**FINAL ANALYSIS AND RECOMMENDATION FOR**

**CEA**

**Meeting Date: 02/2022**

**Type of Submission:**
Renewal Petition

**Current Scope of recognition:**
The accreditation of postsecondary, non-degree-granting English language programs and institutions in the United States.

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<td><strong>Narrative:</strong></td>
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<tr>
<td>No change requested.</td>
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<td>The agency has not requested any changes to its scope with the Department of Education.</td>
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<th><strong>Criteria: 602.10 Link to Federal programs</strong></th>
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<td><strong>Analyst Remarks to Narrative:</strong></td>
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<td>The Agency has attested that there have been no changes to the policies and/or practices since its last review before the NACIQI.</td>
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**Criteria: 602.11 Geographic scope of accrediting activities.**

**Narrative:**
There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**
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**Analyst Worksheet - Narrative**
Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:
The Agency has attested that there have been no changes to the policies and/or practices since its last review before NACIQI.

**List of Document(s) Uploaded by Analyst - Narrative**
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**Analyst Worksheet - Response**
Analyst Review Status for Response:
Not Reviewed
### Criteria: 602.13 Acceptance of the agency by others.

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

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**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The Agency has attested that there have been no changes to the policies and/or practices since its last review before the NACIQI.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

Analyst Review Status for Response:

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### Criteria: 602.14(a) Category of Agency

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

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**Analyst Worksheet- Narrative**

Analyst Review Status:
Meets the requirements of this section.

Analyst Remarks to Narrative:

The Agency has attested that there have been no changes to the policies and/or practices since its last review before the NACIQI.

List of Document(s) Uploaded by Analyst - Narrative

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Analyst Worksheet - Response

Analyst Review Status for Response:

Criteria: 602.15(a)(1) Staffing/Financial Resources

Narrative:

Effective February 2020, CEA accredits 147 programs and 176 language institutions (with another 25 international sites) for a total of 348 sites. Approximately 50 sites are in process, seeking accreditation over the next 2–3 years. As USDE staff are aware, with the passage of P.L. 111-306 (the “Accreditation Act”) in 2011, all ESL schools that sought certification by the Department of Homeland Security to issue the immigration documents necessary to enroll international students were required to be accredited by a USDE-recognized accreditation agency. All such schools had to be accredited by December 2013 and as a result, CEA tripled in size in that 2-year (2011 – 2013). To meet the needs of our larger accreditation operation, we increased permanent full-time staff from 3 to the present 8 individuals. Since 2015, CEA has been a stable larger agency with this full-time staff of 8. The number of staff and their workloads undergo regular review to ensure that the needs of accredited and in-process sites, Commission governance and decision-making activity, and other agency activities are met. Information for this regular analysis comprises review of timeliness of CEA services, strategic planning reviews, project evaluations, annual budget analysis, staff performance evaluations, and other means.

Among CEA’s 8 staff, 6 are credentialed in the field and have responsibilities related to guiding sites through self-study and applying the CEA Standards in various settings such as during site visits, writing staff reports, and supporting the Commission during review of standards, decision-making, and compliance actions. Each of these 6 hold advanced degrees in the field and together have extensive experience in a wide range of programs, institutions, and association positions in English language program/institution settings. Two other full-time staff have appropriate degrees and experience for their positions; as director of finance and operations and as administrative assistant. (Exhibit 1 Staff job descriptions) (Exhibit 2 Staff CVs/resumes)

Note: CEA’s current executive director will retire February 1, 2020 and the associate director will become executive director. will assist on staff until a new staff member is hired following assessment of staffing needs. An updated organizational chart and CVs of any new staff will be available on-site.

In addition to full-time staff, CEA maintains a pool of 13 trained “CEA Specialists” (C-Specs) who work on contract by assignment. Along with and under supervision of full-time staff, C-Specs act as site visit
representatives and assist with writing two types of staff analysis reports, to support Commission decisions and to support the Standards Compliance Committee’s compliance actions including review of Interim Reports and Annual Reports. CEA’s accreditation processes are organized into 3 cycles per year, with 3 Commission meetings at which accreditation decisions are made and compliance reports reviewed. Use of C-Specs allows completion of all tasks within each cycle as the number of tasks expands and contracts and ensures that all process timelines are met. Among the 13 C-Specs, all have advanced degrees in the field, and 9 are former Commissioners, of which 7 are former Commission chairs. All have also been CEA self-study coordinators and/or trained reviewers. Those C-Specs who act as CEA site visit representatives are trained by and under supervision of the accreditation review manager; they participate in training and update conference calls and webinars and attend an annual 2-day Rep Seminar in the CEA offices. C-Specs who prepare staff reports undergo structured training upon assignment to the pool and on-going training by conference call at the start of each cycle. Available: C-Specs’ resumes, signed MOUs, training materials, meeting agendas, other.

Accreditation activities are carried out by work teams, each led by a full-time staff member. Work team membership comprises other full-time staff members and, in some cases, C-Specs. One full-time staff member is assigned to lead each accreditation process or service function (finance/operations, standards compliance after accreditation, IT and technology, and accreditation operations comprised of eligibility and database management, site review management, and accreditation decision support). (Exhibit 3 CEA Organizational chart)

Per cycle, CEA averages 27 - 30 site visits and related activities, resulting in 85 – 90 Commission decisions per year. The Standards Compliance Committee reviews approximately 90 compliance reports per cycle, submitted by accredited sites. CEA has been able to provide all accreditation process activities as required by the expected timeline for every site. No step in the accreditation process for any site has been delayed or postponed due to lack of staffing capacity. All records related to sites are filed in hard and soft files in a timely way with no appreciable backlog. A custom-designed database of applicant, accredited, and inactive sites is maintained by the accreditation process manager; all entries are up-to-date within a two-week window. Staff return phone calls and respond to email within 24 hours.

CEA’s financial management is overseen by qualified professionals. CEA employs a full-time director of finance and operations who manages all bookkeeping and accounting functions and conducts review of sites’ financials. By contract with CEA, an external CPA firm approves CEA’s quarterly and end-of-year financial reports for review by the Finance Committee of the Commission and prepares CEA’s annual IRS Form 990. CEA obtains an independent accountant’s review every four years, with the last review conducted in 2019 on CEA’s 2018 financials. That review resulted in a clean report, as did the previous review in 2015. (Exhibit 4 Report 2014) (Exhibit 5 Report 2018) CEA’s Form 990 is reviewed by the full Commission, filed with the IRS by deadlines, and available on-site and at Guidestar.com.

CEA is funded by fees due for certain action steps in the accreditation process and through annual sustaining fees paid by accredited sites due in February of each year. There are no other sources of funding. CEA’s financial position is strong, as reflected on the 2019 draft end-of-year profit and loss statement and balance sheet. The December 2019 balance sheet reflects current assets of $ and equity after liabilities of $. A financial reserve policy is in place that requires that 50% of any positive fund balance be allocated to an operating reserve until a 12-month reserve is achieved. This goal of a $ reserve is nearly met, as reflected on the 2019 financial report drafts; see line item 32000 on the 2019 balance sheet reflecting Reserves of $. (The 33000 Special Reserves line is a dedicated reserve for scoping an online accreditation management system and is not an operating reserve.) The Finance Committee will determine whether to transfer 2019 net income to reserves; this will be documented when

Regarding financial planning for future stability, 90% of CEA’s accredited sites provide instruction to international students in the U.S.; sustaining fees are based on a student-weeks calculation derived from student enrollments. A variety of factors can affect international student enrollments in U.S. programs and institutions; 2019 enrollments are now stable following an aggregate decline of 30% over the last 4 years. The executive director develops the budget to at least break even each year; since 2010, CEA’s financial experience reflects positive net income and it appears that this will also be the case for 2019 based on actuals and 2020 based on the projected budget. With reserves topped up and most accreditation activities based on a “user fee” for each step in the accreditation process, a decline/fluctuation in sustaining fees can be well-tolerated with no affect on accreditation activities. (Exhibit 7 2019 Budget) (Exhibit 8 2019 Budget Notes) (Exhibit 9 2020 Projected Budget) (Exhibit 10 2020 Projected Budget Notes)

Note: In the Accreditation Handbook, the “Documents Required in Petition” calls for a “List of agency decisions related to administrative and fiscal capacity that have been made or postponed, flagging postponements due to insufficient staffing to adhere to the published timeline, during the prior two years.” No such postponements have occurred and thus no list is provided.

### Document(s) for this Section

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<th>File Name</th>
<th>Analyst Comments</th>
<th>Agency’s Exhibit Comments</th>
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**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**
As discussed in its narrative and provided documentation, the agency has demonstrated the administrative and fiscal capability to carry out its accreditation activities in accordance with this criterion.

The agency maintains 8 full-time employees (comprised of 4 doctoral degrees, 1 Master’s degree and 3 Baccalaureate degrees) that are responsible for the agency’s administrative operations. The agency regularly reviews staff workloads to ensure the needs of accredited programs/institutions and programs/institutions in the accreditation process are met. The agency also reviews staff workloads to ensure there is adequate staff support for the Commission and other agency activities are met.

As noted in the narrative, the agency is funded by fees collected at steps in the accreditation process and through annual sustaining fees which are paid in February of each year. The agency provided documentation of its 2019 (Ex. 7 and 8) and 2020 (Ex. 8 and 9) actual and projected budgets both of which demonstrate fiscal capability to carry out its accreditation activities of 348 sites. The agency provided documentation of its 2014 (Ex. 4) and 2018 (Ex. 5) financial position conducted by an independent certified public accountant which demonstrates years of financial stability.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Criteria: 602.15(a)(2) Competency of Representatives

Narrative:

Regarding Commissioners

Commissioners, who are charged with governing CEA and making accreditation decisions, must have the qualifications stated in the CEA Policies and Procedures Section 3.1.3: Commissioner qualifications. Of 13 commissioners, 11 are identified and elected according to procedures assigned to the Nominating Committee, with 3 - 4 commissioners completing terms each year, replaced by new commissioners, with an occasional commissioner on a 2nd term as permitted in CEA’s policies. All commissioners must have advanced degrees in the field, professional presence, extensive experience as academics and/or administrators, and other qualifications. The 2 public members are appointed by the Commission following a search process which includes screening for appropriate qualifications as described in 602.15(a)(5). (Exhibit 11 2019 Commission Roster and CVs)

Commissioners are identified through a process specified in the CEA Policies and Procedures through the work of a Nominating Committee independent from the Commission. (Exhibit 12 CEA P&P Section 3: Commission governance) (Exhibit 13 CEA P&P Section 18: Nominating Committee) Each year, the Executive Committee develops and reviews a matrix of commissioner attributes to identify any priority needs for the overall Commission profile to be in balance, in keeping with the specifications in policy, including consideration of their roles as administrators, academics, educators, and/or practitioners as
defined in CEA policy Section 3.1.1 (d). (Exhibit 14 2019 Commission matrix with attributes) A Call for
Nominations is published that states the required qualifications, applicants are screened and interviewed, and a slate of the most qualified are assembled for the ballot. (Exhibit 15 2019 Call for Nominations)

Regarding training for their responsibilities, the CEA Policies and Procedures requires new Commissioner orientation as well as full Commission orientation prior to the first meeting of each year. Following election or appointment, new Commissioners, including public members, undergo mandatory orientation comprising two conference calls, one focused on governance matters and one focused on accreditation decision-making that includes mock review of five site reports. (Available: 2020 matrix of commissioner attributes, 2020 Call for Nominations, new commissioner Orientation Call agendas) As reflected in Commission meeting agendas and minutes, ongoing training takes place at each Commission meeting regarding effective Commission governance; consistent decision-making; review of policies and procedures; review, revision, and application of standards; and other matters. Commission meeting agendas reflecting these activities are provided in 602.17.

Regarding Appeals boards
Appeals boards are assembled as needed. All appeals board members are former commissioners, except the public member, who may or may not be a former commissioner. Except for this occasional public member, as former commissioners, appeals board members have training and experience related to CEA’s standards, policies, and procedures. Regarding their appeals board responsibilities, each appeals board receives an orientation from the executive director at the onset of the assignment. (Exhibit 16 CEA P&P Section 13 Appeals, with highlights).

Regarding site visit teams
Site visit evaluation teams are made up of three members: a site visit representative who ensures that the visit adheres to policies and that reviewers reliably apply the Standards, and two peer reviewers who are content/subject matter specialists who conduct the review, apply standards, and write a Review Team Report with findings for each standard for the Commission.

CEA’s 6 professional staff members and 9 of the contracted CEA Specialists (C-Specs) serve as representatives on site visits. All staff members are fully aware of and trained in detail to the CEA’s standards, policies, and procedures and almost all had served as peer-reviewers prior to working for CEA; several also served as self-study coordinators prior to CEA employment. The C-Specs are selected based on their previous experience with CEA. Each of the 9 C-Specs acting as site visit representatives have extensive CEA experience; most have been self-study coordinators, each has served as a peer-reviewer, 6 of 9 have served on the CEA Commission, and 4 of those 6 are former Commission chairs. (Exhibit 17 2019 Roster of reviewers and reps with bios)

The training process for all representatives, both staff and C-Specs, has 4 main steps. 1) Representatives are issued guidelines providing all of the policies and procedures for that role. They receive all on-site materials and the current CEA Standards. The accreditation review manager conducts training with the representative. 2) The representative is then paired with a more experienced representative and observes a site visit. CEA staff follow-up with the new representative afterwards. 3) The new representative is assigned the role of lead representative on a site visit, with a CEA staff member accompanying him/her on the visit to provide assistance, clarification, and further support. 4) Ongoing training includes assisting reps with questions before or during a site visit; providing feedback on the content of the reports submitted as a result of the site visit; an annual two-day rep seminar to discuss current issues, Standards, updates on policies and/or standards, and other items; and participation in conference calls and Standards-related webinars. (Available: Guide for the CEA Site Visit Representative, 2019 Rep Seminar agenda, 2019 Rep Seminar PowerPoint)
CEA maintains a pool of 200+ trained peer reviewers. Peer reviewers are selected based on criteria outlined in the CEA Policies and Procedures Section 17: Site reviewers, also provided at www.cea-accredit.org/reviewers. Potential reviewers submit an application form, cover letter, CV, and two references. These materials are forwarded to an ad hoc committee of the Commission, the Reviewer Selection Committee, which evaluates the candidates based on the required criteria. The committee uses an evaluation form to indicate whether the candidate should be invited to a training workshop or rejected due to lack of sufficient qualifications. Candidates receive a letter indicating whether they have been invited to a workshop or rejected. (Exhibit 18 CEA P&P Section 17: Site reviewers) (See Exhibit 16 2019 Roster of reviewers and reps with bios) (Available: Reviewer Application, Reviewer Evaluation Form)

The Reviewer Selection Committee members rotate each year. The committee’s role and responsibilities are outlined in the Commission Procedural Manual; committee members are oriented and trained to the committee’s work at the start of each year by conference call. Prior to the call, committee members receive the evaluation form and several samples of anonymous applications. Committee members rate the sample applications before the call and exchange evaluation forms, which are then discussed during the orientation call in order to build inter-rater reliability. Staff monitor evaluations throughout the year for consistency between committee members.

The training process for peer reviewers begins with a mandatory 2-day workshop, with 3-4 workshops conducted each year. One month before a workshop, attendees are issued a memo with information about preparing for the workshop and logistics; a link to 7 online videos which give background about CEA and the Standards; the CEA Reviewer Handbook which explains all responsibilities for reviewers; the current Standards document; and the electronic self-study template. (Exhibit 19 2018 Reviewer Handbook)(Exhibit 20 2019 CEA Standards)(Exhibit 21 2019 Self-study Template) The workshop provides background about CEA and accreditation; emphasizes the duties, responsibilities, and conduct of the reviewer; analyzes selected Standards; gives timelines related to the site visit; provides models of findings; and provides practice in writing findings as required in the team’s report. Reviewers are evaluated after the workshop, and selected reviewers are added to the roster of trained reviewers. Ongoing monitoring of reviewers takes place after each site visit through site visit evaluations, reps’ evaluation of the visit, and Reviewer Comment Forms. Ongoing training of reviewers includes newsletters, webinars, and follow-up workshop attendance. (Available: Reviewer Workshop Memo, workshop agendas, Site Visit Evaluation Form, Rep Evaluation of Site Visit, Reviewer Comment Forms)

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**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency discusses Commissioner, Contract Specialist, Appeals Board, and Site Visit team trainings; however, the agency must provide evidence of those trainings. Staff recognizes the agency has not had an Appeals Board assembled since 2014; however, the agency must provide additional information and documentation regarding how Appeals Board members are apprised of new agency rules, and its policy that requires such training. The agency attests that site visit teams are comprised of 1 visit representative, 2 peer reviewers subject-matter experts, 6 professional staff member and 9 contracted CEA Specialists (C-Specs); however, under criterion 602.15(a)(3) and in the evidence (Ex. 47) provided the site team is only comprised 1 visit representative, and 2 peer reviewers subject-matter experts. The agency must provide more information to resolve/explain this discrepancy.

**Analyst Remarks to Narrative:**

Commissioners
The agency is governed by a body of elected and appointed members called the Commission who is responsible for setting CEA policy and making accreditation decisions. The CEA Policies and Procedure (Ex. 22, p. 14) require Commissioners to have experience, training, and interest in English language program's and institution's, as well as in program evaluation. Commissioners must be academically qualified, having earned graduate degrees in disciplines related to language instruction and educational administration; they must be knowledgeable professionals who have gained the respect of their peers through their involvement in professional activities; and are respectful professionals who demonstrate a capacity to act without bias, maintain confidentiality, and exercise balanced judgment, amongst other qualifications.

The CEA Policies and Procedure (Ex. 22) outlines the selection process to ensure the Commission continues to include commissioners with the knowledge sets, experiences, and perspectives required to maintain the necessary balance to effectively meet CEA’s mission and purposes. The Nominating Committee solicits nominations for candidates to serve on the Commission through announcements to TESOL, NAFSA, EnglishUSA, UCIEP, the Constituent Council, and other organizations that may have a direct interest in CEA’s work, and through personal contact (Ex. 13). A candidate may be self-nominated, nominated by a fellow professional, solicited by the Nominating Committee, or nominated by representatives of the Constituent Council (Ex. 15).

Newly elected commissioners, including new public members, must attend a CEA accreditation workshop or a reviewer workshop soon after election to the Commission but no later than the end of the first year of service if they have not already participated as a self-study coordinator or reviewer. New commissioners are required to participate in orientation sessions prior to their first full meeting of the Commission.

Contract Specialist
The agency maintains a pool of 13 agency trained contract specialist (C-Specs) that act as site visit representatives and assist with writing staff analysis reports. C-Specs receive initial training at the start of their assignment to the pool and on-going training via conference call and webinars to ensure they remained well prepared to act as site visit representatives. The agency averages 27-30 site visits and related activities resulting in 85-90 Commission decisions per year. The agency attests that no site has experienced delays or postponements in the accreditation process due to lack of staffing capacity.

Appeal Boards
Appeal Board members are assembled on an as-needed basis and comprised from a list of former commissioners who have previous training and experience on CEA’s Standards, policies, and procedures. Although Appeal Board members were once commissioners, they undergo refresher training from the Executive Director at the start of their assignment (Ex. 16).

Site Visit Teams
Site visits are held by a site visit representative (who are agency staff) who ensures policies are adhered to, 2 peer reviewers subject-matter experts, 6 professional staff member and 9 contracted CEA Specialists (C-Specs). All staff members are thoroughly trained in CEA standards policies and procedures. The C-Specs are selected from a pool of specialists to attend the site visit based on their previous experience with CEA (Ex. 17). CEA training involves is a 4-step process to acquaint all representatives on the intricacies of site visits including receiving policies and procedure guidelines; the new representative is paired with a more experienced representative to observe a site visit; a CEA staff member accompanies new representatives to provide assistance, clarification, and further support to new lead representatives; and new representatives receive ongoing training, and feedback on submitted reports; new representatives attend an annual two-day training to discuss current issues, standards and updates on polices and Standards; and new representatives participate in conference calls and Standards-related webinars.
The agency also provided evidence of the Reviewer Handbook (Ex. 19), the Self-Study template (Ex. 21), a roster and CV’s of Commission Members (Ex. 11) and the roster and short bios of the 2019 Peer Reviewers (Ex. 17).

While the agency discusses Commissioner, Contract Specialist, Appeals Board, and Site Visit team trainings evidence of those trainings was not provided. While Department Staff recognizes the agency has not had an Appeals Board assembled since 2014, the agency did not provide in its narrative how Appeals Board members are apprised of new agency rules. The agency attests that site visit teams are comprised of 1 visit representative, 2 peer reviewers subject-matter experts, 6 professional staff member and 9 contracted CEA Specialists (C-Specs); however, under criterion 602.15(a)(3) and in the evidence (Ex. 47) provided the site team is only comprised 1 visit representative, and 2 peer reviewers subject-matter experts. More information is needed to resolve this discrepancy.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

Evidence of Training - A description of each kind of training for commissioners, contract specialist, appeals boards and site visit teams is provided along with recent evidence of training.

Commissioner: Commissioner training is described in the CEA Policies and Procedures Section 3: Commission (Exhibit 12 Section 3) governance, administration, and evaluation. New commissioners participate in a 2-day virtual orientation session held in 2 separate sessions in January and February following their appointment. A full commission orientation is conducted annually at the first meeting each year. The attached Commissioner Training Binder includes multiple documents, including the policy excerpt, initial meeting invitation, memos and agendas, Guidelines for Commission Mentors (from the Commission Procedural Manual), and meeting materials for new commissioners, followed by the meeting agenda and materials for orientation and training for the full Commission (Exhibit 127 Commissioner Training Binder_Redacted).

Contracted Specialists: CEA specialists are trained based on their specific assignments.

Contracted specialists serving as CEA Site Visit Representatives receive initial training, annual training, and have participated in a variety of group meetings related to virtual site reviews in 2020 and 2021. Contracted specialists receive initial training when they begin the position specific to the report type: SAR (Staff Analyst Report), SCC Reports (Compliance reports, including substantive changes), and Interim Reports (submitted in year 5 of a 10-year term of accreditation). The attached Contracted Specialist Training Binder includes multiple documents specific to Site Visit Representative Initial and Ongoing Training, Staff Analyst Report Writer Training, Standards Compliance Committee Report Training, and Interim Report Analyst Training materials (Exhibit 129. Contracted Specialist Training Binder, Exhibit 130. 2020 CEA Guide for the CEA Site Visit Representative).

Appeals Board: Appeals board members are convened to review agency policies after being appointed and prior to considering the case. Section 13: Appeals of the CEA Policies and Procedures (Exhibit 16)
specifies the orientation of appeals board members. Note: In addition to the 2014 Appeals Panel, an Appeals Panel was appointed in 2016 to consider a denial of an institution at the time of the continued initial accreditation of an additional branch location. Records of scheduling for the orientation sessions for each Appeals Panel are provided. Orientation materials include review of policy documents, affected standards or policies, and an overview of the appeals process (Exhibit 131. Appeals Training_Redacted).

Site Visit Team
Reviewers are required to attend a 2-day initial training after being accepted as candidates through the reviewer selection committee process. In 2019, two in-person workshops were held in October and November. (Exhibit 19 Reviewer Handbook) In 2020, initial training workshops were paused during the transition to virtual site visits, and individual reviewers assigned to virtual reviews participated in training sessions prior to their first virtual review with CEA’s Accreditation Review Manager. In 2021, an online reviewer training workshop was developed and delivered. Invitation messages, memos, agendas, attendee lists, presenter notes, and post-workshop feedback samples are provided for initial training workshops. Virtual site visit training guidelines and documents are provided for the individual supplemental virtual review training sessions (Exhibit 131. Reviewer Training Binder).

In 2017, CEA developed additional reviewer training opportunities to strengthen the reviewer pool. In 2018, Advanced Reviewer Training workshops were delivered in March and November. In 2019, due to lack of interest, no sessions were held. In 2020 and 2021, Advanced Reviewer Training seminars were delivered virtually. Invitation memos, agendas and attendee lists are provided as evidence of continuing training for reviewers (Exhibit 132. Advanced Reviewer Training Binder).

Clarification
Site visit teams are comprised of 2 peer reviewers and 1 CEA Site Visit Representative. The role of the CEA Site Visit Representative may be performed by agency professional staff or by specialized contractors. The pool of CEA Site Visit Representatives includes 15 individuals (6 staff and 9 contracted specialists), only one of whom is assigned to each site visit. Composition of the review teams are described in Section 5 of the CEA Policies and Procedures (Exhibit 82. Section 5 Accreditation process) as well as the Reviewer Handbook (Exhibit 19. 2018 Reviewer Handbook) (see Exhibits 133 and 134, Section 5 and Reviewer Handbook, excerpts provided). Note: The Reviewer Handbook is the most current version; the normal review cycle is to update the handbook on a 2-year cycle. This process was postponed in 2020 due to the pandemic and transition to virtual reviews. Site visit cycle spreadsheets submitted with 602.15(a)(3) further show that review teams consist of 1 CEA Site Visit Representative (named) and two peer reviewers. (Exhibits 125 and 126)

Analyst Worksheet - Response

Analyst Review Status for Response:
Meets the requirements of this section

Analyst Remarks to Response:
The agency provides documentation of Commissioner, Contract Specialist, Appeals Board, and Site Visit team trainings which include the date the trainings occurred, sample agency examples, reference to agency policy/procedures, roles and responsibilities, and the breadth of topics covered.

Appeals Board orientation training (Ex. 131) occurs after the Appeal Board members have been appointed and include members’ obligation, appeal process and procedure, history of the decision under appeal, and
The timeline for the appeal.

The agency clarified the discrepancy involving the composition of site visit teams. Site Visit team is composed of 1 agency representative and 2 peer reviewers that are subject-matter experts. The 6 professional staff member and 9 contracted CEA Specialists as referenced in the previous report are not members of the site visit team, but in fact, the pool from which the agency selects members of the site visit team from.

The detailed documentation of trainings along with the composition of site visit teams provided resolves previous Department Staff concerns.

List of Document(s) Uploaded by Analyst - Response

No files uploaded

Criteria: 602.15(a)(3) Academic/Administrator Representatives

Narrative:

CEA accredits both programs and institutions, so 602.15(a)(3) applies. Note regarding 602.15(a)(3) and 602.15(a)(4): Because English language study is an underlying skill, no student studies English as a “profession” and programs and institutions do not “prepare students for a specific profession.” A consequence of this is that the concept of being a “practitioner” of the profession a specialized accreditor addresses does not correlate with CEA’s work. In addition, CEA does not accredit any site for Title IV purposes, so the distinctions between an “educator” and an “academic” are not applicable. (The description of the term “administrator” is sufficiently clear.) CEA developed the definitions of “practitioner”, “educator”, and “academic” after consultation with our USDE staff analyst(s) and has re-affirmed them at each re-recognition. In CEA’s practice and in keeping with the intent of the criteria, the category of “academic” incorporates the concept of “educator” and “practitioner” with an emphasis on the individual being actively engaged at least 50% of the time in classroom teaching, curriculum and assessment development, teacher training/supervision, and so forth (that is, the individual is up-to-date on teaching/learning/practices of the field and is not primarily an administrator). Following this guidance, CEA’s policies and practices were developed to ensure that academics and administrators, as defined by CEA, are on decision-making bodies, and those policies and practices have been consistently implemented as described in our response to 602.15(a)(3).

CEA includes both academics and administrators on site visit review teams, which conduct site evaluations and prepare reports; on the Commission, which is CEA’s policy and decision-making body; and on appeals boards, which play a role in certain cases of decision-making.

The CEA Policies and Procedures (Exhibit 22 2020 CEA Policies and Procedures) defines “academic” and “administrator” as follows:

i. An administrator is defined as a person employed by an English language program or institution and who, at the time of nomination, holds an administrative position (e.g., director, assistant director) for at least 50 percent of his/her workload.
An academic is defined as a person who holds academic qualifications in curriculum and instruction and, at the time of nomination, is involved in English language program teaching related activities (e.g., classroom instruction, teacher-training, curriculum and materials design, and/or curriculum oversight) for at least 50% of his/her workload.

(Exhibit 23 2019 CEA P&P Section 3.1.1 Representation and composition of the Commission)

Site review teams are composed of two peer reviewers and a CEA representative. The two peer reviewers are assigned from a pool of 200+ trained reviewers. During the selection of reviewers, the application and selection process includes identification of the applicant’s domains of expertise, which includes academic and administrative domains, as well as experience with the range of program and institution models CEA accredits. In selecting trained reviewers to assign to a site review, CEA’s accreditation review manager assigns at least one team member with experience/expertise in the model of site under review, and as a usual practice ensures that academic and administrative domains are represented within the team’s domains of experience/expertise. As most administrators in the field also have extensive teaching experience, some teams represent both administrative and academic domains within the same assignee. (See Exhibit 17 2019 Roster of reviewers and reps with bios) The site visit assignments are maintained on a spreadsheet by cycle, which reflects all teams and the sites to which they are assigned. (Exhibit 24 Fall 2019 Site Visit Spreadsheet) (Available: Reviewer Application Form, Reviewer Evaluation Form 2020 Winter Site Visit Spreadsheet with reviewer assignments)

The Commission comprises 13 members who have a range of experiences and domains of expertise among them. While many Commissioners with administrative positions have extensive experience as academics and may be teaching as well, regardless, at least 2 Commissioners will be academics as defined in CEA policy. (See Exhibit 11 2019 Commission Roster and CVs) The 2019 Commission, per these definitions, includes 6 academics and 5 administrators. This balance is maintained through the nominations process by which the Nominating Committee is charged with soliciting qualified academics and ensuring that a sufficient number of academics are on the slate in a given year. This requirement is stated on the publicly distributed Call for Nominations. (Available: 2020 Call for Nominations)

Appeals boards have 4 members, 3 of which are former Commissioners (or in rare cases when a former Commissioner is not available within the prescribed timeframe, an experienced reviewer) and 1 of which is a public member who may or may not be a former Commissioner. Together, the board is required to have a mix of characteristics including individuals who are administrators and academics as defined by their status when they were nominated to serve as Commissioners or when they served as reviewers, who have experience with the model of program or institution appealing, plus the public member. (See Exhibit 23 2019 CEA P&P Section 13 Appeals Board Composition) The executive director and the chair of the Commission identify the appeals board members from a list of former Commissioners and include individuals identified as administrators or academics in the letter that is submitted to the appellant for approval. The most recent CEA appeal concluded in December 2014 and no appeals have been conducted since then. Records of the 2014 appeal and others are available on site, including evidence that appeals boards for institutions include administrators and academics. (Available: Letters to 2014 appellants with biostatements of the administrator and academic members, Proposed Appeals Boards for 2013 and 2014 sites under appeal)
### Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

Department Staff is unable to discern the composition of the site team, specifically, who the academic and administrative representatives are simply based on the names on the list. The agency must provide additional information to demonstrate the composition of its site teams.

**Analyst Remarks to Narrative:**

The CEA Policies and Procedures (Ex. 22) defines “administrator” as a person employed by an English language program or institution and who, at the time of nomination, holds an administrative position (e.g., director, assistant director) for at least 50 percent of his/her workload. CEA defines “academic” as a person who holds academic qualifications in curriculum and instruction and, at the time of nomination, is involved in English language program teaching related activities (e.g., classroom instruction, teacher-training, curriculum, and materials design, and/or curriculum oversight) for at least 50% of his/her workload. CEA’s Policies and Procedures require academic and administrative personnel to hold positions on its Commission, Appeals Board and Review Teams which are the policy, decision-making and evaluation bodies (respectively) of the agency and in accordance with this guideline.

As noted in the previous section, the CEA Commission is responsible for setting CEA policy and for making accreditation decisions. The Commission is composed to ensure a range of program and institutional perspectives; a range of domains of expertise, as determined by the Commission from year to year; representation from both CEA-accredited and non-CEA-accredited programs and institutions; representation from administrative, academic, postsecondary education, and practicing professionals (Ex. 22).

The CEA Appeals Board (Ex. 24) is comprised of 4 members, including 3 former Commissioners and 1 public member. When an appeal is submitted, the Commission chair, in consultation with the Executive Committee, will appoint an Appeals Board, which functions independently from the Commission. The Appeals Board functions as an independent, separate, and objective third party body that may affirm, amend, reverse or remand Commission decisions (Ex. 22).
Site review teams are composed of 2 peer reviewers and a CEA representative. Members of the site review teams evaluate the procedures and materials that guide the review process, other team members, and the team leader. Review teams are selected from a pool of over 200 trained reviewers and selected based on the needs of the reviewer's area of expertise (Ex. 24).

Although the agency provided a list of the site visit team Department Staff is unable to discern the composition of the site team, specifically, who the academic and administrative representatives are simply based on the names on the list.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

Response:

Site visit schedules from the Fall 2019 Site Visit cycle submitted with the renewal petition (Exhibit 125 Fall 2019 Site Visit Spreadsheet Reviewer Assignment Redacted) and the most recent Summer 2021 Site Visit cycle have been revised, noting the roles and composition of each review team (Exhibit 126 Summer 2021 Site Visit Spreadsheet Reviewer Assignments Redacted).

Note: All site visits are composed of one CEA Site Visit Representative and two peer reviewers. As a specialized accreditor focusing exclusively on post-secondary intensive English language programs, each CEA Site Visit Representative, whether agency staff or specialized contractors, has academic and administrative experience. In some cases, academic and administrative domains are represented within the CEA Site Visit Representative role.

As noted in renewal petition, in selecting trained reviewers to assign to a site review, CEA’s usual practice is to assign at least one team member with experience/expertise in the model of site under review, and as a usual practice ensures that academic and administrative domains are represented within the team’s domains of experience/expertise. As most administrators in the field also have extensive teaching experience, some teams represent both administrative and academic domains within the same assignee.

**Analyst Worksheet - Response**

Analyst Review Status for Response:

Meets the requirements of this section

Analyst Remarks to Response:

The agency attests and provides documentation of the site team composition as previously requested. Specifically, the agency provided a list of institutions visited in the Fall 2019 (Ex. 2019) along with the Site Visit team which was composed of one CEA Site Visit Representative and two peer reviewers, one of which is an academic and the other an administrator. The agency also provided the institutions and site visit teams for Summer 2021, both of which satisfy the requirements of this guideline.

**List of Document(s) Uploaded by Analyst - Response**

No files uploaded
Criteria: 602.15(a)(4) Educator/Practitioner Representatives

Narrative:

CEA accredits both programs and institutions, so 602.15(a)(4) applies. Note regarding 602.15(a)(3) and 602.15(a)(4): Because English language study is an underlying skill, no student studies English as a “profession” and programs and institutions do not “prepare students for a specific profession.” A consequence of this is that the concept of being a “practitioner” of the profession a specialized accreditor addresses does not correlate with CEA’s work. In addition, CEA does not accredit any site for Title IV purposes, so the distinctions between an “educator” and an “academic” are not applicable. (The description of the term “administrator” is sufficiently clear.) CEA developed the definitions of “practitioner”, “educator”, and “academic” after consultation with our USDE staff analyst(s) and has re-affirmed them at each re-recognition. In CEA’s practice and in keeping with the intent of the criteria, the category of “academic” incorporates the concept of “educator” and “practitioner” with an emphasis on the individual being actively engaged at least 50% of the time in classroom teaching, curriculum and assessment development, teacher training/supervision, and so forth (that is, the individual is up-to-date on teaching/learning/practices of the field and is not primarily an administrator). Following this guidance, CEA’s policies and practices were developed to ensure that practitioners and educators as defined by CEA are on decision-making bodies, and those policies and practices have been consistently implemented as described in our response to 602.15(a)(4).

Regarding 602.15(a)(4), the CEA Policies and Procedures definitions state that the Commission will include educators and practitioners as well as academics and administrators; that appeals boards and site review teams for institutions will include academics and administrators; and that appeals boards and site review teams for programs will include practitioners and educators. The CEA Policies and Procedures defines “practitioner” and “educator” as follows:

i. An educator is defined as a person who, at the time of nomination, is engaged in a significant manner in postsecondary education in an academic capacity (e.g. professor, instructor, academic dean) for at least 50% of his/her workload.

ii. A practitioner is defined as a person who, at the time of nomination, is engaged in a significant manner in the practice of the ESL profession (e.g. classroom instruction, curriculum and materials design, assessment design or implementation) for at least 50% of his/her workload.

(See Exhibit 23 2019 CEA P and P Section 3.1.1 Representation and composition of the Commission)

Regarding Commission composition, individuals who meet the definitions of “educator” or “practitioner” are those who also meet the definition of “academic” (609). (See Exhibit 11 2109 Commission Roster and CVs) Site review teams for programs have included educators and practitioners as indicated on the Site Visit Spreadsheet with reviewer assignments (See Exhibit 24) coupled with the site reviewers’ bios showing their attributes. (See Exhibit 17) Regarding appeals panels, all appeals to-date have been for institutions; however, as noted in the definitions, the appeals panels have regularly included individuals who also meet the definition of “educator” and “practitioner” as defined in the Department guidance. (Available: Commissioner CVs, Appeals Board files)

Document(s) for this Section

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Exhibit Title | File Name | Analyst Comments | Agency's Exhibit Comments
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Exhibit 108 Section 5.6.1 Excerpt Highlighted | Section 5.6.1 Excerpt Highlighted.pdf | | |

**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency offers as evidence bios for Commissioners and Site Team Representatives to discern their role as educators and practitioners; however, the agency does not provide bios for the Appeals Team and did not indicate whether the person is an educator or practitioner. The agency must provide bios for the Appeals Team and documentation of whether each member of the team is an educator or practitioner. The agency has not provided evidence of its policy related to the composition of both educators and practitioners on its site visit teams. The agency must provide evidence of its policy related to the composition of site visit teams.

**Analyst Remarks to Narrative:**

As discussed in the narrative and provided documentation CEA Policies and Procedures defines “practitioner” as a person who, at the time of nomination, is engaged in a significant manner in the practice of the ESL profession (e.g., classroom instruction, curriculum and materials design, assessment design or implementation) for at least 50% of his/her workload. The CEA Policies and Procedures define “educator” as a person who, at the time of nomination, is engaged in a significant manner in postsecondary education in an academic capacity (e.g., professor, instructor, academic dean) for at least 50% of his/her workload (Ex 22).

As noted in the previous section, the Commission, Appeals Board and Site Review Teams are the policy, decision-making and evaluation bodies (respectively) of the agency. The agency attests that the Commission, Appeals Board and Site Review Teams are composed of educators and practitioners in accordance with this guideline; however, evidence of this policy was not provided. The agency further provided the 2019 Commission member roster and CV’s (Ex. 11), and Site Team Reviewers assignment and short bios (Ex. 17).

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Response:**

Appeals Teams Bios attached from the two most recent appeals (Exhibit 105), filed in 2014 and 2016, respectively, Appeals board members are identified by the agency as independent school, academic, administrator and public in the two samples. Note: The initial submission stated that the agency’s last
appeal was in 2014. An appeal for a continued initial accreditation decision was filed in 2016.

Note that these 2014 and 2016 Appeals Boards were convened prior to the adoption of the Department terms educator, practitioner, academic and administrator by CEA. (Exhibit 22) The CEA Policies and Procedures, updated in 2017, defines these terms. The 2016 CEA Policies and Procedures (Exhibit 106) does not include the Departmental definitions of educator, practitioner, academic and administrator. A copy of the 2016 Policies and Procedures (Exhibit 107) are attached to demonstrate the agency’s compliance with its policies at the time the Appeals Boards were appointed.

The current 2021 Policies and Procedures specifies that the former commissioner role on the Appeals Board must be appointed as academics or administrators, if the appellant site is an institution, or as educators or practitioners if the appellant site is a program according to their roles either when they served on the Commission or at the time the Appeals Board is appointed (Section 13. p. 66). Appeals Teams Bios have been noted with educator and practitioner designation based on the definitions in the current CEA Policies and Procedures.

Policy on composition of site visit teams.

The CEA Policies and Procedures, Section 5.6.1 Site Reviewers (Exhibit 108), states: “CEA will assign review team members to ensure that teams for programmatic reviews include educators and practitioners and that teams for institutional reviews including academics and administrators, as required by USDE regulations.” (p. 30).

Analyst Worksheet - Response

Analyst Review Status for Response:

Meets the requirements of this section

Analyst Remarks to Response:

As previously requested, the agency provided brief bios (Ex. 105) for the Appeals Team and indicated which member of the Appeals Board is an administrator, educator, and practitioner. Agency policy (Ex. 108) requires the agency to assign review team members to ensure that teams for programmatic reviews include educators and practitioners and that teams for institutional reviews include academics and administrators.

List of Document(s) Uploaded by Analyst - Response

No files uploaded

Criteria: 602.15(a)(5) Public Representatives

Narrative:

CEA accreditation decisions and actions are made by two bodies, the Commission and appeals boards, both of which are required to have public members. CEA defines the characteristics and constraints of a public
Public members serve on CEA decision-making bodies, including two seats on the Commission and one seat on appeals boards. Public members cannot be affiliated with any aspect of teaching English as a second language. Specifically, a public member cannot be:

a. an employee of or consultant to an English language program or institution
b. a member of the governing board, a shareholder, or an owner of an English language institution
c. a member of TESOL
d. affiliated with any program or language institution that is a member of EnglishUSA or UCIEP
e. a spouse, domestic partner, parent, child, or sibling of an individual identified in (a) through (d) of this paragraph

CEA seeks public members who have experience in the fields of postsecondary education and/or accreditation, have an interest in the welfare of international students, and who have expertise deemed useful to CEA as determined by the Commission. A public member may not serve as chair of the Commission. Procedures for identifying and approving public members are maintained in the Commission Procedural Manual.

Regarding public members on the Commission

The Commission is charged with making all decisions as outlined in the CEA Policies and Procedures. The Commission is comprised of 13 sitting Commissioners, each serving a 3-year term. Of the 13 members, 2 are public members. (See Exhibit 11: 2019 Commission Roster and CVs, Barsoum and Primak) Public members are identified according to procedures outlined in the Commission Procedural Manual (CPM) p. 15 (Exhibit 25 2020 Commission Procedural Manual) which includes a Commission discussion of domains of expertise desirable in a public member followed by a search and screening process. Public members are appointed through a Commission ballot process conducted at least 2 weeks before the final meeting of the year followed by ratification at the meeting. Public members then sign the Commissioner agreement to serve along with an attestation confirming their role as a public member on the Commission and reaffirming that they are not from the ESL field. (Available: Public Member Attestations)

Public members serving as Commissioners are so identified on published lists of Commissioners. Public member CVs are available to the public upon request to the executive director, as stated on the CEA website.

Regarding public members on appeals boards

CEA appeals boards are ad hoc boards, assembled to conduct the appeals process when a site appeals a denial of accreditation. Appeals boards have 4 members, 1 of which must be a public member. The public member on the appeals board may or may not be a former Commission public member. The relevant CEA Policies and Procedures excerpt is Section 13.4.3.b.iii Appeals Board Composition:

b. Composition

The Appeals Board will comprise four members with the following characteristics:

i. former commissioners, appointed as academics or administrators (if the appellant site is an institution) or as educators or practitioners (if the appellant site is a program) according to their roles either when they served on the Commission or at the time the Appeals Board is appointed.

ii. at least one member will represent the type of program or institution making the appeal in addition to
fulfilling requirements for one of the other criteria.

iii. a public member, who may be but is not required to be a former commissioner.

iv. optionally, no more than one CEA reviewer who has served successfully on several site visits and is not a former commissioner.

The executive director and the chair of the Commission identify the public member and include that individual on the proposed appeals board, which is submitted to the appellant for approval. The letter to the appellant indicates that a public member must be on the appeals board and bio-statements of the members, including of the public member, are included in the letter. The most recent CEA appeal concluded in December 2014 and no appeals have been conducted since then; two sample letters to the most recent (2014) appellants are available in on-site files.

Document(s) for this Section

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<th>Exhibit Title</th>
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Analyst Worksheet - Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

As provided for in the agency’s Policies and Procedures (Ex. 22), public members serve on CEA decision-making bodies, including two seats on the Commission and one seat on the ad-hoc appeals board (Ex. 22). Vacancies in the position of public member are filled by recommendation from the Executive Committee to the Commission for approval and appointment (Ex. 25). Public members cannot be affiliated with any aspects of teaching English as a second language. However, they are professionals who have experience in the fields of postsecondary education, international education, accreditation, and/or other domains of expertise useful to the Commission and who have an interest in the welfare of international students (Ex. 25).

The agency's definition of public member as stated in its Policies and Procedure is in accordance with 602.3 (Ex. 22).

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
Narrative:

The Commission Procedural Manual states CEA’s definition of and procedures for addressing conflict of interest by volunteers (Commissioners, reviewers, and appeals board members) and staff (including full-time employees and contractors, called C-Specs). (Exhibit 26 Commission Procedural Manual COI Policy and Recusals highlighted throughout) Evidence of implementation of these procedures for each group specified in the criteria follows.

(i) The only board convened by CEA is an ad hoc appeals board assembled as needed. The CEA Policies and Procedures states that the appellant site will receive a list of the appeals board members assigned and may request changes one time if there are credible conflict of interest objections; appellants receive this information in the letter from the executive director initiating the process. (Exhibit 27 CEA P and P Section 13 Appeals with COI references highlighted) The policy also states that appeals board members will sign conflict of interest and confidentiality agreements upon agreement to serve. The policy and signed agreements by the four appeals boards members for the most recent appeals (2014) are available in on-site files.

(ii) CEA Commissioners are informed of all confidentiality, conflict of interest, and other responsibilities from the time of their initial application to be considered a candidate. The Call for Nominations states that the application package must include a signed copy of the Nominee Letter of Understanding and Agreement to Serve, which is available on the CEA website; it includes statements regarding conflict of interest and other matters. (Exhibit 28 2019 Call for Nominations COI highlighted) Upon election (or appointment if a public member), each new Commissioner must participate in two orientation sessions, the agendas of which include review of CEA’s Policies and Procedures, Commission Procedural Manual, and the Volunteer Liabilities and Protections document prepared by CEA’s attorneys (Exhibit 29 Nominee Letter of Understanding and Agreement to Serve COI highlighted). The liabilities and protections document emphasizes Commissioners’ fiduciary responsibilities to CEA, including those related to confidentiality and conflict of interest. (See Exhibit 26 Commission Procedural Manual Conflict of Interest Policy and Recusals highlighted) (Exhibit 30 Volunteer Protections and Liabilities)

At the first Commission meeting of the year, as part of a full Commission orientation required by CEA policy, all fiduciary responsibilities, including conflict of interest, are again reviewed, and all Commissioners are required to again read the Volunteer Protections and Liabilities and then sign a Commissioner Letter of Understanding for that year committing to adherence to conflict of interest and other policies. (Available: Commissioner Letters of Understanding, multiple years) Additionally, CEA’s attorneys visit a Commission meeting each year to review risk management and other topics; conflict of interest as it applies to accreditors and CEA is included in the discussion. (Available: Agendas and materials for Risk Management for Accreditors presentations)

At the time of Commission review of sites for decision-making, Commissioners are polled for conflicts prior to staff issuance of any site materials for reading. Recusals are noted and Commissioners who have recused do not receive the site’s materials in preparation; such Commissioners leave the room prior to any discussion of the site and do not return until the decision has been made. This process is outlined in the Commission Procedural Manual which includes the Reading Group Process guidelines, in preparation emails, and on slides shown at the meeting showing the process for the decision-making session. (See Exhibit 26 Commission Procedural Manual Excerpt Conflicts and Recusals highlighted) Official minutes of accreditation decisions reflect the recusals. (Exhibit 32 Decision Minutes August 2019 showing recusals) Regarding decisions made by the Standards Compliance Committee (SCC), which reviews compliance and
(iii) Site reviewers are informed about CEA’s strong confidentiality and conflict of interest requirements during training. Each reviewer accepted for the 2-day training workshop receives a copy of the Reviewer Handbook, which includes a Section 7 on the Code of Conduct, Appendix B Conflict of interest and Confidentiality Agreement, and Appendix D the Volunteer Protections and Liabilities document. During the workshop each of these items is discussed in detail, including how to determine whether a conflict exists. Following discussion of the policy and documents, all trainees sign the Conflict of Interest and Confidentiality Agreement form. (Exhibit 34 2018 Reviewer Handbook with COI highlights) (Available: Signed Conflict of Interest and Confidentiality forms, Reviewer Workshop training materials)

Prior to each review cycle, the accreditation review manager issues the list of sites up for site visits and calls for conflicts-of-interest from all trained reviewers; reviewers with conflicts are ineligible for those sites. Upon accepting an assignment to participate in a site visit, the three team members (the two peer reviewers and the CEA representative) each sign the Conflict of Interest and Confidentiality Agreement for the particular site. (See Exhibit 19 2018 Reviewer Handbook Appendix B) (Available: Call for disclosure of conflicts)

(iv) CEA Specialists are contractors who act as site visit representatives and write selected staff analysis reports. All C-Specs are former Commissioners, Commission chairs, experienced self-study coordinators, and/or experienced site reviewers and have thus all been repeatedly trained to CEA’s conflict of interest, confidentiality, and conduct requirements. Each signs a Conflict of Interest/Confidentiality form upon renewal of the annual memorandum of understanding. Regarding site visits, each C-Spec signs a conflict of interest agreement before accepting a site visit assignment as described above. (Available: Signed Conflict of Interest and Confidentiality forms) Regarding staff analysis report writing, at the start of each cycle the lead staff person issues a list of reports under preparation to all writers, calls for recusals, documents the response, and withholds site material from those that recuse. (Exhibit 35 SCC analyst's recusal email for December 2019) (See Exhibit 33 SCC Report to CEA Commission 2019 12 recusals p. 8) C-Specs may at times act as independent consultants outside of their CEA responsibilities; their MOUs require that should the consulting projects have any relation to CEA, the C-Spec must provide the Executive Director with a CEA-required addendum to the contract specifying to the site that the consultant cannot speak for or with the Commission or CEA staff on any matter related to the site, cannot guarantee any outcome related to an accreditation decision, and other protective provisos. (Exhibit 36 Sample Consultant services agreement with provisos)

(v) Each CEA staff member is informed of CEA’s conflict of interest, confidentiality, and conduct requirements upon hire in the Employee Handbook. Each signs a Conflict of Interest/Confidentiality Agreement form, which is part of the Employee Handbook, Upon hire. (Exhibit 37 2020 Employee Handbook with COI highlights) The six professional staff members [redacted] who are credentialed in the field regularly act as site visit representatives and staff analyses report writers. When acting as a site visit representative, they sign the required site-specific conflict of interest and confidentiality forms cited previously, and when writing staff analysis reports, they recuse themselves for sites where they may have any conflict of interest as noted previously.
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**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency offers evidence of its conflict of interest policy; however, the agency does not provide evidence
of signed or electrically authenticated conflict of interest and confidentiality forms or training materials for Board members, Commissioners, evaluation team members, consultants, administrative staff, and other agency representatives. The agency must provide evidence that Board members, Commissioners, evaluation team members, consultants, administrative staff, and other agency representatives have agreed to adhere to the agency's conflict of interest policy.

Analyst Remarks to Narrative:

The agency attests and provided evidence of its conflict of interest policy which defines conflicts of interest; identifies activities in which conflicts of interest are reported; and specifies procedures to be followed when conflicts of interest are revealed. These policies are related to Commissioners, reviewers, and appeals board members) and staff (including full-time employees and contractors, called C-Specs) (Ex. 26). The agency did not provide evidence of signed conflict of interest forms for Board members, Commissioners, evaluation team members, consultants, administrative staff, and other agency representatives.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

Per Department Staff guidance at the time of submission, signed forms were not uploaded with the petition, but noted as available.

CEA’s Board members, the Commission, each signs an annual Letter of Intent to Serve with confidentiality stipulations, reinforced by strict recusal policies and procedures implemented with each decision-making session (Exhibit 109. Commission COIs 2020 2021).

CEA Appeals Boards are ad hoc committees assembled as needed and sign conflict of interest and confidentiality forms upon agreement to serve (Exhibit 110. Appeals Board COI Signed_Redacted). Note: Name of institution filing the appeal are redacted, but available to the staff analyst upon request.

Reviewers sign a form prior to each evaluation team assignment (Exhibit 115. Reviewer COI Signed_Redacted). Note: Reviewer confidentiality is maintained, so the name of the site under review has been redacted from the attached Summer 2021 conflict of interest and confidentiality forms. Evaluation team members sign a form at training (samples provided from three most recent workshops). Note: Reviewer training workshops were paused throughout 2020. Trained Reviewers also participate in review of Interim Reports, and sign a conflict of interest and confidentiality form each time they participate in Interim Reviews.

Administrative staff sign a form at the time of hire (Exhibit 111. CEA Staff COI).

Other agency representatives include CEA Specialized Contractors, Consultants and Task Force Members.

CEA Specialized Contractors sign an annual Conflict of Interest form if they have report writing assignments. CEA Specialized Contractors who serve as CEA Site Visit Representatives sign a COI prior to each assignment to an evaluation team. Note that the Site Visit Representative COIs Summer 2021 includes agency staff who serve on site visits (Exhibit 112. Specialized Contractors COI).
Specialized contractors who act as independent consultants outside of their CEA responsibilities are required to file an addendum to the contract specifying to the site that the consultant cannot speak for or with the Commission or CEA staff on any matter related to the site, cannot guarantee any outcome related to an accreditation decision, and other protective provisos (Exhibit 113. Consultant Provisos_Redacted).

Task Forces are struck by the Commission chair to work on certain areas of CEA’s development. In 2020, the Scope Task Force was established, and in 2021, the Distance Education Task Force was established. All members who are not current commissioners/board members with sign and submit a signed conflict of interest form (Exhibit 114. CEA Task Force COIs).

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**
Meets the requirements of this section

**Analyst Remarks to Response:**

As previously requested, the agency provides signed conflict of interest forms for Commissioners (Ex. 109), Appeals Board members (Ex. 110), agency staff (Ex. 111), Contractors (Ex. 112), agency Task Force (Ex. 114), and Reviewers (Ex. 115) as evidence of their agreeance to adhere to agency conflict of interest policies. The additional information satisfies previous Department Staff concerns.

**List of Document(s) Uploaded by Analyst - Response**

No files uploaded

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**Criteria: 602.15(b) Recordkeeping**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**
The Agency has attested that there have been no changes to the policies and/or practices since its last review before NACIQI.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

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Criteria: 602.16(a)(1)(i) Student Achievement

Narrative:

Four CEA Standards pertain to how CEA ensures that an accredited site effectively accounts for student achievement. As described in 602.17(a)(1), due to the extremely wide variety of types of missions, student populations, and site configurations in the ESL/EFL field, CEA accreditation is mission-based. The standards enumerated below have multiple parts; the narrative focuses on the aspects of each standard that relate to assessment of student achievement.

The CEA Mission Standard (See Exhibit 20 CEA Standards, p. 7) requires that a site clearly state the its mission and goals, which will establish the nature of the curriculum designed for students within that mission. Curriculum Standard 1 (p. 9) requires that the curriculum must be designed to meet “the known needs of a particular group or category of students” and must document “how the curriculum is designed to meet those needs.”

Curriculum Standard 2 (p. 10) requires that the curriculum, in keeping with CEA’s definition of “curriculum” in the Glossary to the Standards (p. 49 – 53) include course goals, course objectives that “specify the curricular elements that will be taught and that, in aggregate, address course goals”, and student learning outcomes, which are “descriptions of what the student will know or be able to do with the language as a result of the teaching of course objectives, must be written, observable, measurable, and able to be expressed in terms of academic readiness or practical applications.” These student learning outcomes “must represent significant progress, accomplishment or proficiency gain for a student moving through the curriculum,” while maintaining alignment with mission: “The program or institution must be able to demonstrate that the curricular goals, objectives, and student learning outcomes are within the expected range for the program’s mission and model.” The standard does not prescribe a single way to demonstrate this quality of the curriculum, but provides examples typical in the field, which “include but are not limited to documenting that the curriculum is mapped to an established external scale, that it is based on a scope and sequence validated for the program or institution’s model, or by presenting research verifying that the curriculum conforms to norms of established or accredited programs or institutional models.”

Student Achievement Standard 2 (p. 39) then requires that the site “determine and document that students have attained the student learning outcomes established within the curriculum.” This evidence of individual student attainment of outcomes must be collected using appropriate assessment instruments: “... the program is expected to use instruments or procedures that meet the norms of good practice as elaborated in second language learning and assessment research and that are accepted in the language-learning arena.”
Programs may use qualitative and/or quantitative measures (see Glossary) when determining if students have attained stated student learning outcomes, including but not limited to such tools as standardized tests, comprehensive exams (teacher-made or institution-made), portfolios, rubrics, or scales.” The standard specifically requires that “the degree of a student’s progress must be based on direct evidence demonstrating how well the student meets the stated student learning outcomes of given courses or levels.” The standard explicitly addresses the requirement for direct evidence of student achievement of the student learning outcomes stated in the curriculum and that this direct evidence must form the basis of any decision for the student to progress to the next course level. Student Achievement Standard 3 (p. 40) requires that the written progress reports provided to students “clearly indicate the level and language outcomes attained as a result of instruction.”

Length and Structure of the Program of Study Standard 2 (pp. 35 – 36) requires that the program or institution collect data that documents the structure of the program and that students are progressing as intended. The standard states: “The program or institution must be able to demonstrate that the time allotted for instruction is adequate for students to achieve the stated goals of individual courses and the stated goals of the program of study as a whole. In order to do so, the program or institution must monitor patterns of student progression through the courses and levels of the curriculum, and must be able to document that students, in the aggregate, progress through the program of study by achieving course, level, and program student learning outcomes as anticipated by the design of the curriculum.” Data regarding average pass/fail rates, rates of promotion, average time to completion for courses, levels, and the program as a whole must be collected and aggregated; the program or institution must document that the data is analyzed and acted upon if the pattern of achievement is not as anticipated, including by revising the curricular design or development of revised assessment practices.

Program Development, Planning, and Review Standard 2 (p. 46 – 47) requires that the program or institution systematically reviews student assessment practices. The standard requires a written plan that guides this review; the review includes, as relevant to the mission and practices of the site, data about student performance relative to student learning outcomes (such as pass/fail rates); data on program graduation, retention, and college admission; placement tools; teacher-made tests; rubrics and other evaluation tools; end-of- term exams; reporting practices; articulation patterns with programs to which students may be admitted after program completion; methods by which the program or institution documents student achievement; reliability and validity studies of testing instruments relative to program objectives; faculty surveys and student satisfaction surveys; and review of assessment and achievement research.

In mandatory responses to the Self-Study Template, which becomes the self-study, sites must provide specific information about the curricular student learning outcomes within the curriculum, must provide evidence that the student learning outcomes are directly assessed as a basis for progression decisions, and must provide aggregated achievement data supporting the design of the curriculum. Site review team members, all of whom hold advanced degrees and training in the field, including related to assessment, analyze the site’s response and provide findings for Curriculum 2, Student Achievement 2, and Length and Structure 2; in addition to findings for individual standards, the review team must comment on the quality of the site’s student achievement practices and results in the Team Summary in the Review Team Report. The Reviewer Handbook, with which reviewers are trained, states that “The summary must include specific reference to student learning outcomes as revealed through the evaluation of compliance with Student Achievement Standard 2, and as reflected in the findings of that standard” and that “Each [team] member must review the report to make sure . . that the Team Summary clearly reflects the sense of the team as a whole and that it includes information on student achievement, in particular the assessment of student learning outcomes.” (See Exhibit 19 2018 Reviewer Handbook, pp. 36, 39)
The Commission also focuses on the quality of student achievement. Commissioners, except for public members, are subject matter experts in the ESL/EFL arena holding advanced credentials in the field. Any site that does not fully meet Student Achievement Standard 2 (as well as any other standard) is required to come into compliance by responding to reporting requirements. A detailed rationale for any reporting requirement is issued, including for student achievement-related findings.

Student Achievement 2 practices, review team findings, and Commission reporting requirements in the Commission Action Reports can be seen in the site document exhibits linked to 602.17(f) for two institutions and one program. In addition, for this criteria, exhibits from review, accreditation, and reporting for the (programmatic review) are provided. The Review Team Report is comprised of the site’s Self-Study Report with the team’s findings under each individual standard. Therefore, the site’s self-study is redundant to the Review Team Report, which is provided. (Exhibit 38 (b)(6)) The Team Summary comment regarding student achievement is highlighted on p. 6. The site’s self-study submission and the review team finding for Curriculum Standard 2 is highlighted on pp. 17 – 21; for Length and Structure 2 highlighted on pp. 115 – 117; and for Student Achievement Standard 2 highlighted on pp. 122 – 125. The site’s response to the Review Team Report (Exhibit 39 (b)(6)) provides the site’s responses to Curriculum 2 highlighted on p. 6; to Length and Structure 2 highlighted on p. 8; and to Student Achievement 2 highlighted on pp. 9 – 10. The Commission’s written review of the site’s response is in the internal Staff Analysis Report generated by senior staff to support Commission group reading and decision-making; this review indicates that matters related to Curriculum 2 and Length and Structure 2 were resolved but that Student Achievement 2 required follow-up. (Exhibit 40 (b)(6)) The Commission letter (Exhibit 41 (b)(6)) is accompanied by the Commission Action Report (Exh 42 (b)(6)), which provides the focused rationale for the determination that additional reporting on Student Achievement 2 is required.

**Document(s) for this Section**

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<td>Exhibit 41 (b)(6) Commission Letter</td>
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**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:
As discussed in the narrative, the agency has four standards for ensuring a program or institution accounts for student achievement. The first standard requires the program or language institution have a placement system that is consistent with its admission requirements and allows valid and reliable placement of students into levels to ensure students are placed into levels based on consistent, reliable, and valid measure of proficiency. The second standard requires programs or language institutions to document in writing whether students are ready to progress to the next level or to exit the program of study, using instruments or procedures that appropriately assess the achievement of student learning outcomes for courses taken within the curriculum. The third standard requires programs or language institutions to maintain and provide students with written reports that clearly indicate the level and language outcomes attained as a result of instruction. The last and fourth standard requires programs or language institutions to inform students of the assessment procedures used to determine placement, progression from level to level, and completion of the program, as well as their individual results. Additionally, because programs and institutions differ in their missions, educational goals, and types of students served; “significant progress” will be relative to the norms of the field for the educational program model provided.

The agency included evidence of the (b)(6) (Ex. 38), the response to the Review Team Report (Ex. 39), Staff Analyst Report (Ex. 40), the Commission letter (Ex. 41), and the Commission Action Report (Ex. 42) which all provide a full picture of a detailed review, response, Commission decision and determination related to student achievement standards.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Criteria: 602.16(a)(1)(ii) Curricula

Narrative:

Regarding the CEA Standards and CEA as a reliable authority for assessing quality: The CEA Standards for English language Programs and Institutions, available online at www.cea-accredit.org/about-cea/standards, comprises 11 standards areas with a total of 44 standards. Each of the 11 standards areas includes a Context statement for the area, and each of the 44 individual standards includes a detailed Discussion stating the intent of the standard and specifying the practices and documents necessary in order to demonstrate compliance. These standards were developed and continue to be reviewed and revised through extensive engagement with and among members of the field by successive Commissions and the Standards Review Committee, informed by methodical data collection on their validity and clarity, and with comments from the public. As a specialized accreditor, CEA commissioners (except public members), committee members, peer reviewers, and staff are all credentialed in the field. The CEA Standards are rigorous and informed by subject matter experts in the field, ensuring that CEA is viewed as a reliable authority in the English language programming field. (See Exhibit 20 CEA Standards) (Available: Documentation of standards development, review, revision)

Regarding how CEA guides a site to demonstrate compliance with each standard and component of a
standard as a part of self-study:
An applicant or reaccrediting site prepares a self-study which is constructed from a CEA-issued Self-Study Template. For each individual standard, this template provides a set of “prompts;” the prompts directly align with each element or requirement of the standard as stated in the Discussion of the standard. The site must respond to every prompt in the template and in this way, must respond to and document compliance with every component of the standard. (See Exhibit 21 Self-Study Template) CEA issues a fillable copy of the Self-Study Template to a site only after a site’s self-study coordinator attends a mandatory 2-day Accreditation Workshop. At the workshop, the standards are reviewed in detail, the prompts in the Self-Study Template are analyzed, the required and optional documents are provided, and acceptable on-site evidence of compliance is discussed. The attendee is provided with an Accreditation Handbook that includes guidance regarding the self-study process, analysis of standards, a list of documents to be provided, certain sample responses, and other supporting material. (Exhibit 45 2019 CEA Accreditation Handbook) (Available: CEA Accreditation Workshop agenda, PowerPoint presentation, supporting materials)

Regarding how site visit teams review the site’s compliance with the standard and its components:
Upon assignment to a site review, each trained peer reviewer receives the site’s Self-Study Report, which is comprised of the site’s responses to the Self-Study Template. As described above, the template is comprised of prompts that are drawn from and directly aligned with the requirements of each standard; the Self-Study that review team analyzes therefore includes required responses to every part of every standard. The site reviewers have received training regarding how to analyze each response; using CEA provided interview question lists, document checklists, and other tools, they must verify through interviews and document checks on site that the site has in place each required policy/procedure as claimed in the Self-Study and carries out each required practice specified within the standard. The CEA site visit representative (a CEA staff member or a CEA Specialist as described in response to 602.15(a)(2)) who has extensive experience with site practices and the CEA Standards, provides guidance as needed in order to ensure a reliable interpretation and application of any standard. The two reviewers must come to consensus on the finding and then they must use standards-based language to write a finding for each standard stating whether the site appears to meet, appears to partially meet, or does not appear to meet each standard and describing the site’s practices as relevant. This terminology is provided in the Reviewer Handbook, pp. 26, that guides reviewer training. (See Exhibit 19 2018 CEA Reviewer Handbook)

Regarding the CEA Curriculum Standards:
Curriculum is one of the 11 standards areas requiring compliance for accreditation. The Curriculum area comprises 3 standards. The Curriculum area Context, three Standards, and Discussion for each standard are on pages 9 – 10 of the CEA Standards. (See Exhibit 20 CEA Standards) The required responses are located in the Self-Study Template on pp. 4 - 8. (See Exhibit 21 Self-Study Template)

The Context sets the frame for the Curriculum requirements. It makes clear that a program or institution must establish its own mission and then provide evidence of a curriculum that meets the needs of students sought, enrolled, and graduated in accomplishment of that mission. The Context identifies the functional components of a curriculum as required by CEA; the components include course goals and objectives for each course, statements of student learning outcomes, process for teaching and learning (methods and materials), and the means of assessment, each of which is defined in the Glossary in the CEA Standards, pp. 49 – 53. It states that curricula must undergo regular review for possible modification. Each of the three Curriculum standards then breaks down the broader statements of requirements, providing detailed rationale and specific requirements. Each specific requirement within each of the three Curriculum standards are not restated here because they are evident in a reading of the standards. However, two aspects of the Curriculum standards have particular importance relative to the petition criteria.
Regarding the importance of mission: CEA does not accredit degree programs or programs and institutions that prepare students for licensing exams, and which therefore have similar missions and may have similar curricula. Instead, because the range of types of English language programs and institutions is very wide, the types and proficiency levels of students enrolled vary, and the purposes for which students select a school or study are also very wide, the importance of a site’s mission is paramount. The first CEA standard is Mission; this requires that the site have and state the mission, and then curriculum, its design, and delivery must be demonstrated to achieve that mission and serve those student needs. Thus, the Curriculum Context and Curriculum Standard 1 emphasize the centrality of mission and knowing the needs of the student population sought and served as foundational to curriculum design, including the curricular goals, objectives, and student learning outcomes.

Regarding the importance of student learning outcomes within curriculum design: CEA considers SLOs to be a component in a sound curriculum design, as a foundation to student achievement matters referenced in the Student Achievement Standards. SLOs must align with the course goals and objectives, and as described in the response to 602.16(a)(i) regarding student achievement must be assessed as a basis for the decision for a student to progress to the next language level of a course. SLOs must be observable and measurable, and together with the course goals and objectives, must represent significant progress through the program of study.

The is a site that applied for programmatic accreditation, attended the mandatory workshop, completed the Self-Study Template to produce the Self-Study, underwent the 3 day site visit by a team of 2 trained peer reviewers accompanied by a CEA site visit representative, responded to the Review Team Report, and was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents provided with the petition are Exhibit 46 Self-Study, Exhibit 47 Review Team Report, Exhibit 48 Commission decision letter, and Exhibit 49 Commission Action Report (CAR). (Available Self-study documents, Site response to the Review Team Report, Site’s response to the reporting requirements)

The program’s self-study, Review Team Report, Commission letter, and Commission Action Report have been uploaded with the petition only once, here with 602.16(a)(i)(ii) Curricula. In each subsequent response for 602.16(a)(i) regarding agency standards, relevant page numbers within the uploaded site documents are provided in the response to that criteria. The program’s response to the Curriculum Standards is on pp. 13 - 26 of the Self-Study Report. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Curriculum standards are on pp. 18, 24, and 28 of the Review Team Report. Note that the Review Team Report references the curriculum in the Team Summary on pp. 5 – 6 and on the Summary Checklist on p. 8.

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Exhibit 49 (b)(6)
Commission Action Report

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**Analyst Worksheet - Narrative**

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**
As noted in the narrative, the quality of the curriculum is assessed using 3 standards (Ex. 20). Program and institution site representatives must attend a 2-day Accreditation Workshop where they are introduced to agency standards and provided with an Accreditation Handbook. The Accreditation Handbook includes guidance regarding the self-study process, analysis of standards, a list of documents to be provided, certain sample responses, and other supporting material. The workshop provides training and reinforces the agency’s expectation that programs and institutions establish its own mission and provide evidence of a curriculum that meets student’s needs, course goals and learning objectives.

It must be noted that the agency does not accredit degree programs or programs and institutions that prepare students for licensing exams, therefore, instructional methods must be aligned to the sites’ mission.

The agency also provided (b)(6) Self-Study (Ex. 46), and Review Team Report (Exhibit 47), Commission decision letter (Exhibit 48), and Commission Action Report (Exhibit 49) as evidence of the agency’s evaluation practices and its decision-making process.

**List of Document(s) Uploaded by Analyst - Narrative**
No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

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**Criteria: 602.16(a)(1)(iii) Faculty**

**Narrative:**
A narrative overview addressing the CEA Standards and CEA as a reliable authority for assessing quality, how CEA guides a site to demonstrate compliance with each standard as part of self-study, and how site visit teams review the site’s compliance with a standard and its components is provided at the start of 602.16(a)(ii). That narrative is not repeated here. The information below provides specific information regarding the CEA Faculty Standards. The seven Faculty Standards are located on pp. 11 – 15 of the CEA Standards. (See Exhibit 20 CEA Standards) The required responses are located in the Self-Study Template
CEA’s seven Faculty Standards effectively address the quality of an institution or program faculty population relative to its mission, adequacy of faculty numbers and employment conditions for faculty, and evaluation processes for faculty.

Regarding faculty qualifications, four standards apply, Faculty 1, Faculty 2, Faculty 3, and Faculty 4. Faculty Standard 1 requires evidence of formal education and training at levels that align with the site’s instructional mission as stated in the site’s responses to the Mission Standard and Curriculum Standards 1 and 2. Specifically, CEA’s formal education requirement for faculty is a bachelor’s degree, or, in cases where levels, courses or programs offered by the institution/program are considered to be college and university preparation courses, a master’s degree. CEA faculty standards require that faculty have a degree in the specialization of Teaching English as a Second Language (TESL) or English as a Foreign Language (TEFL). In cases where faculty have degrees in other fields, regardless of degree level, they must provide evidence of a specific knowledge base and skill set related to effective language instruction. CEA also accredits teacher-training programs and requires that the teacher-trainer have a bachelor’s degree, at minimum, and “additional training in language pedagogy and methodology at least equivalent to the certificate content.” For faculty members who lack the formal education requirement, or those who have not yet acquired the knowledge base and skill set, sites are asked to provide a rationale for their employment and teaching assignments (prompt #6 in the Faculty 1 Self-Study Template). Faculty experience cannot be used to substitute for formal educational credentials.

Institutions/programs are asked to provide information about formal education and experience on the Table of Faculty, submitted with the self-study report. Within the Self-Study Template, sites are asked to identify courses, levels and programs that are designed to be or promoted as college or university preparation in nature (prompt #4) and explain how the site ensures that appropriately qualified individuals are assigned to those courses (prompt #5). For faculty who do not hold a degree in TESL/TEFL, the CEA Standards require that the site provide evidence documenting that the individual has the knowledge base and skill set (prompt #7) and/or provide a plan and timeline for bringing those faculty members into compliance (prompt #8).

Faculty Standard 2 requires that faculty have appropriate postsecondary teaching experience and that they demonstrate an ongoing commitment to professional development. Faculty are required to have postsecondary, supervised, language teaching experience, have “experience relevant to the program or institution’s mission,” and show evidence of participation “in professional development activities relevant to the program or institution’s goals” Careful monitoring and developmental support must be provided for faculty who lack appropriate experience. Information about relevant teaching experience is submitted by the site on the Table of Faculty and verified by the site visit team as a part of the site visit.

Faculty Standard 3 addresses English proficiency requirements among faculty. In the TESL/TEFL field, which has an international constituency, it is not uncommon for faculty to display varieties of English, and CEA does not advocate for or endorse any particular variety. Sites must have policies and procedures, and evidence of implementing them, for establishing that faculty have excellent proficiency “consistent with the program’s or institution’s mission” and relative to their teaching assignments, consistent with “the objectives of the courses being taught.”

Faculty 4 addresses sites that utilize “teachers-in-training” such as Graduate Teaching Assistants (GTAs) or interns engaged in supervised teaching as part of a degree or certificate program. In such cases, the site must provide evidence of an effective supervision regimen for the trainees by qualified faculty (and who have the formal credentials and experience required by Faculty Standards 1 and 2) and must document that only a limited number of classes/courses are provided to students by the trainee. CEA has additional...
standards specific to teachers in training, if used at the site, usually categorized as Graduate Teaching Assistants (GTAs) and standards related to language proficiency of faculty.

Regarding adequacy of faculty numbers and employment conditions for faculty, two standards apply, Faculty 5 and Faculty 6. Faculty Standard 5 requires that the program or institution adhere to appropriate employment practices for faculty, providing written job descriptions and terms and conditions of employment at hire and any time employment conditions change. Faculty Standard 6 requires that the program or institution employs an adequate number of faculty and that faculty duties can be and are accomplished in a timely manner.

Regarding evaluation of faculty, one standard applies, Faculty Standard 7. An accredited site must have in place a robust evaluation process for faculty members that aligns with the site’s mission and the faculty member’s job description. The standard requires that faculty be informed of the procedures at the onset of the evaluation period. The content of the evaluation must be fair and objective, incorporate multiple sources of data (most typically teaching observations, student evaluations, self-reflection, supervisor evaluation, and other data) about which faculty are informed prior to the onset of the evaluation period. Evaluations must be documented in writing and allow for faculty response.

The [b](b)(6) that applied for programmatic accreditation, attended the mandatory workshop, completed the Self-Study Template to produce the Self-Study, underwent the 3 day site visit by a team of 2 trained peer reviewers accompanied by a CEA site visit representative, responded to the Review Team Report, and was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents provided with the petition are Exhibit 46 [b](b)(6) Self-Study, Exhibit 47 [b](b)(6) Review Team Report, Exhibit 48 [b](b)(6) Commission decision letter, and Exhibit 49 [b](b)(6) Commission Action Report (CAR). (Available Self-study documents, Site response to the Review Team Report, Site’s response to the reporting requirements)

The program’s self-study, Review Team Report, Commission letter, and Commission Action Report have been uploaded with the petition only once, in 602.16(a)(1)(ii) Curricula. In each subsequent response for 602.16(a)(1) regarding agency standards, relevant page numbers within the uploaded site documents are provided in the response to that criteria. The program’s response to the Faculty Standards is on pp. 26 - 48 of the Self-Study Report. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Faculty standards are on pp. 33, 37, 39, 41, 44, 48, and 53 of the Review Team Report. Note that the Review Team Report references the faculty in the Team Summary on p. 5 - 6 and on the Summary Checklist on p. 8.

Document(s) for this Section

No files uploaded

Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

As discussed in its narrative and provided documentation, the agency has standards of assessing the quality
of the institutions or program’s faculty relative to its mission, the adequacy of faculty numbers, employment conditions for faculty, and the process for evaluating faculty.

The agency Standards require faculty members to have adequate education and training commensurate with their teaching assignments; faculty must have experience relevant to teaching students at the postsecondary level in their areas of assignment and demonstrate an ongoing commitment to professional development; faculty who teach English must demonstrate excellent proficiency in English; teachers in training are appropriately selected, trained, and supervised for the instructional situations in which they are placed; faculty members each receive a job description and all the terms and conditions of employment in writing at the time they are hired and any time their duties or employment conditions change; the program or language institution must have an adequate number of faculty, whose duties are structured to permit timely and effective completion; and the program or language institution must clearly describe in writing the performance criteria and procedures for evaluation at the onset of the evaluation period (Ex. 20).

The agency also provided [b](6) Self-Study (Ex. 46), Review Team Report (Exhibit 47), Commission decision letter (Exhibit 48), and Commission Action Report (Exhibit 49) as evidence of the agency’s the full range of faculty assessment and its decision-making process in accordance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

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**Criteria: 602.16(a)(1)(iv) Facilities/Equipment/Supplies**

Narrative:

A narrative overview addressing the CEA Standards and CEA as a reliable authority for assessing quality, how CEA guides a site to demonstrate compliance with each standard as part of self-study, and how site visit teams review the site’s compliance with a standard and its components is provided at the start of 602.16(a)(ii) Curricula. That narrative is not repeated here. The information below provides specific information regarding the CEA Facilities, Equipment, and Supplies Standard. The one Facilities, Equipment, and Supplies Standard is located on pp. 17 – 18 of the CEA Standards. (See Exhibit 20 CEA Standards) The required responses are located in the Self-Study Template on pp. 19 – 20. (See Exhibit 21 Self-Study Template)

CEA’s standard for facilities equipment and supplies ask sites to demonstrate that facilities, equipment and supplies “support the achievement of its educational and service goals” and that they are “adequate in number, condition and availability; and are accessible to students, faculty and administrators.”

CEA’s facilities standard includes the overall Context for each standard area and Discussion for each individual standard. Within the context and discussion, typical resources for each category (facilities,
equipment and supplies) are listed. The discussion states that “Well-maintained classrooms, laboratories, and student areas of sufficient size and number must be available to students and be conducive to learning.” Correspondingly, the Self-Study Template prompt #3 requires sites to describe “how the program or language institution ensures that classrooms, laboratories, offices, and student areas are of sufficient size; are accessible to students, faculty, administrators, and staff; and are clean, safe, and secure.

Regarding requirements for equipment and supplies, the standard requires that sites provide evidence that sufficient equipment and supplies exist to support the institution/program, both for instructional use (prompt #4) and administrative use (prompt #5) and to describe how the site ensures that learning resources and supplies are sufficient and accessible (prompts #7, #8).

Other CEA standards require that facilities, equipment, and supplies be evaluated and maintained over time, financially supported, and in compliance with local and state laws. The CEA standard related to strategic planning and development (Program Development, Planning, and Review Standard 1, CEA Standards, pp. 45 – 46) requires a site to have written plans to maintain and upgrade facilities, equipment and supplies, as specifically referenced on page 45 of that standard. The CEA standards regarding financial soundness (Administrative and Fiscal Capacity Standards 11 and 12, CEA Standards, p. 24) financial standards require that institution/program document that it provides the promised services to students and that there is financial soundness and reserves to ensure that the program or institution provide the services students have paid for. CEA’s legal compliance standard (Administrative and Fiscal Capacity Standard 8, CEA Standards, p. 23) requires that sites are in compliance with all local, state and federal laws, stating that “the [program’s or institution’s] administration must ensure compliance with laws and regulations related to . . . facilities . . .” the facilities standards.

Reviewers are trained to evaluate each site’s practices related to the CEA Standards. Refer to section 602.15(a)(2) for a description of the reviewer training process. During the site visit, reviewers verify compliance with the facilities standards through various review activities, including a tour of facilities, interviews, and document checks.

The [b](6) a site that applied for programmatic accreditation, attended the mandatory workshop, completed the Self-Study Template to produce the Self-Study, underwent the 3 day site visit by a team of 2 trained peer reviewers accompanied by a CEA site visit representative, responded to the Review Team Report, and was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents provided with the petition are Exhibit 46 [b](6) Self-Study, Exhibit 47 [b](6) Review Team Report, Exhibit 48 [b](6) Commission decision letter, and Exhibit 49 [b](6) Commission Action Report (CAR). (Available Self-study documents, Site response to the Review Team Report, Site’s response to the Reporting requirements)

The program’s self-study, Review Team Report, Commission letter, and Commission Action Report have been uploaded with the petition only once, in 602.16(a)(1)(ii) Curricula. In each subsequent response for 602.16(a)(1) regarding agency standards, relevant page numbers within the uploaded site documents are provided in the response to that criteria. The program’s response to the Facilities, Equipment, and Supplies Standard is on pp. 49 - 52 of the Self-Study Report. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Facilities, Equipment, and Supplies standard is on p. 57 of the Review Team Report. Note that the Review Team Report references the facilities, equipment, and supplies in the Team Summary on p. 5 – 6 and on the Summary Checklist on p. 8.

Document(s) for this Section
As discussed in its narrative and provided documentation, the agency requires programs or language institutions to have facilities, equipment, and supplies that support the achievement of its educational and service goals; are adequate in number, condition, and availability; and are accessible to students, faculty, and administrators (Ex. 20). Facilities, equipment, and supplies must be accessible to all students, faculty, administrators, and staff, including those with disabilities, at times and places consistent with the stated mission and goals. Additionally, for programs and institutions to meet this standard they must provide evidence that sufficient equipment and supplies exists to support the institution/program, both for instructional and administrative use.

The agency also provided Self-Study (Ex. 46), and Review Team Report (Exhibit 47) as evidence of the agency’s assessment of facilities, equipment, supplies, and its decision-making process in accordance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
educational offerings related to English language study, and organizational configurations. Correspondingly, the AFC Standards address that very wide range of organizational designs, operational practices, staffing patterns and provisions, legal requirements, and other policy/procedure structures. The Context that prefaces the AFC Standards area emphasizes this range while affirming underlying principles for all sites, stating “No matter their structure, size, and scope, programs and language institutions seeking accreditation must have an administrative structure that facilitates day-to-day operations and helps meet the program or institution’s mission. Therefore, programs or institutions must maintain adequate staff, facilities, and services and pay careful attention to administrative, legal, and policy issues. Because financial considerations affect whether and how effectively the program or institution can meet its goals, fiscal issues, policies, and practices are of paramount importance.” (CEA Standards p. 19)

Administrative and Fiscal Capacity (AFC) Standard 1 requires a description of the organizational structure and documents that provide evidence of any legal entities, ownership agreements, organizational agreements, departmental or campus frameworks, and any aspects of external entities that exercise authority over the site. AFC 2, 3, 4, and 5 address the site’s formal training/credentialing of administrators, adequacy of staffing, evidence of fair employment practices for administrators and staff (including provision of job descriptions and terms and conditions of employment), commitment to professional development by administrators and staff, organizational commitment to professional development of all employees, and fair and objective evaluation of administrators and staff. For programs within accredited institutions, the overarching institution practices relevant to the standards’ requirements may apply; for language institutions, the owning entities’ personnel and practices are subject to the requirements of the standards. AFC 6 and 7 require that sites have operational, student, and employee policy and procedural manuals that are up-to-date and available to all affected, and that there are means of communication in place for all personnel as well as students.

Administrative and Fiscal Capacity Standard 8 requires documentation that the program or institution is in compliance with all local, state, and federal laws. For CEA-accredited sites that are certified by the Student and Exchange Visitor Program (SEVP) of the Department of Homeland Security (DHS), this standard requires compliance with all DHS SEVP regulations, including those related to student acceptance, the issuance of DHS forms, student transfer, reporting a student’s normal and satisfactory progress through the course of study, and any other reporting requirements. All administrators and staff involved in DHS processing matters must have up-to-date knowledge about and follow current DHS regulations.

AFC 9 and AFC 10 relate to business practices including recordkeeping and development of contracts.

Regarding review of financial practices and fiscal capacity, two standards apply, AFC 11 and AFC 12. AFC 11 requires that “financial supervision is conducted by qualified individuals...who follow accepted accounting practices” and that these individuals and accounting practices “ensure the integrity of the program or institutional finances.” Those with financial responsibilities must be appropriately trained and have appropriate professional backgrounds to be responsible for relevant accounting, fiscal oversight, and financial reporting duties. CEA issues detailed guidance for the site’s response to the AFC Standards 11 and 12 (Exhibit 50). The AFC 11 Self-Study Template requires detailed responses and documents related to the persons responsible for financial reporting and management of the program or institution; the policies and manuals related to the sites financial planning, budgeting, auditing, and expense authorization; evidence of refund policies and actions; disclosure of any weaknesses in financial procedures, including those stated in audits or management letters; disclosure of any legal actions or lawsuits against the site; and other responses. The CEA Standards are designed to apply equally to programs and institutions; however, financial matters for programs (within accredited institutions) and independent institutions (whether non-profit or for-profit) have different document requirements. The Template specifies document requirements that apply to all sites, and those that are required, in addition, for institutional accreditation reviews. E.g.,
AFC 11 documentation for language institutions includes evidence related to timely payment of FICA and payroll taxes, issuance and filing of Forms W-2, W-3, 1096 and 1099, and related federal and state forms.

AFC 12 requires all sites to demonstrate that “financial reserves are adequate and available to meet obligations to students, staff, and any contractual parties.” Because the length of a period of study for which a student enrolls and pays may vary even within a given program or institution, the adequacy of financial resources is linked to the site’s financial ability to provide the services students have paid for, for the duration of the course of study, as well as to meet all financial obligations to employees and contracted parties. Among the requirements are that both programs or institutions must provide evidence of all sources of funding; past, current, and projected budgets; and audited, reviewed, or compiled financial statements (or equivalent for campus-based programs) for the past three fiscal years and current statements year-to-date. Programs must provide a letter of financial support from the supervisor of the campus division within which the English language program is housed. Among other documents, institutions must provide three years’ tax returns; detail for receivable and payable accounts that tie to the balance sheet; management or reportable condition letter prepared by a CPA or other regulatory body, if applicable; copies of tax returns; and proof of property, casualty, liability, and workers compensation insurance.

In order to protect proprietary interests, avoid any breach of confidentiality, and avoid actual or appearance of conflict-of-interest, for both AFC 11 and 12, peer site reviewers do not receive the site’s response; these go directly to CEA staff, where they are reviewed by the CEA Director of Finance and Operations, the Executive Director, and an external CPA if needed. The Director of Finance conducts a phone/video interview with the site’s financial authorities to verify the responses to these two standards, request clarifications, and request additional documents if needed; the site is then provided with a report as part of the site visit report process.

Regular review of administrative and fiscal capacity matters is required of the site by Program Development, Planning and Review Standard 1. (See Exh 20 CEA Standards pp. 45 - 46) Regular monitoring of a site’s financial position, regulatory relationships, and any unreported changes in ownership or control is explained in the 602.19(b) Annual Report description.

The programmatic site that was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents provided with the petition are Exh 46 [0][8] Self-Study, Exh 47 [0][8] Review Team Report, Exh 48 [0][8] Commission decision letter, and Exh 49 [0][8] Commission Action Report (CAR). Available Self-study documents, Site response to the Review Team Report, Site response to the reporting requirements

The program’s responses to the Administrative and Fiscal Capacity Standards 1 – 10 are on pp. 53 – 77 of the Self-Study Report. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Administrative and Fiscal Capacity Standards are on pp. 59, 62, 64, 67, 69, 72, 75, 78, 80, and 82 of the Review Team Report. Note that the Review Team Report references administration and fiscal capacity in the Team Summary on p. 5 – 6 and on the Summary Checklist on p. 8.

The site’s response to AFC 11 and 12 and the CEA findings report are Exhibit 51 [b][6] AFC 11 12, and Exhibit 52 [b][8] Staff Report AFC 11 12) (Available AFC 11 and 12 self-study documents)

Document(s) for this Section
The agency attests and provided documentation of its fiscal and administrative capacity standards which address a range of organizational designs, operational practices, staffing patterns and provisions, legal requirements, and other policy/procedure structures (Ex. 20).

The agency also provided (Ex. 46) and Review Team Report (Exhibit 47) as evidence of the agency’s assessment of fiscal and administrative capacity and the program’s response.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Criterion:** 602.16(a)(1)(vi) Student Support Services

**Narrative:**

A narrative overview addressing the CEA Standards and CEA as a reliable authority for assessing quality, how CEA guides a site to demonstrate compliance with each standard as part of self-study, and how site visit teams review the site’s compliance with a standard and its components is provided at the start of 602.16(a)(ii). That narrative is not repeated here. The information below provides specific information regarding the CEA Student Services Standards. The eight Student Services Standards are located on pp. 25 - 30 of The CEA Standards. (See Exhibit 20 CEA Standards) The required responses for Student Services Standards are located in the Self-Study Template on pp. 38 - 48. (See Exhibit 21 Self-Study Template)

CEA’s eight Student Services Standards address the full range of services required to appropriately support students in a program or institution. Importantly, all students enrolled in CEA accredited sites are non-native English speakers at various levels of proficiency, and the vast majority of students are non-immigrant international students in the U.S. on student visas who are required to maintain status as required by the Department of Homeland Security’s Student and Exchange Visitor Program (SEVP) regulations. Thus, the CEA Student Services Standards particularly address and emphasize good practice for non-native speakers, advisement before and after enrollment for international student needs, cultural considerations,
and student services as language learning support. As stated in the Context to Student Services, “Although the types of services provided vary greatly [depending on the site’s mission and student population] all programs and institutions have responsibilities and obligations beyond teaching language that must be addressed adequately to provide an effective learning environment.”

Student Services Standard 1 requires that admissions policies be directly related to the program’s or institution’s mission and goals, that the admissions policies themselves take into consideration the desired size of the program, student cultural and language proficiency mix, availability of services for the type of students being admitted, and other matters. Those making admissions decisions must act ethically and must be properly trained, in particular regarding the requirements for the school and the student to be in compliance with federal law related to international students. Aspects of admissions are further addressed in 602.16(a)(1)(vii) Recruiting and admissions practices.

Student Services Standards address a range of typical services but with a focus on the needs of non-native speakers and international students. Student Services Standard 2 requires that sites provide counseling and advising regarding academic expectations, personal issues and compliance with immigration regulations. Advising related to academic expectations includes reference to ensuring that students are making “normal and satisfactory progress,” as required by the conditions of their student visas and in keeping with the Student and Exchange Visitor Program (SEVP) regulations. Student Services Standard 3 requires pre-arrival, on-site, and on-going orientation; students coming from overseas (and their parents) have particular needs for pre-arrival information, on-site orientation must include cultural information, and on-going orientation must address information about staying in visa status. Other Student Services Standards also require sites to provide information regarding health insurance, particularly important to international students from countries where insurance is not required to receive medical treatment (Student Services Standard 5), social and recreational activities that support language learning (Standard 6), and housing which may include homestay programs involving cultural immersion (Standard 7).

Two Student Services Standards relate to ensuring that the program or institution have certain policies and that students understand them. Student Services 4 requires clear policies related to enrollment, registration, withdrawal, and refunds and that students are informed of these policies prior to completing their enrollments. This standard also requires that the site have and that students understand academic policies, including specifically policies related to time and progress within the program, both matters related to SEVP requirements for international students, beyond academic policies per se. Student Services Standard 8 requires evidence that a program or institutions acts ethically in committing to and providing student services, oversees practices that are contracted out, provides clear and accurate information about student services in writing, comprehensible to non-native speaking students.

As with some other CEA Standards, standards outside of the standards area cross-reference and cross-support the Student Services Standards. Administrative and Fiscal Capacity (AFC) Standard 2 requires a site to demonstrate that the number of staff and administrators is adequate to perform student services. AFC Standard 8 requires sites certified to enroll international students to comply with all related laws and SEVP reporting requirements. AFC Standard 9 requires sites to keep student information complete and secure. Plans for regular review and revision of student services policies and activities is a requirement of Program Development, Planning and Review Standard 2 (See Exhibit 20 CEA Standards, pp. 46 – 47).

The [3][6] is a site that applied for programmatic accreditation, attended the mandatory workshop, completed the Self-Study Template to produce the Self-Study, underwent the 3 day site visit by a team of 2 trained peer reviewers accompanied by a CEA site visit representative, responded to the Review Team Report, and was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents
The program’s self-study, Review Team Report, Commission letter, and Commission Action Report have been uploaded with the petition only once, in 602.16(a)(1)(ii) Curricula. In each subsequent response for 602.16(a)(1) regarding agency standards, relevant page numbers within the uploaded site documents are provided in the response to that criteria. The program’s response to the Student Services Standards is on pp. 78 - 113 of the Self-Study Report. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Student Services standards are on pp. 87, 94, 98, 105, 108, 111, 115, and 118 of the Review Team Report. Note that the Review Team Report references student services in the Team Summary on p. 5 – 6 and on the Summary Checklist on p. 9.

Document(s) for this Section

No files uploaded

Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

As noted in the narrative, the agency has 8 student support services standards related to admission policies; academic and personal advising and counseling; pre-arrival, ongoing and immigration related support; enrollment, registration, attendance and matriculation policies; health insurance; social and recreational activities; and student housing (Ex. 20). The agency Standards describe student services as non-instructional activities and programs designed to address personal, academic, and cultural needs of students enrolled in language programs or institutions. Student services personnel must provide support to students through pre-arrival, initial and ongoing orientation events and support the mission of the program. Although the types of services provided by programs and institutions vary greatly, all programs and institutions have responsibilities and obligations beyond teaching language that must be addressed adequately to provide an effective learning environment.

The agency also provided Self-Study (Ex. 46) and Review Team Report (Exhibit 47) as evidence of the agency’s assessment of adherence to agency standards.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
Criteria: 602.16(a)(1)(vii) Recruiting & Other Practices

Narrative:

A narrative overview addressing the CEA Standards and CEA as a reliable authority for assessing quality, how CEA guides a site to demonstrate compliance with each standard as part of self-study, and how site visit teams review the site’s compliance with a standard and its components is provided at the start of 602.16(a)(ii). That narrative is not repeated here.

The areas listed in 602.16(a)(1)(vi) are not grouped together in a single CEA Standards area, but are located across several standards areas. The primary standards follow; others with tangential cross-references are noted further below in this petition response. Regarding recruiting, catalogs, publications and advertising, specific information is located in the three CEA Recruiting Standards which are located on pp. 31–33 of the CEA Standards, with a site’s required responses located in the Self-Study Template on pp. 49–52. Specific information about admissions practices is located in the Student Services Standard 1 located on p. 25 of the CEA Standards, with the required responses located in the Self-Study Template on p. 38. Note that additional discussion of admissions practices required of accredited sites is in this petition response to 602.16(a)(1)(vi) Student services. Regarding academic calendars, the relevant CEA Standard is Length and Structure of the Program of Study Standard 1, located on pp. 35–36 of the CEA Standards, with the required responses located on pp. 53–54 of the Self-Study Template. Grading policies are addressed in Student Achievement Standards 2, 3, and 4, located on pp. 39–41, with the required responses from sites located on pp. 58–64 of the Self-Study Template. (See Exhibit 20 CEA Standards) (See Exhibit 21 Self-Study Template)

Regarding recruiting, catalogs, publications and advertising

There are three CEA Recruiting Standards. Recruiting Standard 1 addresses requirements for training and ethical behavior of recruiting personnel, including as relates to special responsibilities engendered by recruitment of international students. All program or language institution personnel engaged in recruiting and providing admissions information must be appropriately trained, follow ethical practices, and hold students’ interest and well-being paramount. The standard explicitly charges sites with providing accurate and clear information to prospective students, including that “admissions criteria, processes, procedures, and documents necessary for the application process be clearly presented, both by the program or institution directly and by any agent, educational counselor, or contracted third party acting for the program or institution,” and states that “Good practice results when the recruiting staff, admissions personnel, academic advisors, and all those to whom recruiting activities are delegated are well trained to describe clearly and accurately all aspects of the program or institution when recruiting and admitting students.”

Recruiting Standard 2 addresses the information used to describe or promote the program or language institution, requiring that all written, electronic, and oral information be accurate and complete. The Discussion of the standard lists a wide range of informational items that must accurate and complete; among these items are information about admissions requirements and procedures and the site’s academic calendar.

Recruiting Standard 3 addresses special requirements for sites that contract with third party recruiting or advising agencies. International students, particularly from certain countries and cultures where local educational counseling is valued by families and prospective students, quite often receive information from third party counselors, for a fee, about a program or language institution. CEA does not advocate for nor oppose use of third party recruiting or advising agencies by sites or by prospective international students.
However, if a CEA site does contract with such third-party entities, the conditions of this standard must be met. The standard specifies the site’s responsibilities for ensuring that students receive complete and accurate information from the third party, including that the nature of all services is explained and all fees are disclosed. The standard requires that the program or institution evaluate the third party before contracting with them, monitor the third party and terminate the agreement if students are not well-served, and obtain the third party’s commitment to codes of ethical practices that are widely published in the field of international education.

Regarding admissions practices specifically, Student Services Standard 1 focuses on admission of students by personnel who, among other training, must have training to admit international students on student visas and who are charged with providing accurate admissions information. Regarding the academic calendar specifically, the Length and Structure of the Program of Study Standard 1 specifies that the program or institution publish a calendar that states the number of terms per year, the number of weeks per term, and then number of hours of instruction per week; the calendar must be demonstrated to support and align with the program or institution’s mission and educational goals. Further, the calendar must make clear how many hours within the term are devoted to instruction, testing, language lab time, orientation, co-curricular activities such as field trips, social activities, and other activities. Regarding clarity of grading practices specifically, together three of the four Student Achievement Standards address documenting the basis of progression, grade reports, and informing students of grading practices. Student Achievement Standard 2 requires that student progression from language level to level be based on direct evidence of achievement of student learning outcomes. Student Achievement Standard 3 focuses on student grade reports, which along with the grade or mark must include an achievement scale and an interpretation of the achievement scale, which present “the range of possible levels of language ability as represented by the levels of courses offered within the curricular program” and “descriptors for each course within each level written in terms of describable and measurable student learning outcomes”. The standard also requires that essential parts of the grade reporting system, including achievement levels for each course “must be available and easily accessible, such as on the syllabus or in a student handbook, not only to students but also to others who might need to know, such as parents, employers, sponsors, or admissions officers.” Student Achievement Standard 4 requires that students be informed of all policies and procedures, including grading and progression practices.

Two other standards also reinforce CEA’s requirements in this criteria area. Administrative and Fiscal Capacity Standard 6 (p. 22 of the CEA Standards) require that sites maintain up-to-date manuals or handbooks for students, which include information about the program calendar, testing and grading practices, and other necessary content. Student Services Standard 4 (pp. 27 – 28) requires that students be provided with accurate information about registration, enrollment, withdrawal, and fees/refunds as well as about requirements for normal and satisfactory progress in the course of study, which relates to implications of grading and other academic information given to students.

The [b](6) is a site that applied for programmatic accreditation, attended the mandatory workshop, completed the Self-Study Template to produce the Self-Study, underwent the 3 day site visit by a team of 2 trained peer reviewers accompanied by a CEA site visit representative, responded to the Review Team Report, and was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents provided with the petition are Exhibit 46 [b](6) Self-Study, Exhibit 47 [b](6) Review Team Report, Exhibit 48 [b](6) Commission decision letter, and Exhibit 49 [b](6) Commission Action Report (CAR). (Available Self-study documents, Site response to the Review Team Report, Site’s response to the reporting requirements)

The program’s self-study, Review Team Report, Commission letter, and Commission Action Report have
been uploaded with the petition only once, in 602.16(a)(1)(ii) Curricula. In each subsequent response for 602.16(a)(1) regarding agency standards, relevant page numbers within the uploaded site documents are provided in the response to that criteria. The program’s response to the Recruiting Standards is on pp. 114 – 120 of the Self-Study Report, Length and Structure of the Program of Study Standard 1 is on pp. 121 – 123, and Student Achievement Standards 2, 3, and 4 are on pp. 135 – 146. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Recruiting Standards are on pp. 121, 123, and 125 of the Review Team Report, Length and Structure 1 on p. 129, and Student Achievement 2 – 4 on pp. 145, 148, and 153. Note that the Review Team Report references initial findings related to the standards involved in the Team Summary on pp. 5 – 6 and on the Summary Checklist on pp. 8 – 9.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

As noted in the narrative, the agency provided its recruitment standards related to ensuing students, their families and sponsors receive accurate and complete information about the program or institution. The agency requires the following 3 standards for programs and language institutions: personnel must follow ethical practices for recruiting students and promoting programs; all written, electronic, and oral information used to describe or promote the program or language institution to students and other relevant parties must be accurate and complete; and programs or language institutions that have recruiting agreements or contracts with third parties, the program or institution assumes responsibility for monitoring the third party, and terminates the agreement if necessary.

The agency also provided [Exhibit 46] Self-Study (Ex. 46) and Review Team Report (Exhibit 47) as evidence of the agency’s assessment of [Exhibit 46] adherence to agency standards.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

**Criteria: 602.16(a)(1)(ix) Student Complaints**

**Narrative:**
A narrative overview addressing the CEA Standards and CEA as a reliable authority for assessing quality, how CEA guides a site to demonstrate compliance with each standard as part of self-study, and how site visit teams review the site’s compliance with a standard and its components is provided at the start of 602.16(a)(ii) Curricula. That narrative is not repeated here. The information below provides specific information regarding two aspects of student complaints, 1) how accredited sites are required to manage student complaints and make them available to CEA and 2) how CEA as an agency manages student complaints received about accredited sites.

Regarding requirements for sites to provide polices for student complaints and requirements for recordkeeping for CEA review, the one Student Complaint Standard is located on p. 43 of the CEA Standards. (See Exhibit 20 CEA Standards) The required responses for the Student Complaints Standard is located in the Self-Study Template on p. 62. (See Exhibit 21 Self-Study Template) The Student Complaints Standard 1 CEA’s requires that the program or institution have written procedures by which a student may resolve problems of a less serious nature, for example, concerns about textbooks, grade appeals, course assignments, etc. Students must be informed of the procedure and the site must provide evidence that such student concerns are addressed as stated; this is verified on site through document checks if the site requires a written record of the complaint/concern, interviews with students, and interviews with faculty, administrators, and staff in the areas responsible. The Student Complaints Standard 1 further requires that a site have a written policy for complaints of a more serious nature, typified by but not limited to matters related to fees/refunds, possible misconduct by faculty or other personnel, legal grievances, etc. For these complaints of a more serious nature, the standard requires the site to maintain a written record of the complaint and its resolution. This written record is reviewed on site by the site visit team and covers the most recent accreditation period. For all concerns and complaints, the standard requires that the matter be addressed and resolved by those who are authorized to do so. Also, the CEA Standards Glossary includes a definition of “formal student complaint” (CEA Standards, Glossary, p.50).

Regarding complaints received by CEA from students
In addition to the site’s management of student complaints verified through compliance with the Student Complaints Standard, students are able to file complaints with the agency about a site. When sites receive a grant of accreditation, they are required to publicly post the CEA Complaint Policy (Exhibit 51 CEA Filing a Complaint Against an Accredited Program) along with a copy of the CEA Standards. This expectation is outlined in the accreditation letter. (See Exhibit 48 Commission decision letter)

The process for filing a complaint about a school to the agency is outlined in the CEA Policies and Procedures. (Exhibit 52 CEA Policies and Procedures Section 15, Complaints) CEA’s executive director receives all complaints; upon receipt, the complaint is reviewed in a timely way. The executive director contacts the complainant, provides a copy of the complaints policy, and arranges a phone call to learn more about the complaint and provide guidance regarding informal, undocumented complaints and formal complaints. The complaint is analyzed to determine whether it is actionable within CEA’s policies. If not, the complainant is informed along with the rationale. If so, the process as outlined in the CEA P&P is carried out, with the complaint being provided to the site for a response, followed by review of the Standards Compliance Committee. (Exhibit 53 Sample Complaint Record) The executive director maintains the record of the complaint. It should be noted that in CEA’s arena, few student complaints are received and nearly all are resolved with informal discussion among the parties. Complaints more commonly come from another school, often about a competitor’s practices. Where the matter is about competition and not related to documented violation of standards, CEA does not advance the complaint. (Exhibit 54 CEA response complaint). Where the complaint is documented, standards are allegedly violated, and particularly where student welfare is involved, the complaint is formalized and the complaints policy, which ensures due process to sites, is carried out. Records of formal documented complaints are
As CEA is not a Title IV or FSA gatekeeper, CEA does not receive, review, or engage with any student loan default rate data or other information provided by the Secretary or USDE that would point to student complaints about a school.

The [b](6) is a site that applied for programmatic accreditation, attended the mandatory workshop, completed the Self-Study Template to produce the Self-Study, underwent the 3 day site visit by a team of 2 trained peer reviewers accompanied by a CEA site visit representative, responded to the Review Team Report, and was granted 5-year initial accreditation by the Commission in August 2019 with three reporting requirements. The documents provided with the petition are Exhibit 46 [b](6) Self-Study, Exhibit 47 [b](6) Review Team Report, Exhibit 48 [b](6) Commission decision letter, and Exhibit 49 [b](6) Commission Action Report (CAR). (Available Self-study documents, Site response to the Review Team Report, Site’s response to the reporting requirements)

The program’s self-study, Review Team Report, Commission letter, and Commission Action Report have been uploaded with the petition only once, in 602.16(a)(1)(ii) Curricula. In each subsequent response for 602.16(a)(1) regarding agency standards, relevant page numbers within the uploaded site documents are provided in the response to that criteria. The program’s response to the Student Complaints Standard is on pp. 147 – 148 of the Self-Study Report. The documents referenced in the self-study B.1 boxes on the response pages are available in on-site files. The review team findings for the Student Complaints standard is on pp. 156 of the Review Team Report. Note that the Review Team Report references the curriculum in the Team Summary on pp. 5 – 6 and on the Summary Checklist on p. 9.

**Document(s) for this Section**

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**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

As noted in the narrative, the agency provided its student complaint standards (Ex. 52) for ensuring students are informed about how to resolve problems they encounter with educational programs, practices, services, and personnel of the program or language institution. The standards require the program or language institution make available to students, in writing, procedures by which they may lodge complaints. The program or language institution must also document and maintain records of formal
student complaints, as well as the resolution of those complaints (Ex. 53).

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Criteria: 602.17(a) Mission & Objectives

Narrative:

(1) In CEA’s arena (intensive English language programs and institutions in post-secondary settings) and within CEA’s scope (both programs and institutions), there are multiple missions, student profiles, and site and educational program configurations. When CEA was created, a primary impetus was for an agency that would provide a framework of standards that would effectively apply across this wide variety of missions and site-types. In addition, CEA was created following study of good practice among accreditors and USDE criteria. Thus, the CEA Standards; CEA Policies and Procedures; CEA Values; training for Commissioners, reviewers, and staff; and Accreditation Workshop site training for the self-study and its requirements all emphasize that sites must state a clear mission and then must deliver an educational program that fulfills that mission, and that CEA respects all missions provided students are well served. The CEA Policies and Procedures state this philosophy: “CEA accreditation is not intended to impose a rigid uniformity of educational objectives, operations, or theoretical content upon a program. Since programs and language institutions in the field may have different objectives, each is judged in light of its own mission in accordance with the CEA Standards.” (See Exhibit 22 CEA Policies and Procedures p. 2)

To operationalize this diversity of missions, the CEA Standards provide the Mission Standard first: “The program or language institution has a written statement of its mission and goals, which guides activities, policies, and allocation of resources. This statement is communicated to faculty, students, and staff, as well as to prospective students, student sponsors, and the public, and is evaluated periodically.” Each standards area includes a Context and each individual standard includes a Discussion which elaborates the intention of the standard; the complete Mission standard provides this elaboration. (See Exhibit 20 CEA Standards, p. 7) Subsequent standards then explicitly state required linkages to accomplishing the site’s mission, with Curriculum (pp. 9 – 10), Faculty (pp. 11-12), Student Services (p. 25), Administrative and Fiscal Capacity (pp. 19 – 20), and other standards areas specifically requiring evidence that the program’s or institution’s practices align with the mission and goals as stated in the Mission Standard and as presented to students, prospective students, sponsors, the public, and others.

Regarding “clearly specified educational objectives” required by the criteria, Curriculum Standard 1 (p.9) requires that the curriculum be consistent with the mission and based on the known, assessed needs of the students sought and enrolled, and Curriculum Standard 2 (p. 10) requires that the curriculum design include course goals, course objectives, and student learning outcomes for that intended student population. The site’s self-study, composed of required responses to the Self-Study Template, must include a copy of the curriculum document(s) that display the specific courses and levels and the course goals, course objectives, and student learning outcomes for each. Curriculum Standard 2 also requires that the quality of the
curriculum, regardless of the site’s mission and specific student population, must conform to the norms of the field for that model of program. Thus, a curriculum for academically-bound university students must result in proficiency and skills attainment for university-level academic work; such a curriculum will be mapped to established frameworks in the field, utilize texts that aim to develop such skills, and be delivered through methods that support the student learning outcomes. A curriculum for recreational language learners, for specialized English such as aviation English, for business professionals, etc. — each will vary but require clear and aligned course goals, course objectives, and student learning outcomes.

(2) The CEA Standards require that the student learning outcomes stated in the mission-aligned curriculum be achieved. Student Achievement Standard 2 (p.39) states: “Programs and institutions must determine and document that students have attained the student learning outcomes established within the curriculum. To do so, programs must use consistent and reliable means for effectively assessing and recording student progress. In keeping with good curriculum design practices, the means of assessment are expected to be appropriate in that they align with the program or institution’s mission, curriculum objectives, student learning outcomes, and the structure of the program (see Mission Standard 1, Curriculum Standards 1 and 2, and Length and Structure of Program of Study Standard 2).” Further, as described in 602.16(a)(1)(i), “The degree of a student’s progress must be based on direct evidence demonstrating how well the student meets the stated student learning outcomes of given courses or levels. Indirect evidence of student learning may be useful but is not evidence that a student has achieved student learning outcomes.”

For Student Achievement Standard 2, the site’s self-study, composed of required responses to the Self-Study Template (pp. 58 – 59), must include evidence of the primary tools, methods, or instruments used to assess student progress, and document that these result in direct evidence of achievement of student learning outcomes. Site review teams verify that the site’s assessment, grading, and progression protocols result in individual students making the required progress through the course of study. Regarding validation of the overall curriculum design as being properly structured to deliver the promised outcomes, the Length and Structure of the Program of Study Standard 2 (p. 35 – 36) requires: “The program or institution must be able to demonstrate that the time allotted for instruction is adequate for students to achieve the stated goals of individual courses and the stated goals of the program of study as a whole. In order to do so, the program or institution must monitor patterns of student progression through the courses and levels of the curriculum, and must be able to document that students, in the aggregate, progress through the program of study by achieving course, level, and program student learning outcomes as anticipated by the design of the curriculum.” Data on average pass/fail and progression rates for courses, levels, and the program as a whole, average time in the program and for completion, and other aggregated data is required.

Commissioners are oriented and trained to CEA’s requirements that all sites must have a clearly stated mission and must provide evidence that the educational objectives and student services promised are achieved. Commissioner orientation includes a review of sample models and all Commission decisions take the site’s mission into consideration as required by the CEA Standards and CEA policies. (Available: Commissioner orientation materials, Decision-Making Session preface slides emphasizing mission) The Commission’s decisions are based on evaluation of whether the site achieves its stated objectives, as based on the site’s self-study, the Review Team Report, and the site’s response to the report. The Commission’s findings and accreditation decision is provided in a Commission Action Report, showing evidence that every accreditation decision includes review of the effectiveness and quality of the site’s student achievement practices and rates.

(3) Intensive English program students are not training for jobs or receiving degrees or licenses/certificates that qualify them for work. However, in the language acquisition field there are progression and proficiency norms that can be linked to types of sites and students, and sites are expected to provide evidence that the
educational program is within these norms. Curriculum Standard 2 (p. 10) requires that a site provide evidence that the curriculum offered represents “significant progress, accomplishment or proficiency gain . . . relative to the norms of the field for the educational program model provided.” Student Achievement Standard 2 (p. 39) requires evidence that individual students are progressing based on direct evidence of achievement of student learning outcomes. Length and Structure of the Program of Study Standard 2 requires that students in the aggregate progress through the educational program as designed at acceptable rates.

Review Team Reports for three sites described in 602.17(f) (See Exhibit 57, Exhibit 60, Exhibit 64) document that sites undergo a thorough review of compliance with each CEA standard and that a determination is made regarding whether and how well a site meets each individual standard. The review team provides a standards-based finding for each individual standard as well as providing a Team Summary that synthesizes the team’s view of the overall program or institution.

“Documents Required in Petition” calls for agendas from all decision-making body meetings for the prior two years. (Exhibit 55 Commission Agendas 2018 – 2019)

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Analyst Worksheet - Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency requires program's and institution's to have a written statement of its mission and goals, which guides activities, policies, and allocation of resources (Ex. 20). The agency standards also include requirements for accomplishing the program's or institution's mission related to the curriculum, faculty, student services, student achievement, administrative and fiscal capacity.

The agency also provided as evidence Review Team Reports, Response Letters, and Commission Letters for\(\text{(b)(6)}\) (Ex. 57-59), \(\text{(b)(6)}\) (Ex. 60-63), and \(\text{(b)(6)}\) (Ex. 64-67). This evidence demonstrates the agency’s practice of evaluating program’s and institution’s educational objectives in accordance with this guideline.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

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Criteria: 602.17(b) Self-Study

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review(of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

Document(s) for this Section

No files uploaded

Analyst Worksheet - Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

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**Criteria: 602.17(c) On-Site Review**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

Analyst Review Status for Response:
### Criteria: 602.17(d) Response to Site Review

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

Analyst Review Status for Response:

---

### Criteria: 602.17(e) Agency Analysis of Information

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

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**Criteria: 602.17(f) Report on Compliance & Student Achievement**

**Narrative:**

As specified CEA’s published materials provided to sites during the mandatory Accreditation Workshop in the Accreditation Handbook, within 30 days after a site visit CEA sends a detailed Review Team Report (RTR) to the site. The RTR provides the body of the site’s self-study report with a reviewer finding inserted after every individual standard. The reviewer finding indicates whether the site appears to meet, partially meet, or not meet the standard, for all standards except for the 2 standards requiring financial information. The site receives a separate report for the 2 financial standards, with findings by CEA’s financial manager. (See Exhibit 45 Accreditation Handbook, p. 26)

For each finding, the review team writes a rationale which must be based on the requirements of the standard. The RTR also includes, as front matter, a Team Summary that provides an overview of findings. The Reviewer Handbook, used to train reviewers during the Reviewer Workshop and for guidance thereafter, includes instructions regarding writing findings. (See Exhibit 19 2018 Reviewer Handbook Guidelines for Preparing the RTR pp. 35 - 37)

Regarding evidence that sites are accountable for demonstrating that student learning outcomes are achieved, the RTR includes an individual finding for each of the four Student Achievement Standards, and the Team Summary includes specific reference to the overall quality of the site’s student achievement. The standards that, together, require the site to document that their curricular levels, student achievement requirements, self-identified progression thresholds, and overall progression rates are acceptable are Curriculum Standard 2 (p. 10), Student Achievement Standard 2 (p. 39), and Length and Structure of the Program of Study Standard 2 (p. 35) respectively. These standards require that the site document that the curricular levels represent significant progress relative to the norms of the field for the program model delivered, that the student learning outcomes specified for each level of the curriculum are assessed and that direct evidence of achievement of the SLOs as stated in the curriculum is the basis of progression decisions, and that students in the aggregate are progressing as anticipated by the curriculum design. The RTR finding specifically addresses each matter and this, along with the site’s response to any deficiencies, forms the basis of the Commission’s evaluation and accreditation decision.
Upon receiving the RTR, the site has 30 days to respond to the findings. The response may include corrections of fact, explanations and evidence addressing deficiencies, and plans to resolve deficiencies within one year. Once an accreditation decision is made by the Commission, a Commission Action Report (CAR) is sent to the site which outlines any deficiencies and issues reporting requirements where improvement is necessary in order to come into full compliance with a standard in a timely way. Where a deficiency may relate to student achievement, an analysis of the site’s practice relative to the requirements of the standard is provided.

Review Team Reports (RTRs), site response, Commission decision letter, and Commission Action Report (CAR) are attached for three sites, each with a different mission, curriculum, required student learning outcomes, student services, and other practices. The RTR documents that the site is evaluated based on the mission, successful achievement of stated program education and student services objectives, student learning outcomes, and evidence that achievement patterns are within the norms of the field for the educational program model provided. Note that an RTR is constructed around the site’s Self-Study Report and thus incorporates the Self-Study Report minus the supporting documents. The RTR is comprised of a cover page, an overview provided by the site, the reviewers’ Team Summary, a list of the reviewers’ on-site activities, a Standards Checklist, and then the body of the site’s Self-Study Report with the review team’s findings for each individual standard at the bottom of each standard. Regarding the site’s response to the RTR, the supporting documents have not been uploaded; they are available for review on-site in CEA files.

[Part of the text is redacted.]

Each RTR displays the site’s response to Curriculum Standard 2, Student Achievement Standard 2, and Length and Structure of the Program of Study Standard 2, and the review team’s findings for each in a findings box directly following each standard. Of the three examples provided, two [(b)(6) and (b)(4)] illustrate the close review of all aspects of Student Achievement and required remediation and reporting of any element of the standard that is partially or not met. Available: Complete records of all accredited sites showing evaluation of student achievement.

**Document(s) for this Section**

No files uploaded
Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:
As noted in the narrative, the agency provides sites with a written and detailed Review Team Report within 30 days of a site visit. The Review Team Report lists agency findings after every standard (including the 4 student achievement standards) and states whether the site appears to meet, partially meet, or does not meet the standard, for all standards except for the 2 standards requiring financial information (which are included in a separate report).

The agency also provided as evidence Review Team Reports, Response Letters, and Commission Letters for (Ex. 57-59), (Ex. 60-63), and (Ex. 64-67). This evidence demonstrates the agency’s practice of evaluating institution’s or program’s compliance with agency’s standards, student achievement, student services objectives, and student learning outcomes in accordance with this guideline.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Criteria: 602.17(g) Student Verification

Narrative:
There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

Document(s) for this Section

No files uploaded

Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency's last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

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Criteria: 602.18(a) Standards Respect Mission, Ensure Quality & Are Clearly Written

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

Document(s) for this Section

No files uploaded

Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Not Reviewed
### Criteria: 602.18(b) Consistent Application of Standards

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

Not Reviewed

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### Criteria: 602.18(c) Decisions Based on Published Standards

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded
### Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

**Analyst Review Status for Response:**

Not Reviewed

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### Criteria: 602.18(d) Reasonable Assurance of Accurate Information

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

### Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.
### Criteria: 602.18(e) Report Clearly Identifies Deficiencies

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

### Document(s) for this Section

No files uploaded

### Analyst Worksheet - Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

**Analyst Review Status for Response:**

Not Reviewed
Criteria: 602.19(a) Reevaluation

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

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Analyst Worksheet- Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

As an agency that accredits institutions and programs, the agency must respond to this criterion.

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

Note: The agency submission date was prior to the date of the July 1, 2020 regulations taking effect. Per the June 3, 2013 letter regarding criteria to be addressed by all agencies applying for renewal of recognition during and after 2014 (until such time as new statutory and/or regulatory requirements are in effect), only 602.19(b) required a response. There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition. The agency has provided a response.

CEA does not have a preaccreditation status.

CEA’s policies for re-evaluation of accredited sites are outlined in the CEA Policies and Procedures (Exhibit 82-Section 5: Accreditation Process; Exhibit 83-5.8 Reaccreditation). Two years prior to the end of the program or institution’s current grant of accreditation, staff contact sites to begin the reaccreditation process. The reaccreditation process mirrors the initial accreditation process, and consists of a required application, mandatory attendance at the accreditation workshop, submission of a timeline, self-study report, and a site visit. All processes are identical to initial accreditation. At the time of the accreditation decision, sites can be granted a 1-year term of accreditation or a 10-year term of accreditation. (See Exhibit 84-Section 7 The accreditation decision: 7.1 Types of accreditation decisions items (e) and (f)). All
programs and institutions to be considered for reaccreditation are posted on the CEA website 30 days in advance of each meeting of the Commission (sample Upcoming Reviews).

Documentation: Exhibits 82, 83-Policy, Exhibit 85-Reaccreditation Application Form (Blank), Exhibit 86-Reaccreditation Application Form (Completed), Exhibit 87-Approval of application for reaccreditation, Exhibit 88-Timeline (Blank), Exhibit 89-Timeline (completed), Exhibit 90-Completed timeline, Exhibit 91-Self-study Report/Review Team Report, Exhibit 92-Review Team Report Response, Exhibit 93-Commission Letter, Exhibit 94-Commission Action Report, Exhibit 95-List of Upcoming reviews

In Year 5 of the 10-year term of accreditation, sites submit an Interim Report as outlined in the CEA Policies and Procedures (Exhibit 96-P&P Section Excerpt Section 8: Maintaining Accredited Status 8.6 Interim Reports for reaccredited sites). One year prior to the report submission deadline, staff send detailed instructions and a report template. Submissions are reviewed and analyzed by staff and specialized contractors, and staff reports are reviewed by the Standards Compliance Committee, which makes recommendations to the Commission. The Commission may accept the report as complete, ask for additional information, or issue a special site visit. After review of the responses, if any, the Commission may accept the Interim Report as complete and grant a continuance of accreditation, with or without reporting requirements. The Commission may initiate advisory action for failure to comply with the standards, which culminate in the adverse action of withdrawal of accreditation (Exhibit 97-See Section 12: Advisory and adverse actions for a description of this process).


Analyst Worksheet - Response

Analyst Review Status for Response:

Meets the requirements of this section

Analyst Remarks to Response:

The agency attests and provides documentation of its policy for regular reevaluation of programs or institutions it has accredited or preaccredited. The agency’s reaccreditation process is analogous to an initial accreditation process where the program or institution submit an application (Ex. 85) and pay the required fee, send a representative to the accreditation workshop, complete self-study report, undergo a reaccreditation visit (Ex. 91), undergo a site visit, and respond to the site visit report prior (Ex. 92) to the decision by the Commission (Ex. 83). Reaccreditation may be granted for a period of 1 or 10 years (Ex. 93). Programs or institutions that have been accredited for 10 years must submit an interim report (Ex. 96) at the 5-year mark (Ex. 98) to verify that the program or institution continues to be eligible and continues to meet agency standards. One-year (non-appealable) reaccreditation is granted to programs or institutions that substantially meet the agency standards but have outstanding (yet minor) standard related items to address (Ex. 84).

The accreditation and preaccreditation revaluation timelines along with documentation resolve previous Department Staff concerns.

List of Document(s) Uploaded by Analyst - Response
Criteria: 602.19(b) Monitoring

Narrative:

CEA’s policies for on-going monitoring and evaluation of accredited sites, including the types of reports, the process for review, and follow up actions, are outlined in the CEA Policies and Procedures (Exhibit 68 P&P Section 8: Maintaining accredited status). Compliance reports are reviewed and analyzed by CEA staff; the findings are then reviewed by the Standards Compliance Committee which makes recommendations to the Commission (See Exhibit 33 SCC report to Commission August 2019).

The Standards Compliance Committee conducts monitoring and evaluation of accredited sites through review of annual reports and interim reports (described below); the SCC also reviews responses to reporting requirements issued as a follow up to accreditation decisions, substantive changes, and complaints against accredited institutions.

Annual reports
Annual reporting is required from all accredited sites through the periods of both initial accreditation and reaccreditation, except during the years when the site submits its reaccreditation self-study or its interim report; this is communicated to the sites in the CEA Policies and Procedures (See Exhibit 68 P&P Section 8: Maintaining accredited status) as well as through regular reminders.

Annual reports collect and monitor data on enrollment and faculty. The annual report includes sections that require responses and documents that confirm continued eligibility for accreditation and regulatory compliance, verify compliance with student achievement standards related to evidence of achievement of outcomes and progression rates, and verify compliance with fiscal capacity standards. (Exhibit 69 Annual review form 2020) (Exhibit 70 Annual financial reporting form 2020). The reports include triggers for additional reporting in cases when there are significant changes in faculty or student numbers, when the patterns of students achievement are abnormal, unexpected, outside the norms of the field for the type of program delivered, and/or when fiscal capacity is not sufficiently documented. In 2019 – 2020, CEA is migrating to an online submission system for the Annual Report components. (Available: Completed annual review forms, cases with additional reporting).

Staff members review and analyze annual reports, including student achievement data, conduct spot checks of institutional websites for programs on offer, and initiate follow-up actions. Staff members maintain a log of data processing and follow-up requests (Available: Annual report review log 2019 with individual site entries). Follow-up actions initiated by staff include:
(1) requests for additional information and documentation
(2) requests for substantive change reporting;
(3) monitoring procedures for sites with identified fiscal deficiencies
(Available for all above: Sample follow up messages to Annual Report components)
As a result of any Annual Report, the Standards Compliance Committee may require a follow-up report, a special site visit, or take an advisory action, as outlined in CEA Policies and Procedures, Section 8: Maintaining accredited status.
When all annual reports have been processed, staff members prepare a summary of collected data, findings, and recommendations, to be reviewed by the Standards Compliance Committee (Exhibit 71 2019 Annual report summary). The Annual Report Summary is provided to the CEA Constituent Council (the body of accredited programs and institutions); aggregated student achievement and progression data is summarized (pp. 4 – 6 of the Summary).

Interim reports
In the fifth year of the 10-year accreditation period or in the fourth year of nine-year accreditation, an interim report is due in place of the annual report. Sites receive a reminder, instructions, and report templates a year before the report is due. (See Exhibit 68 CEA P&P Section 8 Maintaining accredited status 8.6 Interim reports for reaccredited sites) (Exhibit 72 2020 Interim report template) Through the interim report, accredited sites verify that the program or institution continues to be eligible and continues to meet the CEA Standards. The interim report content requires sites to respond fully to a subset of the CEA Standards (25 standards out of 44), including documentation; to provide an attestation to compliance for the other 19 standards; and to contact CEA regarding any standard subject to unreported substantive change. Sites also submit an interim financial report, with complete responses to the two financial capacity standards, Administrative and Fiscal Capacity 11 and 12.

CEA staff conducts an in-person training workshop for selected experienced peer reviewers who will act as interim report reviewers. (Available: Interim Report Training Workshop materials) Under supervision of CEA staff, the two peer reviewers carry out the initial review of each interim report and prepare findings, with recommendations, for the Standards Compliance Committee (SCC) to review. The committee then makes recommendations to the Commission. The Commission may accept the report as complete, require additional information from the reviewers, require additional reporting from the site and/or require a special site visit, and/or initiate advisory action against the site. If additional reporting is required, responses are reviewed by the Standards Compliance Committee (Available: Samples of interim report processing documents)

Document(s) for this Section

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Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:
As noted in the narrative, the agency’s Policies and Procedures (Ex. 20) require programs and institutions to provide annual and interim reports to identify problems and continued compliance with agency Standards. The Standards Compliance Committee conducts monitoring, evaluation, and review of accredited sites in accordance with this guideline.

The Annual Report (Ex. 69) is required from all sites through the initial accreditation to the reaccreditation period—with the exception being the year the site submits its reaccreditation self-study or interim reports. The Annual Report requires sites to report on student achievement; provide attestations related to eligibility and agency standards; enrollment and faculty data; and regulatory compliance. The Annual Report allows the agency to determine if a site may be having issues as they arise.

Interim reports (Ex. 72) and financial reports (Ex. 70) are required halfway through a 10-year accreditation period (in year 5) in place of an Annual Report. The interim report requires sites to fully respond to 25 of the 44 agency standards—the remaining standards require an attestation of compliance. Through the interim report, accredited sites verify that the program or institution continues to be eligible and continues to meet the CEA Standards. Annual reports are reviewed and analyzed by staff members, including student achievement data, conducting spot checks of institutional websites, and initiating follow-up actions.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

**Criteria: 602.19(c) Annual Headcount**

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the
criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Criteria: 602.20(a) Enforcement Timelines

Narrative:

CEA enforces compliance with its standards through stated policies and procedures at each decision juncture, through required reporting for any deficiencies if accreditation is granted, and through advisory and adverse actions where warranted within policy.

At initial accreditation or reaccreditation, a site that meets the standards may be granted 5-year accreditation or 10-year reaccreditation; a site that substantially meets the standards but has minor standards-related deficiencies that can be corrected within 1 year may be granted 1-year accreditation or 1-year reaccreditation. The Commission may issue reporting requirements in any of these cases, due no later than 10 months after the decision, for review by the Commission at the end of the 1-year reporting period. Sites that are in adequate compliance at the end of 1 year may be granted 4-year continued initial accreditation or if for re-accreditation, 9-year continued reaccreditation. (Exhibit 73 P&P Section 7.1 Types of accreditation decisions)

Regarding 602.20(a)(1): At the time of initial or reaccreditation, or continued initial or continued reaccreditation, the Commission may take immediate adverse action by denying accreditation for sites that do not substantially meet the standards or which have deficiencies that cannot be corrected within 1 year. (Note: CEA does not define “deferral” as a period of time for a site to come into compliance; rather, deferral is issued only when additional information is required by the Commission before an accreditation decision can be made. Thus, deferral actions are not compliance actions and are not addressed in this response.) Between January 2012, when accreditation decisions began to be made based on the last major revision of the CEA Standards, and December 2019, of 433 initial or reaccreditation decisions, 27 have been decisions to deny, 6% of decisions. However, none of these denials have been issued since 2014, or during the current recognition period commencing in 2017. Available: Data sets on accreditation decisions

Regarding 602.20(a)(2) regarding the period of time granted to a site to come into compliance with standards cited in reporting requirements: The average curricular design of the eligible intensive English program among accredited sites is 60 – 77 weeks, and as the length of a program offered additionally includes a number of level repeats acceptable for students acquiring a second language, all sites offer programs that exceed 2 years in length. (See Exhibit 71 2019 Annual Report Summary p. 4, Tables 4 and 5) CEA applies a 1-year compliance requirement to reporting requirements to all sites granted accreditation, and may issue a follow-up reporting requirement of up to 1 more year in certain cases where a site requires more time to demonstrate implementation of a new process or evidence of data collection and analysis, for
Further regarding 602.20(a)(2) requirements to bring the program or institution into compliance within 2 years: CEA issues reporting requirements whenever a site is not in sufficient compliance with a standard. Any site, even those granted the maximum period of (re)accreditation of 5 or 10 years, may be issued reporting requirements for any deficiency and required to bring itself into compliance within 1 year. Reporting requirements are stated in a Commission Action Report (CAR) which specifies the deficiency, remedy, and due date for each reporting requirement. The CAR includes an analysis of the deficiency based on the site’s self-study report, the Review Team Report (RTR), and the site’s response to the RTR. All reporting requirements have a due date no later than 10 months following issuance; this provides the Commission with 2 months to review the response prior to the Commission meeting, i.e. 1 year following the accreditation decision, at which the site’s compliance will again be reviewed. The site must agree to a proviso that it will comply with the requirement(s) by the due date. (See Exhibit 49 Commission Action Report)

Responses to reporting requirements from sites that have been granted 5-year or 10-year (re)accreditation are reviewed by the Standards Compliance Committee (SCC), which determines whether the deficiency has been remedied and issues a report to the full Commission. Sites that have been granted 1-year (re)accreditation come before the full Commission for a continuance of (re)accreditation decision. Sites which provide adequate responses to reporting requirements are issued 4-year continued accreditation or 9-year continued reaccreditation respectively.

Sites that report substantive changes and sites with any deficiencies at the time of the Interim Report may also be issued reporting requirements to ensure compliance with affected standards. The Standards Compliance Committee (SCC) issues such reporting requirements, which are always due no later than 10 months after the Commission meeting at which the SCC action issuing the reporting requirements is approved by vote of the Commission.

Sites that do not provide adequate responses to reporting requirements after 1-year are subject to one of two actions. 1) The site is subject to the immediate adverse action of denial of continued (re)accreditation. 2) The site may be granted continued accreditation with follow-up reporting requirements. The number of these cases is limited; the median number of follow up reporting requirements is 1.2 for institutions and .3 for programs. In such cases, there must be evidence that the site has substantially met initial reporting requirements, that the remaining matters are significantly narrowed from the original reporting requirement, and that follow-up reporting does not affect the site’s overall accreditation-worthiness but represents remaining matters requiring longer-term evidence, data, or implementation. Follow up reporting requirements are due within 10 months and may be given a shorter due date. In total, initial and follow up reporting requirements do not exceed 2 years for a site to bring itself into compliance with the standards.

As stated in policy, a special site visit can be required for any reason at any time, and may be applied to marginal cases to ensure compliance with reporting requirements or to cases which have complications related to reporting requirements, such as when a substantive change has implications for reporting requirements related to accreditation decisions.

**Document(s) for this Section**

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Flowchart
Exhibit 117 Withdrawal Timeline Materials
Exhibit 118 Long-term compliance log (2017-2020)

Analyst Worksheet - Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must provide evidence of its timeframe for programs or institutions to come into compliance. The agency did not discuss its timeframe it will allow an institution to be out of compliance before adverse action will be initiated. It is unclear to Department staff the length of time a program/institution is allowed to be out of compliance before adverse action will begin. The agency must also provide information demonstrating the application of this requirement if it has had such actions occur during this recognition period.

Analyst Remarks to Narrative:

As discussed in its narrative and provided documentation, CEA Policies and Procedures allow the agency to grant a one-, five- or ten-year reaccreditation to a program or institution in compliance with agency Standards. The agency may deny initial accreditation or reaccreditation to a program or institution that has not substantially met the standards. Any site, even those granted the maximum period of (re)accreditation of 5 or 10 years, may be issued reporting requirements for any deficiency of agency Standards. The program or institution has 10 months from the date of the Commission Action Report to bring itself into compliance which allows 2 months for the Commission to review the program or institution’s response (Ex. 73).

Although the agency discussed in the narrative and provided evidence of its timeframe for programs or institutions to come into compliance, the agency did not discuss its timeframe it will allow an institution to be out of compliance before adverse action will be initiated. It is unclear to Department staff the length of time a program/institution is allowed to be out of compliance before adverse actions will begin and where this requirement is found in the agency’s policies and procedures. In accordance with this criterion the agency must take immediate adverse action when an institution or program is found noncompliant with an accreditation standard or allow the institution or program time to come into compliance depending on the length of the longest program offered at the institution. The agency must also provide information demonstrating the application of this requirement if it has had such actions occur during this recognition period.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:
CEA allows a maximum of 2 years for a site to come into compliance before adverse action begins. Long-term compliance procedures are outlined in the Compliance Procedure Flowchart. For Reporting Requirements issued with Accreditation decisions, substantive changes, Annual Reports or Interim reports, a 1-year reporting and review timeline is enacted. At the time of the 1-year review, any program or institution deemed not in adequate compliance can be denied, or could be placed on warning status. At the subsequent review, which requires the site to come into compliance within 8 months, if the site does not meet the warning letter conditions, the site is placed on probation, which may escalate to show cause and withdrawal if the site remains not in adequate compliance.

One example of application of CEA’s advisory and adverse action hierarchy which resulted in withdrawal by the Commission within the 2-year time period is provided. The site’s initial grant of accreditation for 1 year in April 2019 was renewed in April 2020. At the time of the 9-year grant of continued reaccreditation, a warning action was initiated, with required reporting due in June 2020, reviewed at the August 2020 Standards Compliance Committee meeting, and approved by the Commission. In August 2020, the site was placed on probation. In December 2020, the site was placed on show cause. In April 2021, the site’s accreditation was withdrawn. The site had the opportunity to appeal, but did not respond to the appeal. A summary letter was issued per CEA policy and USDE requirements.

Since CEA’s long-term compliance procedure was revised in 2017, staff has kept track of sites placed on warning status as a result of the 1-year review. The chart indicates whether compliance issues were resolved or continued, and the current status, demonstrating that compliance issues have escalated or been resolved within the 2-year time period.


Analyst Worksheet - Response

Analyst Review Status for Response:

Meets the requirements of this section

Analyst Remarks to Response:

The agency attests and provides documentation (Ex. 116) of its timeframe for programs or institutions to come into compliance as a response to previous Department Staff concerns. The agency allows a maximum of 2 years for a program or institution to come into compliance before adverse action begins. The agency also provided documentation of nine programs and institutions timelines (Ex. 118) to demonstrates application of its enforcement timeline policies during the recognition period.

List of Document(s) Uploaded by Analyst - Response

No files uploaded

Criteria: 602.20(b) Enforcement Action

Narrative:
When a site has substantive non-compliance but meets the threshold for accreditation with reporting, the site is afforded time to come into compliance but with escalating levels of oversight, as stated in the CEA advisory and adverse action hierarchy policy. The hierarchy includes the stepped actions of warning, probation, show cause (with possible extension for good cause), and withdrawal of accreditation, providing due process for the site at each step. (Exhibit 74 CEA Policies and Procedures: Section 12 Advisory and adverse actions) For sites that are in significant non-compliance at the time of the decision to continue accreditation or reaccreditation, that is, after 1-year accreditation with reporting requirements, the Commission may initiate the advisory action of warning. In this case, the site must come into compliance within 8 months, or two reporting cycles. If the compliance issues are not resolved, the warning escalates to probation. If the site does not then demonstrate sufficient compliance, it will be issued a show cause, and at this time, an extension for good cause is possible. If an extension for good cause is not issued, the site is subject to the adverse action of withdrawal of accreditation. Thus, a site that is not in sufficient compliance will be subject to the adverse action of withdrawal of accreditation within 2 years of the grant of accreditation unless an extension for good cause is issued. Rationales for extensions for good cause are specifically outlined in Section 12.4.

In the current recognition period, the Commission has issued 5 warning actions. Three of these were resolved, with 2 being escalated to probation. Of these, 1 was fully resolved and 1 was de-escalated to warning. No show cause or withdrawal actions have been applied. (Exhibit 75 List of warning and probation actions)

**Document(s) for this Section**

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<tr>
<th>Exhibit Title</th>
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<tbody>
<tr>
<td>Exhibit 74 CEA P and P Section12 Advisory and Adverse Actions</td>
<td>Exhibit 74 CEA P and P Section12 Advisory and Adverse Actions.docx</td>
</tr>
<tr>
<td>Exhibit 75 List of warning and probation actions</td>
<td>Exhibit 75 List of warning and probation actions.docx</td>
</tr>
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</table>

**Analyst Worksheet - Narrative**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide information and documentation to demonstrate the application of its extension for good cause policy and evidence of the commission awarding an institution or program an extension for good cause after the enforcement timelines allowed in 34 CFR Part 602. 20(a) or the agency’s policy (which must be compliant with CFR Part 602. 20(a)) have been exceeded.

**Analyst Remarks to Narrative:**

The agency’s Policies and Procedures (Ex. 22) provide for an extension for good cause if certain conditions are met: the site has made significant progress and now is in adequate compliance. There are remaining aspects of the reporting requirement that must be monitored and finalized; these aspects are not of a
number, depth or nature to endanger adequate compliance; a remaining issue is a limited part of a standard, or one part of a standard for a limited number of standards; the nature of the standard involved requires that the site be given more time to collect and provide additional data or evidence of implementation and effectiveness of a procedure or plan, including those put in place in response to a reporting requirement or substantive change; the reporting requirement relates to pending Student and Exchange Visitor Program (SEVP) actions which have not been completed by the time of the reporting requirement due date through no fault of the site; or any other condition for which there is evidence of mitigating circumstances which affect the reporting timeline (Ex 22).

The agency has not provided information and documentation to demonstrate the application of its extension for good cause policy and evidence of the commission awarding an institution or program an extension for good cause after the enforcement timelines allowed in 34 CFR Part 602.20(a) or the agency’s policy (which must be compliant with CFR Part 602.20(a)) have been exceeded.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

No extensions for good cause have been issued by the agency. All compliance issues have been resolved or escalated within the 2-year agency timeframe as cited in CFR Part 602.20(a). For reference, see Exhibit 118 Long Term Compliance Aug 2021.

Analyst Worksheet - Response

Analyst Review Status for Response:

Meets the requirements of this section

Analyst Remarks to Response:

The agency provides documentation of its extension for good cause compliance log (Ex. 118); however, the agency was not able to provide documentation demonstrating the application of its extension for good cause policy or evidence of the commission awarding an institution or program an extension for good cause after the enforcement timelines because the agency has not issued such an extension during the review period.

List of Document(s) Uploaded by Analyst - Response

No files uploaded

Criteria: 602.21(a)(b) Systematic Review of Standards

Narrative:
There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Criteria: 602.21(c) Revision of Standards**

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

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**Analyst Worksheet- Narrative**

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:

Not Reviewed

Criteria: 602.22(a)(1) Approval of Substantive Changes

Narrative:

CEA’s substantive change policy is outlined in the CEA Policies and Procedures (Exhibit 77 CEA P&P Section 9 Substantive change). The policy includes advance notification requirements and states that proposed changes must be approved by the Commission prior to being included in the grant of accreditation. Site documents provided in 602.22(a)(2) illustrate advance notice, actual substantive change reporting, and Commission action with effective dates.

Document(s) for this Section

<table>
<thead>
<tr>
<th>Exhibit Title</th>
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<td>Exhibit 77 CEA P and P Section 9 Substantive change</td>
<td>Exhibit 77 CEA P and P Section 9 Substantive change.docx</td>
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<tr>
<td>Exhibit 119 Auxiliary approval letter</td>
<td>Aux loc approval with follow up RRqs_Redacted.pdf</td>
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<tr>
<td>Exhibit 120 Change of ownership staff approval, review, Commission approval letter</td>
<td>ChgofOwnership Approval _Redacted.pdf</td>
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<td>Exhibit 121 New Program approval</td>
<td>New Program approval 2019 08_Redacted.pdf</td>
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<tr>
<td>Exhibit 122 New Structure of program approval</td>
<td>New Structure approval 2019 04_Redacted.pdf</td>
</tr>
<tr>
<td>Exhibit 123 Relocation approval</td>
<td>Reloc Approval 2019 04_Redacted.pdf</td>
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<tr>
<td>Exhibit 124 SEVP (Student Exchange and Visitor Program) Certification Status change</td>
<td>SEVP Subchq approval 2019 12_Redacted.pdf</td>
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</table>
Analyst Worksheet- Narrative

Analyst Review Status:
Does not meet the requirements of this section

Staff Determination:
Although the agency provided its Substantive Change policy, the agency must provide documentation that demonstrates the application of their approval process.

Analyst Remarks to Narrative:
As discussed in its narrative and provided documentation, CEA Policies and Procedures (Ex. 77) requires accredited programs and institutions to promptly notify CEA in writing of any proposed substantive change since the most recent CEA accreditation review. This advance notice requirement must include a thorough explanation of any proposed change and a list of affected standards with an explanation of how the standards will continue to be met following the change. The proposed change must be approved by the Commission prior to granting accreditation.

Although the agency provided its Substantive Change policy, it has not provided documentation that demonstrates the application of their approval process.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:
Letters of approval for substantive changes, redacted, are included as documentation of the approval process. Unredacted versions available to the Staff Analyst upon request.


Analyst Worksheet - Response

Analyst Review Status for Response:
Meets the requirements of this section

Analyst Remarks to Response:
The agency provides documentation related to the application of their substantive change policy. The change policy for five programs or institutions includes changes that were approved related to the opening of an auxiliary location (Ex. 119); a new program (Ex. 121); new program structure (Ex. 122); relocation (Ex. 123) and a new student exchange program (Ex. 124). A sixth program was provided for the change of
ownership (Ex. 120) where the decision was postponed until the next Commission meeting. The agency response to the program or institutions change request includes next steps, substantive change summary and affected standards, and possibly Standards Compliance Committee findings. The additional information provided satisfies Department Staff concerns.

**List of Document(s) Uploaded by Analyst - Response**

No files uploaded

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**Criteria: 602.22(a)(2)(i-vii) Types of Substantive Change**

**Narrative:**

Note: vii does not apply to CEA, which is not a title IV gatekeeper.

CEA Policies and Procedures Section 9 (See Exhibit 77) substantive change policy lists and describes the types of substantive changes that require advance notification and formal reporting, including changes to mission, legal status, form of ownership or control, and addition of courses and degrees that represent a significant departure, in terms of either content or method of delivery, from those offered by the site during the most recent accreditation review, as well as addition of courses or programs at a level below or a level above those included in the current accreditation.

Sites are informed about the necessity for reporting substantive changes through the CEA Policies and Procedures Section 8.2 Notifications to CEA (p. 43) that specifies requirements for maintaining accreditation, stating “An accredited site must promptly notify CEA of the following events . . . e. any substantive change as described in Section 9: Substantive change”. This section of the CEA Policies and Procedures is included in the Commission’s letter to a site granting accreditation. In addition, sites receive a copy of CEA’s guidelines for reporting substantive change as part of the accreditation letter package and again every year as part of the annual report package. (Exhibit 78 CEA Substantive Change Reporting Guidelines) The guidelines document includes an excerpt from the CEA Policies and Procedures as well as information about the structure of reports and mechanics for submission. Policies and guidelines instruct accredited sites to identify and report on the standards affected by the changes. Staff is frequently consulted on the reporting process and requirements and assists sites with identifying affected standards and appropriate supporting documentation. Regarding change of control or ownership, CEA policies state that changes of control (for programs) and ownership (for institutions) have a separate reporting procedure and require a different form; this form is provided to sites by CEA staff on request. Available: Application for continuance of accreditation following a change of control)(Application for continuance of accreditation following a change of ownership

CEA’s substantive change policy describes the review process and follow-up actions. Staff conducts an initial review of substantive change notifications and prepares written reports and recommendations for the Standards Compliance Committee (SCC). The SCC reviews all staff reports and recommendations, including primary materials when necessary, and makes changes where required. The SCC reports compliance issues to the full Commission with a recommendation for follow-up actions.

The Standards Compliance Committee ensures that sites achieve continued compliance with affected standards following substantive change by issuing reporting requirements when necessary; responses to
these reporting requirements are then reviewed by the Standards Compliance Committee after the assigned
due date. In some cases, particularly in cases of deep substantive change as defined by substantive change
policies, a special site visit and additional reporting may be required.

Over the last three cycles of review within 2019, i.e. April 2019, August 2019, December 2019, for 342
accredited sites, the SCC reviewed 12 relocation reports, 14 changes of program structure, including new
levels, 12 changes of ownership or control, 6 new additional programs, 8 new auxiliary classroom
locations, and 10 other reports (changes to mission, SEVIS certification, etc.), for a total of 62 reports.
(Exhibit 79 2019 List of substantive change reports with status)

For each of the six types of substantive change referenced above, one complete record is attached. The
complete record comprises the site’s notification and submission to CEA, CEA’s clarification (if any) of
expected reporting, the staff report to the Standards Compliance Committee showing the Committee’s
adopted findings with signatures, the Standards Compliance Committee’s finding and incorporation into the
grant of accreditation, and the confirmation letter to the site stating the date the change is incorporated into
the site’s grant of accreditation and issuing follow up reporting if required. Note that in each case the
supporting documents provided by the site along with the application are not included in the record. All
supporting documents are available on-site files. (Exhibit 80 Sub Change Relocation) (Exhibit 81 Sub
Change Program Structure) (Exhibit 82 Sub Change Change of Ownership) (Exhibit 83 Sub Change New
Program) (Exhibit 84 Sub Change Auxiliary) (Exhibit 85 Sub Change SEVP Certification)

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<tr>
<td><strong>Exhibit Title</strong></td>
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<tr>
<td>Exhibit 78 CEA Substantive Change Reporting Guidelines</td>
</tr>
<tr>
<td>Exhibit 79 2019 List of substantive change reports with status</td>
</tr>
<tr>
<td>Exhibit 80 Sub Change Relocation</td>
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<tr>
<td>Exhibit 81 Sub Change Program Structure</td>
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<td>Exhibit 82 Sub Change Change of Ownership</td>
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<td>Exhibit 83 Sub Change New Program</td>
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<td>Exhibit 84 Sub Change Auxiliary</td>
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<td>Exhibit 85 Sub Change SEVP Certification</td>
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**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:
As noted in the previous section, the agency’s has policies and procedures for substantive change in accordance with this guideline. The agency has provided as evidence several substantive change requests (Ex. 80-84). The agency has also provided evidence of a Standards Compliance Committee findings document along with letter confirming that the requested change was incorporated into the site’s grant of accreditation (Ex. 85).

The types of substantive changes that must be reported prior to the change taking place include, but are not limited to, the following: any change in ownership, legal status or form of control; the addition of a permanent location; change in mission; change in location or the addition of an auxiliary location; change in the type of students served; change in Student Exchange Visitor Program (SEVP) certification; the addition of courses; a change in the means for determining student hours and/or a substantial increase or decrease in the number of clock or credit hours; a substantial increase or decrease in the length of the program; or a change in resources that would affect the program or institution’s ability to provide its services (Ex. 78).

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

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**Criteria: 602.22(a)(2)(ix-x) Other Locations Needing Approval**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.
**Criteria: 602.22(a)(3) When New Evaluation Required**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

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**Criteria: 602.22(b) Substantive Change Procedures**

**Narrative:**
There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

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**Criteria: 602.23(a) Public Information**

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

#### Analyst Review Status for Response:

Not Reviewed

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### Criteria: 602.23(b) Opportunity for 3rd-party Comments

#### Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

#### Document(s) for this Section

No files uploaded

### Analyst Worksheet- Narrative

#### Analyst Review Status:

Meets the requirements of this section

#### Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

#### Analyst Review Status for Response:
### Criteria: 602.23(c) Complaint Procedures

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

Not Reviewed

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### Criteria: 602.23(d) Public Disclosure of Accreditation Status

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
Not Reviewed

Criteria: 602.23(e) Public Correction of Inaccurate Information

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

Document(s) for this Section

No files uploaded

Analyst Worksheet - Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

Not Reviewed

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**Criteria: 602.23(f) Proviso for additional procedures**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

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Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

Analyst Review Status for Response:
### Criteria: 602.25(a-c) Basic Due Process Requirements

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

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**Analyst Worksheet - Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

Not Reviewed

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### Criteria: 602.25(f) Specific Appeals Requirements

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.
### Criteria: 602.25(g) Basis for Appeal Outcome Provided

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

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### Criteria: 602.25(g) Basis for Appeal Outcome Provided

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

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The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
Not Reviewed

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### Criteria: 602.25(h) New Financial Information

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
## Criteria: 602.26(a) Notifications: Positive Decisions

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

### Document(s) for this Section

No files uploaded

### Analyst Worksheet - Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

**Analyst Review Status for Response:**

Not Reviewed

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## Criteria: 602.26(b) Notifications: Negative Decisions

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Criteria: 602.26(c) Notice to Public w/in 24 hours

Narrative:

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

Document(s) for this Section

No files uploaded

Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency's last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
Not Reviewed

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Criteria: 602.26(d) Brief Summary w/in 60 Days

Narrative:

There have been no changes to our agency's policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary's Criteria for Recognition.

Document(s) for this Section

No files uploaded

Analyst Worksheet - Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency's last review before the NACIQI that would bring the agency into noncompliance with this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status for Response:
### Criteria: 602.26(e) Notifications: Voluntary Withdrawal

**Narrative:**

There have been no changes to the policies and/or practices since the last NACIQI review that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

#### Document(s) for this Section

No files uploaded

#### Analyst Worksheet - Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

#### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Criteria: 602.27(a)(1-5) Other Information to be Provided

**Narrative:**

There have been no changes to our agency’s policies and/or practices since the last NACIQI review that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.
The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

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**Criteria: 602.28(a) Regard for the Legal Authorization of an Institution**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance.
### Criteria: 602.28(b) Regard for Negative Actions by Other Accreditors

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet - Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

Analyst Review Status for Response:

Not Reviewed
### Criteria: 602.28(c) Explanation of Over-riding Decision

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

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**Analyst Worksheet - Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status for Response:**

Not Reviewed

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### Criteria: 602.28(d) Requirement to Initiate Review

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

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Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

Analyst Review Status for Response:

Not Reviewed

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**Criteria: 602.28(e) Information-Sharing with Other Accrediting/Approval Bodies**

**Narrative:**

There have been no changes to our agency’s policies and/or practices since our last NACIQI review (of a petition and/or compliance report) that could bring our agency into noncompliance with any of the requirements of this section of the Secretary’s Criteria for Recognition.

**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency attests that there have been no changes to the policies or practices related to this section of the criteria since the agency’s last review before the NACIQI that would bring the agency into noncompliance with this criterion.
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