# MIDDLE STATES COMMISSION ON HIGHER EDUCATION

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## STATEMENT OF ACCREDITATION STATUS

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**Chief Executive Officer:** Dr. Leonardo Morales-Tomassini, Chancellor

System: University of Puerto Rico Central Administration

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## INSTITUTIONAL INFORMATION

**Enrollment (Headcount):** 3120 Undergraduate

Control: Public

**Affiliation:** Government-State- University of Puerto Rico

**Carnegie Classification:** Baccalaureate - Diverse Fields

**Approved Degree Levels:** Associate's, Bachelor's;

**Distance Education Programs:** Not Approved

**Accreditors Recognized by U.S. Secretary of Education:** American Physical Therapy Association, Commission on Accreditation in Physical Therapy Education; National Council

for Accreditation of Teacher Education

Other Accreditors: Association of Collegiate Business Schools Programs (ACBSP);

Accreditation Board of Engineering and Technology (ABET);

## **Instructional Locations**

**Branch Campuses:** None

**Additional Locations: None** 

**Other Instructional Sites:** None

## ACCREDITATION INFORMATION

**Status:** Member since 1970

Last Reaffirmed: June 23, 2011

## **Most Recent Commission Action:**

June 26, 2014: To accept the monitoring report. To remind the institution of its

obligation to ensure timely production of audited financial statements.

The next evaluation visit is scheduled for 2015-2016.

## **Brief History Since Last Comprehensive Evaluation:**

June 23, 2011: To accept the monitoring report, to note that a small team visit took

place, to remove probation, and reaffirm accreditation. To request a monitoring report due by March 1, 2012 documenting further progress in (1) strengthening institutional resources and developing alternative forms of income, including institutional pro-forma budgets that demonstrate the institution's ability to generate a balanced budget for fiscal years 2012 through 2014, including the personnel, compensation, and other assumptions on which these budgets are based (Standard 3); (2) steps taken to ensure timely production of audited financial statements for FY 2011 and subsequent years (Standard 3); and (3) further steps taken to improve communication and shared governance, especially in documenting how campus input is solicited and considered in decision making at the System level; (4) evidence of further implementation of the UPR Action Plan, including evidence that the action plan is being assessed and data is used for improvements; (5) evidence that steps have been taken to assure continuity and stability of institutional leadership, particularly in times of governmental

transitions; (6) evidence that communication between the Central Administration and the institution, is clear, timely, accurate, and made available to all constituents; and (7) evidence of further progress in implementing a procedure for the periodic objective assessment of the Board of Trustees (Standard 4). The next evaluation visit is now

scheduled for 2015-2016.

June 28, 2012: To accept the monitoring report. The next evaluation visit is scheduled

for 2015-2016.

June 13, 2013: To request, in accordance with the Commission's policy on Public

Communication in the Accrediting Process, a supplemental information

report, due July 10, 2013, that addresses the impact on institutional leadership of the recent changes in governance and administration, and actions planned or taken by the University to ensure ongoing compliance with Standards 4, 5 and 6. The next evaluation visit is scheduled for 2015-2016.

June 25, 2013: To note that an extension has been granted for the submission of a

supplemental information report that addresses the impact on institutional leadership of the recent changes in governance and administration, and actions planned or taken by the University to ensure

ongoing compliance with Standards 4, 5 and 6. The supplemental information report is now due August 1, 2013. The next evaluation visit

is scheduled for 2015-2016.

November 21, 2013: To accept the supplemental information report. To request a monitoring

report, due April 1, 2014, documenting evidence of an independent audit for FY2013, with evidence of follow-up on any concerns cited in the audit's accompanying management letter for both FY2012 and FY2013 (Standard 3). To remind the institution of its obligation to ensure timely production of audited financial statements. The next

evaluation visit is scheduled for 2015-2016.

Next Self-Study Evaluation: 2015 - 2016

**Next Periodic Review Report:** 2021

Date Printed: August 13, 2014

#### **DEFINITIONS**

**Branch Campus -** A location of an institution that is geographically apart and independent of the main campus of the institution. The location is independent if the location: offers courses in educational programs leading to a degree, certificate, or other recognized educational credential; has its own faculty and administrative or supervisory organization; and has its own budgetary and hiring authority.

**Additional Location** - A location, other than a branch campus, that is geographically apart from the main campus and at which the institution offers at least 50 percent of an educational program. **ANYA** ("Approved but Not Yet Active") indicates that the location is included within the scope of accreditation but has not yet begun to offer courses. This designation is removed after the Commission receives notification that courses have begun at this location.

Other Instructional Sites - A location, other than a branch campus or additional location, at which the institution offers one or more courses for credit.

**Distance Education Programs -** Fully Approved, Approved (one program approved) or Not Approved indicates whether or not the institution has been approved to offer diploma/certificate/degree programs via distance education (programs for which students could meet 50% or more of the requirements of the program by taking distance education courses). Per the Commission's Substantive Change policy, Commission approval of the first two Distance Education programs is required to be "Fully Approved." If only one program is approved by the Commission, the specific name of the program will be listed in parentheses after "Approved."

## EXPLANATION OF COMMISSION ACTIONS

An institution's accreditation continues unless it is explicitly withdrawn or the institution voluntarily allows its accreditation to lapse. In addition to reviewing the institution's accreditation status at least every 5 years, the Commission takes actions to approve substantive changes (such as a new degree or certificate level, opening or closing of a geographical site, or a change of ownership) or when other events occur that require review for continued compliance.

Any type of report or visit required by the Commission is reviewed and voted on by the Commission. Reports submitted for candidacy, self-study evaluation, periodic review or follow-up may be accepted, acknowledged, or rejected.

The Commission "Accepts" a report when its quality, thoroughness, and clarity are sufficient to respond to all of the Commission's concerns, without requiring additional information in order to assess the institution's status.

The Commission "Documents receipt of" a letter or report when it addresses the Commission's concerns only partially because the letter or report had limited institutional responses to requested information, did not present evidence and analysis conducive to Commission review, were of insufficient quality, or necessitated extraordinary effort by the Commission's representatives and staff performing the review. Relevant reasons for not accepting the letter or report are noted in the action. The Commission may or may not require additional information in order to assess the institution's status.

The Commission "Rejects" a letter or report when its quality or substance are insufficient to respond appropriately to the Commission's concerns. The Commission requires the institution to resubmit the report and may request a visit at its discretion. These terms may be used for any action (reaffirm, postpone, warn, etc.).

### Types of Follow-Up Reports:

**Accreditation Readiness Report (ARR):** The institution prepares an initial Accreditation Readiness Report during the application phase and continually updates it throughout the candidacy process. It is for use both by the institution and the Commission to present and summarize documented evidence and analysis of the institution's current or potential compliance with the Commission's accreditation standards.

**Progress Report:** The Commission needs assurance that the institution is carrying out activities that were planned or were being implemented at the time of a report or on-site visit.

**Monitoring Report:** There is a potential for the institution to become non-compliant with MSCHE standards; issues are more complex or more numerous; or issues require a substantive, detailed report. A visit may or may not be required. Monitoring reports are required for non-compliance actions.

**Supplemental Information Report:** This report is intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial action. This report is required when a decision is postponed. The Commission may request a supplemental information report at any time during the accreditation cycle.

## Commendations:

Periodically, the Commission may include commendations to the institution within the action language. There are three commendations. More than one commendation may be given at the same time:

To commend the institution for the quality of the [Self-Study or PRR] report. The document itself was notably well-written, honest, insightful, and/or useful.

To commend the institution for the quality of its [Self-Study or PRR] process. The Self-Study process was notably inclusive.

To recognize the institution's progress to date. This is recognition for institutions that had serious challenges or problems but have made significant progress.

#### **Affirming Actions**

Grant Candidate for Accreditation Status: This is a pre-accreditation status following a specified process for application and institutional self-study. For details about the application process, see the MSCHE publication, Becoming Accredited. The U.S. Department of Education labels Candidacy as "Pre-accreditation" and defines it as the status of public recognition that an accrediting agency grants to an institution or program for a limited period of time that signifies the agency has determined that the institution or program is progressing toward accreditation but is not assured of accreditation) before the expiration of that limited period of time. Upon a grant of candidate for accreditation status, the institution may be asked to submit additional Accreditation Readiness Reports until it is ready to initiate self study.

<u>Grant Accreditation:</u> The Commission has acted to grant accreditation to a Candidate institution and does not require the submission of a written report prior to the next scheduled accreditation review in five years.

Grant Accreditation and request a Progress Report or Monitoring Report: The Commission has acted to grant accreditation to a Candidate institution but requires the submission of a written report prior to the next scheduled accreditation review to ensure that the institution is carrying out activities that were planned or were being implemented at the time of the report or on-site visit.

Reaffirm Accreditation via Self Study or Periodic Review Report: The Commission has acted to reaffirm accreditation and does not require the submission of a written report prior to the next scheduled accreditation review in five years. The action language may include recommendations to be addressed in the next Periodic Review Report or Self Study. Suggestions for improvement are given, but no written follow-up reporting is needed for compliance.

Reaffirm Accreditation via Self Study or Periodic Review Report and request a Progress Report or Monitoring Report: The Commission has acted to reaffirm accreditation but requires the submission of a written report prior to the next scheduled accreditation review to ensure that the institution is carrying out activities that were planned or were being implemented at the time of the report or on-site visit.

#### **Administrative Actions**

<u>Continue Accreditation:</u> A delay of up to one year may be granted to ensure a current and accurate representation of the institution or in the event of circumstances beyond the institution's control (natural disaster, U.S. State Department travel warnings, etc.). The institution maintains its status with the Commission during this period.

#### **Procedural Actions**

<u>Defer a decision on initial accreditation:</u> The Candidate institution shows promise but the evaluation team has identified issues of concern and recommends that the institution be given a specified time period to address those concerns. Institutions may not stay in candidacy more than 5 years.

<u>Postpone a decision on (reaffirmation of) accreditation:</u> The Commission has determined that there is insufficient information to substantiate institutional compliance with one or more standards. The Commission requests a supplemental information report.

Voluntary Lapse of Accreditation: The institution has allowed its accreditation to lapse by not completing required

obligations. The institution is no longer a member of the Commission upon the determined date that accreditation will cease.

## **Non-Compliance Actions**

<u>Warning:</u> A Warning indicates that an institution has been determined by the Commission not to meet one or more standards for accreditation. A follow-up report, called a monitoring report, is required to demonstrate that the institution has made appropriate improvements to bring itself into compliance.

<u>Probation:</u> Probation indicates that an institution has been determined by the Commission not to meet one or more standards for accreditation and is an indication of a serious concern on the part of the Commission regarding the level and/or scope of non-compliance issues related to the standards. The Commission will place an institution on Probation if the Commission is concerned about one or more of the following:

- 1. the adequacy of the education provided by the institution;
- 2. the institution's capacity to make appropriate improvements in a timely fashion; or
- 3. the institution's capacity to sustain itself in the long term.

Probation is often, but need not always be, preceded by an action of Warning or Postponement. If the Commission had previously postponed a decision or placed the institution on Warning, the Commission may place the institution on Probation if it determines that the institution has failed to address satisfactorily the Commission's concerns in the prior action of postponement or warning regarding compliance with Commission standards. This action is accompanied by a request for a monitoring report, and a special visit follows. Probation may, but need not always, precede an action of Show Cause.

By federal regulation, the Commission must take immediate action to withdraw accreditation if an institution is out of compliance with accreditation standards for two years, unless the time is extended for good cause.

Show Cause: An institution is asked to demonstrate why its accreditation should not be withdrawn. A written report from the institution (including a teach out plan) and a follow-up team visit are required. The institution has the opportunity to appear before the Commission when the Commission meets to consider the institution's Show Cause status. Show Cause may occur during or at the end of the two-year Probation period, or at any time the Commission determines that an institution must demonstrate why its accreditation should not be withdrawn (i.e. Probation is not a necessary precursor to Show Cause).

## **Adverse Actions**

<u>Withdrawal of Accreditation:</u> An institution's candidate or accredited status is withdrawn and with it, membership in the association. If the institution appeals this action, its accreditation remains in effect until the appeal is completed.

<u>Denial of Accreditation:</u> An institution is denied initial accreditation because it does not meet the Commission's requirements of affiliation or accreditation standards during the period allowed for candidacy. If the institution appeals this action, its candidacy remains in effect until the appeal is completed.

<u>Appeal:</u> The withdrawal or denial of candidacy or accreditation may be appealed. Institutions remain accredited (or candidates for accreditation) during the period of the appeal.

Other actions are described in the Commission policy, "Range of Commission Actions on Accreditation."