

CAEP HANDBOOK: GUIDANCE ON SELF-STUDY REPORTS FOR ACCREDITATION OF ADVANCED-LEVEL PROGRAMS

Based on the *Standards for Advanced-Level Programs*
Adopted by the CAEP Board of Directors, June 2016
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This Handbook is a **pre-publication** and should **not** be used as an official document to prepare for an accreditation site visit. CAEP invites feedback that can be sent to training.questions@caepnet.org by October 23, 2017. The final and official document will be released on October 26, 2017.

1140 19th Street, NW Suite 400
Washington, DC 20036
caepnet.org

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CAEP HANDBOOK: GUIDANCE ON SELF-STUDY REPORTS FOR ACCREDITATION OF ADVANCED-LEVEL PROGRAMS

CAEP STANDARDS AND EVIDENCE FOR ADVANCED-LEVEL PROGRAMS

CAEP Standards: The Backbone of Accreditation

This *CAEP Handbook* explains and interprets the Council for the Accreditation of Educator Preparation (CAEP) Standards for Advanced-Level Programs, together with evidence examples and question prompts for self-study reports. Like its companion for initial preparation, it is intended to inform educator preparation provider (EPP) teams who conduct portions of an EPP's accreditation self-study and prepare the self-study report. The question prompts should assist EPP leadership in their reflections on the provider's successes and on the areas that an EPP should work to improve in relation to the five CAEP Standards. The Appendix includes detailed notes on criteria for site teams and Accreditation Council review panels as they evaluate the evidence that EPP's present in their case for meeting the CAEP Standards. This appendix material will eventually be combined into a larger document together with guidelines used by the CAEP Accreditation Council in reaching its decisions.

This *Handbook* is part of a comprehensive system of guidance and capacity-building support to assist EPPs in making their case for meeting CAEP Standards for Advanced-Level Programs. Supplementary information, including the CAEP Policy Manual (July 2017) and other resources further explicate CAEP policies, procedures and processes. Through CAEP conferences, presentations and online communications, CAEP gathers and incorporates feedback from the field into the guidance documents. Additional resources are available to providers on the CAEP website, through the weekly announcements and communications to EPPs.

CAEP's accreditation standards and their components flow from three principles. First, there must be solid evidence that the provider's completers are competent in their specialty field. Second, there must be solid evidence that the provider's faculty and clinical educators create practical experiences that effectively prepare specialized practitioners for work settings. Third, there must be solid documentation that a culture of evidence continuously supports quality enhancements of the EPP's professional preparation programs.

A. Scope

In August 2013, CAEP formally adopted rigorous standards and evidence expectations for initial teacher preparation. In June 2016, the CAEP Board of Directors adopted complementary standards for advanced preparation of professional educators and defined the scope of these standards.

ADVANCED-LEVEL PROGRAMS

Advanced-level programs are defined by CAEP as educator preparation programs at the post-baccalaureate or graduate levels leading to licensure, certification, or endorsement. Advanced-level programs are designed to develop P-12 teachers who have already completed an initial preparation program, currently licensed administrators, other certificated (or similar state language) school professionals for employment in P-12 schools/districts. These programs are submitted to CAEP using the [CAEP Standards for Advanced-Level Programs](#). For an EPP with advanced-level programs only, or both initial- and advanced-level programs, a single self-study report is submitted for review. For an EPP with

advanced-level programs only, or both initial- and advanced-level programs, a single self-study report is submitted for review; however, there are two distinct sections within the self-study report to address either the initial- or advanced-level programs, with the exception of Standard 5, which encompasses all levels of educator preparation that a provider offers.

The Accreditation Council reviews the accreditation documents for each EPP and makes accreditation decisions for the EPP at the initial- and advanced-levels. Although one self-study report is submitted, the Accreditation Council makes two separate decisions. There is one decision at the initial-level and one at the advanced-level with areas for improvement and stipulations assigned (as appropriate) at each level.

ADVANCED-LEVEL ADD-ON PROGRAMS

Add-on programs are designed for educators who hold valid teaching licensure and are seeking to add additional teaching field(s), and for programs that lead to licensure, but for which the licensing authority (e.g., state or country) does not require completion of an internship for eligibility.

Add-on programs do not lead to a degree, but may lead to a certificate. Add-on programs require a licensure examination or an assessment of candidate proficiency to understand and apply knowledge and skills in the specialty licensure area that provides access to employment in a P-12 setting.

Add-on programs will be reviewed under CAEP Standard A.1, component A.1.1, and require the EPP to submit evidence of candidate content knowledge documented by state licensure test scores or other proficiency measures.

*ADVANCED-LEVEL PROGRAMS **NOT** REVIEWED BY CAEP INCLUDE THE FOLLOWING:*

1. Advanced-level degree program not specific to the preparation of teachers or other school professionals for P-12 schools/districts.
 - a. Any advanced-level, non-licensure degree programs, including those specific to content areas (e.g., M.A., M.S., Ph.D.).
 - b. Educational leadership programs not specific to the preparation of teachers or other school professionals for P-12 schools/districts.
2. Advanced-level programs already approved by another national accreditor recognized by either the Council for Higher Education Accreditation (CHEA) or the United States Department of Education (USED).

CAEP focus note: Interpreting Inclusion/Exclusion and Submission Requirements

Programs that meet the definition of advanced-level programs or advanced-level add-on programs are subject to review. All programs that lead to licensure are to be included. For included programs, the evidence submission requirements vary based on whether an internship is required (i.e., advanced-level program) or not (i.e., advanced-level add-on program).

Any program that does not meet the definition of either an advanced-level program or advanced-level add-on program (i.e., does not lead to licensure) is not to be included in the self-study report, will not be reviewed by the CAEP-appointed site team, and will not be included in/covered by any accreditation decision from the Accreditation Council.

Providers with programs that are accredited by another CHEA- or USED-recognized accreditor (e.g., such as those listed [here](#)) are not barred from pursuing CAEP accreditation for those programs if desired. Providers can do so by submitting evidence for a full review; these programs cannot submit proof of other accreditation to achieve partial exemption from some CAEP standards

while undergoing review for other CAEP standards. Providers may entirely exclude the programs from review by submitting proof of the other accreditation in the self-study evidence; This submission serves to verify that the absence of data on the program is not an omission. These programs will not be considered under the umbrella of CAEP accreditation.

B. Preparing For and Writing the Self-Study Report

The self-study report is the mechanism through which an EPP evaluates its programs as well as the report that documents its results. It is the process for providers to demonstrate how they are meeting each of the five CAEP Standards. CAEP offers the following suggestions for how a provider *might* proceed to conduct its self-study report process in relation to the CAEP Standards. An EPP will engage collaboratively in considerable work prior to developing the narrative for the self-study report, outlining their program and compiling the evidence in support of sufficiently meeting the five CAEP Standards.

B.1 Conducting self-studies

- 1. Review.** Study and understand the 2016 *CAEP Standards for Advanced-Level Programs*, including the accompanying components. Use the CAEP explanations and guidelines in this document, refer to the glossary for definitions, and access the website (www.caepnet.org) for the most up-to-date guidance on the evidence for the self-study report.
- 2. Inventory available evidence.** Consider developing an inventory of the evidence currently used on candidate and completer performance and on other CAEP requirements. Note what evidence is relied upon and used, what is not available or used, and what needs to be collected.
- 3. Gather information, categorize and prepare evidence to be uploaded, and draft tables to be completed.** Invest time in examining the evidence thoroughly. CAEP suggests that the provider begin to categorize its evidence into the standards and components. Information that will eventually appear in the self-study report includes the following: (a) the provider overview, (b) evidence and summary statement for each standard where the provider makes the case that the standard has been met, (c) responses to previously cited areas for improvement, if any, and (d) evidence and summary statement on the integration of cross-cutting themes. Information is also requested in the overview section the programs offered by the provider and the institutional structure.
- 4. Analyze and interpret the evidence and take stock.** Analyze and interpret the evidence in relation to the *CAEP Standards for Advanced-Level Programs*. Meet with stakeholders, including P-12 districts and candidates, to review and seek feedback on what was learned from the evidence and how this evidence will guide continuous improvement efforts.
- 5. Formulate summary statements.** Draft a set of statements that makes clear what the provider believes it accomplishes with regard to the CAEP Standards and its two crosscutting themes. These statements should be consistent with public statements of the provider's quality and the performance of its candidates. In addition, statements should be linked to the provider's evidence, including assessments and results.
- 6. Draft and submit the self-study report.** From the evidence and information collected, and conversations conducted, compile a complete draft of the self-study report, including evidence and summary statements. Review the draft with stakeholders, revise as needed, and upload the

final version into CAEP's Accreditation Information Management System (AIMS). Evidence should be tagged to the appropriate standard(s), component(s), and crossing-cutting themes, as well as to quality indicators.

B.2 Writing self-study reports

These notes represent an accumulation of conventions and suggestions that CAEP has accumulated through its accreditation experience, including extensive conversations with EPPs whose faculty are compiling self-study reports. They relate to interpretation of "examples of evidence" that appear in the *CAEP Handbook* and other resources, and to expectations for assembling evidence and framing compelling arguments that standards are met.

The focus note box, below, explains how the "examples" in the *CAEP Handbook* should be interpreted.

CAEP focus note: Examples of Evidence

The types of evidence described in this *Handbook* are intended only as examples. Providers are welcome to employ different measurements from those described here and to select the ones they believe will make the strongest case that the EPP has met each standard.

The provider is responsible for showing that it has addressed the intent of the CAEP standard or component in an equally effective way.

Regardless of which measures are used, providers must demonstrate the quality of the data, including its reliability and validity (minimally content validity in the context of the CAEP Standards they are to inform. All evidence **must be** tagged to a specific CAEP standard and component.

This second focus note box, below, describes the essence of the "writing to standards" task.

CAEP focus note: Writing to Standards

Providers assemble the evidence applied for each standard and present their case holistically, demonstrating that key concepts in the standard are met. The components following each standard and provide additional details that help EPP faculty interpret the intent and scope of the standard.

EPPs assemble their case for a standard, and write their summary statement; they select evidence they believe will best document their case that the standard is met; and they determine how evidence relevant to additional details from components are weighted and woven into the summary statement. The narrative should not be a rewording of the standard statement or a provider's assertion unsubstantiated by data. Submission of raw data is insufficient to show that standards are met; all data must be appropriately analyzed and significance interpreted.

For Advanced-Level Programs, the EPP's case that Standards 3 and 4 are met requires explicit evidence that components A.3.2, A.4.1, and A.4.2 are met. For EPPs submitting advanced preparation programs only, CAEP also requires EPPs to provide explicit evidence that components A.5.3 and A.5.4 are met as part of the documentation for Standard 5. For EPPs submitting both initial and advanced-level preparation programs, see "Special Note" under

B.3 Building the case that a standard is met

The EPP self-study report constitutes an assembly of compelling evidence, making the case that standards are met and there is evidence that components A.3.2, A.4.1, A.4.2, A.5.3, and A5.4 are met.

The case should do the following:

- Frame the argument (i.e., what is the EPP claiming it has achieved with respect to the standard or required evidence for a component).
- Describe the data sources used to support the argument (see *CAEP Framework for EPP-Created Assessments* for key features of measures to discuss).
- Explain why the data are credible indicators for the standard or of required evidence for a component. This includes discussing qualities of good evidence outlined in the *CAEP Evidence Guide* (such as reliability and validity) and describing methods of data analysis/evaluation.
- Present the results in a way that aligns with the standard. [Note: Since data collected for EPP purposes likely exceeds what is relevant for CAEP accreditation, please provide direct evidence only and omit extraneous results.]
- Draw a conclusion about the extent to which the evidence/results support the argument that the standard is met.
- Discuss the implications of the findings for subsequent action by the provider.
- Discuss the provider's completed, ongoing, and/or planned uses of data for continuous improvement.

B.4 General guidance for use of data in self-study reports

There are some general guides about use of data and presentation of evidence that CAEP considers "general rules" for evidence. The theme of each of these guidance sections appears throughout the sufficiency criteria detailed in the Appendix. Their purpose is to help EPP faculty share a common understanding about uses of evidence, and to ensure fairness and consistency in accreditation reviews conducted by CAEP site teams.

About relevance of evidence

- **KEY CONCEPTS OF STANDARDS**—The self-study report should address, with evidence, the key concepts in each standard. [Note: underlying concepts are further elaborated on under each standard.]
- **PHASE-IN PLANS**—Phase-In Plans describe evidence that is planned and developing, and are judged as if they were evidence. The detailed standards narratives that follow below and the Appendix sufficiency criteria specify places where plans are an appropriate option. The *CAEP Guidelines for Plans* describe criteria for evaluating plans. See Phase-In Schedule in Appendix B for academic years when this applies for advanced-level preparation.

About data quality

- **TAGGING DATA QUALITY INFORMATION**—Information about the quality of each item of evidence used in the self-study report to document accomplishments for each standard must be tagged to the appropriate standard and any relevant component (in addition to A.5.2) so that it will be easy for reviewers to locate.
- **UNIFORM NAMES FOR TAGGED EVIDENCE**—Items uploaded to the AIMS evidence room (i.e., self-

study evidence) must be cited in the narrative using the same name as that listed in the description field in the evidence room.

- **QUALITY OF ASSESSMENTS**—EPP-created assessments must meet or exceed the CAEP Sufficient Level as defined in the *CAEP Evaluation Framework for EPP-Created Assessments*.
- **PERFORMANCE ON ASSESSMENTS**—Performance averages are at or above acceptable levels on the EPP scoring guide for EPP-created assessments.

About data sufficiency

- **THREE CYCLES OF DATA**—At least three cycles of data must be submitted and analyzed. If a revised assessment is submitted with less than 3 cycles of data, data from the original assessment should be submitted along with an explanation of how the revised assessment improves upon the prior assessments (tag this explanation to A.5.2 and A.5.3).
- **SEQUENTIAL CYCLES OF DATA**—The reported cycles of data must be sequential and be the latest available. As a general rule, CAEP expects self-study reports to make the provider’s case based on trends derived from at least three points, or “cycles,” during which the provider has administered assessments, surveys, or other measures. The frequency would depend on the data set, with some—perhaps gateway measures—administered only once per year or once per cohort of candidates or completers. Other measures might closely monitor progress during preparation more frequently. In either case, three cycles will help to affirm trends as well as the status of the phenomenon under investigation. There may be situations when only two or even one data point is available. This is especially likely when new assessments are under development or when an assessment is modified, and the provider initiates a new data collection series within a few years of the next site visit. Both CAEP and the provider should consider this circumstance as evidence of continuous improvement.
- **TRIANGULATION OF DATA**—Because all data have limitations, one means to moderate the limitations is to draw on multiple sources of data in framing the case that each standard or required component is met. Multiple sources allow providers to “triangulate” data—helping to document different aspects of a facet of preparation and to enrich analyses through indications of convergence in cases where findings are mutually reinforcing.
- **COMPARISONS, CONFIRMING AND CONFLICTING EVIDENCE**—The EPP analysis of data/evidence includes identification of trends/patterns, comparisons, and/or differences. The EPP should highlight confirming and conflicting findings from data. When possible, providers should make comparisons between their data and any existing benchmarks (e.g., cut scores), normative comparisons to peers (e.g., pass rates across EPPs), or performance standards (e.g., competency requirements to garner “proficient” ratings on internship evaluations). These final steps generate a context for considering the implications of findings for program-related decisions and continuous improvement.

About analysis of data

- **DISAGGREGATING STANDARD A.1 DATA BY SPECIALTY FIELD**—For Standard A.1, all data must be disaggregated by specialty field area (see Policy 5.08 in the *CAEP Accreditation Policy Manual*, July 2017). The review of data at this level is required as part of the overall accreditation decision. Disaggregation helps to identify noteworthy variations that could provide targets for continuous

improvement efforts or may provide evidence of consistency across specialty field areas within the EPP. Providers should examine the data for patterns, such as variations over time or after changes to the program or context. These monitoring actions are key functions of the quality assurance system referenced in A.5.1 and feed into additional aspects of Standard A.5.

- **USE OF PROGRAM REVIEW REPORTS**—Also, for Standard A.1, program review results from specialized professional association (SPA) reviews, state reviews, or program reviews with feedback are summarized and presented in an addendum to the self-study report. These indicate that the EPP’s advanced programs are well-aligned to state, national, or SPA standards.
- **ANALYSIS AND INTERPRETATION OF DATA**—Analyses include identification of trends and patterns in the data, as well as comparisons and/or differences found in multiple measures. Data/evidence supports interpretations and conclusions.

B.5 Addressing cross-cutting themes of diversity and application of technology

The cross-cutting themes of diversity and the application of technology should be addressed only once in a holistic case for each theme (at the end of the self-study report template in AIMS in Section 3) The case for each should draw in evidence used to support specific components in the CAEP Standards that relate to diversity or technology, but could also introduce additional information that is not part of the case for meeting a particular standard or component. Providers should address the two cross-cutting themes of diversity and the application of technology within the self-study report in general, and specifically in the areas listed below.

Diversity

Definition: Incorporation of multiple perspectives, respect and responsiveness to cultural differences, and candidate understanding of their frames of reference.

- Standard A.1
 - Candidates use their professional specialty practices “flexibly to advance the learning of P-12 students toward attainment of college- and career-readiness standards” to enhance “learning and development opportunities” for students.
 - Candidates use "data analysis and evidence to develop supportive school environments."
- Standard A.2
 - Clinical experiences prepare advanced candidates to fulfill their specialized professional roles to the benefit of all students.
- Standard A.3
 - Providers are committed to outreach efforts to recruit a more able and diverse pool of advanced program candidates.
 - Since applicants and candidates for advanced programs come principally from the current pool of America’s teachers, they will reflect the diversity of that pool. Over time, and considering wider national goals to recruit a more diverse teacher workforce that reflects the diversity of our P-12 student population, there should be growing diversity in admitted candidates for advanced preparation.
 - EPPs monitor disaggregated evidence of academic quality and candidate progress for each campus, providing support for candidates who need it.

Technology

Definition: Incorporation of technology to improve the effectiveness of school and district functions, enhance instruction, and manage student and assessment data while engaging students in the applications of technology to learning experiences.

- Standard A.1
 - Candidates apply technology appropriate to their field of specialization.
- Standard A.2
 - Technology-based collaborations may be included in partnerships.
- Standard A.3
 - Candidates can apply technology in appropriate ways to their field of specialization.

B.6 The best data we have are not perfect

Faculty and administrators, state policymakers, and accrediting bodies must all make decisions about the merits of programs. These decisions should be made with the best evidence that can be obtained now, rather than the evidence we might like to have, or that might be available in the future. In its report on evaluating teacher preparation programs, the American Psychological Association wrote: “...decisions about program effectiveness need to be made consistently and fairly. Using the most trustworthy data and methods currently available at any given decision point is the optimal way to proceed.”¹

C. THE CAEP STANDARDS FOR ADVANCED-LEVEL PROGRAMS

The 2016 *CAEP Standards for Advanced-Level Programs*, like those adopted in 2013 for initial preparation, are intended to elevate the bar for the quality of evidence that the EPPs submit for accreditation. Provider evidence must demonstrate that advanced preparation program completers can meet rigorous performance expectations. In doing so, providers will advance the education profession by creating a lever for systemic improvement. This change is both substantive and substantial. The standards:

- Raise entry requirements into advanced preparation specialty fields to attract candidates who have the clear potential for excellence and capacity to be successful in preparation;
- Measure programs by their candidates' and completers' performance in their chosen specialty area; and
- Ensure that completers of accredited programs have the necessary knowledge, skills, and opportunities to develop practical proficiencies in their chosen specialty area.

The *CAEP Handbook: Guidance on Self-Study Reports for Accreditation of Advanced-Level Programs* presents the CAEP 2016 Standards, together with related question prompts and other resources to assist EPPs in conducting self-studies and writing self-study reports. Readers of this *Handbook* will observe, below, that Standard 5 is presented first, with Standards 1-4 following in sequence after that. Standard 5 appears in this position to signify its unique role in CAEP's Accreditation Standards. This standard addresses the EPP's capacity to function effectively and to engage in continuous improvement, not simply one occurrence in each seven-year accreditation cycle. And its purpose is not solely to receive accreditation status, but for the ongoing development and success of EPP and the candidates it serves.

An effective quality assurance system (QAS) has multiple capabilities: it houses data gathering; it has capacity to disaggregate, combine, and analyze data; it can provide context for interpreting data by showing relationships with other data; and it can describe any aspect of the EPPs operations, courses, experiences, candidates, and outcomes that its multiple measures cover. The QAS permits information

¹ Worrel, F., Brabeck, M., Dwyer, C., Geisinger, K., Marx, R., Noell, G., and Pianta, R. (2014). *Assessing and evaluating teacher preparation programs*. Washington, DC: American Psychological Association.

to be assembled about which candidates, programs, branches, and/or technology applications have performance characteristics that warrant closer examination, and identifies particular strengths and challenges. The QAS is the heart of effective EPP management because it is how the EPP generates information to evaluate its own progress, answer faculty questions, identify potential improvements, frame appropriate actions, and track the outcomes of changes over time. It enables continuous improvement.

The Standard 5 section that follows contains a chart illustrating functional characteristics of a QAS relative to each CAEP standard. This chart is designed to highlight, for each of CAEP's standards, the inter-dependence of a QAS's capabilities and the sources for evidence that may be assembled to document the CAEP Standards.

The quality assurance and continuous improvement emphasis is consistent with the direction taken by other accreditation bodies. The Council for Higher Education Accreditation (CHEA) sets standards by which CAEP, itself, is recognized. CHEA insists that the CAEP Standards ensure accredited EPPs have "processes to determine whether quality standards are being met." In addition, CHEA calls for CAEP standards on educational quality that respect "the institution's responsibility to set priorities and to control how the institution or program is structured and operates, and that incorporate an awareness of how programs function."

Much of the material in this *Handbook* has been available previously—in earlier handbooks, the *CAEP Evidence Guide*, the rationale sections of the 2013 *CAEP Standards for Initial Licensure Programs*, in *online questions and answers*, and other CAEP resources. Some previously disseminated text (e.g. about writing self-study reports in Section B, above) has been brought together in one place. Appendix A details Evidence Sufficiency Criteria, which have been available in recent CAEPCon presentations. These have evolved from "guidelines for review" to "evaluation rubrics" and now evidence sufficiency criteria over several iterations of CAEP handbooks. EPPs that are familiar with those earlier CAEP sources will find additional modifications in this *Handbook* presentation:

- This *Handbook* is adapted to the specific provisions of the 2016 *CAEP Standards for Advanced-Level Programs*.
- There is more emphasis in Section C on assembling self-study evidence and writing reports at the standards level, and using the components as references that provide additional explanations or interpretations of the standard. Under CAEP Executive Board policy, there are five advanced-level preparation components for which evidence must be provided at a sufficient level.
- There are new standard-by-standard "reflection questions" in Section C, part of CAEP's guides for EPPs preparing to write their self-study cases. These are meant to encourage discussion, collaboration, and consideration of implications around key attributes of each standard—the strengths and challenges the EPP finds in its self-study about each standard; the trends over time and questions about its own performance that the EPP has investigated; and the implications for preparation courses and experiences and continuous improvement.

Section C, the *CAEP Standards for Advanced-Level Programs*, includes:

- The **full text of each advanced-level preparation standard and its accompanying components**,
- A **narrative, underlying concepts and considerations**, that presents the principal concepts and focal points of each standard that providers should keep in mind as they frame their case that the standard is met.
- A **description, evidence examples**, representing the kinds of evidence that could document accomplishments relevant to the standard. These examples list one or more measures/assessments, or provide a description of what the evidence is intended to address. They also

include reference notes for the purpose that the example measures are intended to serve.

- A **statement, reflection questions**, serving as prompts for faculty consideration of the EPP's successes and of features in preparation programs that might be improved, relevant to the CAEP Standards.

To complement Section C, readers will find Evidence Sufficiency Criteria detailed in Appendix A which contains suggestions for contents of the self-study report documentation; describes what site teams will try to establish as they examine the self-study report; specifies criteria that teams will apply in their evaluation of the evidence; and concludes with lists of insufficiencies that can lead to CAEP findings of areas for improvement (AFIs), stipulations, or determining that a standard is not met.

QUALITY ASSURANCE AND CONTINUOUS IMPROVEMENT, CAEP STANDARD A.5

SPECIAL NOTE for EPPs with only Advanced-Level Programs, CAEP Standard A.5

Except for component A.5.4, explained below, the language for Standard A.5 is the same as the language of Standard 5 for initial preparation. CAEP is accrediting an EPP, and an EPP should only respond to Standard 5 once—**not** separately for initial-licensure and for advanced-level programs.

That means, for example:

- When the EPP demonstrates its QAS (for component 5.1), its documentation should include measures used in advanced-level programs along with other multiple measures used in initial preparation.
- When the EPP documents the quality of its data (for component A5.2), it should include measures used in advanced preparation.
- When it documents continuous improvement efforts (for component A5.3), its self-study report should include measures and their use in continuous improvement from advanced preparation programs.
- When the EPP documents stakeholder involvement (for component A5.5), information on advanced preparation should be included along with that on initial preparation.

If, however, an EPP conducts advanced-level programs only, then it would document its performances for A5.1, A5.2, A 5.3, and A5.5 for those programs alone.

Note that for component A.5.4, the standards for advanced preparation include additional words not found in the initial standards to clarify the intent. The measures to be reported in self-study reports are, explicitly, EPP measures for advanced preparation completion rates, licensure/certification rates, employment rates in the field of specialty preparation, and consumer information such as places of employment, retention in the field of preparation, leadership roles in schools, and salaries. This language is intended to separate the program measures already included in Standard 4 from the annual EPP reporting measures, leaving those for program “outcomes” as the focus for A.5.4.

CAEP STANDARD A.5: Provider Quality Assurance and Continuous

Improvement — *The provider maintains a quality assurance system comprised of valid data from multiple measures, including evidence of candidates' and completers' positive impact on P-12 student learning and development. The provider supports continuous improvement that is sustained and evidence-based, and that evaluates the effectiveness of its completers. The provider uses the results of inquiry and data collection to establish priorities, enhance program elements and capacity, and test innovations to improve completers' impact on P-12 student learning and development.*

Quality and Strategic Evaluation

A.5.1 The provider's quality assurance system is comprised of multiple measures that can monitor candidate progress, completer achievements, and provider operational effectiveness. Evidence demonstrates that the provider satisfies all CAEP Standards.

A.5.2 The provider's quality assurance system relies on relevant, verifiable, representative, cumulative, and actionable measures, and produces empirical evidence that interpretations of data are valid and consistent.

Continuous Improvement

A.5.3 Evidence Required for this Component—The provider regularly and systematically assesses performance against its goals and relevant standards, tracks results over time, tests innovations and the effects of selection criteria on subsequent progress and completion, and uses results to improve program elements and processes.

A.5.4 Evidence Required for this Component—Measures of completer impact, including available outcome data on P-12 student growth, are summarized, externally benchmarked, analyzed, shared widely, and acted upon in decision making related to programs, resource allocation, and future direction. Outcomes include completion rate, licensure rate, employment rate in field of specialty preparation, and consumer information such as places of employment and salaries.

A.5.5 The provider assures that appropriate stakeholders, including alumni, employers, practitioners, school and community partners, and others defined by the provider are involved in program evaluation, improvement, and identification of models of excellence.

Underlying concepts and considerations

Standard 5 occupies a pivotal position in the CAEP Standards. It describes the capacity of the EPP to reach its mission and goals through purposeful analysis and use of evidence, and it provides access to evidence that informs all other CAEP standards. This dual function is described in the rationale for Standard 5 of the 2013 *CAEP Standards for Initial Preparation*, from which the paragraph below is excerpted:

Program quality and improvement are determined, in part, by characteristics of candidates that the provider recruits to the field [i.e., Standard A.3]; the knowledge, skills, and professional dispositions that candidates bring to and acquire during the program [i.e., Standard A.1]; the relationships between the provider and the P-12 schools in which candidates receive clinical training [i.e., Standard A. 2]; and subsequent evidence of completers' impact on P-12 learning and development in schools where they ultimately teach [i.e., Standard A.4]. To be accredited, a

preparation program must meet standards on each of these dimensions and demonstrate success in its own continuous improvement efforts.

Effective organizations use evidence-based quality assurance systems and data in a process of continuous improvement. These systems and data-based continuous improvement are essential foundational requirements for CAEP accreditation. The self-study report provides an opportunity for the EPP to describe how well its quality assurance system is working in terms of responding to questions about the effectiveness of preparation and the EPP's use of that capacity to investigate innovations and inform continuous improvement.

Every provider has a set of procedures, processes, and structures-reporting lines, committees, offices, positions, policies-to ensure quality in hiring, admissions, courses, program design, facilities, and the like. It is the faculty's way to ensure that it has, for example, an appropriate curriculum, faculty, candidates, or program design. In an effective modern education organization, these procedures and structures are supported by a strong and flexible data generation and accessing capacity that—through disaggregation of data by demographic groups and individual preparation programs, different modes of delivery, and different campuses—can answer questions about how well the EPP's mission is accomplished and its goals met. That same system can serve, as well, to provide evidence and complete analyses of it for accreditation purposes.

Provider evidence for Standards A.1 through A.4 constitutes a significant demonstration of the capabilities and performance of the quality assurance system. Additional and unique evidence for Standard A.5 unifies and gives purpose to evidence relevant to previous standards; it includes documentation of *how* the provider collects, monitors, reports, and uses data.

Standard A.5 focuses on the extent to which the leadership and management of educator preparation providers use quality assurance systems to support continuous improvement. The standard is written as a way to adapt principles stated in the Baldrige Education Criteria that successful education organizations follow (emphasizing measurement of operations and results), and that the Carnegie Foundation for the Advancement of Teaching has created as “improvement research” in educational organizations. Those principles give particular weight to maintaining a quality assurance system and to using the output from that system for purposes of continuous improvement:

- The quality assurance system handles multiple measures, monitors candidate progress, the achievements of completers, and the operational effectiveness of the provider.
- The “multiple measures” are comprehensive, purposeful, and coherent.
- The provider routinely constructs new measures if needed, investigates existing measures, and uses data from measures to ensure that the QAS is relying on relevant, verifiable, representative, cumulative, and actionable measures.
- The provider uses data regularly. The EPP assesses performance in relation to its goals and standards; follows results over time; conducts tests of changes made in courses, selection, or clinical experiences; studies natural variation across the different preparation programs it offers; and then uses the results to improve program elements to judge its progress and status. Finally, the provider involves stakeholders in evaluating its effectiveness, generating improvements, and identifying models to emulate.

Evidence examples for Standard A.5

Meeting Standard A.5 involves providing evidence of a functioning QAS. The chart below contains quality indicators related to EPP program management and operations associated with each CAEP standard. These illustrate the dependent relationship of evidence for Standards A.1 through A.4 on the

capabilities of the EPP’s quality assurance system. Of course, these are not the only indicators a provider could chose to examine, nor are they a required set for CAEP accreditation. The chart is intended to clarify the difference between performances or outcomes in each standard, and the aspects of program management that allow for the development, monitoring, and review of evidence related to CAEP accreditation. The indicators refer to systems, processes, and practices that would be consistent with the current Evidence Sufficiency Criteria that are detailed in the Appendix.

If an EPP meets Standard A.5, it has a system in place that facilitates assembling of evidence to document that all CAEP standards are met. If it meets all of the standards, it has effectively employed the data generated by its QAS to make the case that those standards are met.

Quality Assurance System (QAS) Indicators
Standard A.1
There is a functioning process in place for developing and revising assessments of candidate knowledge, skills, and dispositions.
The candidate knowledge, skills, and dispositions that are assessed align with state and national or association standards for educators.
There is a functioning data/record management system in place for recording, storing, and retrieving data on candidate knowledge, skills, and dispositions .
There is a system in place to collect, store, and review data on candidates’ practical application of professional knowledge and skills in field settings.
There is a functioning process in place for regularly reviewing and monitoring candidate progress and performance.
Standard A.2
There is a functioning mechanism in place whereby the EPP and clinical sites collaborate to determine the terms, structure, and content of field experiences hosted at the partner site.
EPPs and their partners collaborate on candidate evaluation tools and processes.
EPPs and clinical partners regularly discuss the terms, structure, and content of field experiences hosted at the partner site.
Clinical partners have a mechanism for providing feedback to the EPP on patterns in candidate strengths and needs and providing input on potential program enhancements .
There is a functioning mechanism to ensure that clinical placements occur in diverse settings . [Note: diversity is not limited to race/ethnicity.]
There is a functioning mechanism to manage the attributes of field experiences to ensure that advanced-level candidates have opportunities to practice and develop proficiencies relevant to specialty field, including experiences in addressing problem-based tasks characteristic of their field.
Standard A.3
There is a mechanism in place to manage recruitment initiatives to attract applicants from groups and in labor-market areas identified in component A.3.1.
There is a system in place to collect, store, analyze, and review data relevant to Standard A.3 on applicants, enrollees, and exiting candidates .
Standard A.4
There is processes in place to collect and update contact information for alumni for 3-years post-exit.

Quality Assurance System (QAS) Indicators
There is a functioning process in place for developing and revising measures of advanced-level completers' satisfaction with their preparation.
There is a functioning process in place for developing and revising measures of employers' satisfaction with the completers' preparation and performance.
There is a system in place to collect, store, analyze, and review data on completers that is relevant to Standard A.4.
Standard 5 and A.5
There is a functional process in place to protect curricular integrity .
There is a functional mechanism in place for teaching faculty to collaborate (in-person or virtually, synchronously or asynchronously) to provide feedback and input on candidate learning, the assessment system, and program features, operations, and priorities.
The data system collects and stores information relevant to CAEP's 8 annual outcome measures, and posts them online for public access.
There is a functioning process for publicly sharing outcomes and trends (updated annually) for the eight annual measures.
There is a functioning process for involving diverse stakeholders in decision making, program evaluation, and selection and implementation of improvement initiatives.
Documentation of stakeholder inputs to specific decisions, evaluations, and/or improvement initiatives is stored and accessible.

Examples of evidence to document that the EPP maintains an effective QAS

The evidence is intended to document the capabilities of the provider's QAS (i.e., what it can do). Documentation should show the range and quality assurance processes and measures on which the provider relies:

- A description of how the evidence submitted in Standards A.1-A.4 and other provider data are collected, analyzed, monitored, and reported.
- Evidence of system capabilities including support for data-driven change (e.g., data can be disaggregated by specialty license area and/or candidate level as appropriate), application across and within specialty license areas, and ability to disaggregate data by relevant aspects of EPP management and policy (e.g., usefulness).
- The schedule and process for continuous review, together with roles and responsibilities of system users.
- Provide cross references to evidence documenting Standards A.1 through A.4 as evidence of the capabilities of the QAS.

Examples of evidence demonstrating data quality

The evidence is intended to document that measures are relevant, verifiable, representative, cumulative, and actionable. Documentation indicates:

- Instruments align with construct being measured.
- Scoring of assessment (items) is clearly defined.
- Interpretation of assessment (items) results is unambiguous.
- Data files complete and accurate.
- Data results align with demonstrated quality.
- Follow principles in the *CAEP Evidence Guide* (See *CAEP Evidence Guide*, section 5)
- Convergence (e.g., correlation across multiple measures of the same construct)/appropriate consistency analysis (e.g., inter-rater reliability) conducted accurately.

- Convergence/consistency is of sufficient magnitude and statistically significant, if appropriate.

In addition, the EPP should cross reference information about evidence quality in evidence cited for Standards A.1 through A.4. Those references would include such information as this:

- Description of developmental steps in constructing instruments,
- Empirical/analytical data supporting the use of the instrument for its intended purposes,
- Formal study of the alignment of instruments with their intended goals,
- Implementation procedures and context, and
- Empirical evidence that interpretations of data are consistent and valid.

The interpretation and usage of the evidence is valid or invalid. Providers need to ensure that the evidence collected is likely to be useful about completer effectiveness, as well as aware of what “noise” is associated with these assessments and how to interpret evidence based on this knowledge.

Providers should be moving toward using or gathering data on outcome measures that relate to or predict completer effectiveness.

Examples of evidence demonstrating continuous improvement

Providers document regular and systematic data-driven changes grounded in (a) research and evidence from the field, (b) data analyses and interpretations from the provider’s quality assurance system, and (c) changes linked to the provider’s goals and relevant standards. EPPs present evidence supporting their case that provisions in component A.5.3 are met distinctly from other information presented on meeting Standard A.5 overall.

The examples indicate changes are clearly connected to evidence, that tests of innovations are of appropriate design, and that provider performance is systematically assessed against goals. The tests may be formal studies or informal tests of innovations (e.g., random assignment to experimental and control groups; Plan, Do, Study, Act [PDSA] cycle). Not all changes need to lead to improvement, as CAEP encourages data-driven experimentation, but changes should trend toward improvement. Well-planned tests of selection criteria and each data-driven change to determine whether or not the results of the changes are improvements should include the following:

- Baseline(s),
- Intervention,
- Tracking over time,
- Rationale for conclusions,
- Comparison(s) of results, and
- Next steps that were taken and/or are planned.

Providers descriptions that show appropriate and regular involvement of stakeholders and their active participation in interpretations of data from the QAS and considerations of potential changes, and decision making.

PHASE-IN APPLIES:

- See the *CAEP Guidelines for Plans* for details on the format and content of Phase-In Plans.
- See the *Advanced-Level Programs Phase-In Schedule* for details on the timeline for submitting “plans only,” “plans plus progress” (including expectations for first data collection), and “full data.”

Providers document results from monitoring and using the CAEP 8 Annual Reporting Measures

EPPs present the evidence that component A.5.4 is met distinctly from other information presented on meeting Standard 5 overall. The example measures work together as indicators of EPP performance in relation to candidates/completers. EPPs should document their analysis of outcomes and contextual factors relating to the interpretation of the data. The measures include those described in Standard A.4:

1. Employer satisfaction and completer persistence
2. Completer satisfaction

And they include the following outcome measures for Advanced-Level candidates and completers:

1. Completer or graduation rate,
2. Licensure/certification rate,
3. Employment rate, and
4. Consumer information. [NOTE: CAEP does not use consumer information in accreditation decision making.]

The self-study report would provide analysis of trends, comparisons with benchmarks, identification of changes made in EPP preparation curricula and experiences, how/where/with whom results are shared, resource allocations affected by EPP uses of the information, and indications of future directions.

PHASE-IN APPLIES:

- See the *CAEP Guidelines for Plans* for details on the format and content of Phase-In Plans.
- See the *Advanced-Level Programs Phase-In Schedule* for details on the timeline for submitting “plans only,” “plans plus progress” (including expectations for first data collection), and “full data.”

Self-study reflection questions for Standard A.5

The reflection questions for Standard A.5 differ from those under Standards A.1-A.4 because of the distinctions described above for the purposes of Standard A.5. They are as follows:

- **THE QUALITY ASSURANCE SYSTEM**—How well is the QAS working for the EPP and how do you know? [component 5.1] Is it able to answer faculty questions about the adequacy of candidate preparation in particular areas (e.g., common core state standards, use of data to monitor student progress, creating assessments appropriate for different instructional purposes)? What modifications have the faculty identified and carried out to change or increase the capabilities?
- **DATA IN THE QUALITY ASSURANCE SYSTEM**—What strengths and weaknesses in the QAS do faculty find when they use data and analyses from the system? [component 5.2]. Are the data relevant, verifiable, representative, cumulative, and actionable? Can findings be triangulated with multiple data so they can be confirmed or found conflicting? What investigations into the quality of evidence and the validity of their interpretations does the EPP conduct.
- **USE OF DATA FOR CONTINUOUS IMPROVEMENT**—What is the evidence that the EPP has improved programs in its continuous improvement efforts? [component 5.3] How have perspectives of faculty and other EPP stakeholders been modified by sharing and reflecting on data from the quality assurance system? [component 5.5] What “innovations” or purposeful changes has the EPP investigated and what were the results? [component 5.3]
- **OUTCOME MEASURES**—What has the provider learned from reviewing its annual outcome measures over the past three years? These are the measures in component A.5.4:
 - Licensure rate,
 - Completion rate,
 - Employment rate, and
 - Consumer information such as places of employment and initial compensation (including student loan default rates).

CANDIDATE KNOWLEDGE AND SKILLS, CAEP STANDARD A.1

CAEP Standard A.1: Advanced Preparation Content and Pedagogical Knowledge —

The provider ensures that candidates for professional specialties develop a deep understanding of the critical concepts and principles of their field of preparation and, by completion, are able to use professional specialty practices flexibly to advance the learning of P-12 students toward attainment of college- and career-readiness standards.

Candidate Knowledge, Skills, and Professional Dispositions

A.1.1 *Candidates for advanced preparation demonstrate their proficiencies to understand and apply knowledge and skills appropriate to their professional field of specialization so that learning and development opportunities for all P-12 are enhanced through:*

- *Applications of data literacy;*
- *Use of research and understanding of qualitative, quantitative and/or mixed methods research methodologies;*
- *Employment of data analysis and evidence to develop supportive school environments;*
- *Leading and/or participating in collaborative activities with others such as peers, colleagues, teachers, administrators, community organizations, and parents;*
- *Supporting appropriate applications of appropriate technology for their field of specialization; and*
- *Application of professional dispositions, laws and policies, codes of ethics and professional standards appropriate to their field of specialization.*

Evidence of candidate content knowledge appropriate for the professional specialty will be documented by state licensure test scores or other proficiency measures.

Provider Responsibilities

A.1.2 *Providers ensure that advanced program completers have opportunities to learn and apply specialized content and discipline knowledge contained in approved state and/or national discipline-specific standards. These specialized standards include, but are not limited to, Specialized Professional Association (SPA) standards, individual state standards, standards of the National Board for Professional Teaching Standards (NBPTS), and standards of other accrediting bodies (e.g., Council for Accreditation of Counseling and Related Educational Programs [CACREP]).*

Underlying concepts and considerations

Standard A.1 is constructed around specialized content knowledge and skills for candidates in preparation fields that provide leadership and supporting services in schools and school districts. Evidence should demonstrate that completers are competent and ready to undertake school responsibilities in the specialized areas for which they have been prepared. The standard specifies

generic areas in which candidate performance outcomes should be documented in self-study reports—adapted, as needed, to each field of specialization. The areas include data and research literacy, data analysis, collaborative activities, application of technology, and professional dispositions, laws, and policies.

In addition, Standard A.1 emphasizes rigorous discipline-specific standards underlying advanced preparation. These discipline-specific standards should draw from sources such as Specialized Professional Association (SPA) standards, state standards, standards of the NBPTS, or those of other accrediting bodies (such as CACREP).

Evidence examples for Standard A.1

The provider’s evidence, disaggregated by specialty area, **makes a case for candidate proficiency as defined in the list of skills for advanced specialized fields** from measures such as those listed below. Evidence submissions include copies of the instruments used and the tools (e.g., rubrics) that the provider used for scoring.

This is the primary standard in which EPPs can assemble evidence to demonstrate the competencies of candidates, both during the advanced preparation program and at exit. In its selection of evidence for the listed advanced preparation candidate outcomes, the EPP adapts the generic definitions (e.g., data literacy) to each field. For example, data literacy for a principal might be demonstrated by interpretation of statistical reports or assembling a budget plan, while a candidate for advanced preparation in special education would know which diagnostic instruments are appropriate to employ or how to interpret the scores from those instruments.

These reports can be used to provide evidence for alignment of EPP courses and measures of candidate proficiencies with state or national specialty area standards. Evidence can also include the number of completers who have been board certified or have won awards from specialty area organizations (e.g., [AERA](#), [APA](#), [NAESP](#), [NASSP](#), [ASCD](#)) for accomplishments mentioned in Standard A.1.

The self-study report should include trends and comparisons within and across specialty field area data.

Examples of provider-created measures:

- Action research or a summative project or thesis;
- Survey results from completers and employers;
- Portfolios that capture evidence of proficiencies listed in A.1.1;
- Grades disaggregated by specialty field (for common courses) and/or grades in specialty content courses (for each specialty area);
- Dispositional and professional responsibility measures;
- Problem-based project in conjunction with coursework;
- Problem-based group projects;
- Synthesis and interpretation of research relevant to a specialty specific problem that a completer might find on the job;
- Problem-based project in conjunction with a school or district partner;
- End of key-course tests; and
- Pre- and post-data and reflections on the interpretation and use of data.

Examples of state-created measures:

- Relevant surveys or assessments of completers,
- Legal compliance assessments (e.g., for reporting requirements, ADA/IDEA), and
- Licensure examinations.

PHASE-IN APPLIES:

- See the *CAEP Guidelines for Plans* for details on the format and content of Phase-In Plans.
- See the *Advanced-Level Programs Phase-In Schedule* in Appendix B for details on the timeline for submitting “plans only,” “plans plus progress” (including expectations for first data collection), and “full data.”

Examples of evidence for discipline-specific competence

Evidence, disaggregated by specialty field area, to demonstrate candidate proficiency according to the specialty area, state, and/or other accrediting standards from measures such as the following:

- SPA reports at the advanced level;
- Other specialty area accreditor reports;
- Specialty area-specific state standards achieved OR evidence of alignment of assessments to other state/national/CAEP Standards; and
- CAEP program reviews with feedback.

Self-study reflection questions for Standard A.1

These reflection questions for advanced preparation may help focus the selection of evidence and the EPP inquiry of its defense of Standard A.1:

- **STRENGTHS AND CHALLENGES**—What strengths and areas of challenge have you discovered about candidate content knowledge and skills in their specialty field and their ability to apply that knowledge and skill as you analyzed and compared the results of your disaggregated data by program and by demographics? What questions have emerged that need more investigation? How are you using this information for continuous improvement? Consider, in particular, the development of candidate proficiencies in the listed advanced professional skills in the standard, as adapted to each specialty field:
 - Applications of data literacy;
 - Use of research and understanding of qualitative, quantitative, and/or mixed methods research methodologies;
 - Employment of data analysis and evidence to develop supportive school environments;
 - Leading and/or participating in collaborative activities with others such as peers, colleagues, teachers, administrators, community organizations, and parents;
 - Supporting appropriate applications of appropriate technology for their field of specialization; and
 - Application of professional dispositions, laws and policies, codes of ethics and professional standards appropriate to their field of specialization.
- **TRENDS**—What trends have emerged as you compared program and demographic data about candidate content knowledge and skills required for each specialty field and their applications across evidence sources and programs? What questions have emerged that need more investigation? How are you using this information for continuous improvement?
- **IMPLICATIONS**—What implications can you draw, or conclusions can you reach across evidence sources about candidate content and pedagogical knowledge and its applications? What questions have emerged that need more investigation? Improvement? How have data-driven decisions on changes been incorporated into preparation?

CLINICAL PARTNERSHIPS AND PRACTICE, CAEP STANDARD A.2

CAEP Standard A.2: Advanced Preparation Clinical Partnerships and Practice

The provider ensures that effective partnerships and high-quality clinical practice are central to preparation so that candidates develop the knowledge, skills, and professional dispositions appropriate for their professional specialty field.

Partnerships for Clinical Preparation

A.2.1 Partners co-construct mutually beneficial P-12 school and community arrangements, including technology-based collaborations, for clinical preparation and share responsibility for continuous improvement of advanced program candidate preparation. Partnerships for clinical preparation can follow a range of forms, participants, and functions. They establish mutually agreeable expectations for advanced program candidate entry, preparation, and exit; ensure that theory and practice are linked; maintain coherence across clinical and academic components of preparation; and share accountability for advanced program candidate outcomes.

Clinical Experiences

A.2.2 The provider works with partners to design varied and developmental clinical settings that allow opportunities for candidates to practice applications of content knowledge and skills that the courses and other experiences of the advanced preparation emphasize. The opportunities lead to appropriate culminating experiences in which candidates demonstrate their proficiencies through problem-based tasks or research (e.g., qualitative, quantitative, mixed methods, action) that are characteristic of their professional specialization as detailed in component A.1.1.

Underlying concepts and considerations

High-quality clinical practice is a unique and critical feature for both initial and advanced preparation programs. Standard A.2 provides an opportunity for the EPP to demonstrate that its partnerships with P-12 schools are beneficial to both parties for advanced-level preparation. The provider explains how collaborative partnerships are conducted, monitored, and evaluated, and how these evaluations lead to changes in preparation experiences. The EPP provides examples of beneficial collaboration and how the provider and schools work together. EPPs should document the opportunities for candidates in advanced-level preparation to practice their developing knowledge and skills, and address what faculty have learned from the relationship of culminating experiences with candidate success in problem-based tasks characteristic of their professional specialization.

The partnerships should be continuous and should feature shared decision making about crucial aspects of the preparation experiences and crucial aspects of collaboration among all clinical educators. CAEP's Standard A.2 prompts EPPs to (1) be purposeful in and reflective on all aspects of their clinical experiences for advanced preparation; (2) provide opportunities for candidates to practice the application of course knowledge in a variety of developmental settings; and (3) keep a clear focus on

experiences that will foster proficiencies that are characteristic of their professional specialization and promote authentic applications of the advanced knowledge and skills described in component A.1.1. [NOTE: Clinical educators include all individuals who assess, support, and develop candidates' knowledge, skills, and/or professional dispositions at some stage in the clinical experiences. Clinical educators may be EPP-based, P-12 school-based, central office personnel, community-based, or in any other setting where candidates practice practical application.]

Evidence examples for Standard A.2

The provider documents that the clinical partners probe relationships between specific aspects of clinical experience and the outcomes demonstrated by candidates regarding opportunities for candidates to (1) practice applications of knowledge and skills appropriate to their field of specialization, and (2) demonstrate proficiencies appropriate for their field of specialization, specifically:

- Applications of data literacy;
- Use of research and understanding of qualitative, quantitative and/or mixed methods research methodologies;
- Employment of data analysis and evidence to develop supportive school environments;
- Leading and/or participating in collaborative activities with others such as peers, colleagues, teachers, administrators, community organizations, and parents;
- Supporting appropriate applications of appropriate technology for their field of specialization; and
- Application of professional dispositions, laws and policies, codes of ethics, and professional standards appropriate to their field of specialization.

Evidence should document that both partners share in critical decisions that bear on clinical experiences of candidates.

The provider makes a case that its clinical experiences are effective in preparing candidates for beginning roles in their field of advanced preparation. This demonstration does not involve reiterating performance outcomes submitted under Standard A.1. Instead, it establishes that (or how) the features of the clinical experiences contribute to those outcomes. The evidence might answer questions such as "How does the provider know that the practical activities have appropriate scope and sequence to best promote progressively independent functioning in the specialty area role?" or "What was the effect of changing the duration or order of activities in the sequence?"

Examples of partnership evidence could include:

- Documents showing that the EPP and partner have jointly probed particular aspects of preparation such as depth, breadth, diversity, coherence or duration, or explored attributes that create unique clinical experiences adapted to a particular specialized field;
- Evidence that candidates' performance evaluations during clinical experiences **address content** and **set performance standards** that are both mutually acceptable to providers and partners;
- Evidence that collaborative projects or action research projects inform problems of practice that providers and partners agree are sufficiently authentic to assess readiness for professional practice. The projects could document full or partial positive impact on the performance of parties directly affected by the candidate's interventions or on the larger culture of a P-12 setting; and
- Documentation of appropriate uses of technology for the candidate's future role.

Examples of clinical evidence could include:

- Charts illustrating the variety of clinical experiences for each advanced specialty field, and across all advanced specialty fields, by breadth, depth, duration, and coherence of the series of

opportunities candidates have to develop and practice applying a range of content knowledge and skills to practical challenges in their specialty area.

- Artifacts or completed assignments that would be reflective of an on-the-job task in the specialty field, such as preparation of a budget for a school principal, a briefing for a superintendent on the adequacy of special education services available in the community, or an analysis of opportunities for different configurations of technology applications in a school.
- Evidence mapping the developmental trajectory of specific practical knowledge and skills as candidates progress through courses and the clinical experiences embedded within or external to the courses. For example, an investigation into whether/how often research activities in courses and/or work as a research assistant leads to competence in designing an original project that is implemented during an internship and/or accepted for conference presentation or publication in the specialty area.
- Evidence that candidates evaluate their preparatory activities for clinical practice (e.g., coursework, acculturation) as relevant and appropriately calibrated to the demands of their clinical experiences. Relevance could be investigated in relation to candidates' preparation to meet specific challenges in a setting or general problems of practice endorsed by clinical partners or other stakeholders. Calibration could be investigated in relation to selected **levels of contact** or prior experience with practical skills leading up to clinical experiences (e.g., exposure, familiarity, knowledge, scaffolded practice, integrated understanding, competent autonomy, mastery).

PHASE-IN APPLIES:

- See the *CAEP Guidelines for Plans* for details on the format and content of Phase-In Plans.
- See the *Advanced-Level Programs Phase-In Schedule* in Appendix B for details on the timeline for submitting “plans only,” “plans plus progress” (including expectations for first data collection), and “full data.”

Self-study reflection questions for Standard A.2

These reflection questions for advanced preparation may help focus the selection of evidence and the EPP inquiry of its defense of Standard A.2:

- **STRENGTHS AND CHALLENGES**—What strengths and areas of challenge have you discovered in your clinical experiences and in your partnership arrangements as you analyzed and compared the results of your disaggregated data by program and by demographics? What questions have emerged that need more investigation? How are you using this information for continuous improvement? For example:
 - How do clinical partners co-construct mutually beneficial P-12 school and community arrangements, including technology-based collaborations, for clinical preparation and share responsibility for continuous improvement of candidate preparation?
 - What are the mutually agreeable expectations for candidate entry, preparation, and exit to ensure that theory and practice are linked, to maintain coherence across clinical and academic components of preparation, and to share accountability for candidate outcomes?
 - How do clinical partners co-select, prepare, evaluate, support, and retain high-quality clinical educators, both provider- and school-based, who demonstrate a positive impact on candidates' development and P-12 student learning and development?
 - What are the multiple indicators and appropriate technology-based applications used to establish, maintain, and refine criteria for selection, professional development, performance evaluation, continuous improvement, and retention of clinical educators in all clinical placement settings?

- How does the provider work with partners to design clinical experiences of sufficient depth, breadth, diversity, coherence, and duration to ensure that candidates demonstrate their developing effectiveness and positive impact on all students' learning and development?
- How are clinical experiences, including technology-enhanced learning opportunities, structured to have multiple performance-based assessments at key points within the program to demonstrate candidates' development of the knowledge, skills, and professional dispositions (as delineated in Standard 1) that are associated with a positive impact on the learning and development of all P-12 students?
- **TRENDS**—What trends have emerged as you compared program and demographic data describing clinical experiences across evidence sources and programs? What questions have emerged that need more investigation? How are you using this information for continuous improvement?
- **IMPLICATIONS**—What implications can you draw or conclusions can you reach across evidence sources about your school/districts partnerships and your clinical experiences? What questions have emerged that need more investigation? Improvement? How have data-driven decisions on changes been incorporated into preparation?

CANDIDATE QUALITY, SELECTIVITY, AND PROGRESS, CAEP Standard A.3

Standard A.3: Advanced Preparation Candidate Quality and Selectivity —

The provider demonstrates that the quality of advanced program candidates is a continuing and purposeful part of its responsibility so that completers are prepared to perform effectively and can be recommended for certification where applicable.

Admission of Diverse Candidates Who Meet Employment Needs

A.3.1 The provider sets goals and monitors progress for admission and support of high-quality advanced program candidates from a broad range of backgrounds and diverse populations to accomplish their mission. The admitted pool of candidates reflects the diversity of America's teacher pool and, over time, should reflect the diversity of P-12 students. The provider demonstrates efforts to know and addresses community, state, national, regional, or local needs for school and district staff prepared in advanced fields.

Candidates Demonstrate Academic Achievement and Ability to Complete Preparation Successfully

A.3.2 Evidence Required for this Component - The provider sets admissions requirements for academic achievement, including CAEP minimum criteria, the state's minimum criteria, or graduate school minimum criteria, whichever is highest and gathers data to monitor candidates from admission to completion. The provider determines additional criteria intended to ensure that candidates have, or develop, abilities to complete the program successfully and arranges appropriate support and counseling for candidates whose progress falls behind.

The CAEP minimum criteria are a college grade point average of 3.0 or a group average performance

on nationally normed assessments, or substantially equivalent state-normed or EPP administered assessments, of mathematical, verbal, and written achievement in the top 50 percent of those assessed. An EPP may develop and use a valid and reliable substantially equivalent alternative assessment of academic achievement. The 50th percentile standard for writing will be implemented in 2021. The CAEP minimum criteria apply to the group average of enrolled candidates whose preparation begins during an academic year.

EPPs must continuously monitor disaggregated evidence of academic quality for each branch campus (if any), mode of delivery, and individual preparation programs, identifying differences, trends, and patterns that should be addressed.

Selectivity During Preparation

A.3.3 The provider creates criteria for program progression and uses disaggregated data to monitor candidates' advancement from admissions through completion.

Selection at Completion

A.3.4 Before the provider recommends any advanced program candidate for completion, it documents that the candidate has reached a high standard for content knowledge in the field of specialization, data literacy and research-driven decision making, effective use of collaborative skills, applications of technology, and applications of dispositions, laws, codes of ethics, and professional standards appropriate for the field of specialization.

Underlying concepts and considerations

For advanced preparation, Standard A.3 focuses on the need for providers to recruit and develop a diverse and strong pool of applicants who can be successful in completing the specialized program. The pool of applicants is, in most instances, the existing teacher workforce. Over time, and considering wider national goals to recruit a more diverse teacher workforce that reflects the diversity of our P-12 student population, there should be growing diversity in admitted candidates for advanced preparation.

The EPP's responsibility begins with its admissions functions and places emphasis on admitting candidates who "meet employment needs"—that is, for in-demand positions in the education workplace (component A.3.1). Candidates demonstrate academic achievement and ability to complete preparation successfully with minimum criteria for GPA or a group average performance on nationally- or substantially equivalent state-normed assessments (component A.3.2). EPPs also monitor the progress of all candidates (components A.3.2 and A.3.3) and provide "support and counseling for candidates whose progress falls behind" (components A.3.1 and A.3.2). Before candidates conclude their preparation, EPPs document that they have knowledge and skills appropriate for advanced preparation in their field of specialization. These include content knowledge, data literacy and research-driven decision making, effective use of collaborative skills, and applications of technology, dispositions, laws, codes of ethics, and professional standards relevant to their specialty (component A.3.4 and also Standard A.1).

Evidence examples for Standard A.3

The Standards for Advanced Preparation do not call for a "recruitment plan" as the Standards for Initial Preparation do. EPPs are expected, however, to have an "admissions plan" for advanced programs that admit candidates they believe will be successful in completing the preparation program and reflect

increasing diversity over time. EPPs should monitor employment trends and have a working knowledge, from their school partners and others, about employment needs so that candidates are admitted to fields in which there are employment opportunities. The suggested measures provide a basis for EPPs to monitor the results of their admission practices and criteria and then evaluate the association of those measures with the progress of candidates through their program and after completion. They also provide a basis for EPPs to establish that the criteria and practices are reasonable given the supports available to candidates. [NOTE: EPP self-study reports need not repeat any evidence that is included in their documentation for Standard A.1; they can simply cross-reference it for their summary statement on Standard 3.]

Examples of admissions planning evidence include:

- Documentation that the provider periodically examines the employment landscape—to identify shortage areas, openings, forecasts, and related information—in the community, state, regional, or national market for which EPPs are preparing completers. An appropriate plan should document base points on current measures of (1) academic achievement, (2) diversity, and (3) provider knowledge of employment needs, and include target outcomes for each of five ensuing years.
- Documentation that the EPP monitors annual progress toward admission goals and candidates' continuing progress to completion in their chosen specialty field. Data are disaggregated to describe gender, ethnicity, academic ability, and/or candidate fit for high-need specialty areas or communities and trends are analyzed.
- Admissions data are disaggregated for enrolled candidates by (1) relevant demographics such as race/ethnicity, SES, and sex, and (2) branch campuses (if any), mode of delivery, and individual programs.

Evidence from admissions and/or candidate academic proficiency criteria:

- **Evidence is required** to document the use of admissions criteria that result in yearly averages for GPA or achievement test scores that meet CAEP's minimum criteria described in component A.3.2, but also including their own criteria "intended to ensure that candidates have, or develop, abilities to complete the program successfully." EPPs present the case for meeting this required component distinctly from other information presented on meeting Standard 3 overall. Specifically, examples include:
 - Admission criteria for GPA and results;
 - Admission criteria for normed tests and results;
 - EPP criteria created for interviews or other admission procedures together with results;
 - Performance on qualifying exams;
 - Assessments of writing ability;
 - Assessments of any of the advanced-level professional skills described in Standard A.1.1, adapted to the field of specialization: data and research literacy, data analysis, collaborative activities, application of technology, and professional dispositions, laws, and policies; and
 - Data that monitor the percentage of a class cohort that completes preparation each year.
- Evidence for components A.3.1 and A.3.2 might also include documentation from performance reviews, remediation efforts, and/or provisions illustrating that the EPP sets goals for candidate support and monitors progress toward goals of providing sufficient support to candidates to facilitate successful program completion.

Examples of monitoring candidate progression:

Some measures of candidate progression are an important means of monitoring the path to completion. Progress monitoring involves at least two evaluations/reviews of candidate competencies during the program. Ideally, these would occur at two points after admission but

before the final review at exit, but the format of mid-point and end-point review is not inherently unacceptable. These monitoring evaluations do not have to follow a repeated-measures design. While they could assess the same competency targets at different points in time, the evaluations could, alternatively, assess distinct content that is aligned to expected competencies at the specific point in the program when the evaluation occurs. More specifically, examples include:

- Assessments used at key points during the program (e.g., phases/stages, checkpoints);
- Content knowledge and dispositions assessments; these could be administered serially (in any order) or in parallel;
- Demonstration of evolving technology integration into practice; this could repeatedly be assessed with the same tasks and criteria for competence, or with different tasks or criteria at different points in the program; and
- Case studies demonstrating candidate development of abilities in any of the advanced-level professional skills listed in A.1.1: data and research literacy, data analysis, collaborative activities, application of technology, and professional dispositions, laws, and policies.

Examples of exit performance:

The EPP should ensure that candidates at exit have opportunities to demonstrate that they can perform effectively on tasks that are representative of those they might perform in their field of specialization after employment:

- Authentic problem-based experience and
- Dispositional/ethics assessments.

Phase-In Plans:

- See the CAEP *Guidelines for Plans* for details on the format and content of Phase-In Plans.
- See the *Advanced-Level Programs Phase-In Schedule* for details on the timeline for submitting “plans only,” “plans plus progress” (including expectations for first data collection), and “full data.”

Self-study reflection questions for Standard A.3

The EPP should reflect on:

- **STRENGTHS AND CHALLENGES**—What strengths and areas of challenge have you discovered as you analyzed and compared the results of your disaggregated data on candidate quality, recruitment/admissions, and quality monitoring by program and by demographics? What questions have emerged that need more investigation? How are you using this information for continuous improvement? More specifically:
 - What are the criteria for program progression and how does the provider monitor candidates' advancement from admissions through completion?
 - How does the provider analyze the evidence to indicate candidates' developing content knowledge and skills in their specialty field and the integration of technology as appropriate to the specialty field?
 - How does the provider document that the candidate has reached a high standard for specialty content knowledge in the fields where certification is sought?
 - How does the provider document that the advanced level candidate understands the expectations of the profession—including codes of ethics, professional standards of practice, and relevant laws and policies—before recommending the candidate for licensure?
- **TRENDS**—What trends in candidate quality, recruitment and admissions practices, and monitoring of candidate progress have emerged as you compared program and demographic data across evidence sources and programs? What questions have emerged that need more

investigation? How are you using this information for continuous improvement? For example: What are the provider's plans and goals to recruit and support completion of high-quality candidates from a broad range of backgrounds and diverse populations to accomplish their mission?

- What are the admission requirements?
- What are the criteria for program progression and how does the provider monitor candidates' advancement from admissions through completion?
- How does the provider:
 - Ensure that the admitted pool of candidates reflects the diversity of America's P-12 students?
 - Address community, state, national, regional, or local needs for hard-to-staff schools and shortage fields, currently, STEM, English-language learning, and students with disabilities?
 - Gather data to monitor applicants and the selected pool of candidates?
 - Establish and monitor attributes and dispositions beyond academic ability that candidates must demonstrate at admissions and during the program?
 - Select criteria, describe the measures used and evidence of the reliability and validity of those measures, and report data that show how the academic and non-academic factors predict candidate performance in the program and effective teaching?

What is the provider's evidence that ensures that the average grade point average of its accepted cohort of candidates meets or exceeds the CAEP minimum of 3.0, or that the group average performance on nationally normed ability/achievement assessments is in the top 50 percent from 2016-2018?

- **IMPLICATIONS**—What implications can you draw, or what conclusions can you reach, across evidence sources about candidate quality, recruitment/ admissions, and quality monitoring? What questions have emerged that need more investigation? Improvement? How have data-driven decisions on changes been incorporated into preparation?

SATISFACTION WITH PREPARATION, CAEP Standard A.4

CAEP Standard A.4: Satisfaction with Preparation –

The provider documents the satisfaction of its completers from advanced preparation programs and their employers with the relevance and effectiveness of their preparation.

Satisfaction of Employers

A.4.1. Evidence Required for this Component - *The provider demonstrates that employers are satisfied with completers' preparation and that completers reach employment milestones such as promotion and retention.*

Satisfaction of Completers

A.4.2 Evidence Required for this Component - *The provider demonstrates that advanced program completers perceive their preparation as relevant to the responsibilities they confront on the job and that the preparation was effective.*

Underlying concepts and considerations

Standard A.4 addresses the **results** of preparation in terms of the satisfaction of completers and employers. That focus is different from the emphasis on initial preparation on P-12 student learning and observations/evaluations of teacher effectiveness. At the advanced preparation level, there is not a rich conceptual approach for that kind of performance evaluation nor are there commonly employed measures that might serve as models. Components A.4.1 and A.4.2 examine satisfaction of completers and employers with preparation when viewed from the perspective of professional practitioners. Data from these kinds of surveys can—if appropriately designed—provide important, highly relevant information for providers to use in analyzing the consequences of their preparation courses and experiences. In addition, information from component A.4.1 on completer persistence and employment milestones can indicate career orientation and paths of progress that providers can use in their future planning and actions.

Evidence examples for Standard A.4

EPPs present an explicit case and evidence for meeting these required components. The standard intends to provide a source of feedback to EPPs about the successes of their candidates, as one source they draw from for continuous improvement. For advanced level candidates, the measures are employer satisfaction (about the completer’s on-the-job performance) and completer satisfaction (with the adequacy of preparation for the situations they face on the job). Employer survey information has frequently been difficult to obtain, but current initiatives by states are changing the consistency and responses to such surveys. The results are particularly useful as tools to evaluate the adequacy of preparation when the questions are specific to aspects of preparation; they are of greater value to providers when results indicate performance in relation to specified benchmarks, norms, and cut scores.

Evidence from employers

Providers submit at least three cycles of data on indicators of employer satisfaction with completers’ preparation from evidence sources such as the following:

- Employer satisfaction surveys (include instrument sampling, response rates, timing);
- Employer satisfaction interviews (include population represented, response rates, instrument content, timing);
- Employer satisfaction focus groups (include population represented, response rates, instrument content, timing); and
- Employer satisfaction case studies (include a description of methodology).

Providers submit at least three cycles of data on employment milestones such as the following:

- Promotion;
- Employment trajectory;
- Employment in high-needs schools; and
- Retention in
 - education position for which initially hired or
 -
 -
 - another education role by the same or a different employer.

Evidence from completers

Completer survey information has frequently been difficult to obtain, but current initiatives by states are changing the consistency and responses to such surveys. The results are particularly useful as tools to evaluate the adequacy of preparation when the questions are specific to particular

aspects of preparation; they are of greater value to providers when results indicate performance in relation to specified benchmarks, norms, and cut scores. EPPs present an explicit case for meeting this required component. Providers submit at least three cycles of data on completers' perception of their preparation as relevant to the responsibilities they confront on the job:

- Completer satisfaction surveys (include instrument, sampling, response rates, timing);
- Completer satisfaction interviews (include population represented, response rates, instrument content, timing);
- Provider focus groups of completers (include population represented, response rates, instrument content, timing); and
- Completer satisfaction case studies (include a description of methodology).

PHASE-IN APPLIES:

- See the *CAEP Guidelines for Plans* for details on the format and content of Phase-In Plans.
- See the *Advanced-Level Programs Phase-In Schedule* in Appendix B for details on the timeline for submitting “plans only,” “plans plus progress” (including expectations for first data collection), and “full data.”

Self-study reflection questions for Standard A.4

EPPs should reflect on:

- **STRENGTHS AND CHALLENGES**—What strengths and areas of the challenge have you discovered about the impact of completers who are employed in the professional education positions for which they were prepared as you analyzed and compared the results of your disaggregated data by program and by demographics? What questions have emerged that need more investigation? How are you using use this information for continuous improvement? More specifically:
 - Using measures that result in valid and reliable data and including employment milestones such as promotion and retention, that employers are satisfied with the completers' preparation for their assigned responsibilities in working with P-12 students?
 - Using measures that result in valid and reliable data, that program completers perceive their preparation as relevant to the responsibilities they confront on the job, and that the preparation was effective?
- **TRENDS**—What trends have emerged about completer performance and completer/employer satisfaction with preparation as you compared program and demographic data across evidence sources and programs? What questions have emerged that need more investigation? How are you using this information for continuous improvement?
- **IMPLICATIONS**—What implications can help you draw, or conclusions can you reach across, evidence sources about completer performance and completer/employer satisfaction with preparation? What questions have emerged that need more investigation? Improvement? How have data-driven decisions on changes been incorporated into preparation?

EVIDENCE SUFFICIENCY CRITERIA

**QUALITY ASSURANCE AND CONTINUOUS IMPROVEMENT
(CAEP STANDARD A.5)**

Note: The EPP is asked to write a holistic response to each standard, not a list of responses to the contents of the rows in the tables, below. The tables for each standard highlight the key language of the standard and organizes the content into rows as a means to provide digestible examples of ways to approach the writing to the standard. The content is elaborated from left to right, not mirrored, so a fuller understanding will be gained as you read across the three columns and down the rows, as well as by reviewing the evaluation guidance provided beneath the table.

Making a Case for Standard A.5: Evidence Evaluation		
<p>STANDARD A.5: Provider Quality Assurance and Continuous Improvement</p> <p>The provider maintains a quality assurance system comprised of valid data from multiple measures, including evidence of candidates’ and completers’ positive impact on P-12 student learning and development. The provider supports continuous improvement that is sustained and evidence-based, and that evaluates the effectiveness of its completers. The provider uses the results of inquiry and data collection to establish priorities, enhance program elements and capacity, and test innovations to improve completers’ impact on P-12 student learning and development.</p> <p><i>Key Language: The provider maintains a quality assurance system comprised of valid data from multiple measures, including evidence of candidates’ and completers’ positive impact on P-12 student learning and development.</i></p>		
In the EPP’s Self-Study Report (SSR)	In the Site Team’s Reports (FFR, SVR)	Evaluation Criteria
<p>The provider describes its quality assurance system (QAS). This includes a description of the EPP’s program management and operations related to meeting the CAEP Standards.</p> <p>The EPP describes the quality management operations that it employs to ensure that it has a sufficient quantity of empirical evidence that is relevant to the CAEP Standards and meets CAEPs expectations for validity, reliability/consistency, verifiability, representativeness,</p>	<p>NOTE: Through its review of evidence the EPP provides for Standard 1-4, members of the CAEP site team will gain considerable personal experience about the characteristics of an EPP’s assessments and other measures and indicators; about the characteristics of the EPP’s assessments; about the capabilities of the EPP’s quality assurance system to access, assemble, and analyze data; about attributes of data quality; and about the EPP’s continuous improvement efforts. These visitor experiences will be brought together and will have a significant influence on the</p>	<p>Written documentation (e.g., website, handbooks, policies, meeting minutes) confirms the EPP’s description of its quality management processes and procedures.</p> <p>Demonstrations of the data management system confirm the EPP’s description of how it stores and accesses data relevant to all CAEP Standards:</p> <ul style="list-style-type: none"> • The EPP can and does regularly use these systems to retrieve data and review results on candidate progress, completer achievements, and operational effectiveness. • The EPP’s assessment and data systems allow for the

<p>cumulativeness, and actionability. In essence, the provider describes how it ensures, in an ongoing way, that when it is time to produce a CAEP SSR, it will possess the kind of data it needs to analyze to write to the CAEP Standards.</p>	<p>team’s perceptions about capabilities of the EPP’s QAS and the credibility of data included in that system.</p> <p>The site team examines the description of the QAS and verifies that it describes the way in which the EPP manages and evaluates itself, not the way in which it evaluates candidates or completers.</p> <p>The team ensures that the description provides an accurate representation of the program’s assessment system, data management system, internal review processes, and relations with stakeholders.</p>	<p>collection, storage, and analysis of data from multiple sources.</p> <p>Interviews with stakeholder groups (e.g., faculty, administrators, candidates, completers, mentor/cooperating clinical educators, employers) corroborate the provider’s descriptions for the quality management indicators relevant to them. For example, clinical educators confirm that they receive the rater training the EPPs described; candidates confirm various progress monitoring activities take place as described; and partners and employers confirm that their feedback/input was used for continuous improvement.</p>
<p>The EPP provides evidence that its QAS involves processes for establishing the validity of each measure it uses/will use to generate evidence for CAEP self-study reports.</p> <p>Content validity (at minimum) was established for multiple measures used to assess candidates and completers positive impact on P-12 student learning and development.</p>	<p>The visiting team verifies that at least 75% of EPP created assessments used in the QAS are scored at the sufficient level on the CAEP Evaluation Framework for EPP-Created Assessments.</p> <p>The team verifies that, across the standards, the EPP’s interpretations of evidence are consistent, accurate, and supported by data/evidence.</p>	<p>The measures used for each standard yield evidence that meets CAEP’s expectations for Evidence Quality (i.e., validity, reliability/consistency, verifiability, representativeness, cumulateness, actionability).</p> <p>EPP-created assessments have established content validity and inter-rater reliability or agreement at .80 or 80% or above.</p> <p>EPP-created surveys ask questions that align to standards.</p>
<p>The EPP provides evidence that its QAS involves an evidence inventory process which establishes that data from multiple high-quality measures are/will be available for analysis and use in program decision making and the SSR.</p>	<p>The site team reviews the evidence inventory chart or tags and verifies that the key language in the standard and required components are addressed using at least three cycles of data from at least two different measures.</p> <p>The site team verifies that at least 75% of EPP created assessments used in the QAS are scored at the sufficient level on the CAEP Evaluation Framework for EPP-Created Assessments.</p>	<p>Evidence/data from a coherent set of multiple measures are used to inform, modify, and evaluate EPP’s operational effectiveness.</p> <p>The measures meet CAEP’s expectations for Evidence Quality (i.e., validity, reliability/consistency, verifiability, representativeness, cumulateness, actionability).</p>

Key Language: The provider's quality assurance system supports continuous improvement that is sustained and evidence-based.		
<p>The EPP provides evidence that its QAS involves a process of regular and systematic review and reflection related to its goals, standards, and innovations.</p> <p>The EPP provides evidence that its review and reflection processes incorporate data and evidence on performance status and progress over time.</p> <p>The EPP provides evidence that it bases program decisions on data and evidence.</p>	<p>The site team examines the review schedules to verify that they are regular (at least annual) and that they address all the main aspects of the goal, standard, or innovation.</p> <p>The team verifies that the review involved examining data on performance status and progress over time.</p> <p>The team verifies that documentation supports the EPP's statements regarding how it used data or evidence to support decision making.</p>	<p>Written documentation (e.g., website, handbooks, policies, meeting agendas, meeting minutes) confirms that the EPP conducts reviews at least annually to evaluate the status and progress of initiatives.</p> <p>Reviews examine all major aspects of the initiative's design using all data available at the time of the review.</p> <p>Program decisions are directly supported by data or are not contradicted by available data or evidence.</p>
<p>Option (See <i>Phase-In Schedule</i> in Appendix B):</p> <p>The provider submits a Phase-In Plan that documents how the EPP will gather the evidence needed to satisfy component A.5.3 and/or A.5.4.</p> <p>The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>.</p>	<p>The site team evaluates the plan using the <i>CAEP Guidelines for Plans</i>. The team describes the extent to which the <i>Phase-In Plan</i> complies with expectations for formatting and content, and is consistent with the timeline in the <i>CAEP Phase-In Schedule</i>.</p>	<p>The plan substantially addresses all criteria in all three categories of the guidelines: Relationship to Standard or Component, Timeline and Resources, and Data Quality.</p> <p>The plan's implementation timeline is consistent with the requirements of the <i>CAEP Phase-In Schedule</i>.</p>
Key Language: The provider's quality assurance system supports evidence-based evaluation of the effectiveness of its completers, and the provider uses the results for continuous improvement.		
<p>The provider collects and uses information about completers' preparedness and performance and to select foci and set get goals for enhancing the EPP's contribution to completer effectiveness:</p> <ul style="list-style-type: none"> • Completer effectiveness is examined in relation to external benchmarks, and • Trends in completer outcome data are analyzed and interpreted appropriately. 	<p>The site team evaluates the strength of the EPP's evidence that it uses completer outcome information for continuous improvement purposes such as in decision making related to programs, resource allocation, and future direction.</p> <p>The team verifies that measures of completer outcomes are summarized, externally benchmarked, analyzed, and shared widely.</p>	<p>Information on the outcome and impact measures is published and updated annually:</p> <ul style="list-style-type: none"> • Evidence that the outcome and impact measures and their trends are posted on the EPP website and in other ways widely shared; • The SSR provides direct access to the published materials (e.g., hyperlinks, copies) and provides evidence of accurate trend analyses and comparisons with benchmarks; and • Program changes and modifications are directly linked to evidence/data with specific examples. <ul style="list-style-type: none"> ○ Planned changes to the program were/are based on outcome data gathered from completers

<p>The EPP’s QAS supports the gathering and reporting of completer outcomes such as completion rate, licensure rate, and employment rate in their field of specialty preparation. Completer outcomes, along with consumer information such as places of employment and salaries, are shared widely.</p>	<p>The EPP posts this information in a location that is easily accessible to stakeholders (e.g., on the EPP website where prospective students can see it along with other prominent information about the program, in a newsletter to the partners).</p>	<p>and/or their employers or data on outcomes such as completion rates, licensure rates, etc.</p> <ul style="list-style-type: none"> ○ Resource allocations correspond to program change initiatives.
<p>OPTION (See <i>Phase-In Schedule</i> in Appendix B): The provider submits a Phase-In Plan that documents how the EPP will gather the evidence needed to satisfy component A.5.3 and/or A.5.4 . The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>.</p>	<p>The site team evaluates the plan using the <i>CAEP Guidelines for Plans</i>. The team describes the extent to which the Phase-In Plan complies with expectations for formatting and content, and is consistent with the timeline in the <i>CAEP Phase-In Schedule</i>.</p>	<p>The plan substantially addresses all criteria in all three categories of the guidelines: Relationship to Standard or Component, Timeline and Resources, and Data Quality.</p> <p>The plan’s implementation timeline is consistent with the requirements of the <i>Phase-In Schedule</i>.</p>
<p>Key Language: The provider uses the results of inquiry and data collection to establish priorities, enhance program elements and capacity, and test innovations to improve completers’ impact on P-12 student learning and development.</p>		
<p>The provider describes the role that inquiry and data play in its continuous improvement process. The inquiry in which the EPP engages includes data and results derived from the self-study process as well as input from appropriate stakeholders such as alumni, employers, practitioners, school and community partners, and others defined by the provider</p>	<p>The site team looks for evidence that the EPP conducts an inquiry to evaluate its current status and research proposed changes to its programs prior to implementation.</p> <p>The team verifies that stakeholders’ feedback and input is sought and incorporated into the evaluation, research, and decision making activities.</p>	<p>EPP identifies at least two examples of input from stakeholders and use of that input.</p> <p>Specific evidence of diverse stakeholder involvement is documented through multiple sources in each area, such as:</p> <ul style="list-style-type: none"> • Decision-making; • Program evaluation; and • Selection and implementation of changes for improvement.

Guidance on Summative Evaluations of the Case for Meeting the Standard

While the site team does not make a recommendation regarding whether the standard is met, the team is tasked with notifying the Accreditation Council when their review and professional judgment suggests that the evidence submitted by the EPP is insufficient to make the case that the standard is met. Depending on the severity of the perceived insufficiency, the site team recommends either an Area for Improvement (AFI) or a Stipulation and provides a rationale. They may cite several potential AFIs or Stipulations in a given standard or a combination of AFIs and Stipulations in the same standard. Below are some of the conditions under which site teams are expected to recommend an AFI or Stipulation.

An Area for Improvement (AFI) is recommended when:

- The majority of EPP-created measures used for evidence of Standard A.5 do not meet CAEP’s sufficiency criteria in the *CAEP Evaluation Framework for EPP-Created Assessments*, and the insufficiencies are not compensated for by proprietary measures included in the evidence suite. [The site team describes the deficiencies as they relate to the evaluation framework for assessments.]
- The QAS is not structured or does not function as described in the self-study report, and its deficiencies impeded the work of the site team.
 - Some site team tasks intended to verify the accuracy of results reported in the self-study report could not be completed with the data or from stakeholders presented by the EPP, or the effort uncovered significant discrepancies between the information available on-site and the results reported in the self-study report.
- Review of available data indicates that the EPP did not provide the most sequential and the most recent data that was relevant to their analysis.
- Some aspects of the EPP’s efforts at continuous improvement are deficient (e.g., inappropriate analysis of the data, failure to test innovations).
- The EPP summarizes data for the 8 annual reporting measures as submitted to CAEP, but fails to provide evidence that they are widely shared.
- Documentation that stakeholders are informed about the EPP’s progress is omitted or perfunctory, as is information that stakeholders participate in consideration of needed improvements.
- One or more of the three components of the phase-in plan for Standard A.5 do not meet criteria in the *CAEP Guidelines for Plans*. For example, under Timeline, the plan will not result in at least one data point in the academic year 2019-2020. [The site team describes the deficiencies in the plan as they relate to the guidelines.]

A Stipulation is recommended when:

- The EPP’s assessment and data systems do not allow for the collection, storage, and analysis of data from multiple sources for all of the CAEP Standards.
- The EPP did not provide empirical evidence that the measures used for each standard yield evidence that meets CAEP’s expectations for Evidence Quality (i.e., validity, reliability/consistency verifiability, representativeness, cumulateness, actionability).

CANDIDATE KNOWLEDGE AND SKILLS (CAEP STANDARD A.1)

Note: The EPP is asked to write a holistic response to each standard, not a list of responses to the contents of the rows in the tables, below. The tables for each standard highlight the key language of the standard and organizes the content into rows as a means to provide digestible examples of ways to approach the writing to the standard. The content is elaborated from left to right, not mirrored, so a fuller understanding will be gained as you read across the three columns and down the rows, as well as by reviewing the evaluation guidance provided beneath the table.

Making a Case for Standard A.1: Evidence Evaluation

STANDARD A.1: Advanced Preparation Content and Pedagogical Knowledge

The provider ensures that candidates for professional specialties develop a deep understanding of the critical concepts and principles of their field of preparation and, by completion, are able to use professional specialty practices flexibly to advance the learning of P-12 students toward attainment of college- and career-readiness standards.

Key Language: Deep understanding of critical concepts and principles of the specialty field.		
In the EPP's Self-Study Report (SSR)	In the Site Team's Reports (FFR, SVR)	Evaluation Criteria
<p>If the SPA program review process is used, the EPP demonstrates that the majority of programs (51% or above) submitted for SPA review up to three years prior to the site visit achieved National Recognition.</p> <p>For program options that received National Recognition with Conditions,² National Recognition with Probation, or Further Development Required, and their revised submissions are still under review by the SPA when the self-study report is due, the EPP discusses in the self-study report how they have addressed the cited conditions and provides evidence that any conditions that are also relevant to the CAEP Standards (e.g., instrument quality) have been addressed.</p>	<p>The site team verifies that a majority (51% or above) of the programs submitted for review achieved National Recognition for the programs submitted for SPA review within three years of the site visit.</p> <ul style="list-style-type: none"> At the time of the formative feedback review or site visit, the site team checks whether the SPA decision has been upgraded to Nationally Recognized. If it has not, the team evaluates the evidence submitted by the EPP that any conditions that relate to CAEP's evidence sufficiency criteria have been resolved. The site team evaluates the EPP's disaggregated Standard A.1 data and evidence through the lens of the General Rules in Section B.4 of this paper and the set of professional skills listed in A.1.1.³ 	<p>A majority (51% or above) of SPA program reports have National Recognition.</p>
<p>If SPA review was not pursued, or the results are not reliable for evidence of alignment to standards, the EPP summarizes results from State Review reports (if available) or selects Program Review with Feedback and builds the strongest case it can that the General Rules and both components of Standard A.1 are met.</p> <p>The EPP's discussion of Standard A.1 provides direct answers to the Specialty Area Questions:</p> <ol style="list-style-type: none"> How have the results of specialty area evidence been used to inform decision making and improve instruction and candidate learning outcomes? 	<p>The site team verifies the rate at which the EPP fulfilled state expectations for advanced programs that underwent State Review.</p> <p>The team confirms that EPP evidence of State Program Review goes beyond a designation of approval to operate and includes a written report of the programs' accomplishments with respect to specific state standards and expected outcomes for advanced programs.</p> <p>If no State Program Review report was submitted as evidence, the team relies on CAEP's Program Review with feedback to evaluate program quality with respect to specialized content and discipline knowledge and skills.</p> <ul style="list-style-type: none"> The site team evaluates the EPP's disaggregated 	<p>All of the advanced programs meet state expectations discussed in the State's periodic review of program-level outcome data, and the EPP provided evidence-based and credible answers to the Specialty Area Questions.</p> <p>All advanced programs that pursued the Program Review with Feedback option meet the criteria specified in Standard A.1 and any applicable state addenda and the EPP provided evidence-based and credible</p>

² Typical categories of conditions listed in the [Guidelines on Program Review](#) for SPAs (p. 68) include: insufficient data to determine if SPA standards are met; insufficient alignment among SPA standards or scoring assessments or scoring guides; lack of quality in some assessments or scoring guides; insufficient number of SPA standards met; and SPA officially set a benchmark on state licensure test(s) that is not met.

³ The General Rules for Standard A.1 are consistent with those related to the citing Conditions in the [Guidelines on Program Review](#) for SPAs (p. 68).

<p>2. What has been learned about different specialty areas as a result of the review of the disaggregated data?</p> <p>3. How do the specialty area data provide evidence for meeting the selected state or national standards?</p> <p>4. How is specialty area evidence aligned with the standards applicable to EPPs in the state?</p>	<p>Standard A.1 data and evidence through the lens of the General Rules for Standard A.1 and the set of professional skills listed in A.1.1.</p> <ul style="list-style-type: none"> The team presents their evaluation of the extent to which the EPP's responses to the Specialty Area Questions are evidence-based and credible. In doing so, the team cites specific information that supports their judgment. 	<p>answers to the Specialty Area Questions.</p>
<p>The provider describes the measures used to assess advanced candidates' thorough understanding of critical concepts and principles in their specialty and demonstrates that the measures meet or exceed the sufficient level in the <i>CAEP Evaluation Framework for EPP-Created Assessments</i>.</p> <ul style="list-style-type: none"> The provider supplies evidence that is disaggregated by specialty area and by the professional skills listed in A.1.1, and presents candidate performance in relation to the performance standard (e.g., passing score). <p>The provider presents evidence that advanced program candidates perform adequately or better on measures of practical application. This evidence can be derived from sources such as key assignments, course-based implementation projects, field-based practical activities, or other competency demonstrations that go beyond recognition and recall to include application/practicable usage of standards-aligned knowledge and skills.</p> <ul style="list-style-type: none"> The provider draws on Program Review results to the extent to which they are applicable and available at the time of SSR submission. <ul style="list-style-type: none"> The provider describes how the results have been used or could be used for continuous improvement. The EPP ensures that the General Rules for 	<p>The site team evaluates the extent to which each of the General Rules for Standard A.1 is met in the EPP evidence (including the SSR, supplemental evidence submitted in response to Formative Feedback, and evidence acquired onsite).</p> <p>The site team evaluates the instruments to verify that they meet CAEPs sufficiency criteria, and verifies that candidate performance is sufficient in relation to performance standards.</p> <ul style="list-style-type: none"> The site team's review of evidence verifies that disaggregated and overall performance supports the conclusion that the EPP's completers competently apply standards-aligned content and discipline knowledge and skills. This includes verifying that all candidates achieved passing scores/ratings by program completion or that those who did not demonstrate standards-aligned competencies were not granted the specialty credential. The team evaluates the accuracy of the EPP's interpretations and conclusions regarding performance sufficiency. The team evaluates the accuracy of the EPP's analytical summary of trends/patterns, comparisons, and/or differences. 	<p>The EPP-created instruments meet or exceed CAEP's sufficiency criteria.</p> <ul style="list-style-type: none"> The EPP's performance standards are not set lower than external benchmarks suggest they should be (e.g., at Developing instead of at Proficient at exit). Raw data from the instruments are in a format conducive to re-analysis (e.g., a spreadsheet, not a PDF). Data from the instruments meet professional research and data analysis standards for reliability or consistency. The EPP selects and defends the choice of at least three of the professional skills stated in A.1.1 that are most critical for the specialized field of preparation. Multiple indicators/measures that are adapted to the generic skills for the professional specialty field are selected for documentation of candidate/completer proficiencies. The EPP disaggregates results by

<p>Standard A.1 guide the presentation of evidence in the SSR.</p> <ul style="list-style-type: none"> ○ The EPP provides the raw data used to generate the results reported in the SSR. 		<p>specialty area.</p> <p>The EPP’s data analysis is sound concerning professional research and data analysis practices.</p> <ul style="list-style-type: none"> • Results show that candidates in each specialty area meet or exceed the reported performance standard for each measure. • The EPP’s interpretation of the results is consistent with the nature and magnitude of their reported findings (e.g., low scores are not interpreted as high scores; large and persistent performance gaps between program areas are not described as reasonable)
<p>OPTION (see phase-in schedule in Appendix B): The provider submits a Phase-In Plan that documents how the EPP will gather the evidence needed to satisfy component A.1.1. The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>.</p>	<p>The site team accepts plans in lieu of data for component A1.1 only.</p> <p>The team evaluates the plan concerning the format and content requirements in the guidelines for plans and prepares an analysis that speaks to the extent to which the plan meets each of the criteria.</p> <p>The team evaluates the implementation timeline concerning the <i>CAEP Phase-In Schedule</i> and indicates whether the plan meets expectations.</p>	<p>The plan substantially addresses all criteria in all three categories of the guidelines: Relationship to Standard or Component, Timeline and Resources, and Data Quality.</p> <p>The plan’s implementation timeline is consistent with the requirements of the <i>Phase-In Schedule</i>.</p>
<p>Key Language: Able to use professional specialty practices flexibly to advance the learning of P-12 students toward attainment of college- and career-readiness standards</p>		
<p>The provider submits evidence demonstrating that advanced candidates understand the learning objectives and performance standards to which P-12 students and personnel are held accountable.</p>	<p>The site team evaluates the extent to which each of the General Rules for Standard A.1 is met in the EPP evidence (including the SSR, supplemental evidence submitted in response to Formative Feedback, and evidence acquired onsite).</p>	<p>The instruments meet or exceed CAEP’s sufficiency criteria.</p> <p>Raw data from the instruments are in a format conducive to re-analysis (e.g., a spreadsheet, not a PDF).</p>

<p>The provider demonstrates that candidates can apply appropriate and varied knowledge and skill to facilitate achievement of these objectives and outcomes in a P-12 environment.</p> <p>The provider describes the measures used to assess advanced candidates' understanding of standards for P-12 students and personnel and demonstrates that the measures meet or exceed the sufficient level in the CAEP Evaluation Framework for EPP-Created Assessments. The provider submits evidence that is disaggregated by specialty area and presents candidate performance in relation to the performance standard (e.g., passing score).</p> <p>The provider presents evidence that advanced program candidates perform adequately or better on measures of ability to use professional specialty practices flexibly to advance the learning of P-12 students toward attainment of college- and career-readiness. This evidence can be derived from sources such as key assignments, course-based implementation projects, field-based practical activities, or other competency demonstrations that go beyond recognition and recall to include application/practicable usage of their knowledge of P-12 standards.</p> <ul style="list-style-type: none"> • The provider draws in Program Review results to the extent to which they are applicable and available at the time of SSR submission. • The provider describes how the results have been used or could be used for continuous improvement. <p>The EPP ensures that the General Rules for Standard A.1 guide the presentation of evidence in the SSR (e.g. quantity of data, quality of data).</p>	<p>The site team evaluates the instruments to verify that they meet CAEP's sufficiency criteria, and verifies that candidate performance is sufficient in relation to performance standards</p> <p>The site team's review of evidence verifies that disaggregated and overall performance supports the conclusion that the EPP's completers understand standards' expected outcomes as they apply to P-12 settings. This includes verifying that all candidates achieved passing scores/ratings by program completion or that those who did not demonstrate these P-12-context-sensitive competencies were not granted the specialty credential.</p> <p>The team evaluates the EPP's interpretations and conclusions regarding performance sufficiency.</p> <p>The team evaluates the EPPs analytical summary of trends/patterns, comparisons, and/or differences in knowledge of standards and outcome objectives applicable to P-12 settings.</p>	<p>Data from the instruments meet professional research and data analysis standards for reliability or consistency.</p> <p>The EPP disaggregates results by specialty area.</p> <ul style="list-style-type: none"> • The EPP's data analysis is sound with respect to professional research and data analysis practices. • Results show that candidates in each specialty area meet or exceed the reported performance standard for each measure relevant to the way in which their specialty area operates in P-12 settings. • The EPP's interpretation of the results is consistent with the nature and magnitude of their reported findings. • The EPPs continuous improvement efforts document efforts to monitor and enhance advanced program candidates' knowledge of standards that affect P-12 contexts and the practice of their specialty in P-12 settings.
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The EPP provides the raw data used to generate the results reported in the SSR.		
The provider describes how the results have been used or could be used for continuous improvement. The EPP ensures that the General Rules in section B.4 of this paper guide the presentation of evidence in the SSR. The EPP provides the raw data used to generate the results reported in the SSR.	The team evaluates the EPP’s interpretations and conclusions regarding performance sufficiency. The team evaluates the EPP’s analytical summary of trends/patterns, comparisons, and/or differences.	The EPP’s interpretation of the results is consistent with the nature and magnitude of their reported findings (e.g., low scores are not interpreted as high scores; large and persistent performance gaps between programs areas are not described as reasonable).

Guidance on Summative Evaluations of the Case for Meeting the Standard

While the site team does not make a recommendation on whether a standard is met or unmet, the team is tasked with notifying the Accreditation Council whether, according to their professional judgment, the evidence submitted by the EPP satisfies the standard’s evidence sufficiency criteria.

If the site team perceives an insufficiency, it is tasked with notifying the Accreditation Council by indicating the affected standard or component and providing a written rationale. Depending on the severity of the perceived insufficiency, the site team recommends either an Area for Improvement (AFI) or a Stipulation (stipulations being more severe). The team may cite several potential AFIs or Stipulations in a given standard or a combination of AFIs and Stipulations in the same standard. Below are some (there may be others) of the conditions under which site teams are expected to recommend an AFI or Stipulation.

An Area for Improvement (AFI) is recommended when any of the following apply:

- Program Review results indicate that **some** of the EPP’s advanced programs are not well-aligned to professional standards and/or performance benchmarks in the field. As a result, **either** the EPP’s expectations for deep understanding of critical concepts and principles **or** candidates’ ability to use professional practices flexibly to enhance P-12 settings or outcomes is below standard.
- The evidence for Standard A.1 does not address all of the professional skills listed in component A.1.1, and/or fewer than three of these skills are assessed for each specialty area using multiple indicators/measures that adapt the generic skills to a professional specialty field.
- The EPP provides limited or no evidence that advanced candidates understand their specialty role in relation to advancing the learning of all P-12 students toward achievement of college- and career-readiness standards. As a result, there is limited or no evidence that candidates are able to use relevant specialty-area practices to promote their attainment flexibly.
- The EPP-created measures of practical application (e.g., field evaluation tools) used for evidence of Standard A.1 do not meet CAEP’s sufficiency criteria. [The site team clearly describes the deficiencies as they relate to the evaluation framework for assessments.]
- Site team tasks intended to verify the accuracy of results reported in the SSR could not be completed using the data provided by the EPP, or the effort uncovered significant discrepancies between the data set(s) and the rates or performance levels reported in the self-study report.
- Review of available data indicates that the EPP did not provide the most sequential and the most recent data that was relevant to their analysis.
- The EPP’s analysis of data/evidence does not identify and discuss trends/patterns, comparisons, and/or differences between programs.
- The EPP’s analysis of data/evidence does not identify and discuss trends/patterns, comparisons, and/or differences over time.

- One or more of the three components of the phase-in plan for Standard A.1.1 do not meet criteria in the *CAEP Guidelines for Plans*. For example, under Timeline, the plan will not result in at least one data point in the academic year 2019-2020. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]

A Stipulation is recommended when any of the following apply:

- The SSR report does not address the key concepts and language of Standard A.1.
- Program Review results indicate that **a majority** of the EPP's advanced programs are not well-aligned to professional standards and/or performance benchmarks in the field. As a result, **both** the EPP's expectations for deep understanding of critical concepts and principles **and** candidates' ability to use professional practices flexibly to enhance P-12 settings or outcomes is below standard despite meeting the EPP's performance criteria.
- There is limited or no evidence for Standard A.1 and no plan for gathering a sufficient quantity of valid and reliable evidence as outlined in the General Rules for the standard and the [CAEP Evaluation Framework for EPP-Created Assessments](#).
 - An insufficient quantity of data is submitted, and the EPP's explanation for the insufficiency is incomplete or inadequate.
 - If the EPP's explanation for the data insufficiency reveals a problem in the EPP's quality assurance system (e.g., lack of stable assessment processes, lack of performance monitoring, poor data management that lead to data losses), this should also be cited as an issue in Standard A.5 with a rationale that explains how it affected evidence for Standard A.1. [The Accreditation Council will decide whether to officially cite either or both of the recommended citations and whether the severity is sufficient to consider either standard unmet.]
 - The majority of EPP-created measures used for evidence of Standard A.1 does not meet CAEP's sufficiency criteria, and the insufficiencies are not compensated for by proprietary measures included in the evidence suite. [The site team clearly describes the deficiencies as they relate to the evaluation framework for assessments].
 - The EPP adapts a proprietary measure for use in its program(s) and does not supply evidence that the adaptation is a valid revision that produces reliable data.
 - None of the three components of the phase-in plan for Standard A.1.1 meet criteria in the *CAEP Guidelines for Plans*. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]
 - Phase-In Plans are submitted for Standard A.1 after the expiration of the period for submitting new plans.
 - Progress on Phase-In Plans for Standard A.1 does not include any data on candidate outcomes.
 - Candidate outcome data submitted to demonstrate progress on Phase-In Plans for Standard A.1 show inadequate performance for the majority of candidates assessed.
- The disaggregated evidence is not provided for each advanced preparation specialty area despite evidence that there were 10 or more candidates or completers across the span of years covered by the self-study report.
- Review of available data confirms **selection bias** in the EPP's data set that is not explained or justified or even recognized, the analysis of which leads to misleading results.
- Candidates perform below the reported performance standard in **both** specialty content knowledge **and** application.
- Candidate performance is severely below standards in either content knowledge or application. [The site team describes how it quantified severity in relation to the performance standard. For example, average performance of the completing cohort is in the lower half of the licensure test score distribution, and there is no plan to improve the EPP's performance.]
- The EPP incorrectly analyzes or interprets data/evidence for Standard A.1 and draws conclusions about accomplishments for Standard A.1 that are not supported by data/evidence.

CLINICAL PARTNERSHIPS AND PRACTICE (CAEP STANDARD A.2)

Note: The EPP is asked to write a holistic response to each standard, not a list of responses to the contents of the rows in the tables, below. The tables for each standard highlight the key language of the standard and organizes the content into rows as a means to provide digestible examples of ways to approach the writing to the standard. The content is elaborated from left to right, not mirrored, so a fuller understanding will be gained as you read across the three columns and down the rows, as well as by reviewing the evaluation guidance provided beneath the table.

Making a Case for Standard A.2: Evidence Evaluation		
<p>STANDARD A.2: Advanced Preparation Clinical Partnerships and Practice The provider ensures that effective partnerships and high-quality clinical practice are central to preparation so that candidates develop the knowledge, skills, and professional dispositions appropriate for their professional specialty field.</p>		
<p>Key Language: <i>Effective partnerships and high-quality clinical practice are central to preparation.</i></p>		
In the EPP's Self-Study Report (SSR)	In the Site Team's Reports (FFR, SVR)	Evaluation Criteria
<p>The provider describes its formal and informal partnerships with entities external to the EPP where candidates fulfill fieldwork requirements of the advanced program.</p> <p>The description clarifies the length of the relationship, how it formed, how it is structured, and the roles and responsibilities of the EPP and each partner.</p> <p>The EPP provides documentation that these partnerships are operational and on how they operate, including evidence of mutually agreed upon expectations for candidate entry, activities, and exit.</p>	<p>The site teams look for evidence of co-construction, shared responsibility, and mutual benefit.</p> <p>The site team looks for evidence of a shared decisions responsibility model that involves activities such as:</p> <ul style="list-style-type: none"> • Collaborative development, review, or revision of instruments and evaluations; • Collaborative development, review, or revision of the structure and content of clinical/practical activities; • Mutual involvement in ongoing decision making about partnership structure and operations; and • Reflection on outcomes from clinical experiences and decisions about changes in them. 	<p>Evidence that P-12 schools and EPPs have both benefitted from the partnership.</p> <p>Evidence that a collaborative process is in place and reviewed at least annually.</p> <p>The EPP shares and uses evidence of candidate performance (such as that provided for Standard A.1) to improve clinical preparation continuously.</p>
<p>Key Language: <i>The clinical experiences foster advanced candidates' development of knowledge, skills, and professional dispositions appropriate for their professional specialty field.</i></p>		
<p>The provider describes the role of clinical practice in the advanced program. This includes a description of campus- and field-based activities that involve practical applications of knowledge and skills with</p>	<p>The site team evaluates the centrality of clinical preparation by identifying the extent to which clinical and practical activities:</p> <ul style="list-style-type: none"> • Are integrated into required courses, 	<p>Evidence documents the relationship between clinical experiences and coursework.</p> <p>Evidence documents that all candidates have active clinical/practical experiences.</p>

<p>realistic populations and/or inauthentic work settings.</p> <p>The provider’s description clarifies the types, number, duration, and goals of required practical and clinical experiences. It also identifies the settings in which advanced candidates gain practical experience applying the professional skills listed in component A.1.1</p>	<ul style="list-style-type: none"> • Provide opportunities to work with the P-12 populations that the specialty area serves (e.g., students, teachers, principal), and • Provide opportunities to work in the types of P-12 settings where credential holders in that advanced specialty area practice (e.g., schools, district offices). <p>The site team also examines the types and duration of activities through which candidates are expected to gain practical experience before program completion.</p> <p>The team looks for quality evidence for clinical preparation, such as:</p> <ul style="list-style-type: none"> • Variety of activities or placements, • Specified goals for activities or placements that are measured and monitored, • Whether the activities promote a progression of skills and responsibility that bridge theory and practice, • How well clinical/practical competencies contribute to whether a candidate completes the preparation program, and • Whether and how partners examine candidate responses to practical and realistic problem-based tasks that are characteristic of the professional specialty. 	<p>The progression of practical/clinical experiences involves opportunities for candidates to observe and implement appropriate and efficient strategies for their fields of specialization.</p>
<p>The provider describes the opportunities that advanced program candidates have to put into practice the specialized content and discipline knowledge contained in the state and/or national discipline-specific standards to which the program is aligned.</p>	<p>The site team’s review of evidence verifies the accuracy of the EPP description of opportunities for standards-aligned knowledge and application via written documentation (e.g., syllabi, assignment instructions) and via corroboration from stakeholders that application activities occur as described.</p>	<p>The program has a substantive practical component that allows advanced candidates to practice applying specialized content and discipline knowledge contained in professional standards for specialty area preparation in the field (i.e., beyond the EPP’s internal culture and expectations).</p>
<p>The provider demonstrates that clinical/practical experiences foster the development of knowledge, skills, and</p>	<p>The site team evaluates evidence that practical and clinical experiences emphasize the application of knowledge, skills, and dispositions that align with SPA, state, or national standards for professional specialties.</p>	<p>The types, number, duration, and goals of required practical and clinical experiences substantially align with standards and</p>

professional dispositions appropriate to the specialty area.	The site team confirms that clinical experiences are differentiated in ways that align with specialty area standards and performance expectations that the EPP discusses in Standard A.1. <ul style="list-style-type: none"> This includes practical experiences using technologies appropriate to candidates' fields of specialization. 	expectations for professional competencies in specialty areas.
The provider demonstrates that clinical/practical experiences address competencies that stakeholder input indicates are critical for success in the P-12 work settings for which the program prepares specialists.	The site team evaluates evidence that stakeholder input is received and reviewed on a regular basis (e.g., at least annually), and is used along with candidate performance data to evaluate the appropriateness and effectiveness of practical/clinical activities.	Document review and interviews with stakeholders substantiate that clinical/practical experiences are meaningfully connected to input from stakeholders with professional responsibilities relevant to the specialty fields for which candidates are being prepared.
The EPP provides evidence that the manner in which advanced candidates' clinical/practical competencies are assessed provides formative feedback on performance that guides candidates toward effective practice as beginning specialists.	The site team reviews the assessments the EPP uses to evaluate clinical/practical performance and confirms that candidates receive formative feedback on performance-based criteria for specialty area knowledge, skills, and professional dispositions.	The EPP uses performance-based criteria to assess candidate competencies during clinical experiences. EPP supervisor and/or P-12 educators provide descriptive feedback to candidates.
OPTION: The provider submits a Phase-In Plan that documents how the EPP will gather the evidence needed to satisfy component A.2.1 and/or A.2.2. <ul style="list-style-type: none"> The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>. 	The site team evaluates the plan using the <i>CAEP Guidelines for Plans</i> . The team describes the extent to which the Phase-In Plan complies with expectations for formatting and content, and is consistent with the timeline in the <i>CAEP Phase-In Schedule</i> .	The plan substantially addresses all criteria in all three categories of the guidelines: Relationship to Standard or Component, Timeline and Resources, and Data Quality. The plan's implementation timeline is consistent with the requirements of the <i>CAEP Phase-In Schedule</i> .

Guidance on Summative Evaluations of the Case for Meeting the Standard

While the site team does not make a recommendation regarding whether the standard is met, the team is tasked with notifying the Accreditation Council when their review and professional judgment suggests that the evidence submitted by the EPP is insufficient to make the case that the standard is met. Depending on the severity of the perceived insufficiency, the site team recommends either an Area for Improvement (AFI) or a Stipulation, and provides a rationale. They may cite several potential AFIs or stipulations in a given standard or a combination of AFIs and Stipulations in the same standard. Below are some of the conditions (there may be others) under which site teams are expected to recommend an AFI or stipulation.

An Area for Improvement (AFI) is recommended when:

- Clinical/Practical experiences are not varied and developmental.
 - The clinical experiences target a very limited number of practical skills with respect to the role/position description of the specialist as described by

stakeholders.

- The clinical experiences do not progress toward independent practice (e.g., the first opportunity for authentic practice is in a full-scale work situation where real P-12 stakeholders are affected).
- Evidence does not document the relationship between clinical experiences and coursework.
- There is limited or no evidence that partnerships involve mutual benefit.
- Site team tasks intended to verify the accuracy of results reported in the SSR could not be completed using the data provided by the EPP, or the effort uncovered significant discrepancies between the data set(s) and the rates or performance levels reported in the SSR.
- Review of available data indicates that the EPP did not provide the most sequential and the most recent data relevant to their analysis.
- One or more of the three components of the Phase-In Plan for Standard A.2 do not meet criteria in the *CAEP Guidelines for Plans*. For example, under Timeline, the plan will not result in at least one data point in the academic year 2019-2020. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]

A Stipulation is recommended when:

- The EPP did not make the case that clinical experiences are central to preparation.
 - Candidates complete the clinical/practical components of the program by fulfilling time requirements rather than meeting performance criteria aligned to professional standards and stakeholder input.
 - Candidates complete the program despite not completing or performing poorly in required clinical/practical activities that test the actionability of their knowledge and skills in realistic settings/situations.
- The types, number, duration, and goals of required practical and clinical experiences do not substantially align with standards and expectations for professional competencies in specialty areas.
- The goals for clinical/practical activities are vague, and the provider cannot describe how or what each experience contributes to candidate development.
 - There's an assumption that a setting will provide the appropriate experiences by being authentic, but minimal or no effort by the EPP to ensure that candidates have a range of experiences that effective professional practice would involve.
- There is evidence that clinical experiences provide limited or no opportunities for candidates to practice developing and improving their professional knowledge, skills, and dispositions through application in authentic settings.
- There is limited or no convincing evidence that the EPP maintains functioning partnerships and regularly reviews the arrangements.
 - There is limited or no evidence that partnerships involve co-construction and shared responsibility.
 - There is limited or no evidence that clinical/practical experiences are meaningfully connected to an input from stakeholders with professional responsibilities relevant to the specialty fields for which candidates are being prepared.
- There is limited or no evidence that the EPP shares candidate performance results with partners and uses evidence of candidate performance (such as that provided for Standard A.1) to improve clinical preparation continuously.
- The EPP does not address the key concepts in A.2 and does not provide a Phase-In Plan that meets the criteria in the *CAEP Guidelines for Plans*.
 - None of the three components of the Phase-In Plan for Standard A.2 meet criteria in the *CAEP Guidelines for Plans*. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]
 - Phase-In Plans are submitted for Standard A.2 after the expiration of the period for submitting new plans.
 - Progress on Phase-In Plans for Standard A.2 does not include any results.

- Results submitted to demonstrate progress on Phase-In Plans for Standard A.2 show inadequate functioning of the partnership or clinical experience.

CANDIDATE QUALITY, SELECTIVITY, AND PROGRESS (CAEP Standard A.3)

Note: The EPP is asked to write a holistic response to each standard, not a list of responses to the contents of the rows in the tables, below. The tables for each standard highlight the key language of the standard and organizes the content into rows as a means to provide digestible examples of ways to approach the writing to the standard. The content is elaborated from left to right, not mirrored, so a fuller understanding will be gained as you read across the three columns and down the rows, as well as by reviewing the evaluation guidance provided beneath the table.

Making a Case for Standard A.3: Evidence Evaluation		
STANDARD A.3: Advanced Preparation Candidate Quality and Selectivity —		
The provider demonstrates that the quality of advanced program candidates is a continuing and purposeful part of its responsibility so that completers are prepared to perform effectively and can be recommended for certification where applicable.		
<i>Key Language: The provider demonstrates that the quality of advanced program candidates is a continuing and purposeful part of its responsibility.</i>		
In the EPP's Self-Study Report (SSR)	In the Site Team's Reports (FFR, SVR)	Evaluation Criteria
<p>The provider presents the admission criteria for advanced programs and the rationale for these criteria.</p> <ul style="list-style-type: none"> • The provider connects admission criteria to qualities of those who complete the program. <p>The provider disaggregates results on the CAEP minimum it selects (GPA or test performance) by admission year for each advanced program for which there are at least 10 candidates enrolled per year.</p> <ul style="list-style-type: none"> • The EPP can aggregate results across years in specialty areas with fewer than 10 admitted candidates and provide the disaggregated data during the site visit. • The EPP can use a different criterion for different specialty areas or candidates (e.g., GPA for some, test performance for others) 	<p>The site team looks for evidence that the EPP has reflected on the criteria it uses to select candidates to admit from the pool of applicants and can justify these criteria based on program demands and student supports. The site team verifies that the CAEP minimum selected by the EPP is met in each academic year for each specialty area.</p>	<p>The provider specifies its requirements for prior academic achievement and other criteria it uses at an entry to ensure that enrolled candidates have or show the potential to develop the abilities needed to complete advanced preparation successfully.</p> <p>These criteria comply with minimum requirements of the EPP's governing body (e.g., IHE, state education department).</p> <p>Disaggregated data on admissions metrics meet the CAEP minimum for GPA (≥ 3.0 average) or test performance ($\geq 50^{\text{th}}$ percentile).</p>

<p>provided one of the CAEP minima be addressed for every candidate.</p>		
<p>The provider submits evidence that it periodically reviews admission criteria to assess their suitability for admitting candidates who will be successful in the program and in gaining employment in the specialty field.</p>	<p>The site team verifies that the EPP reviews admission criteria during the accreditation cycle.</p> <p>The site team verifies that the EPP is aware of employment trends and opportunities in P-12-related settings for completers in the specialty areas in which it offers advanced programs.</p>	<p>EPP demonstrates knowledge of employment opportunities in schools, districts, and/or regions where completers are likely to seek employment and documents the influence of employment opportunities on enrollment patterns.</p> <p>The EPP provides evidence that it takes into account professionally relevant background characteristics (e.g., licensure, P-12 experience) that are likely to impact program performance and employability.</p> <p>If the EPP makes exceptions to its requirements for background characteristics, it describes the candidate supports it provides that address the gaps and promote success in program completion and meeting hiring standards in the specialty area.</p>
<p>The provider presents an admission plan and monitors progress toward its specified goals for admission and support of high-quality advanced program candidates from a broad range of backgrounds and diverse populations.</p> <ul style="list-style-type: none"> The plan identifies any outreach or recruitment efforts on which the provider will rely. <p>The provider presents progress results disaggregated by year.</p>	<p>The site team examines the admission plan for the presence of baseline data, outcome targets, and a monitoring schedule and process.</p> <p>The site team examines progress results for projected trends over time.</p>	<p>A written plan for continuously improving the admitted candidate pool that provides base points and annual monitoring of characteristics related to academic ability, diversity, and employment needs.</p> <p>The EPP's admission goals and enrollment data demonstrate progress from the base point and have moved the provider toward greater candidate diversity and academic achievement.</p>

<p>OPTION: The provider submits a Phase-In Plan that documents how the EPP will gather the evidence needed to satisfy component A.3.1, A.3.2, and/or A.3.3. The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>.</p>	<p>The site team evaluates the plan using the <i>CAEP Guidelines for Plans</i>. The team describes the extent to which the Phase-In Plan complies with expectations for formatting and content, and is consistent with the timeline in the <i>CAEP Phase-In Schedule</i>.</p>	<p>The plan substantially addresses all criteria in all three categories of the guidelines: Relationship to Standard or Component, Timeline and Resources, and Data Quality. The plan’s implementation timeline is consistent with the requirements of the <i>CAEP Phase-In Schedule</i>.</p>
<p>Key Language: The provider’s process for managing advanced program candidate quality results in completers who are prepared to perform effectively and can be recommended for certification where applicable.</p>		
<p>The provider presents its criteria for program progression and disaggregated results on progression for each specialty area. The EPP provides excerpts or copies of the documentation provided to candidates regarding progression criteria and monitoring. The provider presents evidence that candidates meet the EPP’s progression criteria (e.g., the majority of admitted candidates persist in the program and/or graduate).</p>	<p>The site team confirms that the EPP monitors candidate performance at multiple points after admission, ideally at critical points or transition points in the program (e.g., midway, or before internship, or near completion).</p>	<p>Documentation that illustrates how often and when the EPP monitors candidate performance at two or more points after admission. Documents that outline the criteria used to determine satisfactory progress at each monitoring point. Evidence that criteria for progression are shared with candidates. Evidence of a high graduation rate or low attrition rate (disaggregated by specialty area).</p>
<p>The EPP provides evidence that supporting services and counseling are afforded to candidates when needed.</p>	<p>The site team confirms the EPP uses the results of performance/progress monitoring to guide advising and support activities (e.g., referral to student support services, remediation planning, interventions).</p>	<p>Documents outlining the supporting services available to assist advanced program candidates to complete their program, including information provided to candidates on how to access services. Advising or remediation summaries documenting the types of services or support that advanced candidates—particularly those that were struggling at progress checkpoints—have accessed within the EPP and/or the types of interventions the EPP has initiated).</p>

<p>The EPP provides evidence that it has reviewed the performance record of each candidate that successfully completed the program and documented each candidate's attainment of a high standard for:</p> <ul style="list-style-type: none"> • content knowledge in the field of specialization, • data literacy and research-driven decision making, • effective use of collaborative skills, • applications of technology, and • applications of dispositions, laws, codes of ethics, and professional standards appropriate for the field of specialization. 	<p>The site team reviews evidence such as exit clearance documents that show that the listed areas were examined for satisfactory completion at the final checkpoint, prior to endorsing the candidates' eligibility for graduation and/or recommendation for licensure.</p>	<p>Documentation that each candidate that the program recommended for the specialty area credential passed all of the progress monitoring checkpoints or remediated all deficiencies by the final checkpoint.</p>
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Guidance on Summative Evaluations of the Case for Meeting the Standard

While the site team does not make a recommendation regarding whether the standard is met, the team is tasked with notifying the Accreditation Council when their review and professional judgment suggests that the evidence submitted by the EPP is insufficient to make the case that the standard is met. Depending on the severity of the perceived insufficiency, the site team recommends either an Area for Improvement (AFI) or a Stipulation, and provides a rationale. They may cite several potential AFIs or Stipulations in a given standard or a combination of AFIs and Stipulations in the same standard. Below are some of the conditions (there may be others) under which site teams are expected to recommend an AFI or Stipulation.

An AFI is recommended when:

- The provider does not provide a rationale for its admission requirements for academic and non-academic criteria that connect the criteria to qualities of successful completers.
- The provider has a high attrition rate among candidates for whom admission requirements were relaxed.
- The EPP did not provide evidence that it monitors advanced candidates' progress at two or more points after admission.
- The EPP did not provide evidence that it provides supporting services and counseling for candidates when needed.
- One or more of the three components of the phase-in plan for Standard A.3 do not meet criteria in the *CAEP Guidelines for Plans*. For example, under Timeline, the plan will not result in at least one data point in the academic year 2019-2020. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]

A Stipulation is recommended when:

- The provider did not address significant aspects of the standard using relevant measures.
- The provider did not specify its admission requirements for prior academic achievement and non-academic criteria.
- The EPP did not provide three cycles of admissions data.
- The provider did not disaggregate data on admissions data by admission year for each specialty area.
- The EPP admissions evidence falls below the minimum requirements of the EPP's governing body.

- The EPP admissions evidence falls below the “CAEP minimum” criterion for GPA or test performance. [Component A.3.2 is not met.]
- Efforts by the site team to verify the reported results reveal inaccuracies significant enough to lead to a different conclusion regarding whether the CAEP minima are met. [This may be cited in Standard 5.A.5 if a problem in the QAS is the cause.]
- The provider did not provide an admission plan with baseline data and a monitoring plan for tracking progress toward goals of greater academic achievement, candidate diversity, and fulfillment of needs in the P-12 labor market for advanced specialties.
- The EPP did not provide evidence that it reviews candidate progress at least once between admission and program completion.
- Evidence from progress monitoring combined with outcomes reported in Standard A.1 indicates that the EPP recommends advanced program candidates for specialty area credentials although they do not meet the knowledge and performance criteria.
- None of the three components of the Phase-In Plan for Standard A.3 meet criteria in the *CAEP Guidelines for Plans*. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]
- Phase-In Plans are submitted for Standard A.3 after the expiration of the period for submitting new plans.
- Progress on Phase-In Plans for Standard A.3 does not include any results.
- Results submitted to demonstrate progress on Phase-In Plans for Standard A.3 show inadequate outcomes.

SATISFACTION WITH PREPARATION (CAEP Standard A.4)

Note: The EPP is asked to write a holistic response to each standard, not a list of responses to the contents of the rows in the tables, below. The tables for each standard highlight the key language of the standard and organizes the content into rows as a means to provide digestible examples of ways to approach the writing to the standard. The content is elaborated from left to right, not mirrored, so a fuller understanding will be gained as you read across the three columns and down the rows, as well as by reviewing the evaluation guidance provided beneath the table.

Making a Case for Standard A.4: Evidence Evaluation		
STANDARD A.4: Satisfaction with Preparation		
The provider documents the satisfaction of its completers from advanced preparation programs and their employers with the relevance and effectiveness of their preparation.		
<i>Key Language: The provider documents the satisfaction of its completers from advanced preparation programs with the relevance and effectiveness of their preparation.</i>		
In the EPP’s Self-Study Report (SSR)	In the Site Team’s Reports (FFR, SVR)	Evaluation Criteria

<p>The EPP provides results from measures that assess the satisfaction of program completers who completed the program 1-3 years prior to the point when the data are collected.</p> <ul style="list-style-type: none"> This can include alumni who completed the program less than one full year prior to data collection if they have been employed in a position related to their specialty area preparation for at least six months. <p>The EPP describes the methodology of its completer satisfaction study. This includes a discussion of sampling procedures and sample characteristics, data collection procedures and timeline, and data analysis.</p> <p>The EPP examines the results for trends/patterns and differences.</p> <ul style="list-style-type: none"> This can include reviewing results disaggregated by specialty area and/or by work site characteristics for completers in the specialty area (e.g., principals at suburban, inner-city, or charter schools). <p>The EPP reviews the results with stakeholders and considers any indicated changes in preparation experiences.</p>	<p>The site team evaluates the adequacy of the EPP’s documentation which should include the following:</p> <ul style="list-style-type: none"> A description of the system for gathering data, Response rates appropriate for this type of survey and EPP description of characteristics of respondents compared with non-respondes, A description of the representativeness of the sample (which program areas are represented, in what proportion to the program sizes), Data specific to high-need schools, Data specific to specialty field, Comparison points for data, and Evidence that the data are used for continuous improvement. 	<p>Results show that the majority of responding completers report that they were sufficiently prepared for their job responsibilities.</p> <p>The sample is representative of the completer population, or purposive with a plan for expansion toward representativeness over time.</p> <p>The data analysis is appropriate for the data type and quantity.</p> <p>The interpretations and conclusions do not overgeneralize the findings to non-sampled groups of completers.</p> <p>The data and analysis of trends are examined by the EPP and its stakeholders as part of their continuous improvement steps.</p>
<p>OPTION: The provider submits a Phase-In Plan that documents how the EPP will gather the evidence needed to satisfy component A.4.2. The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>.</p>	<p>The site team evaluates the plan using the <i>CAEP Guidelines for Plans</i>. The team describes the extent to which the Phase-In Plan complies with expectations for formatting and content, and is consistent with the timeline in the <i>CAEP Phase-In Schedule</i>.</p>	<p>The plan substantially addresses all criteria in all three categories of the guidelines: Relationship to Standard or Component, Timeline and Resources, and Data Quality.</p> <p>The plan’s implementation timeline is consistent with the requirements of the <i>Phase-In Schedule</i>.</p>
<p>Key Language: The provider documents the satisfaction of its completers’ employers with the relevance and effectiveness of their preparation.</p>		

<p>The EPP provides results from measures that assess the employers' satisfaction with program completers who completed the program 1-3 years prior to the point when the data are collected.</p> <ul style="list-style-type: none"> This can include alumni who completed the program less than one full year prior to data collection if they have been employed in a position related to their specialty area preparation for at least six months. <p>The EPP describes the methodology of its completer satisfaction study. This includes a discussion of sampling procedures and sample characteristics, data collection procedures and timeline, and data analysis.</p> <p>The EPP examines the results for trends/patterns and differences.</p> <ul style="list-style-type: none"> This can include reviewing results disaggregated by specialty area and/or by work site characteristics for completers from the same specialty area (e.g., reading specialists at suburban, inner-city, or charter schools). <p>The EPP submits documentation of employment milestones, including promotion, employment trajectory, and retention for at least some completers and conducts appropriate analysis.</p> <p>The EPP reviews the results with stakeholders and considers any indicated changes in preparation experiences.</p>	<p>The site team evaluates the adequacy of the EPP's documentation which should include the following:</p> <ul style="list-style-type: none"> A description of the process for gathering data; Response rates appropriate for this type of survey and EPP description of characteristics of respondent compared with non-respondent; and A description of the representativeness of the sample (which program areas are represented, in what proportion to the program sizes). <p>The team evaluates the appropriateness of interpretations and conclusions related to comparisons or trends/patterns such as those involving specific specialty fields, time points (e.g., year 1, year 2), or settings (e.g., high-need schools).</p> <p>The team examines evidence that the data are used in continuous improvement.</p>	<p>Results show that the majority of responding employers report that completers were sufficiently prepared for their job responsibilities.</p> <p>The sample is representative of the completer population, or purposive with a plan for expansion toward representativeness over time.</p> <p>The data analysis is appropriate for the data type and quantity.</p> <p>The interpretations and conclusions do not overgeneralize the findings to non-sampled groups of employers or completers.</p> <p>The data and analysis of trends are examined by the EPP and its stakeholders as part of their continuous improvement steps.</p>
<p>OPTION:</p>	<p>The site team evaluates the plan using the <i>CAEP Guidelines for Plans</i>. The team</p>	<p>The plan substantially addresses all criteria in all three categories of the guidelines:</p>

<p>The provider submits a Phase-In Plan that documents how the EPP will gather evidence needed to satisfy component A.4.1.</p> <ul style="list-style-type: none"> The plan is consistent with the <i>CAEP Guidelines for Plans</i> and the <i>CAEP Phase-In Schedule</i>. 	<p>describes the extent to which the Phase-In Plan complies with expectations for formatting and content, and is consistent with the timeline in the <i>CAEP Phase-In Schedule</i>.</p>	<p>Relationship to Standard or Component, Timeline and Resources, and Data Quality.</p> <p>The plan’s implementation timeline is consistent with the requirements of the <i>CAEP Phase-In Schedule</i>.</p>
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Guidance on Summative Evaluations of the Case for Meeting the Standard

While the site team does not make a recommendation regarding whether the standard is met, the team is tasked with notifying the Accreditation Council when their review and professional judgment suggests that the evidence submitted by the EPP is insufficient to make the case that the standard is met. Depending on the severity of the perceived insufficiency, the site team recommends either an Area for Improvement (AFI) or a Stipulation, and provides a rationale. They may cite several potential AFIs or Stipulations in a given standard or a combination of AFIs and Stipulations in the same standard. Below are some of the conditions (there may be others) under which site teams are expected to recommend an AFI or Stipulation.

An AFI is recommended when:

- Many program completers report that they were inadequately prepared for a key responsibility of the job for which the advanced program intended to prepare them.
- The EPP’s methods involve sampling from the same few specialty areas’ completers year after year to the exclusion of many other programs.
- The EPP-created measures of satisfaction used for evidence of Standard A.4 (e.g., surveys, interview protocols, focus group protocols) do not meet CAEP’s sufficiency criteria. [The site team clearly describes the deficiencies as they relate to the evaluation framework for assessments.]
- Site team tasks intended to verify the accuracy of results reported in the SSR could not be completed with the data or stakeholders provided by the EPP, or the effort uncovered significant discrepancies between the information available on site and the results reported in the SSR.
- Review of available data indicates that the EPP did not provide the most sequential and the most recent data that was relevant to their analysis.
- The EPP’s analysis of data/evidence does not identify and discuss trends/patterns, comparisons, and/or differences between programs.
- The EPP’s analysis of data/evidence does not identify and discuss trends/patterns, comparisons, and/or differences over time.
- The EPP provided limited or no evidence that the data available on A.4.1 and A.4.2 were used in continuous improvement steps.
- One or more of the three components of the phase-in plan for Standard A.4 do not meet criteria in the *CAEP Guidelines for Plans*. For example, under Timeline, the plan will not result in at least one data point in the academic year 2019-2020. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]

A Stipulation is recommended when:

- The evidence for Standard A.4 does not address key concepts and both components of the standard, or they are addressed so superficially that they are essentially omitted.
 - The EPP sampled candidates at exit rather than completers one to three years post-exit.
- The majority of EPP-created measures used for evidence of Standard A.4 do not meet CAEP’s sufficiency criteria in the [CAEP Evaluation Framework for EPP-Created Assessments](#), and the insufficiencies are not compensated for by proprietary measures included in the evidence suite. [The site team clearly describes the deficiencies as they relate to the evaluation framework for assessments.]

- The EPP adapts a proprietary measure for use in its program(s) and does not supply evidence that the adaptation is a valid revision that produces reliable data.
- The majority of completers report dissatisfaction with the advanced preparation they received.
- The majority of employers report dissatisfaction with the preparation of the advanced program completers.
- Sampling from the same few specialty areas' completers year after year to the exclusion of many other programs and with no plan to increase participation of completers from other specialty areas.
- The EPP's interpretations of evidence are not well grounded in the provided evidence and overgeneralize unsupported interpretations to non-sampled groups of completers or employers.
- None of the three components of the phase-in plan for Standard A.4 meet criteria in the *CAEP Guidelines for Plans*. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]
- Phase-In Plans are submitted for Standard A.4 after the expiration of the period for submitting new plans.
- Progress on Phase-In Plans for Standard A.4 does not include any results from completers and employers.
- Results submitted to demonstrate progress on Phase-In Plans for Standard A.4 show inadequate levels of satisfaction for the majority of completers or employers who responded.
- The EPP incorrectly analyzes or interprets data/evidence for Standard A.4 and/or draws conclusions about accomplishments for Standard A.4 that are not supported by data/evidence.
 - EPP-created assessments do not have evidence of content validity and inter-rater reliability or agreement at .80 or 80 percent or above.
 - EPP-created assessments surveys do not ask questions that align to standards.
- The EPP does not regularly use its systems to retrieve data and review results on candidate progress, completer achievements, and operational effectiveness.
- The SSR does not address the key concepts and language of Standard A.5.
- There is limited or no evidence for Standard A.5 overall or A.5.3 and A.5.4 in particular.
 - Relevant measures do not address significant aspects of the standard.
 - Evidence/data from a coherent set of multiple measures are used to inform, modify, and evaluate EPP's operational effectiveness.
 - The EPP did not provide three cycles of quality assurance and continuous improvement data.
 - None of the three components of the phase-in plan for Standard A.5 meet criteria in the *CAEP Guidelines for Plans*. [The site team clearly describes the deficiencies in the plan as they relate to the guidelines.]
 - Phase-In Plans are submitted for Standard A.5 after the expiration of the period for submitting new plans.
 - Progress on Phase-In Plans for Standard A.5 does not include any data on the EPP's accomplishments relative to A.5.3 and A.5.4.
 - Results submitted to demonstrate progress on Phase-In Plans for Standard A.5 show inadequate levels of quality assurance or continuous improvement effort.
- Evidence that the EPP uses data from the 8 annual measures is deficient as a result of (1) failure to gather data for at least six of these measures; or (2) failure to make use of the results for continuous improvement; or (3) failure to post the data in an accessible location online (a required component).
- The EPP's analysis of the 8 annual measures does not identify and discuss trends/patterns, comparisons, and/or differences over time.
- There is no evidence of internal consideration of the Standard A.1-A.4 data for continuous improvement purposes by the EPP.
- The EPP incorrectly analyzes or interprets much of the data/evidence for Standard A.5 and/or draws conclusions about accomplishments for Standard A.5 that are not supported by data/evidence.

- The functioning of the QAS was inadequate in multiple ways or severely deficient in a way which caused inaccuracies in the results and conclusions reported for any CAEP Standard. Discrepancies between the information reported by the EPP and that gathered by the site team were severe enough to lead the team to a different conclusion regarding whether the evidence sufficiency criteria for any standard or required component were met.
- Program decisions are not directly supported by data or are contradicted by available data or evidence.
- The EPP does not provide evidence that stakeholders' feedback and input is sought and incorporated into the evaluation, research, and decision making activities.

APPENDIX B: Phase-In Schedule for Advanced-Level Programs

The CAEP phase-in procedure and how it provides a transition period for providers

Phase-in of new items or types of evidence will be necessary. CAEP recognizes that the 2016 *Standards for Advanced-Level Preparation* call for some items of evidence that have not been collected in the past for accreditation purposes or used in self-study reports. Accordingly, CAEP has created developmental expectations for providers submitting self-study reports during a transition period. Advanced standards are first included in EPP self-studies submitted in fall 2017, academic year 2017/18. In that year and the following, 2018/19, plans may be submitted instead of actual data. See CAEP's *Guidelines for Plans* for detailed information on "plans" and how they are used "as if they were evidence." During the next two academic years, 2019/2020 and 2020/2021, self-study reports include plans accompanied with progress steps (including any available data). For academic year 2021/2022 and beyond, the phase-in period is concluded, and the EPP's evidence will be judged as submitted.

Standards for Advanced-Level Programs Phase-In Schedule	New CAEP Standards for Advanced-Level Programs required for all accreditation self-study reports, reviews, and decisions beginning in fall 2017.					
If your next accreditation self-study report is submitted in academic year→	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
<p>1. GENERAL PHASE-IN PROCEDURE CONTAINED IN THE SELF-STUDY GUIDES</p> <p>PERTAINS TO: Topics in the CAEP Standards for Advanced-Level Programs requiring evidence not previously expected</p> <p>EXAMPLES:</p> <ul style="list-style-type: none"> • Candidate assessment literacy, use of research, collaborative activities (Standard A.1); • Partnerships with diverse and developmental clinical experiences (Standard A.2); • Unique features appropriate for clinical experiences for specific fields of preparation are investigated in relation to candidate outcomes (Standard A.2) (See rubric for component A.2.2); • Academically able and ability to complete program (Standard A.3 (see item 2 that follows below for more 	No evidence for advanced-level standards included in self-study reports	Self-study report can include plans for new evidence items if evidence is not complete or available	Self-study report can include plans for new evidence items if evidence is not complete or available	Self-study report includes plans and progress steps (including data, if any)	Self-study report includes plans and progress steps (including data, if any)	Self-study report provides EPP evidence to document each standard

<p>detail on A.3));</p> <ul style="list-style-type: none"> Functioning Quality Assurance System for Initial and Advanced Levels (Standard 5) <p>See complete list in <i>CAEP Accreditation Handbook</i>, Appendix E, Guidelines for Plans</p>						
<p>2. STANDARD A.3 PHASE-IN OF ACADEMIC PERFORMANCE AND ABILITY TO COMPLETE SUCCESSFULLY</p> <p>PERTAINS TO: (If used instead of GPA):</p> <ul style="list-style-type: none"> nationally-normed, or substantially equivalent state-normed or EPP administered assessments of math and verbal achievement [NOTE: writing achievement added in 2021.] Enrolled candidate group average performance in the top 50% of those assessed. CAEP determines “substantial equivalence” with advice from an expert panel. <p>And also PERTAINS TO:</p> <ul style="list-style-type: none"> EPP criteria “intended to ensure that candidates can, or will, develop abilities to complete the program successfully.” 	<p>No evidence for advanced-level standards included in self-study reports</p>	<p>For verbal and math: Self-study report can include plans for new evidence items if evidence is not complete or available</p>	<p>For verbal and math: Self-study report can include plans for new evidence items if evidence is not complete or available</p>	<p>For verbal and math: Self-study report includes plans and progress steps (including data, if any)</p>	<p>For verbal and math: Self-study report includes plans and progress steps (including data, if any)</p>	<p>For verbal, math AND writing beginning in spring 2021: Self-study report provides EPP evidence to document each standard</p>
<p>3. STANDARD 4 PHASE-IN OF EMPLOYER SATISFACTION AND CANDIDATE SATISFACTION</p> <p>PERTAINS TO: Measures described in Components A.4.1 (employer satisfaction) and A.4.2 (candidate satisfaction) with preparation.</p> <p>NOTES: In contrast with Initial preparation standards, for Advanced-level preparation there is not a deferral for the provision that “all components” be met. In addition, the phase-in is not applicable to the outcome measures in component 5.4 for initial preparation because those are addressed in the annual CAEP reporting request to EPPs. Also, for advanced-level programs, there is no EPP annual reporting of outcome measures. Instead, they are included only in self-study reports. For that reason, the phase-in does apply for data that will be included in self-study reports on:</p> <ul style="list-style-type: none"> Completion rates Licensure/Certification rates (where applicable) 	<p>No evidence for advanced level standards included in self-study reports</p>	<p>Self-study report can include plans for new evidence items if evidence is not complete or available</p>	<p>Self-study report can include plans for new evidence items if evidence is not complete or available</p>	<p>Self-study report includes plans and progress steps (including data, if any)</p>	<p>Self-study report includes plans and progress steps (including data, if any)</p>	<p>Self-study report provides EPP evidence to document each standard</p>

<ul style="list-style-type: none">• Initial employment in the fields for which candidates are prepared, and• Consumer information (such as initial salary levels, places of employment, and cost of program completion).						
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