including any critical lines to be filled, costs of consultants, cost of site visit, etc.

Six Weeks Prior to Accreditation Visit

- Submit draft of self-study to dean for review, which should include comments from the consultant if one was utilized.

Two Weeks Prior to Accreditation Visit

- Provide the President, Provost, and SPAIE-PQ a **2-3 page briefing packet** of issues they may need to address with the site visit team, and pertinent information including the basic demographics of the program such as enrollments, number of degrees awarded, number of faculty, and licensure pass rates if applicable. Also summarize the strengths of the program and let the President and Provost know of any issues that may come up.
- Deans must review the briefing documents prior to submission to ensure adherence to the above requirements.

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Self-Study Reports

Once the self-study due-date is known, inform SPAIE-PQ of the date. The Dean is responsible for review of the self-study and ensuring they are appropriate and complete with the goal of demonstrating compliance with all standards. If the program is not in the Dean's discipline, a consultant in the discipline may be hired from the College/School budget to review the self-study at least **twelve weeks in advance of the due date for the self-study**. This will provide time for review, comments, meetings with SPAIE-PQ and the Provost if needed, and making any necessary changes by the deadline. **Prior to submitting the self-study to the accrediting agency, the dean of the college/school will review and approve the final version.** One copy of the final self-study in electronic form should also be submitted to the SPAIE-PQ Office. Along with the final copy of the self-study, the dean will provide a signed statement indicating review of the self-study and comments related to any potential issues that may not have been addressed in the self-study that would result in a citation of weakness/deficiency or area of non-compliance.

If you need data for the self-study, please obtain them from the Office of Institutional Research several months in advance. Submit a TMS through FAMU's Information Technology Services website at <http://support.famu.edu/tms/>. Eventually, most data you need will be available on the Office of Institutional Research's website.

Ensure that the self-study is **not** used as a vehicle to convey requests to the university administration. If there are issues that will have a negative impact on accreditation, **they must be conveyed to the Provost well in advance of writing the self-study** so that the University may assist if necessary.

Site Visits

- As soon as site visit dates are known, inform the SPAIE-PQ Office so that the dates can be placed on the President's and Provost's calendars. Also, after the site visit schedule is developed, inform SPAIE-PQ Office of times and locations of meetings in which the President and Provost need to be involved.
- Ensure that all arrangements are made for the site visit team, that they are escorted from one meeting to another, and that they are provided with information they request.

Response to Accreditation Report

Deans must provide copies of all correspondence with specialized accreditation agencies to the Office of Program Quality within two business days of receiving or sending the correspondence. As soon as the accreditation draft report is received, provide a copy to the SPAIE-PQ Office and set up an appointment to discuss the response. This meeting will include the VP and Associate VP of SPAIE, Program Quality, and the Provost. Subsequent meetings may be scheduled as necessary during the development of the response.

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Accreditation Decision

It is the responsibility of the deans to notify the Director of Program Quality and provide documentation from the respective accrediting agency of its final decisions regarding your programs. Once the decision is made, inform the Provost's Office and SPAIE-PQ of the decision within two business days and provide a copy of the written decision and report conveyed by the accrediting body. If the report is required to be kept confidential, so indicate. **Please note that Deans will bear responsibility for the outcomes of specialized accreditation and they will be reflected in the deans' evaluations.** As such, it is the responsibility of the deans to ensure that the accreditation audits are thorough, and result in issues relating to accreditation standards being addressed before the self-study, with the goal of meeting all the accreditation standards. Deans may, if they feel the need and budget for the expense, hire an external consultant in the discipline, to review and recommend revisions with the objective of demonstrating that all standards are met.

Changes in Response to Accreditation Report

Institute an internal process whereby any weaknesses or areas of non-compliance are systematically addressed well in advance of the next accreditation self-study. The Office of Program Quality within SPAIE will assist the Deans in monitoring these activities by providing the Action Plan form and a database in which summary information on areas of weakness, non compliance and actions to remedy them will be documented by the responsible academic unit annually.

Licensure Pass Rates

- Deans are responsible for ensuring that faculty remain up-to-date on changes to licensure exams within their respective discipline.
- Notification of any changes to the exam is to be submitted to SPAIE-PQ within two business days.
- Following notification of the changes, deans and faculty are to develop a plan of action within six weeks to address the changes. Afterwards, a meeting should be scheduled with SPAIE-PQ and the Provost Office to discuss.
- Deans and Program Directors are responsible for notifying the SPAIE-PQ Office of licensure pass rates within two business days following publication or notification to the program and responding to requests for pass rate updates to the Board of Trustees.

Program Review Summary Report

In addition to the self-study submitted by each academic unit undergoing a program review, a summary report will be completed by the Office of Program Quality on a website designated by the Board of Governors using information provided by the unit undergoing accreditation and the accrediting body's report. This report is submitted annually to the Board of Governors.