

American Samoa Community College

Accreditation Updates

ASCC Fall 2019 Convocation / Faculty Orientation August 12, 2019



Presentation Outline:

- Clarification of the Institutional Self-Evaluation Processes;
- Clarification of the Roles of Standard Chairs;
- Clarification of the Roles of Standard Leads;
- Clarification of the Institutional Self-Evaluation Requirements.



Institutional Self-Evaluation Report (ISER)



4.1: Organization of the Self-Evaluation Processes¹

- The self-evaluation process should be self-reflective and consider the institution's strengths, weaknesses, and achievements. Analysis of institutional data against the institutional mission and objectives, and dialog about the results and effects of the analysis is a crucial element in the process to ensure that the self-evaluation provides a comprehensive review of the institution. Below is a suggested list of relevant stakeholders whom the institution should involve in the self-evaluation process.
 - Administrative Leadership
 - Faculty, including adjunct faculty
 - Students, typically student leaders
 - Support staff, including researchers and technology staff
 - Governing boards



ASCC Accreditation Structure:

- Board of Higher Education
- President
- Accreditation Steering Committee¹
 - Accreditation Standard Chairpersons²
 - Accreditation Standard Section Leads and Co-Leads
 - Accreditation Standard Sub-committees

^{1.} ASCC Participatory Governance Structural Manual, 2015, pp. 16-17

^{2.} ASCC President Memo, Accreditation Standard Chairpersons, 2018-01-24



ASCC Accreditation Structure and Roles:

- Accreditation Steering Committee¹
 - Reviews and approves the institutional processes for accreditation and ISER reporting.
 - Implements the integrated framework for drafting the College's ISER.
 - Reviews the cycle and timeline for all Accreditation reports.
 - Reviews action plans to address ACCJC recommendations.



ASCC Accreditation Structure and Roles:

- Accreditation Standard Chairpersons²
 - Recommends or appoints Standard Leads for each Accreditation sub-standard.
 - Develops, organizes, facilitates, and monitors the calendar and action plans for Standard Section Leads/Co-Leads.
 - Develops actions plans for the improvement of standard evidence, findings, and future plans.
 - Finalizes the Standard drafts in preparation for the review of the Accreditation Steering Committee.



ASCC Accreditation Structure:

- Accreditation Standard Section Leads and Co-Leads
 - Works collaboratively with the Standard Chair to:
 - Carefully review the assigned standards to determine whether the content of the standard is referring to:
 - College Practice
 - College Procedure
 - College Policy
 - Provides recommendations pertaining to the need of appropriate internal constituencies (administrators, faculty, staff, students, board members) in the review and clarification of the College's practice.
 - Documents evidence for each standard and determines the quality of the evidence. Documents improvements plans or recommendations as deemed necessary, to improve the quality of evidence. (Policy manuals, handbooks, SOP manuals, publication, etc.)
 - Develops and drafts the written narratives for each Standard.
- Helpful Notes: Please refer to the Guide to Understanding and Applying Standards²
 - How to interpret Standards and Sources of Evidence and Review Criteria for each Standard

^{1.} ACCJC Guide to Institutional Self-Evaluation, Improvement, and Peer Review (2018). Institutional Self-Evaluation Process, p. 16.

^{2.} ACCJC Guide to Institutional Self-Evaluation, Improvement, and Peer Review (2018). Guide to Understanding Standards, pp. 32-8



4.2: Role of the Designated Organizing Committee¹

• The designated committee is responsible for organizing and coordinating the self-evaluation process to ensure that appropriate progress is made. In addition, it is an important role of the committee to ensure that evidence is shared within the institution and that relevant internal stakeholders, who have knowledge of data and who can contribute to the analysis of data and evidence, are involved in the process as appropriate.

^{1.} ACCJC Guide to Institutional Self-Evaluation, Improvement, and Peer Review (2018). Institutional Self-Evaluation Process, pp. 16-17.



- Standard I: Mission, Academic Quality and Institutional Effectiveness, and Integrity
 - Standard Chair Mr. Sonny J. Leomiti
 - I.A Mission
 - Standard Lead Mrs. Evelyn Fruean
 - I.B Assuring Academic Quality and Institutional Effectiveness
 - Standard Lead Mrs. Virginia Filiga
 - I.C Institutional Integrity
 - Standard Lead Mrs. Tanya Atonio
 - Standard Co-Lead Mr. James Kneubuhl



- Standard II: Student Learning Programs and Support Services
 - Standard Chair Mrs. Letupu Moananu
 - II.A Instructional Programs
 - Standard Lead Dr. Siamaua Ropeti
 - II.B Library and Learning Support Services
 - Standard Lead Mr. Elvis P. Zodiacal
 - Standard Co-Lead Ms. Annie Panama
 - II.C Student Support Services
 - Standard Lead Dr. Emilia S. Le'i



- Standard III: Resources
 - Standard Chair Dr. Lina G. Scanlan
 - III.A Human Resources
 - Standard Lead Mrs. Sereima S. Asifoa
 - Standard Co-Lead Ms. Sialaulelei Saofaigaali'i
 - III.B Physical Resources
 - Standard Lead Mr. Lokeni Lokeni
 - Standard Co-Lead Mrs. Jessie Su'esu'e
 - III.C Technology
 - Standard Lead Mr. Donald Nelson
 - Standard Co-Lead Ms. Fuatapu Alaimalo
 - III.D Financial Resources
 - Standard Lead Ms. Elsie Lesa
 - Standard Co-Lead Mrs. Claire S. Toeava



- Standard IV: Leadership and Governance
 - Standard Chair Mr. Sonny J. Leomiti
 - IV.A Decision-Making Roles and Processes
 - Standard Lead Mr. Sonny J. Leomiti
 - IV.B Chief Executive Officer
 - Standard Lead Mrs. Letupu T. Moananu
 - IV.C Governing Board
 - Standard Lead Mr. Sonny J. Leomiti



Accreditation Timeline



Accreditation Timeline and Important Dates

- Handout 1: 2019 Institutional Self-Evaluation Report (ISER) Calendar
- Individual Standard Meeting Calendar:
 - Please refer to Standard Chairpersons
- ISER First Draft:
 - Due November 22, 2019



ISER Report Requirements



ISER

- I. Title Page
- II. Certification Page
- III. Table of Contents
 - A. Introduction
 - B. Presentation of Student Achievement Data and Institution-set Standards
 - C. Organization of the Self-Evaluation Process
 - D. Organizational Information



ISER

- E. Certification of Continued Institutional Compliance with Eligibility Requirements
- F. Certification of Continued Institutional Compliance with Commission Policies and Federal Regulations
- G. Structure of the Institutional Analysis of Standards
 - 1. Evidence of Meeting the Standard (for each Standard)
 - 2. Analysis and Evaluation (for each Standard)
 - 3. Conclusion (at the end of each section) and Improvement Plan(s) Arising out of the Self-Evaluation Process
 - 4. Evidence List (also at the end of each section)
- H. Quality Focus Essay (not to exceed 4,000 words)



Accreditation 2020 Timeline



2020 Timeline

- Quality Focus Improvement Plans
- Planning tasks, monitoring, and development of Quality Focus Essays.
- September 2020: Finalizing of the Accreditation Institutional Self-Evaluation Report



ISER Key Events

Key Events	Due Date
ASCC Institutional Self-Evaluation Report (ISER) - 1st Draft	November 22, 2019
Accreditation Steering Committee review of ISER - 1st Draft	December 03-07, 2019
Quality Focus Improvement Plans	May 22, 2020
Development of Quality Focused Essays	July 24, 2020
ASCC Institutional Self-Evaluation Report 2nd Draft	August 28, 2020
Accreditation Steering Committee review of ISER - 2nd Draft	September 02-04, 2020
Culmination of Improvement Plans and Quality Focus Essays	January 29, 2021
ASCC Institutional Self-Evaluation Report 3rd – Final Draft	February 12, 2021
Accreditation Steering Committee review of ISER - Final Draft	February 17-19, 2021
Final ISER Report is submitted for the review of the President and the Board of Higher Education	March 31, 2021
Institutional Self-Evaluation Report submitted to ACCJC (at least 60 days before visit)	August 2021
External Peer Review Team Visit	October 2021
Draft Team Report sent to College CEO for correction of errors and fact	November 2021
Commission meeting and decision on accreditation	January 2022
Commission action letter received by College posted to the Website.	February 2022



American Samoa Community College

Accreditation Standard I: I.A, I.B, I.C

Accreditation Liaison Officers and Standard I Chairperson February 21, 2019



Presentation Outline:

- Clarification of Standard I
- Clarification of Standard Lead Tasks
 - ASCC Policies
 - ASCC Procedures
 - ASCC Practice
- Clarification of Committee Action Plan and Meeting Schedule
- **Due Date:** Action Plan and Meeting Schedule (March 29, 2019)



Standard I



Accreditation Standard I:

- Standard I: Mission, Academic Quality and Institutional Effectiveness, and Integrity
 - I.A Mission
 - (I.A.1-ER 6, I.A.2, I.A.3, I.A.4-ER 6)
 - I.B Assuring Academic Quality and Institutional Effectiveness
 - (I.B.1, I.B.2-ER 11, I.B.3-ER 11, I.B.4, I.B.5, I.B.6, I.B.7, I.B.8, I.B.9-ER 19)
 - I.C Institutional Integrity
 - (I.C.1-ER 20, I.C.2-ER 20, I.C.3-ER 19, I.C.4, I.C.5, I.C.6, I.C.7-ER 13, I.C.8, I.C.9, I.C.10, I.C.11, I.C.12-ER 21, I.C.13-ER 21, I.C.14)



Initiating the Planning Processes:

- 6 Step process for the initiating of the Standard review:
 - 1. Thoroughly read to understand each of the assigned Accreditation Standards. (Please refer to Standard Chairpersons or ALOs for necessary clarifications)
 - 2. Determine whether the Standard is referring to a policy, procedure, or practice.
 - 3. Determine the types of evidence available and if the evidence is accessible to all stakeholders.
 - 4. Determine ASCC personnel conducive to the Standard dialogue based on his/her role(s) and the level of involvement particular to the implementation of a service, monitoring of procedures and reporting, or decision-making. (faculty, staff, administrators, students, board members, etc.)
 - 5. Develop a Peer Review action plan and meeting schedule for the review of ASCC's Mission based on Accreditation Standard I.A, I.B, and I.C.
 - 6. Submit each Action Plan and Meeting Schedules to the Standard Chair. (Due March 29, 2019)



Standard Clarification:

- Determine what the Standard is asking for:
 - "To understand the Standards and what they are asking, it helps to deconstruct the sentence grammatically-look for the subjects and the verbs. Each statement in the Standard delineates that the institution is supposed to do something or that someone within the institution, such as the CEO or the governing board, is supposed to do something. Descriptive words and phrases in the Standards define the scope of the action that the institution or person is supposed to engage in. The descriptive phrases frequently provide parameters that limit the scope of the expected activity. If the action in the statement is followed by nouns (direct objects), those nouns can also limit the scope of persons or items upon which the action is expected to be enacted.
 - When evaluating the institution's compliance with a Standard, campus personnel who are working on the ISER should note the limiting descriptors in the statements. They should then search for and analyze evidence that pertains only to what the Standard requires within the limits of those descriptors. They need not stray into tangential areas that are indirectly related to the Standard, Similarly, members of peer review team should expect to evaluate only evidence that pertains to the Standard as the institution has applied the Standard to its own mission."1



American Samoa Community College

Review of the Accreditation Standards Presentation to Accreditation Standard Leads and Co-Leads

Accreditation Liaison Officers
April 12, 2019



Presentation Outline:

- Provide guidance for Standard Review Processes¹
- Provide guidance for the reviewing of Accreditation Standards



4.2: Role of the Designated Organizing Committee¹

• The designated committee is responsible for organizing and coordinating the self-evaluation process to ensure that appropriate progress is made. In addition, it is an important role of the committee to ensure that evidence is shared within the institution and that relevant internal stakeholders, who have knowledge of data and who can contribute to the analysis of data and evidence, are involved in the process as appropriate.

^{1.} ACCJC Guide to Institutional Self-Evaluation, Improvement, and Peer Review (2018). Institutional Self-Evaluation Process, pp. 16-17.



Standard Review Processes



Process:

- 1. Standard Leads/Co-Leads confirm the participation of subcommittee members.
- 2. Standard Leads/Co-Leads clarify the purpose and meeting schedule(s) for the review of the Accreditation Standards¹
- 3. Standard Leads/Co-Leads ensure that appropriate resources are made available to all subcommittee members.²
- 4. Standard Leads/Co-Leads document the outcome of each review particular to Standard discussions and evidence in preparation for the compiling of the Standard draft(s).³

^{1.} ASCC Accreditation Standard Processes Presentation – 02/21; 03/21; and 03/22 (PowerPoint, slide 5)

^{2.} Standard Lead/Co-Lead USB Flashdrive – Section A: Access to Digital Information

^{3.} Standard Lead/Co-Lead USB Flashdrive – Section B: Access to Resources



Review of Accreditation Standards

Three Step Review Process:

- 1. Thoroughly read to understand each of the assigned Accreditation Standards. (*Please refer to Standard Chairpersons or ALOs for necessary clarifications*)
- 2. Determine whether the Standard is referring to a policy, procedure, or practice.
- 3. Determine the types of evidence available and if the evidence is accessible to all stakeholders.



Review of Accreditation Standards

Clarification of the 3-Step Review Process:

- Step 1: Understanding the Standard
 - a. "Understand the Standards and what they are asking, it helps to deconstruct the sentence grammatically-look for the subjects and the verbs. Each statement in the Standards delineates that the institution is supposed to do something or that someone within the institution, such as the <u>CEO</u> or the governing board, is supposed to do something.
 - b. Descriptive words and phrases in the Standards define the scope of the action that the institution or person is supposed to engage in. The descriptive phrases frequently provide parameters that limit the scope of the expected activity. If the action in the statement is followed by nouns (direct objects), those nouns can also limit the scope of persons or items upon which the action is expected to be enacted."¹



Review of Accreditation Standards

Clarification of the 3-Step Review Process:

- Step 2: Determining the 'who' and 'what' in the 'how' and 'why'
 - a. Determine the 'who' in each Standard. Majority of the Standards refers to the college or institution. The 'who' can be identified by actions described in the Standard, which may refer to the President, Board of Higher Education, internal constituencies¹, decision-making groups², or external stakeholders such as the Fono.
 - b. Determine the 'what' in each Standard. The 'what' refers to documented action(s), result(s), or decision(s) made, relevant to the Standard.
 - c. Review the 'how' and 'why' (process and purpose) in relationship to the 'who' and 'what', to determine if the Standard is referring to a policy, procedure, or practice.
- <u>Note</u>: Always keep in mind that all College Board policies, procedures, and practices correspond to mission effectiveness, which is bound by a <u>process</u> and linked to a <u>purpose</u>. The purpose throughout this review is focused on the <u>ASCC Mission</u>.

^{1.} ASCC Participatory Governance Structural Manual (2015). Constituent roles in governance and decision-making, pp. 13-15.

^{2.} ASCC Participatory Governance Structural Manual (2015). <u>Types of decision-making groups that provide recommendations</u>, pp. 16-19.



Review of Accreditation Standards

Clarification of the 3-Step Review Process:

- Step 3: Determining the relevancy of Evidence
 - a. Determine all possible evidence sources for each Standard.
 - b. Determine what evidence provides sufficient content in relationship to the Standard. Sorting evidence by determining the level of significance according to the Standard, may help lessen multiple referencing of evidence for each Standard.
 - c. Provide recommendations focusing on the quality of evidence or ways to improve the documentation of ASCC's processes that may include internal reports, publications, manuals, handbooks, etc.
- Note: Quality Evidence provides concrete facts on institutional processes and documentations defined to ensure quality improvements towards achieving the mission of the College or progress made to guarantee mission effectiveness/sustainability. Please do not "stray into tangential areas or evidence that are indirectly related to the Standard. Subcommittees should expect to evaluate only evidence that pertains to the Standard as the institution has applied the Standard to its own mission."



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