

Specialized Program Accreditation Guidelines

Specialized accreditation refers to organizations that establish standards related to a specific profession. Many degrees (for example, English, history, etc.) are in fields that do not have specialized accrediting bodies. Some degrees that prepare students for specific professions (for example, counseling, nursing, business, music, etc.) do have accrediting bodies. In some cases, graduation from an accredited program is required for students to obtain professional licensure or certification.

Academic programs seek specialized accreditation for a variety of reasons, including a desire to meet professional standards, to ensure that students are eligible for licensure and certification, and to assure students, graduates, and employers of program quality. Programs with specialized accreditation have been determined to meet the professional standards of their field through rigorous self-study and evaluation by the accrediting body.

Specialized program accreditation standards and compliance vary greatly from agency to agency. BGSU currently maintains relationships with approximately 28 academic program and facilities accreditation agencies, each with its own set of requirements and accreditation cycles. These accreditations are vital elements in maintaining BGSU's regional (HLC) accreditation, as well as important recruitment/retention and strategic planning allies.

Bowling Green State University (BGSU) is committed to maintaining standards outlined by accrediting agencies at all levels: institution (e.g., Higher Learning Commission), unit (e.g., Council for Accreditation of Educator Preparation [CAEP]), and program (e.g., Accreditation Board for Engineering & Technology [ABET]). The Ohio Department of Higher Education (ODHE, formerly the Ohio Board of Regents) also has a role in all university accreditations under the guidelines for Program Review. The ODHE guidelines require communication regarding accreditation and accreditation status changes of programs within institutes of higher education and their respective accrediting agencies.

Accreditation Responsibilities

Many accreditation agencies are moving towards an expectation that programs adopt a continuous improvement model focusing on student outcomes/competencies. This approach takes time, careful consideration, planning, and monitoring on a regular basis. There are units within BGSU that can assist faculty, administrators, and BGSU personnel with various aspects of implementing a continuous improvement evaluation plan and the assessment of student outcomes/competencies necessary for accreditation. Additionally, open communication and early action by all involved in the accreditation process is necessary given the increased need for external reporting about accreditation activities to state and national agencies.

Program faculty, Unit/Program Accreditation Liaison/Coordinators, college deans, the Office of Institutional Research (OIR), and the Office of Institutional Effectiveness (OIE) fulfill critical roles in program accreditation.

- The program faculty and the Unit/Program Accreditation Liaison/Coordinator engage in the appraisal of their academic program with a focus on continuous improvement.
- The Unit/Program Accreditation Liaison/Coordinator leads the accreditation process and all accreditation activities (e.g., completing self-study and accreditation reports, visits from accreditation teams, etc.).
- The dean reviews and endorses reports and other communications prior to submission to OIE.

- OIR is the official data source for the institution. All data used in accreditation materials must be vetted through OIR.
- OIE reviews and approves all accreditation reports and documents prior to their submission; serves as the Institutional Liaison with the Higher Learning Commission (HLC) and the Ohio Department of Higher Education (ODHE); and serves as the institutional contact between the President/Provost's office, and Unit/Program Accreditation Liaison/Coordinator.

Accreditation Activities & Institutional Deadlines

Timeline of Accreditation Activity	Institutional Deadlines	Notes
Prepare Self-Study	2 Years before self-study is due meet with the Director and/or the Program Review and Institutional Accreditation Coordinator of OIE.	The Director and/or the Program Review and Institutional Accreditation Coordinator of OIE will be able to help identify resources to construct the self-study.
Data Requests	At least 2 weeks before data are needed , submit a data request form to the Office of Institutional Research (OIR). Data requests to OIR can be submitted online at https://www.bgsu.edu/institutional-research/RequestForms.html Student learning outcomes data and data gathered from the BGSU Graduation Survey may be requested from the Office of Academic Assessment (OAA).	OIR and OAA will need some time to pull the requested data, so plan ahead.
Complete the Self-Study	At least 1 month (or earlier) before it is due , provide the study and evidence files to the Director and/or Program Review and Institutional Accreditation Coordinator of OIE with signed endorsement from the dean.	The dean will review the study and evidence files prior to submission and review by OIE and provide feedback and endorsement to the Unit/Program Accreditation Liaison/Coordinator. The Director and/or Program Review and Institutional Accreditation Coordinator of OIE reviews and approves all reports and documents, requests changes be made to the self-study, and briefs the Provost on the content of the self-study prior to submission to the accreditation agency. NOTE: If the Director of IE requests changes be made to the self-study, the final, corrected/modified version of the self-study must be re-reviewed and approved by the Director and/or Program Review and Institutional Accreditation Coordinator of OIE before it is submitted.
Schedule Team Visit with OIE Designee and/or Provost/President. (The Director and/or Program Review and Institutional Accreditation Coordinator	Contact OIE Designee to put holds on the President and/or Provost's calendar(s) as may be required by the Specialized Accreditation Agency.	OIE Designee will not finalize the schedules until after reviewing the completed self-study. The President and Provost Offices will not allow holds on calendars without verification by the OIE Designee.

will serve as OIE Designee)		
Team Visit Report	Send a copy of the Team Visit Report/Findings to OIE as soon as it is received. Copies may be emailed to institutionaleff@bgsu.edu	OIE Director and/or Program Review and Institutional Accreditation Coordinator will debrief the Provost. The college dean also may debrief the Provost as may be requested.
Communication/Response from the Program/College to the Accreditation Team Visit Report and/or Final Accreditation Action Reports/ Rejoinder	Send all responses to the college dean for feedback and endorsement. Then send all responses to OIE before submitting to the accreditor with enough time for review by OIE (at least two weeks). Consult with OIE Director and/or Program Review and Institutional Accreditation Coordinator if requested and/or as needed.	The dean will review all communication for feedback and endorsement to the Unit/Program Accreditation Liaison/Coordinator prior to submission to OIE. All communication from a program and/or college in response to a team visit report and/or final accreditation action report must be vetted by OIE before being submitted to the accreditation agency.
Accreditation Action Reports	Send a copy of the Team Visit Report/Findings to OIE as soon as it is received. Copies may be emailed to institutionaleff@bgsu.edu	OIE Director and/or Program Review and Institutional Accreditation Coordinator may request a meeting with the Liaison/Coordinator and a representative of the dean's office to discuss action planning for programmatic improvement.

Self-Study Preparation

A meeting between the Unit/Program Accreditation Liaison/Coordinator and the OIE Designee (i.e., OIE Director and/or Program Review and Institutional Accreditation Coordinator) must occur early in the accreditation cycle (ideally **two years** before the self-study is due to the accreditors) to discuss data and institutional assistance. The OIE Designee may assist the Unit/Program Accreditation Liaison/Coordinator with the following:

- providing templates (e.g., standardized text/narratives for contextual information, BGSU assessment, etc.)
- formatting (e.g., hyperlinking, automatic table of contents, appendices, charts, graphs, etc.)
- verifying institutional data sources accuracy
- reading and copyediting the report for compliance with agency requirements and standards (including addressing any weaknesses or concerns from the last visit), HLC requirements and standards as applicable, adherence to BGSU's policies and procedures, compliance with the BGSU Writing Style Guide, spelling and grammatical errors.

Data Requests

Institutional Data (i.e., enrollment, graduation, etc.): All primary institutional data, used in accreditation reports (e.g., initial self-studies, continuing self-studies, annual updates, etc.) should come from the Office of Institutional Research (OIR). Institutional data from the OIR may be requested using the [Data Request Form](#) on OIR homepage: <https://www.bgsu.edu/institutional-research/RequestForms.html>. All data used within accreditation reports **must** be vetted by OIR.

OIE may also provide secondary institutional data set gathered from Academic Performance Solutions (APS). Academic Performance Solutions (**APS**) is a decision-support platform that enables individuals

across institutional departments to easily access data and peer benchmarks around course offerings, faculty workload, course completion rates, department-level costs, and other key performance indicators. APS is available to current BGSU Deans, A-Deans, Department Chairs and Directors. Contact OIE Association Director for more information or at institutionaleff@bgsu.edu

Student Learning Outcomes & Graduation Survey Data: Student learning outcomes data and data collected from the BGSU Graduation Survey may be requested from the Office of Academic Assessment (OAA). Please contact the office at assessment@bgsu.edu.

Please note that requests for institutional data could take two weeks or more to fulfill depending upon the complexity of the data request, availability of data, and capacity/activities these offices. Adequate time should be allowed in planning toward the final self-study compilation and submission.

Completing Initial Self-Studies, Continuing Self-Studies, & Annual Updates

Accreditation reports (e.g., initial self-studies, continuing self-studies, annual updates, etc.) and evidence files are to be sent to the dean for review and endorsement. Next, the accreditation reports and evidence files must be shared with OIE **at least one month** before they are due to accreditation agencies. **OIE, in consultation with the Provost, Director of the Office of Institutional Research, and the Associate Director of Academic Assessment, may request that changes be made to the self-study or other accreditation reports before they are submitted to the specialized accreditation agency.** Therefore, it is critical that the report and evidence files be submitted to OIE with enough time to incorporate requested changes to the self-study.

Any report and/or update to an external agency **must be vetted by OIE prior** to submission. After accreditation reports and evidence files have been reviewed by OIE, the Unit/Program Accreditation Liaison/Coordinator is responsible for making any requested changes to the self-study. If OIE requests changes be made to the self-study, the corrected/modified version of the self-study **must be** re-reviewed and approved by OIE **before** it is submitted to the professional accreditation agency. After sending a final copy to OIE and it is approved, the Unit/Program Accreditation Liaison/Coordinator can submit or upload the accreditation materials (self-study/report and evidence files).

*Please note that some accreditation systems require multiple institutional contacts (e.g., President, Provost, Dean, Institutional Research Representative, etc.) to sign off on the submitted materials. If this is the case, more time may be needed to review the file. The President and/or Provost **will not sign off** on submitted materials for accreditation until review by the Office of Institutional Effectiveness is completed.*

Team Visits

The Unit/Program Accreditation Liaison/Coordinator is responsible for coordinating accreditation team visits, scheduling meetings with the necessary institutional contacts, collaborating with OIE Director and/or Program Review and Institutional Accreditation Coordinator to schedule meetings with the President and/or Provost as needed, and informing OIE of the overall accreditation schedule.

*Please note that accreditation team visits with the President and/or Provost **will not** be confirmed unless OIE has reviewed submitted accreditation reports and evidence files.*

Communication with Accreditors: Changes in Accreditation Status, Final Accreditation Outcome & Significant Findings

Typically, the accreditation agency communicates directly with the Unit/Program Accreditation Liaison/Coordinator, Dean, Provost, and/or President about accreditation visit outcomes and/or significant findings. However, in some cases information related to accreditation is only shared with the Unit/Program Accreditation Liaison/Coordinator. To ensure that accreditation information is accurate, the Unit/Program Accreditation Liaison/Coordinator is responsible for communicating with and providing copies of any communications regarding accreditation (i.e., change in accreditation status, team visit

outcomes/reports, reaffirmation letter, and/or significant findings) to OIE Director and/or Institutional Accreditation Coordinator. **This information must be housed within OIE.**

The Office of Institutional Effectiveness should be notified **immediately** regarding any changes in specialized accreditation status. The university's Accreditation Liaison shall be responsible for informing the Higher Learning Commission and/or ODHE of any pending or final actions by a USDOE-recognized accrediting agency to suspend, revoke, withdraw, or terminate a program's accreditation and to impose probation or an equivalent status.

Transferring Accreditation from One Agency to Another

Under rare circumstances, programs may find it necessary to seek accreditation through a different agency. Examples include: a new agency that has more stringent standards or greater benefits to students; or, the current agency fails to provide the services for which it was contracted (e.g., delays in reaccreditation). Program's administrative unit should notify OIE and the Provost's office to alert them of the unit's intent to transfer accreditation from one agency to another and provide documentation as to the reasons for the requested change. The unit's accreditation contact then should meet with OIE Designee (i.e., OIE Director and/or Program Review and Institutional Accreditation Coordinator) to discuss and coordinate submission of termination letter to existing agency, and initiation of accreditation with the new agency. The remaining process for transferring accreditation to a new accreditor follows the same processes as described in the table above for seeking and/or continuing Specialized Program Accreditation.

Contact for Specialized Accreditation Assistance

Office of Institutional Effectiveness – institutionaleff@bgsu.edu

- Director of Institutional Effectiveness and HLC Accreditation Liaison Officer, Dr. John Mark Lommel – jmlommel@bgsu.edu
- Associate Director of Institutional Effectiveness, Brigitte Gibson - bgibso@bgsu.edu
- Program Review and Institutional Accreditation Coordinator, institutionaleff@bgsu.edu

Office of Academic Assessment – assessment@bgsu.edu

- Associate Director of Academic Assessment, Dr. Jessica Turos - jmturos@bgsu.edu

Office of Institutional Research – iroffice@bgsu.edu

- Director of the Office of Institutional Research, Dr. Oyebanjo Lajubutu - lajubuo@bgsu.edu

APPENDICES – Higher Learning Commission (HLC) Policies

Policy Title: Assumed Practices (Revisions Adopted February 2019) Policy Number: CRRT.B.10.020A.

Integrity: Ethical and Responsible Conduct: 7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.

a. An institution offering programs that require specialized accreditation or recognition by a state licensing board or other entity in order for its students to be certified or to sit for the licensing examination in states where its students reside either has the appropriate accreditation and recognition or discloses publicly and clearly the consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.”

b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status and recognition of the program by state licensing boards at each location.”

“c. An institution that provides a program that prepares students for a licensure, certification, or other qualifying examination publicly discloses its pass rate on that examination, unless such information is not available to the institution.

HLC Criteria:

Criterion Two. Integrity: Ethical and Responsible Conduct - The institution acts with integrity; its conduct is ethical and responsible. Core Component 2.B. The institution presents itself clearly and completely to its students and to the public.”

Criterion Four. Teaching and Learning: Evaluation and Improvement - The institution demonstrates responsibility for the quality of its educational programs, learning environments and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement. Core Component 4.A. The institution ensures the quality of its educational offerings. Core Subcomponent 4.A.5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.

Policy Title: Standing with State and Other Accrediting Agencies. Policy Number: FDCR.A.10.090

An institution has a responsibility to remain in good standing with each state in which it is authorized or licensed as well as with any other institutional or programmatic accrediting agency recognized by the U.S. Department of Education by which it is accredited or pre-accredited up to the point that it voluntarily withdraws from such relationships. An institution shall fairly represent to the Commission and to the public its history or current or previous status with other institutional or programmatic accrediting bodies and with each state in which it is authorized or licensed.

An institution shall disclose to the Commission any pending or final state actions that affect the institution's legal status or authority to grant degrees or offer programs and any pending or final actions by an accrediting agency to withdraw accredited or pre-accredited status, impose a sanction or deny an application for such status. Such disclosure shall take place at the time of the action by the other entity and on the Commission's Institutional Update as well as in preparation for a comprehensive evaluation by the Commission.

Commission Review. If another such accrediting agency or if a state has taken any of these actions, the Commission will undertake a prompt review of the institution and the related action.

With regard to an applying institution, the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own

decision to grant candidacy or accreditation. If it chooses to grant candidacy or accreditation to such an institution, it will provide the Secretary of Education a written explanation of why that action is appropriate within thirty days of taking the action.

With regard to an accredited institution, the Commission will determine whether additional review or Commission action, including sanction or withdrawal of accreditation, is appropriate. The Commission may undertake its review in any way provided for in Commission policy."

Policy Number Key - Section FDCR: Policies Required by Federal Regulation Chapter A: Federal Compliance Part 10: General

Last Revised: June 2012

First Adopted: January 1983

Revision History: Policy 9.1 (Adopted January 1983, revised February 1996, effective June 1996, revised February 1998, revised June 2008); Policy 9.2 (Adopted February 1986, revised February 1996, effective July 1996, revised June 2001, revised June 2008); Policy 9.3 (Adopted February 1988, revised February 1996, revised February 1998); Policy 9.4 (Adopted February 1998, revised June 2008); combined, revised, and renumbered June 2012 Notes: Former policy number 4.0(i).

Policy Title: Obligations of Affiliation Policy Number: INST.B.30.020

The institution notifies the Commission when it receives an adverse action from or has been placed on sanction by any other accrediting agency or if a state has issued a pending or final action that affects the institution's legal status or authority to grant degrees.

Policy Number Key- Section INST: Institutional Policies Chapter B: Requirements for Achieving and Maintaining Affiliation Part 30: Obligations of Membership and Affiliation

Last Revised: February 2017

First Adopted: January 1983

Revision History: Renumbered February 2010, February 2012, June 2013, February 2017Notes: Policies combined November 2012 – 1.6, 2013 – 1.6(a), 1.6(b), 1.6(b)1. The Revised Criteria for Accreditation, Assumed Practices, and other new and revised related policies adopted February 2012 are effective for all accredited institutions on January 1, 2013.

Policy Title: Relation with Other Recognized Accrediting Agencies Policy Number: COMM.C.10.020

The Commission will base the grant or reaffirmation of accreditation on its own Criteria for Accreditation and processes and will evaluate the entire institution, but in granting or reaffirming status to an institution it will take into consideration actions, particularly but not exclusively adverse actions, sanctions, and show-cause orders, taken or issued by any recognized institutional, specialized or professional accrediting agency previously or currently associated with an institution.

Consideration for the Accreditation Decisions or Other Agencies. In determining whether an institution meets the Commission's Eligibility Requirements, Criteria for Accreditation and Commission Requirements, the Commission will consider the reports, action letters and other information of other recognized institutional, specialized and professional accrediting agencies previously or currently associated with the institution, with specific attention to any adverse, probationary or show-cause actions. The Commission will expect that institutions will disclose such information in the Eligibility Process and place it in its Assurance File when seeking candidate or accredited status or when undergoing regular review by the Commission through any pathway. The Commission may request information directly from the recognized accrediting agency and place it in the Assurance File for review by an evaluation team for consideration in the accrediting action.

In considering a substantive change the Commission may request information from an institution regarding its specialized or professional accreditation or may request it directly from the accrediting agency and take it into account in the accrediting action.

If another recognized accrediting agency has denied or withdrawn affiliation or pre-accreditation or placed sanctions on the institution the Commission, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant accredited or candidate for accreditation status. If it chooses to grant affiliation to such an institution, it will provide the Secretary of Education a written explanation within thirty (30) days of taking action of why the issues that led to the action by the other recognized accrediting agency did not preclude the Commission from reaching a decision to grant accreditation or candidacy or did not otherwise justify a different action.

Information Provided to Other Recognized Accrediting Agencies. If the Commission takes action to place an institution on notice or probation or withdraw or deny accreditation or candidate for accreditation status, or if the Commission places an institution on show-cause, the Commission will notify all recognized accreditors at the same time that it notifies the institution and the U.S. Department of Education but not later than thirty days after the action, and will include a Public Disclosure Notice that provides reasons for the Commission's decision. If the action was denial or withdrawal of accredited or candidate for accreditation status that Public Disclosure will within sixty (60) days after the action becomes final include comments from the affected institution or information to indicate that the institution was provided an opportunity to comment but did not do so. The Commission will notify state higher education agencies of an action to reaffirm or grant accreditation or initial candidacy or approve a substantive change or the results of monitoring within thirty days of the action; it will notify the state higher education agency of a voluntary resignation by an institution of its accredited or candidate status within thirty days of receiving notification from the institution of the resignation.

If another recognized accreditor seeks written or other information about an institution that has accredited or candidate status with the Commission, or that has previously sought such status with the Commission, the Commission will forward that information to the other accreditor after receiving a written request.

Coordinated Visits with Other Recognized Accrediting Agencies. The Commission may conduct a coordinated visit with a specialized or professional accrediting agency recognized by the USDE or CHEA. Coordinated visits typically will be limited to no more than three participating agencies. While the teams of the participating agencies may coordinate some or many of their activities on campus, decision-making and the production of the team report will be done separately by each agency. A letter of agreement for each coordinated visit, signed by the Presidents of the participating agencies or their designees, will lay out the level of coordination and interaction allowed among agency representatives involved in the visit.

Policy Number Key- Section COMM: Commission Policies Chapter C: Relationships with External Agencies Part 10: General

Last Revised: April 2013

First Adopted: January 1983, February 1986, June 2000

Revision History: February 1996, February 1998, June 2001, February 2008, June 2008, February 2009, June 2012, April 2013 Notes: Former policy number – 9.1