



UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF THE UNDER SECRETARY

Wednesday, October 19, 2022

Dr. Belle Wheelan, President
Southern Association of Colleges and Schools, Commission on Colleges
1866 Southern Lane
Decatur, GA 30033

Dear Dr. Wheelan:

I am writing to inform you of my decision on the renewal of recognition of the Southern Association of Colleges and Schools, Commission on Colleges (SACSCOC). U.S. Department of Education (Department) staff and the National Advisory Committee on Institutional Quality and Integrity (NACIQI) have each made recommendations to me. These recommendations were made under sections 114 and 496 of the Higher Education Act of 1965, as amended, and pursuant to relevant statutory and regulatory provisions.

Areas of Noncompliance

Both Department staff and NACIQI recommend that I approve the Agency's request for renewal of recognition, subject to the submission of a compliance report due in 12 months and a review and decision on the compliance report. Specifically, Department staff and NACIQI recommended findings of noncompliance for the following criteria, and recommended the actions necessary to achieve compliance:

- **Section 602.14(b)** – The Agency does not meet the requirements of this section of the criteria. The Agency must still provide recusal forms from Committee and Board Action, cited within the Agency's original narrative and response to the draft staff analysis for analysis.
- **Section 602.15(a)(2)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to provide the bios of the 2020 Appeals Committee members for the record and to demonstrate the experience and background of the Appeals Committee members. The Agency must also provide the Appeals Committee Procedures of the College Delegate Assembly referenced in the original narrative and requested in response to the draft staff analysis as evidence.
- **Section 602.15(a)(3)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to provide exhibit FF42 for analysis.
- **Section 602.15(a)(6)**—The Agency does not meet the requirements of this section of the criteria. The Agency must still provide recusal forms from Committee and Board Action, cited within the Agency's original narrative and response to the draft staff analysis for analysis.

- **Section 602.16(a)(1)(ii)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to still provide the Guidelines for Addressing Distance and Correspondence Education exhibit WW, as well as the compliance certification section referenced in the narrative, the site visit report; institution response; and Board of Trustees decision letter for the record in this section of the criteria.
- **Section 602.16(a)(1)(iii)**—The Agency does not meet the requirements of this section of the criteria. The Agency must provide exhibits AA, DD, EE, and Z referenced in the narrative as types of information reviewed for faculty qualifications and alternate credentialing by the Agency for analysis.
- **Section 602.16(a)(1)(v)**—The Agency does not meet the requirements of this section of the criteria. The Agency must provide exhibits V5 and V5a referenced in the narrative to demonstrate examples of the documents reviewed in relation to this standard for the compliance certification of the Department Selected Institution for analysis.
- **Section 602.16(a)(2)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to the full cycles of review, including the agenda referenced in the narrative reflecting the institutions waiving their five month response time for review; and of the institutions referenced in the analyst uploaded document from the agency File Review response, indicating the candidate and initial institutions reviewed in conjunction with Agency policies and procedures during the recognition period.
- **Section 602.17(b)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the Policy on Documenting Alternative Approaches to Core Requirement 3.1.b; Orientation for Leadership Teams for Institutions beginning Reaffirmation; and the documentation from the Annual Meeting pertaining to student learning, referenced in the original narrative, for the record and to demonstrate compliance.
- **Section 602.17(e)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the Handbook for the Committees on Compliance and Reports referenced in the original narrative and cited in the agency response, for the record and to demonstrate compliance.
- **602.18(b)(2)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the Standing Rules referenced in the original narrative for the record and to demonstrate compliance.
- **Section 602.18(b)(3)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide sample decisions letters of adverse action taken against an institution.

- **Section 602.18(b)(5)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to provide the complete report template cited in narrative and a completed Report for the Candidacy Committee for analysis and the record.
- **Section 602.19(b)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to still provide exhibit BB30, the screenshots of the agency webpages where information about the various institutional reviews are found for the record. The Agency needs to also provide the omitted evidence regarding the process cited within the original submission and Agency response for the screening of data and critical indicators related to the financial profile submitted by an institution annually, for analysis; and explain the relevance of exhibit BB45 in relation to the aforementioned annual screening process. Lastly, the Agency must provide the Board Actions cited within the original submission indicating the review and determinations of Monitoring Reports reviewed within one year by the C&R Committee if the institution is found non-compliant with any of the Principles of Accreditation.
- **Section 602.21(a-b)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide exhibits CC3 and CC5 cited in the original narrative and agency response for analysis and the record.
- **Section 602.22(a)(1)(i)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the full cycle of review, including the application/prospectus, correspondence, and decision letter, of approvals for each type of substantive change reviewed during the recognition cycle. The Agency needs to also provide the written notification of the Board’s actions on Substantive Changes cited in the original narrative and referenced in the Agency response as evidence. In addition, the Agency needs to clarify the discrepancies within the narrative and the annual report regarding the Substantive Change numbers. Finally, the Agency must provide the file review documentation listed in the narrative for analysis.
- **Section 602.22(a)(1)(ii)(G-H)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the final decision letter of the substantive change cited in exhibits DD33. The Agency also needs to explain the inclusion and relevance of the agency correspondence of an institution unaffiliated with the substantive change merger documents within exhibit DD20.
- **Section 602.22(a)(2)(i-ii)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide a narrative response and evidence of its compliance with this criterion with regards to the approval of substantive change identified in section §602.22 (a)(1)(ii)(J); or amend agency policies and procedures to reflect the inclusion of this portion of the criteria.
- **Section 602.23(b)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to still provide additional examples of third-party comments received and reviewed by the agency during the recognition period to conclude the file review required by

the new regulations that became effective July 1, 2020. In addition, additional examples of third-party comments as part of the file review is noted in the Accreditation Handbook revised 2020.

- **Section 602.23(d)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide evidence of the Department Selected Institution’s Disclosure statement for analysis and the record and to demonstrate compliance.
- **Section 602.23(f)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to still provide the full cycle of review for the institutions listed within the file review documentation to demonstrate implementation of preaccreditation standards, policies, and procedures related to the criteria to conclude the file review required by the regulations effective July 1, 2020.
- **Section 602.24(c)(4)**—The Agency does not meet the requirements of this section of the criteria. The Agency needs to still provide documentation of notifications to recognized agencies during the recognition period for analysis of the criteria and to conclude the file review required by the regulations effective July 1, 2020.
- **Section 602.24(c)(5-6)**—The Agency does not meet the requirements of this section of the criteria. The Agency still must demonstrate with documentation the Teach-Out Agreement requirements of 602.24(c)(6) of the criteria; or amend Agency policies and procedures to reflect the inclusion of the Teach-Out Agreement requirements for school closures, pursuant to the regulations, effective July 1, 2020, to demonstrate compliance with the criteria. The Agency also needs to provide the Florida Memorial Teach-Out Plan cited in the file review documentation for additional analysis of the criteria.
- **Section 602.24(c)(7-10)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the Concordia College Alabama Teach-Out Agreement and the 3 additional examples from 2019-2021 cited within the file review documentation for additional analysis of the criteria.
- **Section 602.24(e)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide examples of the review of transfer of credit policies during the recognition period for the for the institutions cited within the file review documentation for additional analysis.
- **Section 602.26(a)**—The Agency does not meet the requirements of this section of the criteria. The Agency still needs to provide the email to agencies exhibit cited in the original narrative and requested in the draft staff analysis to demonstrate written notice of its accrediting decisions are provided to authorized agencies for analysis and the record.
- **Section 602.26(e)**—The Agency does not meet the requirements of this section of the criteria. The Agency must provide the Bennet College notification for the institution/program comments

(or documentation of a response opportunity) to the required entities within 60 days after the decision cited in the file review documentation for additional analysis of the criteria.

- **Section 602.27 (a)(5-6),(b)**—The Agency does not meet the requirements of this section of the criteria. The Agency must provide exhibits A, A1, UU, FF10 and AA9 referenced in the narrative, along with the screenshots cited in the narrative. In addition, the Agency needs to still provide the relevance of exhibit 163 in the original narrative. Lastly, the Agency still needs to provide examples of the review required in 602.27(b) to conclude the file review.

Areas of Substantial Compliance

Department staff and NACIQI also recommended a monitoring report, to be submitted in 12 months, to review criteria that SACSCOC was in substantial compliance with to confirm that full compliance had been achieved. Specifically, Department staff and NACIQI recommended findings of substantial compliance for the following criteria, and recommended the actions necessary to achieve compliance:

- **Section 602.22(c-d)**— The Agency needs to provide evidence of the substantive change reviews for one of each type of substantive change request made during the current recognition period omitted from the file review documentation for additional analysis.
- **Section 602.22(f)(1)**— The Agency must provide a monitoring report with documented evidence of the full review of a Substantive Change Committee visit referenced in the narrative for analysis.
- **Section 602.24(b)**—The Agency must provide a monitoring report evidencing the full cycle of review for Miami International University cited within the file review documentation for additional analysis of the criteria and to conclude the file review required by the regulations effective July 1, 2020.
- **Section 602.26(b)**—The Agency must provide a monitoring report containing missing exhibits FF14, FF16, and FF 17A-C, referenced in the narrative, for additional analysis.
- **Section 602.26(c)**—The Agency must provide a monitoring report demonstrating adherence to the Policy on Disclosure of Accrediting Documents and Actions, Board of Trustee actions/decisions of adverse actions within the stated timeframe of twenty fours for the December 2022 and June 2023 Board Meetings, along screenshots of the posted date of when these meeting decisions are made available on the Agency website. The Agency must also provide the additional file review documentation cited within the analysis, pursuant to the requirements of the regulations effective July 1, 2020, within the aforesaid monitoring report.
- **Section 602.26(d)**—The Agency must provide a monitoring report demonstrating adherence to the Policy on Disclosure of Accrediting Documents and Actions, Board of Trustee actions/decisions of adverse actions within the stated timeframe of twenty fours for the December 2022 and June 2023 Board Meetings, along screenshots of the posted date of when these meeting decisions are made available on the agency website.

- **Section 602.28 (b)**—The Agency must provide a monitoring report with examples of Agency action taken in the event an institution was not in compliance with State requirements; clarification on the inclusion of the Federal Student Aid (FSA) correspondence submitted within this section of the file review; and examples of a review conducted by the Agency in the event that another recognized accrediting agency took adverse action or placed an institution or program on show cause or probation, or of instances in which, on request, the Agency shared information with other agencies about an institution or program it has taken action against, related to section (d) of §602.28.
- **Section 602.28 (e)**—The Agency must provide a monitoring report with additional explanation for the inclusion of the CAPTE email in relation to the requirement of Agency inquiries during the accreditation or preaccreditation process as to actions taken with respect to the institution or program by States and other recognized accrediting agencies.

Department staff would initiate a mid-cycle review in accordance with 34 CFR § 602.33 if the monitoring reports did not demonstrate the Agency 's compliance.

Additional Issues of Concern

As required, I considered the full record, which included the Agency’s petition, the final staff report from Department staff, and the transcript of the Agency’s appearance before NACIQI on July 21, 2022. Two additional issues were discussed at length in third party comments and the NACIQI meeting that are not adequately addressed by the record: processes for filing complaints of institutional noncompliance, and the transition from a for-profit to not-for-profit institution by one of the institutions you accredit.

The questions by Mr. Shireman at the NACIQI meeting (*see, NACIQI Transcript, Day 3, page 210 et seq.*) highlight the challenges faced by individuals attempting to file complaints about institutional noncompliance with SACSCOC. Complaints were rejected for seemingly procedural or administrative shortcomings by the individuals attempting to file, rather than any finding by the Agency that the institution in question was in compliance. As part of the compliance report process, I ask that you revisit Mr. Shireman’s questions, the evidence in the record, and your own internal procedures for the handling of complaints alleging institutional noncompliance. Please include an analysis of whether your internal processes for handling complaints are appropriately weighted to balance the need to avoid frivolous complaints with the potential for procedural and administrative hurdles to undermine individuals’ efforts to call potential areas of institutional noncompliance to your attention, showing how the Agency’s procedures comply with sections 602.16(a)(1) and 602.23(c).

I also ask that you respond to the concerns raised by Mr. Shireman at the NACIQI meeting (*see, NACIQI Transcript, Day 3, page 218, et seq.*) with respect to SACSCOC’s oversight of the potential conflicts of interest and tax issues surrounding the transition from the for-profit Keiser University to the not-for-profit Everglades College and University. Please provide: (1) information about your procedures for monitoring institutions undergoing such transitions and addressing conflicts of interest, and how those procedures are consistent with the monitoring requirements under section 602.19 and substantive change requirements under section 602.22; (2) how those procedures and standards were applied with respect to Keiser University; and (3) how they have been used in other circumstances.

Determination

After careful consideration of the applicable law and regulations and the record before me, I concur with the Department staff and NACIQI's recommended findings of noncompliance and substantial compliance identified above, and, accordingly, I find that SACSCOC must submit a compliance report addressing the criteria for which it has been found in noncompliance, above, and in the additional two areas with respect to the filing of complaints and monitoring identified above, no later than 12 months from the date of this letter, and a monitoring report addressing the criteria for which it has been found in substantial compliance, above, no later than 12 months from the date of this letter. Subject to the submission of these compliance and monitoring reports, and review of those reports, I renew SACSCOC recognition as an accreditor of degree-granting institutions of higher education consistent with the scope identified below, for a period of four years.

Scope of Recognition: The accreditation and pre-accreditation ("Candidate for Accreditation") of degree-granting institutions of higher education in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia, including the accreditation of educational programs offered via distance and correspondence education within these institutions. The accreditation status of these institutions and their recognition extends to the SACSCOC Board of Trustees, Executive Council, and the Appeals Committee of the Collegiate College Delegate Assembly on cases of initial candidacy or initial accreditation and for continued accreditation or candidacy.

I trust that SACSCOC will be able to come into full compliance with the criterion cited above by the deadline, and document compliance in its compliance report within 30 days thereafter. I also look forward to engaging with the materials provided in response to the additional issues identified above at that time. However, I wish to remind you that if SACSCOC does not come into full compliance with the criteria identified above, the Department may be compelled to limit, suspend, or terminate SACSCOC's recognition. Such action is required because of section 496(l) of the Higher Education Act, a provision added in 1998, that requires the limitation, suspension, or termination of any agency found to be either in noncompliance with the criteria for recognition or ineffective in its performance with respect to those criteria. Alternatively, the law allows the agency to be given up to 12 months to come into compliance. If the agency fails to come into compliance within the specified time frame, the law requires termination of the agency's recognition, unless it determined that the time frame for coming into compliance should be extended for good cause. The period the Department is providing in this letter for achieving compliance within the criteria cited above constitutes the maximum time frame (12 months) that the law allows you to correct the deficiencies noted in the Department staff analysis and identified by NACIQI.

Sincerely,

Jordan Matsudaira
Deputy Under Secretary

cc: Dr. Rebecca Maloney, Chair, Board of Trustees
Ms. Rosalind Fuse-Hall, Director
Dr. Alexi Matveev, Director