A Board Members Guide to the CAEP Accreditation Process

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Overview of Accreditation

• What it is
• Its value
• Its roles
• How it operates
• Its relationship with government (state/federal)

• Intent – Assure and improve quality
Scope of Accreditation

- **Initial Licensure Scope**
  - All specialty licensure areas that lead to an initial teaching license
  - Undergraduate teacher education programs
  - Master of Arts in Teaching (MAT)
  - Post-secondary or fifth-year programs
  - Alternative routes (district programs, TFA, ITeach, Uteach)
Proposed Scope for Programs at Advanced Levels

- Programs designed to further develop P-12 teachers (already licensed in a subject area) or other school professionals for employment in P-12 schools/districts
- More than 50% of the programs enrollees serve as teachers and/or other school professionals in P-12 schools/districts
- Any M.Ed., M.S., M.A., Ed.D. or Ph.D. program specific to P-12 schools/districts (e.g., reading specialists, school librarian, school counselors, school administrators)
Programmatic Accreditors

- CAEP – one of 67 recognized program accreditors
  - Colleges/universities participate in multiple accreditations
  - All are private, non-profit membership organizations
  - Rely on small staffs with volunteers
  - All develop standards
    - Self study based on standards (reflective assessment by the program)
    - Peer review that examines the self study and evidence specific to achievement of standards
    - CAEP uses a 7-year review cycle
Organizational Structure

• Accreditation Council
  ▪ Operates independently of the CAEP Board
  ▪ Responsible for all decisions specific to accreditation
  ▪ Council consist of public, p-12, and academic professionals
  ▪ Three major responsibilities
    • Establish policies and procedures for the accreditation process
    • Conduct accreditation review and determine accreditation status of EPPs
    • Manage accreditation process to ensure equity and consistency in decision making
Expectations of Accreditors

• All accrediting organizations have standards or expectations of performance – basis for accreditation
  ▪ All charge fees for accreditation reviews to institutions
  ▪ **CAEP has additional relationships with** -
    • States
      – State agreements that establish types of reviews
        » CAEP only
        » Joint review
        » Concurrent review
    • Specialized Professional Associations (SPAs)
      – Option for one type of program review
      – Mandates a separate report based on SPA National Standards
      – Leads to National Recognition in the content area
IB Steps in Accreditation Process

1. **EPP Prepares Self Study (9 months out)**
   - Formative Review with assigned Formative reviewer
   - EPP Self study revised based on feedback from formative review

2. **EPP submits revised Self Study to Review Team**
   - Review Team evaluates Self study and provides feedback
   - EPP Response to Review Team

3. **Site Visit Team to EPP**
   - Verify evidence/submit draft report
   - EPP makes correction on draft report

4. **Site Visit Team Submits Final Report to Accreditation Council**

5. **Accreditation Decision – Council Level**
   - Initial Panel Review
   - Joint Panel Review

6. **Accreditation Council Acts on Recommendations**

7. **Appeal Process Independent of Accreditation Council**
SI and TI Steps in Accreditation Process

EPP Prepares Self Study (9 months out)
- Formative Review
- EPP Addendum Response

Site Visit to EPP
- Verify Evidence/Submit Final Report
- EPP Rejoinder (optional)

Accreditation Decision – Council Level
- Initial Panel Review
- Joint Panel Review

Accreditation Council Acts on Recommendations

Appeal Process Independent of Accreditation Council
EPP Prepares Self-Study Report (SSR)

- **9-12 months before scheduled site visit**
  - EPP submits SSR
    - IB process – SSR is upload as a word document into AIMS
    - SI/TI process - EPPs submit using a template and evidence room through AIMS
  - All evidence presented specific to CAEP Standards
  - Site team is assigned to review self study
    - Provide feedback to EPP
    - IB – declare the report auditable
    - Develop questions, probes, and/or tasks for the onsite process
Formative Review Processes – Self Studies

Inquiry Brief
- Site team assigned along with formative reviewer and site visit and SSR date established (AIMS)
- Formative reviewer submits feedback on SSR specific to the clarity and completeness (AIMS) (6 weeks for formative reviewer to return report)
- Site team reviews revised SSR (from formative review process) and declares it auditable. Based on SSR, site team submits auditability/formative feedback report which consists of a summary of the case, clarification questions, and request for additional data within 60 days of receiving the report
- EPP has two weeks to respond to submitted site team report (AIMS)

Selected Improvement and Transformation Initiative
- SSR is submitted and site visitors are assigned (AIMS)
- Assigned site visitors review SSR and submit a formative review to EPP within 60 days (AIMS)
- EPP response to formative review within 60 days of scheduled site visit through a submission of an addendum. In the addendum, EPP provides supplemental evidence as requested or appropriate (AIMS)
Site Visit to EPP

Inquiry Brief

- Based on review of submitted documents, site team formulate plan for verifying accuracy of SSR
- Site Team visits campus, which includes
  - Interviews with key stakeholders (mentor teachers, candidates, P-12 school administrators, etc.)
  - Interviews with EPP faculty, candidates, and administrators
  - Verification of submitted evidence
- Site Team submits a site visit report four weeks after the visit (AIMS)

Selected Improvement and Transformation Initiative

- Based on review of submitted documents, site visitors formulate a plan for verifying presented evidence
- Site Team visits campus which includes
  - Verification of submitted evidence
  - Interviews with key stakeholders (mentor teachers, candidates, P-12 school administrators, etc.)
  - Interviews with EPP faculty, candidates, and administrators
  - Observations and visits to sites
- Final site visit report submitted 4 weeks after visit (AIMS)
- EPP response to accuracy of the report within 7 days (factual corrections)
- EPP provides a response to final report within 2 weeks of receiving the report (AIMS)
Review Panels

- **Initial review panel**
  - Consists of three individuals across the three pathways
  - Based on site visit report, determine -
    - If, standards are met
    - Areas for Improvement
    - Stipulations
  - Make recommendation specific to standards
  - EPPs can participate with initial review panel

- **Joint review panel**
  - Consists of two initial review panels
  - Each panel makes a report on 5 to 7 cases
  - Joint review panel makes final recommendation to Accreditation Council
Accreditation Council Decisions

- **Initial Accreditation** – to accredit initially for a period of seven (7) years with all 2013 CAEP Standards met

- **Probationary Accreditation** – To reaccredit for a period of two (2) years a provider previously accredited by CAEP, NCATE, or TEAC with all but one 2013 CAEP Standards met.
  - Must be publically identified on provider’s website
  - Requires a focus visit specific to the unmet standard
  - If focus visit is successful, EPP is accredited for the remaining five (5) years

- **Reaccreditation** - to reaccredit a provider previously accredited by NCATE, TEAC or CAEP

- **Exemplary Designation** – CAEP plans to recognize accreditation that reaches an “exemplary” level of performance
Accreditation Council Decisions (cont.)

- **Denial** – Accreditation is denied to an EPP
  - Must be posted on provider’s website
  - Used with EPPs seeking accreditation from CAEP for the first time
  - EPP failed to meet even one of the CAEP Standards

- **Revocation** – Accreditation is revoked
  - Must be posted on provider’s website
  - Used with EPPs that have been previously accredited by CAEP, NCATE or TEAC
  - EPP failed to meet two (2) or more of the 2013 CAEP Standards
Areas for Improvement

• **Identifies a weakness in the evidence specific to a component or standard**
  - Evidence may be less robust, but is present
  - Identifies for EPP where evidence could be strengthened, an assessment improved, or further data are required
  - Designed to encourage continuous improvement on part of EPP

• **Remediation of Area for Improvement**
  - Addressed through the annual report process
  - Annual report reviewers can determine if enough evidence has been provided that the EPP no longer needs to report annually on progress
  - Areas for Improvement must be corrected by the next review term
    • If not corrected by next review, a stipulation can be assigned moving forward
    • NCATE areas for improvement and TEAC weaknesses are part of the system
Stipulations

- **A serious deficiency related to one or more components or standards**
  - Can be of sufficient severity that a standard may be determined to be unmet
  - Includes such things as no data/evidence provided in support of the standard/components, inaccurate analysis of data, conclusions unsupported by data, presented evidence could not be verified by site team, major gaps in data/evidence, etc.

- **Remediation of Stipulations for Unmet Standard**
  - Probationary accreditation is awarded
    - Requires a site visit to remove stipulations
      - During the probationary site visit, all stipulations are addressed (both for met and unmet standards)
      - If stipulations are removed, full accreditation is granted for the remainder of accreditation term
      - Progress in meeting stipulations is part of the annual review process
Stipulations (cont.)

• **Remediation for stipulations for met standards**
  - Provider is given 24 months to take action on assigned stipulations
    - EPP submits an Interim report specific to stipulations
    - Site team completes a virtual review of the interim report from the EPP and prepares a response
    - EPP responds to Site Team report
    - Site team can make one of the following recommendations to Accreditation Council
      - Stipulations are fully addressed and removed
      - Stipulations are partially addressed and reduced to areas for improvement
      - Stipulations are continued
  - Initial and Joint panels review recommendations

• **Accreditation Council Action**
  - If the stipulation is continued, Council finds the standard not met and accreditation is revoked or denied
Role in Society

- Assures threshold quality and encourages confidence
- Assists with student mobility
- Is a primary basis for public and private sector funding
- Essential to international mobility
Core Values of Higher Education

- Peer Review
  - Peers in academe are best suited to judge each other
  - CAEP is based on a peer-review process
    - 1000 volunteers participating in the review processes
      - Site Visitors
      - Assessment Reviewers
      - SPA Reviewers
      - Annual Report Reviewers

- Institutional Autonomy
  - Colleges and universities must earn this autonomy
    - Accountability to the public
    - Increase public pressure for institutional accountability
Core Values of Higher Education (cont.)

- Commitment to Mission
  - All accreditation is mission-based
  - Accreditors base reviews on mission of the institution
  - Mission drives judgment about accreditation status

- Academic Freedom
  - Central to higher education
  - Institutions demonstrate their commitment to academic freedom
Accreditation and Federal Government

• Federal government views -
  ▪ Accreditation as a reliable authority on quality of education
    • Framework is the Higher Education Act (HEA of 1965)
    • Currently 52 non-governmental accreditors are federally recognized
    • Regulations are -

<table>
<thead>
<tr>
<th>Federal Recognition Standards</th>
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<tr>
<td>Student Achievement</td>
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<tr>
<td>Faculty</td>
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<tr>
<td>Fiscal Capacity</td>
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<td>Recruitment &amp; Admissions</td>
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<td>Student Complaints</td>
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Key Groups in Federal Recognition

Sets policy and federal regulations
U.S. Congress within HEA

Reviews all submissions and enforces regulation
U.S. Department of Education

Approves applications
National Advisory Committee on Institutional Quality and Integrity (NACIQI)
Accreditation and State Government

- CAEP currently has 24 signed state partnership agreements
  - Another 10 are actively in the review process
  - States have individual templates
    - Allows states to collect data specific to state regulations within one accreditation process
    - States have three choices specific to program review
      - Specialized Professional Association (SPA) review leading to National Recognition by the SPA
        » Reviews conducted by reviewers trained and supervised by the SPA
        » SPA makes the final decisions for individual programs
        » Answers questions specific to SPA reports
States have three choices specific to program review (cont.):

- Program Review with Feedback
  - Built into the self study process
  - Requires EPPs to disaggregate data presented under Standard 1 by specialty licensure area
  - Answer questions specific to specialty licensure area data
- State Level Program Review
  - Some states conduct program review
  - Reports available to site visitors
  - Review is independent of national process

States can allow any combination of the three options:

- Options are specified in the state agreement
- Access to AIMS is important to states
Challenges

• **Expanding Role of Government**
  - Moved from partnership to directive
  - Oversight relationship
  - Accreditation as an “arm” of government
  - Resulted in major expansion of government managing and directing accreditation as well as judging quality
Challenges (cont.)

• **Public Accountability**
  - Public wants to know more about accreditation
    • Demanding greater public accountability
      – Expense of higher education
      – More and more data about college graduates has led to questions about effectiveness of colleges and universities
        » Public education under attack
        » Growth of charter schools
        » Growth of alternatives for licensure
    • Pressures on accreditation
      – Its traditional emphasis on quality improvement from formative, trust-based, aspirational and collegial approach
Challenges (cont.)

• **What the public is seeking** –
  - Greater rigor in accreditation reviews
  - Greater transparency specific to outcomes of reviews
  - Accreditation standards and process
    - More explicit outcomes stated in standards
    - More consistency in the process
    - Access to reported data and conclusions from data
    - Competency-based education
  - Fundamental question – How can institutions perform poorly yet remain accredited?
BREAK TIME AFTER QUESTIONS
Culture of Evidence

• EPPs intentionally and purposefully select evidence that documents a standard is met
  ▪ Not a compliance model
  ▪ Not a checklist
  ▪ CAEP seeks to partner with EPPs in creating a culture of evidence -
    • That encourages and allows for innovation
    • That asks and answers important questions
    • Documents what works and does not work
    • Changes or stays the course is based on data driven decisions
CAEP Policy

• CAEP accredits at the EPP level
  ▪ One self study and review team for all initial licensure areas within the EPP
    • Includes traditional 4 year, MAT, post baccalaureate, fifth year, and alternative programs
    • One decision for entire EPP
  ▪ EPPs with programs at the Advanced Level –
    • Included within the same self study as initial level
    • One review team with additional members assigned specific to advanced level programs
    • One decision for entire EPP at the initial and for advanced level programs
Testing hypotheses, teaching strategies and innovations

- Test assumptions about EPPs’ effectiveness
  - Through data collection and analysis
  - Using assessments that have been validated and field tested
  - Ensuring the reliability of the data
  - Demonstrating that data have been used appropriately and support conclusions
  - Finding out what does not work is as important as finding out what does work!
    - All the data does not have to be positive
    - Using data to support change is important
Standard by Standard Buckets of Evidence

- Think of each standard as a bucket
  - EPPs drop (valid) evidence in the bucket specific to the standard
    - Requires multiple data points for each standard
    - Addresses each component, but EPPs do not have to “meet” each component
    - Having an identified weakness in standard, cross-cutting theme or component is NOT a bad thing
      - How have you use the data to determine that weakness?
      - What are your next steps to address that area of weakness?
First Category of Evidences for Submission – EPP created Assessments

- Upload any protocols associated with the assessment
- Upload answers to the 5 assessment questions
  - What is the purpose and use of the instrument?
  - What are respondents told about the instrument?
  - Do the instruments require the assessment of higher levels of intellectual behavior (e.g., creating, evaluating, analyzing, applying, etc.)?
  - How is, at minimum, content validity established?
  - How is inter-rater reliability established?
- Upload the assessment and the rubric used with the assessment, if applicable
  - Includes such evidence as surveys (exit, employers, in-service, etc.)
  - Includes any EPP created assessments, such as observation instruments, work samples, lesson or unit plans, etc.
- Upload data charts for each submitted assessment
Second Category of Evidence – Other forms of Evidence

• Evidence that is not data related or collected using an instrument of some kind
  ▪ Minutes from meetings
  ▪ MOU on Partnerships with PDS
  ▪ Requirements for various entry points into the program
  ▪ Portions of student teaching handbook
  ▪ Catalogue information
  ▪ Narrative data from focus groups
  ▪ Other types of narrative data
Third Category of Evidence – Proprietary Assessments

• Proprietary Assessments
  ▪ Assessments where an outside agency or company holds the copyright on the assessment
    • State licensure exams
    • edTPA, PPAT, VAM, etc.
    • Other national/state assessments including surveys
  ▪ For proprietary assessments, EPPs submit the data from the assessment
    • Report any validity or reliability data on the assessment provided by the agency or company
    • Data must be aligned to standard/component
Fourth Category of Data – EPP Plans

- Any plans submitted by EPPs as evidence during the transition phase-in period
  - Phase-in schedule is posted in Accreditation Handbook
  - Phase-in schedule is proposed for Advanced Level programs

Fifth Category of Data – State requirements

- Available to all states with an agreement with CAEP
- Reviewed by the state representative on the site team
- States included state specific requirements in the self study
Making the Case – For Meeting Standards

Criteria for Making the Case

- Information is provided from several sources and documents completer proficiencies in content knowledge and pedagogical skills
- Grades, scores, pass rates, and other data are analyzed
- Differences and similarities across licensure areas, comparisons over time, and data are examined
- Appropriate interpretations and conclusions are reached
- Trends or patterns are identified that suggest need for preparation modification
- Based on the analysis of data, planned or completed actions for change are described
New CAEP Requirements and Changes

- Data chart conventions will be provided
- At minimum content validity and inter-rate reliability reported for all EPP-created assessments
  - Complete description of how a research-based method was employed
  - Report results or findings
- All pathways must specifically address the CAEP Standards
  - All final decisions for all pathways are based on the meeting of the CAEP Standards
  - If more than one standard is found not to be met by an EPP that is CAEP eligible, accreditation is revoked
  - If even one standard is not met for an EPP that is a CAEP candidate, accreditation is denied
New CAEP Requirements and Changes - Reviewers

- Reviewers provide an analysis of the evidence in the SSR and not a summary of the evidence presented
  - EPPs must make their case to reviewers
  - Reviewers determine the strength of the evidence supporting the case made by the EPP
  - Reviewers do not make specific statements on if the standard is met – they provide an analysis of the strength of the evidence for each standard
  - Cultural change for both EPPs and reviewers
Role of Reviewers & Accreditation Council

- Moving from providing summaries of the evidence to analyzing the evidence
  - Site visitors will provide an analysis on the sufficiency of the evidence
  - Site visitors do assign Areas for Improvement and Stipulations
- Accreditation Council makes final determination
  - Three-person panels completes initial review
    - EPPs invited to attend either in person or virtually
    - Answer any questions specific to the “facts” of the onsite review
  - Next reviewed by a “joint” panel made of all pathways
  - Final decision is made by a majority vote of the Accreditation Council
Reviewer Training

- A total of 9 required webinars
  - Formative assessment after each webinar
  - Tracking of individual performance
- 2 ½ days of face-to-face training
  - Required performance exam
    - Analysis provided examples
    - Writing sample based on the analysis
- Three more webinars specific to each pathway
  - All reviewers are trained on all three pathways
  - Reviewers can be assigned to any of the three pathways
- Final Qualifying Exam
Using Rubrics – Assessment Review

• All EPP created assessments are evaluated by a rubric
  ▪ EPPs can submit their assessments for an optional early review
  ▪ Feedback is provided by at least two reviewers based on the Assessment rubric
  ▪ Site visitors use the rubric to determine the sufficiency of the submitted assessments during the formative review process
  ▪ Samples and Practice
Five criteria for Rubric Development

- **Appropriate** – aligned with some aspect of the standards
- **Definable** – clear, agreed-upon meaning
- **Observable** – quality of performance can be perceived
- **Distinct from one another** – each level defines distinct levels of candidate performance
- **Complete** – all criteria together describe the whole of the learning outcome
Using Rubrics

- For each standard and components under the standard
  - Minimal level of sufficiency is defined
  - EPPs and reviewers are guided by the defined minimal level of sufficiency identified on rubrics
  - Rubrics will be used beginning in spring 2018
  - Consistency across review teams and pathways is provided

Samples and practice
Accreditation Decision Guidelines

- Reviewed and recommended by Peter Ewell
  - Pilot of instrument this year
  - Part of calibration exercise for Accreditation Council members
  - Built upon the Accreditation Handbook
- EPP must address three topics for Standards 1 through 5
  - EPP’s case that it meets the standard
  - EPP’s analysis and use of evidence provided for the standard
  - EPP’s actions to advance and ensure data quality
- For Standard 5, only question 1 is posed separately
Site Visitors and Providers

- **Site Visitors know that providers** –
  - Write holistically around each standard except for required components (3.2, 4.1, 4.2, 4.3, 4.4, 5.3 and 5.4)
  - Are welcome to employ different measures or types of evidence from those described in Evidence Table

- **Guidelines for providers** –
  - Frame the argument at the standard level
  - Describe data sources and representativeness
    - Note why data are credible for the standard
    - Present results in a way that aligns with standard
    - Draw conclusions about the extent to which data support the tagged standard
  - Discuss implications of findings and subsequent actions
  - Discuss use of data for continuous improvement
Tips for Providers

• Disaggregate data and results for licensure areas and other relevant subgroups
• Look for patterns in data (variations over time, changes in the program or context)
• Highlight confirming and conflicting findings from data
• Make comparisons between and among data such as –
  ▪ Existing benchmarks
  ▪ Normative comparisons to peers
  ▪ Performance standards
  ▪ Triangulate data
Crosscutting Theme of Diversity

- **Diversity defined:** “Incorporation of multiple perspectives, respect and responsiveness to cultural differences, and candidate understanding of their own frame of reference.”

- **Specifically noted in –**
  - Standard 1 – Emphasizes “all candidates” must demonstrate skills and commitment that provide all P-12 students access to rigorous college and career ready standards.
  - Standard 2 – Clinical experiences prepare candidates to work with all students
  - Standard 3 – Providers demonstrate commitment to outreach efforts for recruitment of a more able and diverse candidate pool
Crosscutting Theme of Technology

- **Technology defined:** “Incorporation of technology to improve teaching effectiveness, enhance instruction, and manage student and assessment data while engaging students in the application of technology to enhance their learning experiences.”

- **Specifically noted in** –
  - **Standard 1** – Endorses InTASC teacher standards – Providers are to “ensure that candidates model and apply technology standards as they design, implement, and assess learning experiences to engage students, improve leaning and enrich professional practice.”
  - **Standard 2** – Technology-enhanced learning opportunities; appropriate technology-based applications; technology-based collaborations
  - **Standard 3** – Candidates integrate technology into all learning domains.
Standard 1 – What Site visitors look for

- Evidence of content knowledge disaggregated by specialty licensure area
- Evidence of content pedagogy disaggregated by specialty licensure area
- Evidence of candidate’s ability to apply both content and pedagogical content knowledge disaggregated by specialty licensure area
- Direct evidence of P-12 student learning and candidate’s data literacy (ability to use data to modify instruction)
- Conclusions from one of three program review options
- Candidate understanding and practice of problem solving, critical thinking, communication, collaboration, and use of assessments and data specific to college and career readiness standards
- Evidence that candidates are prepared to teach diverse P-12 students effectively
- Evidence that candidates demonstrate the use of technology effectively
Standard 1 – Analysis and Use of Evidence

- Coherence of EPP’s case
- Accurate and appropriate interpretations of evidence
- Conclusions warranted from the data
- Data placed in context –
  - Comparisons are made
  - Displaying and interpreting trends over time
  - Providing comparisons of licensure test scores averages or other measures disaggregated by licensure area in relation to national mean or median, or state averages
  - Displaying and interpreting sub-score data on required licensure test when available
  - Evidence EPP has considered the implications of the findings
Standard 1 – Actions to ensure data quality

- Relevance of the measures used to inform CAEP Standard 1
- EPP-created assessments are evaluated at the CAEP minimum level of sufficiency
- Audit checks on site indicate that data are accurate
- Explicit description of the research-based method used to establish validity (minimal content) and inter-rater reliability
- At least three cycles of data are provided
Standard 2 – What site visitors look for

- Evidence that effective school or district partnerships are in place
  - Significant shared responsibilities
  - Common expectations for candidates
  - Coherence across clinical and academic aspects of preparation
  - Documentation of high-quality clinical educators are co-selected, prepared, evaluated, supported, and retained
  - Evidence that clinical experiences are sufficient in terms of
    - Design (deliberate, purposeful, sequential, and assessed using performance-based protocols)
    - Attributes (depth, breadth, diversity, coherence, and duration)
    - Opportunities (candidates to practice developing skills)
    - Results – evidence of positive impact on P-12 students during preservice
  - Inclusion of technology-based applications in clinical experiences
Standard 2 – Analysis and Use of Evidence

- Coherence of EPP’s case
- Accurate and appropriate interpretations of evidence
- Conclusions warranted from the data
- Data placed in context –
  - Comparisons or collaborations with other similar institutions
  - Displaying and interpreting trends over time (e.g., moving toward greater sharing of clinical design and operational decisionmaking)
  - Illustrating shared decisionmaking
  - Detailing the EPP’s effort to investigate the consequences of altering any of the design attributes on such things as depth, breadth, diversity, coherence, and duration
- EPP and partners have considered implications of findings and analyses for relevant aspects of preparation programs
Standard 2 – Actions to ensure data quality

- Relevance of the measures used to inform CAEP Standard 2
- EPP-created assessments are evaluated at the CAEP minimum level of sufficiency
- Audit checks on site indicate that data are accurate
- Explicit description of research-based process used to examine validity and quality of evidence
- At least three cycles of data are provided
Standard 3 – What site visitors look for

• A plan for recruitment of candidates who are both diverse and demonstrate academic achievement that fits EPP’s mission and employment opportunities
  - Outreach activities
  - Numerical goals and base data
  - Monitoring of progress
  - Analyses and judgment of adequacy of progress towards goals and making related changes
• Alternative 1 – evidence that the CAEP “minimum criteria” are met
• Alternative 2 – Evidence from a valid study, or plan to conduct a valid study, or the relationship of those criteria with P-12 student learning
  - **EPP must demonstrate quality of admitted candidates in terms of academic achievement**
• Use of non-academic factors as part of admission or during preparation or both
• EPP references evidence provided for Standard 1
Standard 3 – What site visitors look for (cont.)

- Evidence that candidate progress is measured at two or more points during preparation
  - Ability to teach to college and career readiness standards
  - Content knowledge; pedagogical content knowledge
  - Pedagogical skills
  - Integration of technology into teaching
- Evidence of candidate understanding of the profession (e.g., code of ethics, professional standards, relevant laws and practice, etc.)
Standard 3 – Analysis and Use of Evidence

• Coherence of EPP’s case
• Accurate and appropriate interpretations of evidence
• Conclusions warranted from the data
• Data placed in context –
  ▪ Comparisons or collaborations with other similar institutions
  ▪ Displaying and interpreting trends over time (e.g., year by year progress toward shifting pool of new candidates toward greater diversity and academic achievement, trends in monitoring of candidates’ progress in the program)
  ▪ Study of the relationship of non-academic factors with particular features of the EPP’s mission
• EPP and partners have considered implications of findings and analyses for relevant aspects of preparation program
Standard 3 – Actions to ensure data quality

- Relevance of the measures used to inform CAEP Standard 3
- EPP created assessments are evaluated at the CAEP minimum level of sufficiency
- Audit checks on site indicate that data are accurate
- Explicit description of research-based process used to examine validity and quality of evidence
- At least three cycles of data are provided
Standard 4 – What site visitors look for

• Only evidence from completers can be used for Standard 4
  ▪ Page 50 of *Handbook* has a description of what an EPP should include in SSR when they do have access to date or local P-12 student learning data
    • Value-added modeling (VAM)
    • Student-growth percentiles tied to teacher
    • Student learning and development objectives
    • State supported measures that address P-12 learning and development linked to teacher data
    • Documentation of analysis and evaluation of data on P-12 learning
  ▪ Page 51 of *Handbook* has a description of options that EPPs may select when no state data are available
    • Provider-conducted case studies
    • Completer-conducted action research
    • Impact data provided with partnership with a district or individual school
    • Description of methods and development of any assessments used
    • Use of focus groups, blogs, electronic journals, interviews, and other types of evidence
  ▪ Structured and validated teacher observation instruments and/or student surveys
Standard 4 – What site visitors look for (cont.)

- Indicators of employer satisfaction from surveys, interviews, focus groups, or case studies (including employment milestones such as promotion, retention, and employment in high-needs schools)
- Indicators of completer perception of preparation from surveys, interviews, focus groups, or case studies

**EPP analysis and use of Evidence for Standard 4**

- Coherence of EPP’s case
- Accurate and appropriate interpretations of evidence
- Data placed in context –
  - Comparisons with other similar institutions
  - Displaying and interpreting trends over time (e.g., year-by-year progress toward developing more representative measures of completers’ impact)
- EPP and partners have considered implications of findings and analyses for relevant aspects of preparation program

**Actions to and ensure evidence quality – See Standard 3**
EPP’s case that it meets Standard 5

• What they learned, through their review of Standards 1-4, specific to functional capabilities of the EPP’s quality assurance system
  ▪ Monitor candidate progress and completer achievements
  ▪ Provide data to inform operational effectiveness
  ▪ Disaggregate data by specialty licensure area
  ▪ Disaggregate by race/ethnicity
  ▪ Inform progress on shortage areas and employment opportunities
  ▪ Provide information on candidate quality from admission through completion
  ▪ Be accessible to a variety of users

• What they learned, through their review of Standards 1-4, about the EPP’s effort to ensure data quality (relevant, verifiable, representative, cumulative, and actionable)
  ▪ At least 50% of EPP-created assessments were judged at the minimal level of sufficiency
EPP’s case that it meets Standard 5 (cont.)

• What they learned, through their review of Standards 1-4, about the EPP’s effort to ensure data quality (relevant, verifiable, representative, cumulative, and actionable)
  - Inter-rater reliability is at 80% or .70 or above on EPP-created assessments
  - Documentation that evidence is
    • Relevant – aligned and tagged to standard
    • Verifiable – accuracy of the sample
    • Representative – specificity on the sample characteristics
    • Cumulative (generally three cycles or more)
    • Actionable (in a form to guide program development)
    • Interpretations of evidence are consistent, accurate, and supported by data/evidence
EPP’s case that it meets Standard 5 (cont.)

• Evidence that the EPP regularly and systematically –
  ▪ Reviews quality assurance system
  ▪ Identifies patterns across preparation programs (both strengths and weaknesses)
  ▪ Uses data/evidence for continuous improvement
  ▪ 80% or more program modifications are linked back to data/evidence
  ▪ Tests innovations

• EPP’s own measures for CAEP 8 annual reporting of “impact” and “outcome” have been
  ▪ Externally benchmarked, compared, and analyzed
  ▪ Results have been shared with stakeholders
  ▪ Posted to EPP’s website
  ▪ Used in continuous improvement

• Evidence that stakeholders are regularly involved in decision making, program evaluation, and selection and implementation of changes