

Quality Checkup Guide



Academic Quality Improvement Program

The Higher Learning Commission

Contents

Introduction & Components of the Quality Checkup Visits	1
1 Systems Portfolio Clarification and Verification	2
2 Systems Appraisal Follow Up	2
3 Accreditation Issues Follow Up	3
4 Federal Compliance Review	4
5 Organizational Quality Commitment	4
The Criteria for Accreditation and the Quality Checkup	4
Climate for Quality Checkups	6
Scheduling the Quality Checkup Visit	6
Planning the Visit Interactively and Iteratively	6
Quality Checkup Team Members	7
Visit Preparations	8
The Quality Checkup Team	8
The Institution	9
Institutional Costs of the Quality Checkup Visits	10
The Quality Checkup Report	10
Establishing the Right Tone and Climate for a Constructive Quality Checkup	11
Framing Conversations and Questions	12
Tips About Quality Checkups	13

Introduction

The Quality Checkup introduces a new type of accreditation visit, one that AQIP hopes institutions will look forward to with anticipation, enjoy while it is happening, and look back on as a turning point in their institutional quality journey. AQIP held its first Quality Checkups during the spring of the 2005-06 academic year, so these visits are still developing their full potential as both quality assurance tools and stimuli for quality improvement and organizational change.

Quality Checkups are not visits an institution can “fail” (although, like a medical checkup, they could result in uncovering problems not appreciated previously), so the climate surrounding them ought to be positive. AQIP wants the institution to perceive the team that visits as perceptive, critical, and supportive friends of the institution, people there to help the institution understand itself and take actions that will move it toward actualizing its mission, vision, and potential.

Quality Checkup visits are typically conducted by two trained and experienced AQIP Reviewers, and occupy two full days on campus, beginning at noon on Wednesday and ending at noon on Friday. (The minimum is two team members and two days on campus. For larger decentralized institutions that require more attention or face more complex issues, a larger team and more time may be needed.) The team members characteristically have had previous service as Strategy Forum Facilitators or Systems Appraisers. Whenever possible, AQIP will include the leader or another member of the organization’s last System Appraisal team as one of the participating AQIP Reviewers.

Components of the Quality Checkup

Each Quality Checkup consists of a series of five components blended into a single coherent on-site event.

1. Systems Portfolio Clarification and Verification
2. Systems Appraisal Follow-Up
3. Accreditation Issues Follow-Up
4. Federal Compliance Review
5. Organizational Quality Commitment

1. Systems Portfolio Clarification and Verification

The goal of this component is to affirm the accuracy of the organization’s Systems Portfolio and verify information included in the portfolio that the last Systems Appraisal has identified as needing clarification or verification.

Before the visit, the team will identify a set of issues or items in the current Systems Portfolio that it would like to clarify or verify and identify a potential strategy (whom to interview, what to ask, what records to inspect, etc.) that would serve to resolve these questions. The institution must provide venues (meetings with appropriate personnel or review of documentation) by which it can explain and/or substantiate each issue for the team. The major goal of this component of the visit would be to provide the organization with information that will enable it to modify its Systems Portfolio to be a more effective, more credible, better understood presentation of the organization’s processes and performance results.

2. Systems Appraisal Follow-Up

The goal of this component is to examine the actions the organization has taken to capitalize on the strategic issues and opportunities for improvement identified by the last Systems Appraisal, as evidence of the institution’s continuing commitment to continuous quality improvement.

To prepare, the organization should provide, and the team should review, documented evidence of what the institution has done with its Systems Appraisal Feedback.

This component could involve a formal review, with organizational leaders, of the Strategic Issues Analysis received by the organization as part of its last Systems Appraisal. Its goal is to make certain that the organization has understood all issues raised by the Strategic Issues Analysis and to understand and confirm the strategy adopted by the organization in order to capitalize on the advice provided to it via the Systems Appraisal.

The report created by this segment of the Quality Checkup could be a supplement to the Strategic Issues Analysis that serves to both inform and reassure the organization and AQIP

that they will both enter the Reaffirmation of Accreditation review with a full understanding of the organization's strategy for advancing its quality improvement initiative.

The visiting team will:

Review extended-campus operations by confirming that facilities and operations at extended-campus operations (off-campus sites and distance education) operated by the institution meet Commission expectations.

Review the Institutional Profile using information submitted annually to the Commission by every institution, the team will examine the accuracy of the institutional Profile and its alignment with the institution's Statement of Affiliation Status (SAS). This will be accomplished through meetings between the team and institutional leaders responsible for providing accurate information for these Commission documents.

Review the Stakeholder Comment and Complaints process by examining the institution's systems for encouraging, analyzing, and profiting from comments and complaints from students, the public, and other stakeholders in the institution. (This review also serves to meet a Federal Compliance requirement.) The team will review, with responsible institutional employees, institutional policies, processes, practices, and experiences related to student and other stakeholder complaints. Review includes documentary evidence (complaint logs, database reports) of actual complaints and actions taken as a result.

In meetings with organizational leaders, the team will discuss any issues related to Commission policy IV.B.4, Organizational Records of Student Complaints (which is described in detail in the *Handbook of Accreditation*, section 8.2-4) and review a description of the organization's processes for ensuring adherence to Commission goals and expectations in soliciting third-party comment in relation to accreditation processes (see *Handbook of Accreditation*, 5.4-5 for details.)

The institution's AQIP Systems Portfolio ought to already describe its processes for stimulating, analyzing, and acting on student complaints in response to questions 3P6 and 3P7, and should present performance data on these processes in response to questions 3R1 - 5. The report provided in advance of the AQIP Quality Checkup should summarize and expand upon this section of the Systems Portfolio, and provide an opportunity for the institution and evaluator(s) to explore potential improvements to the institution's current approaches for deriving improvement information from complaints.

Review Off-Campus Sites either in person by team members (prior to, during, or subsequent to on-campus visit) or via meeting(s) including facilities and operation with those responsible for off-campus operational quality control.

3. Accreditation Issues Follow-Up

If a Systems Appraisal or another mechanism has identified potential accreditation issues, this component will review institutional evidence to determine whether uncertain Criteria and Core Components identified in the Systems Portfolio's Accreditation Issues Analysis or elsewhere have been met. If they have not, this component will alert the organization to areas that need attention before Reaffirmation of Accreditation. This will be accomplished through the team's discussion with institutional administrators, faculty, staff, board members, and students (individually or in groups).

If the organization believes that it has addressed and solved issues raised by the Accreditation Issues Analysis, it may provide to AQIP, before the Quality Checkup, written documentation of its actions. This documentation will be shared with the team, and, if persuasive, may eliminate items from the agenda that require on-site review and discussion.

The report created by this segment of the Quality Checkup could be a supplement to the Accreditation Issues Analysis that serves to both inform and reassure the organization and AQIP that they will both enter the Reaffirmation of Accreditation review with a full understanding of any remaining issues and required evidence.

4. Federal Compliance Review

The Quality Checkup team needs to verify that the institution has met the expectations of the Commission's Federal Compliance Program. This is a small but important part of the visit, unlikely to be a problem for most institutions. If a problem becomes apparent, the team and institution together need to identify what remediation is required to meet Federal Compliance Program requirements.

This component verifies:

- The organization's default rate, if any, and its plans for reducing default.
- Title IV compliance
- Commission policy 1.C.7, *Credits, Program Length, and Tuition*
- Commission policy IV.B.2, *Advertising and Recruitment Materials*
- Commission policy III.A.1, *Professional Accreditation*, or III.A.3, *Requirements of Organizations Holding Dual Institutional Accreditation*.
- Commission policy IV.B.4, Organizational Records of Student Complaints

Verification is accomplished through the team's review of evidence pertaining to each compliance issue, with appropriate institutional leaders present to answer questions or clarify the interpretation of information.

The Commission expects that its affiliated organizations comply if required with the Title IV requirements of the Higher Education Reauthorization Act as amended in 1998. Details of these requirements and the rationale for them are described in the *Handbook of Accreditation*, section 8.2.)

5. Organizational Quality Commitment

The visiting team will have a variety of occasions to interact with personnel from the organization. They should use these opportunities to assess the strength and direction of the organization's commitment to systematic quality improvement.

Clarification of AQIP and Commission accreditation responsibilities and expectations, and assurance of continuing organizational quality improvement commitment is verified through:

- Meetings with the institution's quality steering council or its equivalent.
- Meetings with current and past Action Project team leaders and members.
- Open meetings with institutional personnel groups: faculty, staff, administrators (e.g., program and department chairs) to: (1) present basic information about AQIP and Commission expectations; (2) learn about institutional activities and involvement of employees in quality initiatives; and (3) answer any questions posed by institutional constituents.

The result of this segment of the Quality Checkup could be a commentary, by the team, on the strength and momentum of the organization's commitment to AQIP, and suggestions on how the organization might act to improve that commitment.

The Criteria for Accreditation and the Quality Checkup

A Quality Checkup is a *formative* evaluation activity designed to help the institution accelerate its continuous improvement journey. Quality Checkups are not designed to determine, by themselves, whether institutions "pass" or "fail" accreditation standards. The team is responsible for helping the institution discover where and how to invest its energies in the future for maximum payback. If there are any gaps in the evidence that the institution meets the *Criteria for Accreditation*, the team must alert the institution to this concern and help it identify strategies that can remedy the problem. However, the team is **not** charged with making an accreditation recommendation, although its findings will feed into a formal reaffirmation review and recommendation within the next two years. It is critical that the team and institution understand the following general principles, assumptions, beliefs, and values differentiating Quality

Checkups from other types of accreditation visits:

- The Criteria for Accreditation's broad expectations simultaneously articulate the Higher Learning Commission's minimum requirements for all of the institutions it accredits *and* highlight the aspirations through which each institution can strive for and achieve ever higher levels of performance. It is the job of the team to fairly interpret where the line between minimum **compliance** and continuous **improvement** occurs, using norms similar to those used for all other HLC-accredited institutions. Identifying an issue as **compliance** requires the team to be clear and persuasive in its reasoning that the issue threatens the institution's continued accreditability.
- The team should be careful to separate **compliance** issues (work on a particular issue will prevent future non-compliance that is likely if no action is taken) from **improvement** issues (work on a particular issue will benefit the institution and those it serves). Issues are more likely to fall under **improvement** than **compliance**, so identifying an issue as **compliance** requires clear and persuasive reasoning from the team.
- AQIP admits only accredited institutions in good standing. Compliance review should assume that institutions will likely continue to be in compliance, that institutions want to remain in compliance, and that the Commission's intention is to work with institutions to prevent any possibility that they will fall out of compliance. Identifying that an institution may be out of compliance puts a high burden on the team to demonstrate why its conclusion is valid.
- The Quality Checkup team should begin with a confident assumption that the institution continues to meet the requirements of the *Criteria for Accreditation* and Core Components. (If the Appraisal team identified specific gaps in the evidence, the Quality Checkup will examine the evidence that the institution presents to remove these disparities. This review should be conducted with confidence that the institution wants to demonstrate it meets the *Criteria*, probably already does meet the *Criteria*, and will quickly take any action required if there is a real breach in its compliance with the *Criteria*.)
- The last *Systems Appraisal* established that a pattern of evidence existed concerning the *Criteria for Accreditation*, so the Quality Checkup team is not visiting the campus to do a *de novo* review of the *Criteria*. The team should assume that the *Systems Appraisal* is accurate; the team's task is not to begin afresh, but to continue from the *Systems Appraisal*, either to verify that apparent gaps have been explained or closed, and to clarify the least clear of those points upon which the *Appraisal's* affirmation of compliance was based. However, the team must confirm, through sampling and spot-checking, that what the institution says it does in its *Systems Portfolio* is what it actually does in practice. In doing so, the Quality Checkup team will *verify* that it sees the same pattern of evidence in the institution's systems and operations and *clarify* issues that the *Systems Appraisal* found muddy.
- A vital college or university will *never* be satisfied with its current performance, and will wish to do more than simply "comply" with the *Criteria* and Core Components. In helping an institution set ambitious aspirations and "stretch" goals, the Quality Checkup team can suggest which *Criteria* and Core Components deserve additional institutional focus and how additional effort directed toward these issues could strengthen and benefit the institution. The team, however, must make clear that these goals are inspired by continuous quality improvement, not mere **compliance** with accreditation standards. More importantly, the team must make certain that its encouraging an institution to strive for higher levels of performance is not confused, by anyone, with an institutional failure to comply with accreditation requirements.
- If, after examining institutional evidence relating to gaps related to compliance identified in the last *Systems Appraisal*, the team believes the gaps persist, it should identify the specific areas where institutional action is necessary to assure evidence of compliance at the next scheduled Reaffirmation of Accreditation.

- If, in the team's opinion, institutional actions that would eliminate such gaps cannot be accomplished before the scheduled Reaffirmation, the team should call AQIP immediately, during the visit. It may be necessary to counsel the institution to withdraw from AQIP immediately, or it may be necessary for the Commission to take other action to further assess the situation if it imperils the institution's continued accreditability. Issues identified in such situations must rise to the level of making continued accreditation unjustified (i.e., must be more serious and more potentially damaging than conditions at the other 950+ HLC-accredited institutions in good standing). Identifying potential non-compliance should never be used simply to signal a need for institutional attention to an area, or to identify an opportunity for improvement.

Climate for Quality Checkups

The team will visit with various groups of people from the institution to talk through critical topics — leadership, planning, institutional performance evaluation (including assessment of learning), and others — primarily by asking probing questions, listening critically to how people respond, and following up with questions that cut to core institution issues, assumptions, and values of the institution. The questions posed will be serious ones, and it is likely that those participating in these discussions will have passionate, sometimes opposing views on the issues raised. What is critical is that a climate be established and maintained throughout the visit that focuses on respecting diverse ideas and perspectives, and using them to identify what will best help the institution and its stakeholders.

Later in this Guide is a full discussion of techniques for establishing and maintaining the desired climate and tone in the Quality Checkup — a joint responsibility of the team and the institution.

Scheduling the Quality Checkup Visit

Visits normally occur in either of the two years before an organization's scheduled Reaffirmation of Accreditation. (In addition, an institution may request additional AQIP site visits at any time, either for general consulting or in connection with a formal request for institutional change.)

AQIP will announce (in the spring of each academic year) the schedule of specific time slots during which institutions may request Quality Checkups during the next academic year. Institutions must identify three slots that will work for their visit, indicating first, second, and third preference for the slots identified. To assist AQIP with scheduling, all three time slots identified cannot be within a single fall, winter, or spring. AQIP will strive to honor each institution's preferences. AQIP's target is to schedule all visits and introduce teams and institutions to each other by the end of June, allowing ample time for planning and preparation.

The Quality Checkup permits customization by institutions, so long as the basic purposes and tone of the visit are not compromised. Extensive customization to serve specific institutional needs may require a larger team or longer visit.

The institution visited should to be a major partner in planning the visit — identifying the dialogues it wants to occur, questions it wants the team to raise, and the people who should be present for each conversation.

When it indicates its preferences for a visit time slot, an institution may request that the team include specialists or experts in specific subject areas (e.g., assessment, personnel policies, budgeting, planning, outsourcing) in which it would like advice on its current or prospective improvement strategies.

Planning the Visit Interactively, and Iteratively

The institution and the team have goals they want the visit to achieve, and the agenda should result from a collaborative effort to ensure as many goals as possible can be achieved. Both the institution and team should feel free to suggest sessions (topics to be covered, people to be present, questions to be posed, length, setting), and feel free to react and suggest modifications in each other's ideas. For example, an institution that wants to use the visit to focus institutional

attention on the need to develop more telling measurements of the performance of key processes, on the value of assessing learning, or on any other specific issue might suggest a session devoted to that topic, even suggesting specific questions the team might ask to create the desired discussion. Similarly, the team will want to make sure certain topics get full attention — for example, assessment of student learning; clarity of mission and leadership succession; public feedback, satisfaction and complaints; and the structure, leadership, and dynamics of the institution's quality program. Together, the team and institution may have more topics to talk about seriously than can be crammed into two days, so they need to begin planning early to reach mutually beneficial compromises.

Checkup visits typically begin at noon on Wednesday, end at noon on Friday, and contain a full agenda of sessions in which team members, in pairs, meet with groups from the institution on topics identified in advance by both team and institution. The team decides whether to schedule sessions with institutional groups during and/or after dinner, or whether to use evenings to confer and process the information it has gathered. In many cases, there may be institutional groups not available for meetings during the day, and the team should strive to accommodate these if possible.

In general, the first day of a Checkup will concentrate on analysis and documentation of factual matters, such as USDE compliance, while the succeeding day(s) will concentrate on dialogue with institutional personnel designed to assess and energize the institution's quality initiative.

The first day typically includes a meeting with the leadership (CEO, chief academic officials, vice-presidents, etc.) to review the agenda and strategy for the visit, both its beginning "clarify and verify" components and its concluding "dialogue and departure" components.

A reception, either at the beginning or end of the visit, can set a friendly tone or provide a photo opportunity and reportable event, but such activities must be planned in coordination with the team and with the team's agreements. Another possibility is a reception at the end of day 1, after the team has completed its major data-gathering, confirmation, and documentation responsibilities. There should be a beginning event at the start of visit (typically a meeting with the CEO and major institutional leaders) and a final event at the end of the visit. (Institutions often find it valuable to schedule an "exit interview" with senior leaders near the end of the visit so that the team can share orally its major findings that will appear in its written report. This can be the final event, or a penultimate event, prior to a public "send-off" in which the team shares a public summary of its findings with assembled institutional employees.)

The agenda for planned meetings should be prepared and circulated before the team arrives on campus; there should be no secrecy about the team's activities during the visit, although attendance at specific meetings may be restricted by agreement between the team and institution.

Quality Checkup Team Members

Those conducting Checkup Visits must be Commission Peer Reviewers trained in an understanding of AQIP (with previous experience in one or more other AQIP process, such as a Systems Appraisal, Annual Update, Strategy Forum, Admission panel, or Reaffirmation panel). At least one team member will be from an institution similar in size, location, highest degree, control (public or private), and type (profit or not-for-profit). Team members will be educated and experienced concerning quality improvement principles, techniques, and tools. Team members can be expected to display a positive, respectful, and caring attitude toward the institution and its aspirations, to be friendly, and to be perceptive questioners and good listeners. The atmosphere and tone of the visit should be helpful, not confrontational; its goal is to help the institution continue to be successful, both in achieving its mission and goals and in maintaining its accredited status and participation in AQIP.

AQIP reviewers cannot serve on a Quality Checkup team if they have a bias for or against the institution being visited that makes them incapable of seeing it objectively and giving it fair advice and counsel. Potential visitors must disqualify themselves if they have such bias, if they stand to profit by the success or failure of the institution, if they work or worked for the institution

or another college or university that competes with it directly, or if an immediate family member meets any of these criteria. Visitors must meet all conditions spelled out in the Commission's Confirmation of Objectivity policy, and must agree to keep confidential all information they obtain about the institution as a result of their participation in AQIP processes.

AQIP shall not knowingly assign a person as an evaluator on an institution's Quality Checkup if that evaluator:

- is employed by an organization that competes directly with the institution being visited
- has been—within the last ten years—a compensated consultant, an appointee or employee (e.g. a board member) of the institution, or recently has been a candidate for employment at the institution
- is a graduate of the institution
- has a close personal or familial relationship with persons at the institution or a strong bias regarding the institution
- is a stockholder or board member of the institution
- is a member of an association or professional activity that an impartial person might reasonably conclude would serve as an impediment to rendering an impartial, objective professional judgment regarding the accreditation of an institution.

The Commission relies on the personal and professional integrity of individual team members, expects them to be sensitive to potential conflicts of interest in the peer review process, and assumes they will act accordingly. A member of a Quality Checkup shall not serve the visited institution as a compensated consultant for a period of one year following the team visit. Any team member who violates this policy will be dropped from the evaluator registry. An institution is expected to respect the process by not engaging any team member as a consultant for one year following the evaluation.

Before accepting the invitation to serve as a member of a Quality Checkup, AQIP Reviewers should review the Commission policies on conflict of interest and confidentiality. Acceptance of the invitation to serve on a Quality Checkup team will be recognized by AQIP as the peer reviewer's affirming acceptance of and compliance with this policy.

The institution can suggest what it believes would be desirable areas of expertise or experience for visitors, and can review the names of all potential AQIP Quality Checkup participants to identify any who the institution believes cannot be objective in reviewing institutional performance and AQIP participation.

Visit Preparations

The Quality Checkup team

Team members prepare for the visit by reviewing relevant organizational and AQIP/Commission file materials:

1. Current Systems Portfolio (normally on-line, at the institution's website)
2. Most recent Systems Appraisal (examined before the team is set, to identify whether there are outstanding accreditation issues)
3. Any institutional information provided regarding outstanding accreditation issues in response to the last Systems Appraisal
4. Summary of past and current Action Projects
5. Higher Learning Commission file materials
 - Statement of Affiliation Status

- Institutional History and Organizational Profile (a summary of the information reported by the institution in its Annual Institutional Data Update and the historical and current relationship between the institution and the Commission)
- Annual Institutional Data Update financial information, including audits, budgets, expenditure reports, and financial plans in order to determine whether there are critical financial issues, whether additional financial information is needed, and whether any teams should include specialists in college and university finances
- Last PEAQ site visit report (examined before the team/visit is set, to identify whether there are outstanding accreditation issues)

The team also reviews the *Federal Compliance Material Packet* (see below) prepared and submitted by the institution, and the team consults with the institution's AQIP liaison and other representatives to make necessary arrangements and schedule on-campus sessions.

If, in preparing for the visit, the team believes it needs additional materials from the institution, it should call the institutional contact and request them. If disagreements arise between the team and institution over what additional materials might be needed to prepare for the visit, contact the AQIP staff for instructions.

The Institution

The institution is responsible for preparing and sending to the team members and to AQIP two documents (the *Federal Compliance Material Packet* and the *Quality Program Summary*) as electronic files (Adobe PDF or Microsoft Word), as early as possible before the visit. Early preparation and submission of these documents can dramatically improve the planning of the visit and maximize the benefits to the institution of the time the team spends on campus.

Federal Compliance Material Packet. As early as possible, but no later than four weeks before the visit, the institution must provide one electronic PDF copy of the *Federal Compliance Materials Packet* to AQIP and one to each Quality Checkup team member. The contact information for the Quality Checkup team members will be included on the Evaluation Summary Sheet (ESS) that will be sent to the institution when the team is set. The *Federal Compliance Material Packet* must include a brief report, ideally about 20 pages, along with copies of or links to evidence provided to document the narrative. The report must include:

1. An evaluation of the organization's student loan default rate, if any, and its plans for reducing default. If renewals of eligibility, program audits, or other USDE actions raise significant issues, the organization will need to address those issues and subsequent corrective measures.
2. Evidence of the institution's compliance with Commission policy 1.C.7, *Credits, Program Length, and Tuition* (described in detail in the *Handbook of Accreditation*, 8.2-1 ff). (Copies of or links to evidence may be provided to document the narrative.)
3. A description of any issues related to Commission policy III.A.1, *Professional Accreditation*, or III.A.3, *Requirements of Organizations Holding Dual Institutional Accreditation*. The visitor(s) must verify the institution's reporting of interactions with other accreditors as reported to the Commission and recorded in the Commission's internal Institutional Profile.
4. A review of any issues related to Commission policy IV.B.4, *Organizational Records of Student Complaints* (which is described in detail in the *Handbook of Accreditation*, section 8.2-4).

The institution's AQIP Systems Portfolio may already describe its processes for stimulating, analyzing, and acting on student complaints in response to questions 3P6 and 3P7 and may present performance data on these processes in response to questions 3R1 - 5. The Quality Checkup should review this section of the Systems Portfolio and provide opportunity for the institution and visitor(s) to explore potential improvements to the institution's current approaches for deriving improvement

- information from complaints.
5. A description of the organization's processes for ensuring adherence to Commission goals and expectations in soliciting third-party comment in relation to accreditation processes (see *Handbook of Accreditation*, 5.4-5 for details.)
 6. Copies of documents relevant to Title IV compliance, or clear information listing where those documents might be readily found in organizational files while the Quality Checkup team is on site. (See the *Handbook of Accreditation*, Section 8.2-2 for a listing of typical documents to be made available.)
 7. Samples of the organization's advertising and recruitment materials available for on-site inspection that will enable the visitor(s) to determine the institution's compliance with Commission policy IV.B.2, Advertising and Recruitment Materials, (described in detail in *Handbook of Accreditation*.)

If the *Federal Compliance Material Packet* is well organized, complete, and available to the team at an early date, it will greatly decrease the need for the team to spend time on campus with Federal Compliance Review issues (item 4 in the Quality Checkup goals). In turn, the team and institution will be able to devote more time to the other goals.

Quality Program Summary. In addition to the Compliance Materials Packet, the institution should prepare and send the team and AQIP a brief narrative, no more than 10 pages, describing the current state of the institution's quality program: how it is organized, what the institution has done over the past few years (e.g., created or updated its Systems Portfolio, processed and used the feedback from a Systems Appraisal, launched and completed Action Projects, or any other information that will help the team better understand the institution's commitment to continuous improvement, as expressed in its actions. If the bulk of this material is available on the web, the Quality Program Summary can simply consist of descriptions of web-based resources and links to them. This Summary will be of great help in planning the visit agenda, so the earlier the team has it, the better. It must be received no later than six weeks before the visit begins.

The Summary should reference the web location of the institution's current Systems Portfolio, and briefly highlight how it has changed since the last Systems Appraisal. It may be helpful for the institution to email each team member a PDF file of the current Systems Portfolio.

Institutional costs of Quality Checkup Visits

Pricing for Quality Checkups follows the current schedule for Commission visits – a schedule with fixed prices based on the number of days and the number of visitors available on the Commission Web site. The fees built into this schedule are based on a formula that includes travel, hotel, meal expenses, and honoraria for team members, and Commission overhead. The Commission invoices the institution for the fee, and reimburses team members directly for their documented expenses. No team members should be paid or reimbursed by the institution directly.

The Quality Checkup Report

The Quality Checkup team completes a report of its visit and submits it directly to AQIP within four weeks of the completion of the visit. With the report, the team should send AQIP a copy of the actual agenda followed during the visit, indicating sessions held, focus of each session, and number of participants (and observers, if any) for each session.

In completing this Report, the team must make several choices in relation to several specific goals of Quality Checkup visits:

Portfolio accuracy and clarity

- The team affirms the basic accuracy of the Systems Portfolio as an accurate description of key institutional processes and results, OR
- The team identifies specific problems with the Systems Portfolio and suggests ways in which the institution can work to improve its Systems Portfolio in the future

Commission's five Criteria for Accreditation.

- The team affirms that all five Criteria are being met, OR
- The team identifies specific Criteria that appear not to be documented, and identifies the evidence required to affirm they are met.

Expectations of the Commission's Federal Compliance Program.

- The team affirms that the institution has satisfied the Federal Compliance program, OR
- The team identifies how the institution has not satisfied the Federal Compliance program, and states what remediation is required to satisfy the program requirements.

Institution's commitment to quality improvement and its achievements.

- The team praises and encourages the institution to persist with its current approach(es) to quality improvement, OR
- The team identifies how rethinking or restructuring aspects of the institution's quality improvement program may help the institution focus on and further develop the program to achieve higher levels of institutional performance.

Encouragement and inspiration for higher levels of institutional commitment to, action on, and results from quality improvement.

- The team identifies how focusing attention on one or more Criteria for Accreditation or core components can drive higher levels of institutional aspiration and achievement, AND/OR
- The team identifies how focusing attention on one or more AQIP Categories or Category items can drive higher levels of institutional aspiration and achievement, AND/OR
- The team identifies how focusing further or deeper attention to feedback from the Systems Appraisal can drive higher levels of institutional aspiration and achievement

AQIP sends a copy of the Report to the institution's CEO and the institution's AQIP Liaison as soon as it receives it from the team. The Report becomes part of the Commission's permanent file on the institution, and will be provided to the AQIP Review Panel on Reaffirmation of Accreditation. If the institution wishes to submit a formal response to the report, that response will also become part of the permanent file, attached to the Report. No Commission action is taken on the Report.

Establishing the Right Tone and Climate for a Constructive Quality Checkup

A Quality Checkup should benefit the institution that hosts one. A visit is not intended as a trial, ordeal, or inquisition, but as an opportunity for a team of quality experts to talk seriously with the administrators, faculty, and staff of an institution committed to systematic quality improvement about the progress they are making, the obstacles they are overcoming, and the challenges they face. The visit should leave the institution proud of its achievements, optimistic about its ability to face problems and future challenges, and energized about the work it must tackle next. Checkup Visits are *formative* activities, and helping the institution to **form** positive attitudes and effective strategies are critical outcomes.

Checkup Visits also help **inform** AQIP as it gathers the evidence for its paramount *summative* activity, reaffirmation of each institution's accredited status. Thus, every Quality Checkup team

bears the duty of reporting its findings about the institution (*Is there evidence that it meets the Criteria for Accreditation? Does it meet the expectations of the Commission's Federal Compliance Program? Is it seriously engaged in continuous improvement?*) But these judgments need to be framed and understood, both by the team and the institution, as part of a broader effort to help the institution progress and excel. If a Checkup team finds some serious problems...

If a Checkup Visit team opinion is critical, dire consequences do not follow immediately. The institution will have time to address any concerns identified before the team's report, along with other evidence about the institution, is summative reviewed by the AQIP Panel on Reaffirmation of Accreditation.

Framing Conversations and Questions. Conversations and the questions the team asks to stimulate them are framed by the entire visit context surrounding the session. It is critical that the team and the institution make it clear to everyone that each session is part of a learning process – not an exercise in judging.

In *Change your Questions, Change Your Life* (San Francisco: Berrett-Koehler, 2004), Marilee G. Adams emphasizes that our mindsets frame how we see the world – how we interact with others and how we interpret facts. Adams highlights two mindsets that guide inquiry: the **learner** and the **judger**.

Learners seek to be responsive to life's circumstances, to understand the past as a way of guiding our actions in the future. They are optimistic, seeing new possibilities and a hopeful future. They radiate optimism, possibilities, and hope.

Judgers are reactive, focusing on the past, not to learn, but to assign praise and blame. They worry more about establishing responsibility for problems than on finding solutions. They tend to believe they know the answers already.

Adams contrasts the mindsets of **Judgers** and **Learners**:

Learner

Accepting (of self and others)
Responsive and thoughtful
Values not knowing
Responsibility
Flexible and adaptive
Both-and thinking
Inquisitive
Considers others' perspectives
Questions assumptions
Questions and curiosity
Possibilities seen as unlimited
Primary mood: curiosity

Judger

Judgmental (of self and others)
Reactive and automatic
Know it already
Blame
Inflexible and rigid
Either-or thinking
Self-righteous
Personal perspectives dominate
Defends assumptions
Statements and opinions
Possibilities see as limited
Primary mood: protective

Adams asserts that we all possess both the **learner** and **judger** mindsets, but have the power to choose which one dominates our thinking at any given moment. Moreover, mindset frames behavior, so we all have the power to choose how we want to relate to others at any given moment.

AQIP is passionate about making its Quality Checkups constructive, learning experiences. To do so, both the team and the members of the institution need to remain sensitive to the

differences between learning and judging, and to interact in ways that create the productive climate both seek.

Tips about Quality Checkups

For everyone involved:

Use the AQIP Forum on Quality Checkups to share ideas. On its website, AQIP maintains a series of discussion groups on topics related to continuous quality improvement in higher education. These can be reached easily from the AQIP Forums link on the AQIP website at www.AQIP.org. There is a forum devoted to the Quality Checkup as well as forums on other Academic Quality Improvement Program processes, and registration is free and simple. If you have questions about how others' Quality Checkup visits are working, innovative ideas that you believe will improve the visits, documents you've used in planning your visit, or ideas for improving this Quality Checkup Guide, use this forum to share your ideas with other Quality Checkup team members, organizations hosting Quality Checkup visits, and the AQIP staff. Registered AQIP Forum participants can upload documents that others can download, so the Forums provide a rich source of readings and helpful materials.

Don't waste time. The two days of a Quality Checkup are intensive, and there is no time for tours, receptions, or other events that don't contribute directly to the visit's purposes for the institution and team. In formulating questions, think about the purpose of each question — and if the purpose isn't clear, replace the question with a more valuable one. Good questions can :

- gather information and understand its importance
- capture and share learning
- nurture innovation
- emphasize urgency and push for closure

Similarly, every session idea should be put to the same scrutiny: if it doesn't seem to contribute directly to achieving an important goal of the visit, replace it with a session that will.

Work collaboratively (i.e., the team and the institutions) to decide:

- Logistics for visiting team (lodging, transportation, schedules)
- Designation of key contact at institution (and backup), and which team person to contact for specific topics (e.g., logistics, agenda, advance materials)
- Selection of sessions and activities that maximize use of the team and value from the team's 2 days on campus
- Who should be present at each session and what topics/issues/questions should be discussed
- How many people the team should engage at a time
- How should the team should engage students, faculty, and staff
- Whether each session should be open to observers (institutional faculty, staff, students, community people, etc.
- How to arrange and use observers effectively
- Whether the presence of observers will decrease the involvement of the team with those with whom it is talking
- The "down time" or break time the team needs to confer and keep on track
- The "slack" time needed in case things get off schedule
- The best use of meal time
- Whether "campus tour" activities are necessary, meaningful, and useful,

- How the team can best understand how the institution exercises effective quality control over its off-campus sites and distance education

For the team:

Getting Started: Breaking the ice. Invite people to describe or narrate something they know well or relate the discussion to your own situation.

Open vs. Closed Questions. Questions that begin with **why** and **how** invite people to explore, analyze, and explain organizational processes and performance. They open up a conversation, often allowing it to go in new, productive directions. By contrast, questions that demand **yes** or **no** answers, and questions (often beginning with **when**, **where**, **how often**, and **how many**) that require specific answers (often from a limited range of choices) tend to close a conversation, inhibiting the participants. Favor open questions.

Inquire Affirmatively. Instead of focusing on what has gone wrong, ask questions that highlight what has gone well, what can be emulated or used to spur other improvements or innovations. Doing this will guide the group to seek *what might be* rather than *what is not*. The team's questions can help the institution focus on improvement and continuous learning instead of complaining and venting.

Make the purpose of faultfinding questions clear. If you must ask about something that went wrong, an unsuccessful Action Project or a strategic failure, make it clear that you are not seeking a scapegoat. The goal, again, should be for both the team and the institution to learn from the conversation and from past mistakes. In a quality framework, understanding the systemic factors that led to poor performance is more valuable than assigning blame.

Share key questions in advance. Since the visit is structured around asking the right questions, the team may wish to alert the institution to some of the basic questions it will pose on campus. This could assist in structuring the team's final feedback to the campus and preparing those present—who more than likely will meet with the team later—for the approach the team will use and areas it would like to cover.

Empathize with your audience. Think about how others will hear a question before you ask it. Michael Marquardt, *Leading With Questions: How Leaders Find the Right Solutions by Knowing What to Ask* (San Francisco: Jossey-Bass, 2005), p. 83, warns, "Even if we have a sincere desire to learn, old habits die hard. As leaders, we need to question our questions. It is very easy when questioning to let our own values, preferences, and biases leak into what we are asking. We must develop the attitude and skills to notice, analyze, and revise our questions. Before we ask a question, we should preview it in our minds from the other person's point of view to determine whether the question as phrased will be truly helpful. If you are unsure how a question might be taken, be frank and say so. For example, you might say, "I'm not sure how to ask this question, but...?" This is a way of defusing any issue that might arise from the way you ask a difficult question.

Settle federal compliance issues quickly. If the institution provides helpful materials, federal compliance issues can often be analyzed — and confirmed — before arrival on campus. Don't hesitate to call the institution for needed information or evidence if doing so will help settle these issues without devoting unnecessary time to them on campus. Use as little on campus time as possible for these matters.

Address any accreditation issues early. If the institution's Systems Appraisal highlighted accreditation-related issues, deal with these during the first day (afternoon and morning) on campus; don't let them hang, like thunderclouds, over the rest of the visit. Similarly, verifying and clarifying issues in the Systems Portfolio fits best in the first half of a Quality Checkup. Clarifying and settling these issues early will reduce the institution's anxiety, and create a better climate for serious, probing conversations on the strategies that can truly transform the institution.

Leave a gap in the schedule for the unforeseen. Leaving 60-90 minutes unscheduled midway through the final morning allows for flexibility. If a topic arises the team would like to pursue, the availability of an open slot allows the institution to assemble a group for conversation with the team. If unneeded for a session, the time allows the team to confer before the exit sessions.

For the institution:

Publicize the agenda. Carefully planning and communicating the visit's agenda is an important step in making the process a success. Keeping in mind time constraints, be sure to include all of those who should interact with the team, as well as those who ought to be present for the initial and final meetings.

Establish the focus and tone for a session. Sessions will have different purposes and participants, and require different approaches. For example, to put the focus on quality, an institution may want to plan an opening event with all of those involved in AQIP and improvement from across the campus. Such a session could establish the tone for the visit and give the team an opportunity to explain its purpose in positive terms.

Make sure everyone knows how the visit fits into AQIP. Prepare for the visit by making clear to the campus community its purposes and its significance within the AQIP framework, as well as how it differs from a traditional visit. (This may require some additional education about AQIP and/or continuous improvement). This is an occasion to focus on revitalizing interest in improvement. How you initiate the tone will determine your campus' response to its visitors and will set the stage for productive discussions. A positive climate will be supported by an environment that fosters discussion.

Use space and setting to create the appropriate climate and environment for dialogue.

Even if the team needs to be "on stage" at the beginning and end of the visit, for the most part conversations work best in comfortable settings that are conducive to interaction: circles rather than rows, hollow square conferences rather than classrooms. Lecture settings evoke lecturing behaviors.

Model the way for the visit. Handle tough questions without being defensive or reactive. If a question the team poses seems unnecessarily judgmental or hostile, stop and ask, "Can you help me understand what you want to achieve with that question? Could you rephrase it so that we could better see how responding will help us – and you – appreciate what we all could learn from discussing it?"

Complain if things don't go constructively. If the tone of the visit turns judgmental or confrontational, a leader of the institution should privately consult with the team and make all team members aware of how they are being perceived. This can be done constructively and non-critically, reminding everyone what the shared goals of the visit are, and examining how the tone and climate may be distracting from the purpose. An alternative possibility is to take a few moments out of a discussion to conduct a Plus/Delta that could help get the proper tone re-established.

Make sure everyone stays available. Even at the early stages of planning the visit, it is essential that the key institutional players — president, vice presidents, deans, and faculty and staff leaders — reserve the dates of the visit and plan to be on campus. Later, as specific sessions take shape, you may be able to let these leaders schedule other activities, but be careful not to let them take on other commitments before you decide whether they are needed for specific Quality Checkup sessions.

Include students and community people in sessions. The stakeholders of the institution, those for whom it produces its programs and services, can help keep conversations stimulating, and will benefit (both themselves and the institution) by seeing firsthand how seriously committed their institution is to continuous improvement. Members of the institution's board and, for state institutions, of state oversight boards, may also learn to better appreciate the institution from participation in the visit.

Some sample questions to stimulate discussion at Quality Checkup sessions. Ultimately,

it is the responsibility of the team and institution, working together, to decide what sessions to hold, what conversations to stimulate, and what questions to ask to provoke discussion. The following sample questions may be useful to stimulate thinking through the specific agenda for the visit.

About **mission, values, and vision**

1. How well do the mission statements present the organization as something employees, students, stakeholders, and the community should identify with and admire?
2. How effectively does the institution use its mission statements as rallying points, uniting people so they feel satisfaction in working toward a common goal?
3. How do the mission statements focus on quality, continuous improvement, and stakeholder satisfaction?
4. How well do the mission statements stress the needs of employees with respect to their long-term value to the organization as a critical resource?
5. Do the mission statements take a long-term view, committing the organization to developing new programs and services for the future, and putting resources into training, research, and education?
6. Do they take into account all those concerned with the organization's ultimate survival, such as stakeholders, vendors, funders, owners, and employees?
7. Will organizational purposes, as established in the mission statement, remain constant despite change in top management?

About **collegiality and consensus decision-making**

1. Collegiality derives from the word colleague, a member of a group of people united in working toward a common purpose. Are the institution's common purposes clear enough to encourage collegiality?
2. Consensus refers to decisions or opinions reached by a group as a whole, and can occur only when the group is already composed of colleagues united in working toward a common purpose. How does the institution place value on and strive for consensus in decision-making?

About **integrity and ethics**

1. How have you identified the core values that define your identity as an institution?
2. How have you translated these values into behaviors that people can observe, emulate, avoid, and evaluate?
3. How do your values shape and inform the decisions you make?

About **assessment of student learning**

1. How are your stated student learning outcomes appropriate to your mission, programs, and degrees?
2. What evidence do you have that students achieve your stated learning outcomes?
3. In what ways do you analyze and use evidence of student learning?
4. How do you ensure shared responsibility for assessment of student learning?
5. How do you evaluate and improve the effectiveness of assessment of student learning efforts?

About **systematic quality improvement**

1. Who is in charge of your quality initiative?

2. What power and influence does your quality initiative have?
3. How do you make sure you have the resources your quality initiative requires?
4. What do your people know about your quality initiative?
5. What arouses your quality initiative to action?
6. How does your quality initiative link with your other efforts?
7. How satisfied are you that your quality initiative is working as well as it could?

As teams and institutions generate additional and improved questions, they should use the AQIP Forum to share them with other teams and institutions.

Do you have questions this Guide doesn't answer? Post them on the AQIP Forum on Quality Checkups or send them to AQIP (sspangehl@hlcommission.org and chill@hlcommission.org). Watch the AQIP Forum for answers to questions, and for announcements of AQIP-hosted conference calls and web chats that provide additional opportunities to get additional information and ideas about Quality Checkups. Any updates or corrections to this Guide can be downloaded from the AQIP Forum on Quality Checkups. AQIP Forums are intended to stimulate thinking and action in quality improvement in higher education, so suggest ideas for additional forums to sspangehl@hlcommission.org.